



Harvest and Hold Shellfish Collection Protocols

Collection:

- Samples must be collected from the same beach. Test results are only valid for shellfish collected the immediate area of the submitted samples.
- Confirm the species identify of all shellfish in the sample.
- Shellfish can be fresh in the shell, shucked or frozen. If shellfish are not in the shell, please identify the steps you took to process your shellfish.
- Place shellfish in a labeled waterproof plastic bag.
 - Please include the date collected and location (beach name or GPS point if possible)
- Do not mix species (only one species per bag).

Number of organisms to submit per sample:

Butter Clams	6-10
Little Neck Clams	15-25
Cockles	8-12
Horse Clams	6
Blue Mussels	60-110
California Mussels	6-8
Oysters	10-12
Rock Scallops	6
Geoduck	6

***A minimum of 100 grams of meat is required per sample. Shellfish samples must include at least 6 individuals from the same species, regardless of shellfish size.**

Handling:

- **Do not hold shellfish in seawater or freshwater at any time after collection.** However, rinsing with seawater or freshwater to remove sediment is recommended.
- While you wait for results, hold your shellfish in a container in the fridge with a damp towel over the top.
- If your samples must be held prior to submitting them for testing, please freeze. Putrid or decomposed samples will not be processed.

Shellfish samples are tested at the Southeast Alaska Tribal Ocean Research (SEATOR) Lab in Sitka, Alaska. KANA is not a regulatory agency and the consumption of wild shellfish in Alaska is considered 'dig at your own risk'. Commercially harvested shellfish are regulated by the Department of Environmental Conservation and are considered safe for consumption.

Sample Submission:

- Contact a KANA Environmental Staff member when you are planning to drop off or ship samples to Kodiak.
 - environmental@kodiakhealthcare.org
- Samples delivered in person must be submitted in a waterproof container such as a sealed plastic bag.

If shipping the samples to Kodiak:

- Samples delivered via Island Air must be in a sealable box or other container for shipping.
- Labels the container with “Keep Chilled” or keep cool using ice packs. **Leaking samples will not be accepted.**

Test Results:

- Test results are typically available within 48 hours after lab in Sitka receives samples.
- Samples delivered to Sitka during the weekend will be processed the following Monday.
- KANA staff will call you with the results as soon as we receive them.

Ship to:

ATTN: KANA Environmental Staff
KANA
3449 E Rezanof Dr.
Kodiak, AK 99615

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Sitka Tribe of Alaska Environmental Research Lab
 429 Katlian St, Sitka AK 99835



SHELLFISH MARINE BIOTOXIN SAMPLE FORM

LAB USE ONLY	
STAERL Shellfish ID #s:	
<input type="checkbox"/>	FILTERS # included: _____

DATE COLLECTED ____/____/____	DATE SUBMITTED ____/____/____	ORGANIZATION KANA - Harvest and Hold
COLLECTOR _____		PHONE (____) _____ - _____
SAMPLE SITE (location, beach) _____		EMAIL environmental@kodiakhealthcare.org
Lat/Long (Decimal Degrees) _____		SECONDARY EMAIL _____

SPECIES INCLUDED:		TOXIN TESTS:	ALGAL OBSERVATIONS:
<input type="checkbox"/> (CB) BUTTER CLAMS	<input type="checkbox"/> (OP) PACIFIC OYSTERS	<input checked="" type="checkbox"/> (PSP) SAXITOXIN	<input type="checkbox"/> ALEXANDRIUM Present
<input type="checkbox"/> (CL) LITTLENECK CLAMS	<input type="checkbox"/> (CH) HORSE CLAMS	<input type="checkbox"/> (ASP) DOMOIC ACID	<input type="checkbox"/> PSEUDO -NITZSCHIA Bloom
<input type="checkbox"/> (MB) BLUE MUSSELS	<input type="checkbox"/> (SR) ROCK SCALLOPS		
<input type="checkbox"/> (MC) CALIFORNIA MUSSELS	<input type="checkbox"/> (CG) GEODUCK		
<input type="checkbox"/> (CR) RAZOR CLAMS	<input type="checkbox"/> (CC) COCKLES		
<input type="checkbox"/> (XX) OTHER _____			

SAMPLE COMMENTS: Shellfish count (per species): _____
 (shellfish sent without shells require a count/estimate of individuals included in sample) Weight (optional): _____

LAB USE ONLY		
Date samples logged (shellfish and filter):	Filter STAERL ID (if included)	Filter collection date
Time:		
Staff initials:		

Please notify the lab when sending samples using the contact information below. Include shipping date, shipping method, and tracking information if available.

Primary: seator@sitkatriben-sn.gov
 907-966-9650 (leave message)

Secondary: Kari Lanphier 907-747-7111



HARVEST AND HOLD RELEASE OF INFORMATION

Name: _____

Phone: _____

Email: _____

- I acknowledge that Kodiak Area Native Association (KANA) is *not* a regulatory agency and the consumption of wild shellfish in Alaska is considered 'dig at your own risk'.
- I acknowledge that the general location of my shellfish samples will be shared when levels of Paralytic Shellfish Toxins warrant a public notice.
- YES** **NO** I would like to redact my name from shared datasets.
- YES** **NO** I would like to subscribe to KANA's bi-weekly email report that contains testing results from around Kodiak Island. My email will not be utilized for any other purpose.

Signature: _____ Date: _____

The following agreement applies to all current and future shellfish samples submitted by the harvester to KANA