White-nose Syndrome: How Southern States can be Prepared

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Abstract: White-Nose Syndrome (WNS) is an emerging disease that has killed an estimated 1 million bats. Originally detected in caves in central New York, after only 3 years the disease spread southward into Virginia and had the potential to significantly affect southeastern bat populations, including the largest hibernating colonies of the federally endangered Indiana (Myotis sodalis) and gray bats (Myotis grisescens). Given documented mortality rates approaching 100% in many hibernation roosts (caves and mines) and suspected long-term negative impacts to survival and reproduction of surviving bats, it is imperative the southeastern and mid-Atlantic states take pro-active measures. The Southeastern Bat Diversity Network (SBDN) is comprised of researchers, bat biologists, land managers, and others interested in the conservation of bats that occur in the southeastern United States. SBDN facilitates communication within the region and identifies priorities and needs specific to the southeastern United States and develops and implements programs that address regional bat conservation needs. In states currently beyond the WNS affected area, SBDN recommends state managers take an active and coordinated role. Managers should stay current on all advisories, protocols, and opportunities to contribute, consulting the U.S. Fish and Wildlife WNS webpage (www.fws.gov/northeast/white_nose.html) regularly for up-to-date official protocols. Managers should also participate in coordinated survey efforts through incorporation of WNS data collection requests and protocols into on-going field work. Important field work examples include collecting wing-damage index data from all captured bats, establishing acoustic transect protocols, and long-term maternity colony monitoring at selected sites. Finally, managers should contribute current bat handling and survey data to the SBDN/NEBWG bat database to allow regional assessment of parameters relevant to spread of WNS. The amount of mortality and the rapid spread associated with WNS ne

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