

Estimating Hypoxic Volume in the Chesapeake Bay Using Two Continuously Sampled Oxygen Profiles



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Motivation

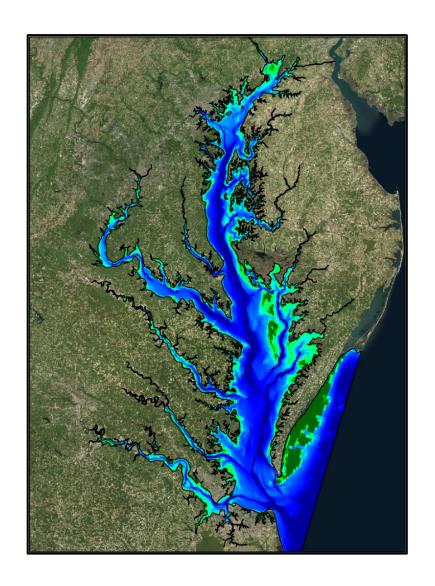
- Hypoxia has numerous detrimental effects on biota
- Measuring dissolved oxygen concentration is straightforward with modern instruments
 - Quantifying the amount of hypoxia is more difficult (hypoxic volume, HV)
- Management actions focus on reducing hypoxia

Objective

 Demonstrate that hypoxia is strongly constrained by the Bay geometry and daily hypoxic volume can be estimated using only two to three vertical profilers

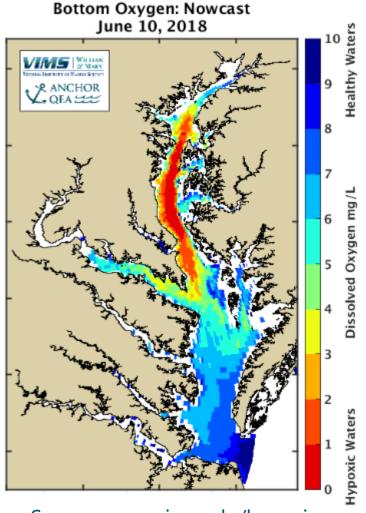
Outline

- Mainstem hypoxia
- Methods for a simple "geometric" hypoxic volume calculation
- Hypoxic volume estimates
- Interannual severity of hypoxia
- Conclusions



Mainstem Hypoxia

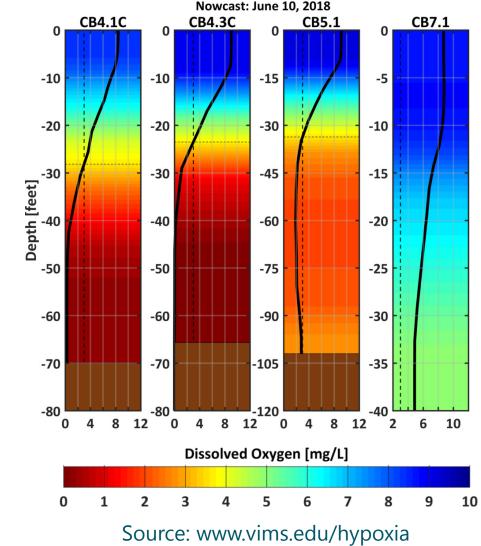
- Chesapeake Bay has a deeper region behind a sill
- Hypoxia occurs annually in the deeper portion of the mainstem
- Begins near the bed and fills the mainstem from the bottom up



Source: www.vims.edu/hypoxia See Hagy et al. 2004; Officer et al. 1984

Mainstem Hypoxia

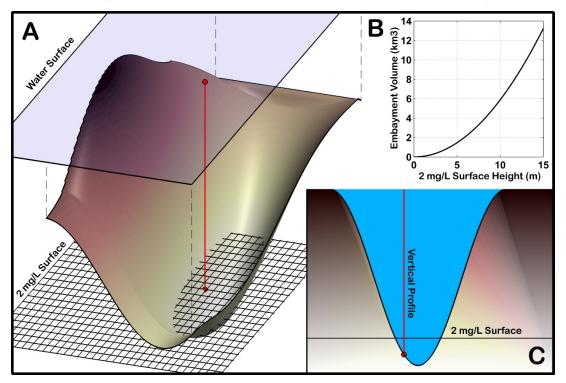
- Extent is estimated by interpolating vertical profiles
 - Cruise-based profiles span multiple days
 - Collected twice monthly
- Uncertainty from twice-monthly cruises can be as large as from interpolation
- Annual metrics possibly biased by cruise dates



See Bever et al. 2013

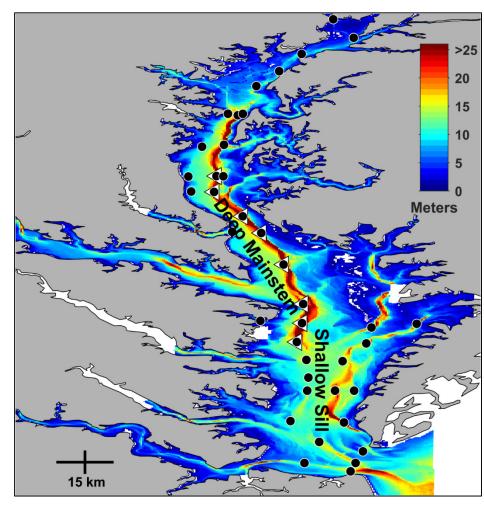
Geometric Hypoxic Volume

- Hypoxic water is constrained by the geometry
- Determine embayment volume above the deepest depth
- Height of 2 mg/L surface correlates to hypoxic volume



Geometric Hypoxic Volume

- Vertical profiles based on long-term regional monitoring stations
- Geometric HV calculated from individual profiles
- Individual HVs are averaged to estimate Bay-wide HV
- Trailing mean smooths short-duration variability



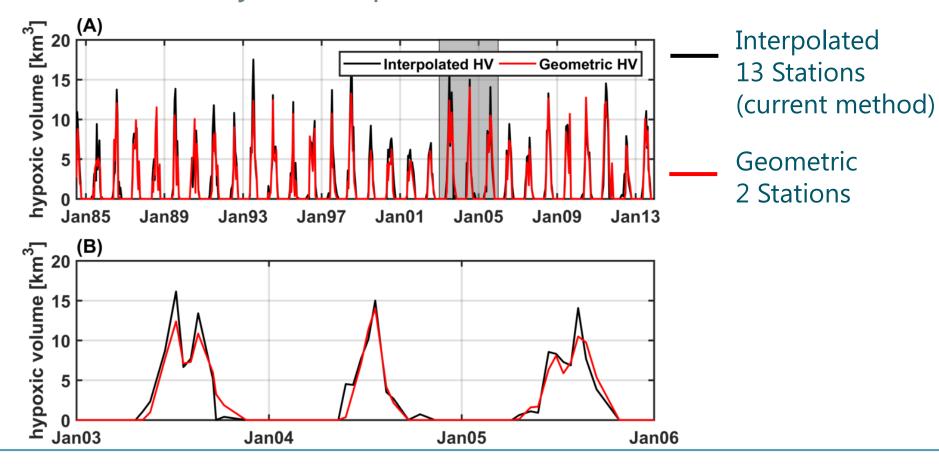
Regional Monitoring Station

Hypoxic Volume Calculations

- Interpolated and Geometric HVs
 - Interpolated HV (IHV) calculated using 13 and two stations
 - Geometric HV (GHV) calculated using combinations of one to eight stations
- Long-term regional-monitoring cruise-based data
 - 1985-2013
 - Twice monthly, cruises span multiple days
- 3-D numerical model results
 - 1985-2005
 - Provides a "true" reference daily 3-D HV from 3-D grid cells
 - Vertical profiles are averaged over 24 hours and used to estimate a continuous daily HV

Geometric vs. Interpolated (Cruise-based Data)

Geometric HV reproduces Interpolated HV to within uncertainty in Interpolated HV



Geometric vs. Interpolated (Cruise-based Data)

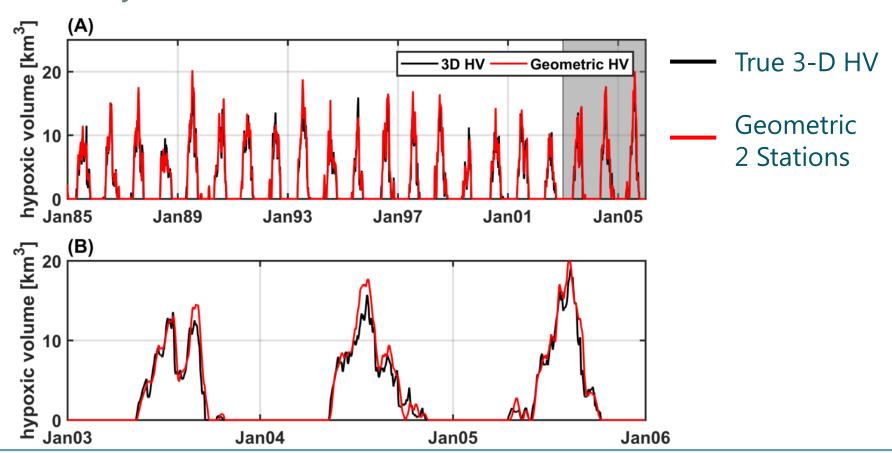
Geometric HV reproduces Interpolated HV to within uncertainty in Interpolated HV

How Well Geometric HV Reproduces Interpolated (13 stations)

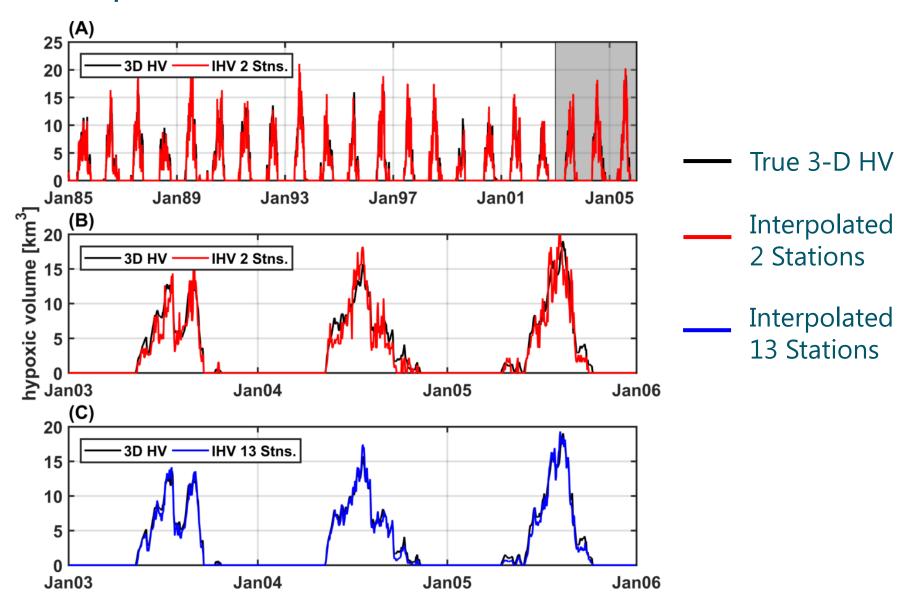
Number of Stations	Total RMSD [km³]	r²				Stations	Used			
1	2.19	0.73	CB5.2							
2	1.68	0.85	CB5.1	CB5.4						
3	1.40	0.91	CB4.2C	CB5.2	CB5.4					
4	1.24	0.90	CB4.2C	CB5.1	CB5.2	CB5.4				
5	1.29	0.91	CB4.2C	CB5.1	CB5.2	CB5.3	CB5.4			
6	1.25	0.91	CB4.2C	CB4.3C	CB5.1	CB5.2	CB5.3	CB5.4		
7	1.30	0.92	CB4.2C	CB4.3C	CB5.1	CB5.2	CB5.3	CB5.4	CB5.5	
8	1.30	0.91	CB4.2C	CB4.3C	CB4.4	CB5.1	CB5.2	CB5.3	CB5.4	CB5.5

Geometric vs. True 3-D HV (Model-based)

 Geometric HV reproduces daily true 3-D HV using only two stations



Interpolated versus True 3-D HV (Model-based)



Model-based Hypoxic Volumes

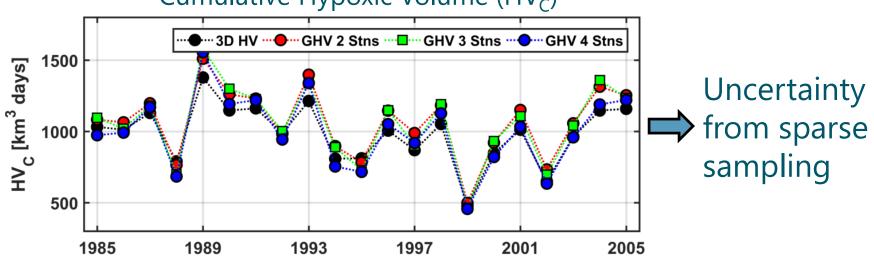
How Well Geometric and Interpolated HVs Reproduce True 3-D HV

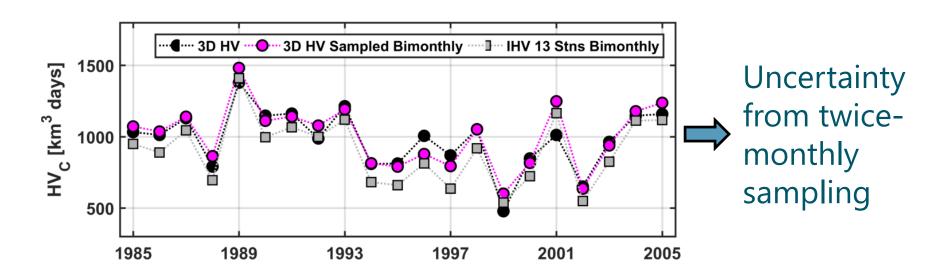
HV method	Number of Stations	Total RMSD [km³]	r ²	Stations Used						
GHV	1	2.65	0.79	CB5.1						
GHV	2	1.57	0.89	CB5.2	CB4.2C					
GHV	3	1.65	0.88	CB5.1	CB5.2	CB4.1C				
GHV	4	1.65	0.88	CB5.1	CB5.2	CB5.1W	CB4.3C			
GHV	5	1.69	0.89	CB5.1	CB5.2	CB5.1W	CB4.3C	CB4.1C		
GHV	6	1.85	0.88	CB5.1	CB5.2	CB5.1W	CB4.4	CB4.3C	CB4.1C	
GHV	7	2.01	0.88	CB5.1	CB5.2	CB5.1W	CB4.4	CB4.3C	CB4.2C	CB4.1C
IHV	2	1.29	0.91	CB5.2	CB4.2C					
IHV	13	0.60	0.98	CB3.2	CB3.3C	CB4.1C	CB4.2C	CB4.3C	CB4.4	CB5.1
				CB5.2	CB5.4	CB6.2	CB6.4	CB7.1	LE2.3	

GHV: Geometric HV IHV: Interpolated HV

Annual Severity of Hypoxia







Annual Severity of Hypoxia: Uncertainty from Twice-monthly Sampling

 Continuous data at two locations is as accurate as knowing the dissolved oxygen everywhere twice monthly

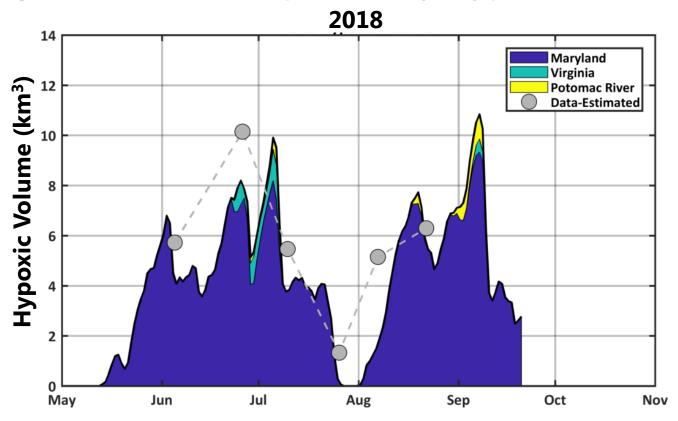
Difference from True 3-D Cumulative HV

HV Method	Number of stations	Temporal Frequency	RMS Difference [km³ days]	RMS % Difference
GHV	2	Continuous	102	9.9%
GHV	3	Continuous	104	9.8%
GHV	4	Continuous	69	6.7%
3-D	Data everywhere	Bimonthly CBP dates	79	9.2%
IHV	13	Bimonthly CBP dates	120	13.2%

Sparse sampling uncertainty, Temporal uncertainty, Both

Real-time Hypoxic Volume Estimates

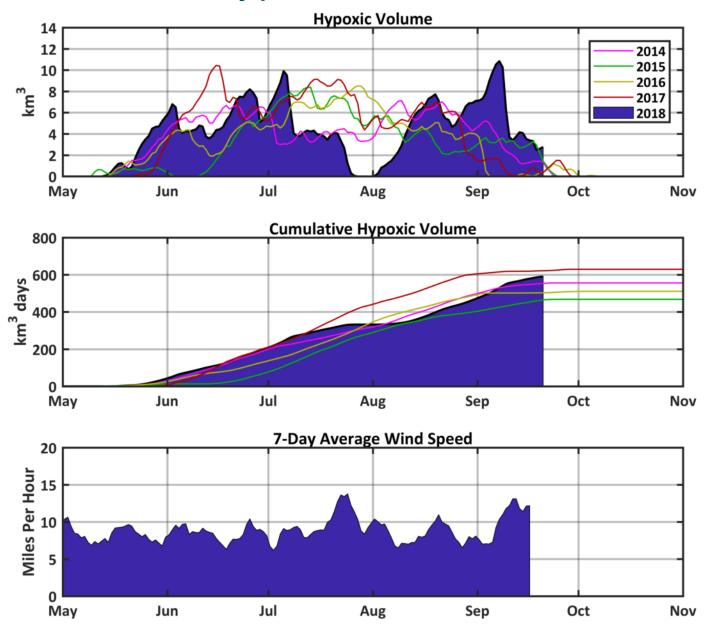
 Hypoxic volume is being estimated in real time using the VIMS Chesapeake Bay Hypoxia Model



2018 data provided by Maryland DNR So

Source: www.vims.edu/hypoxia

Real-time Hypoxic Volume Estimates



Conclusions

- Hypoxia in Chesapeake Bay is strongly constrained by the bathymetry and embayment geometry
- Continuous data at two locations is as accurate as knowing the dissolved oxygen everywhere twice monthly
- Automated sampling at a few locations will not be potentially biased by dates of sampling
- Automated sampling at a few locations can provide continuous HV estimates and accurate estimates of the annual severity of hypoxia

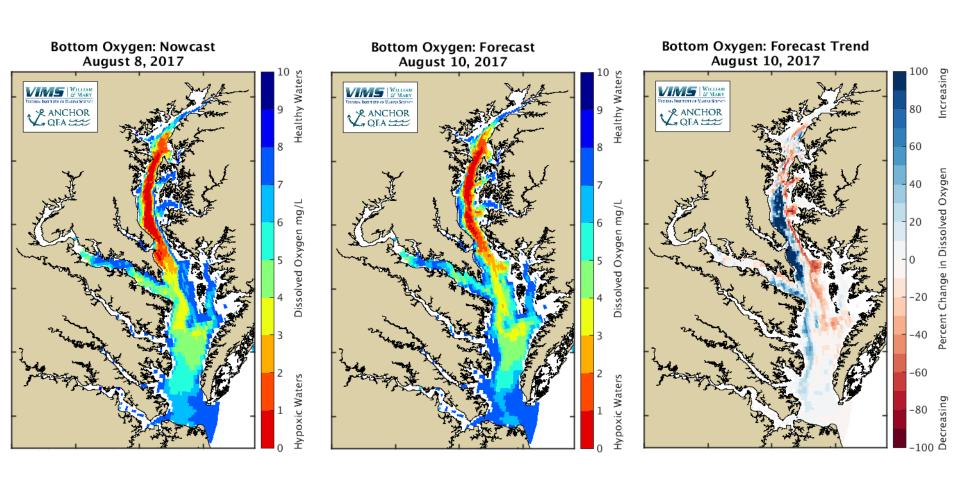
Conclusions

- Estimates from the real-time model are complimentary to the cruise-based estimates of HV
 - Model estimates help understand variability between the data collection cruises
 - Continuous HV estimates would provide validation data for the high-frequency variability predicted by models

Questions







Bever et al., 2018. *JGR-Oceans*. DOI: 10.1029/2018JC014129 www.vims.edu/hypoxia