

# Marmottes Sassièrè / Marmots Sassièrè


1379

Date 17/05/2018 Time 11h15 N° Capture 8 Mesureur / Handling Cohen

Group ~~T. marmota~~ E Piège/Trap \_\_\_\_\_

Recapture année précédente previous year yes  no  même année same year

**Marking**

Transpondeur n° 70800AG Color 

Metal n° K0770 Oreille / ear D/R

Plastic n° \_\_\_\_\_ Oreille / ear \_\_\_\_\_ color \_\_\_\_\_

Logger yes  no

**Age**

M *Pup*

Y *Yearling*

2 ans *2 years old*

Autres *Other*

**Sex**

Male  Scrotal yes  no  unknown

Female  Allaitante *Lactating* yes  no  unknown  Gestante *Pregnant* yes  no  unknown

**Status**

Dominant yes  no  unknown

**Measures**

Masse corporelle / Body mass (g) 1.500

L. mandibule / Jaw (mm) 54.74

L. Patte ant. / Forefoot (mm) 49.22

L. Cubitus / Ulna (mm) 63.99

L. Patte post. / Hindfoot (mm) 76.09

L. Tibia / Tibia (mm) 85.04

L. TC / Body length (cm) 36.5

Larg. Tête zygomatique / Zygomatic width (mm) 52.14

Larg. Bassin / Basin width (mm) 49.47

L. Incisives sup / Upper incisor (mm)         

L. testicule / testes (mm) Droite / right          Gauche / left         

**Prélèvements / Samples**

Crottes	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	feces	
Poils	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	hair	
Biopsie	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Biopsy	
TV (sang)	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Green tube	TV extract: nb: _____
TR (sang)	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Red tube	TR extract: nb: _____
Frotti	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Blood smear	
Eurytic	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Eurytic	
Leucotic	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Leucotic	
Hematocyte	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Hematocyte	Htot: <u>64,86</u> Hred: <u>38,87</u>
Phéromones J	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Jugal	
Phéromones B	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Bucal	
Phéromones A	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Anal	

Remarques / comments