

Marmottes Sassièr / Marmots Sassièr

1362

Date 30/05/2013

Time 19h00

N° Capture ~~113~~ 113 Mesureur / Handling _____

Group N3

Piège/Trap _____

Measures

Masse corporelle / Body mass (g) 1,600g

L. mandibule / Jaw (mm) _____

L. Patte ant. / Forefoot (mm) _____

L. Cubitus / Ulna (mm) _____

L. Patte post. / Hindfoot (mm) _____

L. Tibia / Tibia (mm) _____

L. TC / Body length (mm) _____

Larg. Tête zygomatique/ Zygomatic width (mm) _____

Larg. Bassin / Basin width (mm) _____

L. Incisives sup / Upper incisor (mm) _____

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

Recapture

année précédente / previous year yes no

même année / same year 2nd capture

Marking

Transpondeur n° 6F220FC Color _____

Metal n° K0295 Oreille / ear 06

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

Prélèvements / Samples

| | | | | |
|--------------|------------------------------|-----------------------------|-------------|-------------------------|
| Crottes | yes <input type="checkbox"/> | no <input type="checkbox"/> | feces | |
| Poils | yes <input type="checkbox"/> | no <input type="checkbox"/> | hair | |
| Biopsie | yes <input type="checkbox"/> | no <input type="checkbox"/> | Biopsy | |
| TV (sang) | yes <input type="checkbox"/> | no <input type="checkbox"/> | Green tube | TV extract: nb: _____ |
| TR (sang) | yes <input type="checkbox"/> | no <input type="checkbox"/> | Red tube | TR extract: nb: _____ |
| Frotti | yes <input type="checkbox"/> | no <input type="checkbox"/> | Blood smear | |
| Eurytic | yes <input type="checkbox"/> | no <input type="checkbox"/> | Eurytic | |
| Leucotic | yes <input type="checkbox"/> | no <input type="checkbox"/> | Leucotic | |
| Hématocryte | yes <input type="checkbox"/> | no <input type="checkbox"/> | Hématocryte | Htot: _____ Hred: _____ |
| Phéromones J | yes <input type="checkbox"/> | no <input type="checkbox"/> | Jugal | |
| Phéromones B | yes <input type="checkbox"/> | no <input type="checkbox"/> | Bucal | |
| Phéromones A | yes <input type="checkbox"/> | no <input type="checkbox"/> | Anal | |

Remarques / comments

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