

Marmottes Sassièrè / Marmots Sassièrè

Date 20/05/2013 Time 15 h 00 N° Capture 22 Mesureur / Handling coho 1310

Group P1 Piège/Trap _____

Recapture année précédente yes même année no
previous year same year

Marking

Transpondeur	n°	<u>GF1DD EE</u>	Color
Metal	n°	K0005 <u>0028</u>	Oreille / ear <u>OG</u> bleu
Plastic	n°	_____	Oreille / ear _____ color _____
Logger	yes	<input type="checkbox"/>	no <input checked="" type="checkbox"/>

Age

M	Pup	<input type="checkbox"/>
Y	Yearling	<input type="checkbox"/>
2 ans	2 years old	<input checked="" type="checkbox"/>
Autres	Other	<input type="checkbox"/>

Sex

Male	<input checked="" type="checkbox"/>	Scrotal	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>	unknown <input type="checkbox"/>
Female	<input type="checkbox"/>	Allaitante Lactating	yes <input type="checkbox"/>	no <input type="checkbox"/>	unknown <input type="checkbox"/>
		Gestante Pregnant	yes <input type="checkbox"/>	no <input type="checkbox"/>	unknown <input type="checkbox"/>

Status

Dominant	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>	unknown <input type="checkbox"/>
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Measures

Masse corporelle / Body mass (g)	<u>9,125</u>
L. mandibule / Jaw (mm)	<u>62,67</u>
L. Patte ant. / Forefoot (mm)	<u>51,53</u>
L. Cubitus / Ulna (mm)	<u>77,23</u>
L. Patte post. / Hindfoot (mm)	<u>76,41</u>
L. Tibia / Tibia (mm)	<u>92,01</u>
L. TC / Body length (mm)	<u>38,5</u>
Larg. Tête zygomatique / Zygomatic width (mm)	<u>59,38</u>
Larg. Bassin / Basin width (mm)	<u>53,62</u>
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>44,65</u> Hred: <u>32,65</u>
Phéromones J	yes <input checked="" type="checkbox"/>	no <input 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

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