

# Marmottes Sassièr / Marmots Sassièr

Date 05/07/2013 Time 11h30 N° Capture 278 Mesureur / Handling Cehas 1486.

Group Chalet Piège/Trap \_\_\_\_\_

Recapture année précédente / previous year yes  no  même année / same year

**Marking**

Transpondeur n° \_\_\_\_\_ Color \_\_\_\_\_

Metal n° 0850 Oreille / ear OD

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) 170.9

L. mandibule / Jaw (mm) 37.01

L. Patte ant. / Forefoot (mm) 27.37

L. Cubitus / Ulna (mm) 32.51

L. Patte post. / Hindfoot (mm) 38.45

L. Tibia / Tibia (mm) 36.56

L. TC / Body length (cm) 18.5

Larg. Tête zygomatique / Zygomatic width (mm) 31.69

Larg. Bassin / Basin width (mm) 19.27

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 type="checkbox"/>	no	<input checked="" type="checkbox"/>	Biopsy	
TV (sang)	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Green tube	TV extract: nb: <u>0</u>
TR (sang)	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Red tube	TR extract: nb: <u>0</u>
Frotti	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Blood smear	
Eurytic	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Eurytic	
Leucotic	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Leucotic	
Hématocyte	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Hématocyte	Htot: <u>0</u> Hred: <u>0</u>
Phéromones J	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Jugal	
Phéromones B	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Bucal	
Phéromones A	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Anal	

Remarques / comments Chamallow

PDFFill PDF Editor with Free Writer and Tools