

Marmottes Sassièrre / Marmots Sassièrre

1324

Date 06 / 07 / 20 13 Time 17 h 25 N° Capture 283 Mesureur / Handling _____

Group fac Piège/Trap _____

Recapture année précédente / previous year yes no même année / same year ok 2nd

Marking

Transpondeur n° 6F204EB Color _____

Metal n° 0037 Oreille / ear OG

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) 3700

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 (cm) _____

Larg. Tête zygomatique / Zygomatic width (mm) _____

Larg. Bassin / Basin width (mm) _____

Incisives sup / Upper incisor (mm) _____

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

PDFfill PDF Editor with Free Writer and Tools

Prélèvements / Samples

Crottes	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>	feces
Poils	yes <input type="checkbox"/>	no <input checked="" 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
TR (sang)	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>	Red tube
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
Hématocryte	yes <input type="checkbox"/>	no <input checked="" type="checkbox"/>	Hématocryte
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

TV extract: nb: _____

TR extract: nb: _____

Htot: _____ Hred: _____

Remarques / comments