

Marmottes Sassièrre / Marmots Sassièrre

Date 27/06/2014 Time 9 h00 N° Capture 268 Mesureur / Handling Cobas 1519

Group C Piège/Trap —

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

Marking

Transpondeur n°  000706D18A Color —

Metal n° 0576 Oreille / ear G

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) 575

L. mandibule / Jaw (mm) 47.19

L. Patte ant. / Forefoot (mm) 40.96

L. Cubitus / Ulna (mm) 46.78

L. Patte post. / Hindfoot (mm) 62.36

L. Tibia / Tibia (mm) 59.83

L. TC / Body length (cm) 24.50

Larg. Tête zygomatique / Zygomatic width (mm) 42.93

Larg. Bassin / Basin width (mm) 36.02

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: <u>1</u>
TR (sang)	yes	<input type="checkbox"/>	no	<input checked="" type="checkbox"/>	Red tube	TR extract: nb: <u>0</u>
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	
Hématocyte	yes	<input checked="" type="checkbox"/>	no	<input type="checkbox"/>	Hématocyte	Htot: <u>42.30</u> Hred: <u>24.19</u>
Phéromones J	yes	<input checked="" 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

~~William~~ William