

Marmottes Sassi re/ Marmots Sassi re

 Date: 18/05/2015

 Time: 08 h 00

 N  fiche/sheet: 56

 Op rateur/ Handling: [Signature]

 N  individu: 1606
→ 1620

 capture id: 9248

Territoire: <u>A</u> <small>Territory</small>	Recapture yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Statut social Dominant <input type="checkbox"/> Sub <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
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Measures

Masse corporelle / Body mass (g) 1650g

L. mandibule / Jaw (mm) _____

L. Patte ant. / Forefoot (mm) _____

L. Cubitus / Ulna (mm) _____

L. Patte post. / Hindfoot (mm) _____

L. Tibia (mm) _____

L. TC / Body length (cm) _____

Larg. T te zygomatique/ Zygomatic width (mm) _____

Larg. Bassin / Basin width (mm) _____

Dist. Ano-G nitale (cm) (marmotton/pup only) _____

Marking

Transpondeur n  95600003045296

Metal n  ∅ 854 Oreille / ear 00 Paint 1

Plastic n  / Oreille / ear / color /


Implant yes no

Age

0 Marmotton Pup
1 an Yearling

2 ans 2 years old
≥ 3 ans ≥ 3 y

Echantillons / Samples : nbr +  tiquette / label

Feces 

Poils / Hair

Biopsy ○

TV / Green tube ○ ○

TR / Red tube ○ ○

Frotti / Blood smear ○

Eurytic

Leucotic

Hematocyte

Jugal ○

Bucal ○

Anal ○

Statut Repro

Male Scrotal yes
no
unknown

Female Allaitante yes
Lactating no
unknown

Gestante yes
Pregnant no
unknown

Hemato TV extract: nb: _____ TR extract: nb: _____ Htot: _____ Hematie: _____

Remarques / remarks

Extraction GB ○

Stress

Action pose <input type="checkbox"/> dépose <input type="checkbox"/> H début/start: _____	Implantation id: intra-abdo <input type="checkbox"/> ss-cut <input type="checkbox"/> H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/>	Implant id: n° _____	Type implant: vienne <input type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Comments:				
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Comments:				

Surgery

Début: _____

Fin: _____

Injection: _____ H: _____

Injection: _____ H: _____

Anhest. Local (Lurocaïne): _____

Anti-infl (Metacam): _____ H: _____

Antibio (Baytril): _____ H: _____

Desimplantation

N° implant sous-cut: _____

N° implant Intra-abdo: _____

Implantation

N° implant Intra-abdo: _____

Autres: _____

Stress

PS1

Injection DM: Heure: _____ PS Heure: _____

Injection ACTH: Heure: _____ PS Heure: _____

PS Heure: _____

Comments: