

Marmottes Sassi re/ Marmots Sassi re

Date: 19/05/2015

Time: 16h30

N  fiche/sheet: 84

Op rateur/ Handling: _____

N  individu: 1448

capture id: 9271

Territoire: N
Territory

Recapture yes no

Statut social Dominant Sub unknown

Measures

- Masse corporelle / Body mass (g) X
- 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  6F1E782

Metal n  _____ Oreille / ear _____

Plastic n  _____ Oreille / ear _____ color _____

Implant yes no

Paint +
orange

Age

0 Marmotton Pup
1 an Yearling

2 ans 2 years old
≥ 3 ans ≥ 3 y


Statut Repro

Male Scrotal yes no unknown

Female Allaitante yes Lactating no unknown

Gestante yes Pregnant no unknown

Echantillons / Samples : nbr +  tiquette / label

- Feces 
- Poils / Hair
- Biopsy ○
- TV / Green tube ○ ○
- TR / Red tube ○ ○
- Frotti / Blood smear ○
- Extraction GB ○
- Eurytic
- Leucotic
- Hematocyte
- Jugal ○
- Bucal ○
- Anal ○
- Stress

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

Remarques / remarks
bloqu e dans cage, donc   pes e

Action pose <input type="checkbox"/> dépose <input type="checkbox"/>	Implantation id: intra-abdo <input type="checkbox"/> ss-cut <input type="checkbox"/>	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"/>
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H début/start: _____ H fin/end: _____

Comments:

Action pose <input type="checkbox"/> dépose <input type="checkbox"/>	Implantation id: intra-abdo <input type="checkbox"/> ss-cut <input type="checkbox"/>	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"/>
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H début/start: _____ H fin/end: _____

Comments:

Surgery

Début: _____
 Fin: _____
 Injection: _____ H: _____
 Injection: _____ H: _____
 Anhest. Local (Lurocaïne): _____
 Anti-infl (Metacam): _____ H: _____
 Antibio (Baytril): _____ H: _____

Stress

PS1
 Injection DM: Heure: _____ PS Heure: _____
 Injection ACTH: Heure: _____ PS Heure: _____
 PS Heure: _____

Desimplantation

N° implant sous-cut: _____
 N° implant Intra-abdo: _____

Implantation

N° implant Intra-abdo: _____

Autres: _____

Comments:
