

Marmottes Sassièrè/ Marmots Sassièrè


Date: 10/06/2015 Time: 10h50 N° fiche/sheet: 261 Opérateur/ Handling: Cohas N° individu: 1404 capture id: 9696

Territoire: <u>Z</u> <small>Territory</small>	Recapture yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Statut social Dominant <input checked="" type="checkbox"/> Sub <input type="checkbox"/> unknown <input type="checkbox"/>
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Measures Masse corporelle / Body mass (g) <u>4000</u> L. mandibule / Jaw (mm) <u>70,03</u> L. Patte ant. / Forefoot (mm) <u>60,76</u> L. Cubitus / Ulna (mm) <u>92,20</u> L. Patte post. / Hindfoot (mm) <u>85,64</u> L. Tibia (mm) <u>107,95</u> L. TC / Body length (cm) <u>50</u> Larg. Tête zygomatique / Zygomatic width (mm) <u>66,46</u> Larg. Bassin / Basin width (mm) <u>73,50</u> Dist. Ano-Génitale (cm) (marmotton/pup only) <u> </u>	
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Marking	Transpondeur n° <u>70 70 B44B6</u>		Paint
	Metal n° <u>0027</u>	Oreille / ear <u>OG</u>	
	Plastic n° <u>299</u>	Oreille / ear <u>OD</u> color <u>rose</u>	
	Implant yes <input checked="" type="checkbox"/> no <input type="checkbox"/>		

Age	0 Marmotton <input type="checkbox"/> Pup	2 ans <input type="checkbox"/> 2 years old
	1 an <input type="checkbox"/> Yearling	≥ 3 ans <input checked="" type="checkbox"/> ≥ 3 y

Echantillons / Samples : nbr + étiquette / label			
Feces <input checked="" type="checkbox"/>	<input type="checkbox"/>		Eurytic <input type="checkbox"/>
Poils / Hair <input checked="" type="checkbox"/>	<input type="checkbox"/>		Leucotic <input type="checkbox"/>
Biopsy <input checked="" type="checkbox"/>	<input type="checkbox"/>		Hematocyte <input type="checkbox"/>
TV / Green tube <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Jugal <input type="checkbox"/>
TR / Red tube <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bucal <input type="checkbox"/>
Frotti / Blood smear <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Anal <input type="checkbox"/>

Statut Repro	Male <input checked="" type="checkbox"/>	Scrotal yes <input checked="" type="checkbox"/> no <input type="checkbox"/> unknown <input type="checkbox"/>
	Female <input checked="" type="checkbox"/>	Allaitante yes <input type="checkbox"/> Lactating no <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
		Gestante yes <input type="checkbox"/> Pregnant no <input checked="" type="checkbox"/> unknown <input type="checkbox"/>

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

Remarques / remarks pas de nouveau transpondeur

Extraction GB <input type="checkbox"/>	Stress <input type="checkbox"/>
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Action pose <input type="checkbox"/> dépose <input checked="" type="checkbox"/> H début/start: <u>11h30</u>	Implantation id: intra-abdo <input checked="" type="checkbox"/> ss-cut <input type="checkbox"/> H fin/end: <u>12h</u>	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/> Comments: <u>RAS</u>	Implant id: n° <u>36</u>	Type implant: vienne <input checked="" type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Action pose <input checked="" type="checkbox"/> dépose <input type="checkbox"/> H début/start: <u>12h</u>	Implantation id: intra-abdo <input checked="" type="checkbox"/> ss-cut <input type="checkbox"/> H fin/end: 12h	Position: Abdo <input checked="" type="checkbox"/> cou <input type="checkbox"/> Comments: <u>RAS</u>	Implant id: n° <u>140</u>	Type implant: vienne <input type="checkbox"/> ibutton <input checked="" type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Action pose <input checked="" type="checkbox"/> dépose <input type="checkbox"/> H début/start: _____	Implantation id: intra-abdo <input type="checkbox"/> ss-cut <input checked="" type="checkbox"/> H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input checked="" type="checkbox"/> Comments: <u>RAS</u>	Implant id: n° <u>122</u>	Type implant: vienne <input type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input checked="" type="checkbox"/> starr-oddi L <input type="checkbox"/>

Surgery

Début: 11h50
Fin: 12h23
Injection: 11h15 H: 0,5
Injection: 0,2 H: 11h57
Anhest. Local (Lurocaïne): ok
Anti-infl (Metacam): 0.24 ml H: 12:30
Antibio (Baytril): 0.4 ml H: 12:30

Desimplantation
N° implant sous-cut: _____
N° implant Intra-abdo: 36

Implantation
N° implant Intra-abdo: 140 / s/cut: 122

Autres: - Abdo: 3 pt x + 1 pt à gde / sujet / 6 pt à gds
- s/cut: 3 pt à gds -

Stress

PS1

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

Comments: