

Marmottes / Marmots Sassièrè

9633

Date: 14/05/2016 Time: 11h00 N° fiche / sheet: 27 Opérateur / Handling: SP

N° individu: 988 capture id: ~~988~~

Territoire: C Recapture yes no Statut social Dominant Sub unknown

Measures

Masse corporelle / Body mass (g) 3200

L. mandibule / Jaw (mm) 68,32

L. Patte ant. / Forefoot (mm) 55,93

L. Cubitus / Ulna (mm) 86,77

L. Patte post. / Hindfoot (mm) 80,24

L. Tibia (mm) 101,19

L. TC / Body length (cm) 45,50

Larg. Tête zygomatique / Zygomatic width (mm) 65,08

Larg. Bassin / Basin width (mm) 66,46

Dist. Ano-Génitale (cm) (marmotton/pup only) —

Transpondeur n° 956—3014391 Paint green

Metal n° K0249 Oreille ear G/Left D/Right

Plastic n° 293 Oreille ear G/Left D/Right color rose

Implant yes no download data yes no

Age 0 Marmotton PUP 1 an Yearling 2 ans 2 years old ≥ 3 ans ≥ 3 y

Echantillons / Samples : nbr + étiquette / label

Feces Erythrocytes

Poils / Hair Leucocytes

Biopsy Hematocyte

TV / Green tube Jugal 1

TV extract Bucal 1

TR / Red tube Anal 1

TR extract GB (telomeres) white blood cells

Frotti / Blood smear Stress

Statut Repro Male Scrotal yes no unknown

Female Allaitante Lactating yes no unknown Gestante Pregnant yes no unknown

Hemato Comptages: Ery: 9.75 x10⁵ Leuco: 5.14 x10⁵ Hematocrite: NA

Comments: Ø Echographie → gestante ??

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

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Chirurgie/Surgery

Début/start: _____
Fin/End: _____
Injection: _____ Heure / Time: _____
Injection: _____ Heure / Time: _____
Anhest. Local (Lurocaïne): _____
Anti-infl (Metacam): _____ Heure / Time: _____
Antibio (Baytril): _____ Heure / Time: _____

Desimplantation
N° implant sous-cut / under skin: _____
N° implant Intra-abdo: _____

Implantation
N° implant Intra-abdo: _____

Autres / Other: _____

Stress

PS0 délai : _____ Injection zoolétil: Qté / Qty: _____ Heure / Time: _____
capture delay

PS1 Heure: _____ Injection DM: Qté / Qty: _____ Heure / Time: _____
Time

PS2 Heure: _____ Injection ACTH: Qté / Qty: _____ Heure / Time: _____
Time

PS3 Heure: _____
Time

Comments: