

Marmottes / Marmots Sassièr

1.5x

Date: 24 / 05 / 2016 Time: 20 h 40 N° fiche / sheet: 138 Opérateur / Handling: SP N° individu: 1428 capture id: 9745

Territoire: <u>✓</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>3250</u>
L. mandibule / Jaw (mm)	<u>74.53</u>
L. Patte ant. / Forefoot (mm)	<u>61.08</u>
L. Cubitus / Ulna (mm)	<u>84.16</u>
L. Patte post. / Hindfoot (mm)	<u>81.17</u>
L. Tibia (mm)	<u>106.68</u>
L. TC / Body length (cm)	<u>50</u>
Larg. Tête zygomatique / Zygomatic width (mm)	<u>68.80</u>
Larg. Bassin / Basin width (mm)	<u>68.74</u>
Dist. Ano-Génitale (cm) (marmotton/pup only)	<u>✓</u>

Marking	Transpondeur n° <u>956 — 3045453</u>		Paint <u>1 Red.</u>
	Metal n° <u>0086</u>	Oreille ear G/Left <input checked="" type="checkbox"/> D/Right <input type="checkbox"/>	
	Plastic n° <u>305</u>	Oreille ear G/Left <input type="checkbox"/> D/Right <input checked="" type="checkbox"/> color <u>vert clair</u>	
	Implant yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	download data yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	

Age	0 Marmotton <input type="checkbox"/> Pup 1 an <input type="checkbox"/> Yearling	2 ans <input type="checkbox"/> 2 years old ≥ 3 ans <input checked="" type="checkbox"/> ≥ 3 y
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Echantillons / Samples : nbr + étiquette / label

Feces <input checked="" type="checkbox"/>	Erythrocytes <input checked="" type="checkbox"/>
Poils / Hair <input checked="" type="checkbox"/>	Leucocytes <input checked="" type="checkbox"/>
Biopsy <input checked="" type="checkbox"/> ○	Hematocyte <input type="checkbox"/> ○
TV / Green tube <input checked="" type="checkbox"/> ○ ○	Jugal <input checked="" type="checkbox"/> ○
TV extact <input checked="" type="checkbox"/> ○ ○	Bucal <input checked="" type="checkbox"/> ○
TR / Red tube <input type="checkbox"/> ○ ○	Anal <input checked="" type="checkbox"/> ○
TR extract <input type="checkbox"/> ○ ○	GB (telomeres) <input checked="" type="checkbox"/> ○
Frotti / Blood smear <input checked="" type="checkbox"/> ○	Stress <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 type="checkbox"/>	Allaitante Lactating yes <input type="checkbox"/> no <input type="checkbox"/> unknown <input type="checkbox"/>
		Gestante Pregnant yes <input type="checkbox"/> no <input type="checkbox"/> unknown <input type="checkbox"/>

Hemato
Comptages: Ery: 908 x10⁵ Leuco: 363 x10⁵ Hematocrite: ✓
cell count

Comments:

Action pose <input type="checkbox"/> In retrait <input checked="" type="checkbox"/> Out H début/start: _____	Implantation id: intra-abdo <input checked="" type="checkbox"/> ss-cut <input type="checkbox"/> <i>under skin</i> H fin/end: _____	Position: Abdo <input checked="" type="checkbox"/> cou <input type="checkbox"/> neck	Implant id: n° <u>139</u>	Type implant: vienné <input type="checkbox"/> ibutton <input checked="" type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Comments:				
Action pose <input checked="" type="checkbox"/> In retrait <input type="checkbox"/> Out H début/start: _____	Implantation id: intra-abdo <input checked="" type="checkbox"/> ss-cut <input type="checkbox"/> <i>under skin</i> H fin/end: _____	Position: Abdo <input checked="" type="checkbox"/> cou <input type="checkbox"/> neck	Implant id: n° <u>198</u>	Type implant: vienné <input type="checkbox"/> ibutton <input checked="" type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Comments:				
Action pose <input type="checkbox"/> In retrait <input type="checkbox"/> Out H début/start: _____	Implantation id: intra-abdo <input type="checkbox"/> ss-cut <input type="checkbox"/> <i>under skin</i> H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/> neck	Implant id: n° _____	Type implant: vienné <input type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Comments:				

Chirurgie/Surgery

Début/start: 21:50
Fin/End: 22:12
Injection: zol 3.6 Heure / Time: 21:13
Injection: _____ Heure / Time: _____
Anhest. Local (Lurocaïne): 100 ml
Anti-infl (Metacam): 0.20 ml Heure / Time: 22:13
Antibio (Baytril): 0.33 ml Heure / Time: 22:13

Desimplantation
N° implant sous-cut / *under skin*: _____
N° implant Intra-abdo: 139

Implantation
N° implant Intra-abdo: 198

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: