

Marmottes / Marmots Sassièr

Date: 27/05/2016

Time: 13 h 10

N° fiche / sheet: 180

Opérateur / Handling: SP

N° individu: 1681

capture id: 9787

Territoire: CE
Territory

Recapture yes
no

Statut social Dominant
Sub
unknown

Measures

Masse corporelle / Body mass (g) 1,250.
L. mandibule / Jaw (mm) 51,74
L. Patte ant. / Forefoot (mm) 51,25
L. Cubitus / Ulna (mm) 62,92
L. Patte post. / Hindfoot (mm) 72,25
L. Tibia (mm) 78,82
L. TC / Body length (cm) 35,5
Larg. Tête zygomatique / Zygomatic width (mm) 49,88
Larg. Bassin / Basin width (mm) 42,15
Dist. Ano-Génitale (cm) (marmotton/pup only) /

Marking

Transpondeur n° 3036827

Paint

Yellow

bottom

Metal n° 0533 Oreille ear G/Left D/Right

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

Implant yes no download data yes no

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 Lactating yes
no
unknown Gestante Pregnant yes
no
unknown

Hemato

Comptages: Ery: 9,46 x10⁵ Leuco: 201 x10⁵ Hematocrite: 0,57
cell count

Comments:

Echantillons / Samples : nbr + étiquette / label

Feces

Erythrocytes

Poils / Hair

Leucocytes

Biopsy

Hematocyte

TV / Green tube

Jugal

TV extact

Bucal

TR / Red tube

Anal

TR extract

GB (telomeres)
white blood cells

Frotti / Blood smear

Stress

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: vienné <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:				

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 zoolétit: 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: