

Marmottes / Marmots Sassièr

Date: 26/06/2016

Time: ¹⁰ ~~9~~h 00

N° fiche / sheet: 320

Opérateur / Handling: SP

N° individu: 1734

capture id: 9958

Territoire: L
Territory

Recapture yes no

Statut social Dominant Sub unknown

Measures

Masse corporelle / Body mass (g) 380

L. mandibule / Jaw (mm) 43,55

L. Patte ant. / Forefoot (mm) 42,98

L. Cubitus / Ulna (mm) 44,64

L. Patte post. / Hindfoot (mm) 53,67


L. Tibia (mm) 55,20

L. TC / Body length (cm) 21,5

Larg. Tête zygomatique / Zygomatic width (mm) 39,27

Larg. Bassin / Basin width (mm) 27,37

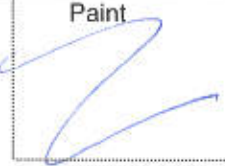
Dist. Ano-Génitale (cm) (marmotton/pup only) 17,54

Transpondeur n°  956000003015602

Metal n° 0931 Oreille ear G/Left D/Right

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

Implant yes no download data yes no

Paint 

Age 0 Marmotton Pup 1 an Yearling

2 ans 2 years old ≥ 3 ans ≥ 3 y

Echantillons / Samples : nbr + étiquette / label

Feces <input type="checkbox"/>	Erythrocytes <input checked="" type="checkbox"/>
Poils / Hair <input checked="" type="checkbox"/>	Leucocytes <input checked="" type="checkbox"/>
Biopsy <input checked="" type="checkbox"/> ○	Hematocryte <input checked="" type="checkbox"/> 1
TV / ^{+ orange} Green tube <input checked="" type="checkbox"/> ○ ○	Jugal <input type="checkbox"/> ○
TV extact <input checked="" type="checkbox"/> ○ ○	Bucal <input checked="" type="checkbox"/> ○
TR / Red tube <input checked="" 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 checked="" type="checkbox"/>

Statut Repro Male Scrotal yes no unknown

Female Allaitante Lactating yes no unknown

Gestante Pregnant yes no unknown

Hemato Comptages: Ery: 324 x10⁵ Leuco: 4,47 x10⁴ Hematocrite: 51%

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:				
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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 : _____ / *delay* Injection zoolétil: Qté / Qty: 0,1 Heure / Time: 13h13

PS1 Heure: 13h31 Injection DM: IV Qté / Qty: 0,38 Heure / Time: 13h35

PS2 Heure: 15h36 Injection ACTH: Qté / Qty: 0,19 Heure / Time: 15h41

PS3 Heure: 16h42 *Time*

Comments: