


Marmottes / Marmots Sassièr

Date: 28 / 06 / 2016 Time: 9 h 08 N° fiche / sheet: 334 Opérateur / Handling: SP N° individu: 1747 capture id: 9972

Territoire: <u>B</u> <small>Territory</small> <u>Bohpal</u>	Recapture yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	Statut social Dominant <input type="checkbox"/> Sub <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
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Measures

Masse corporelle / Body mass (g)	<u>305</u>
L. mandibule / Jaw (mm)	<u>42,78</u>
L. Patte ant. / Forefoot (mm)	<u>39,11</u>
L. Cubitus / Ulna (mm)	<u>42,12</u>
L. Patte post. / Hindfoot (mm)	<u>51,86</u>
L. Tibia (mm)	<u>51,91</u>
L. TC / Body length (cm)	<u>20,5</u>
Larg. Tête zygomatique / Zygomatic width (mm)	<u>38,79</u>
Larg. Bassin / Basin width (mm)	<u>26,28</u>
Dist. Ano-Génitale (cm) (marmotton/pup only)	<u>14,80</u>

Marking	Transpondeur n°	 <u>956000003010450</u>	Paint
	Metal n° <u>0706</u>	Oreille ear G/Left <input checked="" type="checkbox"/> D/Right <input type="checkbox"/>	
	Plastic n° _____	Oreille ear G/Left <input type="checkbox"/> D/Right <input type="checkbox"/> color _____	
	Implant yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	download data yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	

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

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"/>
TV / 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 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"/> ○	<small>white blood cells</small>
	Stress <input checked="" type="checkbox"/>

Statut Repro	Male <input checked="" type="checkbox"/>	Scrotal yes <input type="checkbox"/> no <input checked="" 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: <u>1,01</u> x10 ⁶ Leuco: <u>1,68</u> x10 ⁵ Hematocrite: 
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Comments: H. bob: 214
H. red: 218

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:
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:
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: _____
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

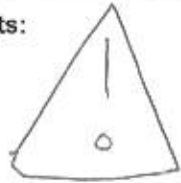
PS0 capture délai : _____ / *delay* Injection zoolétil: Qté / Qty: 0,1 Heure / Time: 12^h35

PS1 Heure: 12^h50 Injection DM: IV Qté / Qty: 0.15 Heure / Time: 12^h51
[DN] = 8mg/jan!

PS2 Heure: 13^h53 Injection ACTH: I7 Qté / Qty: 0.15 Heure / Time: 13^h55

PS3 Heure: 14^h56

Comments:

 | PS2 + ACTH au bout d'1 h après DN!