

# Marmottes / Marmots Sassièrè

Date: 19/05/2017 Time: 15 h 18 N° fiche / sheet: 11 Opérateur / Handling: SP N° individu: 1759 capture id: 10087

Territoire: BTL Recapture  yes  no

Statut social Dominant  Sub  unknown

Transpondeur n° 556-3049968 Paint orange

Metal n° 0218 Orelle G/Left  D/Right

Plastic n° \_\_\_\_\_ Orelle G/Left  D/Right  color \_\_\_\_\_

Implant yes  no  download data yes  no

Age 0 Marmotton  Pup  1 an  Yearling

2 ans  2 years old  2-3 y

Statut Repro Male  Scrotal yes  no  unknown

Female  Allaitante yes  no  unknown

Gestante Pregnant yes  no  unknown

Hemato Comptages: Ery: 752 x10<sup>5</sup> Leuco: 235 x10<sup>5</sup> Hematocrite: 064

cell count

Comments: ca

Measures

Masse corporelle / Body mass (g) 16

L. mandibule / Jaw (mm) 56,52

L. Patte ant. / Forefoot (mm) 54,10

L. Cubitus / Ulna (mm) 66,04

L. Patte post. / Hindfoot (mm) 92,07

L. Tibia (mm) 84,55

L. TC / Body length (cm) 39

Larg. Tête zygomatique/ Zygomatic width (mm) 52,98

Larg. Bassin / Basin width (mm) 55,73

Dist. Ano-Genitale (cm) (marmotton/pup only) ✓

Echantillons / Samples : nbr + étiquette / label

Feces  2 Erythrocytes

Polis / Hair  2 Leucocytes

Biopsy  1 Hematocyte

TV / Green tube  1 Jugal

TV extract  2 Bucal

TR / Red tube  1 Anal

TR extract  1 GB (telomeres)

Froth / Blood smear  1 white blood cells

Stress  1

|  |   |  |                                |   |
|--|---|--|--------------------------------|---|
| <b>Action</b><br><input type="checkbox"/> pose In<br><input type="checkbox"/> retrait Out<br>H début/start: _____  | <b>Implantation id:</b><br><input type="checkbox"/> intra-abdo<br><input type="checkbox"/> ss-cut <small>under skin</small><br>H fin/end: _____ | <b>Position:</b><br><input type="checkbox"/> Abdo<br><input type="checkbox"/> cou neck<br><b>Comments:</b> | <b>Implant id:</b><br>n° _____ | <b>Type implant:</b><br><input type="checkbox"/> vienne<br><input type="checkbox"/> ibutton<br><input type="checkbox"/> start-oddi S<br><input type="checkbox"/> start-oddi L |
| <b>Action</b><br><input type="checkbox"/> pose In<br><input type="checkbox"/> retrait Out<br>H début/start: _____  | <b>Implantation id:</b><br><input type="checkbox"/> intra-abdo<br><input type="checkbox"/> ss-cut <small>under skin</small><br>H fin/end: _____ | <b>Position:</b><br><input type="checkbox"/> Abdo<br><input type="checkbox"/> cou neck<br><b>Comments:</b> | <b>Implant id:</b><br>n° _____ | <b>Type implant:</b><br><input type="checkbox"/> vienne<br><input type="checkbox"/> ibutton<br><input type="checkbox"/> start-oddi S<br><input type="checkbox"/> start-oddi L |
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| <b>Chirurgie/Surgery</b>   |   |  |                                |   |
| Début/start: _____ Heure / Time: _____<br>Fin/End: _____<br>Injection: _____ Heure / Time: _____<br>Injection: _____ Heure / Time: _____<br>Anhest. Local (Lurocaine): _____ Heure / Time: _____<br>Anti-infl (Metacam): _____ Heure / Time: _____<br>Antibio (Baytril): _____ Heure / Time: _____   |   |  |                                |   |
| <b>Stress</b><br>PS0 <input type="checkbox"/> délai : _____ Qté / Qty: _____ Heure / Time: _____<br>capture delay<br>PS1 <input type="checkbox"/> Heure: _____ Qté / Qty: _____ Heure / Time: _____<br>Time<br>PS2 <input type="checkbox"/> Heure: _____ Qté / Qty: _____ Heure / Time: _____<br>Time<br>PS3 <input type="checkbox"/> Heure: _____<br>Time |   |  |                                |   |
| <b>Comments:</b>   |   |  |                                |   |
| <b>Desimplantation</b><br>N° implant sous-cut / under skin: _____<br>N° implant Intra-abdo: _____  |   |  |                                |   |
| <b>Implantation</b><br>N° implant Intra-abdo: _____  |   |  |                                |   |
| Autres / Other: _____  |   |  |                                |   |