

Marmottes / Marmots Sassièrè

Date: 26/05/2017 Time: 15h55 N° fiche / sheet: 25 Opérateur / Handling: SF N° individu: 1677 capture id: 10132

Territoire: Btals Recapture yes no
 Statut social Dominant Sub unknown

Transpondeur n° 956-3014134 Paint — les
 Metal n° 0154 Orelle G/Left D/Right
 Plastic n° _____ Orelle G/Left D/Right color _____
 Implant yes no

Measures
 Masse corporelle / Body mass (g) 3,550
 L. mandibule / Jaw (mm) 65,93
 L. Patte ant. / Forefoot (mm) 59,81
 L. Cubitus / Ulna (mm) 88,99
 L. Patte post. / Hindfoot (mm) 81,23
 L. Tibia (mm) 105,32
 L. TC / Body length (cm) 49,5
 Larg. Tête zygomatique/ Zygomatic width (mm) 64,68
 Larg. Bassin / Basin width (mm) 63,93
 Dist. Ano-Génitale (cm) (marmotton/pup only) _____

Age 0 Marmotton PUP 1 an Yearling 2 ans 2 years old ≥ 3 ans ≥ 3 y

Echantillons / Samples : nbr + étiquette / label
 Feces 2 Erythrocytes
 Poils / Hair 2 ✓ Leucocytes
 Biopsy ✓ Hematocyte

Statut Repro Male Scrotal yes no unknown
 Female Allaitante yes no unknown
 Lactating unknown
 Gestante yes no unknown
 Pregnant unknown

TV / Green tube ✓ Jugal ✓
 TV extract 2 ✓ Buccal ✓
 TR / Red tube Anal ✓
 TR extract GB (telomeres) ✓
 white blood cells ✓
 Frotti / Blood smear Stress ✓

Hemato Comptages: Ery: 1.08 x10⁶ Leuco: 4.92 x10⁵ Hematocritie: 0.85
 cell count Hior: _____ Hématies: _____

Comments: Caylusi en chales bas

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"/> under skin H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/> neck	Implant id: n° _____	Type implant: vienn <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 Dobut/start: _____ Fin/End: _____ Injection: _____ Heure / Time: _____ Injection: _____ Heure / Time: _____ Anest. Local (Lurocaine): _____ Heure / Time: _____ Anti-infl (Metacam): _____ Heure / Time: _____ Antibio (Baytril): _____ Heure / Time: _____ Stress PS0 <input type="checkbox"/> délai: _____ Oie / Qty: _____ Heure / Time: _____ capture delay PS1 <input type="checkbox"/> Heure: _____ Oie / Qty: _____ Heure / Time: _____ Time PS2 <input type="checkbox"/> Heure: _____ Oie / Qty: _____ Heure / Time: _____ Time PS3 <input type="checkbox"/> Heure: _____ Oie / Qty: _____ Heure / Time: _____ Time Desimplantation N° implant sous-cut / under skin: _____ N° implant Intra-abdo: _____ Implantation N° implant Intra-abdo: _____ Autres / Other: _____ Comments:				