

Marmottes / Marmots Sassièrè

Date: 22/05/2017 Time: 12h29 N° fiche / sheet: 44 Opérateur / Handling: SP N° Individu: 7419 capture id: 10151

Territoire: X Recapture: yes no


Statut social: Dominant Sub unknown

Transpondeur n°: -3621336

Metal n°: ~~6858~~ Orelle G/Left D/Right

Plastic n°: 494 Orelle G/Left D/Right

Implant: yes no

Paint:  bleu

Age: 0 Marmotton 1 an PUP Yearling 2 ans 2 years old ≥ 3 ans 6 ≥ 3 y

Male: Scrotal: yes no unknown

Female: Allaitante Lactating: yes no unknown

Gestante Pregnant: yes no unknown

Hemato: Comptages: Ery: 202 x10⁵ Leuco: 209 x10⁵ Hematocrite: 0. 55

cell count: Hct: Hematocrit:

Comments: Jo mammelles

Measures

Masse corporelle / Body mass (g): 2500

L. mandibule / Jaw (mm): 65.90

L. Pate ant. / Forefoot (mm): 57.56

L. Cubitus / Ulna (mm): 85.91

L. Pate post. / Hindfoot (mm): 77.85

L. Tibia (mm): 199.91

L. TC / Body length (cm): 46

Larg. Tête zygomatique/ Zygomatic width (mm): 60.17

Larg. Bassin / Basin width (mm): 59.57

Dist. Ano-Génitale (cm) (marmotton/pup only):

Echantillons / Samples : nbr + étiquette / label

Feces: 2

Poils / Hair: 1

Biopsy: 1

TV / Green tube: 1

TV extract: 2

TR / Red tube: 0

TR extract: 0

Froth / Blood smear: 1

Erythrocytes: 1

Leucocytes: 1

Hematocryte: 1

Jugal: 1

Bucal: 1

Anal: 1

GB (telomeres) white blood cells: 1

Sheets: 1

Packaging: 1

Action <input type="checkbox"/> pose <input checked="" type="checkbox"/> retrait In Out	Implantation id: <input checked="" type="checkbox"/> intra-abdo <input type="checkbox"/> ss-cut under skin	Position: <input checked="" type="checkbox"/> Abdo <input type="checkbox"/> cou neck	Type implant: <input type="checkbox"/> vienne <input checked="" type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input checked="" type="checkbox"/> starr-oddi L	Implant id: n° <u>129</u>
Comments:				
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Comments:				
Chirurgie/Surgery Début/start: <u>18h40</u> Fin/End: <u>19h05</u> Injection: <u>2cc 4.1</u> Heure / Time: <u>18:07</u> Injection: _____ Heure / Time: _____ Anest. Local (Lurocaine): <u>0.5 ml</u> Heure / Time: _____ Anti-infl (Metacam): _____ Heure / Time: _____ Antibio (Baytril): <u>Na</u>				
Stress PS0 <input type="checkbox"/> délai : _____ Qté / Qty: _____ Heure / Time: _____ capture delay PS1 <input type="checkbox"/> Heure: _____ Qté / Qty: _____ Heure / Time: _____ Time PS2 <input type="checkbox"/> Heure: _____ Qté / Qty: _____ Heure / Time: _____ Time PS3 <input type="checkbox"/> Heure: _____ Qté / Qty: _____ Heure / Time: _____ Time				
Desimplantation N° implant sous-cut / under skin: N° implant Intra-abdo: Implantation N° implant Intra-abdo: Autres / Other:				