

Marmottes / Marmots Sassièrè

Date: 25/05/2017 Time: 21h30 N° fiche / sheet: 7A Opérateur / Handling: SP

N° individu: 1793 capture id: 10179

Territoire: J
Territory

Recapture yes
no

Statut social

Dominant
Sub
unknown

Measures

Masse corporelle / Body mass (g) 3300

L. mandibule / Jaw (mm) 69,95

L. Patte ant. / Forefoot (mm) 56,89

L. Cubitus / Ulna (mm) 89,90

L. Patte post. / Hindfoot (mm) 81,15

L. Tibia (mm) 98,75

L. TC / Body length (cm) 47,5

Larg. Tête zygomatique / Zygomatic width (mm) 64,86

Larg. Bassin / Basin width (mm) 66,55

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

Marking

Transpondeur n°



956000003013465

Paint

0 vert

Metal n° 0249

Oreille ear G/Left D/Right

Plastic n°

Oreille ear G/Left D/Right

color

Implant yes no

Age

0 Marmotton PUP

1 an Yearling

2 ans 2 years old

≥ 3 ans ≥ 3 y

Echantillons / Samples : nbr + étiquette / label

Feces

Erythrocytes

Poils / Hair

Leucocytes

Biopsy

Hematocyte

TV / Green tube

Jugal

TV extract

Bucal

TR / Red tube

Anal

TR extract

GB (telomeres)

white blood cells

Frotti / Blood smear

Stress

Beak

Statut Repro

Male

Scrotal yes
no
unknown

Female

Allaitante Lactating yes
no
unknown

Gestante Pregnant yes
no
unknown

Hemato

Comptages: Ery: 1,26 x10⁶ Leuco: 4,02 x10⁵ Hematocrite: 0,73
cell count Htot: ___ Hématies: ___

Comments:

Don statut vérifié ensuite.

Action pose <input type="checkbox"/> retrait <input type="checkbox"/> In 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: viene <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: _____

Anest. 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 défal : _____
capture delay

Injection zoolétil: Qté / Qty: _____ Heure / Time: _____

PS1 Heure: _____
Time

Injection DM: Qlé / Qty: _____ Heure / Time: _____

PS2 Heure: _____
Time

Injection ACTH: Qté / Qty: _____ Heure / Time: _____

PS3 Heure: _____
Time

Comments: