

Date: 26/05/2017

Time: 19h 25

N° fiche / sheet: 79

Opérateur / Handling: SP

N° individu: 1229

capture id: 10186

Territoire: BTal
TerritoryRecapture
yes
no Statut
socialDominant
Sub
unknown

Measures

Masse corporelle / Body mass (g) 3850

L. mandibule / Jaw (mm) 69,54

L. Patte ant. / Forefoot (mm) 59,98

L. Cubitus / Ulna (mm) 88,62

L. Patte post. / Hindfoot (mm) 85,33

L. Tibia (mm) 100,59

L. TC / Body length (cm) 48,5

Larg. Tête zygomatique / Zygomatic width (mm) 65,90

Larg. Bassin / Basin width (mm) 68,21

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

Marking

Transpondeur n°  956000003040255Metal n° 0246Oreille ear
G/Left D/Right Paint
orangePlastic n° 33pOreille ear
G/Left D/Right color vertImplant
yes no

Age

0 Marmotton Pup
1 an Yearling2 ans 2 years old
≥ 3 ans ≥ 3 y

Echantillons / Samples : nbr + étiquette / label

Feces 2Erythrocytes 1Poils / Hair 1Leucocytes 1Biopsy 1 ○Hematocyte 1TV / Green tube ○ ○Jugal ○TV extract ○ ○Bucal ○TR / Red tube ○ ○Anal ○TR extract ○ ○GB (telomeres)
white blood cells ○Frotti / Blood smear ○Stress 1

Back

Statut Repro

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

Hemato

Comptages: cell count
Ery: 969 x10⁵ Leuco: 464 x10⁵ Hematocrite: 0, 57
Htot: ___ Hématies: ___

Comments:

new Zoletyl 15-15
new transpondeurnew metal
to mamelles

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: vienne <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: _____

Anhest. Local (Lurocaïne): _____

Anti-infl (Motacam): _____ 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 délai : _____
capture delay

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

PS1 Heure: _____
Time

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

PS2 Heure: _____
Time

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

PS3 Heure: _____
Time

Comments: