

Date: 30/06/2017

Time: 11h 00

N° fiche / sheet: 199

Marmottes / Marmots Sassièrè

Opérateur / Handling: SATZ

N° individu: 1816

capture id: 10494

Territoire: Territory

Recapture yes
no

Statut social

Dominant
Sub
unknown

Measures

Masse corporelle / Body mass (g) 325g
 L. mandibule / Jaw (mm) 37.76
 L. Patte ant. / Forefoot (mm) 43.00
 L. Cubitus / Ulna (mm) 42.10
 L. Patte post. / Hindfoot (mm) 54.78
 L. Tibia (mm) 51.21
 L. TC / Body length (cm) 19
 Larg. Tête zygomaticue / Zygomatic width (mm) 39.94
 Larg. Bassin / Basin width (mm) 27.64
 Dist. Ano-Génitale (cm) (marmotton/pup only) 14.48

Marking

Transpondeur n°



Paint

Metal n° 0379

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

Statut Repro

Male

Scrotal yes
no
unknown

Female

Allaitante Lactating yes
no
unknown

Gestante Pregnant yes
no
unknown

Hemato

Comptages: cell count Ery: 768 x10⁵ Leuco: 369 x10⁵ Hematocrite: 0. 58

Htot: Hématies:

Comments:

TV et GB congelés le lendemain

Echantillons / Samples : nbr + étiquette / label

Feces 0
 Poils / Hair 1
 Biopsy 1
 TV / Green tube 1
 TV extract 1
 TR / Red tube 0
 TR extract 0
 Frotti / Blood smear 1

Erythrocytes 1
 Leucocytes 1
 Hematocyte 1
 Jugal 0
 Bucal 1
 Anal 1
 GB (telomeres) 1
 white blood cells
 Stress 1

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"/> <i>under skin</i> H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/> <i>neck</i>	Implant id: n° _____	Type implant: vienna <input type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Comments:				
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"/> <i>under skin</i> H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/> <i>neck</i>	Implant id: n° _____	Type implant: vienna <input type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
Comments:				
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"/> <i>under skin</i> H fin/end: _____	Position: Abdo <input type="checkbox"/> cou <input type="checkbox"/> <i>neck</i>	Implant id: n° _____	Type implant: vienna <input type="checkbox"/> ibutton <input type="checkbox"/> starr-oddi S <input type="checkbox"/> starr-oddi L <input type="checkbox"/>
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 / <i>under skin</i> : _____ N° implant Intra-abdo: _____ Implantation N° implant Intra-abdo: _____ Autres / Other: _____				
Stress PS0 <input type="checkbox"/> délai : _____ Injection zoolétif: Qté / Qty: _____ Heure / Time: _____ capture <i>delay</i> PS1 <input type="checkbox"/> Heure: _____ Injection DM: Qté / Qty: _____ Heure / Time: _____ Time PS2 <input type="checkbox"/> Heure: _____ Injection ACTH: Qté / Qty: _____ Heure / Time: _____ Time PS3 <input type="checkbox"/> Heure: _____ Time				
Comments:				