

Marmottes / Marmots Sassièrè

Date: 21/05/2018 Time: 12h05 N° fiche / sheet: 19 Opérateur / Handling: SP N° individu: 1672 capture id: 10558

Si marmotton: date émergence: ___/___/20___ nbr:

Si implant: # _____

Territoire: <u>E</u> <small>Territory</small>	Recapture yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	Statut social Dominant <input type="checkbox"/> Sub <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
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Measures

Masse corporelle / Body mass (g)	<u>3500</u>
L. mandibule / Jaw (mm)	<u>68,2</u>
L. Patte ant. / Forefoot (mm)	<u>59,7</u>
L. Cubitus / Ulna (mm)	<u>91,6</u>
L. Patte post. / Hindfoot (mm)	<u>82,5</u>
L. TC / Body length (cm)	<u>48,0</u>
Larg. Tête zygomatique / Zygomatic width (mm)	<u>67,0</u>
Larg. Bassin / Basin width (mm)	<u>67.6</u>
Dist. Ano-Génitale (cm) (marmotton/pup only)	<u>101,2</u>

Marking	Transpondeur n° <u>-3011828</u>	Paint <u>X</u> <u>jaune</u>
	Metal n° <u>0894</u> Oreille ear G/Left <input checked="" type="checkbox"/> D/Right <input type="checkbox"/>	
	Plastic n° _____ Oreille ear G/Left <input type="checkbox"/> D/Right <input type="checkbox"/> color _____	

Age	0 Marmotton <input type="checkbox"/> Pup 1 an <input type="checkbox"/> Yearling	2 ans <input type="checkbox"/> 2 years old ≥ 3 ans <input checked="" type="checkbox"/> ≥ 3 y
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Statut Repro	Male <input checked="" type="checkbox"/> Scrotal yes <input type="checkbox"/> no <input checked="" type="checkbox"/> unknown <input type="checkbox"/>	Allaitante yes <input type="checkbox"/> Lactating no <input type="checkbox"/> unknown <input type="checkbox"/>	Gestante yes <input type="checkbox"/> Pregnant no <input type="checkbox"/> unknown <input type="checkbox"/>
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Nombre Echantillons / Number of Samples

Feces parasito <input checked="" type="checkbox"/>	TV / Green tube <input checked="" type="checkbox"/>
Poils / Hair <input checked="" type="checkbox"/>	TR / Red tube <input checked="" type="checkbox"/>
Biopsy <input checked="" type="checkbox"/>	TV extact <input checked="" type="checkbox"/>
Frotti / Blood smear <input checked="" type="checkbox"/>	TR extact <input checked="" type="checkbox"/>

Comments: _____