

Marmottes / Marmots Sassièrè

Date: 29/05/2018 Time: 12h30 N° fiche / sheet: 91 Opérateur / Handling: SP N° individu: 1709 capture id: 10630

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

Si implant: # _____

Territoire: <i>Territory</i>	<u>X</u>	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) 2800

L. mandibule / Jaw (mm) 69,4

L. Patte ant. / Forefoot (mm) 56,4

L. Cubitus / Ulna (mm) 83,7

L. Patte post. / Hindfoot (mm) 74,9

L. TC / Body length (cm) 45,0

Larg. Tête zygomatique / Zygomatic width (mm) 63,3

Larg. Bassin / Basin width (mm) 64,7

~~Dist. Ano-Génitale (cm) (marmotton/pup-only)~~ tibia 95,2

Marking	Transpondeur n°	<u>3037196.</u>			Paint <u>violet</u>
	Metal n°	<u>0843</u>	Oreille ear	G/Left <input type="checkbox"/> D/Right <input checked="" type="checkbox"/>	
	Plastic n°	_____	Oreille ear	G/Left <input type="checkbox"/> D/Right <input type="checkbox"/> color _____	

Age	0 Marmotton	<input type="checkbox"/>	<i>Pup</i>	2 ans	<input type="checkbox"/>	<i>2 years old</i>
	1 an	<input type="checkbox"/>	<i>Yearling</i>	≥ 3 ans	<input checked="" type="checkbox"/>	<i>≥ 3 y</i>

Statut Repro	Male	<input type="checkbox"/>	Scrotal	yes <input type="checkbox"/> no <input type="checkbox"/> unknown <input type="checkbox"/>
	Female	<input checked="" type="checkbox"/>	Allaitante Lactating	yes <input type="checkbox"/> no <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
			Gestante Pregnant	yes <input type="checkbox"/> no <input checked="" type="checkbox"/> unknown <input type="checkbox"/>

Comments:

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"/>