


Marmottes / Marmots Sassièrè

Date: 26/06/2018 Time: 11 h 15 N° fiche / sheet: 150 Opérateur / Handling: SP N° individu: 1858 capture id: 10721

Si marmotton: date émergence: 24/06/2018 nbr: 5

Si implant: # _____

Territoire: <u>6</u> <small>Territory</small>	Recapture yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	Statut social Dominant <input type="checkbox"/> Sub <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
--	---	---

Marking	Transpondeur n°  <small>956000003008907</small>	Paint
	Metal n° <u>0423</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 checked="" type="checkbox"/> <small>Pup</small> 1 an <input type="checkbox"/> <small>Yearling</small>	2 ans <input type="checkbox"/> <small>2 years old</small> ≥ 3 ans <input type="checkbox"/> <small>≥ 3 y</small>
------------	---	--

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

Comments:

Measures		CB	SP
Masse corporelle / Body mass (g)		330	
L. mandibule / Jaw (mm)		43,5	43,6
L. Patte ant. / Forefoot (mm)		36,1	40,2
L. Cubitus / Ulna (mm)		43,0	42,5
L. Patte post. / Hindfoot (mm)		56,3	54,8
<i>tibia</i>		54,5	52,3
L. TC / Body length (cm)		91,0	
Larg. Tête zygomatique / Zygomatic width (mm)		39,0	39,5
Larg. Bassin / Basin width (mm)		24,0	26,0 25
Dist. Ano-Génitale (cm) (marmotton/pup only)		17,3	16,8

Nombre Echantillons / Number of Samples			
Feces parasite	<input type="checkbox"/>		TV / Green tube <input checked="" type="checkbox"/>
Poils / Hair	<input checked="" type="checkbox"/>		TR / Red tube <input type="checkbox"/>
Biopsy	<input checked="" type="checkbox"/>		TV extact <input checked="" type="checkbox"/>
Frotti / Blood smear	<input checked="" type="checkbox"/>		TR extact <input type="checkbox"/>