

# Marmottes / Marmots Sassièrè

Date: 02/07/2018 Time: 10h05 N° fiche / sheet: 176 Opérateur / Handling: SP N° individu: 1881 capture id: 10747

Si marmotton: date émergence: 01/07/2018 nbr:  =

Si implant: # \_\_\_\_\_

Territoire: <u>L</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"/>
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### Measures

Masse corporelle / Body mass (g) 415

L. mandibule / Jaw (mm) 42,9

L. Patte ant. / Forefoot (mm) 43,1

L. Cubitus / Ulna (mm) 45,9

L. Patte post. / Hindfoot (mm) 56,5

L. TC / Body length (cm) 54,0  
*tibia* 23,0

Larg. Tête zygomatique / Zygomatic width (mm) 44,0

Larg. Bassin / Basin width (mm) 26,7

Dist. Ano-Génitale (cm) (marmotton/pup only) 10,9

<b>Marking</b>	Transpondeur n°  956000003038823	Paint
	Metal n° <u>0446</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 _____

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

<b>Statut Repro</b>	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"/>

### 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"/>

Comments: \_\_\_\_\_