

# Marmottes / Marmots Sassièr

Date: 29/05/2019 Time: 13h50 N° fiche / sheet: 218 Opérateur / Handling: SP N° individu: 1734 capture id: 11092

Si marmotton: date émergence: \_\_\_/\_\_\_/20\_\_\_ nbr:

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

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

## Measures

Masse corporelle / Body mass (g) 3800g

L. mandibule / Jaw (mm) 71,1

L. Patte ant. / Forefoot (mm) 61,7

L. Cubitus / Ulna (mm) 92,5

L. Patte post. / Hindfoot (mm) 86,8

tibia  
L. TC / Body length (cm) 47,5 103,9

Larg. Tête zygomatique / Zygomatic width (mm) 67,4

Larg. Bassin / Basin width (mm) 66,5

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

|         |  |               |
|---------|--|---------------|
| Marking | Transpondeur n° <u>3015602</u>   | Paint         |
|         | Metal n° <u>0931</u> Oreille ear G/Left <input checked="" type="checkbox"/> D/Right <input type="checkbox"/> | <u>+ vert</u> |
|         | Plastic n° _____ Oreille ear G/Left <input type="checkbox"/> D/Right <input type="checkbox"/> color _____    |               |

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

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

## 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:

Action      Implantation id:      Position:      Implant id:      Type implant: