


# Marmottes / Marmots Sassièrè

Date: 04/07/2020 Time: 18h30 N° fiche / sheet: 54 Opérateur / Handling: SP N° individu: 2047 capture id: 11854

Si marmotton: date émergence: 01/07/2020 nb:  implant: \_\_\_\_\_

Territoire: <u>Btalus</u> <small>Territory</small>	Connu <small>known</small>	yes <input type="checkbox"/> no <input checked="" type="checkbox"/>	Statut <small>social</small>	Dominant <input type="checkbox"/> Sub <input checked="" type="checkbox"/> unknown <input type="checkbox"/>

Marking	Transpondeur n°  <u>956000006369850</u>	Paint
	Metal n° <u>φ29φ</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 checked="" type="checkbox"/> <small>Pup</small>	2 ans <input type="checkbox"/> <small>2 years old</small>
	1 an <input type="checkbox"/> <small>Yearling</small>	≥ 3 ans <input type="checkbox"/> <small>≥ 3 y</small>

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: \_\_\_\_\_

Measures	
Masse corporelle / Body mass (g)	<u>422</u>
L. mandibule / Jaw (mm)	<u>43,8</u>
L. Patte ant. / Forefoot (mm)	<u>38,0</u>
L. Cubitus / Ulna (mm)	<u>44,2</u>
L. Patte post. / Hindfoot (mm)	<u>57,9</u>
L. Tibia (mm)	<u>54,8</u>
L. TC / Body length (cm)	<u>23</u>
Larg. Tête zygomatique/ Zygomatic width (mm)	<u>40,9</u>
Larg. Bassin / Basin width (mm)	<u>28,8</u>
Dist. Ano-Génitale (mm) (marmotton/pup only)	<u>10,1</u>

Nombre Echantillons / Number of Samples	
Feces parasito <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"/>