

Marmottes / Marmots Sassièrè

Date: 20/05/2022 Time: 12h00 N° fiche / sheet : 28 Opérateur / Handling: RG N° individu: 2112 capture id: 12330

Si marmotton: date émergence: ___ / ___ /20___ nb: implant: _____

Territoire: <u>Fackson</u> <small>Territory</small>	Connu yes <input checked="" type="checkbox"/> <small>known</small> no <input type="checkbox"/>	Statut social Dominant <input type="checkbox"/> Sub <input checked="" type="checkbox"/> unknown <input type="checkbox"/>
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Marking	Transpondeur n° <u>956-6372052</u>	Paint <u>100</u>
	Metal n° <u>0817</u> Oreille <small>ear</small> G/Left <input checked="" type="checkbox"/> D/Right <input type="checkbox"/>	bleu
	Plastic n° _____ Oreille <small>ear</small> G/Left <input type="checkbox"/> D/Right <input type="checkbox"/> color _____	

Age	0 Marmotton <input type="checkbox"/> <small>Pup</small>	2 ans <input type="checkbox"/> <small>2 years old</small>
	1 an <input checked="" type="checkbox"/> <small>Yearling</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 <small>Lactating</small> yes <input type="checkbox"/> no <input type="checkbox"/> unknown <input type="checkbox"/>
		Gestante <small>Pregnant</small> yes <input type="checkbox"/> no <input type="checkbox"/> unknown <input type="checkbox"/>

Measures	
Masse corporelle / Body mass (g)	<u>1450</u>
L. mandibule / Jaw (mm)	<u>56,6</u>
L. Cubitus / Ulna (mm)	<u>66,2</u>
L. Tibia (mm)	<u>82,9</u>
L. TC / Body length (cm)	<u>37</u>
Larg. Tête zygomatique / Zygomatic width (mm)	<u>53,4</u>
Larg. Bassin / Basin width (mm)	<u>49,2</u>
Dist. Ano-Génitale (mm) (marmotton/pup only)	<u> / </u>

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 type="checkbox"/>	TV extact <input checked="" type="checkbox"/>
Frotti / Blood smear <input checked="" type="checkbox"/>	TR extact <input checked="" type="checkbox"/>

Comments: