

Species   
 Observer

AUP#   
 PI

**Endpoint Monitoring Checklist**

|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Experimental Treatment        |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Animal ID#</b>             |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Date                          |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time                          |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance                    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs                |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Body Condition                |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior                      |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Animal ID#</b>             |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Date                          |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time                          |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance                    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs                |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Body Condition                |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior                      |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Animal ID#</b>             |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Date                          |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time                          |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance                    |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs                |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Body Condition                |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior                      |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
|                               |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Significant Indicators</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |

| Appearance |             | Physical Signs |              | Body Condition |            | Behaviour |             |  |  |  |  |
|------------|-------------|----------------|--------------|----------------|------------|-----------|-------------|--|--|--|--|
| N          | Normal      | N              | Normal       | 1              | Emaciated  | 1         | Normal      |  |  |  |  |
| R          | Ruffled     | SR             | Slow resp    | 2              | Thin       | 2         | Immobile    |  |  |  |  |
| H          | Hunched     | FR             | Fast resp    | 3              | Normal     | 3         | Depressed   |  |  |  |  |
| PS         | Porphyrin   | D              | Diarrhea     | 4              | Overweight | 4         | Isolated    |  |  |  |  |
| CE         | Closed Eyes | BF             | Bloody Feces | 5              | Obese      | 5         | Hyperactive |  |  |  |  |
| SE         | Sunken Eyes | SW             | Skin Wounds  |                |            |           |             |  |  |  |  |