**Supplementary File 1: Cage-side Monitoring Checklist Species:** Long-Evans **AUP#:**

**Observer: PI:** Dr.Brian Christie

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Animal ID# |  | | | | | | | | | | | | |
| Date |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Weight (%) |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Animal ID# |  | | | | | | | | | | | | |
| Date |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Weight (%) |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Animal ID# |  | | | | | | | | | | | | |
| Date |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Weight (%) |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Animal ID# |  | | | | | | | | | | | | |
| Date |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Time |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Appearance |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Physical Signs |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Behavior |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Weight (%) |  |  |  |  |  |  |  |  |  |  |  |  |  |

*Record weight 3 days, 7 days, and on the 3rd and 7th day of each week post impact*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Indicators | | | | | |
| Appearance | | Physical Signs | | Behaviour | |
| N | Normal | N | Normal | N | Normal |
| R | Ruffled | SR | Slow resp | IM | Immobile |
| H | Hunched | FR | Fast resp | D | Depressed |
| PS | Porphyrin | D | Diarrhea | IS | Isolated |
| CE | Closed/Squinting Eyes | BF | Bloody Feces | H | Hyperactive |
| SE | Sunken Eyes | SW | Skin Wounds | ES | Excessive stretching |
| FG | Facial Grimace | SH | Shivering | GT | Grinding teeth |
|  |  |  |  | Y | Excessive Yawning |
| *NOTE: “Excessive” refers to >3 events in a 30 s time period.* | | | | | |