EAE Mouse Monitoring Form

Cage ID: _____
PI Name: _____
Protocol #: _____

Date	Mouse ID	NCS Score	Weight (g)	Bladder				Dehydration Level (None/Mild/ Moderate/Severe)	SQ fluids (volume)		Hydrogel (Y/N)	Soft Chow (Y/N)	Comments	Initials
				Check (Y/N)		Expressed (Y/N)								
				AM	PM	AM	PM		AM	PM				