**Supporting Information 5: Imaging Case Report Form**

Date that this CRF was filled out:

Name of Laboratory/PI:

Name of person filling out CRF:

Project name/Identifier:

Animal ID or Study ID (as applicable):

**Type of model system:**

* Mammalian systems (e.g., rodents, other mammals): \_\_\_\_\_\_
* Non-mammalian systems (e.g., *Drosophila*, zebrafish): \_\_\_\_\_\_

**Type of study:**

* Anesthetized: \_\_\_\_\_\_
* Non-anesthetized: \_\_\_\_\_\_

**Endpoint of study:**

* Pre-defined time point: \_\_\_\_\_\_
* Seizure-induced sudden death: \_\_\_\_\_\_
* Other \_\_\_\_\_\_

|  |  |
| --- | --- |
| Area imaged | ☐ Brain ☐ Cerebellum ☐ Brain stem ☐ Diencephalon ☐ Whole brain ☐ Other \_\_\_\_\_\_☐ Other organ ☐ Heart ☐ Lung  ☐ Gut ☐ Other \_\_\_\_\_\_ |
| Lesion found? | ☐ Yes☐ No☐ Unknown |
| Live animal imaged | ☐ Yes☐ No☐ Unknown |
| Type of anesthesia used during imaging (if applicable)  |  |
| When did imaging occur?  | ☐ Prior to animal dying☐ During the process of dying☐ After death |
| Type of neuroimaging | ☐ MRI ☐ Structural, name type  ☐ Functional, name type☐ PET/SPECT ☐ Type of PET/SPECT ☐ Done ictally or interictally? ☐ Other imaging type \_\_\_\_\_\_☐ CT☐ Microscopy  ☐ Two-photon ☐ Confocal  ☐ Light Sheet  ☐ Other \_\_\_\_\_\_ |
| Upload DICOM/sequence |  |
| Was biosensing (neurotransmitter and calcium) imaging done?  | ☐ Yes ☐ Sensor used \_\_\_  ☐ Additional details \_\_\_☐ No☐ Unknown |
| Was voltage imaging done?  | ☐ Yes ☐ Sensor used \_\_\_  ☐ Additional details \_\_\_☐ No☐ Unknown |
| Was animal recorded before imaging? | ☐ Yes (\*see below)☐ No☐ Unknown |
| \*If yes, recording modality? | ☐ EEG☐ Video☐ Video-EEG☐ Other \_\_\_\_\_\_ |
| Was animal recorded during imaging? | ☐ Yes (\*see below)☐ No☐ Unknown |
| \*If yes, recording modality? | ☐ EEG☐ Video☐ Video-EEG☐ Other \_\_\_\_\_\_ |
| Interval between last seizure and imaging |  |
| ECG Monitoring during imaging? | ☐ Yes☐ No☐ Unknown |
| Was animal fasting prior to imaging? | ☐ Yes☐ No☐ Unknown |
| Physiological measurements taken during imaging | ☐ Blood pressure☐ ECG☐ Respiration☐ Other \_\_\_\_\_\_ |
| Was there a challenge done during imaging? | ☐ Yes (\*see below)☐ No☐ Unknown |
| \*If yes, upload a challenge protocol |  |
| Other relevant details to imaging study |  |
| Comments:  |  |

Abbreviations: CRF: Case Report Form; CT: Computed tomography; DICOM: Digital Imaging and Communications in Medicine; ECG: Electrocardiogram; MRI: Magnetic resonance imaging; PET: Positron emission tomography; PI: Principal investigator; SPECT: Single Photon Emission Computed Tomography

Instructions: Please check boxes where applicable. If none of the predetermined options is appropriate, use the default space to specify your answer. This form is to be filled in for one individual animal, unless otherwise specified.

Please refer to more extensive CRFs, where suitable, as developed by the ILAE/AES Joint Translational Task Force:

Report on preclinical Core CDEs

<https://onlinelibrary.wiley.com/doi/10.1002/epi4.12234>

Report on preclinical neurobehavioral CDEs

<https://onlinelibrary.wiley.com/doi/10.1002/epi4.12236>

Report on preclinical physiology CDEs

<https://onlinelibrary.wiley.com/doi/10.1002/epi4.12261>

Report on preclinical pharmacology model CDEs

 <https://onlinelibrary.wiley.com/doi/10.1002/epi4.12254>

Report on preclinical EEG CDEs

<https://onlinelibrary.wiley.com/doi/10.1002/epi4.12260>