

Lab Report For:



VDI Lab Services
4685 Runway St. Ste K Simi Valley, CA 93063
ph: 805-577-6742 fax: 805-426-8115

PATIENT NAME: Rosie Stephanus

VETERINARIAN: Dr. Michael Brown

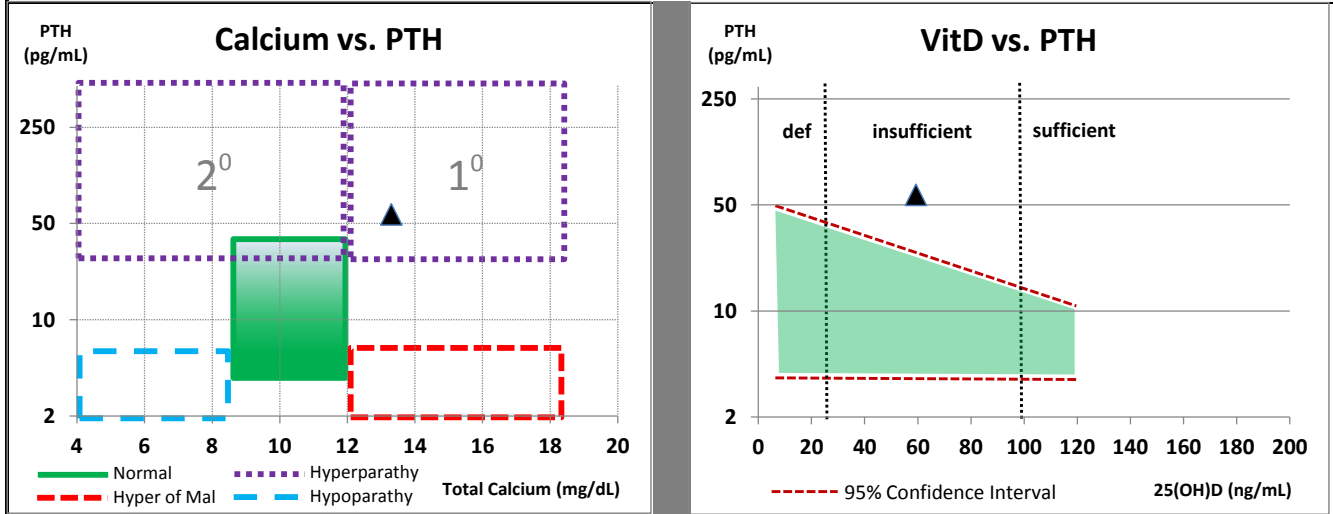
SPECIMEN ID #: 145555 DRAW DATE: 30-Sep-14
SPECIES: Canine RECEIVED DATE: 1-Oct-14
GENDER: Male Neutered SAMPLE TYPE: Serum
BREED: Australian Shepherd COMMENTS: none
AGE: 5.0 PATIENT STAGE: unknown
WEIGHT: 59 lb TREATMENT: none

FACILITY: Main Street Animal Hospital
11 Main Street
Fairview, CA 99999
PH: 555-555-5151
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PTH 1-84 CANINE CALCEMIA PANEL

REPORT DATE: 3-Oct-2014

TEST NAME	RESULT	UNITS	FLAG	REFERENCE INTERVAL
PTH 1-84 1-84 parathyroid hormone	58.3	pg/mL	H	Normal: 4 - 38 Normal w/ Suff VitD: 4 - 15 High (H): ≥ 38.1
VitD 25 hydroxy-vitamin D	59.3	ng/mL	Insuff	Deficient (Def): ≤ 24.9 Insufficient (Insuff): 25.0 - 99.9 Sufficient: 100 - 120
Calcium total calcium	13.3	mg/dL	H	Low (L): <8.5 Normal: 8.5 - 12.0 High (H): ≥ 12.1



Interpretive Comment

PTH 1-84 CANINE CALCEMIA PANEL is a diagnostic tool to assist in the workup of hyper and hypo calcemia and includes PTH 1-84 which measures the complete PTH peptide sequence and is unaffected by PTH fragments; a particular problem in renal disease. To maintain calcium homeostasis, PTH and VitD work in concert to increase or decrease calcium absorption and/or resorption. PTH and VitD are inversely related; as VitD increases, PTH decreases.

Calcium vs. PTH

Normal: Population based reference interval. The darker shaded area represents where the majority of healthy dogs should plot.
Hypercalcemia of Malignancy: This area reflects PTH-independent hypercalcemia for which malignant neoplasia is often suspect. Other conditions includes certain granulomatous diseases, Addison's disease, hyperthyroidism and vitamin D intoxication.
Primary (1) Hyperparathyroidism: This area reflects PTH-dependent hypercalcemia and due to an over-production of PTH - typically caused by a benign or malignant parathyroid tumor and in some instances 25(OH)D deficiency.
Secondary (2) Hyperparathyroidism: This area reflects PTH-independent normo/hypocalcemia. Conditions causing secondary hyperparathyroidism includes 25(OH)D deficiency and kidney disease.
Hypoparathyroidism: This area reflects PTH-dependent hypocalcemia and caused by insufficient amounts of PTH. Causes include damage to the parathyroid gland (trauma, chemo drugs, infection) and in certain autoimmune disorders.

VitD vs. PTH

There is a normal inverse relationship between 25(OH)D and PTH; the shaded area represents the 95% confidence interval. The normal range of PTH tightens as VitD sufficiency is attained. The two graphs are useful in diagnostic workup. **Call VDI for consultation.**

Interpretive comments are general in nature and in absence of detailed knowledge of patient status or treatment. For more information on specific cases, please contact VDI.

Tech: RR