

Calcemia Panel Report



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

PATIENT NAME: Kobe Martin
SPECIMEN ID: 555555
SPECIES: Canine
GENDER: Male Neutered
AGE: 11.0
WEIGHT: 3.8 kg
BREED: Maltese

MRN: 1071790
DRAW DATE: 31-Jul-21
RECEIVED DATE: 6-Aug-21
REPORT DATE: 6-Aug-21
SAMPLE TYPE: Dried Serum - 2

VETERINARIAN:
FACILITY:
PH:
FAX:

PTH 1-84 CANINE CALCEMIA PANEL

Relevant Context (provided on TRF)

<input type="checkbox"/> Corticosteroids	<input type="checkbox"/> Antibiotics	<input type="checkbox"/> Suspected Mass	<input type="checkbox"/> Yes	Hypercalcemia
<input type="checkbox"/> NSAIDs	<input type="checkbox"/> Anemia	<input type="checkbox"/> Enlarged Node	<input type="checkbox"/>	B12 Deficiency
<input type="checkbox"/> Chemotherapy	<input type="checkbox"/> GI Signs	<input type="checkbox"/> Fever	<input type="checkbox"/>	Known Disease

Calcium

Normal

9.7

Total Calcium (mg/dL)

Low (L): <8.5
 Normal: 8.5 - 12.0
 High (H): ≥ 12.1

PTH

High

364.5

PTH 1-84 (pg/mL)

Normal: 4 - 38
 Normal w/ Suff VitD: 4 - 15
 High (H): ≥ 38.1

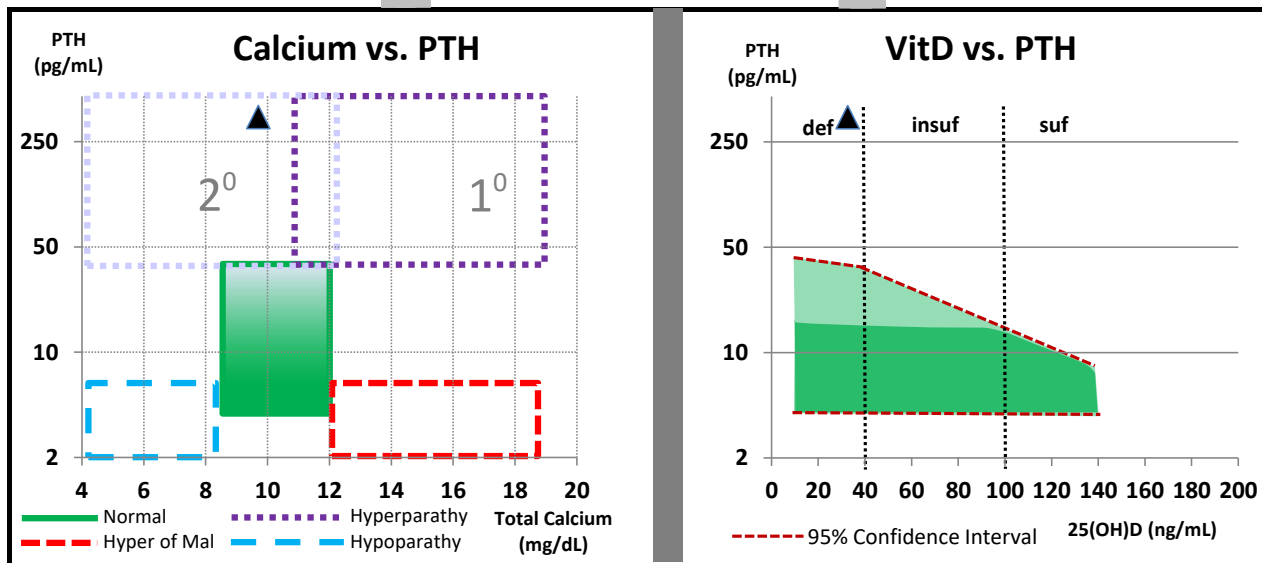
Vitamin D

Deficient

32.6

25OHD (ng/mL)

Deficient (Def): ≤ 40.0
 Insufficient (Insuff): 40.1 - 99.9
 Sufficient: 100 - 150



Interpretive Comment

Patient has PTH-independent normocalcemia with PTH values too high in relation to vitamin D levels. Conditions causing secondary hyperparathyroidism includes 25(OH)D deficiency and kidney disease.

Patient is found to be vitamin D deficient and should be supplemented per recommendations on supplemental page

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.

Vitamin D Report

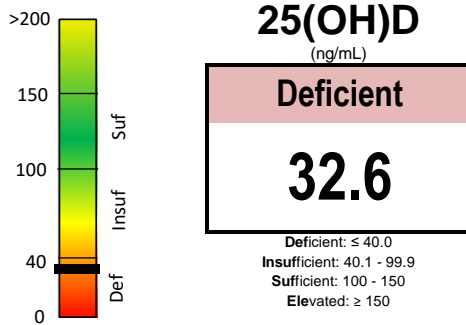


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Dose at time of draw:

Not Provided

Increase dose by:

500 IU/day



New Recommended Dose Range

Low End Sufficiency (~100 ng/mL)	High End Sufficiency (~130 ng/mL)
500 IU/day	700 IU/day
For most patients without underlying conditions, or taking corticosteroids	For patients that warrant a higher VitD level and/or those on corticosteroids.

Patient History

ID	Date	Result ng/mL	Known Dose iu/day

Interpretive Comments

Your patient is found to be deficient. Deficiency greatly increases risk of developing other serious diseases. Current supplementation was not provided, so increase (or start) patient on D3 per recommendations and retest in 8-10 weeks or 4 months for obese patients.

RECOMMEND EVALUATING SERUM MAGNESIUM LEVELS- CONTACT VDI

If any of the following occur, wait 2 months from the date of change, then retest:

- | | |
|--|--|
| Major Diet Change | Supplementation is stopped for longer than 4 weeks |
| Change in Health Status (eg PLE/PLN) | Patient is put on Corticosteroids |
| Change of Vitamin D supplement or daily treats | Patient is put on NSAIDS |

Supplementation Guide

Total Dose Recommended:		500 IU/day ↔ 700 IU/day		
PRODUCT NAME	PRODUCT STRENGTH	PRODUCT FORMAT	Low End Dose	High End Dose
RxD3 <i>Rx Vitamins</i>	100 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/> 5 drops/day	<input type="checkbox"/> 7 drops/day
RxD3 Forte <i>Rx Vitamins</i>	500 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/> 1 drop/day	<input type="checkbox"/> 1 drop/day

Retest NO SOONER THAN:

October 15, 2021