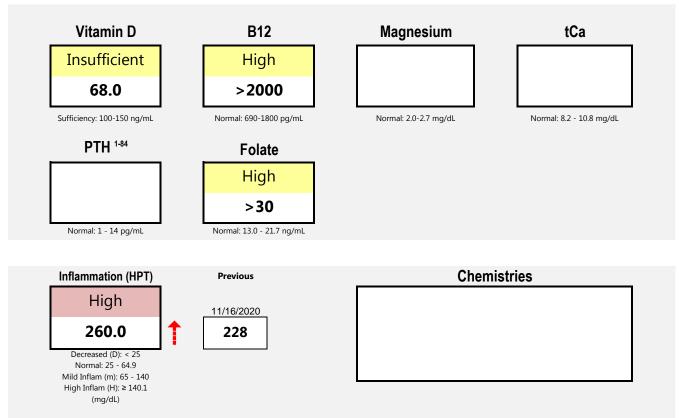


PATIENT NAME:	Kobe Martin	MRN:	1060880	VETERINARIAN:
SPECIMEN ID:	555555	DRAW DATE:	4-Aug-21	FACILITY:
SPECIES:	Feline	RECEIVED DATE:	9-Aug-21	
GENDER:	Female Spayed	REPORT DATE:	9-Aug-21	
AGE:	7.8	SAMPLE TYPE:	Dried Serum - 2	PH:
WEIGHT:	11.1 lb			FAX:
BREED:	DSH			

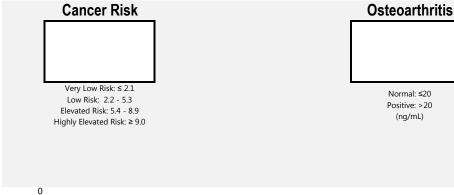
Wellness Dashboard

Feline Wellness Report



Patient is in a heightened inflammatory state. Refer to differential list for possible source.

Additional Tests (canine only)





Differential List

PATIENT NAME:	Kobe Martin	MRN:	1060880	VETERINARIAN:
SPECIMEN ID:	555555	DRAW DATE:	4-Aug-21	FACILITY:
SPECIES:	Feline	RECEIVED DATE:	9-Aug-21	
GENDER:	Female Spayed	REPORT DATE:	9-Aug-21	
AGE:	7.8	SAMPLE TYPE:	Dried Serum - 2	PH:
WEIGHT:	11.1 lb			FAX:
BREED:	DSH			1703.

The following differential list is modified based on:

Outside Ref Interval	Within Ref Interval		Not Performed	Impacts List
<u>Specialty</u>	<u>Chemist</u>	ries	Other	<u>Modifiers</u>
Cancer Risk		O Total Protein		Age
		◯ Globulin		Breed
HPT		○ AG Ratio		Medication
◯ HA		Calcium		
B 12	─ Creatinine	BUN/Creat Ratio		N/A
Folate	◯ Glucose	O Total Bili		
O PTH 1-84				

The list of possible sources are common inflammatory diseases that correspond to the level of inflammation in this patient. Potential actions below may aid in further differential diagnosis. **BASED UPON CLINICAL PRESENTATION, SOME SOURCES CAN BE IMMEDIATELY EXCLUDED**.

Possible Source

(in decreasing probability)

Potential Action based on clinical relevance

Actions are organized by least invasive/expensive first

Myositis	 physicial examination
Cancer	 TK1 Cancer Panel (VDI), imaging, biopsy
IMPA	 imaging, synovial fluid analysis
Kidney disease (non-cancer)	 creat (VDI), PU/PD, urine analysis, SDMA, UP/UC ratio, imaging
Fungal	 serological panel, culture, imaging
Infection	 left shift, culture, imaging
Parasites	 serological panel, PCR, imaging
IBD	 rule-in through exclusion (CRP/HPT α severity), imaging, biopsy

Potential Action

code

Comments and recommendations are made in the absence of clinical background on the patient. The list of inflammatory diseases and diagnostic procedures are not exhaustive. For more detailed discussion regarding results, comments, or recommendations, please contact VDI at 805-577-6742.



400 IU/day

For patients that warrant a higher VitD level

and/or those on corticosteroids.

Vitamin D Report

			·		
PATIENT NAME: SPECIMEN ID: SPECIES: GENDER: AGE: WEIGHT: BREED:	Kobe Martin 555555 Feline Female Spayed 7.8 11.1 lb DSH	MRN: DRAW DATE: RECEIVED DATE: REPORT DATE: SAMPLE TYPE:	1060880 4-Aug-21 9-Aug-21	VETERINARIAN: FACILITY: PH: FAX:	
>200	25(OH)C		Dose at time of dra	w:	Increase dose by:
150 5 100	Insufficien 68.0	t	0 IU/day	-T	200 IU/day
Def Insuf	Deficient: ≤ 40.0 Insufficient: 40.1 - 99. Sufficient: 100 - 150 Elevated: ≥ 150	9	New Reco	ommendec	I Dose Range
	ent History		Low End Sufficience (~100 ng/mL)	у	High End Sufficiency (~130 ng/mL)
ID Date	Result Known ng/mL iu/c				

Interpretive Comments

11/16/2020

122.7

0

433268

Your patient is found to be insufficient. Insufficiency increases risk of developing other serious diseases. Supplement with D3 per recommendations and retest in 8-10 weeks or 4 months for obese patients.

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

200 IU/day

For most patients without underlying

conditions, or taking corticosteroids

Supplementation Guide

Total Dos	e Recommended:	200 IU/day	400 IU/d	lay
PRODUCT NAME	PRODUCT STRENGTH	PRODUCT FORMAT	Low End Dose	High End Dose
RxD3 Rx Vitamins	100 IU/ drop	Liquid Drops Applied to food	🔲 2 drops/day	🔲 4 drops/day
RxD3 Forte Rx Vitamins	500 IU/ drop	Liquid Drops Applied to food		🔲 1 drop/day

Retest NO SOONER THAN:

October 18, 2021



PATIENT NAME: SPECIMEN ID: SPECIES: GENDER: AGE: WEIGHT: BREED:	Kobe Martin 555555 Feline Female Spayed 7.8 11.1 lb DSH	MRN: DRAW DATE: RECEIVED DATE: REPORT DATE: SAMPLE TYPE:	9-Aug-21 9-Aug-21	VE	TERINARIAN: FACILITY: PH: FAX:		
>2000 ±		in	B12 Dose a	at time of draw	:	Increas	e B12 dose by:
1800 z 690 S	High >2000)	0 m	cg/day	Т	0 r	ncg/day
	Low (L): <690 Low Normal (LN): 690 - Normal (N): 690 - 180 High (H): ≥1800			ew Reco	mmende	ed B12	Dose
	In unfasted patients, actua values may be lower, whic	h may	Fasted	I Sample?		Unkno	wn
<1.0	impact dose recommenda	ation.		C) mcg/d	ay	
>30 x 21.7	Folate (ng/mL) High		B12 dosing rea		e for daily suppleme health or diet requi		inue indefinitely unless
13.0 z	>30		Patient Histor	у			
	•••		ID	Date	B12 pg/mL	Folate ng/mL	Known B12 Dose mcg/day
	Low (L) : <13.0 Normal (N) : 13.0 - 21. High (H) : > 21.7	7	433268	11/16/2020	1000.6		0
	e vs Cobalamin Plot	t					
	SIBO ietary Folate	Excess Supplementation	Comments Patient h	as high B12 and	l high Folate In	the unsumpl	emented patient this
Low Dietary B12 EPI/IBD/LSA Distal SI Damage	NORMAL	заррешентации			t, medication, an		
Small Intestinal Damage	Proximal SI Damage ysbiosis Antibiotics	Proximal SI Damage Excess B12 Supplementation					
ج EPI/IBD/LSA D Low	Cobalamin	Antibiotics High					

Total B12 Dose Recommended:			0 mcg/day		
PRODUCT NAME	PRODUCT STRENGTH	PRODUCT FORMAT	Drops Dose	mL Dose	
RxB12 Rx Vitamins	250 mcg/mL 6.5 mcg/drop	Liquid Drops Applied to food			
RxB12 Forte Rx Vitamins	1000 mcg/mL 33 mcg/drop	Liquid Drops Applied to food			