



PATIENT NAME: Kobe Martin
SPECIMEN ID: 555555
SPECIES: Canine
GENDER: Female Spayed
AGE: 5.0
WEIGHT: 113 lb
BREED: Bernese Mountain Dog

MRN: 1072178
DRAW DATE: 16-Aug-21
RECEIVED DATE: 20-Aug-21
REPORT DATE: 24-Aug-21
SAMPLE TYPE: Dried Serum - 2

VETERINARIAN:
FACILITY:
PH:
FAX:

Pre-Stem Cell Therapy Panel

REPORT DATE: 24-Aug-2021

Relevant Context (provided on TRF)

<input type="checkbox"/> Corticosteroids	<input type="checkbox"/> Antibiotics	<input type="checkbox"/> Suspected Mass	<input type="checkbox"/> Hypercalcemia
<input type="checkbox"/> Yes 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

Neoplasia Index™

Negative
3.5
Index

Negative: <5.3
Equivocal: 5.3
Positive: 5.4 - 8.9
High Positive: ≥ 9.0



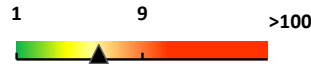
Negative Predictive Value
0.98

Interpretive Comments

The Neoplasia Index™ is negative because TK1 is only mildly elevated with no inflammation (CRP). Long-term use of corticosteroids (>6mos) usually has no influence on cancer proliferation (ie, TK1) and therefore this can be considered a "rule-out" for neoplasia. Inflammation however will continue to be suppressed while the patient is on corticosteroids and therefore inflammation (CRP) could be higher. It is important that there are no detectable masses present.

TK1
Equivocal
4.2
U/L

Normal: ≤ 2.9
Equivocal (E): 3.0 - 8.9
High (H): ≥ 9.0

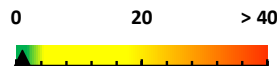


Interpretive Comments

Slight elevation of TK1 in dogs with osteoarthritis is a common finding due to the presence of degenerative joint disease.

cCRP
Normal
1.0
mg/L

Normal: ≤ 3.9
Low Inflamm (L): 4 - 9.9
Mod Inflamm (M): 10 - 39.9
High Inflamm (H): ≥ 40



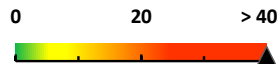
Interpretive Comments

CRP is within the normal interval and below the critical threshold of 4mg/L. The use of corticosteroids, NSAIDS, or other anti-inflammatory agents can suppress CRP.

Hyaluronic Acid

Positive
40.0
ng/mL

Negative: ≤ 20
Positive: > 20



Comments

Hyaluronic acid is highly elevated and indicative of severe degenerative joint disease. This is useful as a baseline for therapeutic monitoring.

Contextual Comments

code 2113

Vitamin D Report



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

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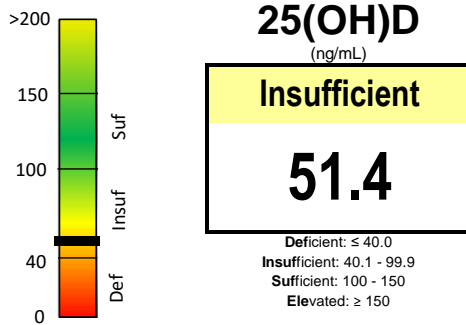
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Dose at time of draw:

Not Provided

Increase dose by:

5200 IU/day



New Recommended Dose Range

Low End Sufficiency
(~100 ng/mL)

High End Sufficiency
(~130 ng/mL)

5200 IU/day

8400 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 insufficient. Insufficiency increases risk of developing other serious diseases. Current supplementation was not provided, so increase/start patient on D3 supplement 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

Change in Health Status (eg PLE/PLN)

Change of Vitamin D supplement or daily treats

Supplementation is stopped for longer than 4 weeks

Patient is put on Corticosteroids

Patient is put on NSAIDS

Supplementation Guide

Total Dose Recommended:

5200 IU/day

8400 IU/day

PRODUCT NAME

PRODUCT STRENGTH

PRODUCT FORMAT

Low End Dose

High End Dose

RxD3

Rx Vitamins

100 IU/ drop

Liquid Drops

Applied to food

1.75 mL/day

2.75 mL/day

RxD3 Forte

Rx Vitamins

500 IU/ drop

Liquid Drops

Applied to food

10 drops/day

0.5 mL/day

Retest NO SOONER THAN:

November 2, 2021