

Gastrointestinal Disease Report



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

PATIENT NAME: Cedar McConnell
SPECIMEN ID: 172324
SPECIES: Feline
GENDER: Male Neutered
AGE: 5.0
WEIGHT: 9.78 lb
BREED: Abyssinian

MRN: 1077563
DRAW DATE: 10-Jan-22
RECEIVED DATE: 13-Jan-22
REPORT DATE: 26-Feb-22
SAMPLE TYPE: Frozen Serum

VETERINARIAN:
FACILITY:
PH:
FAX:

Gastrointestinal Disease - Dashboard

<p>HPT</p> <p>High</p> <p>251.1</p> <p>Normal: 25 - 64.9</p>	<p>B12</p> <p>High</p> <p>1845.0</p> <p>Normal: 268-1478 pg/mL</p>	<p>Folate</p> <p>Normal</p> <p>8.0</p> <p>Normal: 7.3 - 21.6 ng/mL</p>	<p>Vitamin D</p> <p>Sufficient</p> <p>126.0</p> <p>Sufficiency: 100-150 ng/mL</p>
<p>TK1</p> <p>Highly Elevated</p> <p>29.5</p> <p>Normal: <3.0 U/L</p>	<p>Neoplasia Index</p> <p>High Positive</p> <p>8.7</p> <p>Negative: ≤ 5.2</p>	<p>fPL</p> <p>Normal</p> <p>Normal</p> <p>Idexx SNAP fPL</p>	<p>Magnesium</p> <p>Normal</p> <p>2.6</p> <p>Normal: 2.0-2.7 mg/dL</p>
<p>Total Protein</p> <p>High</p> <p>9.4</p> <p>Range: 6.3 - 8.8 g/dL</p>	<p>Albumin</p> <p>Normal</p> <p>3.7</p> <p>Range: 2.5 - 3.9 g/dL</p>	<p>Globulin</p> <p>Normal</p> <p>5.7</p> <p>Range: 2.9 - 5.9 g/dL</p>	<p>A/G Ratio</p> <p>Normal</p> <p>0.6</p> <p>Range: 0.4 - 1.5</p>

Interpretation of results based upon patient exhibiting GI signs

Chronic Enteropathy 4641

Adv LSA/ LSA Thorax	High Confidence
Pattern consistent with advanced LSA and/or LSA of the thorax. Highly elevated TK1 in young, FeLV+ cats often have LSA of the thorax - please evaluate patient.	

Pancreatitis 1143

Not Detected	No Action
Pattern is inconsistent with pancreatitis.	

Protein Losing Enteropathy 1311.

Normal	No Action
There is no evidence the patient has PLE.	

Essential Vitamins 1141.30

Normal	No Action
Patient has no deficiencies detected.	

Reviewer Comments



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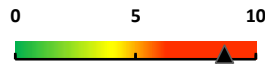
Relevant Context (provided on TRF)

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

NI fGILSA

High Positive
8.7
Index



Negative: ≤ 5.2
Equivocal: 5.3
Positive: 5.4 - 8.1
High Positive: ≥ 8.2

Interpretive Comments

Results are consistent with LSA

Patient has high positive Neoplasia Index indicative of lymphoma. This profile of TK1/ HPT/ B12 is consistent with advanced LSA and/or LSA of the thorax*. An ultrasound is recommended.

TK1

Highly Elevated
29.5
U/L



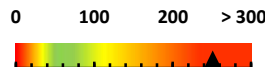
Normal: ≤ 3.0
Equivocal: ≤ 6.6
High (H): 6.6 - 20.0
Highly Elevated (HE): ≥ 20.1

Interpretive Comments

Highly elevated TK1 (>25U/L) can be found in advanced GI lymphoma and/or LSA of the thorax. High levels of inflammation is consistent with advanced GI disease.

HPT

High
251.1
mg/dL



Decreased (D): < 25
Normal: 25 - 64.9
Mild Inflamm (m): 65 - 225
High Inflamm (H): ≥ 225.1

Cobalamin

High
1845.0
pgm/L

Folate

Normal
8.0
ng/mL

Low (L): <268
Low Normal (LN): 268 - 400
Normal (N): 268 - 1478
High (H): ≥1479

Low (L): <7.3
Normal (N): 7.3 - 21.6
High (H): > 21.6

Interpretive Comments

Patient has High B12 with normal Folate. Most commonly associated with excess supplementation or dietary intake.

Contextual Comments (if needed)

profile code 43350 ADV LSA and/or LSA THORAX

* The classification of LSA is based upon test result profiling and should not be considered definitive. It is most reliable in the untreated cat. Patient disease classification will be affected if the patient is on corticosteroids or other anti-inflammatory or anti-proliferative medications. An ultrasound is always recommended and should be supportive of test results. If ultrasound and test results conflict, it is recommended the test be repeated in 3-4 weeks with the patient off of corticosteroids. If the test requisition indicates the patient is on corticosteroids, the Neoplasia Index will be adjusted for the effect medication may have on TK1/HPT. For definitive disease classification (eg, small cell, large cell), a biopsy is required.

Vitamin D Report

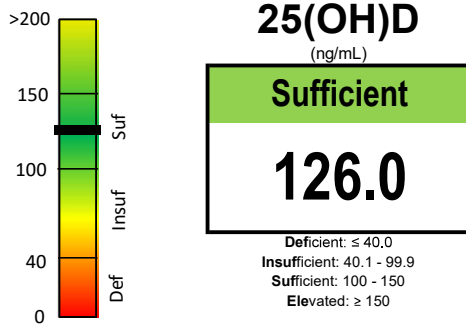


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Dose at time of draw:

0 IU/day

Change dose by

0 IU/day



New Recommended Dose Range

Low End Sufficiency
(~100 ng/mL)

High End Sufficiency
(~130 ng/mL)

Not Required

Not Required

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 sufficient. Continue on the same diet and retest in 1 year unless one of the conditions below is met.

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)

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:

Not Required

Not Required

PRODUCT NAME	PRODUCT STRENGTH	PRODUCT FORMAT	Low End Dose	High End Dose
RxD3 Rx Vitamins	100 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	<input type="checkbox"/>
RxD3 Forte Rx Vitamins	500 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	<input type="checkbox"/>

B12 (Cobalamin) Report

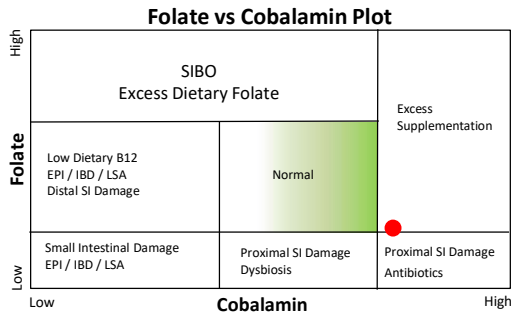
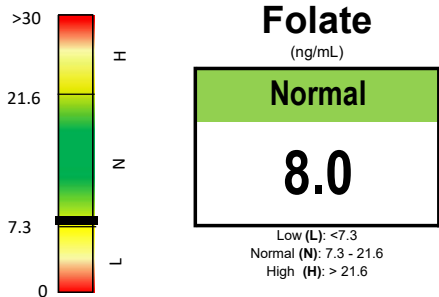
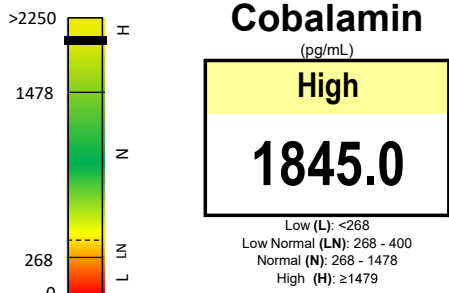


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B12 Dose at time of draw: 0 mcg/day
Increase B12 dose by: 0 mcg/day



New Recommended B12 Dose

Fasted Sample?	Fasted
0 mcg/day	
B12 dosing recommendations are for daily supplementation. Continue indefinitely unless changes in health or diet require modification.	

Patient History

ID	Date*	B12 pg/mL	Folate ng/mL	Known B12 Dose mcg/day

*B12 results run prior to 9/7/21 use a different reference range and do not align with current reference range. Contact VDI with questions.

Comments

Patient has High B12 with normal Folate. Most commonly associated with excess supplementation or dietary intake.

Total B12 Dose Recommended:

0 mcg/day

PRODUCT NAME	PRODUCT STRENGTH	PRODUCT FORMAT	Drops Dose	mL Dose
RxB12 <i>Rx Vitamins</i>	250 mcg/mL 6.5 mcg/drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	<input type="checkbox"/>
RxB12 Forte <i>Rx Vitamins</i>	1000 mcg/mL 33 mcg/drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	<input type="checkbox"/>

Magnesium Report

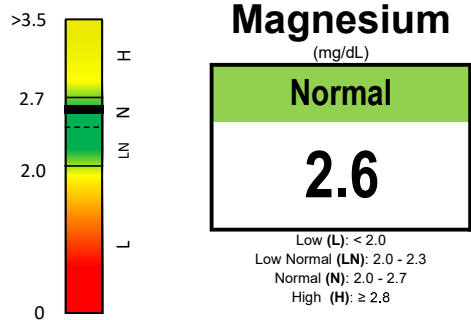


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Dose at time of draw:

0 mg/day

Increase Dose By:

0 mg/day



New Recommended Dose

MagRatio	Not Available
0 mg/day	
Magnesium dosing recommendations are for daily supplementation. Continue indefinitely unless changes in health or diet require modification.	

Patient History

ID	Date	Result mg/dL	Known Dose mg/day

Interpretive Comments

313

Patient has Normal Magnesium levels. Maintain current diet and supplementation retest in 1 year unless diet or health changes occur.

Supplementation Guide

Total Dose Recommended:		0 mg/day		
PRODUCT NAME	PRODUCT STRENGTH	PUMP VOLUME	PRODUCT FORMAT	Dose
Magnesium Lotion for Pets <i>Magnum Solace</i>	50 mg/mL	0.23 mL/pump 11.5 mg/pump	Topical Lotion	<input type="checkbox"/>
Other				<input type="checkbox"/>

Retest NO SOONER THAN: