

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: Tyson Choa
SPECIMEN ID: 467558
SPECIES: Feline
GENDER: Male Neutered
AGE: 14.0
WEIGHT: 7.5 lb
BREED: Birman

MRN: 1087767
DRAW DATE: 21-Jul-22
RECEIVED DATE: 5-Aug-22
REPORT DATE: 26-Aug-22
SAMPLE TYPE: Dried Serum - 2

VETERINARIAN:
FACILITY:
PH:
FAX:

Gastrointestinal Disease - Dashboard

Gastrointestinal Disease - Dashboard				Related Tests	
B12 Low 256.0 Normal: 268-1478 pg/mL	Folate Normal 9.0 Normal: 7.3 - 21.6 ng/mL	Vitamin D Insufficient 58.0 Sufficiency: 100-150 ng/mL	Magnesium Normal 2.4 Normal: 2.0-2.7 mg/dL	Allergies Not Tested	
HPT Mild 139.4 Normal: 25 - 64.9	TK1 Normal 1.8 Normal: <3.0 U/L	Neoplasia Index Negative 2.5 Negative: ≤ 5.2	fPL Normal 2.6 Normal: ≤ 3.5		Addison's Cortisol Not Tested Normal: 2-9 ug/dL
Total Protein Normal 6.3 Range: 6.3 - 8.8 g/dL	Albumin Normal 2.9 Range: 2.5 - 3.9 g/dL	Globulin Normal 4.3 Range: 2.9 - 5.9 g/dL	A/G Ratio Normal 0.7 Range: 0.4 - 1.5		

Interpretation of results based upon patient exhibiting GI signs

Chronic Enteropathy 2231

IBD	High Confidence
Pattern is consistent with IBD. An ultrasound is recommended.	

Pancreatitis 1112

Not Detected	No Action
Pattern and negative pancreatic lipase are inconsistent with pancreatitis.	

Protein Losing Enteropathy 2111

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

Essential Vitamins 2131

Deficiencies Detected	Suppl Warranted
Patient has been found to have deficiencies with recommended supplementation on attached report. Low folate may be due to proximal small intestinal damage or dysbiosis. Please evaluate patient.	

Reviewer Comments



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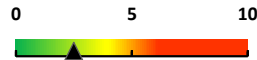
REPORT DATE: 26-Aug-2022

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"/> Yes GI Signs	<input type="checkbox"/> Fever	<input type="checkbox"/> Known Disease

Neoplasia Index®

fGI.LSA
Negative
2.5
Index

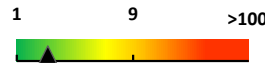


Negative: ≤ 5.2
Equivocal: 5.3
Positive: 5.4 - 8.1
High Positive: ≥ 8.2

Interpretive Comments

Results are INCONSISTENT with GI LSA
Patient's Neoplasia Index is negative and inconsistent with intestinal lymphoma. This profile of TK1/ HPT/ B12 is consistent with inflammatory bowel disease. An ultrasound is recommended.

TK1
Normal
1.8
U/L



Normal: ≤ 3.0
Equivocal: ≤ 6.6
High (H): 6.6 - 25.0
Highly Elevated (HE): ≥ 25.1

Interpretive Comments

Results are consistent with: IBD

TK1 is within the reference interval with a mild inflammatory response and commonly found in inflammatory bowel disease. If the patient is on corticosteroids, both TK1 and HPT may be higher as these medications suppress the inflammatory and proliferative response.

HPT
Mild
139.4
mg/dL



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

Cobalamin Low 256.0 pgm/L	Folate Normal 9.0 ng/mL
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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 low B12 and normal Folate levels. This is consistent with small intestinal damage, possibly due to IBD/EPI/LSA or low dietary B12. Supplement as indicated and retest in 8-10 weeks.

Contextual Comments (if needed)

profile code 10220 IBD

* 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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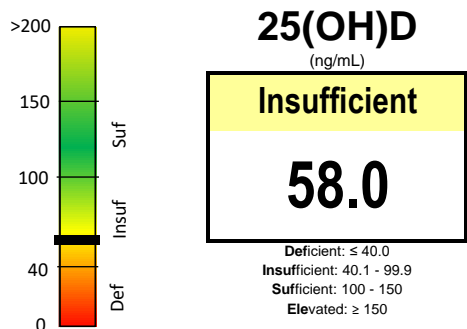
PH:

WEIGHT: 7.5 lb

SAMPLE TYPE: Dried Serum - 2

FAX:

BREED: Birman



Dose at time of draw:

Not Provided

Increase 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
<small>For most patients without underlying conditions, or taking corticosteroids</small>	<small>For patients that warrant a higher VitD level and/or those on corticosteroids.</small>

Patient History

ID	Date	Result ng/mL	Known Dose iu/day

Interpretive Comments

Your patient is found to be insufficient with current supplementation. Insufficiency greatly increases risk of developing other serious diseases. If patient is on medications such as Corticosteroids or NSAIDs, it may impact Vitamin D metabolism and/or absorption. Increase dose 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) | Patient is put on Corticosteroids |
| Change of Vitamin D supplement or daily treats | 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 <i>Rx Vitamins</i>	100 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	<input type="checkbox"/>
RxD3 Forte <i>Rx Vitamins</i>	500 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	<input type="checkbox"/>

Retest NO SOONER THAN: November 4, 2022

B12 (Cobalamin) Report

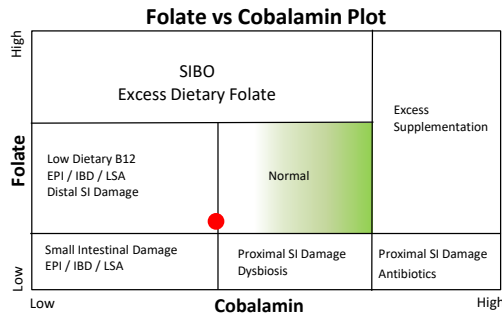
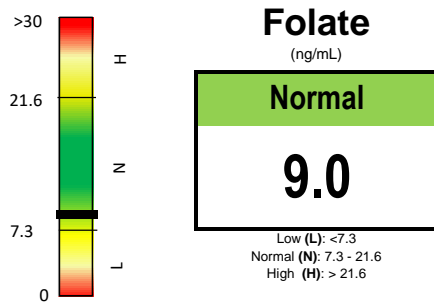
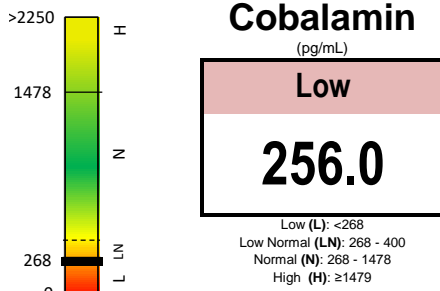


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B12 Dose at time of draw: Not Provided
Increase B12 dose by: 0 mcg/day

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 low B12 and normal Folate levels. This is consistent with small intestinal damage, possibly due to IBD/EPI/LSA or low dietary B12. Supplement as indicated and retest in 8-10 weeks.

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"/>

Retest NO SOONER THAN: October 14, 2022

Magnesium Report

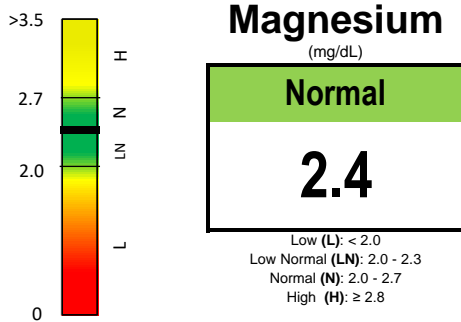


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Dose at time of draw:

Not Provided

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 m g/dL	Known Dose mg/day

Interpretive Comments

324

Patient has normal Magnesium levels. Maintain current diet and supplementation (if any) and retest in one year unless a diet or health change occurs.

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: