

Canine Wellness Report



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

PATIENT NAME: Skye
SPECIMEN ID: 472407
SPECIES: Canine
GENDER: Female
AGE: 11.0
WEIGHT: 55 lb
BREED: Labrador Retriever

MRN: 1090717
DRAW DATE: 23-Sep-22
RECEIVED DATE: 28-Sep-22
REPORT DATE: 7-Oct-22
SAMPLE TYPE: Dried Serum - 2

VETERINARIAN:
FACILITY:
PH:
FAX:

Wellness Dashboard

Wellness Dashboard containing six panels: Vitamin D (Insufficient, 79.9), B12 (Low Normal, 261.5), Magnesium (Low Normal, 1.9), tCa (empty), PTH (empty), and Folate (Normal, 13.3). Each panel includes a color-coded status box, a numerical value, and a normal range.

Section containing Inflammation (CRP) with a legend (Optimal: <= 2.0, Normal: <= 3.9, etc.), a Previous result box, and Chemistries (CAR not performed).

Additional Tests

Additional Tests section containing Cancer Risk (Very Low Risk: <= 2.1, etc.) and Osteoarthritis (HA) (Normal: <= 20, Positive: > 20) with Previous result boxes.

501

need consult? email consult@vdi lab.com

Vitamin D Report

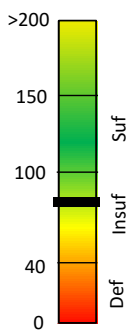


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25(OH)D (ng/mL)

Insufficient
79.9

Deficient: ≤ 40.0
Insufficient: 40.1 - 99.9
Sufficient: 100 - 150
Elevated: ≥ 150

Dose at time of draw:

0 IU/day

Increase dose by:

900 IU/day



New Recommended Dose Range

Low End Sufficiency (~100 ng/mL)	High End Sufficiency (~130 ng/mL)
900 IU/day	2200 IU/day
<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 - need consult? email consult@vdlab.com

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) | Patient is put on Corticosteroids |
| Change of Vitamin D supplement or daily treats | Patient is put on NSAIDS |

Supplementation Guide

Total Dose Recommended:		900 IU/day ↔ 2200 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"/>	9 drops/day	<input type="checkbox"/> 0.75 mL/day
RxD3 Forte <i>Rx Vitamins</i>	500 IU/ drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/>	2 drops/day	<input type="checkbox"/> 4 drops/day

Retest NO SOONER THAN: December 16, 2022

B12 (Cobalamin) Report

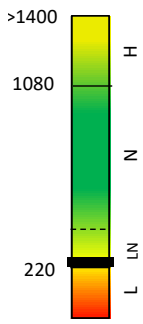


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Cobalamin (pg/mL)

Low Normal
261.5

Low (L): <220
Low Normal (LN): 220 - 400
Normal (N): 220 - 1080
High (H): ≥1080

B12 Dose at time of draw:

0 mcg/day

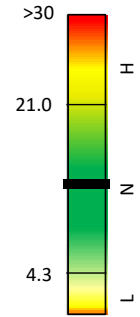
Increase B12 dose by:

348 mcg/day



New Recommended B12 Dose

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



Folate (ng/mL)

Normal
13.3

Low (L): <4.3
Normal (N): 4.3 - 21.0
High (H): > 21.0

Patient History

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

Folate vs Cobalamin Plot

Folate	High	SIBO Excess Dietary Folate	Excess Supplementation
	Normal	Low Dietary B12 CP / EPI / IBD / LSA Distal SI Damage	Excess Supplementation Cholangitis
	Low	Small Intestinal Damage CP / EPI / IBD / LSA	Proximal SI Damage Antibiotics / LSA / Cholangitis
		Low	High

Comments

Patient has low normal B12 levels. Supplement as indicated and retest in 8-10 weeks.

Cobalamin
chart assumes unsupplemented patient

Total B12 Dose Recommended:

348 mcg/day

PRODUCT NAME	PRODUCT STRENGTH	PRODUCT FORMAT	Drops Dose	mL Dose
RxB12 <i>Rx Vitamins</i>	250 mcg/mL <i>6.5 mca/drop</i>	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/> use mL dose	<input type="checkbox"/> 1.5 mL/day
RxB12 Forte <i>Rx Vitamins</i>	1000 mcg/mL <i>33 mcg/drop</i>	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/> 11 drops/day	<input type="checkbox"/> 0.25 mL/day

need consult? email consult@vdiilab.com

Retest NO SOONER THAN: December 7, 2022

Magnesium Report

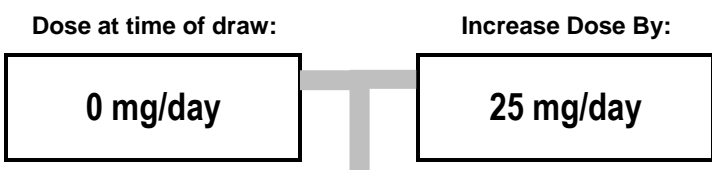
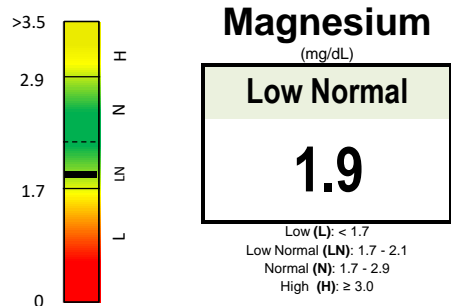


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New Recommended Dose

MagRatio	Not Available
25 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 - need consult? email consult@vdlab.com 214

Patient has low normal Magnesium levels. Supplement as indicated (Daily topical lotion is recommended). Restest in 90 days.

Supplementation Guide

Total Dose Recommended:		25 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"/> 2 pumps/day
Other				<input type="checkbox"/>

Retest NO SOONER THAN: January 1, 2023

Fur Mineral Analysis
 Testing By: Delta-Biomarkers SAS



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AGE: 11.0
WEIGHT: 55 lb

MRN: 1090717
COLLECTION DATE: 23-Sep-22
RECEIVED DATE: 28-Sep-22
REPORT DATE: 7-Oct-22
SAMPLE TYPE: Fur

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Fur/hair is the only matrix suitable for studying a long period of exposure to pollutants. The pollutants circulating in the blood are automatically captured by the web of the fur when it grows and stays intact. Blood analysis is useful, but contrary to fur/hair analysis, blood is a snapshot and not the culmination of weeks of exposure.

Test	Range	Flag	Previous	Results	Notable Change	Comments
				PPM		
Ca	700-3000			962.76		Patient values outside of the normal ranges for nutritional minerals may be the result of inadequate diet, environmental exposure, poor metabolism, or other conditions. Evaluate patient and retest in 2 months after correcting for any irregularities. Refer to Mineral Supplementation page for guidance.
Co	0.02-0.5			0.26		
Cr	0.6-5			2.09		
Cu	8-25			9.94		
Fe	25-400	high		711.66	▲	
K	200-1400			1286.93		
Mg	100-450			245.89		
Mn	1-10	high		31.11	▲	
Na	700-10000			3730.53		
P	220-500			427.09		
Se	0.4-2.5			1.05		
Si	20-600			213.31		
Sr	0-4.5			4.06		
V	0-1.2			0.81		
Zn	150-300	low		117.79		
Ag	0-2			0.05		High levels may be related to ingestion of an item containing the mineral. Repeat test in 3-4 months to see if levels remain elevated. If so, ongoing exposure may exist and source should be determined. Refer to Detox Protocol page.
Al	0-250	high		362.99	▲	
Au	0-2			0.01		
B	0-5			1.33		
Ba	0-5	high		11.40	▲	
Be	0-1			0.03		
Li	0-0.5	high		0.53		
Mo	0-3			0.06		
Ni	0-10			1.51		
Sn	0-5	high		12.82	▲	
As	0-1			0.10		Patient has no significant elevation of toxic metals
Cd	0-0.7			0.02		
Hg	0-0.2			0.01		
Pb	0-10			1.55		

Reference intervals should be considered as guidelines for comparison with reported test values. These reference ranges were established from a large population of "healthy" animals. They should not be considered as absolute limits for determining deficiency, toxicity or acceptance until fully validated element-specific studies are completed.



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VETERINARIAN:

The following minerals have been identified as being outside of the reference interval.

For a description of all minerals, visit our website at: www.vdilab.com

Symbol	Name	Description
Fe	Iron	Iron in fur suggest the digestion of iron rich foods or consuming certain items such as prenatal vitamins, fertilizer, oxygen absorbers and handwarmers. Iron deficiency may be an indication of nutrient deficiencies or underlying conditions. Too much iron may cause a range of cardiac and GI-related symptoms, however this is typically associated with sudden ingestion of large amounts of Iron.
Mn	Manganese	Manganese is dietary derived and can be absorbed by digesting items that have high concentration of manganese. Whole grains, eggs, nuts and leafy vegetables contain a good amount of manganese.
Zn	Zinc	Zinc is an essential mineral found in red meats, whole grains, and other animal products. Excess zinc found in fur may be due to the consumption of items such as bolts, pennies, jewelry, nasal sprays, and many other household items that contain zinc.
Al	Aluminum	Aluminum in fur comes from environmental exposure or consumption of canned foods, vaccines. Processed cheese, dairy products, or aluminum cookware or foil. Aluminum is toxic and should not be present in the body. If elevated levels are found in fur, source of exposure should be identified and removed.
Ba	Barium	Barium in fur is typically from exposure or ingestion of plants exposed to Barium. Barium is also commonly used as a contrast agent to allow vets to get a good look at the gastrointestinal tract, as it appears bright white on radiographs.
Li	Lithium	Lithium in fur reflects environmental exposure or consumption of lithium rich brines and minerals, or batteries. Consumption of household items containing lithium batteries such as remote controls, watches, and toys. Lithium has relatively high toxicity
Sn	Tin	Tin in fur is usually from digesting items that contain tin such as cans, foil, cupcake wrappers, etc. Tin is relatively low in toxicity.