



PATIENT NAME: Cinnamon Moloney **MRN:** 1102331
SPECIMEN ID: 176576 **DRAW DATE:** 6-Mar-23
SPECIES: Canine **RECEIVED DATE:** 9-Mar-23
GENDER: Female Spayed **REPORT DATE:** 10-Mar-23
AGE: 12.0 **SAMPLE TYPE:** Frozen Serum
WEIGHT: 6.6 lb
BREED: Chihuahua

VETERINARIAN:
FACILITY:
PH:
FAX:

REPORT DATE: 10-Mar-2023

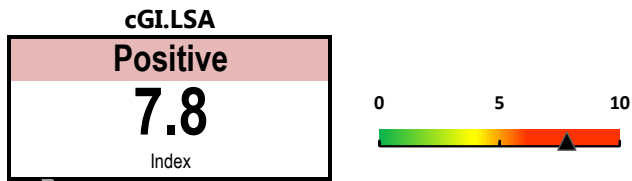
Relevant Context (provided on TRF)

_____ **Corticosteroids** _____ **Antibiotics**
 _____ **NSAIDs** _____ **Suspected Mass**
 Yes _____ **GI Signs** _____ **Enlarged Node**

Other Recommended Tests or Procedures to Perform
 ultrasound

need consult? email consult@vdiilab.com

Neoplasia Index®

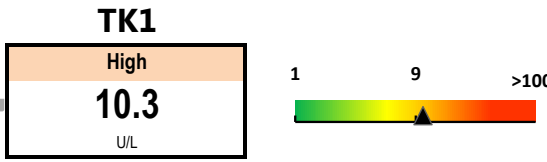


Negative: ≤ 5.2
 Equivocal: 5.3
 Positive: 5.4 - 8.1
 High Positive: ≥ 8.2

Interpretive Comments

Results are consistent with LSA

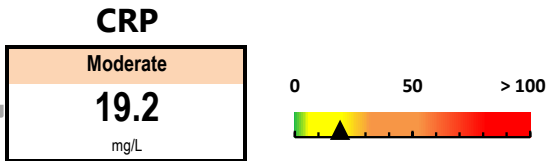
Patient has a positive Neoplasia Index indicative of lymphoma. This profile of TK1/ CRP/ B12 is consistent with GI LSA. An ultrasound is recommended.



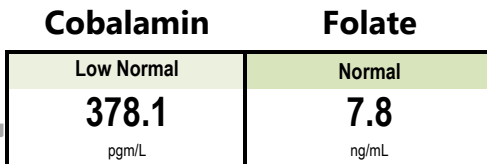
Normal: ≤ 3.0
 Equivocal: ≤ 6.6
 High: 6.6 - 24.9
 Highly Elevated: ≥ 25.0

Interpretive Comments

Elevated TK1 levels along with moderately elevated inflammation are commonly found in LSA. If the patient is on corticosteroids, both TK1 and CRP may be higher as these medications suppress the inflammatory and proliferative response.



Normal: ≤ 3.9
 Mild Inflammation: 4 - 9.9
 Moderate Inflammation: 10 - 39.9
 High Inflammation: ≥ 40



Low: <220
 Low Normal: 220 - 400
 Normal: 220 - 1080
 High: ≥1080

Low: <4.3
 Normal: 4.3 - 21.0
 High: >21.0

Interpretive Comments

Patient has low normal B12 and normal Folate. Increase supplement as indicated and retest in 8-10 weeks.

Contextual Comments (if needed)

profile code 42330 LSA

* The classification of LSA is based upon test result profiling and should not be considered definitive. It is most reliable in the untreated dog. 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.

B12 (Cobalamin) Report

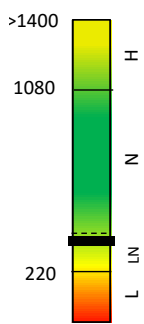


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Cobalamin (pg/mL)

Low Normal
378.1

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

B12 Dose at time of draw:

Not Provided

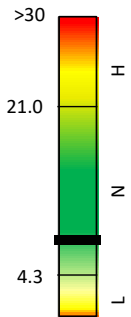
Increase B12 dose by:

36 mcg/day



New Recommended B12 Dose

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



Folate (ng/mL)

Normal
7.8

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	Normal ●	Excess Supplementation Cholangitis
	Low	Small Intestinal Damage CP / EPI / IBD / LSA	Proximal SI Damage Dysbiosis Antibiotics	Proximal SI Damage Antibiotics / LSA / Cholangitis
		Low	High	

Cobalamin

chart assumes unsupplemented patient

need consult? email consult@vdiilab.com

Comments

Patient has low normal B12 and normal Folate. Increase supplement as indicated and retest in 8-10 weeks.

Total B12 Dose Recommended:

36 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"/> 6 drops/day	<input type="checkbox"/> 0.25 mL/day
RxB12 Forte <i>Rx Vitamins</i>	1000 mcg/mL 33 mcg/drop	Liquid Drops <i>Applied to food</i>	<input type="checkbox"/> 2 drops/day	<input type="checkbox"/>

*Choose only one product for supplementation

Retest NO SOONER THAN:

May 18, 2023