



PATIENT NAME: Jordie Miranda
SPECIMEN ID: 176583
SPECIES: Canine
GENDER: Male Neutered
AGE: 3.0
WEIGHT: 20.7 lb
BREED: French Bulldog

MRN: 1071428
DRAW DATE: 9-Mar-23
RECEIVED DATE: 10-Mar-23
REPORT DATE: 10-Mar-23
SAMPLE TYPE: Frozen Serum

VETERINARIAN:
FACILITY:

PH:
FAX:

REPORT DATE: 10-Mar-2023

Relevant Context (provided on TRF)

Corticosteroids Antibiotics
 NSAIDs Suspected Mass
 GI Signs Enlarged Node

Other Recommended Tests or Procedures to Perform

ultrasound

need consult? email consult@vdilab.com

Neoplasia Index®

cGI.LSA

Low Positive
5.7
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 a positive Neoplasia Index indicative of LSA. This profile of TK1/ CRP/ B12 is consistent with GI LSA - patient should be evaluated. An ultrasound is recommended.

TK1

High
8.4
U/L



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

Interpretive Comments

High levels of TK1 with moderate inflammation can be found in GI LSA. If the patient is on corticosteroids, both TK1 and CRP may be higher as these medications suppress the inflammatory and proliferative response.

CRP

Moderate
14.0
mg/L



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

Cobalamin

Normal
693.4
pgm/L

Folate

Normal
5.0
ng/mL

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 normal B12 and Folate levels. Maintain current diet and supplementation and retest in 1 year unless health or diet changes occur.

Contextual Comments (if needed)

profile code 32340 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

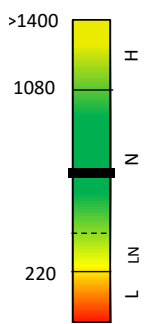


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Cobalamin (pg/mL)

Normal
693.4

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

In unfasted patients, actual B12 values may be lower, which may impact dose recommendation.

B12 Dose at time of draw:

0 mcg/day

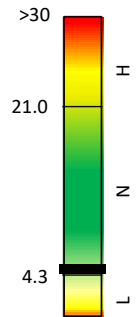
Increase B12 dose by:

0 mcg/day



New Recommended B12 Dose

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



Folate (ng/mL)

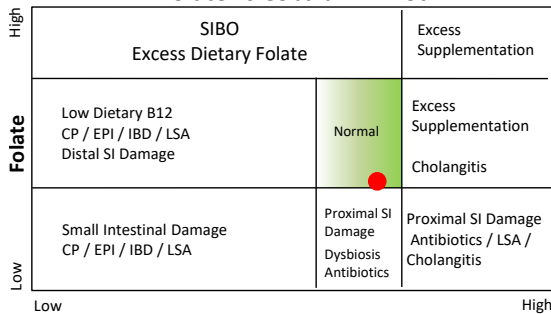
Normal
5.0

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



Cobalamin
chart assumes unsupplemented patient

need consult? email consult@vdiilab.com

Comments

Patient has normal B12 and Folate levels. Maintain current diet and supplementation and retest in 1 year unless health or diet changes occur.

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"/>

*Choose only one product for supplementation