



All Creatures Great
1894 Ohio Pike
Amelia OH
(513) 797-7387
11/26/2014

Peyton - Pointer
Kentucky

CLIENT INFORMATION:

Name: Mutts Midwest
 Address: 2936 West holly Lane
 Amelia, OH 45102
 Phone: H: (513) 368-2745 W: () 387-8725 ext:

Spouse: Horton, Sue

PATIENT CHART

PATIENT INFORMATION:

Name: Peyton
 Sex: MN
 Birthday: 10/29/2012
 Microchip: 031535772
 Color: Black, White

Species: Canine - Dogs
 Breed: Pointer
 Age: 2 years and 1 month old
 Rabies Tag:
 Weight: 52lbs.
 Patient ID: MS

Medical History:

Nov 05, 2014	RES Boarding - Inpatient Level 1	1Qty:	\$ 12.00
Nov 04, 2014	Dewclaws #1 Removed - Right Rear	1Qty:	\$ 30.15
Nov 04, 2014	Anesthetic Drugs	1Qty:	\$ 0.00
Nov 04, 2014	General Anesthesia	1Qty:	\$ 0.00
Nov 04, 2014	Anesthetic monitoring - Heart/ Lung	1Qty:	\$ 0.00
Nov 04, 2014	Pain Management - Included	1Qty:	\$ 0.00
Nov 04, 2014	Telazol 100 mg/ml	0.50Qty:	\$ 0.00
Nov 04, 2014	Morphine Sulfate Inj. 15mg/ML Per Cc	0.50Qty:	\$ 0.00
Nov 04, 2014	Antibiotic Injection With Surgery	1Qty:	\$ 0.00
Nov 04, 2014	RES Dog Neuter 50-99#	1Qty:	\$ 75.00
Oct 29, 2014	Microchip Injection Fee	1Qty:	\$ 6.70
Oct 29, 2014	Heartgard K-9 51-100 Lbs (brown)	1Qty:	\$ 8.39
Oct 29, 2014	LAB AN RES Senior Prof W/ Urine (1620)	1Qty:	\$ 70.00
Oct 29, 2014	Panacur Granules (per 10 Lbs)((per day))	27Qty:	\$ 29.17
Oct 29, 2014	Heartgard K-9 51-100 Lbs (brown)	1Qty:	\$ 8.39
Oct 29, 2014	Minocycline 100mg Capsule	90Qty:	\$ 51.25
Oct 29, 2014	Heartworm Drop Test	1Qty:	\$ 6.70
Oct 29, 2014	Fecal Exam - Floatation (in Hosp)	1Qty:	\$ 0.00
Oct 29, 2014	Heartworm Antigen Test - Canine	1Qty:	\$ 0.00
Oct 29, 2014	• Canine Rabies Vacc - 1yr	1Qty:	\$ 0.00
Oct 29, 2014	• Bordetella Oral	1Qty:	\$ 0.00
Oct 29, 2014	• Canine Dhlp-Parvo Annual Booster	1Qty:	\$ 0.00
Oct 29, 2014	Office Call - Annual Wellness exam	1Qty:	\$ 0.00
Oct 29, 2014	RES Canine Package A	1Qty:	\$ 59.00
Oct 29, 2014	• HW Status Positive	1Qty:	\$ 0.00



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Chloride	111	102-120 mEq/L	
Cholesterol	187	92-324 mg/dL	
Triglyceride	53	29-291 mg/dL	
Amylase	939	290-1125 IU/L	
Lipase	287	77-695 IU/L	
CPK	103	59-895 IU/L	

Comment

Hemolysis 1+ No significant interference.

CBC

WBC	9.6	4.0-15.5 $10^3/\mu\text{L}$	
RBC	6.6	4.8-9.3 $10^6/\mu\text{L}$	
HGB	14.7	12.1-20.3 g/dL	
HCT	47	36-60 %	
MCV	71	58-79 fL	
MCH	22.3	19-28 pg	
MCHC	31	30-38 g/dL	
Platelet Count	304	170-400 $10^3/\mu\text{L}$	

Platelet Est

Adequate

Neutrophils	53LOW	60-77 %	
Bands	0	0-3 %	
Lymphocytes	25	12-30 %	
Monocytes	5	3-10 %	
Eosinophils	17HIGH	2-10 %	
Basophils	0	0-1 %	
Absolute Neutrophils	5088	2060-10600 $/\mu\text{L}$	
Absolute Lymphocytes	2400	690-4500 $/\mu\text{L}$	
Absolute Monocytes	480	0-840 $/\mu\text{L}$	
Absolute Eosinophils	1632HIGH	0-1200 $/\mu\text{L}$	
Absolute Basophils	0	0-150 $/\mu\text{L}$	

Total T4

T4	1.6	0.8-3.5 $\mu\text{g}/\text{dL}$	
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Urinalysis

Other

positive titer indicates exposure to *Borrelia burgdorferi* or similar antigen but does not confirm the presence of disease. Titers may be affected by vaccination or disease. In the dog, the Lyme Quant C6 Test (test code 7246) is recommended for differentiating vaccine titers vs. natural infection.

IN DOGS, we are now recommending the new Lyme Quant C6 antibody test, code 7246, as a more accurate way to diagnose Lyme disease. This test identifies C6 antibody levels. C6 is a more sensitive and specific marker for active Lyme infection. Unlike the traditional whole cell tests like Lyme IFA or Western blot, C6 levels will decline when the dog is successfully treated.

TICK PANEL		ROCKY MOUNTAIN SPOTTED FVR		
Test	Result	Reference Range	Flag	Bar Graph
ROCKY MOUNTAIN SPOTTED FVR	POSITIVE @ 1:400			
Comments:				
Interpretation:				
If your result is:		The interpretation is:		
NEGATIVE		No antibody present @ 1:25		
POSITIVE @ (titer)		Antibody present @ (titer)		
Positive samples are tested in incremental dilutions to 1:1600. Titers beyond 1:1600 are usually of limited clinical value. If you wish an endpoint titer there is an additional charge. Singles titer of greater than or equal to 1:1024 are suggestive of active infection. Low or negative acute titers should be reevaluated in 2-3 weeks (convalescent titer).				

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From: VetConnect@idexx.com(Carter Veterinary Medical) <VetConnect@idexx.com>

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Date: Wednesday, November 11, 2015 05:51 pm

Subject: Forwarded VetConnect Lab Results (Carter Veterinary Medical)

11-8-2015

*Neg-Heartworm
Slowball while*

*treating 3 tick borne
diseases*

IDEXX VetConnect 1-888-4

CARTER VETERINARY MEDICAL CE

13694 N. MERIDIAN STREET

CARMEL, IN 46032

317-844-6868

Account #72364

Client: MAYNARD

Patient: PEYTON

Species: CANINE

Breed: POINTER

Gender: MALE

Age: 2Y

Date: 11/08/2015 *

Requisition #: 11575-1

Accession #: W2277848

Ordered by: CLAYTON, DVM, ROSS

Comments:

FYI - dog is doing great. Advise on plan for treating.

TICK PANEL : EHRLICHIA CANIS AB IFA

Test	Result	Reference Range	Low	Normal	Hig
EHRLICHIA CANIS AB	POSITIVE @ 1:400 ¹				

Comments:

1.

Interpretation:

If your result is:

NEGATIVE

POSITIVE @ (titer)

The interpretation is:

No antibody present @ 1:25

Antibody present @ (titer)

Positive samples are tested in incremental dilutions to 1:3200. Titers beyond 1:3200 are usually of limited clinical value. If you wish an endpoint titer there is an additional charge. A positive titer indicates exposure to E.canis or similar antigen but does not confirm the presence of disease. A CBC is recommended to identify abnormalities consistent with infection. If confirmation of infection is desired, Ehrlichia PCR test, code 2634 can be useful, especially in clinically sick animals.

TICK PANEL : LYME (BORRELIOSIS) TITER

Test	Result	Reference Range	Low	Normal	Hig
LYME (BORRELIOSIS) TITER	POSITIVE @ 1:100 ¹				

Comments:

1.

Interpretation:

If your result is:

NEGATIVE

POSITIVE @ (titer)

The interpretation is:

No antibody present @ 1:100

Antibody present @ (titer)

Positive samples are tested in incremental dilutions to 1:12,800. A

positive titer indicates exposure to Borrelia burgdorferi or similar antigen but does not confirm the presence of disease. Titers may be affected by vaccination or disease. In the dog, the Lyme Quant C6 Test (test code 7246) is recommended for differentiating vaccine titers vs. natural infection.

IN DOGS, we are now recommending the new Lyme Quant C6 antibody test, code 7246, as a more accurate way to diagnose Lyme disease. This test identifies C6 antibody levels. C6 is a more sensitive and specific marker for active Lyme infection. Unlike the traditional whole cell tests like Lyme IFA or Western blot, C6 levels will decline when the dog is successfully treated.

TICK PANEL : ROCKY MOUNTAIN SPOTTED FVR

Test	Result	Reference Range	Low	Normal	Hig
ROCKY MOUNTAIN SPOTTED FVR	POSITIVE @ 1:100 ¹				

Comments:

1. Interpretation:

If your result is:	The interpretation is:
NEGATIVE	No antibody present @ 1:25
POSITIVE @ (titer)	Antibody present @ (titer)

Positive samples are tested in incremental dilutions to 1:1600. Titers beyond 1:1600 are usually of limited clinical value. If you wish an endpoint titer there is an additional charge. Singles titer of greater than or equal to 1:1024 are suggestive of active infection. Low or negative acute titers should be reevaluated in 2-3 weeks (convalescent titer).

RETICULOCYTE PANEL

Test	Result	Reference Range	Low	Normal	Hig
% RETICULOCYTE	0.5	%			
RETICULOCYTE	36	10 - 110 K/uL			

SAMPLE/TEST INFO NEEDED

Test	Result
SAMPLE/TEST INFO NEEDED	A urine specimen was not received. The remainder of requested tests has been performed. Thank You.

SENIOR PROFILE W/ 4DX : CHEM 27 w/ SDMA

Test	Result	Reference Range	Low	Normal	Hig
ALP	32	5 - 160 U/L			
ALT	32	18 - 121 U/L			
AST	24	16 - 55 U/L			
CREATINE KINASE	83	10 - 200 U/L			
GGT	3	0 - 13 U/L			
AMYLASE	724	337 - 1469 U/L			

LIPASE	381	138 - 755 U/L	
ALBUMIN	3.2	2.7 - 3.9 g/dL	
TOTAL PROTEIN	6.0	5.5 - 7.5 g/dL	
GLOBULIN	2.8	2.4 - 4.0 g/dL	
TOTAL BILIRUBIN	0.1	0.0 - 0.3 mg/dL	
BILIRUBIN - CONJUGATED	0.1	0.0 - 0.1 mg/dL	
BUN	14	9 - 31 mg/dL	
CREATININE	0.9	0.5 - 1.5 mg/dL	
CHOLESTEROL	221	131 - 345 mg/dL	
GLUCOSE	98	63 - 114 mg/dL	
CALCIUM	9.5	8.4 - 11.8 mg/dL	
PHOSPHORUS	4.8	2.5 - 6.1 mg/dL	
TCO2 (BICARBONATE)	18	13 - 27 mmol/L	
CHLORIDE	115	108 - 119 mmol/L	
POTASSIUM	4.6	4.0 - 5.4 mmol/L	
SODIUM	148	142 - 152 mmol/L	
ALB/GLOB RATIO	1.1	0.7 - 1.5	
BUN/CREATININE RATIO	15.6		
BILIRUBIN - UNCONJUGATED	0.0	0.0 - 0.2 mg/dL	
NA/K RATIO	32	28 - 37	
HEMOLYSIS INDEX	++ ¹		
LIPEMIA INDEX	N ²		
ANION GAP	20	11 - 26 mmol/L	
SDMA	10 ³	0 - 14 ug/dL	

Comments:

1. Index of N,+,++ exhibits no significant effect on chemistry values.
2. Index of N,+,++ exhibits no significant effect on chemistry values.
3. BOTH SDMA AND CREATININE ARE WITHIN THE REFERENCE INTERVAL which indicates kidney function is likely good. If SDMA and/or creatinine is at the upper end of the reference interval, early kidney disease cannot be ruled out. Evaluate a complete urinalysis to confirm there is no other evidence of kidney disease.

SENIOR PROFILE W/ 4DX : T4

Test	Result	Reference Range	Low	Normal	Hig
T4	1.6 ¹	1.0 - 4.0 ug/dL			

Comments:

1. Interpretive ranges:
 <1.0 Low

1.0-4.0 Normal
 >4.0 High
 2.1-5.4 Therapeutic

Dogs with no clinical signs of hypothyroidism and results within the normal reference range are likely euthyroid. Dogs with low T4 concentrations may be hypothyroid or "euthyroid sick". Occasionally, hypothyroid dogs can have T4 concentrations that are low normal. Dogs with clinical signs of hypothyroidism and low or low normal T4 concentrations may be evaluated further by submission of free T4 and canine TSH. A high T4 concentration in a clinically normal dog is likely variation of normal; however elevations may occur secondary to thyroid autoantibodies or rarely thyroid neoplasia. For dogs on thyroid supplement, acceptable 4-6 hour post pill total T4 concentrations generally fall within the higher end or slightly above the reference range.

SENIOR PROFILE W/ 4DX : CBC STANDARD

Test	Result	Reference Range	Low	Normal	Hig
WBC	6.4	4.9 - 17.6 K/uL			
RBC	7.20	5.39 - 8.70 M/uL			
HGB	18.0	13.4 - 20.7 g/dL			
HCT	52.1	38.3 - 56.5 %			
MCV	72	59 - 76 fL			
MCH	25.0	21.9 - 26.1 pg			
MCHC	34.5	32.6 - 39.2 g/dL			
% RETICULOCYTE	0.5	%			
RETICULOCYTE	36	10 - 110 K/uL			
% NEUTROPHIL	60.1	%			
% LYMPHOCYTE	30.0	%			
% MONOCYTE	3.1	%			
% EOSINOPHIL	6.6	%			
% BASOPHIL	0.2	%			
AUTO PLATELET	184	143 - 448 K/uL			
REMARKS	AUTOMATED CBC, SLIDE REVIEW NOT PERFORMED.				
NEUTROPHIL	3846	2940 - 12670 /uL			
LYMPHOCYTE	1920	1060 - 4950 /uL			
MONOCYTE	198	130 - 1150 /uL			
EOSINOPHIL	422	70 - 1490 /uL			
BASOPHIL	13	0 - 100 /uL			

SENIOR PROFILE W/ 4DX : LAB 4Dx PLUS

Test	Result	Reference Range	Low	Normal	Hig
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HEARTWORM	NEGATIVE
EHRlichia CANIS/EWINGII	POSITIVE
LYME	NEGATIVE
A. PHAGOCYTOPHILUM/PLATYS	NEGATIVE ¹

Comments:

1. The Ehrlichia canis/Ehrlichia ewingii antibody portion of the test uses peptides from each organism that are sensitive and specific for detecting exposure to these pathogens. If positive, submission of a fresh whole blood sample with an air-dried smear for a comprehensive CBC, test code 300, is recommended to identify abnormalities consistent with infection, primarily thrombocytopenia and anemia. PCR testing is complementary to serology and may be useful for confirmation of infection and for detection of infection in patients early in infection prior to seroconversion, especially in patients with clinical signs. Consider test code 2854, Ehrlichia spp RealPCR Test, or test code 28701, Tick/Vector Comprehensive RealPCR Panel Add-on (preferred).

The Lyme (Borrelia burgdorferi) antibody portion of the test detects Lyme C6 antibodies. A positive Lyme C6 antibody response indicates infection in dogs, rather than exposure or vaccination. This test may detect antibodies before clinical signs of joint disease. The quantitative assay for Lyme C6 antibodies (Lyme Quant C6 Antibody by ELISA, test code 7246) is preferred for assessing response to treatment. A measurable decline in quantitative Lyme C6 antibody levels within 6 months correlates with effective treatment, whereas the 4Dx Plus test may remain positive. For more information on Lyme, please visit <https://www.idexx.com/smallanimal/facts-about-lyme.html>

The Anaplasma phagocytophilum/Anaplasma platys antibody portion of the test uses a peptide that is sensitive and specific for detecting exposure to these organisms. If positive, submission of a fresh whole blood sample with an air-dried smear is recommended to identify abnormalities consistent with infection, primarily thrombocytopenia. PCR testing is complementary to serology and may be useful for confirmation of infection and for detection of infection in patients early in infection prior to seroconversion, especially in patients with clinical signs. Consider test code 2824, Anaplasma spp RealPCR Test, or test code 28701, Tick/Vector Comprehensive RealPCR Panel Add-on (preferred).

crap!
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