
From: [REDACTED] **B6**
To: Jones, Jennifer L
Sent: 9/25/2018 9:21:52 PM
Subject: Documents from: [REDACTED] **B6** for Patient: [REDACTED] **B6** Client: [REDACTED] **B6**
Attachments: [REDACTED] **B6** 246950.pdf

800.267-FDA Case Investigation for: [REDACTED] **B6** (EON-361371)
[REDACTED] **B6**

From: [B6]
To: Jones, Jennifer L
Sent: 9/25/2018 9:24:04 PM
Subject: Documents from [B6] for Patient: [B6], Client: [B6]
Attachments: [B6]-246950.pdf

800.267-FDA Case Investigation for [B6] (EON-361371)
[B6]

From: [REDACTED] B6
To: Jones, Jennifer L
Sent: 10/6/2018 1:18:00 AM
Subject: RE: 800.267-FDA Case Investigation for [REDACTED] B6 (EON-361371)
Attachments: [REDACTED] B6 taurine 9-18.pdf; [REDACTED] B6 echo 9-11-18.pdf; Taurine [REDACTED] B6.pdf

Hi Jennifer

I spoke with the cardiologist office and they state they have sent you [REDACTED] B6 files last week. Please let me know if you didn't get them. Attached is his most recent taurine results and you should have his echo as well.

I believe when we spoke you stated you wanted any testing on my other dog as well, [REDACTED] B6 So I am attaching his echo and taurine results. Speak with you on the 10th. Thanks

[REDACTED] B6

-----Original Message-----

From: Jones, Jennifer L
Date: 10/3/2018 3:04:43 PM
To: [REDACTED] B6
Subject: RE: 800.267-FDA Case Investigation for [REDACTED] B6 (EON-361371)

Thank you. We'd be happy to add those additional documents to our files. I'll call you next Wednesday (10/10) at 2pm eastern.

Jennifer Jones, DVM

Veterinary Medical Officer

Tel: 240-402-5421



From: [REDACTED] B6
Sent: Tuesday, September 25, 2018 3:20 PM
To: Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>
Subject: RE: 800.267-FDA Case Investigation for [REDACTED] B6 (EON-361371)

Hi Jennifer,

If you need test results, I have copies of them. Also, I re-did [B6] taurine results sent to UC Davis and have that as well. Let me know. I have some projects scheduled but don't know the times yet, but as of now I am available.

10-9 11am

10-10 2pm

10- 11 11am or any time before 4pm.

Thanks

-----Original Message-----

From: Jones, Jennifer L

Date: 9/25/2018 2:54:26 PM

To: [B6]

Subject: RE: 800.267-FDA Case Investigation for [B6] (EON-361371)

Good afternoon [B6]

Thank you for sending the records. After reviewing them, we'd like to request an interview. Please send me 3 dates with times you'd be available the week of October 9-11.

As an FYI, I'm still waiting on the records from your cardiologist. I rerequested them today (9/25) and hopefully will have them before our interview.

Thank you kindly,

Dr. Jones

Jennifer Jones, DVM

Veterinary Medical Officer

Tel: 240-402-5421



From: [REDACTED] **B6**
Sent: Thursday, August 09, 2018 9:05 AM
To: Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>
Subject: Re: 800.267-FDA Case Investigation for [REDACTED] **B6** (EON-361371)

Hi Dr. Jones

It was nice speaking with you and hoping you guys can figure out with is going on with all these cases of DCM. Anyway, I contacted my primary vet and told them you would be contacting them for the info on [REDACTED] **B6**. The vet's office info is:

[REDACTED] **B6**, VMD (PLEASE ASK FOR [REDACTED] **B6** & SHE WILL HANDLE IT)

B6

I have also contacted the Cardiologist office and spoke with the cardiology nurse, [REDACTED] **B6**. She said you can contact her or email the department to request the records.

B6

I am attaching the taurine results on both dogs for your records. Let me know if you need anything else.

Thanks again

[REDACTED] **B6**

-----Original Message-----

From: Jones, Jennifer L

Date: 8/7/2018 4:20:07 PM

To: [REDACTED] B6

Subject: 800.267-FDA Case Investigation for [REDACTED] B6 (EON-361371)

Good afternoon [REDACTED] B6

Thank you for submitting your consumer complaint to FDA. I'm sorry to hear about [REDACTED] B6 illness.

As part of our investigation, we'd like to request:

- **Full Medical Records**

- Please contact your veterinarian (primary veterinarian and cardiologist/specialist) and ask them to email (preferred) or fax (301-210-4685) a copy of [REDACTED] B6 **entire** medical history (not just this event).

- **After we review the records, we may request a Phone interview** about [REDACTED] B6 diet and environmental exposures

- The interview will help us better understand the details in your case.

We would like to collect the leftover food. How much is available?

I attached a copy of our Vet-LIRN network procedures. The procedures describe how Vet-LIRN operates and how owners help with our case investigations.

Please respond to this email so that we can initiate our investigation.

Thank you kindly,

Dr. Jones

Jennifer L. A. Jones, DVM

Veterinary Medical Officer
U.S. Food & Drug Administration
Center for Veterinary Medicine
Office of Research
Veterinary Laboratory Investigation and Response Network (Vet-LIRN)
8401 Muirkirk Road, G704

Laurel, Maryland 20708
new tel: 240-402-5421

fax: 301-210-4685
e-mail: jennifer.jones@fda.hhs.gov

Web: <http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm>



From: Jones, Jennifer L </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo>
To: Rotstein, David; Palmer, Lee Anne; Carey, Lauren; Queen, Jackie L
CC: Peloquin, Sarah
Sent: 11/29/2018 3:58:00 PM
Subject: RE: 800.267-EON-361371 [B6] Acana Pork and Squash
Attachments: [B6] Updated MRx.pdf; [B6] echo 9-11-18.pdf; Taurine [B6].pdf

Updated MRx.

[B6] 4 yr MC Golden Retriever
Hx: [B6] begin
long term SP Cardiac Support K9-100g; cryptorchid
4/12/2016-Eats Acana kibble, Echo-DCM, VSD-restrictive à rec pimo
4/19/2016-2nd opinion on if to start pimo, on Fish oil, Cardiac support supp,
PE-Gr IV murmur coarse holosys L, Gr IV/VVI holo R, [B6] bpm
Tx-start [B6]
4/27/2016: panting, drinking more-weather warmer now
x-rad: cardiomeg (VHS [B6]), normal in dogs is [B6] mild LA enl, very D bronchointerst patt
Labs-Chol [B6] rest wnl
5/2016 possible Tau supplement-begin SP Cardiotrophin, L-carnitine;
9/19/2016-eat Acana, Orijen freeze dried; x-rad: prog enl RH, VHS 12, globoid prim RH, BUN/Ct/K wnl, Chol 326
Echo-stable LV/LA size, no flow changes of VSD
4/13/2017-labs BUN/K/Ct wnl, proteinuria +1
4/19/2017-T [B6]
[B6]
8/29/2017-eats Acana, on [B6]
[B6]
Echo-DCM-stable, VSD
11/2017 [B6]
12/27/2017-on Acana/Orijen, freeze dried SP treats; Labs: wnl, x-rads: static
4/18/2018-WB Tau [B6] Plasma [B6] (not on supplementation) à started Tau 1.75g BID
5/10/2018- [B6]
5/14: diet change, melena
8/16/2018-possible [B6]
8/22/2018-diet-Real Meat Company 90% beef air dried, no legumes, IS grain free, no potatoes; Gr IV murmur L, Gr V right, HR 150 bpm;
x-rad: cardiomeg VHS [B6] // LA enl, RH enl w/ prom main pulm a
Echo: marked improvement LV, improved LVIDS, ESV, EPSS; LA enl, annual dil w/ MR; uncooperative, panting, anxious-not assess VSD
9/10/2018-Davis-plasma [B6] WB [B6]

[B6] 7 yr MI Golden Retriever
Tau WB [B6] Plasma [B6] @ Davis
9/2018 Echo- tr MR, mild thick MV, ECG [B6] bpm, nsr

Jennifer Jones, DVM
Veterinary Medical Officer
Tel: 240-402-5421



From: Jones, Jennifer L

Sent: Wednesday, October 10, 2018 2:47 PM

To: Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>;

Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>

Cc: Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Peloquin, Sarah <Sarah.Peloquin@fda.hhs.gov>

Subject: RE: 800.267-EON-361371 [B6] Acana Pork and Squash

Jennifer Jones, DVM
Veterinary Medical Officer
Tel: 240-402-5421



From: Jones, Jennifer L

Sent: Tuesday, September 25, 2018 2:52 PM

To: Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>;

Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>

Cc: Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Peloquin, Sarah <Sarah.Peloquin@fda.hhs.gov>

Subject: RE: 800.267-EON-361371 [B6] Acana Pork and Squash

Cardio MRx still pending-2nd request today

[B6] 4 yr MC Golden Retriever
Hx-3/2015-cytology, begin long term [B6] 5/2016 possible Tau supplement-begin SP
[B6] L-carnitine
4/2017-[B6]
11/2017 [B6]
4/18/2018-WB Tau- [B6] Plasma [B6]
5/10/2018-Gr IV/VI Left murmur
5/14: diet change, melena
8/16/2018 [B6]

[B6] dog-Tau WB [B6] Plasma [B6]

Jennifer Jones, DVM
Veterinary Medical Officer
Tel: 240-402-5421



From: Jones, Jennifer L

Sent: Wednesday, August 08, 2018 2:16 PM

To: Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>;

Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>

Cc: 'Reimschuessel, Renate (Renate.Reimschuessel@fda.hhs.gov)' <Renate.Reimschuessel@fda.hhs.gov>;

Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Peloquin, Sarah

<Sarah.Peloquin@fda.hhs.gov>

Subject: RE: 800.267-EON-361371 [B6] Acana Pork and Squash

MRx pending + Interview, no food

FYI-Joshua Stern encouraged her to submit the report to FDA. I'm assuming that's also why we've gotten more golden retrievers.

2 dogs in this home-both low Tau

[B6] born w/ VSD but apparently L-sided DCM

2nd dog-low Tau, no ECHO done

Jennifer Jones, DVM
Veterinary Medical Officer
Tel: 240-402-5421



From: PFR Event [mailto:pfpreventcreation@fda.hhs.gov]
Sent: Saturday, August 04, 2018 9:32 PM
To: Cleary, Michael * <Michael.Cleary@fda.hhs.gov>; HQ Pet Food Report Notification <HQPetFoodReportNotification@fda.hhs.gov> [B6]
Subject: Acana Pork and Squash: [B6] - EON-361371

A PFR Report has been received and PFR Event [EON-361371] has been created in the EON System.

A "PDF" report by name "2053236-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-361371

ICSR #: 2053236

EON Title: PFR Event created for Acana Pork and Squash; 2053236

AE Date	04/12/2016	Number Fed/Exposed	2
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Unknown
Breed	Retriever - Golden		
Age	4 Years		
District Involved	PFR [B6] DO		

Product information

Individual Case Safety Report Number: 2053236

Product Group: Pet Food

Product Name: Acana Pork and Squash

Description: This is not an event that suddenly occurred. My dog was diagnosed with dilated cardiomyopathy at 2 years old. I enrolled him in the taurine deficient study done by Dr. Joshua Stern at UC Davis. He was eating Acana Pork & Squash since he was a puppy. His taurine was tested (4-18) and his whole blood is [B6] and plasma [B6]. Since his taurine level is low, I was told to supplement him with taurine and take him off the current dog food. I was told his food could cause taurine deficient dilated cardiomyopathy. He will be re-tested in the upcoming months. It is not know at this time if the dog food contributed to his disease or caused it. The study is still on going.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Unknown

Number of Animals Treated With Product: 2

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Acana Pork and Squash		

Sender information

B6

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-361371>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=378105>

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From: Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>
To: Glover, Mark; Jones, Jennifer L; Ceric, Olgica; Nemser, Sarah; Queen, Jackie L; Palmer, Lee Anne; Carey, Lauren
CC: Rotstein, David
Sent: 4/20/2018 7:55:22 PM
Subject: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

DCM case. This should be a PFR.

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: RFR Event [mailto:rfreventcreation@fda.hhs.gov]
Sent: Friday, April 20, 2018 3:53 PM
To: Lambkin, Sonya <Sonya.Lambkin@fda.hhs.gov>; orahqreportablefoodnotificationtriagegroup@fda.hhs.gov; Bataller, Neal <Neal.Bataller@fda.hhs.gov>; Johnston, Ying F <Ying.Johnston@fda.hhs.gov>; Edwards, Elizabeth <Elizabeth.Edwards@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Yowell, Ruth <Ruth.Yowell@fda.hhs.gov>; ORA HAF EAST1 Reportable Food Notification <orahafeast1reportablefoodnotification@fda.hhs.gov>; Krieger, Darlene <Darlene.Krieger@fda.hhs.gov>; CFSAN Reportable Food Registry <CFSANReportableFoodRegistry@fda.hhs.gov>; FDA Emergency Operations <emergency.operations@fda.hhs.gov>; Cleary, Michael * <Michael.Cleary@fda.hhs.gov>; Weems, Shellie * <Shellie.Weems@fda.hhs.gov>; Hodges, April <April.Hodges@fda.hhs.gov>; ORA OEIO RECALLS Branch <oraoeio recallsbranch@fda.hhs.gov>; Nelson, Eric <Eric.Nelson@fda.hhs.gov>; McCoig, Amber <Amber.McCoig@fda.hhs.gov>; Glover, Mark <Mark.Glover@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov> [B6]
Subject: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

A RFR Report has been received and RFR Event [EON-351747] has been created in the EON System under ICSR # 2046176.

Reason this food is reportable: Other

Please describe Other: Taurine deficiency or other diet-related DCM

Product Name: Blue Buffalo Basics salmon and potato dry food - regular and grain-fr...

Type of Site:	Sender	Food Facility Site
FDA Districts Impacted:	NWE	NWE
Organization Name:	Tufts Cummings School of Veterinary Medicine	Unclear if this is info on Blue Buffalo or something else
Address:	200 Westboro Rd North Grafton, MA 01536 United States	? ?, MA ? United States

Discovery Date: 2018-04-19

Product Group: Pet Food

Description: 7 year old castrated male Doberman pinscher with DCM. Has been eating Blue Buffalo Basics salmon and potato dry food since 2012 (rotates between regular and grain free version of this diet). Recently, diagnosed with DCM and whole blood taurine was [B6] nmol/ml. Started on cardiac medications by RDVM and just started [B6] and [B6] oil (may also start [B6]). Unclear if taurine deficiency-related DCM or related to current concerns with "grain free" diets.

Product Recall: No

Human Symptoms Present: No

Animal Symptoms Present: Yes

Animal Symptoms Description: DCM and taurine deficiency Owner has bag of food that she's keeping until we hear from you. RDVM is [B6]

Product Distribution Type: Retail

Root Cause: Unknown

Discovery Code: Other

Submission Type: Initial

Reporting Type: Voluntary

Attachment Name: [B6] records.pdf, [B6] DCM 4-19-18.pdf

EON Key: EON-351747

EON Title: RFR Event created for Blue Buffalo Basics salmon and potato dry food - regular and grain-free; 2046176

To view this RFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-351747>

To view the RFR Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=9&issueId=368135>

=====

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From: Carey, Lauren </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=F0226BD682844FA2B71EA3750D4FCB82-LAUREN.CARE>
To: Rotstein, David; Glover, Mark; Jones, Jennifer L; Ceric, Olgica; Nemser, Sarah; Queen, Jackie L; Palmer, Lee Anne
Sent: 4/23/2018 10:02:04 AM
Subject: RE: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

Do I need to transition this into a PFR or are we expecting a follow-up PFR report for it?

From: Rotstein, David
Sent: Friday, April 20, 2018 3:55 PM
To: Glover, Mark <Mark.Glover@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>
Cc: Rotstein, David <David.Rotstein@fda.hhs.gov>
Subject: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

DCM case. This should be a PFR.

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: RFR Event [<mailto:rfreventcreation@fda.hhs.gov>]
Sent: Friday, April 20, 2018 3:53 PM
To: Lambkin, Sonya <Sonya.Lambkin@fda.hhs.gov>; orahqreportablefoodnotificationtriagegroup@fda.hhs.gov; Bataller, Neal <Neal.Bataller@fda.hhs.gov>; Johnston, Ying F <Ying.Johnston@fda.hhs.gov>; Edwards, Elizabeth <Elizabeth.Edwards@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Yowell, Ruth <Ruth.Yowell@fda.hhs.gov>; ORA HAF EAST1 Reportable Food Notification <orahafeast1reportablefoodnotification@fda.hhs.gov>; Krieger, Darlene <Darlene.Krieger@fda.hhs.gov>; CFSAN Reportable Food Registry <CFSANReportableFoodRegistry@fda.hhs.gov>; FDA Emergency Operations <emergency.operations@fda.hhs.gov>; Cleary, Michael * <Michael.Cleary@fda.hhs.gov>; Weems, Shellie * <Shellie.Weems@fda.hhs.gov>; Hodges, April <April.Hodges@fda.hhs.gov>; ORA OEIO RECALLS Branch <oraoeio recallsbranch@fda.hhs.gov>; Nelson, Eric <Eric.Nelson@fda.hhs.gov>; McCoig, Amber <Amber.McCoig@fda.hhs.gov>; Glover, Mark <Mark.Glover@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Queen, Jackie L

<Jackie.Queen@fda.hhs.gov>

B6

Subject: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

A RFR Report has been received and RFR Event [EON-351747] has been created in the EON System under ICSR # 2046176.

Reason this food is reportable: Other

Please describe Other: Taurine deficiency or other diet-related DCM

Product Name: Blue Buffalo Basics salmon and potato dry food - regular and grain-fr...

Type of Site:	Sender	Food Facility Site
FDA Districts Impacted:	NWE	NWE
Organization Name:	Tufts Cummings School of Veterinary Medicine	Unclear if this is info on Blue Buffalo or something else
Address:	200 Westboro Rd North Grafton, MA 01536 United States	? ?, MA ? United States

Discovery Date: 2018-04-19

Product Group: Pet Food

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Product Recall: No

Human Symptoms Present: No

Animal Symptoms Present: Yes

Animal Symptoms Description: DCM and taurine deficiency Owner has bag of food that she's keeping until we hear from you. RDVM is [B6]

Product Distribution Type: Retail

Root Cause: Unknown

Discovery Code: Other

Submission Type: Initial

Reporting Type: Voluntary

Attachment Name: [B6] records.pdf, [B6] DCM 4-19-18.pdf

EON Key: EON-351747

EON Title: RFR Event created for Blue Buffalo Basics salmon and potato dry food - regular and grain-free; 2046176

To view this RFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-351747>

To view the RFR Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=9&issueId=368135>

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From: Jones, Jennifer L </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo>
To: Rotstein, David; Carey, Lauren; Glover, Mark; Ceric, Olgica; Nemser, Sarah; Queen, Jackie L; Palmer, Lee Anne
Sent: 4/23/2018 12:53:40 PM
Subject: RE: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

I was not expecting this report.

Jennifer Jones, DVM
Veterinary Medical Officer
Tel: 240-402-5421



From: Rotstein, David
Sent: Monday, April 23, 2018 7:05 AM
To: Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Glover, Mark <Mark.Glover@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>
Subject: RE: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

Lauren,

I am not aware of any follow-up. Jen-were you expecting this one? If not, creating PFR would be great.

dave

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: Carey, Lauren
Sent: Monday, April 23, 2018 6:02 AM
To: Rotstein, David <David.Rotstein@fda.hhs.gov>; Glover, Mark <Mark.Glover@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>; Palmer, Lee Anne

<LeeAnne.Palmer@fda.hhs.gov>

Subject: RE: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

Do I need to transition this into a PFR or are we expecting a follow-up PFR report for it?

From: Rotstein, David

Sent: Friday, April 20, 2018 3:55 PM

To: Glover, Mark <Mark.Glover@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>

Cc: Rotstein, David <David.Rotstein@fda.hhs.gov>

Subject: should be a PFR--DCM case-FW: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

DCM case. This should be a PFR.

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: RFR Event [<mailto:rfr eventcreation@fda.hhs.gov>]

Sent: Friday, April 20, 2018 3:53 PM

To: Lambkin, Sonya <Sonya.Lambkin@fda.hhs.gov>; orahqreportablefoodnotificationtriagegroup@fda.hhs.gov; Bataller, Neal <Neal.Bataller@fda.hhs.gov>; Johnston, Ying F <Ying.Johnston@fda.hhs.gov>; Edwards, Elizabeth <Elizabeth.Edwards@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Yowell, Ruth <Ruth.Yowell@fda.hhs.gov>; ORA HAF EAST1 Reportable Food Notification <orahafeast1reportablefoodnotification@fda.hhs.gov>; Krieger, Darlene <Darlene.Krieger@fda.hhs.gov>; CFSAN Reportable Food Registry <CFSANReportableFoodRegistry@fda.hhs.gov>; FDA Emergency Operations <emergency.operations@fda.hhs.gov>; Cleary, Michael * <Michael.Cleary@fda.hhs.gov>; Weems, Shellie * <Shellie.Weems@fda.hhs.gov>; Hodges, April <April.Hodges@fda.hhs.gov>; ORA OEIO RECALLS Branch <oraoeiorecallsbranch@fda.hhs.gov>; Nelson, Eric <Eric.Nelson@fda.hhs.gov>; McCoig, Amber <Amber.McCoig@fda.hhs.gov>; Glover, Mark <Mark.Glover@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Queen, Jackie L <Jackie.Queen@fda.hhs.gov>; B6

Subject: EON-351747 RFR Event: Unclear if this is info on Blue Buffalo or something else

A RFR Report has been received and RFR Event [EON-351747] has been created in the EON System under ICSR # 2046176.

Reason this food is reportable: Other

Please describe Other: Taurine deficiency or other diet-related DCM

Product Name: Blue Buffalo Basics salmon and potato dry food - regular and grain-fr...

Type of Site:	Sender	Food Facility Site
FDA Districts Impacted:	NWE	NWE
Organization Name:	Tufts Cummings School of Veterinary Medicine	Unclear if this is info on Blue Buffalo or something else
Address:	200 Westboro Rd North Grafton, MA 01536 United States	? ?, MA ? United States

Discovery Date: 2018-04-19

Product Group: Pet Food

Description: 7 year old castrated male Doberman pinscher with DCM. Has been eating Blue Buffalo Basics salmon and potato dry food since 2012 (rotates between regular and grain free version of this diet). Recently, diagnosed with DCM and whole blood taurine was [B6] nmol/ml. Started on cardiac medications by RDVM and just started taurine and fish oil (may also start [B6]). Unclear if taurine deficiency-related DCM or related to current concerns with "grain free" diets.

Product Recall: No

Human Symptoms Present: No

Animal Symptoms Present: Yes

Animal Symptoms Description: DCM and taurine deficiency Owner has bag of food that she's keeping until we hear from you. RDVM is [B6]

Product Distribution Type: Retail

Root Cause: Unknown

Discovery Code: Other

Submission Type: Initial

Reporting Type: Voluntary

Attachment Name: [B6] records.pdf, [B6] DCM 4-19-18.pdf

EON Key: EON-351747

EON Title: RFR Event created for Blue Buffalo Basics salmon and potato dry food - regular and grain-free; 2046176

To view this RFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-351747>

To view the RFR Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=9&issueId=368135>

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Failure to adhere to the above provisions could result in removal from the approved distribution list. If you think you received this email in error, please send an email to FDAREportableFoods@fda.hhs.gov immediately.

Report Details - EON-351879		
ICSR:	2046277	
Type Of Submission:	Initial	
Report Version:	FPSR.FDA.PETF.V.V1	
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)	
Reporting Type:	Voluntary	
Report Submission Date:	2018-04-23 10:33:06 EDT	
Reported Problem:	Problem Description: Reported as RFR (EON-351747). FDA CVM resubmitting as PFR. 7 year old castrated male Doberman pinscher with DCM. Has been eating Blue Buffalo Basics salmon and potato dry food since 2012 (rotates between regular and grain free version of this diet). Recently, diagnosed with DCM and whole blood taurine was B6 nmol/ml. Started on cardiac medications by RDVM and just started taurine and fish oil (may also start B6). Unclear if taurine deficiency-related DCM or related to current concerns with "grain free" diets. DCM and taurine deficiency Owner has bag of food that she's keeping until we hear from you. RDVM is B6	
	Date Problem Started: 04/03/2018	
	Concurrent Medical Problem: Unknown	
	Outcome to Date: Unknown	
Product Information:	Product Name: Blue Buffalo Basics salmon and potato dry food - regular and grain-free:	
	Product Type: Pet Food	
	Lot Number:	
	Package Type: BAG	
	Possess Unopened Product: Unknown	
	Possess Opened Product: Unknown	
	Product Use Information:	Description: rotates between regular and grain free version of this diet (since 2012)
		Product Use Stopped After the Onset of the Adverse Event: Yes
		Adverse Event Abate After Product Stop: Unknown
		Product Use Started Again: No
Perceived Relatedness to Adverse Event: Possibly related		
Other Foods or Products Given to the Animal During This Time Period: Yes		
Manufacturer /Distributor Information:		
Purchase Location Information:		
Animal Information:	Name: B6	
	Type Of Species: Dog	
	Type Of Breed: Doberman Pinscher	
	Gender: Male	
	Reproductive Status: Neutered	

	Age: 7 Years
	Assessment of Prior Health: Unknown
	Number of Animals Given the Product: 1
	Number of Animals Reacted: 1
	Owner Information: Owner Information provided: No
Healthcare Professional Information:	Practice Name: Tufts Cummings School of Veterinary Medicine
	Contact: Name: Lisa Freeman
	Phone: (508) 887-4523
	Email: lisa.freeman@tufts.edu
	Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
	Type of Veterinarian: Referred veterinarian
	Date First Seen: 04/19/2018
	Practice Name: B6
Contact: Name: B6	
Phone: Unknown	
Type of Veterinarian: Primary/regular veterinarian	
Date First Seen: 04/03/2018	
Sender Information:	Name: Lisa Freeman
	Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact: Phone: 5088874523
	Email: lisa.freeman@tufts.edu
	Reporter Wants to Remain Anonymous: No
	Permission To Contact Sender: Yes
	Preferred Method Of Contact: Email
	Reported to Other Parties: Unknown
Additional Documents:	Attachment: B6 records.pdf
	Description: Medical records
	Type: Record
	Attachment: B6 DCM 4-19-18.pdf
	Description: Nutrition report (Tufts)
	Type: Record

Last Name **B6** Pet's Name **B6**

DATE MEDICAL RECORD & INFORMATION CHARGES PAYMENT BALANCE

** CAUTION / will lunge / bite / may need muzzle **

4/15/18 DROP OFF echo ACCT#: 18390.0 04/03/2018 OWNER: B6

B6	B6	B6	meds/			
			ay			

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Last Name **B6** Pet's Name **B6**

DATE MEDICAL RECORD & INFORMATION CHARGES PAYMENT BALANCE

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Last Name: B6

Pet's Name: B6

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Pet's Name [B6]

DATE	MEDICAL RECORD & INFORMATION	CHARGES	PAYMENT	BALANCE
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Last Name **B6** Pet's Name **B6**

DATE	MEDICAL RECORD & INFORMATION	CHARGES	PAYMENT	BALANCE
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Pet's Name **B6**

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Last Name **B6** Pet's Name **B6**

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Last Name [B6] Pet's Name [B6]

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Last Name **B6** Pet's Name **B6**
DATE MEDICAL RECORD & INFORMATION CHARGES PAYMENT BALANCE

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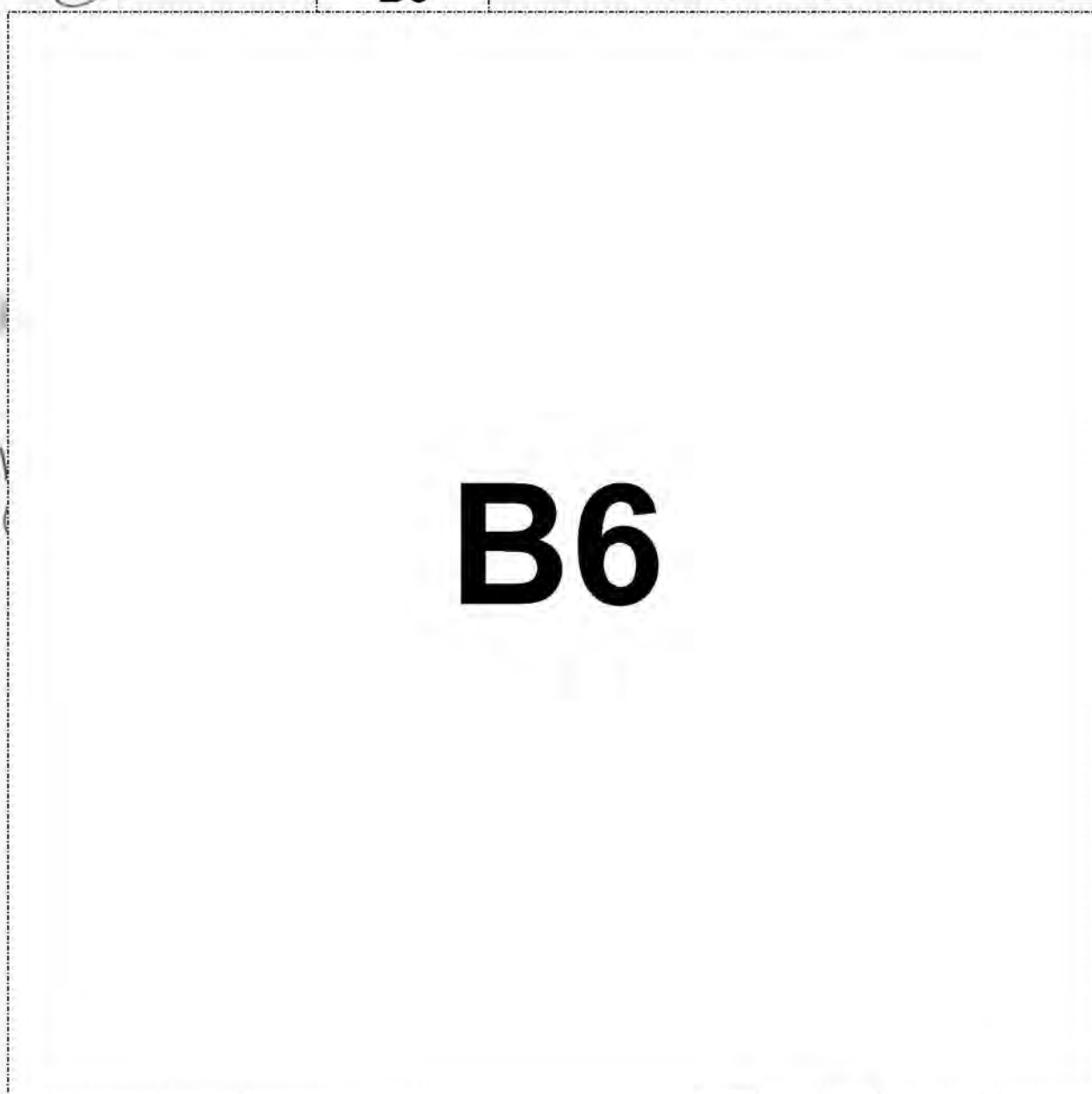
Date 10, 17, 11
Weight _____

B6

Client Label:

Owner's Name **B6** Home Phone **B6**
Address Work Phone **B6**

Animal's Name **B6** Species kg Breed Doberman Pinscher
Sex M/F Birth Date **B6** Color&Markings Black/Tan Allergy mix



B6

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Echocardiogram Report

B6

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B6

Cardiac Measurements:		
2-D	M-Mode	Doppler
Ao Diam	IVSd	MV E Vel
LA Diam	LVIDd	MR Vmax
LA/Ao	LVPWd	MR maxPG
Ao/LA	IVSs	LVOT Vmax
	LVIDs	LVOT maxPG
	LVPWs	RVOT Vmax
	EDV(Teich)	RVOT maxPG
	ESV(Teich)	TR Vmax
	EF(Teich)	TR maxPG
	%FS	
	SV(Teich)	

Physical exam:

HR: 170, irregularly irregular rhythm, II/VI left apical pansystolic heart murmur, moderate and synchronous pulses, -clear and eupnic lungs

EKG:

- Atrial fibrillation with an uncontrolled ventricular response rate is present throughout the exam. No significant ventricular ectopy is appreciated.

2D and M-Mode:

- The left ventricular internal dimensions are moderately increased at end diastole and moderately to severely increased at end systole.
- There is no hypertrophy of the interventricular septum, the left ventricular posterior wall or papillary muscles.
- The mitral valve leaflets are normal.
- The tricuspid valve leaflets are normal.
- The indices of left ventricular contractility (fractional shortening, ejection fraction and end systolic volume index - ESV indexed to body surface area) are all abnormal suggesting decreased systolic performance.
- The left atrium is moderately dilated.
- There is mild dilation of the right ventricle.

Color and Spectral Doppler:

- The aortic spectral Doppler velocity and profile are normal.
 - The pulmonic spectral Doppler velocity and profile are normal.
 - There is mild mitral regurgitation with a normal spectral Doppler profile and velocity.
 - The mitral regurgitation is directed throughout the center of the left atrium.
 - There is mild tricuspid regurgitation with a normal spectral Doppler profile, but A MILDLY increased spectral Doppler velocity.
 - The tricuspid regurgitation is directed away from the inter-atrial septum.
- Due to the presence of the atrial fibrillation, there are no trans mitral A waves. The E wave velocity is increased.

Diagnosis: Dilated cardiomyopathy - Moderate Atrial fibrillation

Treatment: B6

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DVM ACVIM (CARDIOLOGY)

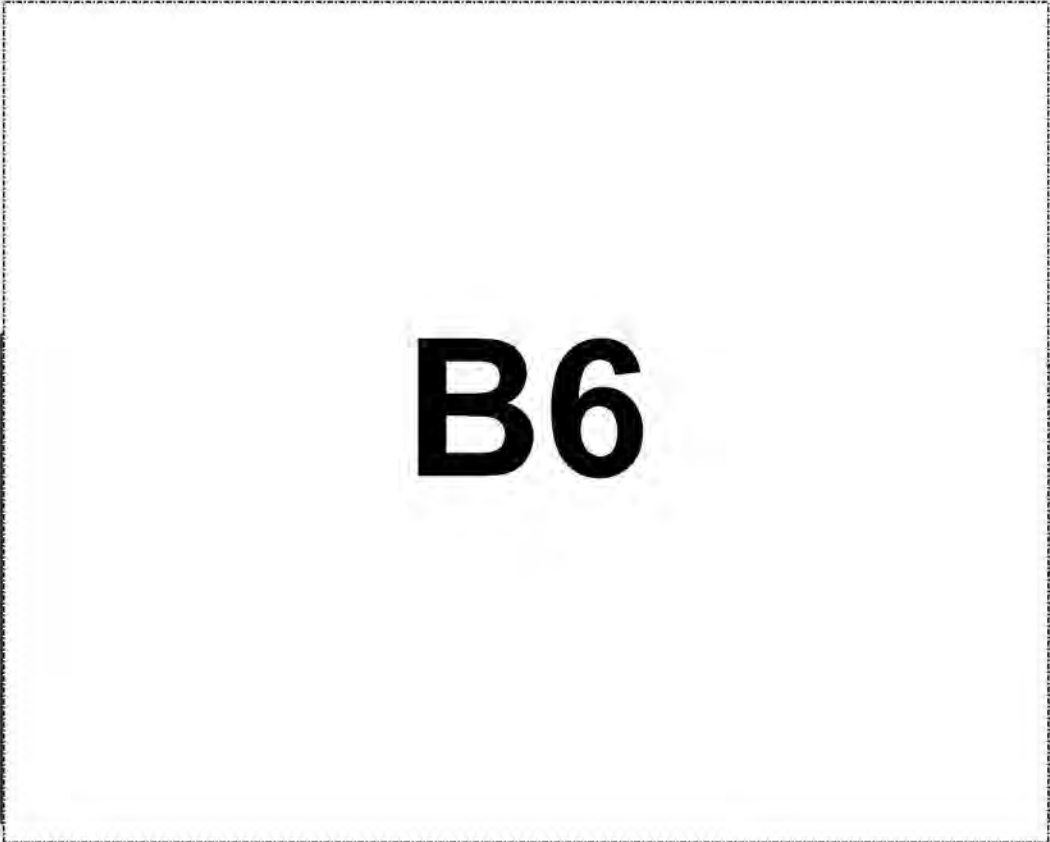
09/28/17 08:38:46

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1 Page 001



B6
09/20/2017

FINAL REPORT

PAGE 1 OF 1

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Client: B6
Patient Name: B6
Species: Canine
Breed:

Gender:
Weight:
Age: 4 Years
Doctor:

B6

Test	Results	Reference Interval	LOW	NORMAL	HIGH
B6	(October 24, 2015 12:17 PM)				
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04/22/2014

FINAL REPORT - CONTINUED ON NEXT PAGE
PAGE 1

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04/22/2014

FINAL REPORT

PAGE 2 OF 2

Report Details - EON-354251			
ICSR:	2048125		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)		
Reporting Type:	Voluntary		
Report Submission Date:	2018-05-21 07:55:06 EDT		
Reported Problem:	Problem Description:	Reported as RFR EON-354199. 2 year old Great Dane with DCM and CHF. Has eaten 4Health dog food (large breed dry) since 6/2016. Taurine levels pending. Owner has switched to another food and has saved the 4Health food	
	Date Problem Started:	05/18/2018	
	Concurrent Medical Problem:	Unknown	
	Outcome to Date:	Unknown	
Product Information:	Product Name:	4Health large breed dry food	
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:	BAG	
	Possess Unopened Product:	Unknown	
	Possess Opened Product:	Yes	
	Product Use Information:	Description:	Has eaten 4Health dog food (large breed dry) since 6/2016
		First Exposure Date:	06/30/2016
		Product Use Stopped After the Onset of the Adverse Event:	Yes
		Adverse Event Abate After Product Stop:	Unknown
Product Use Started Again:		No	
Manufacturer /Distributor Information:			
Purchase Location Information:			
Animal Information:	Name:		
	Type Of Species:	Dog	
	Type Of Breed:	Great Dane	
	Gender:	Unknown	
	Reproductive Status:	Unknown	
	Age:	2 Years	
	Assessment of Prior Health:	Unknown	
	Number of Animals Given the Product:	1	
	Number of Animals Reacted:	1	
Owner Information:	Owner Information provided:	Yes	
	Contact: Name:	B6	

		Phone: B6
	Address:	Unknown Unknown B6 United States
	Healthcare Professional Information:	
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523 Email: lisa.freeman@tufts.edu
	Reporter Wants to Remain Anonymous:	No
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
	Reported to Other Parties:	Unknown
Additional Documents:		

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6

Canine

B6 Years Old Male (Neutered) Great Dane
Blue

Cardiology Appointment Report

Date: 5/25/2018

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 v19

Presenting Complaint:

Recheck DCM - CHF on B6

Concurrent Diseases:

None

General Medical History:

Almost back to his baseline since last discharge on B6 great appetite and no v/d/s. Occasional cough after he eats/drinks fast

Goes for 1.5~2mile walk daily

Respiratory rate had been between 18-24, was at 35 once so gave a dose of B6 and it helped.

B6 may be having trouble gaining weight

Diet and Supplements:

Purina proplan high performance dog food 3 cups BID

Purina proplan 1 can SID

High calory syrup covered medication

Also planning to start him on L-Carnitine, Mg, and Coq10 supplements tomorrow

Cardiovascular History:

Prior CHF diagnosis? Yes
Prior ATE? No
Prior arrhythmia? Yes occasional VPCs
Cough? Yes after drinking/eating
Shortness of breath or difficulty breathing? no
Syncope or collapse? no
Sudden onset lameness? no
Exercise intolerance? No
Prior heart murmur? yes grade II left apical systolic murmur

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Moderate cachexia |
| <input checked="" type="checkbox"/> Mild muscle loss | <input type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|---|--------------------------------|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input checked="" type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Murmur location/description: Left apical systolic murmur

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

DCM and hx of HCF
 Grade II/VI left systolic murmur
 VPC's
 Not gaining weight

Differential Diagnoses:

DCM
 benign VPC, splenic mass, pain, cardiomyopathy
 insufficient caloric intake, hyperthyroidism,

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests: T4

Echocardiogram Findings:

General/2-D findings:
 Not performed

ECG findings:

NSR.

Assessment and recommendations:

The patient is clinically doing well, although the owner had to give an extra dose of since discharge. If renal values are normal today, then I would recommend a small increase in his dose (extra EOD). We have also recommended a food change to help with weight gain and for low Na intake. Recheck echocardiogram, renal values, and ECG in 3-4 months.

Final Diagnosis:

DCM with history of LCHF

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Ia | <input checked="" type="checkbox"/> IIIa |
| <input checked="" type="checkbox"/> Ib | <input checked="" type="checkbox"/> IIIb |
| <input checked="" type="checkbox"/> II | |

ACVIM Classification:

- | | |
|--|---------------------------------------|
| <input checked="" type="checkbox"/> A | <input checked="" type="checkbox"/> C |
| <input checked="" type="checkbox"/> B1 | <input checked="" type="checkbox"/> D |
| <input checked="" type="checkbox"/> B2 | |

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY
Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6 Canine

B6 Years Old Male (Neutered) Great
Dane

Blue BW: Weight(lbs) 0.00

Cardiology Inpatient

Date: B6

Weight: Weight(lbs) 0.00

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in ER email
- Yes - in PACS
- No

Presenting complaint and important concurrent diseases:

suspect CHF with enlarged heart, suspect DCM

Current medications and doses:

B6 2mg/kg IV once

Key indication for consultation: (murmur, arrhythmia, needs fluids, etc.):

murmur, tachycardia, enlarged heart on rads with B-lines and pulmonary edema on rads

Questions to be answered from the Consult:

medication recommendations

Is your consult time-sensitive? (e.g., anesthesia today, owner waiting, trying to get biopsy today)

- Yes (explain)
- No

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: left apical systolic

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck
- Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites

Echocardiogram Findings:

General/2-D findings:

B6

Doppler findings:

B6

Radiographic findings:

rDVM radiographs: severe generalized cardiomegaly with left atrial enlargement. The pulmonary vessels are distended. There is a diffuse interstitial pattern in the caudal lung field.

Assessment and recommendations:

Echocardiogram reveals DCM with a markedly enlarged LA and active CHF. Recommend starting

B6 The patient was moderately dyspneic during the examination with diffuse crackles and recommend administering **B6** mg/kg IV overnight. Once the patient is home and eating with a good appetite, then an **B6** PO SID-BID should be started as well. The MR gradient was low and ideally a blood pressure should be obtained. The patient has a history of eating an atypical diet in the past and DCM related to the diet remains a possibility since the patient is relatively young. Taurine level will be submitted. Recommend continuing with a more "typical" commercial diet that is not grain free and taurine supplementation could be started as well. Recheck renal values prior to discharge. A recheck echocardiogram is recommended in 3 months or sooner if the patient develops clinical signs such as increased RR/RE, cough, exercise intolerance, or syncope.

Final Diagnosis:

- Advanced DCM with severe LA enlargement and active CHF r/o genetic vs. nutritional

Heart Failure Classification Score:

ISACHC Classification:

- Ia IIIa
- Ib IIIb
- II

ACVIM CHF Classification:

- A C
- B1 D
- B2

M-Mode

IVSd	B6	cm
LVIDd		cm
LVPWd		cm
IVSs		cm
LVIDs		cm
LVPWs		cm
%FS		%
Ao Diam		cm
LA Diam		cm
LA/Ao		
EPSS		cm

M-Mode Normalized

IVSdN
LVIDdN
LVPWdN
IVSsN
LVIDsN
LVPWsN
Ao Diam N
LA Diam N

B6

{0.29 - 0.52}
{1.35 - 1.73} !
{0.33 - 0.53}
{0.43 - 0.71} !
{0.79 - 1.14} !
{0.53 - 0.78} !
{0.68 - 0.89} !
{0.64 - 0.90} !

2D

SA LA
Ao Diam
SA LA / Ao Diam
IVSd
LVIDd
LVPWd
EDV(Teich)
IVSs
LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)
LVld A4C
LVEDV MOD A4C
LVls A4C
LVESV MOD A4C
LVEF MOD A4C
SV MOD A4C

B6

cm
cm

cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml
cm
ml
cm
ml
%
ml

Doppler

MR Vmax
MR maxPG
MVE Vel
MV DecT
MVA Vel
MVE/A Ratio
E'
A'
E/E'
PV Vmax
PV maxPG
TR Vmax
TR maxPG

B6

m/s
mmHg
m/s
ms
m/s

m/s
m/s

m/s
mmHg
m/s
mmHg

Discharge Instructions

Patient

Name: B6
Species: Canine
Blue Male (Neutered) Great Dane
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC
B6

Cardiology Resident:

B6

Student: B6 /19

Cardiology Technician:

B6

Admit Date: B6

Discharge Date: B6

Diagnoses: Dilated cardiomyopathy (DCM) with congestive heart failure

Diagnostic test results and findings:

Chest radiograph (x-ray) findings: The heart is enlarged and there is fluid in the lungs

Echocardiogram findings: All chambers of the heart are enlarged and there is a leak at the mitral valve

ECG findings: The ECG showed frequent ventricular premature contractions (VPC) with few couplets (2 VPC's occurring side by side)

Labwork findings:

The kidney values are slightly elevated, but should be good enough to continue the current medication.

The results of the blood taurine level is still pending, we will call you as soon as that becomes available.

Case summary:

Thank you so much for entrusting us with B6 care. B6 presented to Tufts ER on B6 through referral from your primary veterinarian who found enlarged heart and fluid in his lungs on chest x-rays.

At Tufts, with further diagnostic tests B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs or belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can

use cardiac medications and some changes to the diet to make B6 comfortable and have him breathing easier.

His ECG revealed that B6 had some abnormal contraction of his heart called ventricular premature contractions (VPC). Many of the VPCs were isolated, but we did find couple incidences where two of the VPCs were closely associated with one another (a couplet). Since the heart failure is known to cause arrhythmias, and the medication we would use is not benign either, we would like to monitor his ECG at his next recheck in 1-2 weeks to see if he continue to have abnormal rhythms.

We have hospitalized B6 overnight with aggressive medical management (bloodwork, ECG monitoring, medication), and B6 recovered throughout the night. The recheck x-ray of his chest showed that there are no more fluid in his lungs, so we are comfortable sending him home with you today.

Monitoring at home:

- o We would like you to monitor B6 breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- o In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- o An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 if difficulty breathing is not improved by within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.
- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have B6 evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Recommended Medications:

B6

Diet suggestions:

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/diet/>)

Because B6 had been fed a diet that is potentially deficient in taurine (amino acids that plays a role in building heart muscles) levels, we recommend supplementing B6 with taurine for at least another 6 months.

B6 may also benefit from getting L-carnitine supplement. The recommended dose of L-carnitine for B6 is 2000mg (50mg/kg) by mouth twice a day. You can find over-the-counter product for L-carnitine supplements, and there is no need to obtain prescription for it.

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable. However, if you find that B6 is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks. At this visit we will check your dog's breathing effort and heart function, do a blood test to recheck kidney values, and recheck B6 ECG readings. If we continue to find VPCs that concerns us, we may prescribe an anti-arrhythmic medication for him.

A recheck echocardiogram is recommended in 3-4 months.

Thank you for entrusting us with B6 care. Please contact our Cardiology liaison, B6 at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Sincerely,

B6

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvnc/clinical-studies

Case: B6

Owner: B6

Discharge Instructions

B6

B6

3:41:18 PM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

B6

B6

3:41:46 PM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
 Veterinarian: **B6**
 Patient ID: **B6**
 Visit ID: 2475622

Patient: **B6**
 Species: Canine
 Breed: Great Dane
 Sex: Male (Neutered)
 Age: **B6** Years Old

Lab Results Report

Chemistry 21 (Cobas)		B6	3:57:20 PM	Accession ID:	B6
Test	Results	Reference Range	Units		
GLUCOSE		67 - 135	mg/dL		
UREA		8 - 30	mg/dL		
CREATININE		0.6 - 2	mg/dL		
PHOSPHORUS		2.6 - 7.2	mg/dL		
CALCIUM2		9.4 - 11.3	mg/dL		
T. PROTEIN		5.5 - 7.8	g/dL		
ALBUMIN		2.8 - 4	g/dL		
GLOBULINS		2.3 - 4.2	g/dL		
A/G RATIO		0.7 - 1.6			
SODIUM		140 - 150	mEq/L		
CHLORIDE	B6	106 - 116	mEq/L		
POTASSIUM		3.7 - 5.4	mEq/L		
NA/K		29 - 40			
T BILIRUBIN		0.1 - 0.3	mg/dL		
D.BILIRUBIN		0 - 0.1	mg/dL		
I BILIRUBIN		0 - 0.2	mg/dL		
ALK PHOS		12 - 127	U/L		
ALT		14 - 86	U/L		
AST		9 - 54	U/L		
CHOLESTEROL		82 - 355	mg/dL		
OSMOLALITY (CALCULATED)		291 - 315	mmol/L		

T4 Add On/Clin Path		B6	3:57:00 PM	Accession ID:	B6
Test	Results	Reference Range	Units		
T4/TOSOH	B6	1 - 4.1	ug/dl		

Radiology Request & Report

Patient

Name: B6
Species: Canine
Blue Male (Neutered) Great Dane
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6
Date of request: B6

Attending Clinician: B6 DVM (Resident, Cardiology)

Student:

Date of exam: 5/18/18

Patient Location: Ward/Cage: ICU run 2

Weight (kg) 46.10

- Inpatient
- Outpatient Time:
- Waiting
- Emergency

Sedation

- BAG
- OBAG
- 1/2 dose OBAG
- DexDomitor/Butorphanol
- Anesthesia to sedate/anesthetize

Examination Desired: IA 1 view lateral

Presenting Complaint and Clinical Questions you wish to answer:

****Active heart failure**** Great Dane, so please use large animal radiograph machine for 1 view lateral
Want to know if there is any signs of active congestion

Pertinent History:

2yo MN great dane with history of 2 week long cough and panting. Dx with DCM and CHF yesterday

Findings:

B6

B6

Conclusions:

- Resolution of pulmonary edema with persistence of pulmonary venous distention.
- Mildly improved moderate cardiomegaly consistent with reported DCM.

Radiologists

Primary: DVM

Reviewing:

Dates

Reported:

Finalized:

B6

Patient ID: B6
B6 Canine
B6 years Old Male (Neutered) Great Dane
Blue

Cardiology Appointment Report

Date: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6

Presenting Complaint:

Recheck DCM - CHF on B6

Concurrent Diseases:

None

General Medical History:

Almost back to his baseline since last discharge on B6 great appetite and no v/d/s. Occasional cough after he eats/drinks fast

Goes for 1.5~2mile walk daily

Respiratory rate had been between 18-24, was at 35 once so gave a dose of furosemide and it helped.

B6 may be having trouble gaining weight

Diet and Supplements:

Purina proplan high performance dog food 3 cups BID

Purina proplan 1 can SID

High calory syrup covered medication

Also planning to start him on L-Carnitine, Mg, and Coq10 supplements tomorrow

Cardiovascular History:

Prior CHF diagnosis? Yes
Prior ATE? No
Prior arrhythmia? Yes occasional VPCs
Cough? Yes after drinking/eating
Shortness of breath or difficulty breathing? no
Syncope or collapse? no
Sudden onset lameness? no
Exercise intolerance? No
Prior heart murmur? yes grade II left apical systolic murmur

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Moderate cachexia |
| <input type="checkbox"/> Mild muscle loss | <input type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|---|--------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input checked="" type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Murmur location/description: Left apical systolic murmur

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

DCM and hx of HCF
 Grade II/VI left systolic murmur
 VPC's
 Not gaining weight

Differential Diagnoses:

DCM
 benign VPC, splenic mass, pain, cardiomyopathy
 insufficient caloric intake, hyperthyroidism,

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests: T4

Echocardiogram Findings:

General/2-D findings:
 Not performed

ECG findings:

NSR.

Assessment and recommendations:

The patient is clinically doing well, although the owner had to give an extra dose of since discharge.

We have also recommended a food change to help with weight gain and for low Na intake. Recheck echocardiogram, renal values, and ECG in 3-4 months.

Final Diagnosis:

DCM with history of LCHF

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|--|-------------------------------|
| <input type="checkbox"/> Ia | <input type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input type="checkbox"/> IIIb |
| <input checked="" type="checkbox"/> II | |

ACVIM Classification:

- | | |
|-----------------------------|---------------------------------------|
| <input type="checkbox"/> A | <input checked="" type="checkbox"/> C |
| <input type="checkbox"/> B1 | <input type="checkbox"/> D |
| <input type="checkbox"/> B2 | |

Report Details - EON-355703

ICSR: 2049063
Type Of Submission: Initial
Report Version: FPSR.FDA.PETF.V.V1
Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type: Voluntary
Report Submission Date: 2018-06-06 07:53:32 EDT

Reported Problem:
Problem Description: possible diet-associated DCM 4health Grain-Free Large Breed Formula Adult Dog Food. Owner was asked to save food. Plasma taurine **B6** (ref range 60-120), WB taurine **B6** (ref range 200-350) DCM diagnosed by echocardiography
Date Problem Started: 05/29/2018
Concurrent Medical Problem: Unknown
Outcome to Date: Unknown

Product Information:
Product Name: 4health Grain-Free Large Breed Formula Adult Dog Food
Product Type: Pet Food
Lot Number:
Package Type: BAG
Possess Unopened Product: Unknown
Possess Opened Product: Yes
Product Use Information: **Product Use Stopped After the Onset of the Adverse Event:** Unknown
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name:
Type Of Species: Dog
Type Of Breed: Unknown
Gender: Unknown
Reproductive Status: Unknown
Assessment of Prior Health: Unknown
Number of Animals Given the Product: 1
Number of Animals Reacted: 1

Owner Information: Owner Yes
Information provided:
Contact: Name: **B6**
Phone: **B6**
Email: **B6**
Address: **B6**
United States
Healthcare Professional Information:

Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Road North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Reporter Wants to Remain Anonymous:	No	
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Reported to Other Parties:	Unknown		

Additional Documents:

Report Details - EON-355703

ICSR: 2049063
Type Of Submission: Initial
Report Version: FPSR.FDA.PETF.V.V1
Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
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Date Problem Started: 05/29/2018
Concurrent Medical Problem: Unknown
Outcome to Date: Unknown

Product Information:
Product Name: 4health Grain-Free Large Breed Formula Adult Dog Food
Product Type: Pet Food
Lot Number:
Package Type: BAG
Possess Unopened Product: Unknown
Possess Opened Product: Yes
Product Use Information: **Product Use Stopped After the Onset of the Adverse Event:** Unknown
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name:
Type Of Species: Dog
Type Of Breed: Unknown
Gender: Unknown
Reproductive Status: Unknown
Assessment of Prior Health: Unknown
Number of Animals Given the Product: 1
Number of Animals Reacted: 1
Owner Information: **Owner Information provided:** Yes
Contact: **Name:** B6
Phone:
Email:
Address: B6
United States
Healthcare Professional Information:

Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Road North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Reporter Wants to Remain Anonymous:	No	
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Reported to Other Parties:	Unknown		

Additional Documents:

Radiology Request & Report

Patient

Name: B6
Species: Canine
Gray/Black Male (Neutered)
Caucasian Shepherd Dog
Birthdate: B6

Owner

Name:
Address: **B6**

Patient #: B6
Date of request: 5/29/2018

Attending Clinician: B6

Student:

Date of exam: 05/29/2018

Patient Location: Ward/Cage: ICU R1 Weight (kg) 62.00

- Inpatient
- Outpatient Time:
- Waiting
- Emergency

Sedation

- BAG
- OBAG
- 1/2 dose OBAG
- DexDomitor/Butorphanol
- Anesthesia to sedate/anesthetize

Examination Desired: DV and RLAT

Presenting Complaint and Clinical Questions you wish to answer:
Emergency

Pertinent History:

Gyo MC K9 presenting for 2wk hx of cough, presented for increased RR/RE. Poss dilated LV on flash, presumptive DCM on ER US

Findings:

B6

Conclusions:

- Moderate left-sided cardiomegaly with left atrial enlargement, venous distension and cardiogenic pulmonary edema consistent with left-sided heart failure. Echocardiogram is recommended for further evaluation. Follow up radiographs are recommended to monitor response to treatment.

Radiologists

Primary:

Reviewing:

Dates

Reported: 5/29/18

Finalized:

Discharge Instructions

Patient

Name: B6
Species: Canine
Black Male (Neutered) Great Dane
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 V19

Admit Date: B6 11:24:19 AM

Discharge Date: B6

Diagnoses:

Dilated cardiomyopathy (DCM) with congestive heart failure.

B6

Case summary:

Thank you for bringing B6 to Tufts for treatment of his heart disease. B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. B6 has two abnormal heart rhythms right now that he is receiving medication for- atrial fibrillation and ventricular arrhythmias. The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs or belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

Diagnostic test results and findings:

Echocardiogram findings: All chambers of the heart are enlarged. There is severe dysfunction of the heart's ability to contract. The mitral valve leaflets are not closing together well due to the dilation of the heart (they are being pulled apart as the heart increases in size). Moderate amount of pleural effusion (fluid around the lungs) and ascites (fluid in the abdomen).

ECG findings: The ECG showed atrial fibrillation with occasional ventricular arrhythmia. Atrial fibrillation is an abnormal heart rhythm. Once dogs develop atrial fibrillation it is extremely rare for them to regain their normal

heart rhythm. Our main goal now is to decrease the heart rate as much as possible since right now his heart rate is too high. The ventricular arrhythmia that he is having is malignant, meaning it can potentially lead to collapsing episodes and unfortunately even death. The amiodarone medication he is on will hopefully further control this ventricular rhythm as it further saturates the heart tissue as we keep dosing it. Labwork findings: His kidneys are tolerating the medications well right now. We will want to recheck these values soon.

Monitoring at home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- *An increase in breathing rate or effort will usually mean that you should give an extra dose of B6* if difficulty breathing is not improved by within 30-60 minutes after giving B6. *When we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.*
- There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Recommended Medications:

B6

Diet suggestions:

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/diet/>)

Your dog's usual diet may also have more sodium than recommended - we want him/her to continue to eat his/her normal diet for the first 7 to 14 days so we can make sure he is tolerating medications well, but after that time we would recommend slowly introducing one of the lower sodium diets on the HeartSmart list (25% of the new diet and 75% old diet for 2-3 days, then 50:50, etc.). We also want B6 to eat a main stream, non grain-free diet from now on.

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable. However, if you find that B6 is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks after any medication adjustments are made. At this visit we will check your dog's breathing effort and heart function, check his ECG, and check for fluid around the lungs and in the belly. Please call or email to schedule this appointment with us. A recheck echocardiogram is recommended in 3-4 months.

Thank you for entrusting us with B6 care. He is such a sweet boy! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: B6

Owner: B6

Discharge Instructions

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY
Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6 Canine

B6: Years Old Male (Neutered) Great Dane
Black BW: Weight (kg) 71.60

Cardiology Consultation

Date: B6

Weight: Weight (kg) 71.60

Requesting Clinician: Unassigned Clinician

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in SS
- Yes - in PACS
- No - CD in ER and ER email

Patient location: ER

Presenting complaint and important concurrent diseases:

1 mo history of resp distress, worse in past week

no coughing

decreased energy level and appetite, increased thirst

litter mate diagnosed with DCM

CBC, chem, taurine done at rDVM - haven't gotten records yet (Taurine was B6 done at UCD)

Current medications and doses:

B6

At-home diet: Was on Taste of the Wild grain free diet

Switched to Purina Proplan Sensitive skin and stomach 1 month ago

Key indication for consultation: (murmur, arrhythmia, needs fluids, etc.)

Afib on EKG

Decreased contractility on TFAST

Is your consult time-sensitive? (e.g., anesthesia today, owner waiting, trying to get biopsy today)

- Yes (explain):
- No

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: Left apical murmur

Jugular vein:

- Bottom 1/3 of the neck to
- Middle 1/3 of the neck
- Top 2/3 of the neck
- 1/2 way up the neck

Arterial pulses:

- Weak
- Fair; variable
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

Mitral inflow:

- E waves only - atrial fib
- Normal
- Delayed relaxation
- Pseudonormal
- Restrictive

ECG findings:

B6

Assessment and recommendations: Findings consistent with advanced DCM with active CHF. Severe LV dilation with systolic dysfunction is observed. **B6** are recommended. Tachycardic irregularly irregular consistent with AFib worsens CHF as decrease overall cardiac output from loss of atrial contraction and fast ventricular rate. Recommend to control ventricular rate with **B6** sustained-release and keep patient under telemetry monitoring during hospitalization to evaluate response to treatment; likely add in **B6** since the dog is having some ventricular ectopy. As systemic arterial pressure was estimated at 90mmHg in the echo, recommend check blood pressure. Recommend check kidney levels in daily basis during hospitalization. As patient has hx of grain free diet, Taurine supplementation may be worthwhile, despite prior normal taurine level.

Treatment plan:

B6

Final Diagnosis:

Advanced DCM with active heart failure; atrial fibrillation with rapid ventricular response, less frequent VPCs.

Moderate pleural effusion and ascites.

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM CHF Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

EPSS

Max LA

B6

cm

cm

cm

cm

cm

cm

%

cm

cm

cm

cm

2D

Ao Diam

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

EF(Cube)

%FS

SA LA

B6

cm

cm

cm

cm

cm

cm

cm

%

%

cm

Doppler

MR Vmax

MR maxPG

AV Vmax

AV maxPG

TR Vmax

TR maxPG

B6

m/s

mmHg

m/s

mmHg

m/s

mmHg

Discharge Instructions

Patient

Name: B6
Species: Canine
Black Male (Neutered) Great Dane
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6, V19

Admit Date: 9/12/2018 11:24:19 AM

Discharge Date: 9/14/2018

Diagnoses:

Dilated cardiomyopathy (DCM) with congestive heart failure.
Atrial fibrillation with ventricular arrhythmia

Case summary:

Thank you for bringing B6 to Tufts for treatment of his heart disease. B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. B6 has two abnormal heart rhythms right now that he is receiving medication for- atrial fibrillation and ventricular arrhythmias. The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs or belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

Diagnostic test results and findings:

Echocardiogram findings: All chambers of the heart are enlarged. There is severe dysfunction of the heart's ability to contract. The mitral valve leaflets are not closing together well due to the dilation of the heart (they are being pulled apart as the heart increases in size). Moderate amount of pleural effusion (fluid around the lungs) and ascites (fluid in the abdomen).

ECG findings: The ECG showed atrial fibrillation with occasional ventricular arrhythmia. Atrial fibrillation is an abnormal heart rhythm. Once dogs develop atrial fibrillation it is extremely rare for them to regain their normal

heart rhythm. Our main goal now is to decrease the heart rate as much as possible since right now his heart rate is too high. The ventricular arrhythmia that he is having is malignant, meaning it can potentially lead to collapsing episodes and unfortunately even death. The **B6** medication he is on will hopefully further control this ventricular rhythm as it further saturates the heart tissue as we keep dosing it. Labwork findings: His kidneys are tolerating the medications well right now. We will want to recheck these values soon.

Monitoring at home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
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- If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Recommended Medications:

B6

Diet suggestions:

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/diet/>)

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Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable. However, if you find that [B6] is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks after any medication adjustments are made. At this visit we will check your dog's breathing effort and heart function, check his ECG, and check for fluid around the lungs and in the belly. Please call or email to schedule this appointment with us. A recheck echocardiogram is recommended in 3-4 months.

Thank you for entrusting us with [B6] care. He is such a sweet boy! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

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Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvnc/clinical-studies

Case: [B6]

Owner: [B6]

Discharge Instructions

B6

Ac **B6**

B6

Tx's checked by _____

IVF Rate checked by _____

TREATMENT SHEET

Patient: **B6**
 Species: Canine
 Breed: Great Dane
 Color: Black
 Rabies Due:

Sex: MN
 DoB: **B6**

IVF: Type _____ Rate _____
 (Maintenance Rate = _____ mL/hr)

Dr: **B6** Date: **B6**

Tech: **B6** Ward: **SOP 1**

Alerts: Dog Aggressive per O

Problem/DDx: CHF, Arrhythmia

Admit Date: **B6**

e Leashes & collar on cage

IVC

IV CATHETER

Diet: bland

Date _____ Gage _____ Site _____ Set by _____

Date _____ Gage _____ Site _____ Set by _____

Weight: 166.5 lbs _____ kg

Treatment	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
	A	A	A	A	A	A	A	A	A	A	A	P	P	P	P	P	P	P	P	P	P	P	P	P

B6

NURSING NOTES ON OTHER SIDE OF TREATMENT SHEET!

CHANGES FOR FOLLOWING DAY

Oxygen Time

Date IN _____ Time IN _____

Date Out _____ Time Out _____

Room Air (20.5% - 22.5%)

Date IN _____ Time Out _____

Oxygen Settings

Hi _____ Low _____
 Air temp _____ Floor heat: ON / OFF

Written by: _____

B6

Acc: **B6**

B6

Tx's checked by _____

IVF Rate checked by _____

TREATMENT SHEET

Patient: **B6**
 Species: Canine
 Breed: Great Dane
 Color: Black
 Rabies Due:

Sex: MN
 DoB: **B6**

IVF: Type _____ Rate _____
 (Maintenance Rate = _____ mL/hr)

Dr: **B6** Date: **B6**

Alerts: Dog Aggressive
 Problem/DDx: CHF, Arrhythmia

Tech: _____ Ward: _____

Admit Date _____

IV CATHETER

Date: 9/11 Gage: 18 Site: Right Set by: **B6**

Weight: 166.5 lbs _____ kg

Diet: _____

Date _____ Gage _____ Site _____ Set by _____

Treatment	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12
	A	A	A	A	A	A	A	A	A	A	A	P	P	P	P	P	P	P	P	P	P	P	P	P

B6

NURSING NOTES ON OTHER SIDE OF TREATMENT SHEET

CHANGES FOR FOLLOWING DAY

Empty box for nursing notes.

Oxygen Time

Date IN _____ Time IN _____

Date OUT _____ Time OUT _____

Room Air (20.5% - 22.5%)

Date IN _____ Time OUT _____

Oxygen Settings

Hi _____ Low _____
 Air temp _____ Floor heat: ON / OFF

Written By: _____

B6

B6

B6

B6



Cummings School of Veterinary Medicine

Healing Animals. Helping Humans. Transforming Global Health.

Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6

Canine

B6 Years Old Male (Neutered) Beagle Cross

White/Brown BW: Weight (kg) 20.40

Cardiology Consultation

Date: B6

Weight: Weight (kg) 20.40

Patient location: ICU 02

Requesting Clinician: B6 } DVF (Emergency and Critical Care Resident)

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in SS
- Yes - in PACS
- No

Presenting complaint and important concurrent diseases: Cough, cardiomegaly and pulmonary edema on rDVM rads

Current medications and doses: B6

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None
- I/VI
- II/VI
- IV/VI
- V/VI
- VI/VI

III/VI

Murmur location/description: systolic left apical

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly

- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

ECG findings:

B6

Assessment and recommendations:

Echocardiogram reveals dilated LV cavity with decrease contractile function and LAE, with DCM-like changes and secondary CHF, although the LV walls are not thinner than normal. This may be a early DCM or cardiomyopathy secondary to myocarditis vs primary cardiomyopathy. Aortic velocity is slightly increased, which is not typical of DCM, but no other defects are visible that would result in increased stroke volume. Recommend submitting CBC and chemistry. Recommend continuing **B6** **B6** if patient is eating well and not azotemic. Given the somewhat unusual appearance of pulmonary edema could consider recheck thoracic radiographs after **B6** treatment. However, patient has had a positive response to **B6** and radiographs may not be essential at this time. Given the young age, atypical breed, and non traditional diet (kangaroo and lentil) recommend submitting taurine levels (serum and whole blood) or supplementing with taurine. If there is a travel history outside of New England could consider testing for Chagas disease. Redcheck exam and renal values in 10-14 days. Redcheckecho in 3-4 months.

Redcheck appointment scheduled with cardiology on Tuesday August 2nd at 11AM. Please call 508 887 4696 if need to reschedule.

Treatment plan:

B6

Final Diagnosis:

DCM vs. cardiomyopathy (primary vs. secondary to myocarditis) with secondary CHF
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM CHF Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

EPSS

B6

cm
cm
cm
cm
cm
cm
%
cm
cm

cm
cm

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

IVSsN

LVIDsN

LVPWsN

Ao Diam N

LA Diam N

B6

{0.29 - 0.52}
{1.35 - 1.73} !
{0.33 - 0.53}
{0.43 - 0.71}
{0.79 - 1.14} !
{0.53 - 0.78} !
{0.68 - 0.89}
{0.64 - 0.90}

2D

SA LA

Ao Diam

SA LA / Ao Diam

IVSd

LVIDd

LVPWd

EDV(Teich)

IVSs

LVIDs

LVPWs

ESV(Teich)

EF(Teich)

%FS

SV(Teich)

B6

cm
cm

cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler

MR Vmax

MR maxPG

MV E Vel

MV DecT

MV A Vel

MV E/A Ratio

E'

A'

B6

m/s
mmHg
m/s
ms
m/s

m/s
m/s

E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG
TR Vmax
TR maxPG

B6

m/s
mmHg
m/s
mmHg
m/s
mmHg

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient ID: **B6**

B6

Canine

B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: **B6**

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: **B6** V18

Presenting Complaint: Recheck of historical DCM (diagnosed 7/22/16)

Concurrent Diseases: None

General Medical History:

Dx with DCM-like changes, secondary CHF, mild PHT 7/22/16. Taurine levels sent out due to concern for taurine deficiency as the cause, but levels were elevated.

B6 has been doing well since his last visit, however, he started coughing at night a few weeks ago. Lasted for around 10 days. Coincided with when owner went out of town and her husband was giving **B6** his meds- concerned that he may have been giving the wrong amounts. Additional **B6** were not given when he was coughing. Since owner has returned and **B6** is definitely on his regular schedule, coughing has subsided and he is doing well. No exercise intolerance. Good appetite.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1.5cups BID
Gets frozen carrots and other veggies as treats is

Cardiovascular History:

Prior CHF diagnosis? yes

Prior ATE? no

Prior arrhythmia? no

Cough? occasional when possibly not getting all of his meds

Shortness of breath or difficulty breathing? no

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? no

Prior heart murmur? yes, intermittent I/VI holosystolic left basilar on last PE

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: L systolic basilar

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck
- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal /tense
- Hepatomegaly
- Abdominal distension
- Mild ascites
- Marked ascites

Problems:

- (1) Hx DCM (primary vs secondary to myocarditis) with secondary CHF
- (2) Hx mild PHT

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

General/2-D findings:

Echocardiogram performed standing. Do not put on table. Does not like abdomen touched

LV cavity is mildly dilated with mildly reduced contractile function (better side to side motion); improved from previous exam. The LA is normal to at most mildly dilated. MV is mildly thickened. The RH is mildly dilated. No pericardial or pleural effusion.

Doppler findings:

Elevated aortic velocity.

Assessment and recommendations:

Echocardiogram reveals continued improvement in contractile function and reduced LV and LA chamber dimensions. Patient is doing well at home, so recommend

B6

radiographs and echo. Otherwise recheck echo in 6 months, or sooner if clinical signs occur such as increased RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with history of secondary CHF - improved echocardiographic measurements today.

Heart Failure Classification Score:

ISACH Classification:

- Ia
- Ib
- Mode
- IIIa
- IIIb

IVSd

ACVIM Classification:

- Wd
- C
- D
- FS
- LVPWs
- %FS
- Max LA

B6

om
om
om
om
om
%
om

M-Mode Normalized

- IVSdN
- LVIDdN
- LVPWdN
- IVSsN
- LVIDsN
- LVPWsN

B6

{0.29 - 0.52} !
{1.35 - 1.73} !
{0.33 - 0.53}
{0.43 - 0.71} !
{0.79 - 1.14}
{0.53 - 0.78}

2D

- SA LA
- Ao Diam
- SA LA / Ao Diam
- IVSd
- LVIDd
- LVPWd
- EDV(Teich)
- IVSs
- LVIDs
- LVPWs
- ESV(Teich)
- EF(Teich)
- %FS
- SV(Teich)

B6

om
om
om
om
ml
om
om
om
ml
%
%
ml

Doppler

AV Vmax
AV maxPG

B6

m/s
mmHg

B6

Patient ID: B6

B6 Canine

B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6

Presenting Complaint:

History of DCM (7/22/2016) - 6 month recheck

Concurrent Diseases:

None

General Medical History:

Diagnosed with DCM and secondary CHF July 2016. Contractility and left ventricular size were improved at the last recheck in December.

No incidents of any breathing difficulties since last visit. Owner has been walking him early in the day, but one incident where he didn't want to walk as far when it was hot in the middle of the day. He sleeps most of the day but is happy to go outside and seems comfortable. Has a great appetite. Owner is monitoring respiratory rate at least every day with no increased rate or effort. B6 also has allergies that are managed by the rDVM.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1 cups BID (decreased as activity decreased)

Frozen peas and fresh carrots occasionally as treats

Gets medications in peanut butter

Cardiovascular History:

Prior CHF diagnosis? yes

Prior ATE? no

Prior arrhythmia? no

Cough? not since last time

Shortness of breath or difficulty breathing? not since last time

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? when warm outside

Prior heart murmur? Yes, intermittent I/VI holosystolic left basilar progressed to Grade II on last PE

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

Normal

Mild muscle loss

Moderate cachexia

Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

None

I/VI

II/VI

III/VI

IV/VI

V/VI

VI/VI

Murmur location/description: Left systolic at the base

Jugular vein:

Bottom 1/3 of neck

Middle 1/3 of neck

Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites
- Marked ascites

Problems:

History of DCM with CHF - resolving

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation
- Pseudonormal
- Restrictive

Assessment and recommendations:

Today's echocardiogram shows a heart with normal structures, which is very different from when the patient first presented for CHF 2 years ago. This suggests that the initial change were a result of an acute insult (infection, toxin, diet). Given the improvement seen, we will try to decrease medication doses slowly. B6

B6

B6

B6

Recheck echocardiogram in 6 months to see if the cardiac structure remains normal.

Final Diagnosis:

Normal cardiac structure, history of DCM with LCHF

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|--|-------------------------------|
| <input checked="" type="checkbox"/> Ia | <input type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input type="checkbox"/> IIIb |
| <input type="checkbox"/> II | |

ACVIM Classification:

- | | |
|---------------------------------------|----------------------------|
| <input checked="" type="checkbox"/> A | <input type="checkbox"/> C |
| <input type="checkbox"/> B1 | <input type="checkbox"/> D |
| <input type="checkbox"/> B2 | |

M-Mode

IVSd	B6	cm
LVIDd		cm
LVPWd		cm
IVSs		cm
LVIDs		cm
LVPWs		cm
%FS		%
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA	cm	

2D

Ao Diam	B6	cm
IVSd		cm
LVIDd		cm
LVPWd		cm

IVSs
LVIDs
LVPWs
EF(Cube)
%FS
SA LA

B6

cm
cm
cm
%
%
cm

Doppler
MV E Vel
MV DecT
MV Dec Slope
MV A Vel
MV E/A Ratio
PV Vmax
PV maxPG
AV Vmax
AV maxPG

B6

m/s
ms
m/s
m/s

m/s
mmHg
m/s
mmHg

B6

Patient ID: B6
B6 Canine
B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 V18

Presenting Complaint:

Recheck of historical DCM (diagnosed 7/22/16)

Concurrent Diseases:

B6

General Medical History:

Presented to Tufts ER B6 for exercise intolerance, shallow breathing, coughing, enlarged heart, and pulmonary edema on rDVM chest rads. Echo revealed DCM-like changes, secondary CHF, mild PHT.

Patient began B6 Taurine levels were sent out and were found to be elevated.

Recheck on B6 improved respiratory effort, no coughing. However, still some exercise intolerance. O d/c taurine supplementation. Echo findings similar to before, visible enlargement of all heart chambers.

Recheck on B6, some increased respiratory effort with cough. Mild progression of LV and LA dilation on echo, slightly increased contractile function. B6 due to vague painfulness was anaplasma positive. Treated with B6

Communication B6 with Tufts, inc rr in the night sometimes with more coughing. We recommended increasing B6 from B6

B6 doing much better on new medication doses. In the last 2 months, had extra B6 3 times overnight for coughing/increased effort. No exercise intolerance.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1.5cups BID

Gets frozen carrots and other veggies as treats

Cardiovascular History:

Prior CHF diagnosis? yes

Prior ATE? no

Prior arrhythmia? no

Cough? no

Shortness of breath or difficulty breathing? occasional, resolves with extra dose of furosemide

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? no

Prior heart murmur? yes, II/VI holosystolic left apex

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: systolic left basilar, intermittent

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck
- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites
- Marked ascites

Problems and differential diagnoses:

Hx DCM (primary vs secondary to myocarditis) with secondary CHF

Hx mild PHT

B6

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

General/2-D findings:

LV cavity is mildly dilated with mildly reduced contractile function (better side to side motion). The LA is mildly dilated. MV is mildly thickened. The RH is mildly dilated. No pericardial or pleural effusion.

Doppler findings:

Trace MR

AV Vmax 1.8 m/s

Mitral inflow:

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

ECG findings:

B6

Assessment and recommendations:

Echocardiogram reveals improvement in contractile function and reduced LV and LA chamber dimensions. The cause for improvement is unclear; owner change diet from kangaroo to chicken, but this change was made prior to previous exams. The only changes made since previous exam were an increase in B6 and B6. Patient is doing well at home, so recommend continuing current medications unless

B6

rechecking radiographs and echo. Otherwise recheck echo in 6 months, or sooner if clinical signs occur such as increased RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with history of secondary CHF (pulmonary edema, suspected ascites) - improved echocardiographic measurements today.

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- IIIa
- Ib
- IIIb
- II

ACVIM Classification:

- A
- C
- B1
- D
- B2

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

B6

cm
cm
cm
cm
cm
cm
cm
cm
cm
cm

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

B6

(0.29 - 0.52) !
(1.35 - 1.73) !
(0.33 - 0.53)

IVSsN
LVIDsN
LVPWsN
Ao Diam N
LA Diam N

B6

{0.43 - 0.71}!
{0.79 - 1.14}!
{0.53 - 0.78}
{0.68 - 0.89}!
{0.64 - 0.90}

2D
SA LA
Ao Diam
SA LA / Ao Diam
IVSd
LVIDd
LVPWd
EDV(Teich)
IVSs
LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

B6

cm
cm

cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler
MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
E'
A'
E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG

B6

m/s
ms
m/s

m/s
m/s

m/s
mmHg
m/s
mmHg

B6

Patient ID: B6

B6 Canine

B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6, CVT, VTS(Cardiology)

Student: B6 V17

Presenting Complaint: Recheck generalized cardiomegaly with DCM-like changes, congestive heart failure

General Medical History:

In June 2016 B6 began coughing. rDVM thought possibly related to allergies. B6 also treated for B6 at this time. B6 developed progressive lethargy and inappetence as well as exercise intolerance and shallow breathing pattern. Went back to rDVM where chest rads were performed. Enlarged heart and pulmonary edema were visualized. Patient was referred to Tufts ER and placed in O2. Echo was performed that demonstrated a dilated LV cavity with decreased contractility, LAE with DCM like changes, and CHF. Rule outs considered included early DCM and cardiomyopathy secondary to myocarditis. Due to patient age and atypical breed- recommended taurine levels be measured. Taurine levels both elevated. CBC/Chem showed a mildly elevated Ca but was otherwise within normal limits. Patient currently being managed on B6 supplement.

At home patient initially would not eat. Patient started all meds but B6 developed diarrhea and vomiting. Discontinued B6. Vomiting stopped but diarrhea persisted. O returned to rDVM and got a B6 on B6. rDVM prescribed B6 one tablet B6 for 7 days. O began feeding chicken thighs on B6 and patients appetite improved markedly. Now B6 is eating dry food very well. His activity level has improved dramatically- increasing every day. Patient has not had any additional episodes of diarrhea while on B6. O would like to have some on hand. O reports no more coughing or increased respiratory effort/rate, but there is still exercise intolerance. No syncope or collapse.

Diet and Supplements:

Owner has B6 but has not been giving it.

California Naturals (kangaroo and red lentil)- 2 cups 3x a day

Cardiovascular History:

Prior CHF diagnosis? Yes

Prior ATE? No

Prior arrhythmia? No

Cough? No coughing since prior visit, but there is a history of coughing

Shortness of breath or difficulty breathing? No residual shortness of breath following onset of meds

Syncope or collapse? No

Sudden onset lameness? No

Exercise intolerance? Yes

Prior heart murmur? Yes II/VI holosystolic left apex

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

Normal

Mild muscle loss

Moderate cachexia

Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|---|--------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input checked="" type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Murmur location/description: Holosystolic, PMI left apex

Jugular vein:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Bottom 1/3 of neck | <input type="checkbox"/> Top 2/3 rd of neck |
| <input type="checkbox"/> Middle 1/3 of neck | |

Arterial pulses:

- | | |
|--|---|
| <input type="checkbox"/> Weak | <input type="checkbox"/> Bounding |
| <input type="checkbox"/> Fair | <input type="checkbox"/> Pulse deficits |
| <input checked="" type="checkbox"/> Good | <input type="checkbox"/> Pulsus paradoxus |
| <input type="checkbox"/> Strong | <input type="checkbox"/> Other: |

Arrhythmia:

- | | |
|---|--------------------------------------|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> Bradycardia |
| <input type="checkbox"/> Sinus arrhythmia | <input type="checkbox"/> Tachycardia |
| <input type="checkbox"/> Premature beats | |

Gallop:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> Pronounced |
| <input checked="" type="checkbox"/> No | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Intermittent | |

Pulmonary assessments:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Eupneic | <input type="checkbox"/> Pulmonary crackles |
| <input type="checkbox"/> Mild dyspnea | <input type="checkbox"/> Wheezes |
| <input type="checkbox"/> Marked dyspnea | <input type="checkbox"/> Upper airway stridor |
| <input checked="" type="checkbox"/> Normal BV sounds | |

Abdominal exam: Normal

- | | |
|---|---|
| <input type="checkbox"/> Hepatomegaly | <input type="checkbox"/> Mild ascites |
| <input type="checkbox"/> Abdominal distension | <input type="checkbox"/> Marked ascites |

Problems:

DCM-like changes with secondary CHF (rule out DCM or cardiomyopathy secondary to myocarditis)

Diagnostic plan:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Echocardiogram (brief exam to view changes) | <input type="checkbox"/> Dialysis profile |
| <input type="checkbox"/> Chemistry profile | <input type="checkbox"/> Thoracic radiographs |
| <input type="checkbox"/> ECG | <input type="checkbox"/> NT-proBNP |
| <input checked="" type="checkbox"/> Renal profile | <input type="checkbox"/> Troponin I |
| <input type="checkbox"/> Blood pressure | <input type="checkbox"/> Other tests |

Echocardiogram Findings:

General/2-D findings:

Brief fluid check: No changes from previous exam.

Assessment and recommendations:

Patient is now doing well at home, improving every day with both appetite and energy. Renal values submitted today. Despite the young age and atypical breed, the echo findings are still consistent with DCM. Recommend continuing Recommend trying to add

after recheck renal values) to see if it is better tolerated than the Taurine levels are normal,

Recommend recheck renal values at rDVM in 2-3 weeks. Recheck echo and exam in 3-4 months, or sooner if clinical signs develop such as increase RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM vs. cardiomyopathy (primary vs. secondary to myocarditis) with secondary CHF
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM Classification:

- A
- B1
- B2
- C
- D

M-Mode

Nsdl	<input type="text" value="B6"/>	cm
LVIDd		cm
LVPWd		cm
NsS		cm
LVIDs		cm
LVPWs		cm
%FS		%
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA		cm

M-Mode Normalized

NsdlN	<input type="text" value="B6"/>	(0.29 - 0.52)
LVIDdN		(1.35 - 1.73) !
LVPWdN		(0.33 - 0.53)
NsSN		(0.43 - 0.71) !
LVIDsN		(0.79 - 1.14) !
LVPWsN		(0.53 - 0.78) !
Ao Diam N		(0.68 - 0.89)
LA Diam N		(0.64 - 0.90) !

2D

SALA	<input type="text" value="B6"/>	cm
Ao Diam		cm
SA LA / Ao Diam		
Nsdl		cm
LVIDd		cm
LVPWd		cm
EDV(Teich)		ml
NsS		cm

LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

B6

cm
cm
ml
%
%
ml

Doppler
MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
E'
A'
E/E'
AV Vmax
AV maxPG

B6

m/s
ms
m/s

m/s
m/s

m/s
mmHg

B6

Patient ID: B6
B6 Canine
B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6 CVT, VTS(Cardiology)

Student: B6, V17

Presenting Complaint: Recheck for historically noted DCM and CHF

Concurrent Diseases: History of DCM and CHF

General Medical History:

Was doing "really, really well" until 2 weeks ago at which point he started having late night increases in respiratory effort with a cough; he had been given an extra B6 dose on two events during that week (had only had to do this once in the past 4 months previously); 1 week ago he went to his rDVM who recommended increasing B6 and that seems to have resolved the breathing issue and cough for the most part; he only had a very slight cough since increasing his furosemide. Owner reports rDVM said there seemed to be "fluid around kidneys and liver" last week via palpation (no US performed) and he weighed 5 more pounds last week at rDVM. Owner is concerned it was ascites; she reports before increasing B6 B6 abdomen looked distended.

Activity has been decreased for the past week; less running than normal. He is sleeping more than he was prior to the last 2 weeks.

Until 2 weeks ago B6 has been a "crazy maniac" and was doing very well.

About a week ago B6 had an event that was either a B6 (per owner rDVM thinks it was a B6). He has not had a repeat episode and this had not happened before. B6 was normal both before and after this event.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibbles (on Heartsmart website); gets about 1.5 cups Q12

Treats are frozen peas and frozen green peas

Cardiovascular History:

Prior CHF diagnosis? Yes

Prior ATE? No

Prior arrhythmia? No

Cough? Yes, intermittent and then resolved with an increase in his

Shortness of breath or difficulty breathing? Yes, intermittent, resolved with increase in

Syncope or collapse? No

Sudden onset lameness? No

Exercise intolerance? Yes, decreased exercise when in the yard

Prior heart murmur? Yes II/VI holosystolic left apex

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: Left basilar systolic

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds- maybe somewhat increased

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam: Very sensitive to cranial abdominal palpation once, but not repeatable; tense

- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

DCM, CHF

Increased respiratory effort and potential ascites over the last week with lethargy

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

ECG findings:

B6

Assessment and recommendations:

Echocardiogram reveals mild progression in LV and LA dilation, but subjectively and numerically slightly increased contractile function. Given the episode last week that sounds like he had developed ascites +/- pulmonary edema, recommend continuing current B6 as long as renal values are stable. Patient has gained weight and B6 dose is now a bit low, so recommend also increasing B6. Continue B6. Patient seemed to have some vague discomfort that was difficult to localize, and has a history of multiple ticks this fall, 4dx was also submitted. Recheck echo and exam in 3-4 months, or sooner if clinical signs develop such as increase RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with secondary CHF (pulmonary edema, suspected ascites)
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

B6

cm
cm
cm
cm
cm
cm
cm
cm
cm
cm
cm

M-Mode Normalized

IVSdN

LVIDdN

B6

(0.29 - 0.52) !
(1.35 - 1.73) !

LVPWdN
IVSsN
LVIDsN
LVPWsN
Ao Diam N
LA Diam N

B6

{0.33 - 0.53}
{0.43 - 0.71}
{0.79 - 1.14}!
{0.53 - 0.78}
{0.68 - 0.89}
{0.64 - 0.90}!

2D
SA LA
Ao Diam
SA LA / Ao Diam
IVSd
LVIDd
LVPWd
EDV(Teich)
IVSs
LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

B6

cm
cm
cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler
MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
E'
A'
E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG
TR Vmax
TR maxPG

B6

m/s
ms
m/s
m/s
m/s
m/s
m/s
mmHg
m/s
mmHg
m/s
mmHg

B6

Patient ID: **B6**

B6 Canine

B6 Years Old Male (Neutered) Beagle
Cross

White/Brown BW: Weight (kg) 20.40

Cardiology Consultation

Date: **B6**

Weight: Weight (kg) 20.40

Patient location: ICU 02

Requesting Clinician: **B6** DVF (Emergency and Critical Care Resident)

Attending Cardiologist:

John E. Busb, DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in SS
 Yes - in PACS
 No

Presenting complaint and important concurrent diseases: Cough, cardiomegaly and pulmonary edema on rDVM rads

Current medications and doses: **B6**

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal Moderate cachexia
 Mild muscle loss Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None IV/VI
 I/VI V/VI
 II/VI VI/VI

III/VI

Murmur location/description: systolic left apical

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly

- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

Doppler findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

ECG findings:

B6

Radiographic findings:

rDVM radiographs- Moderate generalized cardiomegaly, LAE, diffuse interstitial to alveolar pattern. Pattern most likely consistent with cardiogenic pulmonary edema, but has a more milliary structure to it than typical.

Assessment and recommendations:

Echocardiogram reveals dilated LV cavity with decrease contractile function and LAE, with DCM-like changes and secondary CHF, although the LV walls are not thinner than normal. This may be a early DCM or cardiomyopathy secondary to myocarditis vs primary cardiomyopathy. Aortic velocity is slightly increased, which is not typical of DCM, but no other defects are visible that would result in increased stroke volume. Recommend submitting CBC and chemistry. Recommend continuing **B6** **B6** if patient is eating well and not azotemic. Given the somewhat unusual appearance of pulmonary edema could consider recheck thoracic radiographs after **B6** treatment. However, patient has had a positive response to **B6** and radiographs may not be essential at this time. Given the young age, atypical breed, and non traditional diet (kangaroo and lentil) recommend submitting taurine levels (serum and whole blood) or supplementing with taurine. If there is a travel history outside of New England could consider testing for Chagas disease. Recheck exam and renal values in 10-14 days. Recheck echo in 3-4 months.

Recheck appointment scheduled with cardiology on Tuesday August 2nd at 11AM. Please call 508 887 4696 if need to reschedule.

Treatment plan:

B6

Final Diagnosis:

DCM vs. cardiomyopathy (primary vs. secondary to myocarditis) with secondary CHF
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|-----------------------------|--|
| <input type="checkbox"/> Ia | <input checked="" type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input type="checkbox"/> IIIb |
| <input type="checkbox"/> II | |

ACVIM CHF Classification:

- | | |
|-----------------------------|---------------------------------------|
| <input type="checkbox"/> A | <input checked="" type="checkbox"/> C |
| <input type="checkbox"/> B1 | <input type="checkbox"/> D |
| <input type="checkbox"/> B2 | |

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

EPSS

B6

cm
cm
cm
cm
cm
cm
%
cm
cm

cm
cm

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

IVSsN

LVIDsN

LVPWsN

Ao Diam N

LA Diam N

B6

{0.29 - 0.52}
{1.35 - 1.73}!
{0.33 - 0.53}
{0.43 - 0.71}
{0.79 - 1.14}!
{0.53 - 0.78}!
{0.68 - 0.89}
{0.64 - 0.90}

2D

SA LA

Ao Diam

SA LA / Ao Diam

IVSd

LVIDd

LVPWd

EDV(Teich)

IVSs

LVIDs

LVPWs

ESV(Teich)

EF(Teich)

%FS

SV(Teich)

B6

cm
cm

cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler

MR Vmax

MR maxPG

MV E Vel

MV DecT

MV A Vel

MV E/A Ratio

E'

A'

B6

m/s
mmHg
m/s
ms
m/s

m/s
m/s

E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG
TR Vmax
TR maxPG

B6

m/s
mmHg
m/s
mmHg
m/s
mmHg

Discharge Instructions

Patient

Name: B6

Species: Canine

White/Brown Male (Neutered) Beagle

Cross

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rust, DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Student: B6 V19

Cardiology Technician:

B6

Admit Date: 6/13/2018 2:23:44 PM

Discharge Date: 6/13/2018

Diagnoses: Dilated cardiomyopathy (DCM) with history of congestive heart failure - improving**Clinical Findings:**

Thank you for entrusting us with B6 continued care. B6 looked great on physical exam today. We performed an echocardiogram, and as with the last visit, there continues to be improvement. B6 heart chambers have reduced to a normal size, and his contractility is that of a normal heart at this time.

As B6 is doing well, we would like to decrease the amount of B6 he is on. Instead of receiving B6 B6 Please follow the instructions below. We are going to slowly reduce his other medication as well. Please refer to the schedule listed below.

Monitoring at Home:

You have been doing a wonderful job taking care of B6 at home, and we are very happy to hear that you have been able to monitor his respiratory rate and effort. Please continue to do this as you have been doing, especially as we have decreased his B6 dose. Since we are going to try to reduce B6 heart medications, please record B6 heart rate, respiratory rate and effort at least once in the morning and once at night. Around June 28th, please contact our Cardiology liaison, B6 at B6 or email us at cardiovet@tufts.edu to let us know how B6 is doing. It is likely most helpful if you can email us your recordings. At that point, we will discuss further reductions in his medications. We will likely continue this pattern (monitoring for 2 weeks and adjusting doses) until we have reached a level where B6 is receiving the minimum medications necessary to allow him to continue to do well.

An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 if difficulty breathing is not improved by within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.

We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.

If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Diet Suggestions: B6 should continue to eat his current diet. Vegetables are a great treat for trying to lose weight. Your regular veterinarian can help manage the amount he eats to ensure he is at a healthy weight. Losing weight may make B6 more energetic and will help him to stay healthy and happy longer.

Exercise Recommendations: Please continue to allow B6 to set his limitations for exercise, as you have been doing. It seems as though the morning walks you have been taking with him are a good level for him, but if he becomes more exercise intolerant, the length may need to be reduced.

Recommended Medications:

B6

Recheck Visits: Since B6 is doing so well, we would like to start reducing his heart medications. Please return in 6 months for a recheck echocardiogram

Thank you for entrusting us with B6 care. He is a very sweet boy, and we are very happy that he has been doing so well! Please contact our Cardiology liaison, B6 at B6 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information
<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: B6

Owner: B6

Discharge instructions

Discharge Instructions

Patient

Name: B6

Species: Canine

White/Brown Male (Neutered) Beagle

Cross

Birthdate: B6

Owner

Name: B6

Address:

B6

Patient ID: B6

Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Student: B6 V18

Cardiology Technician:

B6

Date: 6/22/2017

Diagnoses: Dilated cardiomyopathy (DCM) with history of congestive heart failure

Clinical Findings: Thank you for bringing B6 in today for his recheck with Tufts Cardiology. B6 was looking great on examination today. No murmur was heard today. The chambers of B6 heart are smaller than in the past, and his heart's contractile function is stable to improved. We also drew blood to see how B6 is tolerating his medications. We will call you later today or tomorrow with the results of this test.

Monitoring at Home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 if difficulty breathing is not improved by within 30-60 minutes after giving extra B6. When we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.
- We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Diet Suggestions: B6 should continue to eat his current diet.

Recommended Medications:

****No changes at this time****

B6

Recheck Visits: We recommend a recheck in about 6 months. However, if you have any concerns in the meantime, please let us know as he may need to be seen sooner.

Thank you for allowing us to participate in care. He is such a sweet boy and we are so glad he is doing so well!

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case:

Owner:

Discharge Instructions

Discharge Instructions**Patient**

Name: B6

Species: Canine

White/Brown Male (Neutered) Beagle

Cross

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Student: B6 V17

Cardiology Technician: B6 CVT, VTS(Cardiology)

Date: 8/2/2016

Diagnoses: Dilated cardiomyopathy (DCM) with history of congestive heart failure**Clinical Findings:**

B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. However, B6 breed, age, and clinical signs are somewhat atypical for this disease. Significant arrhythmias, which can be life-threatening, can be associated with DCM, but at this stage B6 has not been having arrhythmia.

Today we rechecked B6 blood work to determine if he is tolerating his medications. We will call you with these results. Because B6 is not the typical breed or age of dog to develop DCM, we also took another quick look at B6 heart via echocardiogram today. The echocardiogram findings were very similar to his previous examination, with visible enlargement of all heart chambers. Low taurine levels have been associated with DCM, but B6 taurine levels came back yesterday, and are within normal limits.

Monitoring at home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6. If difficulty breathing is not improved by within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.

- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Recommended Medications:

B6

****New Medication****

B6

****Formulation Change****

B6

Diet suggestions:

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/>)

Your dog's usual diet may also have more sodium than recommended - we want him to continue to eat his normal diet until we are sure he is tolerating medications well, but after that time we would recommend slowly introducing one of the lower sodium diets on the HeartSmart list (25% of the new diet and 75% old diet for 2-3 days, then 50:50, etc.). Hopefully you can find a diet on the list that your dog likes to eat. Alternatively, if you are attached to the current diet you can research the amount of sodium in the diet to ensure that the sodium content is similar to those on the list.

The HeartSmart web site also has some information on supplements such as fish oil, taurine, and other supplements that you might have questions about.

Exercise Recommendations:

Now that **B6** heart failure is better controlled, slightly longer walks are acceptable. However, if you find that **B6** is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit with your primary care veterinarian is recommended in 1-2 weeks to recheck kidney values. If his blood work

is normal at that time we recommend increasing the **B6** twice daily.
A recheck echocardiogram is recommended in 3-4 months. We have scheduled a recheck for Thursday December 8th at 10AM. Please call or email if you need to change this appointment or if you have any concerns.

Please visit our HeartSmart website for more information
<http://vet.tufts.edu/heartsmart/>

Case: **B6**

Owner: **B6**

Discharge Instructions

Discharge Instructions

Patient

Name: B6
Species: Canine
White/Brown Male (Neutered) Beagle
Cross
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Student: B6 V17

Cardiology Technician: B6 CVT, VTS(Cardiology)

Date: 12/8/2016

Diagnoses: Dilated cardiomyopathy (DCM) with history of congestive heart failure

Clinical Findings: Thank you for bringing B6 in today for his recheck with Tufts Cardiology. You report that B6 had been doing well until two weeks ago when he started experiencing an increase in respiratory effort and a cough. His B6 was increased to B6 every 8 hours by his primary veterinarian and you report this has resolved B6 respiratory difficulty. His activity level has decreased and he is sleeping more than usual, but he has maintained a good appetite. You report that B6 had a single episode of B6 that may have been a B6 B6; he remained standing during this event and was normal both before and after this episode.

On examination today, B6 heart sounds the same as his last exam. His heart appears stable on echocardiogram; the chambers of his heart are very mildly more dilated than they were previously, but his heart's contractile function remains stable. We did not identify any pleural effusion (fluid in the chest) or ascites (free fluid in the abdomen). We also drew blood to assess B6 renal values since his furosemide dose has been increased; we will call you later today or tomorrow with the results of this test.

We also submitted his blood for a test called a 4DX test to see if B6 may be experiencing a B6 illness as he seemed potentially painful during his echocardiogram. You report that B6 has also been sensitive to touch on his abdomen when he is sleeping for about a month and that in July he tested strongly positive for an B6 infection.

B6

Monitoring at Home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40

breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.

- An increase in breathing rate or effort will usually mean that you should give an extra dose of [B6] if difficulty breathing is not improved by within 30-60 minutes after giving extra [B6] then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.
- There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/>).
- We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.
- Please continue to monitor [B6] for any repeated episodes of facial twitching or seizures. If this occurs again [B6] should be evaluated by a veterinarian.

Diet Suggestions: Please continue to feed [B6] his current diet. You can also continue to feed [B6] frozen peas as a treat.

Exercise Recommendations: Try to limit [B6] activity to short leashed walks until he is feeling better. If you find that [B6] is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure, but we do want [B6] to enjoy life and have fun.

Recommended Medications:



Recheck Visits: A recheck appointment and echocardiogram is recommended in 3-4 months as long as [B6] is doing well. You can reach the cardiology liaison [B6] at [B6] to schedule this appointment.

Thank you for entrusting us with the care of [B6] he is a great dog and it was nice to see you both today.

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

To ensure your pet food is in stock, please call 7-10 days in advance at 508-887-4629. Alternatively, foods can be ordered through www.chewy.com or www.petfooddirect.com

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: [B6]

Owner: [B6]

Discharge Instructions

Discharge Instructions

Patient

Name: B6

Species: Canine

White/Brown Male (Neutered) Beagle

Cross

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Student: B6 V18

Cardiology Technician:

B6

Date: 12/8/2017

Diagnoses: Dilated cardiomyopathy (DCM) with history of congestive heart failure

Clinical Findings: Thank you for bringing B6 in today for his recheck with Tufts Cardiology. B6 looked great on examination today, and his echocardiogram continues to be improved. The chambers of B6 heart are smaller than in the past, and his heart's contractile function is improved. We also drew blood to see how B6 is tolerating his medications, and his bloodwork is normal today. This means that he is tolerating his current medications and no changes are required. His heart looks good enough that it seems like you could remove his mid day dose of B6, but since his blood work looks great and he is feeling great no changes are clearly necessary at this time.

Monitoring at Home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 if difficulty breathing is not improved by within 30-60 minutes after giving extra B6. We recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.
- We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24

hours/day.

Diet Suggestions **B6** should continue to eat his current diet.

Recommended Medications:

B6

Recheck Visits: We recommend a recheck in about 6 months. However, if you have any concerns in the meantime, please let us know as he may need to be seen sooner. Please call or email (508 887 4696 or cardiovet@tufts.edu) to schedule this appointment.

Thank you for allowing us to participate in **B6** care. He is such a good boy and we are so glad he is doing so well!

Please visit our HeartSmart website for more information
<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case **B6**

Owner **B6**

Discharge Instructions

Cummings

Veterinary Medical Center

AT TUFTS UNIVERSITY

Foster Hospital for Small Animals
55 Willard Street
North Grafton, MA 01536
Telephone (508) 839-5395
Fax (508) 839-8739
<http://vetmed.tufts.edu/>

Emergency & Critical Care Liaison: (508) 887-4745

Patient

Name:

B6

Signalment:

B6 Years Old White/Brown Male
(Neutered) Beagle Cross

Owner

Name:

Address:

B6

Patient ID:

B6

Primary Clinician:

B6

DMF (Emergency and Critical Care Resident)

Consulting Clinician:

Attending Clinician:

B6

Discharge Instructions

Admit Date: B6 1:44:13 PM

Check Out Date: B6

Case summary

B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management, although B6 did not showed any signs of arrhythmia.

The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs or belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

DCM can be the consequence of taurine deficiency. Given the age and the breed of B6, we can't rule out this possibility. A dosage of taurine has been sent and we are expecting the results in 10 to 15 days. Meanwhile, B6 will be treated for this deficiency, the treatment is harmless.

Diagnosis:

1. Dilated cardiomyopathy (DCM)
2. Taurine deficiency : Results pending

Diagnostic test results and findings:

Chest radiograph (x-ray) findings: Moderate generalized cardiomegaly, left atrial enlargement, diffuse interstitial to alveolar pattern.

Echocardiogram findings: All chambers of the heart are enlarged and there is a leak at the mitral valve

ECG findings: The ECG showed no arrhythmia with a heart rate between 120 and 130 bpm.

Labwork findings: The kidney values are within normal limits.

B6

(0.2-2.1)

Monitoring at home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6. If difficulty breathing is not improved by within 30-60 minutes after giving B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.
- There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/>).
- We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Recommended Medications:

B6

Diet suggestions:

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/>)

Your dog's usual diet may also have more sodium than recommended - we want him/her to continue to eat his/her normal diet for the first 7 to 14 days so we can make sure he is tolerating medications well, but after that time we would recommend slowly introducing one of the lower sodium diets on the HeartSmart list (25% of the new diet and 75% old diet for 2-3 days, then 50:50, etc.). Hopefully you can find a diet on the list that your dog likes to eat. Alternatively, if you are attached to the current diet you can research the amount of sodium in the diet to ensure that the sodium content is similar to those on the list.

The HeartSmart web site also has some information on supplements such as fish oil, taurine, and other supplements that you might have questions about.

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable. However, if you find that [B6] is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

Recheck appointment scheduled with cardiology on Tuesday August 2nd at 11AM. Please call 508 887 4696 if need to reschedule.

At this visit we will check your dog's breathing effort and heart function, do a blood test to recheck kidney values, and probably recheck a blood pressure. A recheck echocardiogram is recommended in 3-4 months.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Thank you for bringing us [B6] he is a very cute dog, if you have any questions or concern, please e-mail me ([B6]@tufts.edu) or feel free to contact our emergency service 24/7 : 508-839-5395.

Case: [B6]

Owner: [B6]

Discharge Instructions

B6

Patient ID: B6
B6 Canine
B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: 12/8/2017

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 V18

Presenting Complaint: Recheck of historical DCM (diagnosed B6)

Concurrent Diseases: None

General Medical History:

Dx with DCM-like changes, secondary CHF, mild PHT. B6 Taurine levels sent out due to concern for taurine deficiency as the cause, but levels were elevated.

B6 has been doing well since his last visit, however, he started coughing at night a few weeks ago. Lasted for around 10 days. Coincided with when owner went out of town and her husband was giving B6 his meds- concerned that he may have been giving the wrong amounts. Additional B6 were not given when he was coughing. Since owner has returned and B6 is definitely on his regular schedule, coughing has subsided and he is doing well. No exercise intolerance. Good appetite.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1.5 cups BID
Gets frozen carrots and other veggies as treats is

Cardiovascular History:

Prior CHF diagnosis? yes

Prior ATE? no

Prior arrhythmia? no

Cough? occasional when possibly not getting all of his meds

Shortness of breath or difficulty breathing? no

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? no

Prior heart murmur? yes, intermittent I/VI holosystolic left basilar on last PE

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

Normal

Mild muscle loss

Moderate cachexia

Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

None

I/VI

II/VI

III/VI

IV/VI

V/VI

VI/VI

Murmur location/description: L systolic basilar

Jugular vein:

Bottom 1/3 of neck

Middle 1/3 of neck

Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal /tense
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

- (1) Hx DCM (primary vs secondary to myocarditis) with secondary CHF
- (2) Hx mild PHT

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Assessment and recommendations:

Echocardiogram reveals continued improvement in contractile function and reduced LV and LA chamber dimensions. Patient is doing well at home, so recommend

continuing current medications unless blood work indicates need for reduction, in which case the mid day dose of **B6** could be removed. The size of the LA does not suggest that **B6** should be required, so if owner has frequent concerns regarding need for **B6** then recommend rechecking radiographs and echo. Otherwise recheck echo in 6 months, or sooner if clinical signs occur such as increased RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with history of secondary CHF - improved echocardiographic measurements today.

Heart Failure Classification Score:

ISACH Classification:

- Ia
- Ib
- ~~Mode~~
- IVSd
- IIIa
- IIIb

ACVIM Classification:

- ~~IVDd~~
- ~~IVAWd~~
- ~~IVSd~~
- ~~IVDd~~
- LVPWs
- %FS
- Max LA
- C
- D

B6

om
om
om
om
om
%

M-Mode Normalized

- IVSdN
 - LVIDdN
 - LVPWdN
 - IVSsN
 - LVIDsN
 - LVPWsN
- B6
- (0.29 - 0.52) !
(1.35 - 1.73) !
(0.33 - 0.53)
(0.43 - 0.71) !
(0.79 - 1.14)
(0.53 - 0.78)

2D

- SA LA
 - Ao Diam
 - SA LA / Ao Diam
 - IVSd
 - LVIDd
 - LVPWd
 - EDV(Teich)
 - IVSs
 - LVIDs
 - LVPWs
 - ESV(Teich)
 - EF(Teich)
 - %FS
 - SV(Teich)
- B6
- om
om
om
om
om
ml
om
om
om
ml
%
%
ml

Doppler

AV Vmax
AV maxPG

B6

m/s
mmHg

B6

Patient ID: B6
B6 Canine
B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: 12/8/2017

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 V18

Presenting Complaint: Recheck of historical DCM (diagnosed B6)

Concurrent Diseases: None

General Medical History:

Dx with DCM-like changes, secondary CHF, mild PHT B6 Taurine levels sent out due to concern for taurine deficiency as the cause, but levels were elevated.

B6 has been doing well since his last visit, however, he started coughing at night a few weeks ago. Lasted for around 10 days. Coincided with when owner went out of town and her husband was giving B6 his meds- concerned that he may have been giving the wrong amounts. Additional B6 were not given when he was coughing. Since owner has returned and B6 is definitely on his regular schedule, coughing has subsided and he is doing well. No exercise intolerance. Good appetite.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1.5 cups BID
Gets frozen carrots and other veggies as treats is

Cardiovascular History:

Prior CHF diagnosis? yes

Prior ATE? no

Prior arrhythmia? no

Cough? occasional when possibly not getting all of his meds

Shortness of breath or difficulty breathing? no

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? no

Prior heart murmur? yes, intermittent I/VI holosystolic left basilar on last PE

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

Normal

Mild muscle loss

Moderate cachexia

Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

None

I/VI

II/VI

III/VI

IV/VI

V/VI

VI/VI

Murmur location/description: L systolic basilar

Jugular vein:

Bottom 1/3 of neck

Middle 1/3 of neck

Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal /tense
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

- (1) Hx DCM (primary vs secondary to myocarditis) with secondary CHF
- (2) Hx mild PHT

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Assessment and recommendations:

Echocardiogram reveals continued improvement in contractile function and reduced LV and LA chamber dimensions. Patient is doing well at home, so recommend

continuing current medications unless blood work indicates need for reduction, in which case the mid day dose **B6** could be removed. The size of the LA does not suggest that **B6** should be required, so if owner has frequent concerns regarding need for **B6** then recommend rechecking radiographs and echo. Otherwise recheck echo in 6 months, or sooner if clinical signs occur such as increased RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with history of secondary CHF - improved echocardiographic measurements today.

Heart Failure Classification Score:

ISACH Classification:

- Ia
- Ib
- ~~Mode~~
- IVSd
- IIIa
- IIIb

ACVIM Classification:

- ~~IVEd~~
- ~~IVAWd~~
- ~~IVSd~~
- ~~IVId~~
- LVPWs
- %FS
- Max LA
- C
- D

B6

cm
cm
cm
cm
cm
%

M-Mode Normalized

- IVSdN
- LVIDdN
- LVPWdN
- IVSsN
- LVIDsN
- LVPWsN

B6

(0.29 - 0.52) !
(1.35 - 1.73) !
(0.33 - 0.53)
(0.43 - 0.71) !
(0.79 - 1.14)
(0.53 - 0.78)

2D

- SA LA
- Ao Diam
- SA LA / Ao Diam
- IVSd
- LVIDd
- LVPWd
- EDV(Teich)
- IVSs
- LVIDs
- LVPWs
- ESV(Teich)
- EF(Teich)
- %FS
- SV(Teich)

B6

cm
cm
cm
cm
ml
cm
cm
ml
%

Doppler

AV Vmax
AV maxPG

B6

m/s
mmHg

B6

Patient ID: **B6**
B6 Canine
B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: 6/13/2018

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: **B6**

Presenting Complaint:

History of DCM (**B6**) - 6 month recheck

Concurrent Diseases:

None

General Medical History:

Diagnosed with DCM and secondary CHF July 2016. Contractility and left ventricular size were improved at the last recheck in December.

No incidents of any breathing difficulties since last visit. Owner has been walking him early in the day, but one incident where he didn't want to walk as far when it was hot in the middle of the day. He sleeps most of the day but is happy to go outside and seems comfortable. Has a great appetite. Owner is monitoring respiratory rate at least every day with no increased rate or effort. **B6** also has allergies that are managed by the rDVM.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1 cups BID (decreased as activity decreased)
Frozen peas and fresh carrots occasionally as treats

Gets medications in peanut butter

Cardiovascular History:

Prior CHF diagnosis? yes

Prior ATE? no

Prior arrhythmia? no

Cough? not since last time

Shortness of breath or difficulty breathing? not since last time

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? when warm outside

Prior heart murmur? Yes, intermittent I/VI holosystolic left basilar progressed to Grade II on last PE

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

Normal

Mild muscle loss

Moderate cachexia

Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

None

I/VI

II/VI

III/VI

IV/VI

V/VI

VI/VI

Murmur location/description: Left systolic at the base

Jugular vein:

Bottom 1/3 of neck

Middle 1/3 of neck

Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites
- Marked ascites

Problems:

History of DCM with CHF - resolving

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation
- Pseudonormal
- Restrictive

Assessment and recommendations:

Today's echocardiogram shows a heart with normal structures, which is very different from when the patient first presented for CHF 2 years ago. This suggests that the initial change were a result of an acute insult (infection, toxin, diet). Given the improvement seen, we will try to decrease medication doses slowly. We will first decrease his and if he continues to do well, decrease the and eventually stopping the if he continues to do well with each decrease in medication. Recheck echocardiogram in 6 months to see if the cardiac structure remains normal.

Final Diagnosis:

Normal cardiac structure, history of DCM with LCHF

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|--|-------------------------------|
| <input checked="" type="checkbox"/> Ia | <input type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input type="checkbox"/> IIIb |
| <input type="checkbox"/> II | |

ACVIM Classification:

- | | |
|---------------------------------------|----------------------------|
| <input checked="" type="checkbox"/> A | <input type="checkbox"/> C |
| <input type="checkbox"/> B1 | <input type="checkbox"/> D |
| <input type="checkbox"/> B2 | |

M-Mode

IVSd	<input type="text" value="B6"/>	cm
LVIDd		cm
LVPWd		cm
IVSs		cm
LVIDs		cm
LVPWs		cm
%FS		%
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA		cm

2D

Ao Diam	<input type="text" value="B6"/>	cm
IVSd		cm
LVIDd		cm
LVPWd		cm

IVSs
LVIDs
LVPWs
EF(Cube)
%FS
SA LA

B6

cm
cm
cm
%
%
cm

Doppler
MV E Vel
MV DecT
MV Dec Slope
MV A Vel
MV E/A Ratio
PV Vmax
PV maxPG
AV Vmax
AV maxPG

B6

m/s
ms
m/s
m/s

m/s
mmHg
m/s
mmHg

B6

Patient ID: B6
B6 Canine
B6 years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: 6/22/2017

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 V18

Presenting Complaint:

Recheck of historical DCM (diagnosed B6)

Concurrent Diseases:

B6

General Medical History:

Presented to Tufts EE B6 for exercise intolerance, shallow breathing, coughing, enlarged heart, and pulmonary edema on rDVM chest rads. Echo revealed DCM-like changes, secondary CHF, mild PHT.

Patient began B6. Taurine levels were sent out and were found to be elevated.

Recheck on 8/2/16, improved respiratory effort, no coughing. However, still some exercise intolerance. O d/c taurine supplementation. Echo findings similar to before, visible enlargement of all heart chambers.

Recheck on 12/8/16, some increased respiratory effort with cough. Mild progression of LV and LA dilation on echo, slightly increased contractile function. Increased B6 due to vague painfulness was anaplasma positive. Treated with doxy.

Communication 2/8/17 with Tufts, inc rr in the night sometimes with more coughing. We recommended increasing B6

B6 doing much better on new medication doses. In the last 2 months, had extra B6 3 times overnight for coughing/increased effort. No exercise intolerance.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibble (on Heartsmart website) - 1.5cups BID
Gets frozen carrots and other veggies as treats

Cardiovascular History:

Prior CHF diagnosis? yes
Prior ATE? no
Prior arrhythmia? no
Cough? no
Shortness of breath or difficulty breathing? occasional, resolves with extra dose of furosemide
Syncope or collapse? no
Sudden onset lameness? no
Exercise intolerance? no
Prior heart murmur? yes, II/VI holosystolic left apex

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: systolic left basilar, intermittent

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck
- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites
- Marked ascites

Problems and differential diagnoses:

Hx DCM (primary vs secondary to myocarditis) with secondary CHF
Hx mild PHT
Moderate ceruminous discharge AS, erythematous pinnae AU r/o otitis externa

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation
- Pseudonormal
- Restrictive

ECG findings:

HR - 128; sinus rhythm during echocardiogram

Assessment and recommendations:

Echocardiogram reveals improvement in contractile function and reduced LV and LA chamber dimensions. The cause for improvement is unclear; owner change diet from kangaroo to chicken, but this change was made prior to previous exams. The only changes made since previous exam were an increase in **B6** and **B6**. Patient is doing well at home, so recommend continuing current medications unless blood work indicates need for reduction. The size of the LA does not suggest that extra **B6** should be required, so if owner has frequent concerns regarding need for extra **B6** then recommend rechecking radiographs and echo. Otherwise recheck echo in 6 months, or sooner if clinical signs occur such as increased RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with history of secondary CHF (pulmonary edema, suspected ascites) - improved echocardiographic measurements today.

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

B6

cm
cm
cm
cm
cm
cm
cm
cm
cm
cm

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

B6

(0.29 - 0.52) !
(1.35 - 1.73) !
(0.33 - 0.53)

IVSsN
LVIDsN
LVPWsN
Ao Diam N
LA Diam N

B6

{0.43 - 0.71} !
{0.79 - 1.14} !
{0.53 - 0.78}
{0.68 - 0.89} !
{0.64 - 0.90}

2D
SA LA
Ao Diam
SA LA / Ao Diam
IVSd
LVIDd
LVPWd
EDV(Teich)
IVSs
LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

B6

cm
cm

cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler
MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
E'
A'
E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG

B6

m/s
ms
m/s

m/s
m/s

m/s
mmHg
m/s
mmHg

B6

Patient ID: **B6**

B6 Canine

B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: 8/2/2016

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6, CVT, VTS(Cardiology)

Student: **B6** V17

Presenting Complaint: Recheck generalized cardiomegaly with DCM-like changes, congestive heart failure

General Medical History:

In June 2016 **B6** began coughing. rDVM thought possibly related to allergies. **B6** also treated for **B6** with **B6** at this time. **B6** developed progressive lethargy and inappetence as well as exercise intolerance and shallow breathing pattern. Went back to rDVM where chest rads were performed. Enlarged heart and pulmonary edema were visualized. Patient was referred to Tufts ER and placed in O2. Echo was performed that demonstrated a dilated LV cavity with decreased contractility, LAE with DCM like changes, and CHF. Rule outs considered included early DCM and cardiomyopathy secondary to myocarditis. Due to patient age and atypical breed- recommended taurine levels be measured. Taurine levels both elevated. CBC/Chem showed a mildly elevated Ca but was otherwise within normal limits. Patient currently being managed on **B6** supplement.

At home patient initially would not eat. Patient started all meds but **B6** developed diarrhea and vomiting. Discontinued **B6** Vomiting stopped but diarrhea persisted. O returned to rDVM and got a **B6** injection on 7/28/16. rDVM prescribed **B6** for 7 days. O began feeding chicken thighs on 7/28/16 and patients appetite improved markedly. Now **B6** is eating dry food very well. His activity level has improved dramatically- increasing every day. Patient has not had any additional episodes of diarrhea while on **B6**. O would like to have some on hand. O reports no more coughing or increased respiratory effort/rate, but there is still exercise intolerance. No syncope or collapse.

Diet and Supplements:

Owner has **B6** but has not been giving it.

California Naturals (kangaroo and red lentil)- 2 cups 3x a day

Cardiovascular History:

Prior CHF diagnosis? Yes

Prior ATE? No

Prior arrhythmia? No

Cough? No coughing since prior visit, but there is a history of coughing

Shortness of breath or difficulty breathing? No residual shortness of breath following onset of meds

Syncope or collapse? No

Sudden onset lameness? No

Exercise intolerance? Yes

Prior heart murmur? Yes II/VI holosystolic left apex

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

Normal

Mild muscle loss

Moderate cachexia

Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|---|--------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input checked="" type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Murmur location/description: Holosystolic, PMI left apex

Jugular vein:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Bottom 1/3 of neck | <input type="checkbox"/> Top 2/3 rd of neck |
| <input type="checkbox"/> Middle 1/3 of neck | |

Arterial pulses:

- | | |
|--|---|
| <input type="checkbox"/> Weak | <input type="checkbox"/> Bounding |
| <input type="checkbox"/> Fair | <input type="checkbox"/> Pulse deficits |
| <input checked="" type="checkbox"/> Good | <input type="checkbox"/> Pulsus paradoxus |
| <input type="checkbox"/> Strong | <input type="checkbox"/> Other: |

Arrhythmia:

- | | |
|---|--------------------------------------|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> Bradycardia |
| <input type="checkbox"/> Sinus arrhythmia | <input type="checkbox"/> Tachycardia |
| <input type="checkbox"/> Premature beats | |

Gallop:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> Pronounced |
| <input checked="" type="checkbox"/> No | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Intermittent | |

Pulmonary assessments:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Eupneic | <input type="checkbox"/> Pulmonary crackles |
| <input type="checkbox"/> Mild dyspnea | <input type="checkbox"/> Wheezes |
| <input type="checkbox"/> Marked dyspnea | <input type="checkbox"/> Upper airway stridor |
| <input checked="" type="checkbox"/> Normal BV sounds | |

Abdominal exam: Normal

- | | |
|---|---|
| <input type="checkbox"/> Hepatomegaly | <input type="checkbox"/> Mild ascites |
| <input type="checkbox"/> Abdominal distension | <input type="checkbox"/> Marked ascites |

Problems:

DCM-like changes with secondary CHF (rule out DCM or cardiomyopathy secondary to myocarditis)

Diagnostic plan:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Echocardiogram (brief exam to view changes) | <input type="checkbox"/> Dialysis profile |
| <input type="checkbox"/> Chemistry profile | <input type="checkbox"/> Thoracic radiographs |
| <input type="checkbox"/> ECG | <input type="checkbox"/> NT-proBNP |
| <input checked="" type="checkbox"/> Renal profile | <input type="checkbox"/> Troponin I |
| <input type="checkbox"/> Blood pressure | <input type="checkbox"/> Other tests |

Echocardiogram Findings:

General/2-D findings:

Brief fluid check: No changes from previous exam.

Assessment and recommendations:

Patient is now doing well at home, improving every day with both appetite and energy. Renal values submitted today. Despite the young age and atypical breed, the echo findings are still consistent with DCM. Recommend continuing **B6** Recommend trying to add **B6** **B6** (after recheck renal values) to see if it is better tolerated than the **B6**. Taurine levels are normal, but may consider switching dog foods regardless to a more main stream low sodium formulation. Recommend recheck renal values at rDVM in 2-3 weeks. Recheck echo and exam in 3-4 months, or sooner if clinical signs develop such as increase RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM vs. cardiomyopathy (primary vs. secondary to myocarditis) with secondary CHF
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM Classification:

- A
- B1
- B2
- C
- D

M-Mode

Nsdl	B6	cm
LVIDd		cm
LVPWd		cm
NsS		cm
LVIDs		cm
LVPWs		cm
%FS		%
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA	cm	

M-Mode Normalized

NsdlN	B6	(0.29 - 0.52)
LVIDdN		(1.35 - 1.73) !
LVPWdN		(0.33 - 0.53)
NsSN		(0.43 - 0.71) !
LVIDsN		(0.79 - 1.14) !
LVPWsN		(0.53 - 0.78) !
Ao Diam N		(0.68 - 0.89)
LA Diam N		(0.64 - 0.90) !

2D

SALA	B6	cm
Ao Diam		cm
SA LA / Ao Diam		
Nsdl		cm
LVIDd		cm
LVPWd		cm
EDV(Teich)		ml
NsS		cm

LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

Doppler
MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
E'
A'
E/E'
AV Vmax
AV maxPG

B6

B6

cm
cm
ml
%
%
ml

m/s
ms
m/s

m/s
m/s

m/s
mmHg

B6

Patient ID: B6
B6 Canine
B6 Years Old Male (Neutered) Beagle Cross
White/Brown

Cardiology Appointment Report

Date: 12/8/2016

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6 CVT, VTS(Cardiology)

Student B6 V17

Presenting Complaint: Recheck for historically noted DCM and CHF

Concurrent Diseases: History of DCM and CHF

General Medical History:

Was doing "really, really well" until 2 weeks ago at which point he started having late night increases in respiratory effort with a cough; he had been given an extra B6 dose on two events during that week (had only had to do this once in the past 4 months previously); 1 week ago he went to his rDVM who recommended increasing B6 from B6 and that seems to have resolved the breathing issue and cough for the most part; he only had a very slight cough since increasing his B6. Owner reports rDVM said there seemed to be "fluid around kidneys and liver" last week via palpation (no US performed) and he weighed 5 more pounds last week at rDVM. Owner is concerned it was ascites; she reports before increasing B6 B6 abdomen looked distended.

Activity has been decreased for the past week; less running than normal. He is sleeping more than he was prior to the last 2 weeks.

Until 2 weeks ago B6 has been a "crazy maniac" and was doing very well.

About a week ago B6 had an event that was either a B6 (per owner rDVM thinks it was a B6). He has not had a repeat episode and this had not happened before. B6 was normal both before and after this event.

Diet and Supplements:

Hill's Chicken and Rice ideal balance kibbles (on Heartsmart website); gets about 1.5 cups Q12

Treats are frozen peas and frozen green peas

Cardiovascular History:

Prior CHF diagnosis? Yes

Prior ATE? No

Prior arrhythmia? No

Cough? Yes, intermittent and then resolved with an increase in his furosemide

Shortness of breath or difficulty breathing? Yes, intermittent, resolved with increase in furosemide

Syncope or collapse? No

Sudden onset lameness? No

Exercise intolerance? Yes, decreased exercise when in the yard

Prior heart murmur? Yes II/VI holosystolic left apex

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: Left basilar systolic

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

- Top 2/3rd of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds- maybe somewhat increased

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam: Very sensitive to cranial abdominal palpation once, but not repeatable; tense

- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

DCM, CHF

Increased respiratory effort and potential ascites over the last week with lethargy

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

ECG findings:

NSR during echo, HR 110-130 bpm

Assessment and recommendations:

Echocardiogram reveals mild progression in LV and LA dilation, but subjectively and numerically slightly increased contractile function. Given the episode last week that sounds like he had developed ascites +/- pulmonary edema, recommend continuing current B6 as long as renal values are stable. Patient has gained weight and B6 dose is now a bit low, so recommend also increasing B6. Continue B6. Patient seemed to have some vague discomfort that was difficult to localize, and has a history of multiple ticks this fall, 4dx was also submitted. Recheck echo and exam in 3-4 months, or sooner if clinical signs develop such as increase RR/RE, cough, collapse, or exercise intolerance.

Final Diagnosis:

DCM (primary vs. secondary to myocarditis) with secondary CHF (pulmonary edema, suspected ascites)
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

B6

cm
cm
cm
cm
cm
cm
cm
cm
cm
cm
cm

M-Mode Normalized

IVSdN

LVIDdN

B6

(0.29 - 0.52) !
(1.35 - 1.73) !

LVPWdN
IVSsN
LVIDsN
LVPWsN
Ao Diam N
LA Diam N

B6

{0.33 - 0.53}
{0.43 - 0.71}
{0.79 - 1.14}!
{0.53 - 0.78}
{0.68 - 0.89}
{0.64 - 0.90}!

2D

SA LA
Ao Diam
SA LA / Ao Diam
IVSd
LVIDd
LVPWd
EDV(Teich)
IVSs
LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

B6

cm
cm
cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler

MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
E'
A'
E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG
TR Vmax
TR maxPG

B6

m/s
ms
m/s
m/s
m/s
m/s
m/s
mmHg
m/s
mmHg
m/s
mmHg

B6

Patient ID: **B6**

B6 Canine

B6 Years Old Male (Neutered) Beagle
Cross

White/Brown BW: Weight (kg) 20.40

Cardiology Consultation

Date: 7/23/2016

Weight: Weight (kg) 20.40

Patient location: ICU 02

Requesting Clinician: **B6** DVF (Emergency and Critical Care Resident)

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in SS
 Yes - in PACS
 No

Presenting complaint and important concurrent diseases: Cough, cardiomegaly and pulmonary edema on rDVM rads

Current medications and doses: **B6**

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal Moderate cachexia
 Mild muscle loss Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None IV/VI
 I/VI V/VI
 II/VI VI/VI

III/VI

Murmur location/description: systolic left apical

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly

- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

ECG findings:

B6

Radiographic findings:

rDVM radiographs- Moderate generalized cardiomegaly, LAE, diffuse interstitial to alveolar pattern. Pattern most likely consistent with cardiogenic pulmonary edema, but has a more milliary structure to it than typical.

Assessment and recommendations:

Echocardiogram reveals dilated LV cavity with decrease contractile function and LAE, with DCM-like changes and secondary CHF, although the LV walls are not thinner than normal. This may be a early DCM or cardiomyopathy secondary to myocarditis vs primary cardiomyopathy. Aortic velocity is slightly increased, which is not typical of DCM, but no other defects are visible that would result in increased stroke volume. Recommend submitting CBC and chemistry. Recommend continuing **B6** **B6** and adding and **B6** if patient is eating well and not azotemic. Given the somewhat unusual appearance of pulmonary edema could consider recheck thoracic radiographs after **B6** treatment. However, patient has had a positive response to **B6** and radiographs may not be essential at this time. Given the young age, atypical breed, and non traditional diet (kangaroo and lentil) recommend submitting taurine levels (serum and whole blood) or supplementing with taurine. If there is a travel history outside of New England could consider testing for Chagas disease. Recheck exam and renal values in 10-14 days. Recheck echo in 3-4 months.

Recheck appointment scheduled with cardiology on Tuesday August 2nd at 11AM. Please call 508 887 4696 if need to reschedule.

Treatment plan:

B6

Final Diagnosis:

DCM vs. cardiomyopathy (primary vs. secondary to myocarditis) with secondary CHF
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM CHF Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

EPSS

B6

cm
cm
cm
cm
cm
cm
%
cm
cm
cm
cm

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

IVSsN

LVIDsN

LVPWsN

Ao Diam N

LA Diam N

B6

(0.29 - 0.52)
(1.35 - 1.73) !
(0.33 - 0.53)
(0.43 - 0.71)
(0.79 - 1.14) !
(0.53 - 0.78) !
(0.68 - 0.89)
(0.64 - 0.90)

2D

SA LA

Ao Diam

SA LA / Ao Diam

IVSd

LVIDd

LVPWd

EDV(Teich)

IVSs

LVIDs

LVPWs

ESV(Teich)

EF(Teich)

%FS

SV(Teich)

B6

cm
cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler

MR Vmax

MR maxPG

MV E Vel

MV DecT

MV A Vel

MV E/A Ratio

E'

A'

B6

m/s
mmHg
m/s
ms
m/s
m/s
m/s

E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG
TR Vmax
TR maxPG

B6

m/s
mmHg
m/s
mmHg
m/s
mmHg

B6

Patient ID: **B6**

B6 Canine

B6 Years Old Male (Neutered) Beagle
Cross

White/Brown BW: Weight (kg) 20.40

Cardiology Consultation

Date: 7/23/2016

Weight: Weight (kg) 20.40

Patient location: ICU 02

Requesting Clinician: **B6** DVF (Emergency and Critical Care Resident)

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in SS
 Yes - in PACS
 No

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Current medications and doses: **B6**

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal Moderate cachexia
 Mild muscle loss Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None IV/VI
 I/VI V/VI
 II/VI VI/VI

III/VI

Murmur location/description: systolic left apical

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
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- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

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- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly

- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

B6

Mitral inflow:

- Summated
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ECG findings:

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Recheck appointment scheduled with cardiology on Tuesday August 2nd at 11AM. Please call 508 887 4696 if need to reschedule.

Treatment plan:

B6

Final Diagnosis:

DCM vs. cardiomyopathy (primary vs. secondary to myocarditis) with secondary CHF
Mild PHT

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM CHF Classification:

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- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

EPSS

B6

cm
cm
cm
cm
cm
cm
%
cm
cm
cm
cm

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

IVSsN

LVIDsN

LVPWsN

Ao Diam N

LA Diam N

B6

{0.29 - 0.52}
{1.35 - 1.73}!
{0.33 - 0.53}
{0.43 - 0.71}
{0.79 - 1.14}!
{0.53 - 0.78}!
{0.68 - 0.89}
{0.64 - 0.90}

2D

SA LA

Ao Diam

SA LA / Ao Diam

IVSd

LVIDd

LVPWd

EDV(Teich)

IVSs

LVIDs

LVPWs

ESV(Teich)

EF(Teich)

%FS

SV(Teich)

B6

cm
cm
cm
cm
ml
cm
cm
cm
ml
%
%
ml

Doppler

MR Vmax

MR maxPG

MV E Vel

MV DecT

MV A Vel

MV E/A Ratio

E'

A'

B6

m/s
mmHg
m/s
ms
m/s
m/s
m/s
m/s

E/E'
PV Vmax
PV maxPG
AV Vmax
AV maxPG
TR Vmax
TR maxPG

B6

m/s
mmHg
m/s
mmHg
m/s
mmHg

Discharge Instructions

Patient

Name: B6

Species: Canine

White/Brown Male (Neutered) Beagle

Cross

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Student: B6 V19

Cardiology Technician:

B6

Admit Date: 6/13/2018 2:23:44 PM

Discharge Date: 6/13/2018

Diagnoses: Dilated cardiomyopathy (DCM) with history of congestive heart failure - improving**Clinical Findings:**

Thank you for entrusting us with B6 continued care. B6 looked great on physical exam today. We performed an echocardiogram, and as with the last visit, there continues to be improvement. B6 heart chambers have reduced to a normal size, and his contractility is that of a normal heart at this time.

As B6 is doing well, we would like to decrease the amount of B6 he is on. Instead of receiving B6 three times a day, we can reduce him down to twice a day. Please follow the instructions below. We are going to slowly reduce his other medication as well. Please refer to the schedule listed below.

Monitoring at Home:

You have been doing a wonderful job taking care of B6 at home, and we are very happy to hear that you have been able to monitor his respiratory rate and effort. Please continue to do this as you have been doing, especially as we have decreased his B6 dose. Since we are going to try to reduce B6 heart medications, please record B6 heart rate, respiratory rate and effort at least once in the morning and once at night. Around June 28th, please contact our Cardiology liaison, B6 at B6 or email us at cardiovet@tufts.edu to let us know how B6 is doing. It is likely most helpful if you can email us your recordings. At that point, we will discuss further reductions in his medications. We will likely continue this pattern (monitoring for 2 weeks and adjusting doses) until we have reached a level where B6 is receiving the minimum medications necessary to allow him to continue to do well.

An increase in breathing rate or effort will usually mean that you should give an extra dose of B6. If difficulty breathing is not improved by within 30-60 minutes after giving extra B6, then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.

We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.

If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Diet Suggestions: B6 should continue to eat his current diet. Vegetables are a great treat for trying to lose weight. Your regular veterinarian can help manage the amount he eats to ensure he is at a healthy weight. Losing weight may make B6 more energetic and will help him to stay healthy and happy longer.

Exercise Recommendations: Please continue to allow B6 to set his limitations for exercise, as you have been doing. It seems as though the morning walks you have been taking with him are a good level for him, but if he becomes more exercise intolerant, the length may need to be reduced.

Recommended Medications:

B6

Recheck Visits: Since B6 is doing so well, we would like to start reducing his heart medications. Please return in 6 months for a recheck echocardiogram.

Thank you for entrusting us with B6 care. He is a very sweet boy, and we are very happy that he has been doing so well! Please contact our Cardiology liaison, B6, at B6 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information
<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: B6

Owner: B6

Discharge Instructions

Report Details - EON-388244

ICSR: 2067171
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:49:42 EDT

Reported Problem:
Problem Description: B6 presented to UF Cardiology for evaluation of a heart murmur and arrhythmia discovered by his primary care veterinarian. B6 had a recent history of a progressively worsening cough. On ECG B6 had intermittent ventricular premature complexes (right bundle branch block). B6 was diagnosed with mitral regurgitation with systolic dysfunction.
Date Problem Started: 03/19/2019
Concurrent Medical Problem: Yes
Pre Existing Conditions: B6
Outcome to Date: Stable

Product Information:

Product Name: Nudges Chicken Jerkey
Product Type: Pet Food
Lot Number:
Product Use Information:
Description: 2-3 slices fed 2-3 times per day as a treat
First Exposure Date: 02/01/2019
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Nubs Chicken Treats
Product Type: Pet Food
Lot Number:
Product Use Information:
Description: one bone once per day as a treat
First Exposure Date: 10/01/2017
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Sam's Club Chicken Jerky
Product Type: Pet Food
Lot Number:
Product Use Information:
Description: fed as treats 2-3 slices, 2-3 times per day
First Exposure Date: 01/01/2018
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Red Barn Bully sticks and slices
Product Type: Pet Food
Lot Number:
Product Use Information:
Description: treats - 1 stick per day
First Exposure Date: 08/01/2018

		Date:	
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
	Product Name:	Taste of the Wild Pacific Salmon Grain Free	
	Product Type:	Pet Food	
	Lot Number:		
	Product Use Information:	Description:	2 cups fed once per day
		First Exposure Date:	01/01/2017
		Last Exposure Date:	03/19/2019
		Time Interval between Product Use and Adverse Event:	2 Years
		Product Use Stopped After the Onset of the Adverse Event:	Yes
		Adverse Event Abate After Product Stop:	Unknown
		Product Use Started Again:	No
		Perceived Relatedness to Adverse Event:	Possibly related
		Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	Dog	
	Type Of Breed:	American Pit Bull Terrier	
	Gender:	Male	
	Reproductive Status:	Neutered	
	Weight:	35.9 Kilogram	
	Age:	B6 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Given the Product:	1	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	No
	Healthcare Professional Information:	Practice Name:	University of Florida
		Contact: Name:	Darcy Adin

			Phone: (614) 582-9798
			Other Phone: 3522948606
			Email: adind@ufl.edu
		Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States

Sender Information:	Name:	Darcy Adin	
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States	
	Contact:	Phone:	6145829798
		Other Phone:	3522948606
		Email:	adind@ufl.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Reported to Other Parties:	None		

Additional Documents:	
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Report Details - EON-388245

ICSR: 2067168
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:45:10 EDT

Reported Problem:
Problem Description: A few days before B6 was seen by UF Cardiology, he presented to a specialty clinic for a minor orthopedic complaint, at which time an ECG revealed an abnormal rhythm. On B6 became inappetant and vomited twice. On B6 patient presented to primary care veterinarian, and on B6 patient presented to an emergency clinic where thoracic radiographs revealed mild to moderate cardiomegaly. He was referred to cardiology on B6 where he was diagnosed with Dilated Cardiomyopathy. Anorexia resolved after 2 weeks.
Date Problem Started: B6
Concurrent Medical Problem: Yes
Pre Existing Conditions: Patient received flax oil; B6
Outcome to Date: Stable

Product Information:
Product Name: Taste of the Wild Prey (Angus, Beef, and Lentils)
Product Type: Pet Food
Lot Number:
Product Use Information:
Description: 3/4 cup fed twice per day
First Exposure Date: B6
Last Exposure Date:
Time Interval between Product Use and Adverse Event: 1 Years
Product Use Stopped After the Onset of the Adverse Event: Yes
Adverse Event Abate After Product Stop: Unknown
Product Use Started Again: No
Perceived Relatedness to Adverse Event: Possibly related
Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:
Purchase Location Information:
Product Name: N and D Venison and Quinoa dry
Product Type: Pet Food
Lot Number:
Product Use Description: 1 3/4 cup fed twice per day

Information:	First Exposure Date:	12/13/2018
	Last Exposure Date:	B6
	Time Interval between Product Use and Adverse Event:	3 Months
	Product Use Stopped After the Onset of the Adverse Event:	Yes
	Adverse Event Abate After Product Stop:	Unknown
	Product Use Started Again:	No
	Perceived Relatedness to Adverse Event:	Possibly related
	Other Foods or Products Given to the Animal During This Time Period:	Yes
Manufacturer /Distributor Information:		
Purchase Location Information:		
Product Name:	Honest Kitchen Turkey dehydrated	
Product Type:	Pet Food	
Lot Number:		
Product Use Information:	Description:	1/4 cup fed once per day Patient also receives lung pieces and beef and duck jerky as treats.
	First Exposure Date:	01/01/2015
	Last Exposure Date:	B6
	Time Interval between Product Use and Adverse Event:	4 Years
	Product Use Stopped After the Onset of the Adverse Event:	Yes
	Adverse Event Abate After Product Stop:	Unknown
	Product Use Started Again:	No
	Perceived Relatedness to Adverse Event:	Possibly related
Other Foods or Products Given to the Animal During This Time Period:	Yes	
Manufacturer		

	/Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Great Dane		
	Gender:	Male		
	Reproductive Status:	Neutered		
	Weight:	86.1 Kilogram		
	Age:	B6 years		
	Assessment of Prior Health:	Good		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	No	
	Healthcare Professional Information:	Practice Name:	University of Florida	
		Contact:	Name:	Darcy Adin
Phone:			(614) 582-9798	
Other Phone:			3522948606	
Email:			adind@ufl.edu	
Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States			
Sender Information:	Name:	Darcy Adin		
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States		
		Contact:	Phone:	6145829798
			Other Phone:	3522948606
			Email:	adind@ufl.edu
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Reported to Other Parties:	None			
Additional Documents:				

Report Details - EON-388246

ICSR: 2067170
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:48:05 EDT

Reported Problem:
Problem Description: B6 was referred to UF Cardiology after her primary care veterinarian noted a Grade 2/6 left systolic murmur. She has been slowing down some over the past year, but still runs and plays regularly. B6 has a sinus arrhythmia. Patient was diagnosed with primary mitral regurgitation with systolic dysfunction.
Date Problem Started: 04/03/2019
Concurrent Medical Problem: Yes
Pre Existing Conditions: B6
Outcome to Date: Stable

Product Information:

Product Name: Cosequin DS
Product Type: Other
Lot Number:
Product Use Information: Description: 1/2 tablet once daily as joint supplement
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Smart Bones Smart Sticks (peanut butter)
Product Type: Pet Food
Lot Number:
Product Use Information: Description: 5 inch treat given once per week
First Exposure Date: 01/01/2016
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Dr. Lyon's dental treat (mint)
Product Type: Pet Food
Lot Number:
Product Use Information: Description: 3 inch treat fed once per week
First Exposure Date: 01/01/2018
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Pedigree chicken and rice
Product Type: Pet Food
Lot Number:
Product Use Information: Description: 1/4 cup fed once per day
First Exposure Date: 01/01/2012

	Time Interval between Product Use and Adverse Event:	7 Years
	Product Use Stopped After the Onset of the Adverse Event:	No
	Perceived Relatedness to Adverse Event:	Possibly related
	Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
	Product Name:	Natural Balance Venison, Sweet Potatoes
	Product Type:	Pet Food
	Lot Number:	
	Product Use Information:	
	Description:	1/2 cup dry fed twice per day Patient also receives 2TBSP 100% pure pumpkin once daily and 1/2 hard boiled egg white once per week.
	First Exposure Date:	10/01/2010
	Time Interval between Product Use and Adverse Event:	9 Years
	Product Use Stopped After the Onset of the Adverse Event:	No
	Perceived Relatedness to Adverse Event:	Possibly related
	Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
Animal Information:	Name:	B6
	Type Of Species:	Dog
	Type Of Breed:	Sheepdog - Shetland
	Gender:	Female
	Reproductive Status:	Neutered
	Weight:	11.5 Kilogram
	Age:	10 Years
	Assessment of Prior Health:	Good
	Number of Animals Given the Product:	1

	Number of Animals Reacted:	1																						
	Owner Information:	Owner Information provided: No																						
	Healthcare Professional Information:	<table border="1"> <tr> <td data-bbox="672 254 889 291">Practice Name:</td> <td data-bbox="889 254 1534 291">University of Florida</td> </tr> <tr> <td data-bbox="672 291 889 327">Contact:</td> <td data-bbox="889 291 1534 327">Name: Darcy Adin</td> </tr> <tr> <td></td> <td data-bbox="889 327 1534 366">Phone: (614) 582-9798</td> </tr> <tr> <td></td> <td data-bbox="889 366 1534 405">Other Phone: 3522948606</td> </tr> <tr> <td></td> <td data-bbox="889 405 1534 444">Email: adind@ufl.edu</td> </tr> <tr> <td data-bbox="672 444 889 482">Address:</td> <td data-bbox="889 444 1534 482">2015 SW 16th Ave</td> </tr> <tr> <td></td> <td data-bbox="889 482 1534 521">2015 SW 16th Avenue</td> </tr> <tr> <td></td> <td data-bbox="889 521 1534 560">Gainesville</td> </tr> <tr> <td></td> <td data-bbox="889 560 1534 599">Florida</td> </tr> <tr> <td></td> <td data-bbox="889 599 1534 638">32608</td> </tr> <tr> <td></td> <td data-bbox="889 638 1534 676">United States</td> </tr> </table>	Practice Name:	University of Florida	Contact:	Name: Darcy Adin		Phone: (614) 582-9798		Other Phone: 3522948606		Email: adind@ufl.edu	Address:	2015 SW 16th Ave		2015 SW 16th Avenue		Gainesville		Florida		32608		United States
Practice Name:	University of Florida																							
Contact:	Name: Darcy Adin																							
	Phone: (614) 582-9798																							
	Other Phone: 3522948606																							
	Email: adind@ufl.edu																							
Address:	2015 SW 16th Ave																							
	2015 SW 16th Avenue																							
	Gainesville																							
	Florida																							
	32608																							
	United States																							
Sender Information:	Name:	Darcy Adin																						
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States																						
	Contact:	Phone: 6145829798																						
		Other Phone: 3522948606																						
		Email: adind@ufl.edu																						
	Permission To Contact Sender:	Yes																						
	Preferred Method Of Contact:	Email																						
	Reported to Other Parties:	None																						
Additional Documents:																								

Report Details - EON-388253

ICSR: 2067174
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:54:51 EDT

Reported Problem:

Problem Description: Patient had been stable on [B6] for dilated cardiomyopathy for the past two years prior to presentation at UF Cardiology. A few weeks prior to presentation, he was started on [B6] for coughing episodes. The day of presentation, an EKG performed at the primary care veterinarian showed a ventricular arrhythmia. On presentation to UF Cardiology, patient had collapsed suddenly and was in cardiopulmonary arrest. After CPR and a [B6] he converted to sinus tachycardia. Patient was diagnosed with dilated cardiomyopathy. [B6] was euthanized two days later due to gastric dilation volvulus (GDV).

Date Problem Started: [B6]

Concurrent Medical Problem: Yes

Pre Existing Conditions: [B6] was diagnosed with dilated cardiomyopathy two years prior to presentation at UF Cardiology and had been previously stable on [B6] for the past two years. [B6]

Outcome to Date: Died Euthanized

Date of Death: [B6]

Product Information:

Product Name: Spring Hill Fish Oil

Product Type: Other

Lot Number:

Product Use Information: **Description:** 1 pill daily as supplement

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Paul Newman Dog Biscuits, various

Product Type: Pet Food

Lot Number:

Product Use Information: **Description:** used as treats patient also received fat free greek yogurt once per day since 2015 and raw carrots as treats

First Exposure Date: 01/01/2010

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Blue Buffalo Large Breed Adult

Product Type: Pet Food

Lot Number:

Product Use Information: **Description:** 2 cups dry fed twice per day

First Exposure Date: 12/31/2007

Last Exposure Date: [B6]

Time Interval: 9 Years

		between Product Use and Adverse Event:	
		Product Use Stopped After the Onset of the Adverse Event:	No
		Perceived Relatedness to Adverse Event:	Possibly related
		Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	Dog	
	Type Of Breed:	Doberman Pinscher	
	Gender:	Male	
	Reproductive Status:	Neutered	
	Weight:	38 Kilogram	
	Age:	11 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Given the Product:	1	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	No
	Healthcare Professional Information:	Practice Name:	University of Florida
		Contact:	Name: Darcy Adin
			Phone: (614) 582-9798
			Other Phone: 3522948606
			Email: adind@ufl.edu
		Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
Sender Information:	Name:	Darcy Adin	
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States	
	Contact:	Phone: 6145829798	
		Other Phone: 3522948606	
		Email: adind@ufl.edu	

	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
	Reported to Other Parties:	None

Additional Documents:

Report Details - EON-388254

ICSR: 2067175
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:56:29 EDT

Reported Problem:

Problem Description: Patient presented to the UF Cardiology Service after roughly two weeks of coughing. When coughing initially started, patient was seen by primary care veterinarian and was treated with [B6]. On [B6] presented to his primary care veterinarian again. He had [B6] an enlarged heart, and pulmonary edema. Patient was referred to UF and was diagnosed with Dilated Cardiomyopathy.

Date Problem Started: 02/20/2019

Concurrent Medical Problem: Yes

Pre Existing Conditions: [B6]

Outcome to Date: Stable

Product Information:

Product Name: Good Morning Healthy Joints
Product Type: Other
Lot Number:
Product Use Information: **Description:** supplement given twice daily
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Spring Valley Fish, Flax, and Borage Oil
Product Type: Other
Lot Number:
Product Use Information: **Description:** supplement given once daily
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: Milkbone peanut flavor dry mini treats
Product Type: Pet Food
Lot Number:
Product Use Information: **Description:** used as treats
First Exposure Date: 01/01/2012
Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:
Purchase Location Information:

Product Name: 4Health Salmon and Potato canned

Product Type: Pet Food	
Lot Number:	
Product Use Information:	Description: 1 TPSP fed twice per day
	First Exposure Date: 01/01/2016
	Last Exposure Date: 02/20/2019
	Time Interval between Product Use and Adverse Event: 3 Years
	Product Use Stopped After the Onset of the Adverse Event: Yes
	Adverse Event Abate After Product Stop: Unknown
	Product Use Started Again: No
	Perceived Relatedness to Adverse Event: Possibly related
	Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:	
Purchase Location Information:	
Product Name:	Pure Balance Salmon and Potato dry
Product Type: Pet Food	
Lot Number:	
Product Use Information:	Description: 1 cup dry food fed twice per day
	First Exposure Date: 01/01/2016
	Last Exposure Date: 02/20/2019
	Time Interval between Product Use and Adverse Event: 3 Years
	Product Use Stopped After the Onset of the Adverse Event: Yes
	Adverse Event Abate After Product Stop: Unknown
	Product Use Started Again: No
	Perceived Relatedness to Adverse Event: Possibly related
	Other Foods or Products Given Yes

		to the Animal During This Time Period:
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
Animal Information:	Name:	B6
	Type Of Species:	Dog
	Type Of Breed:	Cattle Dog - Australian (blue heeler, red heeler, Queensland cattledog)
	Gender:	Male
	Reproductive Status:	Neutered
	Weight:	24 Kilogram
	Age:	10 Years
	Assessment of Prior Health:	Fair
	Number of Animals Given the Product:	1
	Number of Animals Reacted:	1
	Owner Information:	Owner Information provided: No
	Healthcare Professional Information:	Practice Name: University of Florida
		Contact: Name: Darcy Adin
		Phone: (614) 582-9798
		Other Phone: 3522948606
		Email: adind@ufl.edu
		Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
Sender Information:	Name:	Darcy Adin
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
	Contact:	Phone: 6145829798
		Other Phone: 3522948606
		Email: adind@ufl.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
	Reported to Other Parties:	None
Additional Documents:		

Report Details - EON-388255

ICSR: 2067176
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:58:30 EDT

Reported Problem:
Problem Description: B6 presented to the UF Cardiology Service for a 5 month history of progressive exercise intolerance and increased respiratory rate and effort. Patient was diagnosed with Dilated Cardiomyopathy. She has been rechecked once 5/15/19 - clinically stable but no improvement noted on echocardiogram. Her blood taurine results were discordant so she has been on supplementation
Date Problem Started: 02/14/2019
Concurrent Medical Problem: Yes
Pre Existing Conditions: B6
Outcome to Date: Stable

Product Information:
Product Name: Acana Heritage Poultry dry
Product Type: Pet Food
Lot Number:
Product Use Information:
Description: 2 cups dry food fed twice per day Patient also has been receiving deer antlers once per week since Aug 2015 as treats/chews.
First Exposure Date: 08/01/2015
Last Exposure Date: 02/14/2019
Time Interval between Product Use and Adverse Event: 3 Years
Product Use Stopped After the Onset of the Adverse Event: Yes
Adverse Event Abate After Product Stop: Unknown
Product Use Started Again: No
Perceived Relatedness to Adverse Event: Possibly related
Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: B6
Type Of Species: Dog

	Type Of Breed: Shepherd Dog - German
	Gender: Female
	Reproductive Status: Intact
	Pregnancy Status: Not Pregnant
	Lactation Status: Not lactating
	Weight: 36 Kilogram
	Age: 4 Years
	Assessment of Prior Health: Good
	Number of Animals Given the Product: 1
	Number of Animals Reacted: 1
	Owner Information: Owner Information provided: No
Healthcare Professional Information:	Practice Name: University of Florida
	Contact: Name: Darcy Adin
	Phone: (614) 582-9798
	Other Phone: 3522948606
	Email: adind@ufl.edu
	Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
Sender Information:	Name: Darcy Adin
	Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
	Contact: Phone: 6145829798
	Other Phone: 3522948606
	Email: adind@ufl.edu
	Permission To Contact Sender: Yes
	Preferred Method Of Contact: Email
Reported to Other Parties: None	
Additional Documents:	

Report Details - EON-388256

ICSR: 2067173
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:51:47 EDT

Reported Problem:

Problem Description: B6 presented to UF Cardiology with a history of persistent cough for the past 2-3 months which acutely became more frequent with episodes of wheezing and hacking. Patient was diagnosed with atrial fibrillation and dilated cardiomyopathy.

Date Problem Started: 03/19/2019

Concurrent Medical Problem: Yes

Pre Existing Conditions: B6

Outcome to Date: Stable

Product Information:

Product Name: Dasuquin (Nutramax) Glucosamine, MSM, Chondroitin, ASU

Product Type: Other

Lot Number:

Product Use Information: **Description:** joint supplement daily

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Origins 6 Fish Grain Free dry

Product Type: Pet Food

Lot Number:

Product Use Information: **Description:** 2 cups fed twice per day

First Exposure Date: 03/01/2013

Last Exposure Date: 03/19/2019

Time Interval between Product Use and Adverse Event: 6 Years

Product Use Stopped After the Onset of the Adverse Event: Yes

Adverse Event Abate After Product Stop: Unknown

Product Use Started Again: No

Perceived Relatedness to Adverse Event: Possibly related

Other Foods or Products Given to the Animal During This Time Period: Yes

Manufacturer:

	/Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Great Dane		
	Gender:	Male		
	Reproductive Status:	Intact		
	Weight:	65 Kilogram		
	Age:	7 Years		
	Assessment of Prior Health:	Good		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	No	
	Healthcare Professional Information:	Practice Name:	University of Florida	
Contact:		Name:	Darcy Adin	
		Phone:	(614) 582-9798	
		Other Phone:	3522948606	
		Email:	adind@ufl.edu	
Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States			
Sender Information:	Name:	Darcy Adin		
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States		
		Contact:	Phone:	6145829798
			Other Phone:	3522948606
			Email:	adind@ufl.edu
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Reported to Other Parties:	None			
Additional Documents:				

Report Details - EON-351034	
ICSR:	2045680
Type Of Submission:	Initial
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2018-04-12 13:51:10 EDT
Reported Problem:	Problem Description: [B6] was diagnosed with dilated cardiomyopathy and left sided congestive heart failure by the cardiology service at [B6]. Her disease has been stable. Due to reports of DCM related to taurine deficiency on grain free diets, a whole blood taurine level was submitted on 3/2/2018 by the cardiology service. Whole blood taurine was [B6] (ref range 200-350, critical <150). owner was advised to stop current diet and start taurine supplementation.
	Date Problem Started: [B6]
	Concurrent Medical Problem: Yes
	Pre Existing Conditions: Heart murmur first documented 4/3/2016 - 2/6 left basilar systolic
	Outcome to Date: Stable
	Product Information:
Product Name: Kirkland Signature Nature's Domain Turkey Meal and Sweet Potato Dog Food	
Product Type: Pet Food	
Lot Number:	
Product Use Information:	Description: Owner has been feeding daily for several years. Briefly switched diets for 3 months over 1 year prior but switched back as the Kirkland was better tolerated by the dog's GI tract.
	Last Exposure Date: 03/09/2018
	Product Use Stopped After the Onset of the Adverse Event: Unknown
	Perceived Relatedness to Adverse Event: Possibly related
	Other Foods or Products Given to the Animal During This Time Period: Yes
	Manufacturer /Distributor Information:
	Purchase Location Information: Name: Costco Wholesale
Animal Information:	Name: [B6]
	Type Of Species: Dog
	Type Of Breed: Retriever - Golden
	Gender: Female
	Reproductive Status: Neutered
	Weight: 31.1 Kilogram
	Age: 11 Years
	Assessment of Prior Health: Good
	Number of Animals Given the Product: 1
	Number of Animals Reacted: 1

	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: B6 Phone: B6
		Address:	B6 United States
	Healthcare Professional Information:	Practice Name:	B6
		Contact:	Name: B6 Phone: B6
		Address:	B6 United States
		Type of Veterinarian:	Referred veterinarian
	Date First Seen:	08/04/2016	
Sender Information:	Name:		
	Address:	B6 United States	
	Contact:	Phone:	B6
		Email:	
	Reporter Wants to Remain Anonymous:	No	
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
	Reported to Other Parties:	None	
Additional Documents:			

Report Details - EON-358518		
ICSR:	2051554	
Type Of Submission:	Initial	
Report Version:	FPSR.FDA.PETF.V.V1	
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)	
Reporting Type:	Voluntary	
Report Submission Date:	2018-07-09 08:35:47 EDT	
Reported Problem:	Problem Description: Routine echo during treatment for B6 Normal left ventricular wall thickness with reduced contractile function	
	Date Problem Started: 06/21/2018	
	Concurrent Medical Problem: Yes	
	Pre Existing Conditions: B6	
	Outcome to Date: Stable	
Product Information:	Product Name: Merrick grain free salmon and sweet potato dry	
	Product Type: Pet Food	
	Lot Number:	
	Package Type: BAG	
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
Animal Information:	Name: B6	
	Type Of Species: Dog	
	Type Of Breed: Mixed (Dog)	
	Gender: Female	
	Reproductive Status: Neutered	
	Weight: 20.5 Kilogram	
	Age: B6 Years	
	Assessment of Prior Health: Unknown	
	Number of Animals Reacted: 1	
	Owner Information:	Owner Information provided: Yes
		Contact: Name: B6 Phone:
		Address: B6 United States
	Healthcare Professional Information:	Practice Name: Tufts Cummings School of Veterinary Medicine
		Contact: Name: Lisa Freeman Phone: (508) 887-4523 Email: lisa.freeman@tufts.edu
		Address: 200 Westboro Rd North Grafton Massachusetts

01536
United States

Sender Information:

Name: Lisa Freeman

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Contact: Phone: 5088874523

Email: lisa.freeman@tufts.edu

Permission To Contact Sender: Yes

Preferred Method Of Contact: Email

Reported to Other Parties: None

Additional Documents:

Report Details - EON-358518

ICSR: 2051554
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-07-09 08:35:47 EDT

Reported Problem:
Problem Description: Routine echo during treatment for **B6** Normal left ventricular wall thickness with reduced contractile function
Date Problem Started: 06/21/2018
Concurrent Medical Problem: Yes
Pre Existing Conditions: **B6**
Outcome to Date: Stable

Product Information:
Product Name: Merrick grain free salmon and sweet potato dry
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information:
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: **B6**
Type Of Species: Dog
Type Of Breed: Mixed (Dog)
Gender: Female
Reproductive Status: Neutered
Weight: 20.5 Kilogram
Age: **B6** Years
Assessment of Prior Health: Unknown
Number of Animals Reacted: 1
Owner Information:
Owner Information provided: Yes
Contact: Name: **B6**
 Phone: **B6**
Address: **B6**
 United States
Healthcare Professional Information:
Practice Name: Tufts Cummings School of Veterinary Medicine
Contact: Name: Lisa Freeman
 Phone: (508) 887-4523
 Email: lisa.freeman@tufts.edu
Address: 200 Westboro Rd
 North Grafton
 Massachusetts

01536
United States

Sender Information:

Name:	Lisa Freeman	
Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
Contact:	Phone:	5088874523
	Email:	lisa.freeman@tufts.edu
Permission To Contact Sender:	Yes	
Preferred Method Of Contact:	Email	
Reported to Other Parties:	None	

Additional Documents:

Report Details - EON-381040

ICSR: 2063286
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: **B6** 13:49:14 EST

Reported Problem:
Problem Description: DCM and CHF diagnosed 2/25/19. Eating BEG diet. 2 other dogs in household will be screened. Will change diet on **B6** and reassess in 3 months. Just being discharged today. Taurine and troponin pending
Date Problem Started: **B6**
Concurrent Medical Problem: Yes
Pre Existing Conditions: **B6**
Outcome to Date: Stable

Product Information:
Product Name: CANIDAE® ALL LIFE STAGES CHICKEN MEAL & RICE FORMULA DRY DOG FOOD
Product Type: Pet Food
Lot Number:
Product Use Information: **Description:** Fed this diet most of his life
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: **B6**
Type Of Species: Dog
Type Of Breed: Doberman Pinscher
Gender: Male
Reproductive Status: Intact
Weight: 60 Kilogram
Age: **B6** Years
Assessment of Prior Health: Excellent
Number of Animals Given the Product: 3
Number of Animals Reacted: 1
Owner Information:
Owner Information provided: Yes
Contact: **Name:** **B6**
Phone:
Email:
Address: **B6**
 United States
Healthcare Professional Information:
Practice Name: Tufts Cummings School of Veterinary Medicine
Contact: **Name:** Lisa Freeman
Phone: (508) 887-4523
Email: lisa.freeman@tufts.edu

		Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523
		Email: lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
Preferred Method Of Contact:	Email	
Additional Documents:	Attachment:	rpt_medical_record_preview.pdf
	Description:	Medical records
	Type:	Medical Records

Client: **B6**
Address: **B6**

All Medical Records

Patient: **B6**
Breed: Doberman Pinscher
DOB: **B6**

Species: Canine
Sex: Male

Home Phone: **B6**
Work Phone: **B6**
Cell Phone: **B6**

Referring Information

B6

Client: **B6**
Patient: **B6**

Initial Complaint:

Emergency

SOAP Text **B6** 9:28PM **B6**

Subjective

NEW VISIT (ER)

Doctor: **B6**
Presenting complaint: **B6**

HISTORY:

B6

Client: **B6**
Patient:

B6

Initial Complaint:

Emergency

SOAP Text **B6** 4:46PM - **B6**

Subjective

NEW VISIT (ER)

Doctor: **B6**
Student: **B6**

Client: **B6**
Patient: **B6**

Presenting complaint: Suspect CHF
Referral visit? Yes
Diagnostics completed prior to visit: 3 view CXR (in e-mail)

HISTORY:

Signalment: 3yo MI Doberman Pinscher

Current history: Presenting today for suspect CHF after visiting rDVM earlier today - according to O, 3 view CXR's showed evidence of pleural effusion. They were referred to Tufts at this time. O reports that **B6** began coughing last Thursday (2/21). The owners contacted their rDVM, who was suspicious of URI and prescribed antibiotics (O was unsure of name/dose of abx). The last dose of antibiotics was given yesterday **B6**. This morning **B6** was having increased respiratory effort as well as difficulty getting comfortable while laying down.

Prior medical history: Suspect **B6**

Current medications: N/A

Diet: Canidae All Life Stages dry food (grain free) - has been eating this for 1.5 - 2 years.

Vaccination status/flea & tick preventative use: UTD (O brought records), HWP monthly, F/T seasonally

Travel history: N/A

EXAM:

B6

C/V: Difficult to auscult (heart sounds muffled), NMA, tachycardic, weak femoral pulses

B6

ASSESSMENT:

A1: Increased respiratory rate and effort r/o: congestive heart failure (DCM vs other) vs pneumonia

A2: Tachycardic r/o: CHF vs stress

A3: **B6**

PLAN:

B6

Client: **B6**
Patient: **B6**

B6

taurine tablets
new diet

Diagnostics completed:

NOVA: **B6**
TFAST: **B6**

Diagnostics pending:

CBC/Chem associated with DCM diet trial study

Client communication: strongly suspect heart failure secondary to DCM. discussed hospitalization in O2 to get under control. discussed diet study with them. lifelong medications, asked about cardiology consultation.

Deposit & estimate status: **B6**

Resuscitation code (if admitting to ICU): **B6**

SOAP approved (DVM to sign): **B6** dvm

Addendum:

B6

B6

SOAP Text **B6** 7:18AM - **B6**

History:

4 y/o IM Doberman Pinscher presented yesterday to the Tufts ER for suspect CHF after visiting rDVM-3 view CXR's showed evidence of pulmonary edema/pleural effusion. O reports that **B6** began coughing last Thursday (2/21). The owners contacted their rDVM, who was suspicious of URI and prescribed antibiotics (O was unsure of name/dose of abx). The last dose of antibiotics was given **B6** was having increased respiratory effort as well as difficulty getting comfortable while laying down.

B6

Subjective:

B6

Client: **B6**
Patient:

B6

Mentation: QAR, woke up from sleeping

Hydration: Overhydrated

Overall impression since arrival or since last exam: Stable to improve since presentation. The RR and RE improved overnight and **B6** appears more comfortable this morning. He had new onset atrial fibrillation and converted back to sinus rhythm which is quite unusual but is still in sinus rhythm this morning.

Appetite: No interest in food since arrival

Diet History: Canidae All Life Stages dry food (grain free) - has been eating this for 1.5 - 2 years.

Objective:

B6

Heart: difficult to auscult, muffled heart sounds, no murmur, no obvious arrhythmia during auscultation, fair femoral pulses with no pulse deficits, jugular veins bottom 1/3 of his neck.

B6

Diagnosics:

B6

Echocardiogram: DCM with active CHF

EKG: Sinus rhythm during the echocardiogram and 6-lead ECG. The patient has been having intermittent atrial fibrillation.

Assessments

A1: CHF secondary to DCM r/o diet related vs. genetic

A2: Atrial fibrillation secondary A1

B6

Plan

Client: **B6**
Patient: **B6**

B6

Resuscitation code (if admitting to ICU) **B6**

SOAP completed by: **B6** V19

SOAP reviewed by: **B6**

Addendum: added **B6**

SOAP Text **B6** 7:48AM - **B6**

History:

4 y/o IM Doberman Pinscher presented yesterday to the Tufts ER for suspect CHF after visiting rDVM-3 view CXR's showed evidence of pulmonary edema/pleural effusion. O reports that **B6** began coughing last Thursday (2/21). The owners contacted their rDVM, who was suspicious of URI and prescribed antibiotics (O was unsure of name/dose of abx). The last dose of antibiotics was given **B6** was having increased respiratory effort as well as difficulty getting comfortable while laying down.

B6

B6 (overnight): P remained stable overnight, converted to sinus rhythm ~11PM. No interest in food overnight, eager to drink water when bowl placed in front of him.

Subjective:

B6

Diet History: Canidae All Life Stages dry food (grain free) - has been eating this for 1.5 - 2 years.

Objective:

B6

Client:
Patient:

B6

B6

Heart: no murmur, no obvious arrhythmia during auscultation, fair femoral pulses with no pulse deficits, jugular veins bottom 1/3 of his neck.

B6

Diagnostics:

B6

B6

Echocardiogram: DCM with active CHF

EKG: Sinus rhythm during the echocardiogram and 6-lead ECG. The patient has been having intermittent atrial fibrillation.

PCV:

B6

Assessments

A1: CHF secondary to DCM r/o diet related vs. genetic

A2: Atrial fibrillation secondary A1

B6

Plan

B6

Resuscitation code (if admitting to ICU): red

SOAP completed by: **B6** V19

SOAP reviewed by:

Client:
Patient:

B6

Disposition/Recommendations

Client:
Patient:

B6

Client: **B6**
 Patient:

Cummings
Veterinary Medical Center
 AT TUFTS UNIVERSITY

Foster Hospital for Small Animals

55 Willard Street
 North Grafton, MA 01536
 (508) 839-5395

Client: **B6**
 Veterinarian:
 Patient ID: **B6**
 Visit ID:

Patient:	B6
Species:	Canine
Breed:	Doberman Pinscher
Sex:	Male
Age:	B6 Years Old

Lab Results Report

None	B6	12:19:34 AM	Accession ID: B6
Test	Results	Reference Range	Units
Anaplasma (4dx)	negative	0 - 0	
Ehrlichia (4dx)	negative	0 - 0	
Heartworm (4DX) - FHSA	negative	0 - 0	
Lyme (4dx)*	negative	0 - 0	

None	B6	4:52:25 PM	Accession ID: B6
Test	Results	Reference Range	Units
SO2%	B6	94 - 100	%
HCT (POC)		38 - 48	%
HB (POC)		12.6 - 16	g/dL
NA (POC)		140 - 154	mmol/L
K (POC)		3.6 - 4.8	mmol/L
CL(POC)		109 - 120	mmol/L
CA (ionized)		1.17 - 1.38	mmol/L
MG (POC)		0.1 - 0.4	mmol/L
GLUCOSE (POC)		80 - 120	mg/dL
LACTATE		0 - 2	mmol/L
BUN (POC)		12 - 28	mg/dL
CREAT (POC)		0.2 - 2.1	mg/dL
TCO2 (POC)		0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG	0 - 0	mmol/L	



10/50

B6

Printed Wednesday, February 27, 2019

Client: **B6**
 Patient: **B6**

GAP	B6	0 - 0	mmol/L
CAMG		0 - 0	mol/mol
Bleef		0 - 0	mmol/L
BEb		0 - 0	mmol/L
A		0 - 0	mmol/L
NOVA SAMPLE		0 - 0	
FiO2		0 - 0	%
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
PH		7.337 - 7.467	
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
HCO3		18 - 24	mmol/L

None **B6** 4:59:11 PM **Accession ID: B6**

Test	Results	Reference Range	Units
TS (FHSA)	B6	0 - 0	g/dl
PCV **		0 - 0	%
TS (FHSA)		0 - 0	g/dl

None **B6** 9:37:18 AM **Accession ID: B6**

Test	Results	Reference Range	Units
GLUCOSE	B6	67 - 135	mg/dL
UREA		8 - 30	mg/dL
CREATININE		0.6 - 2	mg/dL
PHOSPHORUS		2.6 - 7.2	mg/dL
CALCIUM2		9.4 - 11.3	mg/dL
T. PROTEIN		5.5 - 7.8	g/dL
ALBUMIN		2.8 - 4	g/dL
GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L

None **B6** 10:10:37 AM **Accession ID: B6**



Client: **B6**
 Patient: **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	B6	0 - 0	%
TS (FHSA)		0 - 0	g/dl

None **B6** 10:46:18 AM **Accession ID: B6**

Test	Results	Reference Range	Units
GLUCOSE		67 - 135	mg/dL
UREA		8 - 30	mg/dL
CREATININE		0.6 - 2	mg/dL
PHOSPHORUS		2.6 - 7.2	mg/dL
CALCIUM2	B6	9.4 - 11.3	mg/dL
T. PROTEIN		5.5 - 7.8	g/dL
ALBUMIN		2.8 - 4	g/dL
GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L

86 Result(s) verified

POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
ALK PHOS	B6	12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L

None **B6** 10:46:09 AM **Accession ID: B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	B6	0 - 0	%
TS (FHSA)		0 - 0	g/dl

None **B6** 11:17:25 AM **Accession ID: B6**

Test	Results	Reference Range	Units
GLUCOSE		67 - 135	mg/dL
UREA		8 - 30	mg/dL
CREATININE		0.6 - 2	mg/dL
PHOSPHORUS	B6	2.6 - 7.2	mg/dL
CALCIUM2		9.4 - 11.3	mg/dL
MAGNESIUM 2+		1.8 - 3	mEq/L
T. PROTEIN		5.5 - 7.8	g/dL



Client: **B6**
Patient:

ALBUMIN	B6	2.8 - 4.	g/dL	
GLOBULINS		2.3 - 4.2	g/dL	
A/G RATIO		0.7 - 1.6		
SODIUM	B6	140 - 150	mEq/L	
CHLORIDE		106 - 116	mEq/L	
87 Result(s) verified				
POTASSIUM		3.7 - 5.4	mEq/L	
tCO2 (BICARB)		14 - 28	mEq/L	
AGAP		8 - 19		
NA/K		29 - 40		
T BILIRUBIN		0.1 - 0.3	mg/dL	
ALK PHOS		12 - 127	U/L	
GGT		0 - 10	U/L	
ALT		14 - 86	U/L	
AST		9 - 54	U/L	
CK		22 - 422	U/L	
CHOLESTEROL		82 - 355	mg/dL	
TRIGLYCERIDES		30 - 338	mg/dl	
AMYLASE	409 - 1250	U/L		
OSMOLALITY (CALCULATED)	291 - 315	mmol/L		



13/50

B6

Printed Wednesday, February 27, 2019

Client: **B6**
Patient:

CBC/Chem **B6**



Tufts Cummings School Of Veterinary Medicine

200 Westboro Road
North Grafton, MA 01536

DUPLICATE

Name/DOB:	B6	Sex:	M	Provider:	B6
Patient ID:		Age:	3	Order Location:	V320559: Investigation into
Phone number:		Species:	Canine	Sample ID:	1902250140
Collection Date:	B6 09 PM	Breed:	Doberman Pinscher		
Approval date:	13 PM				

CBC, Comprehensive, Sm Animal (Research)

Parameter	Value	Ref. Range/Males
SMACHUNSKI		
WBC (ADVIA)		4.40-15.10 K/uL
RBC (Advia)	L	5.80-8.50 M/uL
Hemoglobin (ADVIA)	L	13.3-20.5 g/dL
Hematocrit (Advia)	L	39-55 %
MCV (ADVIA)		64.5-77.5 fL
MCH (ADVIA)		21.3-25.9 pg
CHCM		
MCHC (ADVIA)		31.9-34.3 g/dL
RDW (ADVIA)		11.9-15.2
Platelet Count (Advia)		173-486 K/uL
02/25/19 6:51 PM		
Mean Platelet Volume (Advia)		8.29-13.20 fl
02/25/19 6:28 PM		
Platelet Crit	H	0.129-0.403 %
02/25/19 6:28 PM		
PDW		
Reticulocyte Count (Advia)	H	0.20-1.60 %
Absolute Reticulocyte Count (Advia)	H	14.7-113.7 K/uL
CHr		
MCVr		

B6

Microscopic Exam of Blood Smear (Advia)

Parameter	Value	Ref. Range/Males
SMACHUNSKI		
Seg Neuts (%)		43-86 %
Lymphocytes (%)	L	7-47 %
Monocytes (%)		1-15 %
Nucleated RBC	H	0-1 /100 WBC
02/25/19 6:28 PM		
Seg Neutrophils (Abs) Advia	H	2.800-11.500 K/uL
Lymphs (Abs) Advia	L	1.00-4.80 K/uL
Mono (Abs) Advia		0.10-1.50 K/uL
WBC Morphology		
Polychromasia		

B6

Research Chemistry Profile - Small Animal (Cobas)

Sample ID: 19022501401
This report continues... (Final)

Reviewed by: _____

Client: **B6**
Patient: **B6**

CBC/Chem - **B6**



Tufts Cummings School Of Veterinary Medicine

200 Westboro Road
North Grafton, MA 01536

DUPLICATE

Name/DOB:	B6	Sex: M	Provider: B6
Patient ID:	B6	Age: 3	Order Location: V320539: Investigation into
Phone number:		Species: Canine	Sample ID: 1902250140
Collection Date:	B6 6:09 PM	Breed: Doberman Pinscher	
Approval date:	B6 7:13 PM		

Research Chemistry Profile - Small Animal (Cobas) (cont'd)

		Ref. Range/Males
SMACHUNSK		
Glucose		67-135 mg/dL
Urea		8-30 mg/dL
Creatinine		0.6-2.0 mg/dL
Phosphorus		2.6-7.2 mg/dL
Calcium 2		9.4-11.3 mg/dL
Magnesium 2+	L	1.8-3.0 mEq/L
Total Protein		5.5-7.8 g/dL
Albumin		2.8-4.0 g/dL
Globulins		2.3-4.2 g/dL
A/G Ratio		0.7-1.6
Sodium		140-150 mEq/L
Chloride	L	106-116 mEq/L
Potassium	B6	3.7-5.4 mEq/L
tCO2(Bicarb)		14-28 mEq/L
AGAP		8.0-19.0
NA/K	L	29-40
Total Bilirubin		0.10-0.30 mg/dL
Alkaline Phosphatase		12-127 U/L
GGT		0-10 U/L
ALT		14-86 U/L
AST		9-54 U/L
Creatine Kinase		22-422 U/L
Cholesterol	H	82-355 mg/dL
Triglycerides		30-338 mg/dl
Amylase		409-1250 U/L
Osmolality (calculated)	L	291-315 mmol/L

Sample ID: 1902250140/2
REPRINT: Orig. printing on 2/25/2019 (Final)

Reviewed by: _____
Page 2

Client: **B6**
Patient: **B6**

IDEXX BNP **B6**

B6

Client: **B6** Patient: **B6**

Client: **B6**
Patient: **B6**
Species: CANINE
Breed: DOBERMAN_PINSCH
Gender: MALE
Age: 3Y

Date: 02/25/2019
Requisition #: 1A
Accession #: **B6**
Ordered by: **B6**

IDEXX VetConnect 1-888-433-9967
TUFTS UNIVERSITY
200 WESTBORO RD
NORTH GRAFTON, Massachusetts 01536
508-839-5395
Account #88933

CARDIOPET proBNP- CANINE

Test	Result	Reference Range	Unit	Normal	Flag
CARDIOPET proBNP - CANINE	B6	0 - 900 pmol/L	HIGH	B6	

Comments

B6

Please note: Complete interpretive comments for all concentrations of CardioPET proBNP are available in the online directory of services. Serum specimens received at room temperature may have decreased NT-proBNP concentrations.

Client:
Patient:

B6

Vitals Results

10:00:27 PM	Heart Rate (/min)
10:00:29 PM	Temperature (F)
10:00:30 PM	Weight (kg)
4:46:45 PM	Heart Rate (/min)
4:46:46 PM	Temperature (F)
4:46:47 PM	Respiratory Rate
4:58:34 PM	Lasix treatment note
5:23:00 PM	Lasix treatment note
6:19:31 PM	FiO2 (%)
6:19:38 PM	Respiratory Rate
7:34:46 PM	Amount eaten
8:11:13 PM	FiO2 (%)
8:11:35 PM	Cardiac rhythm
8:11:36 PM	Heart Rate (/min)
8:11:47 PM	Respiratory Rate
8:36:39 PM	FiO2 (%)
8:36:47 PM	Respiratory Rate
9:31:47 PM	FiO2 (%)
9:32:00 PM	Eliminations
9:32:13 PM	Cardiac rhythm
9:32:14 PM	Heart Rate (/min)
9:32:36 PM	Respiratory Rate
9:40:39 PM	Lasix treatment note
9:40:47 PM	Catheter Assessment
10:49:51 PM	Cardiac rhythm
10:49:52 PM	Heart Rate (/min)
10:50:28 PM	Respiratory Rate
10:50:37 PM	FiO2 (%)
10:50:47 PM	Eliminations
11:37:53 PM	Cardiac rhythm
11:37:54 PM	Heart Rate (/min)
11:38:31 PM	FiO2 (%)
11:38:38 PM	Respiratory Rate
12:48:55 AM	FiO2 (%)
12:49:03 AM	Respiratory Rate
12:49:20 AM	Cardiac rhythm
12:49:21 AM	Heart Rate (/min)
1:04:45 AM	Lasix treatment note
1:04:55 AM	Catheter Assessment

B6

B6

Client: **B6**
Patient:

Vitals Results

1:21:13 AM	Eliminations
1:21:57 AM	Eliminations
1:22:08 AM	Cardiac rhythm
1:22:09 AM	Heart Rate (/min)
1:23:39 AM	FiO2 (%)
1:23:48 AM	Respiratory Rate
2:19:46 AM	Cardiac rhythm
2:19:47 AM	Heart Rate (/min)
2:21:02 AM	FiO2 (%)
2:21:09 AM	Respiratory Rate
3:27:16 AM	Respiratory Rate
3:27:34 AM	Cardiac rhythm
3:27:35 AM	Heart Rate (/min)
3:27:56 AM	FiO2 (%)
3:52:05 AM	Eliminations
4:34:17 AM	FiO2 (%)
4:34:34 AM	Cardiac rhythm
4:34:35 AM	Heart Rate (/min)
4:34:54 AM	Respiratory Rate
5:23:41 AM	Lasix treatment note
5:25:58 AM	Amount eaten
5:26:39 AM	FiO2 (%)
5:26:47 AM	Catheter Assessment
5:27:00 AM	Eliminations
5:27:30 AM	Respiratory Rate
5:28:36 AM	Cardiac rhythm
5:28:37 AM	Heart Rate (/min)
6:33:22 AM	FiO2 (%)
6:33:31 AM	Cardiac rhythm
6:33:32 AM	Heart Rate (/min)
6:33:44 AM	Respiratory Rate
6:58:26 AM	FiO2 (%)
6:58:41 AM	Respiratory Rate
7:05:37 AM	Heart Rate (/min)
7:06:38 AM	Cardiac rhythm
7:06:39 AM	Heart Rate (/min)
7:10:40 AM	Temperature (F)
9:07:00 AM	Cardiac rhythm
9:07:01 AM	Heart Rate (/min)
9:07:59 AM	Respiratory Rate
9:08:42 AM	FiO2 (%)

B6

B6

Client: **B6**
Patient:

Vitals Results

9:35:51 AM	Lasix treatment note
9:36:07 AM	Catheter Assessment
9:36:23 AM	Respiratory Rate
9:36:40 AM	FiO2 (%)
10:08:22 AM	Cardiac rhythm
10:08:23 AM	Heart Rate (/min)
10:36:31 AM	Cardiac rhythm
10:36:58 AM	Heart Rate (/min)
11:09:05 AM	Cardiac rhythm
11:09:06 AM	Heart Rate (/min)
11:09:54 AM	FiO2 (%)
11:10:13 AM	FiO2 (%)
12:19:00 PM	Cardiac rhythm
12:19:01 PM	Heart Rate (/min)
12:19:17 PM	FiO2 (%)
1:05:19 PM	Cardiac rhythm
1:05:20 PM	Heart Rate (/min)
1:05:29 PM	FiO2 (%)
1:15:27 PM	Respiratory Rate
1:41:39 PM	FiO2 (%)
1:41:52 PM	Catheter Assessment
1:42:48 PM	Respiratory Rate
1:56:11 PM	Cardiac rhythm
1:56:12 PM	Heart Rate (/min)
1:56:29 PM	Eliminations
2:47:23 PM	FiO2 (%)
2:47:35 PM	Cardiac rhythm
2:47:36 PM	Heart Rate (/min)
2:47:58 PM	Respiratory Rate
3:38:55 PM	FiO2 (%)
3:39:03 PM	Cardiac rhythm
3:39:04 PM	Heart Rate (/min)
3:40:32 PM	Respiratory Rate
4:08:34 PM	Lasix treatment note
4:56:17 PM	Cardiac rhythm
4:56:18 PM	Heart Rate (/min)
4:56:29 PM	Respiratory Rate
5:07:18 PM	Catheter Assessment

B6

B6

Client:
Patient:

B6

Vitals Results

5:28:28 PM	Cardiac rhythm
5:28:29 PM	Heart Rate (/min)
5:28:53 PM	Amount eaten
5:29:10 PM	Respiratory Rate
5:36:02 PM	Eliminations
7:03:18 PM	Cardiac rhythm
7:03:19 PM	Heart Rate (/min)
7:03:59 PM	Respiratory Rate
7:28:32 PM	Cardiac rhythm
7:28:33 PM	Heart Rate (/min)
7:28:47 PM	Respiratory Rate
8:40:39 PM	Cardiac rhythm
8:40:40 PM	Heart Rate (/min)
8:41:22 PM	Respiratory Rate
9:25:13 PM	Cardiac rhythm
9:25:14 PM	Heart Rate (/min)
9:25:24 PM	Catheter Assessment
9:25:35 PM	Respiratory Rate
10:54:11 PM	Cardiac rhythm
10:54:12 PM	Heart Rate (/min)
10:55:00 PM	Respiratory Rate
11:37:22 PM	Cardiac rhythm
11:37:23 PM	Heart Rate (/min)
11:37:58 PM	Respiratory Rate
11:52:29 PM	Lasix treatment note
12:36:51 AM	Cardiac rhythm
12:36:52 AM	Heart Rate (/min)
12:37:38 AM	Respiratory Rate
1:11:31 AM	Catheter Assessment
1:16:20 AM	Eliminations
1:16:29 AM	Respiratory Rate
1:35:41 AM	Cardiac rhythm
1:35:42 AM	Heart Rate (/min)
2:57:22 AM	Respiratory Rate
2:58:12 AM	Cardiac rhythm
2:58:13 AM	Heart Rate (/min)
3:52:42 AM	Cardiac rhythm
3:52:43 AM	Heart Rate (/min)
3:52:55 AM	Respiratory Rate
4:50:20 AM	Cardiac rhythm

B6

B6

Client: **B6**
Patient:

Vitals Results

4:50:21 AM	Heart Rate (/min)
4:50:35 AM	Respiratory Rate
5:48:38 AM	Catheter Assessment
5:48:57 AM	Amount eaten
5:49:04 AM	Eliminations
5:49:11 AM	Cardiac rhythm
5:49:12 AM	Heart Rate (/min)
5:49:50 AM	Respiratory Rate
6:32:36 AM	Cardiac rhythm
6:32:37 AM	Heart Rate (/min)
6:32:47 AM	Respiratory Rate
6:33:46 AM	Eliminations
7:17:14 AM	Cardiac rhythm
7:17:15 AM	Heart Rate (/min)
7:18:38 AM	Respiratory Rate
7:40:44 AM	Lasix treatment note
9:08:24 AM	Cardiac rhythm
9:08:25 AM	Heart Rate (/min)
9:08:38 AM	Eliminations
9:09:00 AM	Catheter Assessment
9:19:53 AM	Respiratory Rate
10:15:37 AM	Cardiac rhythm
10:15:38 AM	Heart Rate (/min)
10:16:40 AM	Respiratory Rate
11:06:38 AM	Cardiac rhythm
11:06:39 AM	Heart Rate (/min)
11:24:58 AM	Respiratory Rate
11:51:00 AM	Cardiac rhythm
11:51:01 AM	Heart Rate (/min)
11:51:54 AM	Respiratory Rate
12:30:30 PM	Eliminations
1:18:22 PM	Cardiac rhythm
1:18:23 PM	Heart Rate (/min)
1:18:32 PM	Respiratory Rate
1:22:54 PM	Eliminations
1:23:50 PM	Catheter Assessment

B6

B6

Client:
Patient:

B6

Telemetry ECG

B6

Client:
Patient:

B6

Telemetry ECG

B6

Client:
Patient:

B6

Telemetry ECG

B6

Client:
Patient:

B6

Telemetry ECG

B6

Client:
Patient:

B6

ECG from Cardio

B6

B6

10:22:22 AM

Page 1 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

12 Lead Standard Placement

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6 10:22:22 AM Page 2 of 2
Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6 10:25:49 AM
Tufts University
Tufts Cummings School of Vet Med
Cardiology

12 Lead: Standard Placement

B6

Client:
Patient:

B6

ECG from Cardio

B6

B6

10:26:06 AM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient: **B6**

rDVM CXR **B6**

B6

Client:
Patient:

B6

rDVM CXR

B6

B6

Client: **B6**
Patient:

Patient History

09:01 PM	UserForm
10:00 PM	Vitals
10:00 PM	Vitals
10:00 PM	Vitals
10:35 PM	UserForm
10:44 PM	Treatment
11:39 PM	Purchase
11:59 PM	Treatment
12:04 AM	Treatment
12:41 AM	Prescription
12:41 AM	Prescription
12:53 AM	Purchase
01:00 AM	Treatment
06:06 AM	UserForm
06:15 AM	Email
11:30 AM	Deleted Reason
01:39 PM	Appointment
07:47 AM	Appointment
04:46 PM	Vitals
04:46 PM	Vitals
04:46 PM	Vitals
04:46 PM	Vitals
04:49 PM	UserForm
04:51 PM	Purchase
04:56 PM	Purchase
04:56 PM	Purchase
04:56 PM	Purchase
04:58 PM	Vitals
04:58 PM	Purchase
04:59 PM	Labwork
05:11 PM	Treatment
05:19 PM	Vitals
05:19 PM	Vitals
05:23 PM	Vitals
05:23 PM	Vitals
05:23 PM	Purchase
05:47 PM	UserForm
06:01 PM	Treatment
06:13 PM	Prescription

B6

B6

Client: **B6**
Patient:

Patient History

06:19 PM Purchase
06:19 PM Purchase
06:19 PM Treatment

06:19 PM Vitals
06:19 PM Treatment
06:19 PM Vitals
06:33 PM Purchase
06:33 PM Purchase
07:34 PM Treatment

07:34 PM Vitals
07:34 PM Vitals
07:35 PM Treatment

08:11 PM Treatment

08:11 PM Vitals
08:11 PM Treatment

08:11 PM Vitals
08:11 PM Vitals
08:11 PM Treatment
08:11 PM Vitals
08:36 PM Treatment

08:36 PM Vitals
08:36 PM Treatment
08:36 PM Vitals
09:31 PM Treatment

09:31 PM Vitals
09:32 PM Treatment
09:32 PM Vitals
09:32 PM Treatment

09:32 PM Vitals

09:32 PM Vitals
09:32 PM Treatment
09:32 PM Vitals
09:33 PM Treatment
09:40 PM Treatment

09:40 PM Vitals
09:40 PM Treatment
09:40 PM Vitals
10:49 PM Treatment

10:49 PM Vitals
10:49 PM Vitals

B6

B6

Client:
Patient:

B6

Patient History

10:50 PM	Treatment
10:50 PM	Vitals
10:50 PM	Treatment
10:50 PM	Vitals
10:50 PM	Vitals
11:37 PM	Treatment
11:37 PM	Vitals
11:37 PM	Vitals
11:38 PM	Treatment
11:38 PM	Vitals
11:38 PM	Treatment
11:38 PM	Vitals
12:48 AM	Treatment
12:48 AM	Vitals
12:49 AM	Treatment
12:49 AM	Vitals
12:49 AM	Treatment
12:49 AM	Vitals
12:49 AM	Vitals
01:00 AM	Treatment
01:04 AM	Treatment
01:04 AM	Treatment
01:04 AM	Vitals
01:04 AM	Treatment
01:04 AM	Vitals
01:21 AM	Vitals
01:21 AM	Treatment
01:21 AM	Vitals
01:22 AM	Treatment
01:22 AM	Vitals
01:22 AM	Vitals
01:23 AM	Treatment
01:23 AM	Vitals
01:23 AM	Treatment
01:23 AM	Vitals
02:19 AM	Treatment
02:19 AM	Vitals
02:19 AM	Vitals
02:21 AM	Treatment
02:21 AM	Vitals

B6

B6

Client: **B6**
Patient:

Patient History

02:21 AM	Treatment
02:21 AM	Vitals
03:27 AM	Treatment
03:27 AM	Vitals
03:27 AM	Treatment
03:27 AM	Vitals
03:27 AM	Vitals
03:27 AM	Treatment
03:27 AM	Vitals
03:52 AM	Vitals
03:58 AM	Prescription
04:04 AM	Treatment
04:34 AM	Treatment
04:34 AM	Vitals
04:34 AM	Treatment
04:34 AM	Vitals
04:34 AM	Vitals
04:34 AM	Treatment
04:34 AM	Vitals
05:18 AM	Treatment
05:23 AM	Treatment
05:23 AM	Vitals
05:25 AM	Treatment
05:25 AM	Vitals
05:26 AM	Treatment
05:26 AM	Vitals
05:26 AM	Treatment
05:26 AM	Vitals
05:27 AM	Treatment
05:27 AM	Vitals
05:27 AM	Treatment
05:27 AM	Vitals
05:28 AM	Treatment
05:28 AM	Vitals
05:28 AM	Vitals
06:01 AM	Purchase
06:33 AM	Treatment
06:33 AM	Vitals
06:33 AM	Treatment
06:33 AM	Vitals
06:33 AM	Vitals

B6

B6

Client: **B6**
Patient:

Patient History

	06:33 AM	Treatment	
	06:33 AM	Vitals	
	06:58 AM	Treatment	
	06:58 AM	Vitals	
	06:58 AM	Treatment	
	06:58 AM	Vitals	
	07:05 AM	Vitals	
	07:06 AM	Treatment	
	07:06 AM	Vitals	
	07:06 AM	Vitals	
	07:10 AM	Vitals	
	07:13 AM	Treatment	
	08:26 AM	UserForm	
	09:07 AM	Treatment	
	09:07 AM	Vitals	
	09:07 AM	Vitals	
	09:07 AM	Treatment	
	09:07 AM	Vitals	
	09:08 AM	Treatment	
B6	09:08 AM	Vitals	
	09:08 AM	Treatment	
	09:35 AM	Treatment	
	09:35 AM	Vitals	
	09:36 AM	Treatment	
	09:36 AM	Vitals	
	09:36 AM	Treatment	
	09:36 AM	Vitals	
	09:36 AM	Treatment	
	09:36 AM	Vitals	
	09:37 AM	Purchase	
	10:05 AM	Treatment	
	10:08 AM	Treatment	
	10:08 AM	Vitals	
	10:08 AM	Vitals	
	10:14 AM	Labwork	
	10:27 AM	Purchase	
	10:36 AM	Vitals	
	10:36 AM	Vitals	

B6

Client: **B6**
Patient:

Patient History

	11:01 AM	Prescription	
	11:09 AM	Treatment	
	11:09 AM	Vitals	
	11:09 AM	Vitals	
	11:09 AM	Treatment	
	11:09 AM	Vitals	
	11:10 AM	Treatment	
	11:10 AM	Vitals	
	11:31 AM	Purchase	
	11:31 AM	Purchase	
	11:35 AM	Treatment	
	12:19 PM	Treatment	
	12:19 PM	Vitals	
	12:19 PM	Vitals	
	12:19 PM	Treatment	
	12:19 PM	Vitals	
	01:05 PM	Treatment	
B6	01:05 PM	Vitals	B6
	01:05 PM	Vitals	
	01:05 PM	Treatment	
	01:05 PM	Vitals	
	01:15 PM	Vitals	
	01:41 PM	Treatment	
	01:41 PM	Vitals	
	01:41 PM	Treatment	
	01:41 PM	Treatment	
	01:41 PM	Vitals	
	01:42 PM	Treatment	
	01:42 PM	Vitals	
	01:56 PM	Treatment	
	01:56 PM	Vitals	
	01:56 PM	Vitals	
	01:56 PM	Treatment	
	01:56 PM	Vitals	
	02:47 PM	Treatment	
	02:47 PM	Vitals	
	02:47 PM	Treatment	
	02:47 PM	Vitals	
	02:47 PM	Vitals	

Client: **B6**
Patient:

Patient History

02:47 PM	Treatment
02:47 PM	Vitals
03:38 PM	Treatment
03:38 PM	Vitals
03:39 PM	Treatment
03:39 PM	Vitals
03:39 PM	Vitals
03:40 PM	Treatment
03:40 PM	Vitals
04:08 PM	Treatment
04:08 PM	Vitals
04:56 PM	Treatment
04:56 PM	Vitals
04:56 PM	Vitals
04:56 PM	Treatment
04:56 PM	Vitals
05:07 PM	Treatment
05:07 PM	Vitals
05:07 PM	Treatment
05:28 PM	Treatment
05:28 PM	Treatment
05:28 PM	Treatment
05:28 PM	Vitals
05:28 PM	Vitals
05:28 PM	Treatment
05:28 PM	Vitals
05:29 PM	Treatment
05:29 PM	Vitals
05:36 PM	Treatment
05:36 PM	Vitals
06:03 PM	Purchase
06:03 PM	Purchase
06:39 PM	Prescription
07:03 PM	Treatment
07:03 PM	Vitals
07:03 PM	Vitals
07:03 PM	Treatment
07:03 PM	Vitals
07:28 PM	Treatment

B6

B6

Client: **B6**
Patient:

Patient History

	07:28 PM	Vitals	
	07:28 PM	Vitals	
	07:28 PM	Treatment	
	07:28 PM	Vitals	
	07:50 PM	Treatment	
	08:40 PM	Treatment	
	08:40 PM	Vitals	
	08:40 PM	Vitals	
	08:41 PM	Treatment	
	08:41 PM	Vitals	
	09:25 PM	Treatment	
	09:25 PM	Vitals	
	09:25 PM	Vitals	
	09:25 PM	Treatment	
	09:25 PM	Vitals	
	09:25 PM	Treatment	
	09:25 PM	Treatment	
	09:25 PM	Vitals	
	09:28 PM	Treatment	
	10:54 PM	Treatment	
B6	10:54 PM	Vitals	B6
	10:54 PM	Vitals	
	10:55 PM	Treatment	
	10:55 PM	Vitals	
	11:37 PM	Treatment	
	11:37 PM	Vitals	
	11:37 PM	Vitals	
	11:37 PM	Treatment	
	11:37 PM	Vitals	
	11:52 PM	Treatment	
	11:52 PM	Vitals	
	12:36 AM	Treatment	
	12:36 AM	Vitals	
	12:36 AM	Vitals	
	12:37 AM	Treatment	
	12:37 AM	Vitals	
	01:11 AM	Treatment	
	01:11 AM	Vitals	
	01:11 AM	Treatment	
	01:16 AM	Treatment	
	01:16 AM	Treatment	

Client: **B6**
Patient:

Patient History

B6	01:16 AM	Vitals	B6
	01:16 AM	Treatment	
	01:16 AM	Vitals	
	01:35 AM	Treatment	
	01:35 AM	Vitals	
	01:35 AM	Vitals	
	02:57 AM	Treatment	
	02:57 AM	Vitals	
	02:58 AM	Treatment	
	02:58 AM	Vitals	
	02:58 AM	Vitals	
	03:52 AM	Treatment	
	03:52 AM	Vitals	
	03:52 AM	Vitals	
	03:52 AM	Treatment	
	03:52 AM	Vitals	
	04:50 AM	Treatment	
	04:50 AM	Vitals	
	04:50 AM	Vitals	
	04:50 AM	Treatment	
	04:50 AM	Vitals	
	05:48 AM	Treatment	
	05:48 AM	Treatment	
	05:48 AM	Treatment	
	05:48 AM	Vitals	
	05:48 AM	Treatment	
	05:48 AM	Vitals	
	05:49 AM	Treatment	
	05:49 AM	Vitals	
	05:49 AM	Treatment	
	05:49 AM	Vitals	
	05:49 AM	Vitals	
	05:49 AM	Treatment	
	05:49 AM	Vitals	
	06:01 AM	Purchase	
	06:32 AM	Treatment	
	06:32 AM	Vitals	
	06:32 AM	Vitals	
	06:32 AM	Treatment	
	06:32 AM	Vitals	
06:33 AM	Vitals		
07:17 AM	Treatment		

Client: **B6**
Patient:

Patient History

07:17 AM	Vitals
07:17 AM	Vitals
07:18 AM	Treatment
07:18 AM	Vitals
07:40 AM	Treatment
07:40 AM	Treatment
07:40 AM	Vitals
07:41 AM	Treatment
09:08 AM	Treatment
09:08 AM	Vitals
09:08 AM	Vitals
09:08 AM	Treatment
09:08 AM	Vitals
09:09 AM	Treatment
09:09 AM	Vitals
09:19 AM	Treatment
09:19 AM	Vitals
09:49 AM	Purchase
10:12 AM	UserForm
10:15 AM	Treatment
10:15 AM	Vitals
10:15 AM	Vitals
10:16 AM	Treatment
10:16 AM	Vitals
10:26 AM	Purchase
10:26 AM	Treatment
10:46 AM	Purchase
10:46 AM	Labwork
10:51 AM	Treatment
11:06 AM	Treatment
11:06 AM	Vitals
11:06 AM	Vitals
11:17 AM	Purchase
11:17 AM	Treatment
11:24 AM	Treatment
11:24 AM	Vitals
11:51 AM	Treatment
11:51 AM	Vitals
11:51 AM	Vitals
11:51 AM	Treatment

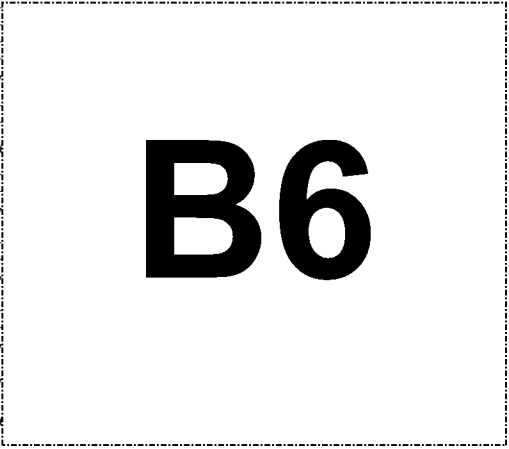
B6

B6

Client: **B6**
Patient: **B6**

Patient History

B6	11:51 AM	Vitals
	12:30 PM	Vitals
	01:18 PM	Treatment
	01:18 PM	Vitals
	01:18 PM	Vitals
	01:18 PM	Treatment
	01:18 PM	Vitals
	01:22 PM	Treatment
	01:22 PM	Vitals
	01:23 PM	Treatment
	01:23 PM	Treatment
	01:23 PM	Vitals



Cummings
Veterinary Medical Center
AT TUFTS UNIVERSITY

Foster Hospital for Small Animals
55 Willard Street
North Grafton, MA 01536
Telephone (508) 839-5395
Fax (508) 839-7951
<http://vetmed.tufts.edu/>

B6

B6

Male

Canine Doberman Pinscher Black

B6

B6

Dear **B6**

B6 was seen at Tufts' ER **B6**. Please see attached discharge instructions for more information.

If you have any questions, or concerns, please contact us at 508-887-4988.

Thank you,

B6 DVM (Intern - SAM)

Cummings
Veterinary Medical Center
AT TUFTS UNIVERSITY

Foster Hospital for Small Animals
55 Willard Street
North Grafton, MA 01536
Telephone: (508) 839-5395
Fax (508) 839-7951
<http://vetmed.tufts.edu/>
Referring Vet Direct Line: 508-887-4988

Notice of Patient Admit

Date: [B6] :21:36 PM
Referring Doctor: [B6]
Client Name: [B6]
Patient Name: [B6]

Case #: [B6]

Dear [B6]

Your patient presented to our Emergency service. Please make note of the following information to facilitate communication with our team.

The attending doctor is: [B6]
The reason for admission to the FHSA is: DOM, CHF

If you have any questions regarding this particular case, please call 508-887-4988 to reach the Cardiology Service. Information is updated daily, by noon.

Thank you for your referral to our Emergency Service.

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Foster Hospital for Small Animals
55 Willard Street
North Grafton, MA 01536
Telephone (508) 839-5395
Fax (508) 839-7951
<http://vetmed.tufts.edu/> B6

B6

B6

Male

Canine Doberman Pinscher Black

B6

Daily Update From the Cardiology Service

Today's date: B6

Dear Drs at B6 Hospital

Thank you for referring patients to the Foster Hospital for Small Animals at the Cummings School of Tufts University.

Your patient B6 was admitted and is being cared for by the Cardiology Service.

Today, B6

- is in stable condition
- is still in the oxygen cage
- is critically ill
- might be discharged from the hospital today

Today's treatments include:

- bloodwork planned/pending
- echocardiography -
- DCM with active CHF r/o breed-related vs. diet related.
- cardiac catheter procedure planned
- ongoing treatment for CHF
- ongoing treatment for thrombosis
- ongoing treatment for arrhythmia

Additional plans:

Please allow 3-5 business days for reports to be finalized upon patient discharge.

Please call (508) 887-4696 before 5pm or email us at cardiovet@tufts.edu if you have any questions.

Thank you!

Attending Clinician: B6 DVM (Resident, Cardiology)

Faculty Clinician: B6 DVM, DACVIM

Senior student:

Report Details - EON-374786

ICSR: 2060599
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-12-27 10:09:22 EST

Reported Problem:
Problem Description: Housemate was diagnosed with DCM [B6] previously reported). [B6] was asymptomatic but eating same diet (Acana) so was screened 8/20/18 - reduced contractile function. Owner changed diet to Pro Plan Weight Management dry. No improvement on 12/12/18 echo. Will recheck in 3 months WB taurine [B6].
Date Problem Started: 08/20/2018
Concurrent Medical Problem: Yes
Pre Existing Conditions: [B6]
Outcome to Date: Stable

Product Information:
Product Name: Acana Free Run Poultry dry
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information: **Description:** Fed since approximately 9/2016 (see diet history form) Changed to Pro Plan Weight Management Aug 2018
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: [B6]
Type Of Species: Dog
Type Of Breed: Doberman Pinscher
Gender: Female
Reproductive Status: Neutered
Weight: 38.1 Kilogram
Age: 10 Years
Assessment of Prior Health: Excellent
Number of Animals Given the Product: 2
Number of Animals Reacted: 2
Owner Information: **Owner Information provided:** Yes
Contact: **Name:** [B6]
Phone: [B6]
Email: [B6]
Address: [B6]
 United States
Healthcare Professional Information: **Practice Name:** Tufts Cummings School of Veterinary Medicine
Contact: **Name:** Lisa Freeman

			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
Preferred Method Of Contact:	Email		
Additional Documents:	Attachment:	B6	medical records.pdf
	Description:	Medical records	
	Type:	Medical Records	

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 3/26/2019 2:00:39 PM
Subject: Taste of the Wild Venison & Legume diet: [B6] EON-383371
Attachments: 2064630-report.pdf

A PFR Report has been received and PFR Event [EON-383371] has been created in the EON System.

A "PDF" report by name "2064630-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-383371

ICSR #: 2064630

EON Title: PFR Event created for Taste of the Wild Venison & Legume diet; 2064630

AE Date	03/06/2019	Number Fed/Exposed	
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Unknown
Breed	Unknown		
Age			
District Involved	PFR [B6] DO		

Product information

Individual Case Safety Report Number: 2064630

Product Group: Pet Food

Product Name: Taste of the Wild Venison & Legume diet

Description: Originally submitted as RFR EON-383367. CVM resubmitting as PFR. The patient has been eating a grain free diet, specifically the Taste of the Wild Venison & Legume diet for years. He presented on 3/6/19 and the owner reported a mild cough but he felt it was resolving and declined a work up at that time. He presented again on 3/12/19 since the cough had not resolved and we started a work up of the patient that included thoracic radiographs. The patient was/is in congestive heart failure with an enlarged heart. The pet's breed is not a common breed for DCM and with the dietary history of a high legume grain free diet I feel that this is dietary induced.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Unknown

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Taste of the Wild Venison & Legume diet		

Sender information

B6

USA

Owner information

B6

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-383371>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=400469>

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Failure to adhere to the above provisions could result in removal from the approved distribution list. If you think you received this email in error, please send an email to FDAREportableFoods@fda.hhs.gov immediately.

Report Details - EON-383371

ICSR: 2064630
Type Of Submission: Initial
Report Version: FPSR.FDA.PETF.V.V1
Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type: Voluntary
Report Submission Date: 2019-03-26 09:52:47 EDT

Reported Problem:
Problem Description: Originally submitted as RFR EON-383367. CVM resubmitting as PFR. The patient has been eating a grain free diet, specifically the Taste of the Wild Venison & Legume diet for years. He presented on 3/6/19 and the owner reported a mild cough but he felt it was resolving and declined a work up at that time. He presented again on 3/12/19 since the cough had not resolved and we started a work up of the patient that included thoracic radiographs. The patient was/is in congestive heart failure with an enlarged heart. The pet's breed is not a common breed for DCM and with the dietary history of a high legume grain free diet I feel that this is dietary induced.
Date Problem Started: 03/06/2019
Concurrent Medical Problem: Unknown
Outcome to Date: Unknown

Product Information:
Product Name: Taste of the Wild Venison & Legume diet
Product Type: Pet Food
Lot Number:
Product Use Information:
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name:
Type Of Species: Dog
Type Of Breed: Unknown
Gender: Male
Reproductive Status: Unknown
Assessment of Prior Health: Unknown
Number of Animals Reacted: 1
Owner Information: Owner Information provided: Yes
Contact: Name: B6
Phone: B6
Email: B6
Address: Unknown
Unknown
B6
Unknown
United States
Healthcare Professional Information:

Sender Information:
Name: B6
Address: B6

B6

United States

Contact:

Phone:

Email:

B6

Reporter Wants to
Remain Anonymous:

No

Permission To Contact
Sender:

Yes

Preferred Method Of
Contact:

Email

Additional Documents:

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 8/20/2018 8:44:25 PM
Subject: Acana Free Run Poultry dry: Lisa Freeman - EON-362878
Attachments: 2053969-report.pdf; 2053969-attachments.zip

A PFR Report has been received and PFR Event [EON-362878] has been created in the EON System.

A "PDF" report by name "2053969-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2053969-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-362878

ICSR #: 2053969

EON Title: PFR Event created for Acana Free Run Poultry dry; 2053969

AE Date	08/06/2018	Number Fed/Exposed	2
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Doberman Pinscher		
Age	[B6] Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2053969

Product Group: Pet Food

Product Name: Acana Free Run Poultry dry

Description: Taken to RDVM for lameness. Dilated cardiomyopathy and CHF diagnosed 8/6/18. Started on meds [B6] We saw at Tufts 8/16/18. Clinically improved but still has significant DCM and CHF plus arrhythmia. We added [B6] (instead of [B6]), fish oil, and taurine. WB taurine pending. Another dog in household (also a Doberman) was eating the same food but was echoed today and has no signs of DCM.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 2

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Acana Free Run Poultry dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-362878>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=379612>

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Report Details - EON-362878

ICSR: 2053969
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-08-20 16:33:06 EDT

Reported Problem:
Problem Description: Taken to RDVM for lameness. Dilated cardiomyopathy and CHF diagnosed 8/6 /18. Started on meds ([REDACTED] B6 [REDACTED]) We saw at Tufts 8/16 /18. Clinically improved but still has significant DCM and CHF plus arrhythmia. We added [REDACTED] B6 [REDACTED] (instead of [REDACTED] B6 [REDACTED] fish oil, and taurine. WB taurine pending. Another dog in household (also a Doberman) was eating the same food but was echoed today and has no signs of DCM.
Date Problem Started: 08/06/2018
Concurrent Medical Problem: Yes
Pre Existing Conditions: [REDACTED] B6 [REDACTED]
Outcome to Date: Stable

Product Information:
Product Name: Acana Free Run Poultry dry
Product Type: Pet Food
Lot Number:
UPC: 6499250125
Package Type: BAG
Package Size: 25 Pound
Possess Unopened Product: No
Possess Opened Product: Yes
Product Use Information:
Description: Fed to 2 Dobermans in household.
First Exposure Date: 09/01/2016
Last Exposure Date: 08/16/2018
Product Use Stopped After the Onset of the Adverse Event: Yes
Adverse Event Abate After Product Stop: Unknown
Product Use Started Again: No
Perceived Relatedness to Adverse Event: Probably related
Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: [REDACTED] B6 [REDACTED]

	Type Of Species: Dog
	Type Of Breed: Doberman Pinscher
	Gender: Male
	Reproductive Status: Neutered
	Weight: 45 Kilogram
	Age: B6 Years
	Assessment of Prior Health: Excellent
	Number of Animals Given the Product: 2
	Number of Animals Reacted: 1
	Owner Information:
	Owner Information provided: Yes
	Contact: Name: B6
	Phone: B6
	Email: B6
	Address: B6
	United States
	Healthcare Professional Information:
	Practice Name: Tufts Cummings School of Veterinary Medicine
	Contact: Name: Lisa Freeman
	Phone: (508) 887-4523
	Email: lisa.freeman@tufts.edu
	Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name: Lisa Freeman
	Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact: Phone: 5088874523
	Email: lisa.freeman@tufts.edu
	Permission To Contact Sender: Yes
	Preferred Method Of Contact: Email
	Reported to Other Parties: None
Additional Documents:	Attachment: B6 cardio report; B6 prmx.pdf
	Description: Cardio report
	Type: Sonogram
	Attachment: B6 discharge; B6 pdf
	Description: Discharge report
	Type: Other

Attachment: [B6] xrx rdvm [B6] rnx.pdf

Description: Chest rads from rdvm

Type: Radiographs

Attachment: [B6] profile [B6] prnx.pdf

Description: Chemistry profile

Type: Laboratory Report

Discharge Instructions

Patient

Name: B6

Species: Canine

Black/Tan Male (Neutered) Doberman

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Admit Date: B6 11:40:18 AM

Discharge Date: B6

Diagnoses: Biventricular congestive heart failure secondary to dilated cardiomyopathy (DCM)

Case summary:

B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. B6 had occasional ventricular premature beats (VPCs) seen today, but not enough right now to warrant additional therapy. We do however, want to keep monitoring this.

The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs and belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

Monitoring at home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 if difficulty breathing is not improved by within 30-60 minutes after giving B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.

- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Medications:

NEW MEDICATION

B6

NEW MEDICATION

B6

NOTE DOSE INCREASE

B6

Diet suggestions:

We would like to change B6 diet to a low sodium diet. A few diet options would be:

Dry Food:

Royal Canin Early Cardiac diet

Purina proplan bright mind small breed formula

Purina proplan adult weight management (this does not have low calories in spite of the name of the food)

Canned Food:

Hills Science diet adult beef and barley entree

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable.

However, if you find that B6 is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks for bloodwork which can be done at your primary care veterinarian.

A recheck has been scheduled for B6 on

Tuesday, November 20, 2018 at 11:00am with B6

Thank you for entrusting us with B6 care. Please contact our Cardiology liaison at (508)-887-4626 or email us at cardiowet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: B6

Owner: B6

Discharge Instructions

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; usha.gulati@doveltech.com
Sent: 10/25/2018 11:52:42 AM
Subject: Taste of the Wild High Prairie: Lisa Freeman - EON-369325
Attachments: 2057945-report.pdf; 2057945-attachments.zip

A PFR Report has been received and PFR Event [EON-369325] has been created in the EON System.

A "PDF" report by name "2057945-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2057945-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-369325

ICSR #: 2057945

EON Title: PFR Event created for Taste of the Wild High Prairie; 2057945

AE Date	02/20/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Died Naturally
Breed	Great Dane		
Age	9 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2057945

Product Group: Pet Food

Product Name: Taste of the Wild High Prairie

Description: DCM, CHF, atrial fibrillation WB taurine = **B6** Dog's diet previously submitted to FDA Note: this may be a duplicate submission

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Died Naturally

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Taste of the Wild High Prairie		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-369325>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=386247>

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Report Details - EON-369325

ICSR: 2057945
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-10-25 07:45:50 EDT

Reported Problem:
Problem Description: DCM, CHF, atrial fibrillation WB taurine = [B6] Dog's diet previously submitted to FDA Note: this may be a duplicate submission
Date Problem Started: 02/20/2018
Concurrent Medical Problem: No
Outcome to Date: Died Naturally
Date of Death: [B6]

Product Information:
Product Name: Taste of the Wild High Prairie
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information:
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: [B6]
Type Of Species: Dog
Type Of Breed: Great Dane
Gender: Male
Reproductive Status: Intact
Weight: 74 Kilogram
Age: 9 Years
Assessment of Prior Health: Excellent
Number of Animals Given the Product: 1
Number of Animals Reacted: 1

Owner Information: Yes
Contact: Name: [B6]
 Phone: [B6]
 Email: [B6]
Address: [B6]
 United States

Healthcare Professional Information:
Practice Name: Tufts Cummings School of Veterinary Medicine
Contact: Name: Lisa Freeman
 Phone: (508) 887-4523
 Email: lisa.freeman@tufts.edu

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Sender Information:

Name: Lisa Freeman

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Contact: **Phone:** 5088874523
Email: lisa.freeman@tufts.edu

Permission To Contact Sender: Yes

Preferred Method Of Contact: Email

Additional Documents:

Attachment: **B6** compiled records.pdf

Description: Records

Type: Medical Records

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent: 5/20/2019 3:05:29 PM
Subject: Acana Heritage Poultry dry; Darcy Adin - EON-388255
Attachments: 2067176-report.pdf

A PFR Report has been received and PFR Event [EON-388255] has been created in the EON System.

A "PDF" report by name "2067176-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388255

ICSR #: 2067176

EON Title: PFR Event created for Acana Heritage Poultry dry; 2067176

AE Date	02/14/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Shepherd Dog - German		
Age	4 Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067176

Product Group: Pet Food

Product Name: Acana Heritage Poultry dry

Description: B6 presented to the UF Cardiology Service for a 5 month history of progressive exercise intolerance and increased respiratory rate and effort. Patient was diagnosed with Dilated Cardiomyopathy. She has been rechecked once 5/15/19 - clinically stable but no improvement noted on echocardiogram. Her blood taurine results were discordant so she has been on supplementation

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Acana Heritage Poultry dry		

Sender information

Darcy Adin
2015 SW 16th Ave
2015 SW 16th Avenue
Gainesville, FL 32608
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-388255>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=405432>

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Report Details - EON-388255

ICSR: 2067176
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:58:30 EDT

Reported Problem:

Problem Description: B6 presented to the UF Cardiology Service for a 5 month history of progressive exercise intolerance and increased respiratory rate and effort. Patient was diagnosed with Dilated Cardiomyopathy. She has been rechecked once 5/15/19 - clinically stable but no improvement noted on echocardiogram. Her blood taurine results were discordant so she has been on supplementation

Date Problem Started: 02/14/2019

Concurrent Medical Problem: Yes

Pre Existing Conditions: B6

Outcome to Date: Stable

Product Information:

Product Name: Acana Heritage Poultry dry

Product Type: Pet Food

Lot Number:

Product Use Information:

Description: 2 cups dry food fed twice per day Patient also has been receiving deer antlers once per week since Aug 2015 as treats/chews.

First Exposure Date: 08/01/2015

Last Exposure Date: 02/14/2019

Time Interval between Product Use and Adverse Event: 3 Years

Product Use Stopped After the Onset of the Adverse Event: Yes

Adverse Event Abate After Product Stop: Unknown

Product Use Started Again: No

Perceived Relatedness to Adverse Event: Possibly related

Other Foods or Products Given to the Animal During This Time Period: Yes

Manufacturer /Distributor Information:

Purchase Location Information:

Animal Information:

Name: B6

Type Of Species: Dog

	Type Of Breed: Shepherd Dog - German
	Gender: Female
	Reproductive Status: Intact
	Pregnancy Status: Not Pregnant
	Lactation Status: Not lactating
	Weight: 36 Kilogram
	Age: 4 Years
	Assessment of Prior Health: Good
	Number of Animals Given the Product: 1
	Number of Animals Reacted: 1
	Owner Information: Owner Information provided: No
Healthcare Professional Information:	Practice Name: University of Florida
	Contact: Name: Darcy Adin
	Phone: (614) 582-9798
	Other Phone: 3522948606
	Email: adind@ufl.edu
	Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
Sender Information:	Name: Darcy Adin
	Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
	Contact: Phone: 6145829798
	Other Phone: 3522948606
	Email: adind@ufl.edu
	Permission To Contact Sender: Yes
	Preferred Method Of Contact: Email
Reported to Other Parties: None	
Additional Documents:	

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 5/20/2019 3:04:47 PM
Subject: Blue Buffalo Large Breed Adult: Darcy Adin - EON-388253
Attachments: 2067174-report.pdf

A PFR Report has been received and PFR Event [EON-388253] has been created in the EON System.

A "PDF" report by name "2067174-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388253

ICSR #: 2067174

EON Title: PFR Event created for Blue Buffalo Large Breed Adult, Paul Newman Dog Biscuits various, Spring Hill Fish Oil; 2067174

AE Date	[B6]	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Died Euthanized
Breed	Doberman Pinscher		
Age	11 Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067174

Product Group: Pet Food, Other

Product Name: Blue Buffalo Large Breed Adult, Paul Newman Dog Biscuits, various, Spring Hill Fish Oil

Description: Patient had been stable on [B6] for dilated cardiomyopathy for the past two years prior to presentation at UF Cardiology. A few weeks prior to presentation, he was started on [B6] for coughing episodes. The day of presentation, an EKG performed at the primary care veterinarian showed a ventricular arrhythmia. On presentation to UF Cardiology, patient had collapsed suddenly and was in cardiopulmonary arrest. After CPR and [B6] he converted to sinus tachycardia. Patient was diagnosed with dilated cardiomyopathy. [B6] was euthanized two days later due to gastric dilation volvulus (GDV).

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Died Euthanized

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Blue Buffalo Large Breed Adult		
Paul Newman Dog Biscuits, various		
Spring Hill Fish Oil		

Sender information

Darcy Adin

2015 SW 16th Ave

2015 SW 16th Avenue

Gainesville, FL 32608

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-388253>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=405430>

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you received this email in error, please send an email to FDAREportableFoods@fda.hhs.gov immediately.

Report Details - EON-388253

ICSR: 2067174
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:54:51 EDT

Reported Problem:

Problem Description: Patient had been stable on [B6] for dilated cardiomyopathy for the past two years prior to presentation at UF Cardiology. A few weeks prior to presentation, he was started on [B6] for coughing episodes. The day of presentation, an EKG performed at the primary care veterinarian showed a ventricular arrhythmia. On presentation to UF Cardiology, patient had collapsed suddenly and was in cardiopulmonary arrest. After CPR and [B6] he converted to sinus tachycardia. Patient was diagnosed with dilated cardiomyopathy. [B6] was euthanized two days later due to gastric dilation volvulus (GDV).

Date Problem Started: [B6]

Concurrent Medical Problem: Yes

Pre Existing Conditions: [B6] was diagnosed with dilated cardiomyopathy two years prior to presentation at UF Cardiology and had been previously stable on [B6] for the past two years. [B6] also underwent [B6] surgery in the past for a [B6]. [B6] The implant has since been removed due to infection. [B6] was also on [B6] of unknown dose and frequency and Spring Hill Fish Oil 1 pill per day.

Outcome to Date: Died Euthanized

Date of Death: [B6]

Product Information:

Product Name: Spring Hill Fish Oil

Product Type: Other

Lot Number:

Product Use Information: **Description:** 1 pill daily as supplement

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Paul Newman Dog Biscuits, various

Product Type: Pet Food

Lot Number:

Product Use Information: **Description:** used as treats patient also received fat free greek yogurt once per day since 2015 and raw carrots as treats

First Exposure Date: 01/01/2010

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Blue Buffalo Large Breed Adult

Product Type: Pet Food

Lot Number:

Product Use Information: **Description:** 2 cups dry fed twice per day

First Exposure Date: 12/31/2007

Last Exposure Date: [B6]

Time Interval: 9 Years

		between Product Use and Adverse Event:	
		Product Use Stopped After the Onset of the Adverse Event:	No
		Perceived Relatedness to Adverse Event:	Possibly related
		Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	Dog	
	Type Of Breed:	Doberman Pinscher	
	Gender:	Male	
	Reproductive Status:	Neutered	
	Weight:	38 Kilogram	
	Age:	11 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Given the Product:	1	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	No
	Healthcare Professional Information:	Practice Name:	University of Florida
		Contact:	Name: Darcy Adin
			Phone: (614) 582-9798
			Other Phone: 3522948606
			Email: adind@ufl.edu
		Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
Sender Information:	Name:	Darcy Adin	
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States	
	Contact:	Phone:	6145829798
		Other Phone:	3522948606
		Email:	adind@ufl.edu

	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
	Reported to Other Parties:	None

Additional Documents:

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 5/20/2019 2:57:01 PM
Subject: Honest Kitchen Turkey dehydrated: Darcy Adin - EON-388245
Attachments: 2067168-report.pdf

A PFR Report has been received and PFR Event [EON-388245] has been created in the EON System.

A "PDF" report by name "2067168-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388245

ICSR #: 2067168

EON Title: PFR Event created for Honest Kitchen Turkey dehydrated, N and D Venison and Quinoa dry, Taste of the Wild Prey (Angus Beef and Lentils); 2067168

AE Date	03/13/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Great Dane		
Age	4.5 Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067168

Product Group: Pet Food

Product Name: Honest Kitchen Turkey dehydrated, N and D Venison and Quinoa dry, Taste of the Wild Prey (Angus, Beef, and Lentils)

Description: A few days before [B6] was seen by UF Cardiology, he presented to a specialty clinic for a minor orthopedic complaint, at which time an ECG revealed an abnormal rhythm. On [B6] became inappetent and vomited twice. On [B6] patient presented to primary care veterinarian, and on [B6] patient presented to an emergency clinic where thoracic radiographs revealed mild to moderate cardiomegaly. He was referred to cardiology on [B6] where he was diagnosed with Dilated Cardiomyopathy. Anorexia resolved after 2 weeks.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
N and D Venison and Quinoa dry		
Honest Kitchen Turkey dehydrated		
Taste of the Wild Prey (Angus, Beef, and Lentils)		

Sender information

Darcy Adin
2015 SW 16th Ave
2015 SW 16th Avenue
Gainesville, FL 32608
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-388245>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=405422>

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Report Details - EON B6																					
ICSR:	2067168																				
Type Of Submission:	Initial																				
Report Version:	FPSR.FDA.PETF.V.V1																				
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)																				
Reporting Type:	Voluntary																				
Report Submission Date:	2019-05-20 10:45:10 EDT																				
Reported Problem:	<p>Problem Description: A few days before B6 was seen by UF Cardiology, he presented to a specialty clinic for a minor orthopedic complaint, at which time an ECG revealed an abnormal rhythm. On B6 became inappetant and vomited twice. On B6 patient presented to primary care veterinarian, and on B6 patient presented to an emergency clinic where thoracic radiographs revealed mild to moderate cardiomegaly. He was referred to cardiology on B6 here he was diagnosed with Dilated Cardiomyopathy. Anorexia resolved after 2 weeks.</p> <p>Date Problem Started: 03/13/2019</p> <p>Concurrent Medical Problem: Yes</p> <p>Pre Existing Conditions: Patient received flax oil. Patient had a recent history of right hindlimb lameness.</p> <p>Outcome to Date: Stable</p>																				
Product Information:	<p>Product Name: Taste of the Wild Prey (Angus, Beef, and Lentils)</p> <p>Product Type: Pet Food</p> <p>Lot Number:</p> <p>Product Use Information:</p> <table border="1"> <tr> <td>Description:</td> <td>3/4 cup fed twice per day</td> </tr> <tr> <td>First Exposure Date:</td> <td>03/13/2018</td> </tr> <tr> <td>Last Exposure Date:</td> <td>03/13/2019</td> </tr> <tr> <td>Time Interval between Product Use and Adverse Event:</td> <td>1 Years</td> </tr> <tr> <td>Product Use Stopped After the Onset of the Adverse Event:</td> <td>Yes</td> </tr> <tr> <td>Adverse Event Abate After Product Stop:</td> <td>Unknown</td> </tr> <tr> <td>Product Use Started Again:</td> <td>No</td> </tr> <tr> <td>Perceived Relatedness to Adverse Event:</td> <td>Possibly related</td> </tr> <tr> <td>Other Foods or Products Given to the Animal During This Time Period:</td> <td>Yes</td> </tr> </table> <p>Manufacturer /Distributor Information:</p> <p>Purchase Location Information:</p> <p>Product Name: N and D Venison and Quinoa dry</p> <p>Product Type: Pet Food</p> <p>Lot Number:</p> <p>Product Use</p> <table border="1"> <tr> <td>Description:</td> <td>1 3/4 cup fed twice per day</td> </tr> </table>	Description:	3/4 cup fed twice per day	First Exposure Date:	03/13/2018	Last Exposure Date:	03/13/2019	Time Interval between Product Use and Adverse Event:	1 Years	Product Use Stopped After the Onset of the Adverse Event:	Yes	Adverse Event Abate After Product Stop:	Unknown	Product Use Started Again:	No	Perceived Relatedness to Adverse Event:	Possibly related	Other Foods or Products Given to the Animal During This Time Period:	Yes	Description:	1 3/4 cup fed twice per day
Description:	3/4 cup fed twice per day																				
First Exposure Date:	03/13/2018																				
Last Exposure Date:	03/13/2019																				
Time Interval between Product Use and Adverse Event:	1 Years																				
Product Use Stopped After the Onset of the Adverse Event:	Yes																				
Adverse Event Abate After Product Stop:	Unknown																				
Product Use Started Again:	No																				
Perceived Relatedness to Adverse Event:	Possibly related																				
Other Foods or Products Given to the Animal During This Time Period:	Yes																				
Description:	1 3/4 cup fed twice per day																				

Information:	First Exposure Date:	12/13/2018
	Last Exposure Date:	03/13/2019
	Time Interval between Product Use and Adverse Event:	3 Months
	Product Use Stopped After the Onset of the Adverse Event:	Yes
	Adverse Event Abate After Product Stop:	Unknown
	Product Use Started Again:	No
	Perceived Relatedness to Adverse Event:	Possibly related
	Other Foods or Products Given to the Animal During This Time Period:	Yes
Manufacturer /Distributor Information:		
Purchase Location Information:		
Product Name:	Honest Kitchen Turkey dehydrated	
Product Type:	Pet Food	
Lot Number:		
Product Use Information:	Description:	1/4 cup fed once per day Patient also receives lung pieces and beef and duck jerky as treats.
	First Exposure Date:	01/01/2015
	Last Exposure Date:	03/13/2019
	Time Interval between Product Use and Adverse Event:	4 Years
	Product Use Stopped After the Onset of the Adverse Event:	Yes
	Adverse Event Abate After Product Stop:	Unknown
	Product Use Started Again:	No
	Perceived Relatedness to Adverse Event:	Possibly related
	Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer	

	/Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Great Dane		
	Gender:	Male		
	Reproductive Status:	Neutered		
	Weight:	86.1 Kilogram		
	Age:	B6 Years		
	Assessment of Prior Health:	Good		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	No	
	Healthcare Professional Information:	Practice Name:	University of Florida	
Contact:		Name:	Darcy Adin	
		Phone:	(614) 582-9798	
		Other Phone:	3522948606	
		Email:	adind@ufl.edu	
Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States			
Sender Information:	Name:	Darcy Adin		
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States		
		Contact:	Phone:	6145829798
			Other Phone:	3522948606
			Email:	adind@ufl.edu
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Reported to Other Parties:	None			
Additional Documents:				

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 5/20/2019 2:57:23 PM
Subject: Natural Balance Venison: Darcy Adin - EON-388246
Attachments: 2067170-report.pdf

A PFR Report has been received and PFR Event [EON-388246] has been created in the EON System.

A "PDF" report by name "2067170-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388246

ICSR #: 2067170

EON Title: PFR Event created for Natural Balance Venison Sweet Potatoes, Pedigree chicken and rice, Dr. Lyon's dental treat (mint), Smart Bones Smart Sticks (peanut butter), Cosequin DS; 2067170

AE Date	04/03/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Sheepdog - Shetland		
Age	10 Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067170

Product Group: Pet Food, Other

Product Name: Natural Balance Venison, Sweet Potatoes, Pedigree chicken and rice, Dr. Lyon's dental treat (mint), Smart Bones Smart Sticks (peanut butter), Cosequin DS

Description: [B6] was referred to UF Cardiology after her primary care veterinarian noted a Grade 2/6 left systolic murmur. She has been slowing down some over the past year, but still runs and plays regularly. [B6] has a sinus arrhythmia. Patient was diagnosed with primary mitral regurgitation with systolic dysfunction.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Natural Balance Venison, Sweet Potatoes		
Dr. Lyon's dental treat (mint)		
Pedigree chicken and rice		
Cosequin DS		

Sender information

Darcy Adin
2015 SW 16th Ave
2015 SW 16th Avenue
Gainesville, FL 32608
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-388246>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=405423>

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Report Details - EON: B6	
ICSR:	2067170
Type Of Submission:	Initial
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2019-05-20 10:48:05 EDT
Reported Problem:	Problem Description: B6 was referred to UF Cardiology after her primary care veterinarian noted a Grade 2/6 left systolic murmur. She has been slowing down some over the past year, but still runs and plays regularly. B6 has a sinus arrhythmia. Patient was diagnosed with primary mitral regurgitation with systolic dysfunction.
	Date Problem Started: 04/03/2019
	Concurrent Medical Problem: Yes
	Pre Existing Conditions: B6 has a history of B6 since she was about 4 years old. She is not currently clinical for her B6 B6 receives B6 B6 daily.
	Outcome to Date: Stable
Product Information:	Product Name: Cosequin DS
	Product Type: Other
	Lot Number:
	Product Use Information: Description: 1/2 tablet once daily as joint supplement
	Manufacturer /Distributor Information:
	Purchase Location Information:
	Product Name: Smart Bones Smart Sticks (peanut butter)
	Product Type: Pet Food
	Lot Number:
	Product Use Information: Description: 5 inch treat given once per week First Exposure Date: 01/01/2016
	Manufacturer /Distributor Information:
	Purchase Location Information:
	Product Name: Dr. Lyon's dental treat (mint)
	Product Type: Pet Food
	Lot Number:
	Product Use Information: Description: 3 inch treat fed once per week First Exposure Date: 01/01/2018
	Manufacturer /Distributor Information:
	Purchase Location Information:
	Product Name: Pedigree chicken and rice
	Product Type: Pet Food
	Lot Number:
Product Use Information: Description: 1/4 cup fed once per day First Exposure Date: 01/01/2012	

		Time Interval between Product Use and Adverse Event:	7 Years	
		Product Use Stopped After the Onset of the Adverse Event:	No	
		Perceived Relatedness to Adverse Event:	Possibly related	
		Other Foods or Products Given to the Animal During This Time Period:	Yes	
	Manufacturer /Distributor Information:			
	Purchase Location Information:			
	Product Name:	Natural Balance Venison, Sweet Potatoes		
	Product Type:	Pet Food		
	Lot Number:			
	Product Use Information:	Description:	1/2 cup dry fed twice per day Patient also receives 2TBSP 100% pure pumpkin once daily and 1/2 hard boiled egg white once per week.	
		First Exposure Date:	10/01/2010	
		Time Interval between Product Use and Adverse Event:	9 Years	
		Product Use Stopped After the Onset of the Adverse Event:	No	
		Perceived Relatedness to Adverse Event:	Possibly related	
		Other Foods or Products Given to the Animal During This Time Period:	Yes	
		Manufacturer /Distributor Information:		
		Purchase Location Information:		
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Sheepdog - Shetland		
	Gender:	Female		
	Reproductive Status:	Neutered		
	Weight:	11.5 Kilogram		
	Age:	10 Years		
	Assessment of Prior Health:	Good		
	Number of Animals Given the Product:	1		

	Number of Animals Reacted:	1								
	Owner Information:	Owner Information provided: No								
	Healthcare Professional Information:	Practice Name: University of Florida Contact: <table border="1"> <tr> <td>Name:</td> <td>Darcy Adin</td> </tr> <tr> <td>Phone:</td> <td>(614) 582-9798</td> </tr> <tr> <td>Other Phone:</td> <td>3522948606</td> </tr> <tr> <td>Email:</td> <td>adind@ufl.edu</td> </tr> </table> Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States	Name:	Darcy Adin	Phone:	(614) 582-9798	Other Phone:	3522948606	Email:	adind@ufl.edu
Name:	Darcy Adin									
Phone:	(614) 582-9798									
Other Phone:	3522948606									
Email:	adind@ufl.edu									
Sender Information:	Name:	Darcy Adin								
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States								
	Contact:	Phone: 6145829798 Other Phone: 3522948606 Email: adind@ufl.edu								
	Permission To Contact Sender:	Yes								
	Preferred Method Of Contact:	Email								
	Reported to Other Parties:	None								
Additional Documents:										

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notificatio B6
Sent: 5/20/2019 3:05:50 PM
Subject: Origins 6 Fish Grain Free dry: Darcy Adin - EON-388256
Attachments: 2067173-report.pdf

A PFR Report has been received and PFR Event [EON-388256] has been created in the EON System.

A "PDF" report by name "2067173-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388256

ICSR #: 2067173

EON Title: PFR Event created for Origins 6 Fish Grain Free dry, Dasuquin (Nutramax) Glucosamine MSM Chonroitin ASU; 2067173

AE Date	03/19/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Great Dane		
Age	7 Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067173

Product Group: Pet Food, Other

Product Name: Origins 6 Fish Grain Free dry, Dasuquin (Nutramax) Glucosamine, MSM, Chonroitin, ASU

Description: B6 presented to UF Cardiology with a history of persistent cough for the past 2-3 months which acutely became more frequent with episodes of wheezing and hacking. Patient was diagnosed with atrial fibrillation and dilated cardiomyopathy.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Dasuquin (Nutramax) Glucosamine, MSM, Chonroitin, ASU		
Origins 6 Fish Grain Free dry		

Sender information

Darcy Adin
2015 SW 16th Ave
2015 SW 16th Avenue
Gainesville, FL 32608
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-388256>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=405433>

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Report Details - EON-388256	
ICSR:	2067173
Type Of Submission:	Initial
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2019-05-20 10:51:47 EDT
Reported Problem:	Problem Description: [B6] presented to UF Cardiology with a history of persistent cough for the past 2-3 months which acutely became more frequent with episodes of wheezing and hacking. Patient was diagnosed with atrial fibrillation and dilated cardiomyopathy.
	Date Problem Started: 03/19/2019
	Concurrent Medical Problem: Yes
	Pre Existing Conditions: Previously diagnosed with [B6] 2012, but is not currently clinical. Patient receives Glucosamine nutramax 800mg daily, MSM nutramax 700mg daily, Chonroitin nutramax 300mg daily, and ASU nutramax 75mg daily.
	Outcome to Date: Stable
Product Information:	Product Name: Dasuquin (Nutramax) Glucosamine, MSM, Chonroitin, ASU
	Product Type: Other
	Lot Number:
	Product Use Information: Description: joint supplement daily
	Manufacturer /Distributor Information:
	Purchase Location Information:
	Product Name: Origins 6 Fish Grain Free dry
	Product Type: Pet Food
	Lot Number:
	Product Use Information: Description: 2 cups fed twice per day
	First Exposure Date: 03/01/2013
	Last Exposure Date: 03/19/2019
	Time Interval between Product Use and Adverse Event: 6 Years
	Product Use Stopped After the Onset of the Adverse Event: Yes
	Adverse Event Abate After Product Stop: Unknown
Product Use Started Again: No	
Perceived Relatedness to Adverse Event: Possibly related	
Other Foods or Products Given to the Animal During This Time Period: Yes	
Manufacturer:	

	/Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Great Dane		
	Gender:	Male		
	Reproductive Status:	Intact		
	Weight:	65 Kilogram		
	Age:	7 Years		
	Assessment of Prior Health:	Good		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	No	
	Healthcare Professional Information:	Practice Name:	University of Florida	
		Contact:	Name:	Darcy Adin
Phone:			(614) 582-9798	
Other Phone:			3522948606	
Email:			adind@ufl.edu	
Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States			
Sender Information:	Name:	Darcy Adin		
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States		
		Contact:	Phone:	6145829798
			Other Phone:	3522948606
			Email:	adind@ufl.edu
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Reported to Other Parties:	None			
Additional Documents:				

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent: 5/20/2019 3:05:09 PM
Subject: Pure Balance Salmon and Potato dry: Darcy Adin - EON-388254
Attachments: 2067175-report.pdf

A PFR Report has been received and PFR Event [EON-388254] has been created in the EON System.

A "PDF" report by name "2067175-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388254

ICSR #: 2067175

EON Title: PFR Event created for Pure Balance Salmon and Potato dry, 4Health Salmon and Potato canned, Milkbone peanut flavor dry mini treats, Spring Valley Fish Flax and Borage Oil, Good Morning Healthy Joints; 2067175

AE Date	02/20/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Cattle Dog - Australian (blue heeler, red heeler, Queensland cattledog)		
Age	10 Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067175

Product Group: Pet Food, Other

Product Name: Pure Balance Salmon and Potato dry, 4Health Salmon and Potato canned, Milkbone peanut flavor dry mini treats, Spring Valley Fish, Flax, and Borage Oil, Good Morning Healthy Joints

Description: Patient presented to the UF Cardiology Service after roughly two weeks of coughing. When

coughing initially started, patient was seen by primary care veterinarian and was treated with [B6] [B6] On 2/19/19 [B6] presented to his primary care veterinarian again. He had cyanotic mucous membranes, an enlarged heart, and pulmonary edema. Patient was referred to UF and was diagnosed with Dilated Cardiomyopathy.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Spring Valley Fish, Flax, and Borage Oil		
Milkbone peanut flavor dry mini treats		
Pure Balance Salmon and Potato dry		
Good Morning Healthy Joints		

Sender information

Darcy Adin
2015 SW 16th Ave
2015 SW 16th Avenue
Gainesville, FL 32608
USA

To view this PFR Event, please click the link below:
<https://eon.fda.gov/eon//browse/EON-388254>

To view the PFR Event Report, please click the link below:
<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=405431>

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Report Details - EON-388254

ICSR: 2067175
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:56:29 EDT

Reported Problem:

Problem Description: Patient presented to the UF Cardiology Service after roughly two weeks of coughing. When coughing initially started, patient was seen by primary care veterinarian and was treated with [REDACTED] B6 [REDACTED] B6. On [REDACTED] B6 [REDACTED] presented to his primary care veterinarian again. He had cyanotic mucous membranes, an enlarged heart, and pulmonary edema. Patient was referred to UF and was diagnosed with Dilated Cardiomyopathy.

Date Problem Started: 02/20/2019

Concurrent Medical Problem: Yes

Pre Existing Conditions: [REDACTED] B6 [REDACTED]

Outcome to Date: Stable

Product Information:

Product Name: Good Morning Healthy Joints

Product Type: Other

Lot Number:

Product Use Information: **Description:** supplement given twice daily

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Spring Valley Fish, Flax, and Borage Oil

Product Type: Other

Lot Number:

Product Use Information: **Description:** supplement given once daily

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Milkbone peanut flavor dry mini treats

Product Type: Pet Food

Lot Number:

Product Use Information: **Description:** used as treats

First Exposure Date: 01/01/2012

Other Foods or Products Given to the Animal During This Time Period: Yes

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: 4Health Salmon and Potato canned

Product Type: Pet Food	
Lot Number:	
Product Use Information:	Description: 1 TPSP fed twice per day
	First Exposure Date: 01/01/2016
	Last Exposure Date: 02/20/2019
	Time Interval between Product Use and Adverse Event: 3 Years
	Product Use Stopped After the Onset of the Adverse Event: Yes
	Adverse Event Abate After Product Stop: Unknown
	Product Use Started Again: No
	Perceived Relatedness to Adverse Event: Possibly related
	Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:	
Purchase Location Information:	
Product Name:	Pure Balance Salmon and Potato dry
Product Type: Pet Food	
Lot Number:	
Product Use Information:	Description: 1 cup dry food fed twice per day
	First Exposure Date: 01/01/2016
	Last Exposure Date: 02/20/2019
	Time Interval between Product Use and Adverse Event: 3 Years
	Product Use Stopped After the Onset of the Adverse Event: Yes
	Adverse Event Abate After Product Stop: Unknown
	Product Use Started Again: No
	Perceived Relatedness to Adverse Event: Possibly related
	Other Foods or Products Given Yes

		to the Animal During This Time Period:
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
Animal Information:	Name:	B6
	Type Of Species:	Dog
	Type Of Breed:	Cattle Dog - Australian (blue heeler, red heeler, Queensland cattledog)
	Gender:	Male
	Reproductive Status:	Neutered
	Weight:	24 Kilogram
	Age:	10 Years
	Assessment of Prior Health:	Fair
	Number of Animals Given the Product:	1
	Number of Animals Reacted:	1
	Owner Information:	Owner Information provided: No
	Healthcare Professional Information:	Practice Name: University of Florida
		Contact: Name: Darcy Adin
		Phone: (614) 582-9798
		Other Phone: 3522948606
		Email: adind@ufl.edu
		Address: 2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
Sender Information:	Name:	Darcy Adin
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States
	Contact:	Phone: 6145829798
		Other Phone: 3522948606
		Email: adind@ufl.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
	Reported to Other Parties:	None
Additional Documents:		

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 5/20/2019 2:56:40 PM
Subject: Taste of the Wild Pacific Salmon Grain Free: Darcy Adin - EON-388244
Attachments: 2067171-report.pdf

A PFR Report has been received and PFR Event [EON-388244] has been created in the EON System.

A "PDF" report by name "2067171-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

EON Key: EON-388244

ICSR #: 2067171

EON Title: PFR Event created for Taste of the Wild Pacific Salmon Grain Free, Red Barn Bully sticks and slices, Sam's Club Chicken Jerky, Nubs Chicken Treats, Nudges Chicken Jerkey; 2067171

AE Date	03/19/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	American Pit Bull Terrier		
Age	[B6] Years		
District Involved	PFR-Florida DO		

Product information

Individual Case Safety Report Number: 2067171

Product Group: Pet Food

Product Name: Taste of the Wild Pacific Salmon Grain Free, Red Barn Bully sticks and slices, Sam's Club Chicken Jerky, Nubs Chicken Treats, Nudges Chicken Jerkey

Description: [B6] presented to UF Cardiology for evaluation of a heart murmur and arrhythmia discovered by his primary care veterinarian. [B6] had a recent history of a progressively worsening cough. On ECG, [B6] had intermittent ventricular premature complexes (right bundle branch block [B6] was diagnosed with mitral regurgitation with systolic dysfunction.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Sam's Club Chicken Jerky		
Nudges Chicken Jerkey		
Red Barn Bully sticks and slices		
Nubs Chicken Treats		

Sender information

Darcy Adin
2015 SW 16th Ave
2015 SW 16th Avenue
Gainesville, FL 32608
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-388244>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=405421>

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Report Details - EON-388244

ICSR: 2067171
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-05-20 10:49:42 EDT

Reported Problem:

Problem Description: B6 presented to UF Cardiology for evaluation of a heart murmur and arrhythmia discovered by his primary care veterinarian. B6 had a recent history of a progressively worsening cough. On ECG B6 had intermittent ventricular premature complexes (right bundle branch block). B6 was diagnosed with mitral regurgitation with systolic dysfunction.

Date Problem Started: 03/19/2019

Concurrent Medical Problem: Yes

Pre Existing Conditions: History of dermatologic skin issues, but no other relevant medical history. Patient is on Heartgard and Seresto collar as preventatives.

Outcome to Date: Stable

Product Information:

Product Name: Nudges Chicken Jerkey

Product Type: Pet Food

Lot Number:

Product Use Information:

Description: 2-3 slices fed 2-3 times per day as a treat

First Exposure Date: 02/01/2019

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Nubs Chicken Treats

Product Type: Pet Food

Lot Number:

Product Use Information:

Description: one bone once per day as a treat

First Exposure Date: 10/01/2017

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Sam's Club Chicken Jerky

Product Type: Pet Food

Lot Number:

Product Use Information:

Description: fed as treats 2-3 slices, 2-3 times per day

First Exposure Date: 01/01/2018

Manufacturer /Distributor Information:

Purchase Location Information:

Product Name: Red Barn Bully sticks and slices

Product Type: Pet Food

Lot Number:

Product Use Information:

Description: treats - 1 stick per day

First Exposure Date: 08/01/2018

		Date:	
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
	Product Name:	Taste of the Wild Pacific Salmon Grain Free	
	Product Type:	Pet Food	
	Lot Number:		
	Product Use Information:	Description:	2 cups fed once per day
		First Exposure Date:	01/01/2017
		Last Exposure Date:	03/19/2019
		Time Interval between Product Use and Adverse Event:	2 Years
		Product Use Stopped After the Onset of the Adverse Event:	Yes
		Adverse Event Abate After Product Stop:	Unknown
		Product Use Started Again:	No
		Perceived Relatedness to Adverse Event:	Possibly related
		Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	Dog	
	Type Of Breed:	American Pit Bull Terrier	
	Gender:	Male	
	Reproductive Status:	Neutered	
	Weight:	35.9 Kilogram	
	Age:	B6 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Given the Product:	1	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	No
	Healthcare Professional Information:	Practice Name:	University of Florida
		Contact: Name:	Darcy Adin

			Phone: (614) 582-9798
			Other Phone: 3522948606
			Email: adind@ufl.edu
		Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States

Sender Information:	Name:	Darcy Adin	
	Address:	2015 SW 16th Ave 2015 SW 16th Avenue Gainesville Florida 32608 United States	
	Contact:	Phone:	6145829798
		Other Phone:	3522948606
		Email:	adind@ufl.edu
	Permission To Contact Sender:	Yes	
Preferred Method Of Contact:	Email		
Reported to Other Parties:	None		

Additional Documents:	
------------------------------	--

**Withheld in Full as B5,
B6**

**DOCUMENT
PRODUCED IN NATIVE**

From: Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>
To: Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David
Sent: 9/21/2018 6:02:40 PM
Subject: Boxer with cardiac disease FW: Blue Wilderness Senior Dog Food EON-366404
Attachments: 2055205-report.pdf; 2055205-attachments.zip

B6

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: PFR Event <pfreventcreation@fda.hhs.gov>
Sent: Friday, September 21, 2018 2:01 PM
To: Cleary, Michael * <Michael.Cleary@fda.hhs.gov>; HQ Pet Food Report Notification <HQPetFoodReportNotification@fda.hhs.gov>
Subject: Blue Wilderness Senior Dog Food: Steven Rosenthal - EON-366404

B6

A PFR Report has been received and PFR Event [EON-366404] has been created in the EON System.

A "PDF" report by name "2055205-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2055205-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-366404
ICSR #: 2055205
EON Title: PFR Event created for Blue Wilderness Senior Dog Food; 2055205

AE Date	08/28/2018	Number Fed/Exposed	
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Unknown

Breed	Boxer (German Boxer)		
Age	9 Years		
District Involved	PFR B6 DO		

Product information

Individual Case Safety Report Number: 2055205

Product Group: Pet Food

Product Name: Blue Wilderness Senior Dog Food

Description: Presented as an after hours consultation due to tachypnea and cough, previous diagnosis of prostate enlargement, cough and tachypnea over the past few weeks, eating a grain free diet, had some GI issues as a puppy, seems active and no collapse episodes, no episodes of collapse or weakness, no known family history of heart disease . T fast scan at PCDVM mild pericardial effusion

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Unknown

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Blue Wilderness Senior Dog Food		

Sender information

B6

USA

Owner information

B6

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-366404>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=383318>

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From: Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>
To: Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L
Sent: 8/20/2018 8:46:23 PM
Subject: Case from Tufts -FW: Acana Free Run Poultry dry: Lisa Freeman - EON-362878
Attachments: 2053969-report.pdf; 2053969-attachments.zip

Tufts case

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: PFR Event [mailto:pfreventcreation@fda.hhs.gov]
Sent: Monday, August 20, 2018 4:44 PM
To: Cleary, Michael * <Michael.Cleary@fda.hhs.gov>; HQ Pet Food Report Notification <HQPetFoodReportNotification@fda.hhs.gov>; B6
Subject: Acana Free Run Poultry dry: Lisa Freeman - EON-362878

A PFR Report has been received and PFR Event [EON-362878] has been created in the EON System.

A "PDF" report by name "2053969-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2053969-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-362878

ICSR #: 2053969

EON Title: PFR Event created for Acana Free Run Poultry dry; 2053969

AE Date	08/06/2018	Number Fed/Exposed	2
Best By Date		Number Reacted	1

Animal Species	Dog	Outcome to Date	Stable
Breed	Doberman Pinscher		
Age	B6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2053969

Product Group: Pet Food

Product Name: Acana Free Run Poultry dry

Description: Taken to RDVM for lameness. Dilated cardiomyopathy and CHF diagnosed 8/6/18. Started on med **B5**. We saw at Tufts 8/16/18. Clinically improved but still has significant DCM and CHF plus arrhythmia. We added **B5** fish oil, and taurine. WB taurine pending. Another dog in household (also a Doberman) was eating the same food but was echoed today and has no signs of DCM.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 2

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Acana Free Run Poultry dry		

Sender information

Lisa Freeman
 200 Westboro Rd
 North Grafton, MA 01536
 USA

Owner information

B6 USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-362878>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&>

=====
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Report Details - EON-362878

ICSR: 2053969
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-08-20 16:33:06 EDT

Reported Problem:
Problem Description: Taken to RDVM for lameness. Dilated cardiomyopathy and CHF diagnosed 8/6 /18. Started on meds [redacted B6] We saw at Tufts 8/16 /18. Clinically improved but still has significant DCM and CHF plus arrhythmia. We added [redacted B5] fish oil, and taurine. WB taurine pending. Another dog in household (also a Doberman) was eating the same food but was echoed today and has no signs of DCM.
Date Problem Started: 08/06/2018
Concurrent Medical Problem: Yes
Pre Existing Conditions: [redacted B6]
Outcome to Date: Stable

Product Information:
Product Name: Acana Free Run Poultry dry
Product Type: Pet Food
Lot Number:
UPC: 6499250125
Package Type: BAG
Package Size: 25 Pound
Possess Unopened Product: No
Possess Opened Product: Yes
Product Use Information:
Description: Fed to 2 Dobermans in household.
First Exposure Date: 09/01/2016
Last Exposure Date: 08/16/2018
Product Use Stopped After the Onset of the Adverse Event: Yes
Adverse Event Abate After Product Stop: Unknown
Product Use Started Again: No
Perceived Relatedness to Adverse Event: Probably related
Other Foods or Products Given to the Animal During This Time Period: Yes
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: [redacted B6]

	Type Of Species: Dog														
	Type Of Breed: Doberman Pinscher														
	Gender: Male														
	Reproductive Status: Neutered														
	Weight: 45 Kilogram														
	Age: B6 Years														
	Assessment of Prior Health: Excellent														
	Number of Animals Given the Product: 2														
	Number of Animals Reacted: 1														
	Owner Information: <table border="1"> <tr> <td>Owner Information provided:</td> <td>Yes</td> </tr> <tr> <td>Contact: Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> <tr> <td>Email:</td> <td></td> </tr> <tr> <td>Address:</td> <td>B6 United States</td> </tr> </table>	Owner Information provided:	Yes	Contact: Name:	B6	Phone:		Email:		Address:	B6 United States				
Owner Information provided:	Yes														
Contact: Name:	B6														
Phone:															
Email:															
Address:	B6 United States														
	Healthcare Professional Information: <table border="1"> <tr> <td>Practice Name:</td> <td>Tufts Cummings School of Veterinary Medicine</td> </tr> <tr> <td>Contact: Name:</td> <td>Lisa Freeman</td> </tr> <tr> <td>Phone:</td> <td>(508) 887-4523</td> </tr> <tr> <td>Email:</td> <td>lisa.freeman@tufts.edu</td> </tr> <tr> <td>Address:</td> <td>200 Westboro Rd North Grafton Massachusetts 01536 United States</td> </tr> </table>	Practice Name:	Tufts Cummings School of Veterinary Medicine	Contact: Name:	Lisa Freeman	Phone:	(508) 887-4523	Email:	lisa.freeman@tufts.edu	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States				
Practice Name:	Tufts Cummings School of Veterinary Medicine														
Contact: Name:	Lisa Freeman														
Phone:	(508) 887-4523														
Email:	lisa.freeman@tufts.edu														
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Sender Information:	<table border="1"> <tr> <td>Name:</td> <td>Lisa Freeman</td> </tr> <tr> <td>Address:</td> <td>200 Westboro Rd North Grafton Massachusetts 01536 United States</td> </tr> <tr> <td>Contact: Phone:</td> <td>5088874523</td> </tr> <tr> <td>Email:</td> <td>lisa.freeman@tufts.edu</td> </tr> <tr> <td>Permission To Contact Sender:</td> <td>Yes</td> </tr> <tr> <td>Preferred Method Of Contact:</td> <td>Email</td> </tr> <tr> <td>Reported to Other Parties:</td> <td>None</td> </tr> </table>	Name:	Lisa Freeman	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	Contact: Phone:	5088874523	Email:	lisa.freeman@tufts.edu	Permission To Contact Sender:	Yes	Preferred Method Of Contact:	Email	Reported to Other Parties:	None
Name:	Lisa Freeman														
Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States														
Contact: Phone:	5088874523														
Email:	lisa.freeman@tufts.edu														
Permission To Contact Sender:	Yes														
Preferred Method Of Contact:	Email														
Reported to Other Parties:	None														
Additional Documents:	<table border="1"> <tr> <td>Attachment:</td> <td>B6 cardio report B6 pmx.pdf</td> </tr> <tr> <td>Description:</td> <td>Cardio report</td> </tr> <tr> <td>Type:</td> <td>Sonogram</td> </tr> <tr> <td>Attachment:</td> <td>B6 discharge B6 pdf</td> </tr> <tr> <td>Description:</td> <td>Discharge report</td> </tr> <tr> <td>Type:</td> <td>Other</td> </tr> </table>	Attachment:	B6 cardio report B6 pmx.pdf	Description:	Cardio report	Type:	Sonogram	Attachment:	B6 discharge B6 pdf	Description:	Discharge report	Type:	Other		
Attachment:	B6 cardio report B6 pmx.pdf														
Description:	Cardio report														
Type:	Sonogram														
Attachment:	B6 discharge B6 pdf														
Description:	Discharge report														
Type:	Other														

Attachment: [B6] cxi rdvm [B6] brnx.pdf

Description: Chest rads from rdvm

Type: Radiographs

Attachment: [B6] profile [B6] brnx.pdf

Description: Chemistry profile

Type: Laboratory Report

B6

Patient ID: **B6**

B6 Canine
/ears Old Male (Neutered) Doberman
Black/Tan

Cardiology Appointment Report

Date: 8/16/2018

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B5

Cardiology Resident:

B6

Cardiology Technician:

B6

Presenting Complaint:

Work up of DCM/CHF

Concurrent Diseases:

B6

General Medical History:

Owner has had him for 5 years. Was obese and behavioral issues. Owner has worked well with the behavior issues. Owner has noticed that he used to be energetic and play a lot, and now he is not, however, after starting medications, is slightly better.

Diet and Supplements:

Acana

Cardiovascular History:

Prior CHF diagnosis?	YES
Prior heart murmur?	YES
Prior ATE?	NO
Prior arrhythmia?	NO
Monitoring respiratory rate and effort at home?	YES
Cough?	YES (hacking, throat clearing)
Shortness of breath or difficulty breathing?	YES

Syncope or collapse?
Sudden onset lameness?
Exercise intolerance?

NO
YES (LFL)
YES

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B5

Muscle condition:

- | | |
|--|--|
| <input type="checkbox"/> Normal | <input type="checkbox"/> Moderate cachexia |
| <input checked="" type="checkbox"/> Mild muscle loss | <input type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|---|--------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input checked="" type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Murmur location/description: systolic; left apical systolic

Jugular vein:

- | | |
|--|--|
| <input type="checkbox"/> Bottom 1/3 of the neck | <input type="checkbox"/> 1/2 way up the neck |
| <input checked="" type="checkbox"/> Middle 1/3 of the neck | <input type="checkbox"/> Top 2/3 of the neck |

Arterial pulses:

- | | |
|--|---|
| <input type="checkbox"/> Weak | <input type="checkbox"/> Bounding |
| <input checked="" type="checkbox"/> Fair | <input type="checkbox"/> Pulse deficits |
| <input type="checkbox"/> Good | <input type="checkbox"/> Pulsus paradoxus |
| <input type="checkbox"/> Strong | <input type="checkbox"/> Other: |

Arrhythmia:

- | | |
|---|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Bradycardia |
| <input type="checkbox"/> Sinus arrhythmia | <input checked="" type="checkbox"/> Tachycardia |

Premature beats

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

murmur, shortness of breath, lameness, historical ascites and pleural effusion)

Differential Diagnoses:

DCM, DMVD, CHF secondary to DCM

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests: Taurine level

Echocardiogram Findings:

General/2-D findings:

Decreased LV thicknesses with dilated LV cavity size. Decreased contractile function. Moderately enlarged LA. Mild amount of pleural effusion. Mild thickening of the MV and TV. No ascites.

B6

Assessment and recommendations:

DCM with signs of active CHF, although he is better than prior to starting medication (no more ascites). However, given that there is still some pleural effusion, the diuretic dose that the patient is on right now is not sufficient.

B6

B6

in 2 weeks. Recheck echocardiogram in 3-4 months.

Final Diagnosis:

DCM with CHF

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM Classification:

- A
- B1
- B2
- C
- D

2D

SA LA

Ao Diam

SA LA / Ao Diam

IVSd

LVIDd

LVPWd

EDV(Teich)

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LVIDs

LVPWs

ESV(Teich)

EF(Teich)

%FS

SV(Teich)

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LVEDV MOD A4C

LVLs A4C

LVESV MOD A4C

LVEF MOD A4C

SV MOD A4C

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Doppler

MV E Vel
MV DecT
MVA Vel
MV E/A Ratio
PV Vmax
PV maxPG
AV Vmax
AV maxPG

B6

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m/s

m/s
mmHg
m/s
mmHg

Discharge Instructions

Patient

Name: B6

Species: Canine

Black/Tan Male (Neutered) Doberman

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Admit Date: B6 11:40:18 AM

Discharge Date: B6

Diagnoses: Biventricular congestive heart failure secondary to dilated cardiomyopathy (DCM)

Case summary:

B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. B6 had occasional ventricular premature beats (VPCs) seen today, but not enough right now to warrant additional therapy. We do however, want to keep monitoring this.

The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs and belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

Monitoring at home:

- We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 if difficulty breathing is not improved by within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.

- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Medications:

B6

Diet suggestions:

We would like to change **B6** diet to a low sodium diet. A few diet options would be:

Dry Food:

Royal Canin Early Cardiac diet

Purina proplan bright mind small breed formula

Purina proplan adult weight management (this does not have low calories in spite of the name of the food)

Canned Food:

Hills Science diet adult beef and barley entree

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable.

However, if you find that **B6** is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks for bloodwork which can be done at your primary care veterinarian.

A recheck has been scheduled for B6 on

Tuesday, November 20, 2018 at 11:00am with B6

Thank you for entrusting us with B6 care. Please contact our Cardiology liaison at (508)-887-4626 or email us at cardiowet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: B6

Owner: B6

Discharge Instructions

Client:
 Veterinarian:
 Patient ID:
 Visit ID:

B6

Patient: **B6**
 Species: Canine
 Breed: Doberman
 Sex: Male (Neutered)
 Age: **B6** Years Old

Lab Results Report

Chemistry 21 (Cobas)		B6	29:21 PM	Accession ID: B6
Test	Results	Reference Range	Units	
GLUCOSE	B6	67 - 135	mg/dL	
UREA		8 - 30	mg/dL	
CREATININE		0.6 - 2	mg/dL	
PHOSPHORUS		2.6 - 7.2	mg/dL	
CALCIUM2		9.4 - 11.3	mg/dL	
T. PROTEIN		5.5 - 7.8	g/dL	
ALBUMIN		2.8 - 4	g/dL	
GLOBULINS		2.3 - 4.2	g/dL	
A/G RATIO		0.7 - 1.6		
SODIUM		140 - 150	mEq/L	
CHLORIDE		106 - 116	mEq/L	
POTASSIUM		3.7 - 5.4	mEq/L	
NA/K		29 - 40		
T BILIRUBIN		0.1 - 0.3	mg/dL	
D.BILIRUBIN		0 - 0.1	mg/dL	
I BILIRUBIN		0 - 0.2	mg/dL	
ALK PHOS		12 - 127	U/L	
ALT		14 - 86	U/L	
AST		9 - 54	U/L	
CHOLESTEROL		82 - 355	mg/dL	
OSMOLALITY (CALCULATED)	291 - 315	mmol/L		
COMMENTS (CHEMISTRY)	0 - 0			

Cummings

Veterinary Medical Center

AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient ID:

Canine

Years Old Male (Neutered) Caucasian
Shepherd Dog
Gray/Black

Cardiology Appointment Report

Date: 6/12/2018

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

Intern:

Cardiology Technician:

Student:

Presenting Complaint:

Recheck DCM and CHF from 5/29/18

Concurrent Diseases:

None

General Medical History:

Dx with murmur at approximately 2 years of age

Diet and Supplements:

Royal Canin large breed

Taurine (250 mg tablets) - 4 tablets (1000 mg) PO SID

Cardiovascular History:

Prior CHF diagnosis? Yes

Prior ATE? None

Prior arrhythmia? None

Cough? None

Shortness of breath or difficulty breathing? None
Syncope or collapse? None
Sudden onset lameness? None
Exercise intolerance? Normal per owner
Prior heart murmur? Yes

Current Medications Pertinent to CV System:

B6

Muscle condition:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Moderate cachexia |
| <input type="checkbox"/> Mild muscle loss | <input type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|--|--------------------------------|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Murmur location/description: No murmur ausculted despite Hx, difficult auscultation due to panting

Jugular vein:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Bottom 1/3 of neck | <input type="checkbox"/> Top 2/3 rd of neck |
| <input type="checkbox"/> Middle 1/3 of neck | |

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic - panting
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

DCM
CHF - controlled with medications

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Blood Pressure (mmHg):

B6

Assessment and recommendations:

Previous echocardiogram on 5/29/18 revealed DCM with L-CHF. Serum taurine level was borderline or mildly decreased; whole blood levels of taurine within normal limits. Sample of B6 grain free dog food and label collected from owner today for submission to FDA. Patient currently receiving taurine supplementation; this should be continued if tolerated by B6. Clinically appears stable on current medications. Patient has been switched to Royal Canin Large Breed diet. Patient panting during examination but no apparent increased respiratory effort. Recommend B6

B6

Final Diagnosis:

DCM with CHF (currently controlled on medications)

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|-----------------------------|--|
| <input type="checkbox"/> Ia | <input type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input checked="" type="checkbox"/> IIIb |
| <input type="checkbox"/> II | |

ACVIM Classification:

- | | |
|-----------------------------|---------------------------------------|
| <input type="checkbox"/> A | <input checked="" type="checkbox"/> C |
| <input type="checkbox"/> B1 | <input type="checkbox"/> D |
| <input type="checkbox"/> B2 | |

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY
Cardiology Liaison: 508-887-4696

B6

Patient ID: **B6**

B6 Canine

B6 3 Years Old Male (Neutered)

Caucasian Shepherd Dog

Gray/Black BW: Weight (kg) 62.00

Cardiology Inpatient

Date: 5/29/2018

Weight: Weight (kg) 60.30

Requesting Clinician: **B6** (Emergency & Critical Care Resident)

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Presenting complaint and important concurrent diseases: Increased respiratory rate and effort for 1 day + recent history of cough (~2 wks). No exercise intolerance noted.

Current medications and doses:

B6

Key indication for consultation: Increased respiratory rate/effort + dilated LV noted on TFAST.

Questions to be answered from the Consult:

Differentiate cardiac vs respiratory cause of cough

Assess cardiac structure and function

STOP* - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- | | |
|--|--|
| <input type="checkbox"/> Normal | <input type="checkbox"/> Moderate cachexia |
| <input checked="" type="checkbox"/> Mild muscle loss | <input type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam

Murmur Grade:

- | | |
|--|--------------------------------|
| <input checked="" type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input type="checkbox"/> III/VI | |

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck

- Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent S3

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly

- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

Assessment and recommendations:

Echocardiogram reveals DCM with L-CHF. Patient is on a grain-free diet. Submitted taurine levels. Will

submit diet and label to FDA. There also may or may not have a high VSD- may have covered over and no longer be patent; does not appear to be problematic at this time.

Treatment plan:

B6

Final Diagnosis: DCM with CHF

Heart Failure Classification Score:

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM CHF Classification:

- A
- B1
- B2
- C
- D

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

EPSS

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

IVSsN

LVIDsN

LVPWsN

Ao Diam N

LA Diam N

2D

SA LA

Ao Diam

B6

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{1.35 - 1.73} !

{0.33 - 0.53} !

{0.43 - 0.71} !

{0.79 - 1.14} !

{0.53 - 0.78} !

{0.68 - 0.89} !

{0.64 - 0.90} !

OM

OM

SA LA / Ao Diam
IVSd
LVIDd
LVPWd
EDV(Teich)
IVSs
LVIDs
LVPWs
ESV(Teich)
EF(Teich)
%FS
SV(Teich)

B6

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ml

Discharge Instructions

Patient

Name: B6

Species: Canine

Gray/Black Male (Neutered) Caucasian
Shepherd Dog

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Resident: B6

Student: B6

Cardiology Technician:

B6

Admit Date: B6 5:55:16 PM

Discharge Date: B6

Diagnoses:

1. Dilated cardiomyopathy (DCM)
2. Congestive Heart Failure (CHF)

Diagnostic test results and findings:

Chest radiograph (x-ray) findings: The heart is enlarged and there is fluid in the lungs

Echocardiogram findings: The left ventricle of the heart is enlarged and there is a leak at the mitral valve

ECG findings: Occasional abnormal (ventricular) beats

Bloodwork: unremarkable bloodwork with no pre-existing elevations in kidney values

Case summary:

B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and require medical management. The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make B6 comfortable and have him breathing easier. As we discussed, this disease carries a

prognosis of 3-6 months given that it has progressed to the point of causing congestive heart failure. [B6] will need to remain on cardiac medications for the rest of his life. As long as we can control his congestive heart failure with medications, he can have a good quality of life for his remaining time.

Monitoring at home:

- o We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. We will use breathing rate and effort to make adjustments to drug doses.
- o In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- o An increase in breathing rate or effort will usually mean that you should give an extra dose of [B6]. Please do not hesitate to do so. If difficulty breathing is not improved by within 30-60 minutes after giving extra [B6] then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.
- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24-hours/day.

Recommended Medications:

B6

Diet suggestions:

We suggest that you begin feeding [B6] a heart-safe food that is not grain-free, as a link has been found between some grain-free diets and the development of DCM. For that reason, a Taurine level has been submitted for [B6] and you have permitted us to submit his food to the FDA for further testing. While [B6] should be switched to a diet that is also appropriate for heart disease, we would recommend switching your other dogs at home to a different diet as well. We suggest selecting a food made by Hill's, Purina, or Royal Canin, as these are trusted brands.

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give

pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/diet/>).

While it is generally advisable to switch diets in a slow gradual manner, we would like you to switch [B5, B6] food immediately, as we are concerned that continuing his current grain-free diet could worsen his heart condition.

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, slightly longer walks are acceptable. However, if you find that [B5] is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks. We have scheduled an appointment for you on June 12, 2018 at 11:00am. If this appointment does not work for you please call or email our liaison [B6] as soon as possible to reschedule. At this visit we will check your dog's breathing effort and heart function, do a blood test to recheck kidney values, and probably recheck a blood pressure. A recheck echocardiogram is recommended in 3-4 months.

Thank you for entrusting us with [B6] care. Please contact our Cardiology liaison, [B6] or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case [B6]

Owner [B6]

Discharge Instructions

Discharge Instructions

Patient

Name: B6

Species: Canine

Gray/Black Male (Neutered) Caucasian
Shepherd Dog

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Small Animal Medicine Intern: B6

Student: B6

Cardiology Technician:

B6

Admit Date: 6/12/2018 10:50:31 AM

Discharge Date: 6/12/2018

Thank you for bringing B6 in today for a recheck of his dilated cardiomyopathy (DCM) and congestive heart failure (CHF). He was diagnosed with DCM and CHF while at Tufts Veterinary Hospital on 5/28/18. Today we performed a physical examination to listen to his heart and watch his breathing. We also retested his blood pressure and bloodwork today to evaluate how he is tolerating the current doses of medications and make any necessary adjustments.

Clinical Findings:

B6 recheck of blood pressure showed that his blood pressure was mildly decreased. His bloodwork showed that his kidney values have increased slightly since his previous visit; these values are currently at the high end of normal. We did not hear any arrhythmias today nor any heart murmurs. He was panting throughout his examination thus making it difficult to assess his respiratory effort. He did not appear to be in any respiratory distress today.

Monitoring at home:

- We would like you to monitor B6 breathing rate and effort at home, ideally during sleep or at a time of rest. We will use breathing rate and effort to make adjustments to drug doses.
- In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 50 B6. Please do not hesitate to do so. If difficulty breathing is not improved by within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that your dog be

evaluated by an emergency clinic.

- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

Diet Suggestions:

Continue to transition B6 over to the Royal Canin giant breed dog food. We also recommend switching your other dogs to a different diet as well (not grain free).

We have recommended that B6 be fed a heart-safe food that is not grain-free as a link has been found between some grain free diets and the development of DCM. We previously submitted a Taurine level for B6 his plasma level of Taurine was slightly below normal level. Today you provided a bag of his dog food such that we can submit his food to the FDA for further testing. Although his current diet has taurine, you may continue to supplement the taurine at this time.

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable- a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/diet/>).

Exercise Recommendations:

As it appears that B6 heart failure is better controlled, slightly longer walks on a leash are acceptable. However, if you find that B6 is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart failure.

Medications:

B6

Recheck Visits:

1. Please schedule a recheck visit in 3-4 weeks as a Tufts Cardiology technician appointment or with your primary care veterinarian to have a recheck biochemistry profile performed. This is to ensure that [B6] is tolerating the increased [B6] dose.

2. We have scheduled a recheck visit for September 4, 2018 at 1:00pm with [B6]. If you need to reschedule this appointment, please contact Tufts Cardiac Service as soon as possible. At this visit we will want to check breathing effort and heart function, and recheck an echocardiogram. If you move prior to this visit, please schedule an appointment with a cardiologist in [B6] at the beginning of September.

If you are finding that [B6] has increased respiratory rate and effort at home or if you have concerns with his exercise intolerance prior to that recheck appointment, please schedule an appointment sooner.

Tufts Emergency Service is available 24 hours a day should [B6] ever show increased weakness or lethargy, or if you have concerns that he is having increased difficulty breathing.

Thank you for entrusting us with [B6] care. He is such a sweet dog and pleasure to work with! Please contact our Cardiology liaison, [B6] or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information
<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

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Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case [B6]

Owner [B6]

Discharge Instructions

Client:
 Veterinarian:
 Patient ID:
 Visit ID:

Patient:
 Species: Canine
 Breed: Caucasian Shepherd Dog
 Sex: Male (Neutered)
 Age: Years Old

Lab Results Report

Chemistry 21 (Cobas) 6/12/2018 12:05:21 PM **Accession ID: B6**

Test	Results	Reference Range	Units
GLUCOSE	B6	67 - 135	mg/dL
UREA		8 - 30	mg/dL
CREATININE		0.6 - 2	mg/dL
PHOSPHORUS		2.6 - 7.2	mg/dL
CALCIUM2		9.4 - 11.3	mg/dL
T. PROTEIN		5.5 - 7.8	g/dL
ALBUMIN		2.8 - 4	g/dL
GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)	291 - 315	mmol/L	
COMMENTS (CHEMISTRY)	0 - 0		

Moderate hemolysis; Slight lipemia

Radiology Request & Report

Patient

Name: B6

Species: Canine

Gray/Black Male (Neutered)

Caucasian Shepherd Dog

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Date of request: 5/29/2018

Attending Clinician: B6 (Emergency & Critical Care Resident)

Student:

Date of exam: 05/29/2018

Patient Location: Ward/Cage:

ICU R1

Weight (kg) 62.00

- Inpatient
- Outpatient Time:
- Waiting
- Emergency

Sedation

- BAG
- OBAG
- 1/2 dose OBAG
- DexDomitor/Butorphanol
- Anesthesia to sedate/anesthetize

Examination Desired: DV and RLAT

Presenting Complaint and Clinical Questions you wish to answer:

Emergency

Pertinent History:

Gyo MC K9 presenting for 2wk hx of cough, presented for increased RR/RE. B6

B6

Findings:

B6

Conclusions:

- Moderate left-sided cardiomegaly with left atrial enlargement, venous distension and cardiogenic pulmonary edema consistent with left-sided heart failure. Echocardiogram is recommended for further evaluation. Follow up radiographs are recommended to monitor response to treatment.

Radiologists

Primary:

Reviewing:

Dates

Reported: 5/29/18

Finalized:

From: Jones, Jennifer L </O=FDA/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=JENNIFER.JONESAA8>
To: 'Reimschuessel, Renate (Renate.Reimschuessel@fda.hhs.gov)'
Sent: 11/1/2017 5:25:22 PM
Subject: Final reports for signature
Attachments: 800.211-FinalReport; **B6** pdf; 800.216-FinalReport; **B6** pdf; 800.217-FinalReport-
B6 pdf; 800.218-FinalReport; **B6** pdf; 800.220-FinalReport; **B6** pdf

Jennifer L. A. Jones, DVM

Veterinary Medical Officer
U.S. Food & Drug Administration
Center for Veterinary Medicine
Office of Research
Veterinary Laboratory Investigation and Response Network (Vet-LIRN)
8401 Muirkirk Road, G704
Laurel, Maryland 20708
new tel: 240-402-5421
fax: 301-210-4685
e-mail: jennifer.jones@fda.hhs.gov
Web: <http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm>



From: Carey, Lauren </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=F0226BD682844FA2B71EA3750D4FCB82-LAUREN.CARE>
To: Rotstein, David; Norris, Anne; Hartogensis, Martine; Jones, Jennifer L; Burkholder, William; Reimschuessel, Renate
CC: DeLancey, Siobhan
Sent: 8/13/2018 7:04:20 PM
Subject: RE: Food Safety News Query: DCM follow-up

I think that's very good, Anne. I support your approach. J

From: Rotstein, David
Sent: Monday, August 13, 2018 3:02 PM
To: Norris, Anne <Anne.Norris@fda.hhs.gov>; Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>
Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>
Subject: RE: Food Safety News Query: DCM follow-up

That will work!

David Rotstein, DVM, MPVM, Dipl. ACVP
CVM Vet-LIRN Liaison
CVM OSC/DC/CERT
7519 Standish Place
240-506-6763 (BB)



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From: Norris, Anne
Sent: Monday, August 13, 2018 3:01 PM
To: Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>
Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>
Subject: RE: Food Safety News Query: DCM follow-up

Went with a less is more approach. Please advise if you see anything you'd recommend changing.

Thanks,
Anne

1. Approximately how many additional reports of possible canine (or feline) DCM has FDA received since the initial investigation notice of July 12, 2018

B5

From: Palmer, Lee Anne
Sent: Monday, August 13, 2018 10:55 AM
To: Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Norris, Anne <Anne.Norris@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>
Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>
Subject: RE: Food Safety News Query: DCM follow-up

Hi -- just a few additional comments.

From: Hartogensis, Martine
Sent: Monday, August 13, 2018 10:51 AM
To: Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Norris, Anne <Anne.Norris@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>
Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>
Subject: RE: Food Safety News Query: DCM follow-up

Added to #3.

From: Carey, Lauren
Sent: Monday, August 13, 2018 10:28 AM
To: Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Norris, Anne <Anne.Norris@fda.hhs.gov>; Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>
Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>
Subject: RE: Food Safety News Query: DCM follow-up

My comments below.

From: Jones, Jennifer L
Sent: Monday, August 13, 2018 9:45 AM
To: Norris, Anne <Anne.Norris@fda.hhs.gov>; Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne

<LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>

Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>

Subject: RE: Food Safety News Query: DCM follow-up

My comments below.

Jennifer Jones, DVM
Veterinary Medical Officer
Tel: 240-402-5421



From: Norris, Anne

Sent: Monday, August 13, 2018 9:34 AM

To: Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Burkholder, William <William.Burkholder@fda.hhs.gov>; Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Rotstein, David <David.Rotstein@fda.hhs.gov>; Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>

Cc: DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>

Subject: Food Safety News Query: DCM follow-up

Good morning!

B5

B5

Thanks,
Anne

Anne Norris
Strategic Initiatives

Office of the Director
Center for Veterinary Medicine
U.S. Food & Drug Administration
O: 240-402-0132
M: 240-704-0579
Anne.Norris@fda.hhs.gov



From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification
Sent: 2/24/2019 9:32:37 PM
Subject: Poulin Pro Form Lamb and Rice Adult Maintenance Dry: Lisa Freeman - EON-380706
Attachments: 2063113-report.pdf; 2063113-attachments.zip

B6

A PFR Report has been received and PFR Event [EON-380706] has been created in the EON System.

A "PDF" report by name "2063113-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2063113-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380706

ICSR #: 2063113

EON Title: PFR Event created for Poulin Pro Form Lamb and Rice Adult Maintenance Dry; 2063113

AE Date	12/22/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Irish Wolfhound		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063113

Product Group: Pet Food

Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry

Description: Had pneumonia in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to

Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Poulin Pro Form Lamb and Rice Adult Maintenance Dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information



To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-380706>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=397715>

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Report Details - EON-380706

ICSR: 2063113
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-02-24 16:24:11 EST

Reported Problem:

Problem Description: Had pneumonia in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.

Date Problem Started: 12/22/2018

Concurrent Medical Problem: Yes

Pre Existing Conditions: Pneumonia Sept and Dec 2018

Outcome to Date: Stable

Product Information:

Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry

Product Type: Pet Food

Lot Number:

Package Type: BAG

Product Use Information: **Description:** Please see diet history form for more details

Manufacturer /Distributor Information:

Purchase Location Information:

Animal Information:

Name: B6

Type Of Species: Dog

Type Of Breed: Irish Wolfhound

Gender: Female

Reproductive Status: Intact

Pregnancy Status: Not Pregnant

Lactation Status: Not lactating

Weight: 60.5 Kilogram

Age: 6 Years

Assessment of Prior Health: Good

Number of Animals Given the Product: 1

Number of Animals Reacted: 1

Owner Information: **Owner Information provided:** Yes

Contact: **Name:** B6

Phone: B6

Email: B6

Address: B6

		B6 United States
Healthcare Professional Information:	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Contact Name:	Lisa Freeman
	Phone:	(508) 887-4523
	Email:	lisa.freeman@tufts.edu
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact Phone:	5088874523
	Contact Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	cbc and profile.pdf
	Description:	Will send by email
	Type:	Medical Records

From: PFR Event <pfreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 2/26/2019 12:21:16 AM
Subject: Wellness Complete Health Fish and Sweet Potato dry: Lisa Freeman - EON-380848
Attachments: 2063189-report.pdf; 2063189-attachments.zip

A PFR Report has been received and PFR Event [EON-380848] has been created in the EON System.

A "PDF" report by name "2063189-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2063189-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380848

ICSR #: 2063189

EON Title: PFR Event created for Wellness Complete Health Fish and Sweet Potato dry; 2063189

AE Date	02/22/2019	Number Fed/Exposed	2
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Boxer (German Boxer)		
Age	[B6] Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063189

Product Group: Pet Food

Product Name: Wellness Complete Health Fish and Sweet Potato dry

Description: Arrhythmia dx at [B6] July 2018 (had been "wheezing") Started wheezing again 1 week before admission. Diagnosed with DCM, CHF, and ventricular tachycardia 2/22/19 Was fed Wellness diet until 6/2018 then changed to Royal Canin Boxer (current diet). Taurine and troponin pending. Owner has another Boxer eating same diets - has not been screened Enrolled in DCM study. Changing to different diet (although Boxer diet

is probably fine) and will recheck in 7 days and 3 months.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 2

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Wellness Complete Health Fish and Sweet Potato dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-380848>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=397857>

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Report Details - EON-380848

ICSR: 2063189
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-02-25 19:07:14 EST

Reported Problem:
Problem Description: Arrhythmia dx at [B6] July 2018 (had been "wheezing") Started wheezing again 1 week before admission. Diagnosed with DCM, CHF, and ventricular tachycardia 2/22/19 Was fed Wellness diet until 6/2018 then changed to Royal Canin Boxer (current diet). Taurine and troponin pending. Owner has another Boxer eating same diets - has not been screened Enrolled in DCM study. Changing to different diet (although Boxer diet is probably fine) and will recheck in 7 days and 3 months.
Date Problem Started: 02/22/2019
Concurrent Medical Problem: No
Outcome to Date: Stable

Product Information:
Product Name: Wellness Complete Health Fish and Sweet Potato dry
Product Type: Pet Food
Lot Number:
Product Use Information: **Description:** Fed this diet 2012 - June, 2018 Currently, fed Royal Canin Boxer See diet history
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: [B6]
Type Of Species: Dog
Type Of Breed: Boxer (German Boxer)
Gender: Male
Reproductive Status: Neutered
Weight: 23.3 Kilogram
Age: [B6] Years
Number of Animals Given the Product: 2
Number of Animals Reacted: 1
Owner Information: **Owner Information provided:** Yes
Contact: **Name:** [B6]
Phone: [B6]
Email: [B6]
Address: [B6]
 United States
Healthcare Professional Information: **Practice Name:** Tufts Cummings School of Veterinary Medicine
Contact: **Name:** Lisa Freeman
Phone: (508) 887-4523
Email: lisa.freeman@tufts.edu
Address:

200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Sender Information:

Name:	Lisa Freeman
Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Contact:	Phone: 5088874523 Email: lisa.freeman@tufts.edu
Permission To Contact Sender:	Yes
Preferred Method Of Contact:	Email

Additional Documents:

Attachment:	rpt_medical_record_preview_small.pdf
Description:	Med records
Type:	Medical Records

From: PFR Event <pfreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; **B6**
Sent: 9/7/2018 9:20:34 PM
Subject: Honest Kitchen Whole Grain Turkey: Lisa Freeman - EON-364577
Attachments: 2054750-report.pdf; 2054750-attachments.zip

A PFR Report has been received and PFR Event [EON-364577] has been created in the EON System.

A "PDF" report by name "2054750-report pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2054750-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-364577

ICSR #: 2054750

EON Title: PFR Event created for Honest Kitchen Whole Grain Turkey Beef or CHicken, Ziwi Peak (recently started); 2054750

AE Date	09/05/2018	Number Fed/Exposed	
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Retriever - Golden		
Age	B6 years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2054750

Product Group: Pet Food

Product Name: Honest Kitchen Whole Grain Turkey, Beef, or CHicken, Ziwi Peak (recently started)

Description: Not true DCM but reduced contractility; **B6**aurine (whole blood)

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Ziwi Peak (recently started)		
Honest Kitchen Whole Grain Turkey, Beef, or CHicken		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-364577>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=381311>

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Report Details - EON-364577

ICSR: 2054750
Type Of Submission: Initial
Report Version: FPSR.FDA.PETF.V.V1
Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type: Voluntary
Report Submission Date: 2018-09-07 17:16:09 EDT

Reported Problem:
Problem Description: Not true DCM but reduced contractility. **B6** taurine (whole blood)
Date Problem Started: 09/05/2018
Concurrent Medical Problem: No
Outcome to Date: Stable

Product Information:
Product Name: Ziwi Peak (recently started)
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information:
Manufacturer /Distributor Information:
Purchase Location Information:
Product Name: Honest Kitchen Whole Grain Turkey, Beef, or CHicken
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information:
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: **B6**
Type Of Species: Dog
Type Of Breed: Retriever - Golden
Gender: Male
Reproductive Status: Neutered
Weight: 31.5 Kilogram
Age: **B6** years
Assessment of Prior Health: Excellent
Number of Animals Reacted: 1
Owner Information: **Owner Information provided:** Yes
Contact: **Name:** **B6**
Phone: **B6**
Address: **B6**
United States

	Healthcare Professional Information:	<table border="1"> <tr> <td>Practice Name:</td> <td>Tufts Cummings School of Veterinary Medicine</td> </tr> <tr> <td>Contact:</td> <td> <table border="1"> <tr> <td>Name:</td> <td>Lisa Freeman</td> </tr> <tr> <td>Phone:</td> <td>(508) 887-4523</td> </tr> <tr> <td>Email:</td> <td>lisa.freeman@tufts.edu</td> </tr> </table> </td> </tr> <tr> <td>Address:</td> <td>200 Westboro Rd North Grafton Massachusetts 01536 United States</td> </tr> <tr> <td>Practice Name:</td> <td>Tufts Cummings School of Veterinary Medicine</td> </tr> <tr> <td>Contact:</td> <td> <table border="1"> <tr> <td>Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> </table> </td> </tr> <tr> <td>Permission to Release Records to FDA:</td> <td>Yes</td> </tr> </table>	Practice Name:	Tufts Cummings School of Veterinary Medicine	Contact:	<table border="1"> <tr> <td>Name:</td> <td>Lisa Freeman</td> </tr> <tr> <td>Phone:</td> <td>(508) 887-4523</td> </tr> <tr> <td>Email:</td> <td>lisa.freeman@tufts.edu</td> </tr> </table>	Name:	Lisa Freeman	Phone:	(508) 887-4523	Email:	lisa.freeman@tufts.edu	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	Practice Name:	Tufts Cummings School of Veterinary Medicine	Contact:	<table border="1"> <tr> <td>Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> </table>	Name:	B6	Phone:		Permission to Release Records to FDA:	Yes		
Practice Name:	Tufts Cummings School of Veterinary Medicine																									
Contact:	<table border="1"> <tr> <td>Name:</td> <td>Lisa Freeman</td> </tr> <tr> <td>Phone:</td> <td>(508) 887-4523</td> </tr> <tr> <td>Email:</td> <td>lisa.freeman@tufts.edu</td> </tr> </table>	Name:	Lisa Freeman	Phone:	(508) 887-4523	Email:	lisa.freeman@tufts.edu																			
Name:	Lisa Freeman																									
Phone:	(508) 887-4523																									
Email:	lisa.freeman@tufts.edu																									
Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States																									
Practice Name:	Tufts Cummings School of Veterinary Medicine																									
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Phone:																										
Permission to Release Records to FDA:	Yes																									
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Discharge Instructions

Patient

Name: B6

Species: Canine

Gold Male (Neutered) Golden Retriever

Birthdate: B6

Owner

Name: B6

Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Date: 9/5/2018

Diagnoses:

Mild reduced contractile function, normal cardiac size

Low blood taurine levels

Clinical Findings: Thank you for bringing B6 in for evaluation of his heart. His heart is normal in size, but his contractile function is not quite as vigorous as some dogs. This could be a variation of normal for him, but it is also possible that it could be related to low taurine. We have submitted an NTproBNP test to gather more information about B6 heart health. We also submitted a total T4 to assess B6 thyroid on his current level of medication. We will call you with these results within the next few days.

Monitoring at Home: Please watch for any exercise intolerance, weakness, or collapse.

Diet Suggestions: We recommend a change in B6 diet. If you would like to pursue a mix of home cooking and new kibble we recommend scheduling a Nutrition consultation with Dr Lisa Freeman. If you would like to feed primarily home cooked diet then please schedule an appointment with B6

Exercise Recommendations: B6 can have normal exercise.

Recommended Medications:

Taurine supplement: Give 1000mg by mouth twice daily

We recommend Swanson, NOW, or GNC brands.

Recheck Visits: We will want to do a recheck echocardiogram in around 6-12 months, but we will decide based on his NTproBNP results.

Thank you for entrusting us with B6 care. He is such a good boy! Please contact our Cardiology liaison at

(508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case:

Owner:

Discharge Instructions

B6

Cardiology Appointment Report

Date: 9/5/2018

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Presenting Complaint: Low taurine level B6 On facebook page with UC Davis. Dr Stern recommended getting an echo. Tested positive for lyme but is not symptomatic. Has been treated in the past. Has noticed in the last year that he gets out of the pool sooner than usual. Slowing down on hikes, but no breathing difficulties or coughing. May breathe faster than other dog (34 bpm).

Owner sent out whole blood taurine test after reading about low taurine on line.

Concurrent Diseases:

B6

B6

Diet and Supplements:

ZiwePeak grain free, air dried; home cooked. Switched to honest kitchen about 3 years ago. Bravo canned rotates food, got treats with grains. Sardines.

Cardiovascular History:

Prior CHF diagnosis? no

Prior heart murmur? no

Prior ATE? no

Prior arrhythmia? no

Monitoring respiratory rate and effort at home? no

Cough? after swimming

Shortness of breath or difficulty breathing? no

Syncope or collapse? no

Sudden onset lameness? no

Exercise intolerance? starting last year started leaving the pool sooner, coughs to clear throat

Current Medications Pertinent to CV System:

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam:

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Jugular vein:

- Bottom 1/3 of the neck
- Middle 1/3 of the neck
- 1/2 way up the neck
- Top 2/3 of the neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

Low whole blood taurine, on grain free diet

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests

Echocardiogram Findings:

B6

Assessment and recommendations:

Echocardiogram reveals mildly reduced contractile function with no evidence of chamber enlargement or wall thinning. It is possible that these mild changes are related to taurine deficiency/diet, but other mild cardiomyopathy, age related change, or variation for this individual cannot be ruled out. An NTproBNP level was submitted for additional information. Patient is receiving thyroid supplementation and T4 has not been checked recently, so T4 was also submitted today (6 hours post pill). Recommend taurine

supplementation and diet change. Owner will likely pursue nutrition consultation for diet options. Recheck echo in ~6 months, or sooner if clinical signs occur such as increased RR/RE, cough, collapse, or exercise intolerance, or if NTproBNP is markedly elevated.

Final Diagnosis:

Mildly reduced LV contractile function

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

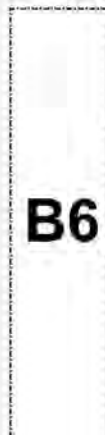
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Ao Diam

LA Diam

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M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

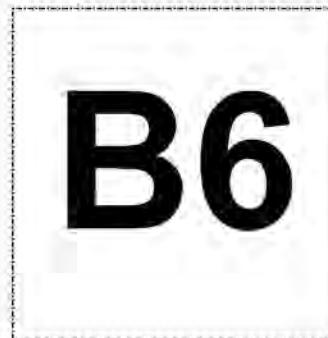
IVSsN

LVIDsN

LVPWsN

Ao Diam N

LA Diam N



2D

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Ao Diam

SA LA / Ao Diam

IVSd

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LVEDV MOD A2C
LVIs A2C
LVESV MOD A2C
LVEF MOD A2C
SV MOD A2C
LVID LAX
LVAd LAX
LVEDV A-L LAX
LVEDV MOD LAX
LVIs LAX
LVAs LAX
LVESV A-L LAX
LVESV MOD LAX
HR
EF A-L LAX
LVEF MOD LAX
SV A-L LAX
SV MOD LAX
CO A-L LAX
CO MOD LAX

Doppler
MV E Vel
MV DecT
MV A Vel
MV E/A Ratio
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From: PFR Event <pfreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent: 9/12/2018 12:08:39 PM
Subject: Nature's Variety Instinct Raw Boost Chicken dry: Lisa Freeman - EON-365022
Attachments: 2054861-report.pdf; 2054861-attachments.zip

A PFR Report has been received and PFR Event [EON-365022] has been created in the EON System.

A "PDF" report by name "2054861-report pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2054861-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-365022

ICSR #: 2054861

EON Title: PFR Event created for Nature's Variety Instinct Raw Boost Chicken dry, Rachel Ray Nutrish Chicken and Veggie dry; 2054861

AE Date	02/20/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Great Dane		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2054861

Product Group: Pet Food

Product Name: Nature's Variety Instinct Raw Boost Chicken dry, Rachel Ray Nutrish Chicken and Veggie dry

Description: DCM and CHF. Owner was feeding Natures Variety until ~1/8/18 then switched to Rachel Ray. Presented to ER for coughing B6 DCM and CHF diagnosed (with atrial fibrillation). Taurine not measured and diet not changed. Re-evaluated 9/10/18 and no improvement. Whole blood taurine pending and owner is switching diet. Owner does not have the Nature's Variety but will hold onto the Rachel Ray. She is happy to

answer any additional questions

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Nature's Variety Instinct Raw Boost Chicken dry		
Rachel Ray Nutrish Chicken and Veggie dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6 USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-365022>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=381781>

This email and attached document are being provided to you in your capacity as a Commissioned Official with the U.S. Department of Health and Human Services as authorized by law. You are being provided with this information pursuant to your signed Acceptance of Commission.

This email message is intended for the exclusive use of the recipient(s) named above. It may contain information that is protected, privileged, or confidential. Any dissemination, distribution, or copying is strictly prohibited.

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through your local district FDA office.

Failure to adhere to the above provisions could result in removal from the approved distribution list. If you think you received this email in error, please send an email to FDAREportableFoods@fda.hhs.gov immediately.

Report Details - EON-365022

ICSR: 2054861
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-09-12 08:00:29 EDT

Reported Problem:
Problem Description: DCM and CHF. Owner was feeding Natures Variety until ~1/8/18 then switched to Rachel Ray. Presented to ER for coughing. **B6** DCM and CHF diagnosed (with atrial fibrillation). Taurine not measured and diet not changed. Re-evaluated 9/10/18 and no improvement. Whole blood taurine pending and owner is switching diet. Owner does not have the Nature's Variety but will hold onto the Rachel Ray. She is happy to answer any additional questions
Date Problem Started: **B6**
Concurrent Medical Problem: No
Outcome to Date: Stable

Product Information:
Product Name: Rachel Ray Nutrish Chicken and Veggie dry
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information:
Description: Fed from 1/8/18 to present.
First Exposure Date: 01/08/2018
Last Exposure Date: 09/12/2018
Manufacturer /Distributor Information:
Purchase Location Information:
Product Name: Nature's Variety Instinct Raw Boost Chicken dry
Product Type: Pet Food
Lot Number:
Package Type: BAG
Possess Opened Product: No
Product Use Information:
Description: Fed from 14 months of age until ~1/8/ 8
Perceived Relatedness to Adverse Event: Possibly related
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: **B6**
Type Of Species: Dog
Type Of Breed: Great Dane
Gender: Male
Reproductive Status: Neutered
Weight: 71 Kilogram
Age: 6 Years
Assessment of Prior Health: Excellent

	Number of Animals Given the Product:	1												
	Number of Animals Reacted:	1												
	Owner Information:	<table border="1"> <tr> <td>Owner Information provided:</td> <td>Yes</td> </tr> <tr> <td>Contact: Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> <tr> <td>Email:</td> <td></td> </tr> <tr> <td>Address:</td> <td>B6</td> </tr> <tr> <td></td> <td>United States</td> </tr> </table>	Owner Information provided:	Yes	Contact: Name:	B6	Phone:		Email:		Address:	B6		United States
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	United States													
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	Preferred Method Of Contact:	Email												
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	Type:	Echocardiogram												
	Attachment:	discharge report B6 .pdf												
	Description:	Discharge report												
	Type:	Medical Records												
	Attachment:	diet history B6 .pdf												
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	Attachment:	cardiology report 9-10-18.pdf												
	Description:	Cardio report												
	Type:	Echocardiogram												
	Attachment:	bnp.pdf												
	Description:	NT-proBNP												
	Type:	Laboratory Report												

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY
Cardiology Liaison: 508-887-4696

B6

Patient ID:

Canine

Years Old Male (Neutered) Great
Dane

Black BW: Weight(lbs) 0.00

Cardiology Inpatient

Date:

Weight: Weight(lbs) 0.00

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Thoracic radiographs available for review?

- Yes - in SS
- Yes - in PACS
- No

Presenting complaint and important concurrent diseases:

History of gagging/coughing. Tachycardia and irregular heart rhythm appreciated at referring veterinarian. No history of exercise intolerance or syncope.

Current medications and doses: Salmon oil

Key indication for consultation: Irregular heart rhythm, pulse deficits, tachycardia

Questions to be answered from the Consult:

Evidence of DCM vs other? Evidence of CHF?

Is your consult time-sensitive? (e.g., anesthesia today, owner waiting, trying to get biopsy today)

- Yes (explain)
- No

STOP - remainder of form to be filled out by Cardiology

Physical Examination

B6

Muscle condition:

- Normal
- Mild muscle loss
- Moderate cachexia
- Marked cachexia

Cardiovascular Physical Exam

Murmur Grade:

- None
- I/VI
- II/VI
- III/VI
- IV/VI
- V/VI
- VI/VI

Murmur location/description: systolic left apical

Jugular vein:

- Bottom 1/3 of neck
- Middle 1/3 of neck
- Top 2/3 of neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong
- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other (describe):

Arrhythmia:

- None
- Sinus arrhythmia
- Premature beats
- Bradycardia
- Tachycardia, irregular

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary Crackles
- Wheezes
- Upper airway stridor
- Other auscultatory findings:

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites

Echocardiogram Findings:

B6

B6

Assessment and recommendations:

Echocardiogram reveals severe DCM with moderate secondary LAE, and EKG reveals atrial fibrillation with rapid ventricular response rate. Changes are consistent with CHF being the cause for reported cough. Recommend treating with and , and consider addition of an ACE inhibitor when eating and not azotemic. Recommend and low dose of . Recommend . Recommend . Recommend . Recheck renal values, level 6-8 hours post pill, and ECG in 7-10 days. Recheck echo/fluid check in ~3 months, or sooner if clinical sign occur such as increased RR/RE, cough, collapse, or exercise intolerance.

Addendum: Overnight telemetry showed relatively frequent VPCs, couplets with R on T morphology, and occasional non sustained ventricular tachycardia. Recommend stopping and adding at 400 mg PO BID for 7 days, then SID.

Treatment plan:

B6

Final Diagnosis:

DCM, CHF
Atrial fibrillation with rapid ventricular response rate

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|-----------------------------|--|
| <input type="checkbox"/> Ia | <input type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input checked="" type="checkbox"/> IIIb |
| <input type="checkbox"/> II | |

ACVIM CHF Classification:

- A
- B1
- B2

- C
- D

2D

- SA LA
- Ao Diam
- SA LA / Ao Diam
- IVSd
- LVIDd
- LVPWd
- EDV(Teich)
- IVSs
- LVIDs
- LVPWs
- ESV(Teich)
- EF(Teich)
- %FS
- SV(Teich)

M-Mode

- IVSd
- LVIDd
- LVPWd
- IVSs
- LVIDs
- LVPWs
- %FS
- Ao Diam
- LA Diam
- LA/Ao
- Max LA

Doppler

- MR Vmax
- MR maxPG
- MV E Vel
- PV Vmax
- PV maxPG
- AV Vmax
- AV maxPG
- TR Vmax
- TR maxPG



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Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6 Canine

B6 Years Old Male (Neutered) Great Dane
Black

Cardiology Appointment Report

Date: 9/10/2018

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

B6

Cardiology Technician:

B6

Student: B6

Presenting Complaint: Recheck for DCM & atrial fibrillation diagnosed Feb 2018

Concurrent Diseases:

None

General Medical History:

Diagnosed DCM feb 2018

Doing well in general, good energy level, seems to have good tolerance for exercise. Eating well, drinking well. Some diarrhea in car on way over, other than that nothing.

Cough has diminished over time, but coughs approximately once or twice a day. Rarely gives an extra dose of B6 (maybe "once a month")

Diet and Supplements:

Rachel Ray Nutrish "Real Chicken & Veggies" flavor 3 cups BID
1/3cup + 1/2cup chicken broth +/- chicken a day

Salmon Oil

Cardiovascular History:

Prior CHF diagnosis? yes

Prior heart murmur? yes

Prior ATE? no

Prior arrhythmia? yes

Monitoring respiratory rate and effort at home? yes
Cough? yes
Shortness of breath or difficulty breathing?
Syncope or collapse? no
Sudden onset lameness? no
Exercise intolerance? mild

Current Medications Pertinent to CV System:

B6

Muscle condition:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> Moderate cachexia |
| <input type="checkbox"/> Mild muscle loss | <input type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|--|--------------------------------|
| <input type="checkbox"/> None | <input type="checkbox"/> IV/VI |
| <input type="checkbox"/> I/VI | <input type="checkbox"/> V/VI |
| <input type="checkbox"/> II/VI | <input type="checkbox"/> VI/VI |
| <input checked="" type="checkbox"/> III/VI | |

Murmur location/description: Holosystolic

Jugular vein:

- Bottom 1/3 of the neck
- Middle 1/3 of the neck

- 1/2 way up the neck
- Top 2/3 of the neck

Arterial pulses:

- Weak
- Fair
- Good
- Strong

- Bounding
- Pulse deficits
- Pulsus paradoxus
- Other:

Arrhythmia:

- None
- Sinus arrhythmia
- Irregularly irregular

- Bradycardia
- Tachycardia

Gallop:

- Yes
- No
- Intermittent

- Pronounced
- Other:

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds

- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension

- Mild ascites
- Marked ascites

Problems:

Prior diagnosis DCM, Atrial fibrillation

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure

- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests:

Echocardiogram Findings:

B6

B6

Assessment and recommendations:

Echocardiogram reveals DCM with similar LA size and progression in LV cavity size (r/o disease progression v contribution from slower heart rate today compared to last exam). Ventricular arrhythmia appears well controlled, but atrial fibrillation ventricular response rate was rapid today. Recommend

B6

Final Diagnosis:

DCM, history of CHF

Atrial fibrillation with rapid ventricular response rate

Heart Failure Classification Score:

ISACHC Classification:

- | | |
|--|-------------------------------|
| <input type="checkbox"/> Ia | <input type="checkbox"/> IIIa |
| <input type="checkbox"/> Ib | <input type="checkbox"/> IIIb |
| <input checked="" type="checkbox"/> II | |

ACVIM Classification:

- | | |
|-----------------------------|---------------------------------------|
| <input type="checkbox"/> A | <input checked="" type="checkbox"/> C |
| <input type="checkbox"/> B1 | <input type="checkbox"/> D |
| <input type="checkbox"/> B2 | |

M-Mode

IVSd

LVIDd

LVPWd

IVSs

LVIDs

LVPWs

%FS

Ao Diam

LA Diam

LA/Ao

Max LA

M-Mode Normalized

IVSdN

LVIDdN

LVPWdN

IVSsN

LVIDsN

LVPWsN

Ao Diam N

B6

0M

0M

0M

0M

0M

0M

%

0M

0M

0M

0M

{0.29 - 0.52}

{1.35 - 1.73}!

{0.33 - 0.53}!

{0.43 - 0.71}!

{0.79 - 1.14}!

{0.53 - 0.78}!

{0.68 - 0.89}

LA Diam N

(0.64 - 0.90) !

2D

SA LA

cm

Ao Diam

cm

SA LA / Ao Diam

IVSd

cm

LVIDd

cm

LVPWd

cm

EDV(Teich)

ml

IVSs

cm

LVIDs

cm

LVPWs

cm

ESV(Teich)

ml

EF(Teich)

%

%FS

%

SV(Teich)

ml

LVld LAX

cm

LVAd LAX

cm

LVEDV A-L LAX

ml

LVEDV MOD LAX

ml

LVLs LAX

cm

LVA_s LAX

cm

LVESV A-L LAX

ml

LVESV MOD LAX

ml

HR

BPM

EF A-L LAX

%

LVEF MOD LAX

%

SV A-L LAX

ml

SV MOD LAX

ml

CO A-L LAX

l/min

CO MOD LAX

l/min

Doppler

MR Vmax

m/s

MR maxPG

mmHg

PV Vmax

m/s

PV maxPG

mmHg

AV Vmax

m/s

AV maxPG

mmHg

B6

Discharge Instructions

Patient

Name: B6
Species: Canine
Black Male (Neutered) Great Dane
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

B6

Student:

B6

Cardiology Technician:

B6

Admit Date: B6 11:16:58 AM

Discharge Date: B6

Diagnoses:

Dilated cardiomyopathy (DCM) with congestive heart failure
Atrial fibrillation and ventricular arrhythmias

Case summary:

Thank you for bringing B6 to tufts for evaluation of his coughing and irregular heart rhythm. B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs and causing cough. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make B6 comfortable and have him breathing easier.

Diagnostic test results and findings:

Chest radiograph (x-ray) findings: The heart was enlarged and there was fluid in the lungs.

Echocardiogram findings: All chambers of the heart are enlarged and the contractile function is reduced.

ECG findings: The ECG showed atrial fibrillation with rapid ventricular response rate. Additionally there were some ventricular arrhythmias (ventricular premature beats and ventricular tachycardia).

Labwork findings: The kidney values and urinalysis are within normal limits. He has slightly elevated bilirubin, and elevated AST but the rest of his liver values are normal and these values have decreased during his stay.

Monitoring at home:

- o We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort.
- o In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- o *An increase in breathing rate or effort will usually mean that you should give an extra B6. If difficulty breathing is not improved by within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that your dog be evaluated by an emergency clinic.*
- o There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).
- o We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.
- o If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.
- o You may want to explore the option of purchasing an Alivecor/Kardia at home ECG monitoring device. This would allow you to get an ECG and send it to us via email.

Recommended Medications:

B6

Diet suggestions:

Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sodium (salt). Sodium can be found in all foods, but some foods are lower in sodium than others. Many pet treats, people foods, and supplements used to give pills often have more sodium than is desirable - a sheet that has suggestions for low sodium treats can be found on the HeartSmart web site (<http://vet.tufts.edu/heartsmart/diet/>)

Your dog's usual diet may also have more sodium than recommended - we want him to continue to eat his normal diet for the first 7 to 14 days so we can make sure he is tolerating medications well, but after that time we would recommend slowly introducing one of the lower sodium diets on the HeartSmart list (25% of the new diet and 75% old diet for 2-3 days, then 50:50, etc.). Hopefully you can find a diet on the list that your dog likes to eat. Alternatively, you can research the amount of sodium in the diet to ensure that the sodium content is similar to those on the list.

Exercise Recommendations:

For the first 7 to 10 days after starting medications for heart failure we recommend very limited activity. Leash walking only is ideal, and short walks to start. Once the heart failure is better controlled, then slightly longer walks are acceptable. However, if you find the [B6] is lagging behind or needs to stop on a walk then this was too long a walk and shorter walks are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised.

Recheck Visits:

A recheck visit is recommended in 1-2 weeks to check kidney values, electrolytes, and liver values. An ECG is also recommended at that time. This can be done with us or with your primary care veterinarian. If you have any concerns are how things are going then we would prefer for [B6] to come here for that recheck.

A recheck echocardiogram is recommended in 3-4 months, or sooner if you have any concerns. Please call or email to schedule this appointment.

Thank you for entrusting us with [B6] care. He is such a sweet boy. Please contact our Cardiology liaison, [B6] at [B6] or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information
<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: [B6]

Owner: [B6]

Discharge Instructions

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification {B6}
Sent: 9/7/2018 8:32:24 PM
Subject: Rachel Ray Nutrish real beef and brown rice (barcode 7119000095): Lisa Freeman - EON-364568
Attachments: 2054744-report.pdf; 2054744-attachments.zip

A PFR Report has been received and PFR Event [EON-364568] has been created in the EON System.

A "PDF" report by name "2054744-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2054744-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-364568

ICSR #: 2054744

EON Title: PFR Event created for Rachel Ray Nutrish real beef and brown rice (barcode 7119000095); 2054744

AE Date	08/06/2018	Number Fed/Exposed	
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Mixed (Dog)		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2054744

Product Group: Pet Food

Product Name: Rachel Ray Nutrish real beef and brown rice (barcode 7119000095)

Description: Diagnosed with DCM and CHF

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Rachel Ray Nutrish real beef and brown rice (barcode 7119000095)		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-364568>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=381302>

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Failure to adhere to the above provisions could result in removal from the approved distribution list. If you think you received this email in error, please send an email to FDAREportableFoods@fda.hhs.gov immediately.

Report Details - EON-364568

ICSR: 2054744
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-09-07 16:24:16 EDT

Reported Problem:
Problem Description: Diagnosed with DCM and CHF
Date Problem Started: 08/06/2018
Concurrent Medical Problem: No
Outcome to Date: Stable

Product Information:
Product Name: Rachel Ray Nutrish real beef and brown rice (barcode 7119000095)
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information: **First Exposure Date:** 01/02/2017
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: B6
Type Of Species: Dog
Type Of Breed: Mixed (Dog)
Gender: Female
Reproductive Status: Neutered
Weight: 25.6 Kilogram
Age: 6 Years
Assessment of Prior Health: Excellent
Number of Animals Reacted: 1
Owner Information: **Owner Information provided:** Yes
Contact: **Name:** B6
Phone: B6
Address: B6
 United States
Healthcare Professional Information: **Practice Name:** Tufts Cummings School of Veterinary Medicine
Contact: **Name:** Lisa Freeman
Phone: (508) 887-4523
Email: lisa.freeman@tufts.edu
Address: 200 Westboro Rd
 North Grafton
 Massachusetts
 01536
 United States

Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523 Email: lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email

Additional Documents:	Attachment:	cardio report: B6 pdf
	Description:	Cardio report
	Type:	Record
	Attachment:	B6 pdf
	Description:	Diet history
	Type:	Medical Records
	Attachment:	discharge: B6 pdf
	Description:	Discharge
	Type:	Record
	Attachment:	chem profile: B6 pdf
	Description:	Chem profile
	Type:	Laboratory Report
	Attachment:	taurine: B6 pdf
	Description:	Taurine
	Type:	Laboratory Report

**Withheld in Full as B5,
B6**

**DOCUMENT
PRODUCED IN NATIVE**

**DOCUMENT
PRODUCED IN NATIVE**

**DOCUMENT
PRODUCED IN NATIVE**

**DOCUMENT
PRODUCED IN NATIVE**

**DOCUMENT
PRODUCED IN NATIVE**

**Withheld in Full as B4,
B5, B6**

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent: 12/3/2018 7:48:38 PM
Subject: Blue Buffalo Wilderness Large Breed Grain free dry: Lisa Freeman - EON-372652
Attachments: 2059566-report.pdf; 2059566-attachments.zip

A PFR Report has been received and PFR Event [EON-372652] has been created in the EON System.

A "PDF" report by name "2059566-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2059566-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-372652

ICSR #: 2059566

EON Title: PFR Event created for Blue Buffalo Wilderness Large Breed Grain free dry; 2059566

AE Date	09/18/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Great Dane		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2059566

Product Group: Pet Food

Product Name: Blue Buffalo Wilderness Large Breed Grain free dry

Description: Evaluated for exercise intolerance; identified ventricular arrhythmia and mildly reduced contractile function. Plasma taurine B6 (WB not evaluated). We will be rechecking dog in a 3-4 months. Was eating BEG diet (Blue Buffalo) at time of diagnosis then switched to Fromm Lg Breed after diagnosis but now transitioning to Pro Plan Weight Management

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Blue Buffalo Wilderness Large Breed Grain free dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-372652>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=389621>

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Report Details - EON-372652

ICSR: 2059566
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2018-12-03 14:40:10 EST

Reported Problem:

Problem Description: Evaluated for exercise intolerance, identified ventricular arrhythmia and mildly reduced contractile function. Plasma taurine [B6] (WB not evaluated). We will be rechecking dog in a 3-4 months. Was eating BEG diet (Blue Buffalo) at time of diagnosis then switched to Fromm Lg Breed after diagnosis but now transitioning to Pro Plan Weight Management

Date Problem Started: 09/18/2018

Concurrent Medical Problem: No

Outcome to Date: Stable

Product Information:

Product Name: Blue Buffalo Wilderness Large Breed Grain free dry

Product Type: Pet Food

Lot Number:

Package Type: BAG

Product Use Information:

Manufacturer /Distributor Information:

Purchase Location Information:

Animal Information:

Name: [B6]

Type Of Species: Dog

Type Of Breed: Great Dane

Gender: Male

Reproductive Status: Neutered

Weight: 97.8 Kilogram

Age: 6 Years

Assessment of Prior Health: Excellent

Number of Animals Given the Product: 1

Number of Animals Reacted: 1

Owner Information:

Owner Information provided: Yes

Contact:

Name: [B6]

Phone: [B6]

Email: [B6]

Address:

[B6]
 United States

Healthcare Professional Information:

Practice Name: Tufts Cummings School of Veterinary Medicine

Contact:

Name: Lisa Freeman

Phone: (508) 887-4523

		Email: lisa.freeman@tufts.edu
		Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523 Email: lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	records B6 pdf
	Description:	Records
	Type:	Medical Records

Report Details - EON-372831		
ICSR:	2059622	
Type Of Submission:	Initial	
Report Version:	FPSR.FDA.PETF.V.V1	
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)	
Reporting Type:	Voluntary	
Report Submission Date:	2018-12-04 18:08:14 EST	
Reported Problem:	Problem Description: Daughter diagnosed with reduced cardiac contractility (B6) is mother of (B6) and (B6) Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months	
	Date Problem Started: 11/15/2018	
	Concurrent Medical Problem: No	
	Outcome to Date: Stable	
Product Information:	Product Name: Earthborn Meadow Feast dry	
	Product Type: Pet Food	
	Lot Number:	
	Package Type: BAG	
	Product Use Information: Description: See diet history in medical record for more info	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
Animal Information:	Name: (B6)	
	Type Of Species: Dog	
	Type Of Breed: Boxer (German Boxer)	
	Gender: Female	
	Reproductive Status: Intact	
	Pregnancy Status: Not pregnant	
	Lactation Status: Not lactating	
	Weight: 29.1 Kilogram	
	Age: 3 Years	
	Assessment of Prior Health: Excellent	
	Number of Animals Given the Product: 5	
	Number of Animals Reacted: 4	
	Owner Information:	Owner Information provided: Yes
		Contact: Name: (B6)
		Phone: (B6)
Email: (B6)		
Address: (B6) United States		
Healthcare Professional Information:	Practice Name: Tufts Cummings School of Veterinary Medicine	
	Contact: Name: Lisa Freeman	

			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
Preferred Method Of Contact:	Email		
Additional Documents:	Attachment:	rpt_medical_record_preview	B6 .pdf
	Description:	Medical records	
	Type:	Medical Records	

Client:

Address:

B6

Home Phone:

B6

Work Phone: () -

Cell Phone:

B6

All Medical Records

Patient:

B6

Breed: Golden Retriever Cross

DOB:

B6

Species: Canine

Sex: Male
(Neutered)

Referring Information

B6

Client:

B6

Patient:

Initial Complaint:

Initial Complaint:

New, DCM

SOAP Text

B6

12:07PM

B6

Disposition/Recommendations

Client:
Patient:

B6

Client: **B6**
Patient:

Cummings
Veterinary Medical Center
AT TUFTS UNIVERSITY

Foster Hospital for Small Animals

55 Willard Street
North Grafton, MA 01536
(508) 839-5395

Client: **B6**
Veterinarian:
Patient ID: **B6**
Visit ID:

Patient:	B6
Species:	Canine
Breed:	Golden Retriever Cross
Sex:	Male (Neutered)
Age:	B6 Years Old

Lab Results Report

Accession ID:

Test	Results	Reference Range	Units
------	---------	-----------------	-------



3/23

B6

Printed Thursday, December 27, 2018

Client:
Patient:

B6

rDVM:

B6

labs, echo

B6

Client: **B6**
Patient: **B6**

rDVM: **B6** referral, labs, echo

IDEW

B6

B6

Chemistry summary

(Some of the following values may be reported as "pending" or "not available")

Client: **B6**
Patient: **B6**

rDVM **B6** referral, labs, echo

Service to Which Referred	Appointment Date	Time
TUFTS UNIVERSITY Cummings School of Veterinary Medicine Henry & Lois Foster Hospital for Small Animals 200 Westboro Road, Route 30 North Grafton, MA 01536 508-833-5395		
OWNER INFORMATION		
Name: B6	Daytime Phone: B6	Evening Phone:
Address: B6	City: B6	State: B6 Zip Code: B6
Email Address: B6		
PATIENT INFORMATION		
Registered Name/ID: B6		
Species: K9	Breed: Goldenoodle	Sex: ma Age: B6
CASE HISTORY		
Chief Concern/Provisional Diagnosis: Dilated Cardiomyopathy.		
referral for HOLTER MONITOR/consult w/ cardiologist		
History: B6	B6	
Other History: Dilated Cardiomyopathy	2/6 systolic murmur	
Diagnostic Test Results (please attach if possible): Echo 2017, 2018 Chd 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100		
Are Radiographs Enclosed? <input checked="" type="checkbox"/> <input type="checkbox"/>		
B6		
Name: B6	Clinic/Hospital: B6	
Phone: B6	Fax: B6	Website: B6
Address: B6	City: B6	State: B6 Zip Code: B6
Preferred means of communicating with you about this case? Phone <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email <input type="checkbox"/>		

Client: **B6**
Patient: **B6**

rDVM **B6** referral, labs, echo

11/20/17 15:33:36 888-43-747 → **B6** **B6** **B4** Page 881

B4

B6
804-870-8800
Accounts 80882

Order Patient: **B6**
Species: **CADOME**
Sex: **77984**
Age: **589**
Gender: **589**
Prescription #: **2411**
Accession #: **B6**
Order entry: **11/20/2017**
Order by: **B6**
Reported: **11/20/2017**

SENON PROFILE	CHEM 27 W/ SCMA
Test	Result
ALP	(18 - 160) U/L
ALT	(18 - 120) U/L
AST	(18 - 50) U/L
CREATINE KINASE	(10 - 200) U/L
GGT	(0 - 10) U/L H
AMYLASE	(307 - 1400) U/L
LIPASE	(108 - 750) U/L L
ALBUMIN	(2.7 - 5.0) g/dL
TOTAL PROTEIN	(5.5 - 7.5) g/dL
GLOBULIN	(2.4 - 4.0) g/dL
TOTAL BILIRUBIN	(0.0 - 0.3) mg/dL
BILIRUBIN CONJUGATED	(0.0 - 0.1) mg/dL
BUN	(8 - 31) mg/dL
CREATININE	(0.5 - 1.4) mg/dL
CHOLESTEROL	(131 - 340) mg/dL
GLUCOSE	(80 - 154) mg/dL
CALCIUM	(8.4 - 11.0) mg/dL
PHOSPHORUS	(2.5 - 6.1) mg/dL
TG02 (BICARBONATED)	(13 - 27) mmol/L
CHLORIDE	(108 - 118) mmol/L
POTASSIUM	(4.0 - 5.4) mmol/L
SODIUM	(142 - 152) mmol/L
ALBUMIN RATIO	(0.7 - 1.0)
BUN/CREATININE RATIO	
BILIRUBIN UNCONJUGATED	(0.0 - 0.2) mg/dL
NAK RATIO	(28 - 37)
HEMOLYSIS INDEX	

B6

FINAL REPORT - CONTINUED

PAGE 1

Client: **B6**
Patient: **B6**

rDVM **B6** referral, labs, echo

11/29/17 15:34:05 888-411-417 → **B6** **B6** **B4** Page 8/23

Index of N. 1+, 2+ exhibits no significant effect on chemistry values.
LIPID INDEX **B6**
Index of N. 1+, 2+ exhibits no significant effect on chemistry values.
AMON GAP **B6** (11-25) mmol **B6**
SODIA (9-14) ug/dL
BOTH SODIA AND CREATININE ARE WITHIN THE REFERENCE INTERVAL which indicates kidney function is likely good. Evaluate a complete urinalysis and confirm there is no other evidence of kidney disease.

SENIOR PROFILE		CBC COMPREHENSIVE	
Test		Result	
WBC	B6	(4.9 - 17.0) K/UL	
RBC	B6	(6.20 - 6.70) M/UL	
HGB	B6	(13.4 - 20.7) g/dL	
HCT	B6	(38.5 - 50.5) %	
MCH	B6	(20 - 30) fL	
MCH	B6	(21.8 - 36.1) pg	
MCHD	B6	(32.8 - 39.2) g/dL	
% RETICULOCYTE	B6	%	
RETICULOCYTE	B6	(10 - 110) K/UL	
% NEUTROPHIL	B6	%	
% LYMPHOCYTE	B6	%	
% MONOCYTE	B6	%	
% EOSINOPHIL	B6	%	
% BASOPHIL	B6	%	
PLATELET	B6	(143 - 440) K/UL	
REMARKS			
SLIDE REVIEWED MICROSCOPICALLY. NO PARASITES SEEN			
NEUTROPHIL	B6	(3940 - 12670) /uL	
LYMPHOCYTE	B6	(1500 - 4800) /uL	
MONOCYTE	B6	(130 - 1150) /uL	
EOSINOPHIL	B6	(70 - 1400) /uL	
BASOPHIL	B6	(0 - 100) /uL	

B6

SENIOR PROFILE		URINALYSIS	
Test		Result	
COLLECTION METHOD	B6		
COLOR	B6		
CLARITY	B6		

B6

FINAL REPORT - CONTINUED ON NEXT PAGE
PAGE 2

Client: **B6**
Patient: **B6**

rDVM **B6** referral, labs, echo

11/19/17 15:25:30 880-432-427 → **B6** **B6**
B4 Page 003

SPECIFIC GRAVITY	B6
GLUCOSE	B6
BILIRUBIN	B6
KETONES	B6
Detection of trace ketones in patients who are normoglycemic or have negative urine glucose is non-specific and of limited clinical significance.	
BLOOD	B6
PH	B6
PROTEIN	B6
Protein test is performed and confirmed by the sulfosalicylic acid test.	
WBC	B6
RBC	B6
BACTERIA	B6
EPY CELL	B6
MUCIN	B6
CASTS	B6
CRYSTALS	B6
UROBILINOGEN	B6

Test	Result
T4	1.0 - 4.0 ug/dL

Interpretive ranges:
<1.0 Low
1.0-4.0 Normal
>4.0 High
2.1-5.4 Therapeutic

B6

B6

FINAL REPORT

PAGE 3 OF 3

Client: **B6**
Patient: **B6**

rDVM: **B6** referral, labs, echo

B4

ECHOCARDIOGRAM REPORT

Date:	B6	Hospital:	B6	B6	DVM
Pet Name:	B6	Species:	Canine	Breed:	Goldenretriever
DOB:	B6	Sex:	M	Weight:	63.1 lb

History/Clinical presentation: Recheck echocardiogram for dilated cardiomyopathy. Doing well.
Previous ultrasound on **B6**
Blood Pressure: 191/99/103/82; 166/71/115/70

B6

Continued on page 2.

Client: **B6**
Patient: **B6**

rDVM **B6** referral, labs, echo

Page 3: **B6** echocardiogram report, continued.

ASSESSMENT:

1.) Dilated Cardiomyopathy - Idiopathic

RECOMMENDATIONS: There is a degree of progression since the last study with progressive systolic dysfunction and the development of mild enlargement of the left atrium. These findings remain consistent with actual Dilated Cardiomyopathy. This patient may continue to remain asymptomatic for an extended period of time, however he is at risk for exercise intolerance, weakness, lethargy, syncope, ventricular and atrial arrhythmias, development of congestive heart failure, and even passing away suddenly.

B6

Interpreted by: **B6** DVM, DACVIM (Cardiology)

Performed by: **B6** RDCP

If you have any further questions or concerns regarding this case, please contact **B6** at:

B6

Client: **B6**
Patient:

rDVM **B6** referral, labs, echo

B4

ECHOCARDIOGRAM REPORT

Date:	B6	Hospital:	B6	B6	DVM
Pet Name:	B6	Species:	Canine	Breed:	Golden Doodle
DOB:	B6 (7/7)	Sex:	MM	Weight:	69.1 lb

History/Clinical presentation: New grade I/VI systolic murmur noted on PE, B2017.
Dog needs dental cleaning, T CK for anesthesia
Blood pressure: 165/83 (105); 161/61 (112); 140/60 (107)

B6

Continued on page 2.

Client: **B6**
Patient: **B6**

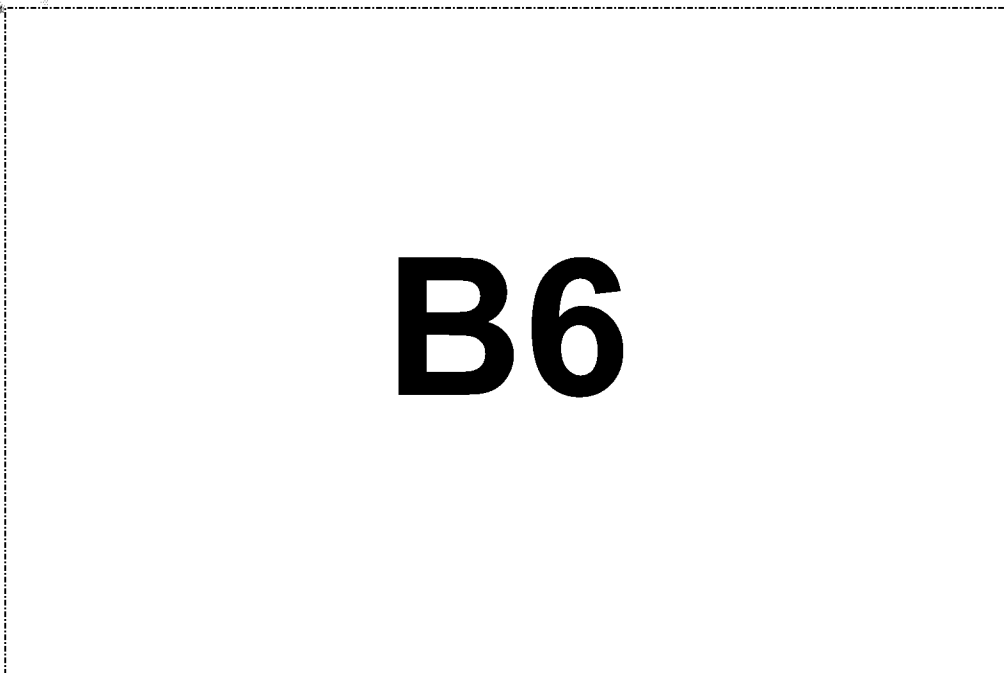
rDVM **B6** referral, labs, echo

Page 2 **B6** echocardiogram report, continued.

ASSESSMENT:

1.) Dilated Cardiomyopathy - Idiopathic

RECOMMENDATIONS: Unfortunately, this patient's has myocardial failure of both the LV and RV enlargement. These findings are consistent with recent Dilated Cardiomyopathy. This patient may continue to remain asymptomatic for an extended period of time; however, he does have risk for exercise intolerance, weakness, lethargy, syncope, ventricular and atrial arrhythmias, development of congestive heart failure, and even passing away suddenly.



Interpreted by: **B6** DVM, DACVIM (Cardiology)

Performed by: **B6** RDCS

If you have any further questions or concerns regarding this case, please contact **B6** at **B6**

Client: **B6**
Patient: **B6**

IDEXX - BNP - 7/11/2018

2018 07/11 10:00 AM

B6 **B6**

Client: **B6**
Patient:
Species: CANINE
Sex: M
Breed: MEDIUM EARED Cocker Spaniel
Color: Fawn
Age: 7

Registration # 451208
Microchip # **B6**
Contact # **B6**

IDEXX VetConnect 1-800-234-9989
10000 WISCONSIN BLVD
MILWAUKEE, WI 53218
2018-07-11 10:00 AM

CARDIAC BNP CANINE

CARDIAC BNP CANINE

B6

1-1000001

B6

B6

Client:
Patient:

B6

Diet history 7/10/18

CARDIOLOGY DIET HISTORY FORM

Pet's name: **B6** Owner's name: **B6** Today's date: **B6**

1. How would you describe your pet's appetite? (mark the point on the line below that best represents your pet's appetite)
Examples: Poor _____ **Good** _____ Excellent
Poor _____ Excellent

2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)
 Same about the same amount as usual Less than usual More than usual
 Seems to prefer different foods than usual Other _____

3. Over the last few weeks, has your pet (check one)
 Lost weight Gained weight Stayed about the same weight Don't know

4. Please list below ALL pet foods, people food, treats, snacks, dental chews, rawhides, and any other food item that your pet currently eats. Please include the brand, specific product, and flavor so we know exactly what your pet is eating.

Food (include specific product and flavor) Form Amount How often? Feeding

Food (include specific product and flavor)	Form	Amount	How often?	Feeding
Auto Grain Free Chicken, Lamb, & Sweet Potato Adult	dry	1 1/2 cups	twice	Jan 2018
95% lean hamburger	grounded	3 oz	twice	Jan 2018
Hydrolized chicken beef flavor	pow	1/2	twice	Aug 2018
Protein	pow	2 scoops	twice	Jan 2018
Origen chicken	dry	1/2 cup	2x/day	4 months
Origen Senior Chicken	dry	1/2 cup	2x/day	4 months
Steamed chicken				
Greenies				

*Any additional diet information can be listed on the back of this sheet.

5. Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)? Yes No If yes, please list which ones and give brands and amounts:

	Brand/Concentration	Amount per day
Taurine	Parula 250mg	3 per 12 hours
Carters		
Antioxidants		
Multivitamin		
Fish oil	Origen	1 tablet
Coenzyme Q10		
Other (please list):		
Example: Vitamin C	Nature's Bounty	300 mg tablets - 1 per day

6. How do you administer pills to your pet?
 I do not give any medications
 I put them directly in my pet's mouth without food
 I put them in my pet's dog/cat food
 I put them in a Pill Pockets or similar product
 I put them in food (list food): **crucif**

Client: **B6**
Patient:

Vitals Results

B6	10:14:53 AM	Weight (kg)	30.1000
-----------	-------------	-------------	---------

Client: **B6**
Patient:

ECG from Cardio

B6

B6 11:58:22 AM Page 1 of 8
FDA/CDER/Office of the Director
FDA Center for Drug Evaluation and Research
Washington, DC 20205

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6

01/08/22 AM Page 3 of 8
FDA Center for Veterinary Medicine
U.S. Department of Agriculture

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6

11:48:22 AM Page 1 of 8
FDA/CDER/Office of Regulatory Affairs
Center for Drug Evaluation and Research
FDA/CDER/Office of Regulatory Affairs

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6

11:58:22 AM Page 1 of 4
TISHA SHERRETT
Nurse Practitioner
11/18/2019

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6

10:48:52 AM
C:\Data\20190909\104852\104852_001.ecg
10/10/2019

B6

Client: **B6**
Patient: **B6**

Patient History

B6	01:10 PM	Appointment	B6
	04:29 PM	Appointment	
	10:00 AM	UserForm	
	10:14 AM	Vitals	
	10:15 AM	Purchase	
	10:49 AM	Treatment	
	11:02 AM	Purchase	
	11:11 AM	UserForm	
	11:13 AM	UserForm	
	11:31 AM	Purchase	
	12:08 PM	Purchase	
	03:13 PM	Email	

Cummings
Veterinary Medical Center
AT TUFTS UNIVERSITY

Forster Hospital for Small Animals
55 Willard Street
North Grafton, MA 01526
Telephone (508) 829-5395
Fax (508) 829-7953
<http://vetmed.tufts.edu/>

B6

B6

Male (Neutered)

Case: Golden Retriever Cross
Gold

B6

B6

Dear **B6**

Thank you for referring **B6** with their pet **B6**.

Would we be able to see the echo images for this patient? The images can be emailed to us at cardiovet@tufts.edu

If you have any questions, or concerns, please contact us at 508-827-4988.

Thank you,

B6 DVM, DACVIM (Cardiology)

Foster Hospital for Small Animals

55 Willard Street
North Grafton, MA 01536
(508) 839-5395

All Medical Records

Client: **B6**
Address: **B6**

Patient: **B6**
Breed: Doberman Pinscher
DOB: **B6**

Species: Canine
Sex: Male
(Neutered)

Home Phone: **B6**
Work Phone: () -
Cell Phone: **B6**

Referring Information

B6

Hospital

Client: **B6**
Patient: **B6**

Initial Complaint:

New cruciate evaluation, possibly sx at rDVM

SOAP Text **B6** 2:30PM **B6**

B6 4:58:22 PM NEW VISIT

History: 7 yo CM Dobie presenting for his right hind limb lameness. 2 weeks ago he became acutely lame on his RH after running around. He was taken to the DVM who suspected a **B6** rupture. Hx of **B6** for 6 years. rDVM did bloodwork, showed increase of ALT and started him on **B6** ALT decreased after 2 weeks.

Exam:

Subjective Nervous. BAR-H. MM pink, moist. CRT<2s

Client: **B6**
Patient: **B6**

B6

H/L: NMA, NSR, fPSS, Normal BVs bilaterally, Funicic

B6

Plan
RH CCL repair with Lateral Suture **B6**

B6 V'16

Initial Complaint:

Drop Off Chief Surgery, admit to B ward

SOAP Text **B6** 9:30PM - **B6**

Subjective

Objective

Assessment

Plan

B6

SOAP Text **B6** 7:20AM - **B6**

B6 7:21:04 AM EXAM, GENERAL

History: 7 yo CM Dobie presenting for right hind limb lameness. He became acutely lame on his RH after running around 3-4 weeks ago. He was taken to the DVM who suspected a **B6** rupture. Hx of **B6** for 6 years. rDVM did bloodwork, showed increase of ALT and started him on **B6**. ALT decreased after 2 weeks of **B6**.

Subjective (S): BAR-H. Very anxious. MM pink, moist CRT < 2s
Patient did well over night. He ate prior to drop off. Drinking and urinating normally. No stool produced.

Objective (O)

B6

Client:
Patient:

B6

B6

H/L: NMA, NSR, fPSS, Normal BVs bilaterally, Eupneic.

B6

Assessment (A)

A1: Torn Cranial cruciate ligament - RH

Plan (P)

B6

SOAP completed by:

B6

SOAP reviewed by:

Addendum:

Patient vWF is 41%. Minimal risk of bleeding. **B6** explained vWF protocol with owner. She wants to proceed with surgery and use the protocol. Patient received 2 units of **B6** was blood typed, and given DDAVP 30 minutes prior to surgery.

B6

B6 2:46:01 PM Anesthesia Notes - 0.00 Rough recovery- extubated fine then had loud vocalization with head thrashing. Gave 0.5mcg dexmedetomidine IV. Relaxed quickly- stopped panting and RR returned to 28/m. Recovering in ICU- likely to be moved to B ward overnight. Gave **B6** 2:44PM. T= 99F. Rounded with ICU technicians during tech rounds

B6

Client: **B6**
Patient:

Instructions - 3.8 mg IV q6 - Expires: **B6** No Refills
SOAP Text **B6** 8:08AM - **B6**

B6 8:08:58 AM EXAM, GENERAL

History: 7 yo CM Dobie presenting for right hind limb lameness. He became acutely lame on his RH after running around 3-4 weeks ago. He was taken to the DVM who suspected a **B6** rupture. Hx of **B6** for 6 years. rDVM did bloodwork, showed increase of ALT and started him on **B6** ALT decreased after 2 weeks on **B6**

Subjective (S): BAR-H. Very anxious. MM pink, moist CRT < 2s
1 day post op lateral suture. Patient did well over night. He ripped out his T-set. E collar was placed. He is eating and urinating. No stools noted overnight, but he produced a large stool during recovery.

Objective (O)

B6

H/L: NMA. NSR. fPSS. Normal BVs bilaterally. Eupneic.

B6

Assessment (A)

B6

Plan (P)

B6

SOAP completed by: **B6**
SOAP reviewed by:

B6

SOAP Text **B6** 8:18AM - **B6**

B6 8:19:07 AM EXAM, GENERAL

History: 7 yo CM Dobie who presented for right hind limb lameness. He became acutely lame on his RH after running around 3-4 weeks ago. He was taken to the DVM who suspected a **B6** rupture. Hx of **B6** for 6 years. rDVM did bloodwork, showed increase of ALT and started him on **B6** ALT decreased after 2 weeks on **B6**

Client: **B6**
Patient: **B6**

Subjective (S): BAR-H. Very anxious. MM pink, moist CRT<2s
2 days post op lateral suture RH. Patient did well over night. Catheter intact as is his E collar. He is eating and urinating. Still has yet to defecate, but he produced a large stool during recovery. He was misbehaving re his catheter last night so was switched to oral

B6

Bandage removed today, incision looks very well apposed with minimal discharge. Nonpainful on palpation. Ready to be discharged today.

Objective (O)

B6

H/L: NMA. NSR. fPSS. Normal BVs bilaterally. Eupneic. Catheter site palpates appropriately.

B6

Plan (P)

P1: Discharge today

B6

SOAP completed by: **B6** V16

SOAP reviewed by:

B6

Initial Complaint:

Chief Recheck No Xrays

SOAP Text **B6** 3:13PM - **B6**

7.5 y/o CM doberman presenting for recheck, had **B6** suture performed **B6** Hx paria **B6** deficiency.

Recheck examination:

Client: **B6**
Patient:

SOAP created by: **B6** V'16
SOAP reviewed by:

Initial Complaint:

New **B6** - DCM/arrhythmia (poss DCM study)

Initial Complaint:

Emergency

Initial Complaint:

Chief New Soft Tissue **B6** on gums - CT on hold 12/11 @ 3PM
Hx VW and heart disease (cardio appt 12/5)

Initial Complaint:

Drop Off Chief Surgery, Admit to B, mandible mass

SOAP Text **B6** 9:28AM **B6**

Subjective

EXAM, GENERAL

Subjective (S)

10 yo CM Doberman

B6 is presenting today **B6** for **B6** resection. Owner noticed an oral mass on right side of mouth around mid- May of this year. It reportedly started as an abscess, and about a month ago the owner noticed the mass triple in size. **B6** still has a good appetite and is on a home cooked soft food diet. The mass has been bleeding and has a significant odor. **B6** was on a two week course of **B6** which helped with the odor, and it has since discontinued and the odor has returned. **B6** has a history of **B6** and DCM which he is on medications to help manage.

Subjective (S)

B6

Client: **B6**
Patient: **B6**

Objective (O)

B6

H/L: NMA, NSR, FPSS. Normal BVS in all lung fields, no crackles or wheezes ausculted. Eupnic.

B6

Diagnostics Completed:

B6

vWF: 68%

B6

Big 4: PCV 47, TS 7.6, BG 88, Azo 0

Assessment (A)

B6

A2: History of DCM

B6

Plan (P)

P1: Mandibular mass resection

SOAP completed by: **B6** V'19

SOAP reviewed by:

Disposition/Recommendations

Client: **B6**
Patient:

Client: **B6**
 Patient: **B6**



Foster Hospital for Small Animals

55 Willard Street
 North Grafton, MA 01536
 (508) 839-5395

Client: **B6**
 Veterinarian:
 Patient ID: **B6**
 Visit ID:

Patient:	B6
Species:	Canine
Breed:	Doberman Pinscher
Sex:	Male (Neutered)
Age:	B6 Years Old

Lab Results Report

None **B6** 10:03:39 PM **Accession ID: B6**

Test	Results	Reference Range	Units
Blood Glucose - fee charged (TVETS)	B6	0 - 0	mg/dl
PCV for PCV/TS/AZO/BG		0 - 0	
TS (TVETS)		0 - 0	g/dl
AZO		0 - 0	mg/dl

None **B6** 9:11:00 AM **Accession ID: B6**

Test	Results	Reference Range	Units
VWF:AG	B6	0 - 0	%

None **B6** 10:52:00 AM **Accession ID: B6**

Test	Results	Reference Range	Units
SALINE AGGLUTINATION	B6	0 - 0	
BLOOD TYPE		0 - 0	

None **B6** 1:54:00 PM **Accession ID: B6**

Test	Results	Reference Range	Units
VWF:AG	68	0 - 0	%

None **B6** 9:22:02 AM **Accession ID: B6**

Test	Results	Reference Range	Units
PLT(ADVIA)	B6	173 - 486	K/uL
PT		6.2 - 9.3	seconds
PTT		8.9 - 16.3	seconds

None **B6** 9:38:56 AM **Accession ID: B6**



9/406

B6 **B6**

Printed Thursday, December 27, 2018

Client: **B6**
Patient: **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dL
AZO (FHSA)		0 - 0	
BG (FHSA)	B6	0 - 0	g/dL
TS (FHSA)		0 - 0	g/dL
PCV *		0 - 0	%



10/406

B6

B6

Printed Thursday, December 27, 2018

Client: **B6**
Patient: **B6**

Anesthesia Record & checklist

Tulane University Cummings School of Veterinary Medicine
ANESTHESIA RECORD

B6

B6 **B6** **B6**

B6 **B6**

Species: **B6**
Breed: **B6**
Sex: **B6**
Weight/Lb: **B6** (Pounds)
Date of Birth: **B6**
Color: **B6**

Check-in Date: **B6** 11:51 PM
Patient ID: **B6**

Owner Name: **B6**
Ref Doctor: **B6**
Ref Phone: **B6**

Time	Type	Rate	Date
IV	14:04		

Patient: **B6**

Client: **B6**

Species: **B6**

Breed: **B6**

Sex: **B6**

Weight/Lb: **B6**

Date of Birth: **B6**

Color: **B6**

Check-in Date: **B6**

Patient ID: **B6**

Owner Name: **B6**

Ref Doctor: **B6**

Ref Phone: **B6**

B6

B6

B6

B6

B6

Client: B6
 Patient: B6

Anesthesia Record & checklist

B6

Patient: B6 **Client:** B6

Specialty: B6 **Check-in Date:** B6 8/15/13 PM

Facility: B6 **Patient ID:** B6

Sex: B6 **Room Number:** B6

Weight: B6 **Home Phone:** B6

Cell Phone: B6 **Ref. Facility:** B6

Date of Birth: B6 **Ref. Phone:** B6

Color: B6

<p>Active Presence of Patient Confirmed by Anesthesia Team</p> <p><input type="checkbox"/> Patient ID, procedure, & procedure site</p> <p><input type="checkbox"/> All vital signs and vital complete</p> <p><input type="checkbox"/> Any weight changes patient can tolerate</p> <p><input type="checkbox"/> Check on chest treated & signed by anesthesiologist</p> <p><input type="checkbox"/> Patient stable in position</p> <p>Confirmed by Anesthesia Team</p> <p><input type="checkbox"/> Just check & proceed</p> <p>In the <input type="checkbox"/> OR</p> <p><input type="checkbox"/> Anesthesia machine checked and portable value inputs</p> <p><input type="checkbox"/> Patient ready to separate vital</p> <p><input type="checkbox"/> In the, nasal, equipment available</p> <p><input type="checkbox"/> All of significant blood loss</p> <p><input type="checkbox"/> All in the, blood type (if crossmatch) and appropriate blood available</p> <p style="text-align: center;">This form remains with the patient through recovery</p>	<p>After Induction in Pre-Op Confirmed by Anesthesia Team</p> <p><input type="checkbox"/> Anesthesia work up completed</p> <p>In the <input type="checkbox"/> OR</p> <p><input type="checkbox"/> Confirms for other antibiotic prophylaxis and available</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Number of catheters placed is appropriate for patient needs</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No, additional catheters placed</p> <p><input type="checkbox"/> Before skin incision</p> <p>Confirmed by Anesthesia Team</p> <p><input type="checkbox"/> Anesthetist ID, induction, & procedure site checked</p> <p><input type="checkbox"/> Confirms for other vital requested & present within the prev. 60 min</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Anesthesia status</p> <p><input type="checkbox"/> Any specific anesthetic concerns</p> <p><input type="checkbox"/> VSA <input type="checkbox"/> Case <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Complete status</p> <p><input type="checkbox"/> All VSA & support <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Anesthetist blood loss</p> <p><input type="checkbox"/> Surgery includes fluids</p> <p><input type="checkbox"/> Administration into skin confirmed</p>	<p>Pre-Op to leaving OR Confirmed by Anesthesia Team</p> <p><input type="checkbox"/> Phone call to pathology</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Anesthesia Service Issues</p> <p><input type="checkbox"/> Any concerns for patient recovery?</p> <p><input type="checkbox"/> Progress Status</p> <p><input type="checkbox"/> Any concerns for patient recovery?</p> <p><input type="checkbox"/> A valid release patient will spend the morning</p> <p><input type="checkbox"/> Patient can receive fluids</p> <p><input type="checkbox"/> In the <input type="checkbox"/> OR</p> <p><input type="checkbox"/> Which volume</p> <p><input type="checkbox"/> Additional independent inputs</p> <p><input type="checkbox"/> All Yes</p> <p><input type="checkbox"/> In the <input type="checkbox"/> OR</p> <p><input type="checkbox"/> Which anesthetic technique</p> <p><input type="checkbox"/> Standard</p> <p><input type="checkbox"/> A, Express <input type="checkbox"/> B, call</p> <p><input type="checkbox"/> Surgery includes fluids</p> <p><input type="checkbox"/> Anesthetist ID, induction, & procedure site checked</p> <p><input type="checkbox"/> Surgery includes fluids</p> <p><input type="checkbox"/> Date <input type="checkbox"/> Time</p> <p><input type="checkbox"/> B6</p> <p><input type="checkbox"/> B6</p> <p><input type="checkbox"/> B6</p> <p><input type="checkbox"/> B6</p> <p><input type="checkbox"/> B6</p> <p><input type="checkbox"/> B6</p>
--	--	---

Client:
Patient:

B6

Anesthesia Record & checklist

[Faint, mostly illegible text from an anesthesia record and checklist, including various fields and checkboxes.]

Client: **B6**
 Patient: **B6**

transfusion request and monitoring form **B6**

B6

**TUFTS U
TRANSFUSION REQUE**

DATE: **B6** **B6**

PATIENT WEIGHT: **B6** kg

PATIENT BLOOD TYPE:
 Feline: A B
 Canine: 1.1 Neg 1.1 Pos **Unknown**

Patient: **B6**
 Client: **B6**
 Species: Canine
 Breed: **B6**
 Sex: **B6**
 Weight kg: **B6**
 Date of Birth: **B6**
 Color: **B6**

Check-in Date: **B6** 1:13 PM
 Patient ID: **B6**
 Home Phone: **B6**
 Ref Facility: **B6**
 Ref Phone: **B6**

CHARGE CODE	BLOOD PRODUCT	DONOR#	DONATION DATE	BLOOD TYPE
I / FH	Cryp x 2	lot# 1007-15	Exp B6	

First transfusion: Yes No Unknown
 Unit Crossmatched: Yes No

CHARGE CODES:

CANINE:
 pRBCs full unit: I1TF Platelet Rich Plasma: I1TG
 pRBCs 1/2 unit: I1TE Lyophilized Cryoprecipitate: **I1TE**
 pRBCs 1/4 unit: I1TP Frozen Cryoprecipitate: I1TN
 Whole Blood: I1TI Albumin: I1TM
 FFP full unit: I1TB
 FFP 1/2 unit: I1TA
 FFP 1/4 unit: I1TR

FELINE:
 pRBCs: I1TD
 Whole Blood: I1TC
 FFP: I1TJ

***REFER TO BACK OF SHEET FOR ANY POSSIBLE TRANSFUSION REACTION AND RECORD**

PRE-TRANSFUSION PCV/TS (color of serum): _____ / _____ PT/PTT: _____ / _____

Time	T	P	Pulse Quality	RR/RE	mmv/CRT	Mentation	Other Observations	Recorder's Initials
BASELINE	B6							
0 min								
15 min								
30 min								
1 hr								
2 hr								
3 hr								
4 hr								
5 hr								

POST-TRANSFUSION (1-2hr) PCV/TS (color of serum): _____ / _____ PT/PTT: _____ / _____

Blue copy: Patient Record Yellow Copy: Blood Bank Pink Copy: Accounting

B6

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Report Details - EON-374789

ICSR: 2060600
Type Of Submission: Initial
Report Version: FPSR.FDA.PETF.V.V1
Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type: Voluntary
Report Submission Date: 2018-12-27 10:47:28 EST

Reported Problem:
Problem Description: Arrhythmia identified at primary care vet on 11/15/18. Evaluated at Tufts **B6** and diagnosed DCM with VPCs and APCs. Eating unbalanced homecooked diet. WB taurine: **B6** plasma not measured because owner had started taurine supplementation). Owner was recommended to change diet and we will recheck in 3 months
Date Problem Started: 11/15/2018
Concurrent Medical Problem: Yes
Pre Existing Conditions: **B6**
Outcome to Date: Stable

Product Information:
Product Name: Homecooked diet - see diet history in medical record
Product Type: Other
Lot Number:
Product Use Information:
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: **B6**
Type Of Species: Dog
Type Of Breed: Doberman Pinscher
Gender: Male
Reproductive Status: Neutered
Weight: 40.9 Kilogram
Age: **B6** Years
Assessment of Prior Health: Good
Number of Animals Given the Product: 1
Number of Animals Reacted: 1
Owner Information:
Owner Information provided: Yes
Contact: **Name:** **B6**
Phone: **B6**
Email: **B6**
Address: **B6**
United States
Healthcare Professional Information:
Practice Name: Tufts Cummings School of Veterinary Medicine
Contact: **Name:** Lisa Freeman
Phone: (508) 887-4523

		Email: lisa.freeman@tufts.edu
		Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523 Email: lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	rpt_medical_record_preview.pdf
	Description:	B6 medical records
	Type:	Medical Records

Report Details - EON-376363

ICSR:	2061172			
Type Of Submission:	Initial			
Report Version:	FPSR.FDA.PETF.V.V1			
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)			
Reporting Type:	Voluntary			
Report Submission Date:	2019-01-14 17:14:59 EST			
Reported Problem:	Problem Description:	Eating BEG diet; developed DCM and CHF 4/11/18 Owner changed diet to Royal Canin Early Cardiac and dog has improved significantly. Will recheck again in 3 months. Have not gotten approval for you to contact owner but sent an email today		
	Date Problem Started:	04/11/2018		
	Concurrent Medical Problem:	No		
	Outcome to Date:	Better/Improved/Recovering		
Product Information:	Product Name:	Zignature kangaroo dry		
	Product Type:	Pet Food		
	Lot Number:			
	Package Type:	BAG		
	Product Use Information:	Description:	See diet history for more details. Zignature Sept 2017-April 2017 Acana Pork/Squash before that	
	Manufacturer /Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Retriever - Golden		
	Gender:	Female		
	Reproductive Status:	Neutered		
	Weight:	26.3 Kilogram		
	Age:	B6 Years		
	Assessment of Prior Health:	Excellent		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	Yes	
		Contact:	Name:	B6
			Phone:	B6
			Email:	B6
Address:	B6 United States			
Healthcare Professional Information:	Practice Name:	Tufts Cummings School of Veterinary Medicine		
	Contact:	Name:	Lisa Freeman	
		Phone:	(508) 887-4523	
		Email:	lisa.freeman@tufts.edu	

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Sender Information:

Name: Lisa Freeman

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Contact: **Phone:** 5088874523
Email: lisa.freeman@tufts.edu

Permission To Contact Sender: Yes

Preferred Method Of Contact: Email

Additional Documents:

Attachment: rpt_medical_record_preview [B6] pdf

Description: Records

Type: Medical Records

From: Related PFR Event <pfrsignificantactivitycreation@fda.hhs.gov>
To: Carey, Lauren; Cleary, Michael *; HQ Pet Food Report Notification;
B6
Sent: 3/21/2019 3:41:24 PM
Subject: Homecooked diet - see diet history in medical record: Lisa Freeman - EON-382947
Attachments: 2064359-report.pdf; 2064359-attachments.zip

A PFR Report has been received and Related PFR Event [EON-382947] has been created in the EON System.

A "PDF" report by name "2064359-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2064359-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-382947

ICSR #: 2064359

EON Title: Related PFR Event created for Homecooked diet - see diet history in medical record; 2064359

AE Date	11/15/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Doberman Pinscher		
Age	B6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2064359

Product Group: Other

Product Name: Homecooked diet - see diet history in medical record

Description: Arrhythmia identified at primary care vet on 11/15/18. Evaluated at Tufts 12/5/18 and diagnosed DCM with VPCs and APCs. Eating unbalanced homecooked diet. WB taurine B6 (plasma not measured because owner had started taurine supplementation). Owner was recommended to change diet and we will recheck in 3 months

Submission Type: Followup

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Homecooked diet - see diet history in medical record		

This report is linked to:

Initial EON Event Key: EON-374789

Initial ICSR: 2060600

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6

USA

To view this Related PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-382947>

To view the Related PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=10100&issueId=400045&parentIssueTypeId=12>

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Report Details - EON-382947

ICSR:	2064359
Type Of Submission:	Followup
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2019-03-21 11:28:27 EDT
Initial Report Date:	12/27/2018
Parent ICSR:	2060600
Follow-up Report to FDA Request:	Yes

Reported Problem:	Problem Description:	Arrhythmia identified at primary care vet on 11/15/18. Evaluated at Tufts 12/5/18 and diagnosed DCM with VPCs and APCs. Eating unbalanced homecooked diet. WB taurine: B6 (plasma not measured because owner had started taurine supplementation). Owner was recommended to change diet and we will recheck in 3 months
	Date Problem Started:	11/15/2018
	Concurrent Medical Problem:	Yes
	Pre Existing Conditions:	B6
	Outcome to Date:	Stable

Product Information:	Product Name:	Homecooked diet - see diet history in medical record
	Product Type:	Other
	Lot Number:	
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	

Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Doberman Pinscher		
	Gender:	Male		
	Reproductive Status:	Neutered		
	Weight:	40.9 Kilogram		
	Age:	B6 Years		
	Assessment of Prior Health:	Good		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	Yes	
		Contact:	Name:	B6
			Phone:	B6
		Email:	B6	
	Address:	B6		

B6

United States

Healthcare Professional Information:

Practice Name: Tufts Cummings School of Veterinary Medicine

Contact Name: Lisa Freeman

Phone: (508) 887-4523

Email: lisa.freeman@tufts.edu

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Sender Information:

Name: Lisa Freeman

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Contact Phone: 5088874523

Email: lisa.freeman@tufts.edu

Permission To Contact Sender: Yes

Preferred Method Of Contact: Email

Reported to Other Parties: None

Additional Documents:

Attachment: Medical record 12-2018-3-2019-compressed.pdf

Description: Medical record Dec 2018-March 2019

Type: Medical Records

Attachment: Medical record 12-2018-3-2019 2.pdf

Description: Medical record

Type: Medical Records

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent: 12/27/2018 3:56:41 PM
Subject: Homecooked diet - see diet history in medical record: Lisa Freeman - EON-374789
Attachments: 2060600-report.pdf; 2060600-attachments.zip

A PFR Report has been received and PFR Event [EON-374789] has been created in the EON System.

A "PDF" report by name "2060600-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2060600-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-374789

ICSR #: 2060600

EON Title: PFR Event created for Homecooked diet - see diet history in medical record; 2060600

AE Date	11/15/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Doberman Pinscher		
Age	B6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2060600

Product Group: Other

Product Name: Homecooked diet - see diet history in medical record

Description: Arrhythmia identified at primary care vet on 11/15/18. Evaluated at Tufts B6 and diagnosed DCM with VPCs and APCs. Eating unbalanced homecooked diet. WB taurine B6 plasma not measured because owner had started taurine supplementation). Owner was recommended to change diet and we will recheck in 3 months

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Homecooked diet - see diet history in medical record		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-374789>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jsps?decorator=none&e=0&issueType=12&issueId=391798>

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From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification [B6]
Sent: 1/14/2019 10:24:45 PM
Subject: Zignature kangaroo dry: Lisa Freeman - EON-376363
Attachments: 2061172-report.pdf; 2061172-attachments.zip

A PFR Report has been received and PFR Event [EON-376363] has been created in the EON System.

A "PDF" report by name "2061172-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2061172-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-376363

ICSR #: 2061172

EON Title: PFR Event created for Zignature kangaroo dry; 2061172

AE Date	04/11/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Better/Improved/Recovering
Breed	Retriever - Golden		
Age	[B6] Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2061172

Product Group: Pet Food

Product Name: Zignature kangaroo dry

Description: Eating BEG diet; developed DCM and CHF 4/11/18 Owner changed diet to Royal Canin Early Cardiac and dog has improved significantly. Will recheck again in 3 months. Have not gotten approval for you to contact owner but sent an email today

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Better/Improved/Recovering

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Zignature kangaroo dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-376363>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=393372>

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Report Details - EON-376446			
ICSR:	2061214		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)		
Reporting Type:	Voluntary		
Report Submission Date:	2019-01-15 15:49:52 EST		
Reported Problem:	Problem Description: 2 syncopal episodes in summer got echo in October 2018 and arrhythmia identified Feeding BEG diets all of her life (Zignature) DCM and VPCs identified 1/9/19 Owner changing to Purina EN Fiber and we will recheck in 3 months BNP elevated, troponin and taurine pending		
	Date Problem Started: 01/09/2019		
	Concurrent Medical Problem: Yes		
	Pre Existing Conditions: Boxer B6 as young dog. Successfully treated		
	Outcome to Date: Stable		
Product Information:	Product Name: Zignature - various flavors (venison, goat, kangaroo, lamb, turkey, pork)		
	Product Type: Pet Food		
	Lot Number:		
	Product Use Information: Description: Rotated proteins/flavors of Zignature for past 8-9 years		
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name: B6		
	Type Of Species: Dog		
	Type Of Breed: Boxer (German Boxer)		
	Gender: Female		
	Reproductive Status: Neutered		
	Weight: 21 Kilogram		
	Age: B6 Years		
	Assessment of Prior Health: Good		
	Number of Animals Given the Product: 1		
	Number of Animals Reacted: 1		
	Owner Information:	Owner Information provided: Yes	
		Contact:	Name: B6
			Phone: B6
			Email: B6
Address: B6 United States			
Healthcare Professional Information:	Practice Name: Tufts Cummings School of Veterinary Medicine		
	Contact:	Name: Lisa Freeman	
		Phone: (508) 887-4523	

		Email: lisa.freeman@tufts.edu
		Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523 Email: lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	rpt_medical_record_preview [B6].pdf
	Description:	Records
	Type:	Medical Records

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent: 2/24/2019 9:32:37 PM
Subject: Poulin Pro Form Lamb and Rice Adult Maintenance Dry: Lisa Freeman - EON-380706
Attachments: 2063113-report.pdf; 2063113-attachments.zip

A PFR Report has been received and PFR Event [EON-380706] has been created in the EON System.

A "PDF" report by name "2063113-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2063113-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380706

ICSR #: 2063113

EON Title: PFR Event created for Poulin Pro Form Lamb and Rice Adult Maintenance Dry; 2063113

AE Date	12/22/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Irish Wolfhound		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063113

Product Group: Pet Food

Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry

Description: Had B6 in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnl elevated. Owner already changed diet in January to Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Poulin Pro Form Lamb and Rice Adult Maintenance Dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-380706>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=397715>

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Report Details - EON-380706

ICSR: 2063113
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-02-24 16:24:11 EST

Reported Problem:
Problem Description: Had **B6** in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.
Date Problem Started: 12/22/2018
Concurrent Medical Problem: Yes
Pre Existing Conditions: **B6** Sept and Dec 2018
Outcome to Date: Stable

Product Information:
Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry
Product Type: Pet Food
Lot Number:
Package Type: BAG
Product Use Information: **Description:** Please see diet history form for more details
Manufacturer /Distributor Information:
Purchase Location Information:

Animal Information:
Name: **B6**
Type Of Species: Dog
Type Of Breed: Irish Wolfhound
Gender: Female
Reproductive Status: Intact
Pregnancy Status: Not Pregnant
Lactation Status: Not lactating
Weight: 60.5 Kilogram
Age: 6 Years
Assessment of Prior Health: Good
Number of Animals Given the Product: 1
Number of Animals Reacted: 1
Owner Information: **Owner Information provided:** Yes
Contact: **Name:** **B6**
Phone: **B6**
Email: **B6**
Address: **B6**

		B6 United States
Healthcare Professional Information:	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Contact Name:	Lisa Freeman
	Phone:	(508) 887-4523
	Email:	lisa.freeman@tufts.edu
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact Phone:	5088874523
	Contact Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	cbc and profile.pdf
	Description:	Will send by email
	Type:	Medical Records

From: Related PFR Event <pfrsignificantactivitycreation@fda.hhs.gov>
To: Carey, Lauren; Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 6/11/2019 3:08:57 PM
Subject: Poulin Pro Form Lamb and Rice Adult Maintenance Dry: Lisa Freeman - EON-390164
Attachments: 2068069-report.pdf; 2068069-attachments.zip

A PFR Report has been received and Related PFR Event [EON-390164] has been created in the EON System.

A "PDF" report by name "2068069-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2068069-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-390164

ICSR #: 2068069

EON Title: Related PFR Event created for Poulin Pro Form Lamb and Rice Adult Maintenance Dry; 2068069

AE Date	12/22/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Irish Wolfhound		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2068069

Product Group: Pet Food

Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry

Description: Had [B6] in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to

Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.

Submission Type: Followup

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Poulin Pro Form Lamb and Rice Adult Maintenance Dry		

This report is linked to:

Initial EON Event Key: EON-380706

Initial ICSR: 2063113

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6
USA

To view this Related PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-390164>

To view the Related PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=10100&issueId=407436&parentIssueTypeId=12>

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Report Details - EON-390164

ICSR:	2068069
Type Of Submission:	Followup
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2019-06-11 11:03:06 EDT
Initial Report Date:	02/24/2019
Parent ICSR:	2063113
Follow-up Report to FDA Request:	Yes

Reported Problem:	Problem Description:	Had B6 in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.
	Date Problem Started:	12/22/2018
	Concurrent Medical Problem:	Yes
	Pre Existing Conditions:	B6 Sept and Dec 2018
	Outcome to Date:	Stable

Product Information:	Product Name:	Poulin Pro Form Lamb and Rice Adult Maintenance Dry
	Product Type:	Pet Food
	Lot Number:	
	Package Type:	BAG
	Product Use Information:	Description: Please see diet history form for more details
	Manufacturer /Distributor Information:	
	Purchase Location Information:	

Animal Information:	Name:	B6
	Type Of Species:	Dog
	Type Of Breed:	Irish Wolfhound
	Gender:	Female
	Reproductive Status:	Intact
	Pregnancy Status:	Not Pregnant
	Lactation Status:	Not lactating
	Weight:	60.5 Kilogram
	Age:	6 Years
	Assessment of Prior Health:	Good
	Number of Animals Given the Product:	1
	Number of Animals Reacted:	1
	Owner Information:	Owner Information provided: Yes
	Contact: Name: B6	
	Phone: B6	

		Email: B6
	Address:	B6 United States
Healthcare Professional Information:	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Contact: Name:	Lisa Freeman
	Phone:	(508) 887-4523
	Email:	lisa.freeman@tufts.edu
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact: Phone:	5088874523
	Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	Follow-up med records pt 2.pdf
	Description:	Med Records
	Type:	Medical Records
	Attachment:	Follow-up med records pt 1.pdf
	Description:	Med Records
	Type:	Medical Records
	Attachment:	ECG 5-9-2019.pdf
	Description:	ECG
	Type:	Medical Records

Client:
Patient:

B6

ECG from cardio

B6

B6

10:41:01 AM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

12-Lead Standard Placement

B6

Client: **B6**
Patient:

ECG from cardio

B6

B6

10:41:30 AM

Page 1 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

12 Lead: Standard Placement

B6

Client:
Patient:

B6

ECG from cardio

B6

B6

10:41:30 AM

Page 2 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Discharge Instructions

Patient

Name: B6
Species: Canine
Gray Female Irish Wolfhound
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6

Date: B6

Diagnoses:

Slightly decreased cardiac contractility - stable to a bit improved

History of single ventricular premature contractions (VPCs) - none seen today

Suspected geriatric-onset laryngeal paralysis and paresis (GOLPP) with recurrent B6

Clinical Findings:

Thank you for bringing B6 to the Tufts Cardiology Service for a recheck through the DCM study.

You report that B6 is doing much better at home, and her breathing has improved since started B6. You did note that she had a laceration of the foot pad on her right hind foot, which appears to be healing well today. B6 echocardiogram today demonstrated that the contractility of her heart is still slightly abnormal, but appears to be a bit better than on her previous exam. The chambers in her heart are normal sized and the walls of the chambers are normal thickness. Her ECG (electrocardiogram) did not show any arrhythmias (irregular heart beats).

B6 did not show any signs of worsening cardiac disease on examination today. We submitted blood today to recheck these tests, and will call or email you when we get the results.

Monitoring at Home:

Please monitor B6 for changes in appetite, vomiting, diarrhea, coughing, difficulty breathing, exercise intolerance, lethargy, or any other changes. If you note any of these, please contact us or bring her to see a veterinarian as soon as possible.

Diet Suggestions:

Please continue feeding B6 the Purina Proplan food.

Exercise Recommendations:

B6 does not need any exercise restriction at this time. If you notice that she is not tolerating exercise, stop and contact a veterinarian.

Medications:

Continue B6 as previously directed.

Recheck Visits: We have scheduled B6 for a recheck examination and echo on August 12th at 11:30am.

Thank you for entrusting us with B6's care, she is such a great patient! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case B6

Owner B6

Discharge Instructions

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6 Canine
years Old Female Irish Wolfhound
Gray

Cardiology Appointment Report DCM STUDY

Date: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Student: B6 V20

Presenting Complaint: DCM study 3m recheck

Concurrent Diseases: Recurrent aspiration B6 hindlimb weakness (suspect GOLPP)

General Medical History: 1st evaluated in 12/18 for acute resp distress B6 Echo showed mildly deac contractile fxn, no cardiomegaly. Has occasional VPCs.

Had bronchoscopy, TTW, chest rads and course of ABX in april for B6

Resp fxn has improved since starting simplicef, breathing much better, no coughing

B6

Drags L foot

Diet and Supplements:

Purina ProPlan - 2c BID

No supplements

Cardiovascular History:

Prior CHF diagnosis? n

Prior heart murmur? n

Prior ATE? n

Prior arrhythmia? y VPCs

Monitoring respiratory rate and effort at home? n - but usually very slow RR - "has to check if still breathing"

Cough? no
Shortness of breath or difficulty breathing? no
Syncope or collapse? no
Sudden onset lameness? no
Exercise intolerance? no

Current Medications Pertinent to CV System:

B6

Cardiac Physical Examination:

B6

Muscle condition:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Normal | <input checked="" type="checkbox"/> Moderate cachexia |
| <input checked="" type="checkbox"/> Mild muscle loss | <input checked="" type="checkbox"/> Marked cachexia |

Cardiovascular Physical Exam:

Murmur Grade:

- | | |
|--|---|
| <input checked="" type="checkbox"/> None | <input checked="" type="checkbox"/> IV/VI |
| <input checked="" type="checkbox"/> I/VI | <input checked="" type="checkbox"/> V/VI |
| <input checked="" type="checkbox"/> II/VI | <input checked="" type="checkbox"/> VI/VI |
| <input checked="" type="checkbox"/> III/VI | |

Jugular vein:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Bottom 1/3 of the neck | <input checked="" type="checkbox"/> 1/2 way up the neck |
| <input checked="" type="checkbox"/> Middle 1/3 of the neck | <input checked="" type="checkbox"/> Top 2/3 of the neck |

Arterial pulses:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Weak | <input checked="" type="checkbox"/> Bounding |
| <input checked="" type="checkbox"/> Fair | <input checked="" type="checkbox"/> Pulse deficits |
| <input checked="" type="checkbox"/> Good | <input checked="" type="checkbox"/> Pulsus paradoxus |
| <input checked="" type="checkbox"/> Strong | <input checked="" type="checkbox"/> Other: |

Arrhythmia:

- | | |
|---|---|
| <input checked="" type="checkbox"/> None | <input checked="" type="checkbox"/> Bradycardia |
| <input checked="" type="checkbox"/> Sinus arrhythmia | <input checked="" type="checkbox"/> Tachycardia |
| <input checked="" type="checkbox"/> Premature beats - possible rare, only heard by one person | |

Gallop:

- | | |
|---|--|
| <input checked="" type="checkbox"/> Yes | <input checked="" type="checkbox"/> Pronounced |
| <input checked="" type="checkbox"/> No | <input checked="" type="checkbox"/> Other: |

Intermittent

Pulmonary assessments:

- Eupneic
- Mild dyspnea
- Marked dyspnea
- Normal BV sounds
- Pulmonary crackles
- Wheezes
- Upper airway stridor

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites
- Marked ascites

Problems:

DCM-like changes

Arrhythmias

Diagnostic plan:

- Echocardiogram
- Chemistry profile
- ECG
- Renal profile
- Blood pressure
- Dialysis profile
- Thoracic radiographs
- NT-proBNP
- Troponin I
- Other tests: DCM study

B6

Mitral inflow:

- Summated
- Normal
- Delayed relaxation
- Pseudonormal
- Restrictive

ECG findings:

B6

Assessment and recommendations:

Echocardiogram reveals mildly reduced contractile function, but there may be slight improvement in vigor of contraction today. No arrhythmia was observed compared to relatively frequent VPCs last time. It is unclear whether these improvements are related to daily variation, better control of pneumonia, or actual improvement in cardiac status. Blood work submitted for DCM study. Recheck in 3 months for echo and blood work +/- EKG for study.

Final Diagnosis:

Mild decreased of the contractile function r/o variant of normal vs. DCM (diet related vs. breed related)

M-Mode

IVSd	B6	cm
LVIDd		cm
LVPWd		cm
IVSs		cm
LVIDs		cm
LVPWs		cm
EDV(Teich)		ml
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)		ml
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA	cm	
TAPSE	cm	

M-Mode Normalized

IVSdN	B6	(0.290 - 0.520)
LVIDdN		(1.350 - 1.730)
LVPWdN		(0.330 - 0.530)
IVSsN		(0.430 - 0.710)
LVIDsN		(0.790 - 1.140)
LVPWsN		(0.530 - 0.780)
Ao Diam N		(0.680 - 0.890)
LA Diam N		(0.640 - 0.900) !

2D

SA LA	B6	cm
Ao Diam		cm
SA LA / Ao Diam		
IVSd		cm
LVIDd		cm
LVPWd		cm
EDV(Teich)		ml
IVSs		cm
LVIDs		cm
LVPWs		cm
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)		ml
LVLd AAC		cm

LVEDV MOD A4C
LVLS A4C
LVESV MOD A4C
LVEF MOD A4C
SV MOD A4C

B6

ml
cm
ml
%
ml

Doppler

MV E Vel
MV DecT
MV Dec Slope
MV A Vel
MV E/A Ratio
E'
E/E'
A'
S'
AV Vmax
AV maxPG
PV Vmax
PV maxPG

B6

m/s
ms
m/s
m/s

m/s

m/s
m/s
m/s
mmHg
m/s
mmHg

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 4/22/2019 5:16:54 PM
Subject: Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food; [B6] - EON-385697
Attachments: 2066104-report.pdf; 2066104-attachments.zip

A PFR Report has been received and PFR Event [EON-385697] has been created in the EON System.

A "PDF" report by name "2066104-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2066104-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-385697

ICSR #: 2066104

EON Title: PFR Event created for Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food, Blue Buffalo Life Protection Adult Dog Food Natural Chicken & Brown Rice; 2066104

AE Date	03/17/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Retriever - Golden		
Age	12 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2066104

Product Group: Pet Food

Product Name: Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food, Blue Buffalo Life Protection Adult Dog Food, Natural Chicken & Brown Rice

Description: Presented to rDVM 4/15 and 4/16 for a non-productive cough x 1 month and decreased appetite. O suspected cough was due to seasonal allergies as patient has a hx of allergies. RDVM was suspicious of pericardial effusion vs DCM. Enlarged heart on radiograph. Patient was rx'd [B6] and referred to Tufts

for further evaluation. Diet history: Blue Buffalo chicken limited ingredient x 1 year. Previously eating Blue Buffalo chicken grain-free since 2010. Echo revealed 3+ MR, reduced contractile function, trace pericardial effusion, ruptured chordae, no obvious heart base mass, no obvious RAA mass. Suspect CHF

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Blue Buffalo Life Protection Adult Dog Food, Natural Chicken & Brown Rice		
Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food		

Sender information

B6

USA

Owner information

B6

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-385697>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=12&issueId=402825>

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Report Details - EON-385697		
ICSR:	2066104	
Type Of Submission:	Initial	
Report Version:	FPSR.FDA.PETF.V.V1	
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)	
Reporting Type:	Voluntary	
Report Submission Date:	2019-04-22 13:04:20 EDT	
Reported Problem:	Problem Description:	Presented to rDVM 4/15 and 4/16 for a non-productive cough x 1 month and decreased appetite. O suspected cough was due to seasonal allergies as patient has a hx of allergies. RDVM was suspicious of pericardial effusion vs DCM. Enlarged heart on radiograph. Patient was rx'd pimobendan and referred to Tufts for further evaluation. Diet history: Blue Buffalo chicken limited ingredient x 1 year. Previously eating Blue Buffalo chicken grain-free since 2010. Echo revealed 3+ MR, reduced contractile function, trace pericardial effusion, ruptured chordae, no obvious heart base mass, no obvious RAA mass. Suspect CHF
	Date Problem Started:	03/17/2019
	Concurrent Medical Problem:	No
	Outcome to Date:	Stable
Product Information:	Product Name:	Blue Buffalo Life Protection Adult Dog Food, Natural Chicken & Brown Rice
	Product Type:	Pet Food
	Lot Number:	
	Package Type:	BAG
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
	Product Name:	Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food
	Product Type:	Pet Food
	Lot Number:	
	Package Type:	BAG
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
Animal Information:	Name:	
	Type Of Species:	Dog
	Type Of Breed:	Retriever - Golden
	Gender:	Male
	Reproductive Status:	Neutered
	Weight:	38 Kilogram
	Age:	12 Years
	Assessment of Prior Health:	Excellent
	Number of Animals Given the Product:	1
	Number of Animals Reacted:	1
	Owner Information:	Owner Yes

		<p>Information provided:</p> <p>Contact: Name: B6 Phone: B6 Email: B6</p> <p>Address: B6 United States</p> <p>Healthcare Professional Information:</p> <p>Practice Name: Tufts Cummings School of Veterinary Medicine</p> <p>Contact: Name: B6 Phone: B6 Email: B6</p> <p>Address: 200 Westboro Road North Grafton Massachusetts 01536 United States</p> <p>Practice Name: Tufts University</p> <p>Contact: Name: Lisa Freeman Phone: 508-887-4523 Email: lisa.freeman@tufts.edu</p> <p>Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States</p> <p>Permission to Release Records to FDA: Yes</p>
Sender Information:		<p>Name: B6</p> <p>Address: 200 Westboro Road North Grafton Massachusetts 01536 United States</p> <p>Contact: Phone: B6 Email: B6</p> <p>Permission To Contact Sender: Yes</p> <p>Preferred Method Of Contact: Email</p> <p>Reported to Other Parties: None</p>
Additional Documents:		<p>Attachment: Tufts Medical record.pdf</p> <p>Description: Medical records</p> <p>Type: Medical Records</p>

From: Related PFR Event <pfrsignificantactivitycreation@fda.hhs.gov>
To: Rotstein, David; Cleary, Michael *; HQ Pet Food Report Notification;
[REDACTED] **B6**
Sent: 6/11/2019 6:20:55 PM
Subject: Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food; [REDACTED] **B6** - EON-390198
Attachments: 2068091-report.pdf; 2068091-attachments.zip

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Below is the summary of the report:

EON Key: EON-390198

ICSR #: 2068091

EON Title: Related PFR Event created for Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food, Blue Buffalo Life Protection Adult Dog Food Natural Chicken & Brown Rice; 2068091

AE Date	03/17/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Better/Improved/Recovering
Breed	Retriever - Golden		
Age	12 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2068091

Product Group: Pet Food

Product Name: Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food, Blue Buffalo Life Protection Adult Dog Food, Natural Chicken & Brown Rice

Description: Presented to rDVM 4/15 and 4/16 for a non-productive cough x 1 month and decreased appetite. O

suspected cough was due to seasonal allergies as patient has a hx of allergies. RDVM was suspicious of pericardial effusion vs DCM. Enlarged heart on radiograph. Patient was rx'd [B6] and referred to Tufts for further evaluation. Diet history: Blue Buffalo chicken limited ingredient x 1 year. Previously eating Blue Buffalo chicken grain-free since 2010. Echo revealed 3+ MR, reduced contractile function, trace pericardial effusion, ruptured chordae, no obvious heart base mass, no obvious RAA mass. Suspect CHF Normal plasma and whole blood taurine levels

Submission Type: Followup

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Better/Improved/Recovering

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Blue Buffalo Life Protection Adult Dog Food, Natural Chicken & Brown Rice		
Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food		

This report is linked to:

Initial EON Event Key: EON-385697

Initial ICSR: 2066104

Sender information

[B6]

USA

Owner information

[B6]

USA

To view this Related PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-390198>

To view the Related PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=10100&issueId=407470&parentIssueTypeId=12>

=====

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Report Details - EON-390198

ICSR:	2068091
Type Of Submission:	Followup
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2019-06-11 14:13:53 EDT
Initial Report Date:	04/22/2019
Parent ICSR:	2066104
Follow-up Report to FDA Request:	Yes

Reported Problem:	Problem Description:	Presented to rDVM 4/15 and 4/16 for a non-productive cough x 1 month and decreased appetite. O suspected cough was due to seasonal allergies as patient has a hx of allergies. RDVM was suspicious of pericardial effusion vs DCM. Enlarged heart on radiograph. Patient was rx'd B6 and referred to Tufts for further evaluation. Diet history: Blue Buffalo chicken limited ingredient x 1 year. Previously eating Blue Buffalo chicken grain-free since 2010. Echo revealed 3+ MR, reduced contractile function, trace pericardial effusion, ruptured chordae, no obvious heart base mass, no obvious RAA mass. Suspect CHF Normal plasma and whole blood taurine levels
	Date Problem Started:	03/17/2019
	Concurrent Medical Problem:	No
	Outcome to Date:	Better/Improved/Recovering

Product Information:	Product Name:	Blue Buffalo Life Protection Adult Dog Food, Natural Chicken & Brown Rice
	Product Type:	Pet Food
	Lot Number:	
	Package Type:	BAG
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	
	Product Name:	Blue Buffalo Life Protection Formula Adult Chicken Recipe Grain-Free Dry Dog Food
	Product Type:	Pet Food
	Lot Number:	
	Package Type:	BAG
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	

Animal Information:	Name:	
	Type Of Species:	Dog
	Type Of Breed:	Retriever - Golden
	Gender:	Male
	Reproductive Status:	Neutered
	Weight:	38 Kilogram
	Age:	12 Years
	Assessment of Prior Health:	Excellent

	Number of Animals Given the Product:	1																						
	Number of Animals Reacted:	1																						
	Owner Information:	<table border="1"> <tr> <td>Owner Information provided:</td> <td>Yes</td> </tr> <tr> <td>Contact: Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> <tr> <td>Email:</td> <td>B6</td> </tr> <tr> <td>Address:</td> <td>B6</td> </tr> <tr> <td></td> <td>United States</td> </tr> </table>	Owner Information provided:	Yes	Contact: Name:	B6	Phone:		Email:	B6	Address:	B6		United States										
Owner Information provided:	Yes																							
Contact: Name:	B6																							
Phone:																								
Email:	B6																							
Address:	B6																							
	United States																							
	Healthcare Professional Information:	<table border="1"> <tr> <td>Practice Name:</td> <td>Tufts Cummings School of Veterinary Medicine</td> </tr> <tr> <td>Contact: Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td>B6</td> </tr> <tr> <td>Email:</td> <td>B6</td> </tr> <tr> <td>Address:</td> <td>200 Westboro Road North Grafton Massachusetts 01536 United States</td> </tr> <tr> <td>Practice Name:</td> <td>Tufts University</td> </tr> <tr> <td>Contact: Name:</td> <td>Lisa Freeman</td> </tr> <tr> <td>Phone:</td> <td>508-887-4523</td> </tr> <tr> <td>Email:</td> <td>lisa.freeman@tufts.edu</td> </tr> <tr> <td>Address:</td> <td>200 Westboro Rd North Grafton Massachusetts 01536 United States</td> </tr> <tr> <td>Permission to Release Records to FDA:</td> <td>Yes</td> </tr> </table>	Practice Name:	Tufts Cummings School of Veterinary Medicine	Contact: Name:	B6	Phone:	B6	Email:	B6	Address:	200 Westboro Road North Grafton Massachusetts 01536 United States	Practice Name:	Tufts University	Contact: Name:	Lisa Freeman	Phone:	508-887-4523	Email:	lisa.freeman@tufts.edu	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	Permission to Release Records to FDA:	Yes
Practice Name:	Tufts Cummings School of Veterinary Medicine																							
Contact: Name:	B6																							
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Email:	lisa.freeman@tufts.edu																							
Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States																							
Permission to Release Records to FDA:	Yes																							
Sender Information:	Name:	B6																						
	Address:	200 Westboro Road North Grafton Massachusetts 01536 United States																						
	Contact: Phone:	B6																						
	Email:	B6																						
	Permission To Contact Sender:	Yes																						
	Preferred Method Of Contact:	Email																						
	Reported to Other Parties:	None																						
Additional Documents:	Attachment:	At home ECG readings.pdf																						
	Description:	ECGs																						
	Type:	Medical Records																						

Attachment:	Recheck ECG 4-30-2019.pdf
Description:	Hospital ECG
Type:	Medical Records
Attachment:	Follow-up med records pt 1.pdf
Description:	Med records
Type:	Medical Records
Attachment:	Follow-up med records pt 2.pdf
Description:	Med records
Type:	Medical Records

Client: **B6**
Patient:

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Wednesday, **B6** at 9:07:06 PM
Heart Rate: 85 bpm Duration: 29 s

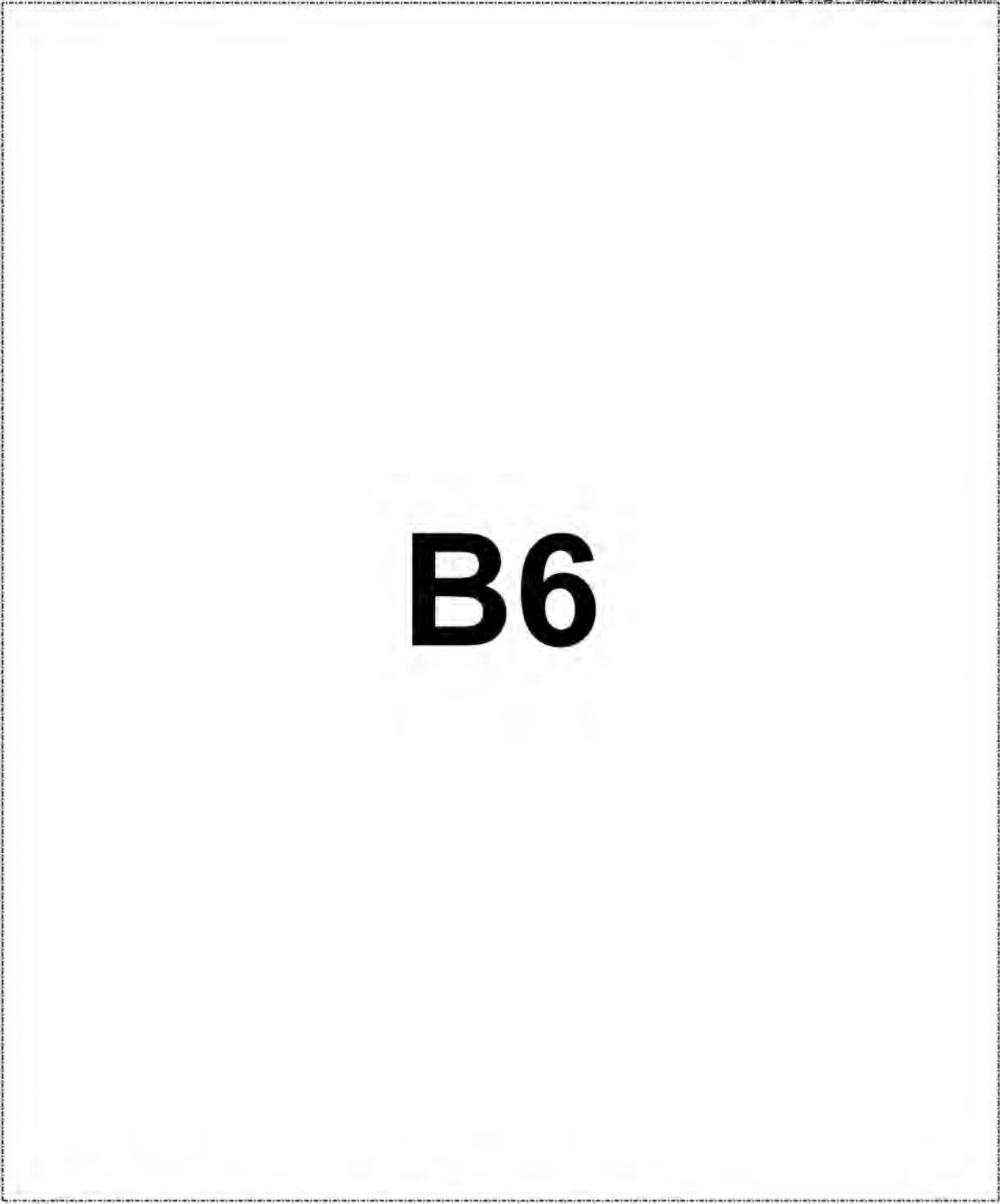


B6

Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Thursday, **B6** at 9:03:43 PM
Heart Rate: 95 bpm Duration: 39 s



Client: **B6**
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Thursday, **B6** at 9:03:43 PM
Heart Rate: 95 bpm Duration: 39 s



B6

Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden Retriever
Recorded: Friday, **B6** at 10:00:45 PM
Heart Rate: 84 bpm Duration: 28 s

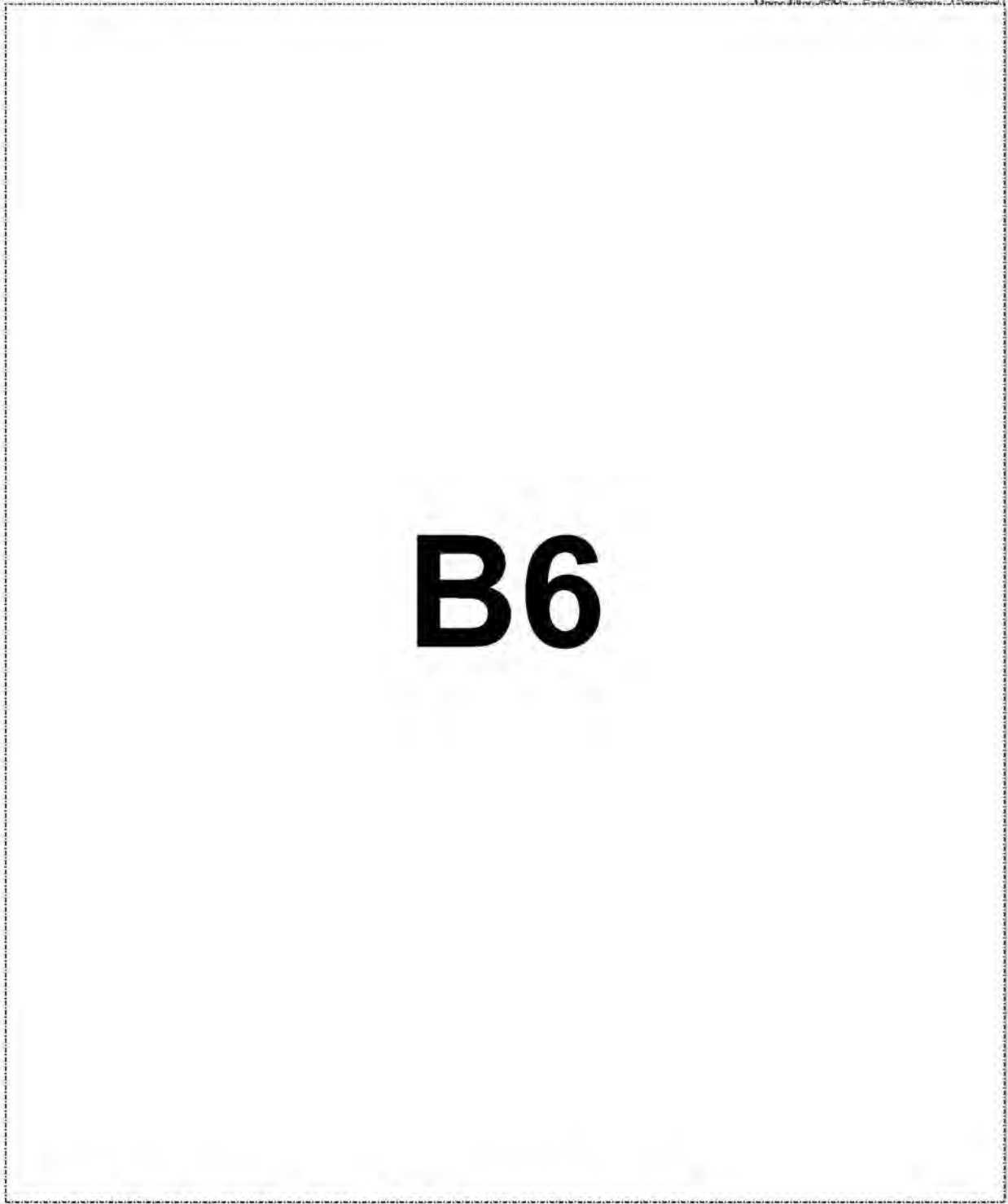


B6

Client:
Patient: **B6**

AliveCor ECG

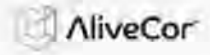
Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Sunday, **B6** at 8:06:48 PM
Heart Rate: 81 bpm Duration: 40 s



Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden Retriever
Recorded: Sunday, **B6** at 8:06:48 PM
Heart Rate: 81 bpm Duration: 40 s



B6

Client: **B6**
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Monday **B6** at 8:43:21 PM
Heart Rate: 98 bpm Duration: 43 s



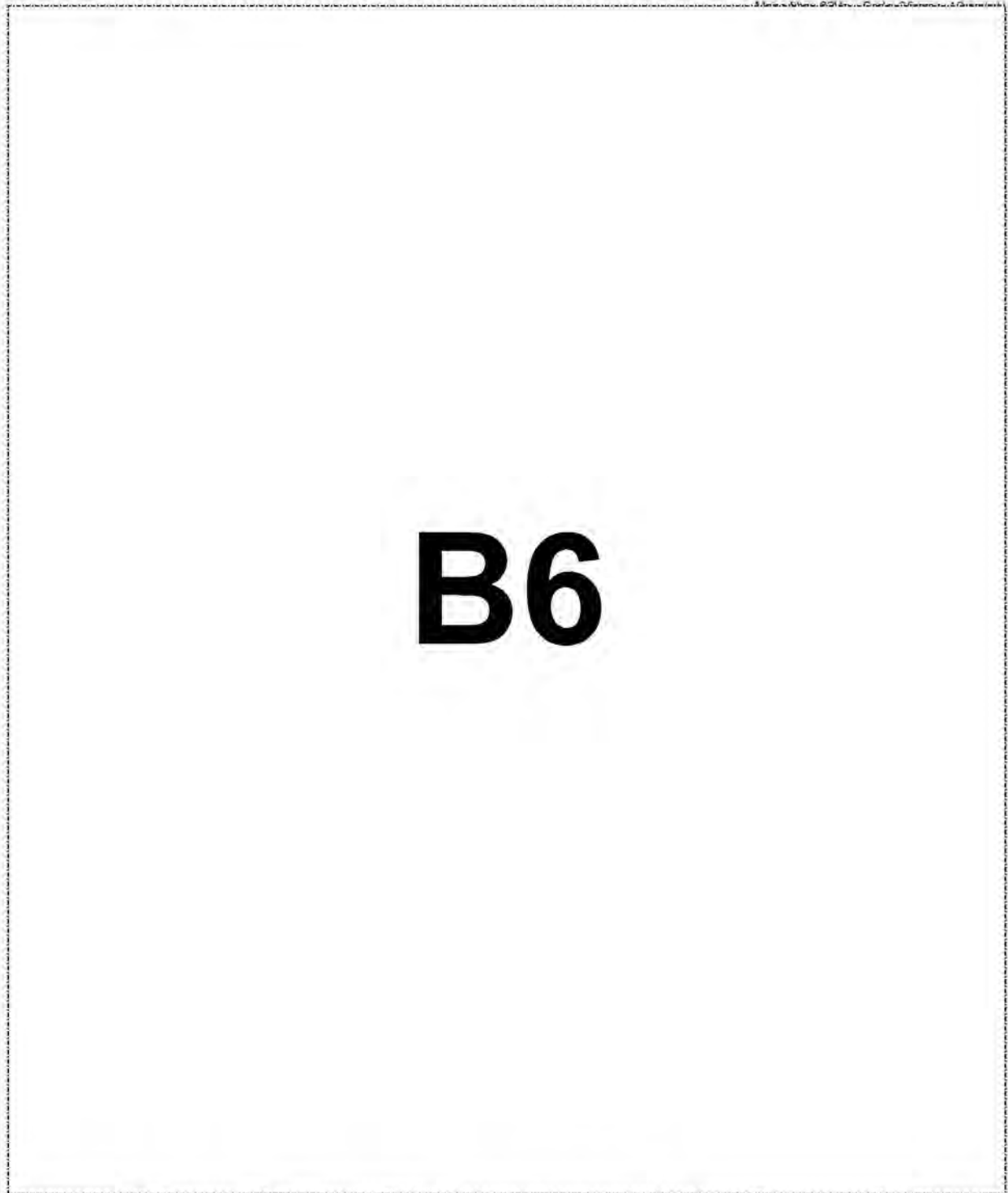
Men. filter: 60Hz Scale: 25mm/s, 1.0mm/mV

B6

Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Monday **B6** at 8:43:21 PM
Heart Rate: 98 bpm Duration: 43 s



Client: **B6**
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Wednesday, **B6** at 9:34:29 PM
Heart Rate: 95 bpm Duration: 39 s



Client: **B6**
Patient:

Alivecor ECG

Patient: **B6**
Breed/Species: Golden / Corgi
Recorded: Wednesday, **B6** at 9:34:29 PM
Heart Rate: 95 bpm Duration: 39 s



Meas. Filter: 60Hz Scale: 25mm/mV

B6

Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden Retriever / Canine
Recorded: Monday, **B6** at 9:41:45 PM
Heart Rate: 95 bpm Duration: 36 s



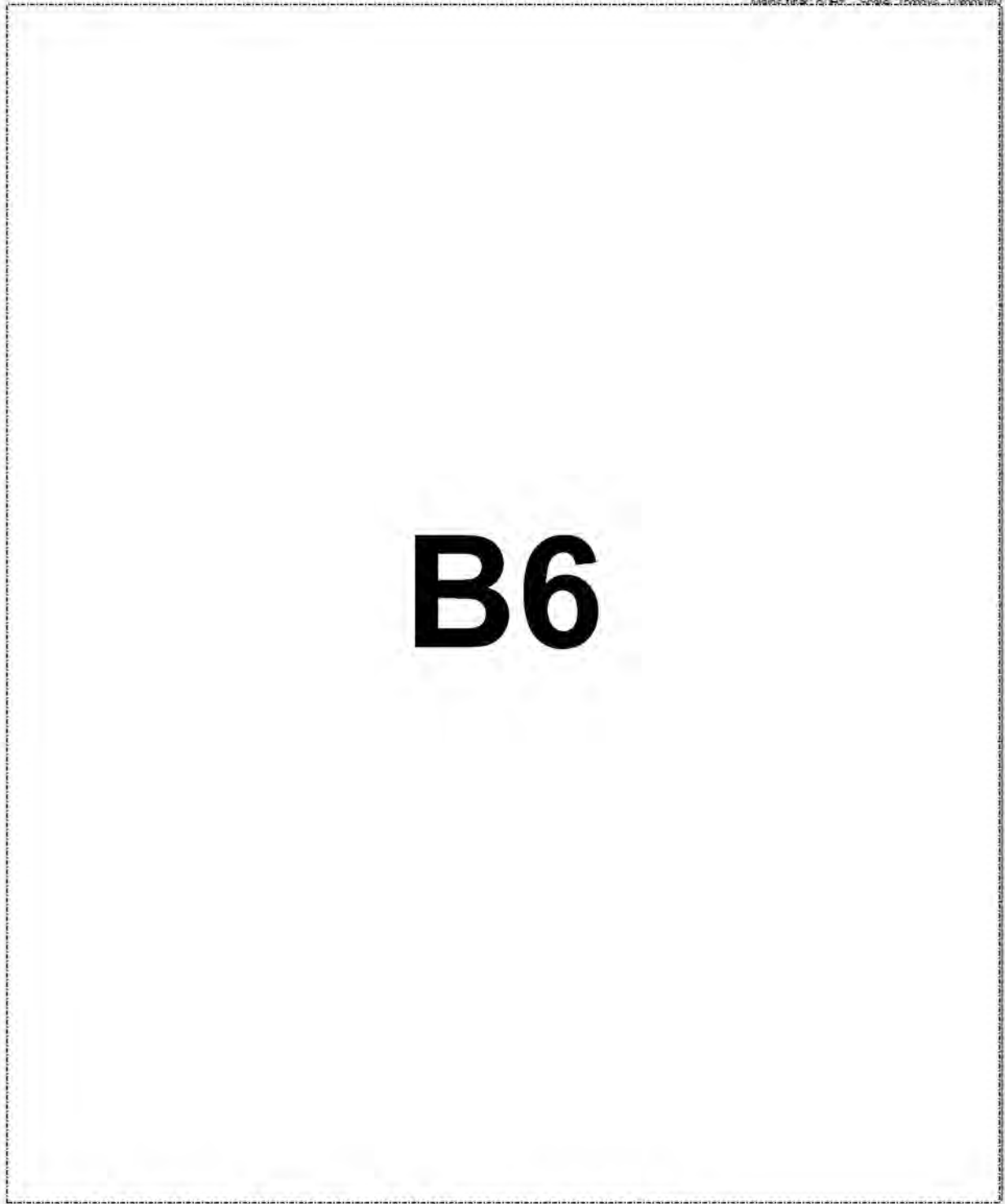
Max. Rate: 60bpm Scale: 25mm/s 10mm/mV

B6

Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Monday, **B6** at 9:41:45 PM
Heart Rate: 95 bpm Duration: 36 s



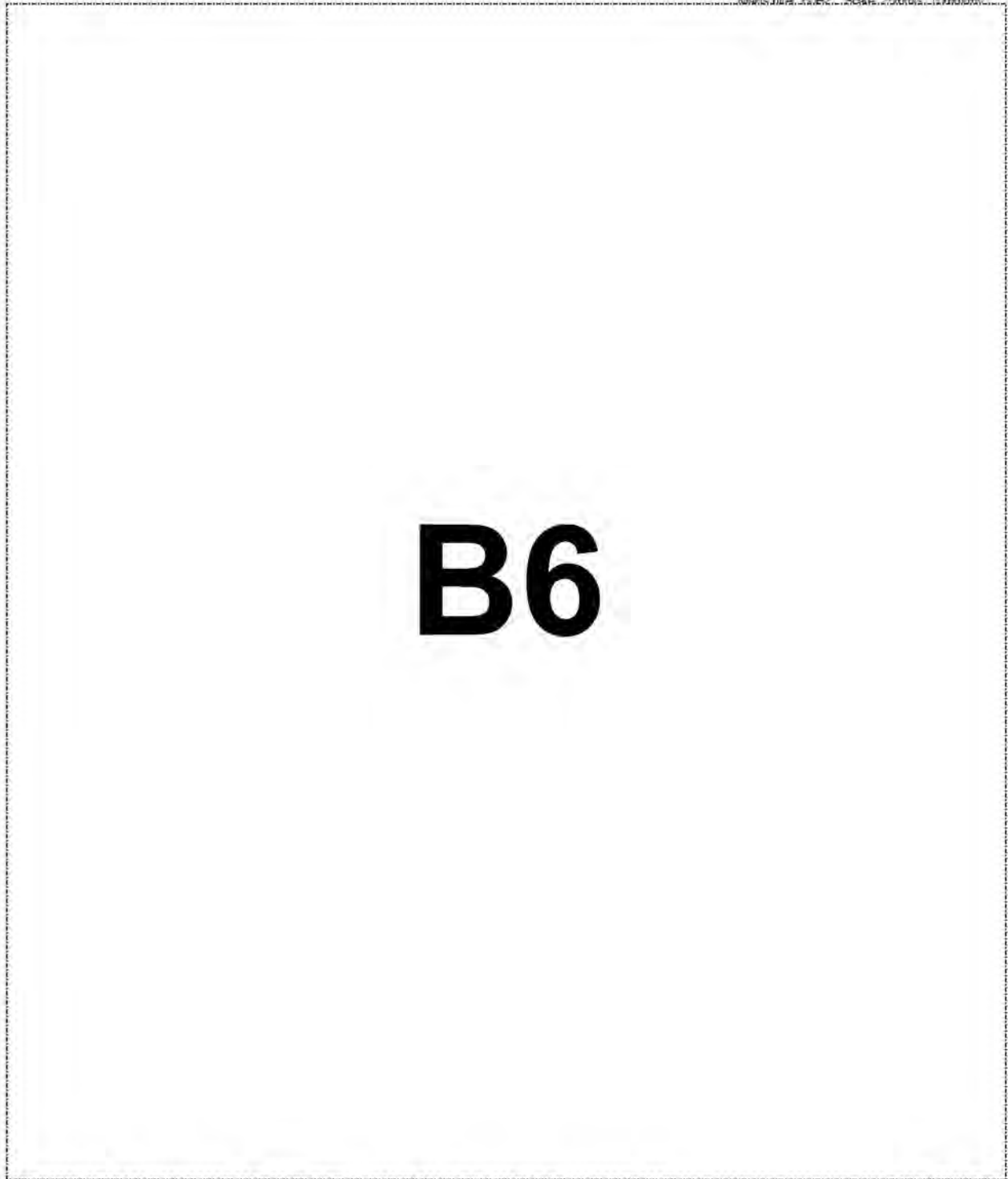
Client: **B6**
Patient:

AliveCor ECG

Patient: **B6**
Breed/Species: Golden Retriever
Recorded: Sunday, **B6** at 9:45:27 PM
Heart Rate: 92 bpm Duration: 32 s



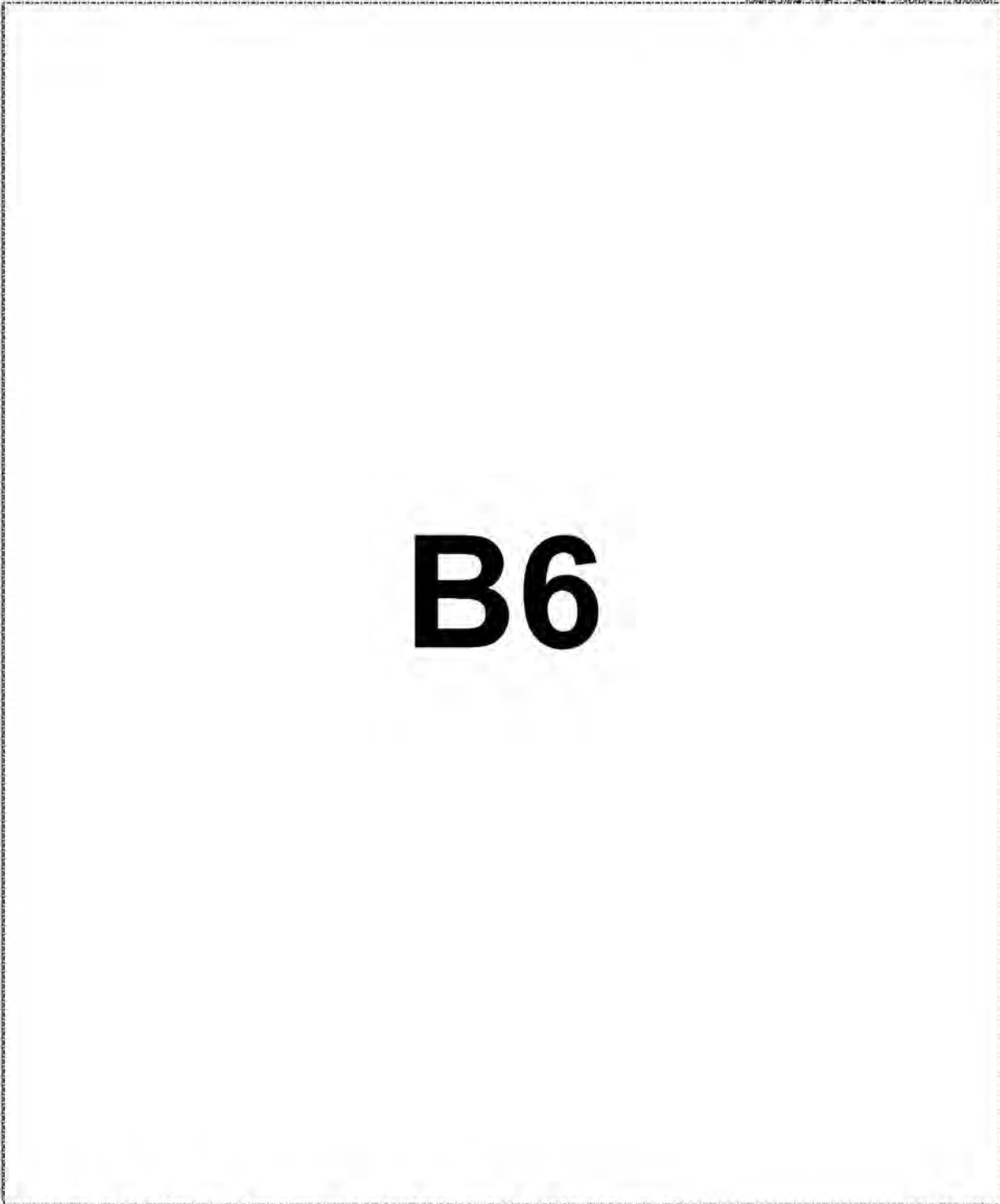
AliveCor ECG Scale: 25mm/s (10mm/mV)



Client:
Patient: **B6**

AliveCor ECG

Patient: **B6**
Breed/Species: Golden / Canine
Recorded: Sunday, **B6** at 9:45:27 PM
Heart Rate: 92 bpm Duration: 32 s



© Copyright 2012, AliveCor Inc. AliveCor's Vet v2.1.4.17, Report v2.0.0, UUID: 21418862-22AF-425E-5233-35A851B633F8 Page 2 of 2

Discharge Instructions
Cardiology Technician Appointment - ENROLLED IN DCM DIET STUDY

Patient

Name: B6
Species: Canine
Gold Male (Neutered) Golden Retriever
Birthdate: B6

Owner

Name: B6
Address: B6

Patient ID: B6

Attending Cardiologist:

John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC

B6

Cardiology Resident:

B6

Cardiology Technician:

B6

Discharge Date: B6

Clinical Findings:

B6 came in today to recheck bloodwork and an ECG. His bloodwork looked great and seems to be tolerating the medications well. The ECG still showed B6. We discussed a few options of the next steps: B6
B6

At this time, it was decided to purchase the B6. We went over the device and how to use it in the room. There are also directions attached to the discharges. I will send the readings to Dr Rush for review when he is back next week and if he feels an additional medication is needed, then i will call or email you with what he recommends.

Monitoring at home:

We would like you to monitor B6 breathing rate and effort at home, ideally during sleep or at a time of rest. The doses of drugs will be adjusted based on the breathing rate and effort. In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled. An increase in breathing rate or effort will usually mean that you should give an extra dose of B6. If difficulty breathing is not improved within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled and/or that B6 be evaluated by an emergency clinic. There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site (<http://vet.tufts.edu/heartsmart/at-home-monitoring/>).

We also want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the belly as these findings indicate that we should do a recheck examination.

If you notice an episode of collapse, it is okay to help the dog get back up; however, most dogs will get up on their own in about 20 minutes. If an episode of collapse occurs, we would like to know about it right away.

Medications:

B6

Recheck Visits:

A recheck has been scheduled for

Thursday, **B6** at 1:00pm with Dr. John Rush

Thank you for entrusting us with **B6** care. Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

B6 was such a good boy today.

Kind Regards

B6 VT, VTS (Cardiology)

Please visit our HeartSmart website for more information

<http://vet.tufts.edu/heartsmart/>

Prescription Refill Disclaimer:

For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the past year in order to obtain prescription medications.

Ordering Food:

Please check with your primary veterinarian to purchase the recommended diet(s). If you wish to purchase your food from us, please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered from online retailers with a prescription/veterinary approval.

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/clinical-studies

Case: **B6**

Owner: **B6**

Discharge Instructions

Client:
Patient:

B6

ECG from cardio

B6

B6

11:53:50 AM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient:

ECG from cardio

B6

B6 11:54:19 AM
Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient:

ECG from cardio

B6

B6 11:54:41 AM
Tufts University
Tufts Cummings School of Vet Med
Cardiology

12 Lead: Standard Placement

B6

Client: **B6**
Patient:

ECG from cardio

B6

B6 11:55:39 AM
Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient:

ECG from cardio

B6

B6

11:58:37 AM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client:
Patient:

B6

ECG from cardio

B6

B6

12:00:51 PM

Tufts University
Tufts Cummings School of Vet Med
Cardiology

12-Lead: Standard Placement

B6

From: Related PFR Event <pfrsignificantactivitycreation@fda.hhs.gov>
To: Rotstein, David; Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 6/11/2019 7:17:00 PM
Subject: Earthborn grain free weight management dry: Lisa Freeman - EON-390207
Attachments: 2068098-report.pdf; 2068098-attachments.zip

A PFR Report has been received and Related PFR Event [EON-390207] has been created in the EON System.

A "PDF" report by name "2068098-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2068098-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-390207

ICSR #: 2068098

EON Title: Related PFR Event created for Earthborn grain free weight management dry; 2068098

AE Date	[B6]	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Died Euthanized
Breed	Doberman Pinscher		
Age	[B6] Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2068098

Product Group: Pet Food

Product Name: Earthborn grain free weight management dry

Description: Diagnosed with DCM, CHF, and atrial fibrillation [B6]. Currently hospitalized. Taurine submitted to UC Davis. Unclear if related to diet, given breed but eating boutique, grain-free diet. Only prior history is traumatic injury in 2015. Genetic testing - negative for DCM1 & DCM2 Normal taurine levels - plasma [B6] whole blood [B6] Patient was humanely euthanized [B6] due to worsening CHF. Specimens were not collected for evaluation per owner.

Submission Type: Followup

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Died Euthanized

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Earthborn grain free weight management dry		

This report is linked to:

Initial EON Event Key: EON-370708

Initial ICSR: 2058678

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6

USA

To view this Related PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-390207>

To view the Related PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none&e=0&issueType=10100&issueId=407479&parentIssueTypeId=12>

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through your local district FDA office.

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Report Details - EON-390207

ICSR:	2068098
Type Of Submission:	Followup
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2019-06-11 15:06:46 EDT
Initial Report Date:	11/09/2018
Parent ICSR:	2058678
Follow-up Report to FDA Request:	Yes

Reported Problem:	Problem Description:	Diagnosed with DCM, CHF, and atrial fibrillation; B6 Currently hospitalized. Taurine submitted to UC Davis. Unclear if related to diet, given breed but eating boutique, grain-free diet. Only prior history is traumatic injury in 2015. Genetic testing - negative for DCM1 & DCM2 Normal taurine levels - plasma; B6 whole blood; B6 Patient was humanely euthanized; B6 due to worsening CHF. Specimens were not collected for evaluation per owner.
	Date Problem Started:	B6
	Concurrent Medical Problem:	No
	Outcome to Date:	Died Euthanized
	Date of Death:	B6

Product Information:	Product Name:	Earthborn grain free weight management dry
	Product Type:	Pet Food
	Lot Number:	
	Package Type:	BAG
	Product Use Information:	
	Manufacturer /Distributor Information:	
	Purchase Location Information:	

Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Doberman Pinscher		
	Gender:	Male		
	Reproductive Status:	Neutered		
	Weight:	45.2 Kilogram		
	Age:	B6 Years		
	Assessment of Prior Health:	Excellent		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	Yes	
		Contact:	Name:	B6
			Phone:	B6
Email:			B6	
Address:	B6			

B6

United States

Healthcare Professional Information:

Practice Name: Tufts Cummings School of Veterinary Medicine

Contact Name: Lisa Freeman

Phone: (508) 887-4523

Email: lisa.freeman@tufts.edu

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Sender Information:

Name: Lisa Freeman

Address: 200 Westboro Rd
North Grafton
Massachusetts
01536
United States

Contact Phone: 5088874523

Email: lisa.freeman@tufts.edu

Permission To Contact Sender: Yes

Preferred Method Of Contact: Email

Additional Documents:

Attachment: Follow-up med records pt 4.pdf

Description: Med records

Type: Medical Records

Attachment: Follow-up med records pt 2.pdf

Description: Med records

Type: Medical Records

Attachment: Follow-up med records pt 3.pdf

Description: Med records

Type: Medical Records

Attachment: Follow-up med records pt 1.pdf

Description: Med records

Type: Medical Records

Client: **B6**
Patient:

ECG from Cardio

B6

B6

3:34:06 PM

Page 1 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6

3:34:06 PM

Page 2 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6

3:34:20 PM

Page 1 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

12 Lead: Standard Placement

B6

Client: **B6**
Patient:

ECG from Cardio

B6

B6 3:34:20 PM Page 2 of 2
Tufts University
Tufts Cummings School of Vet Med
Cardiology

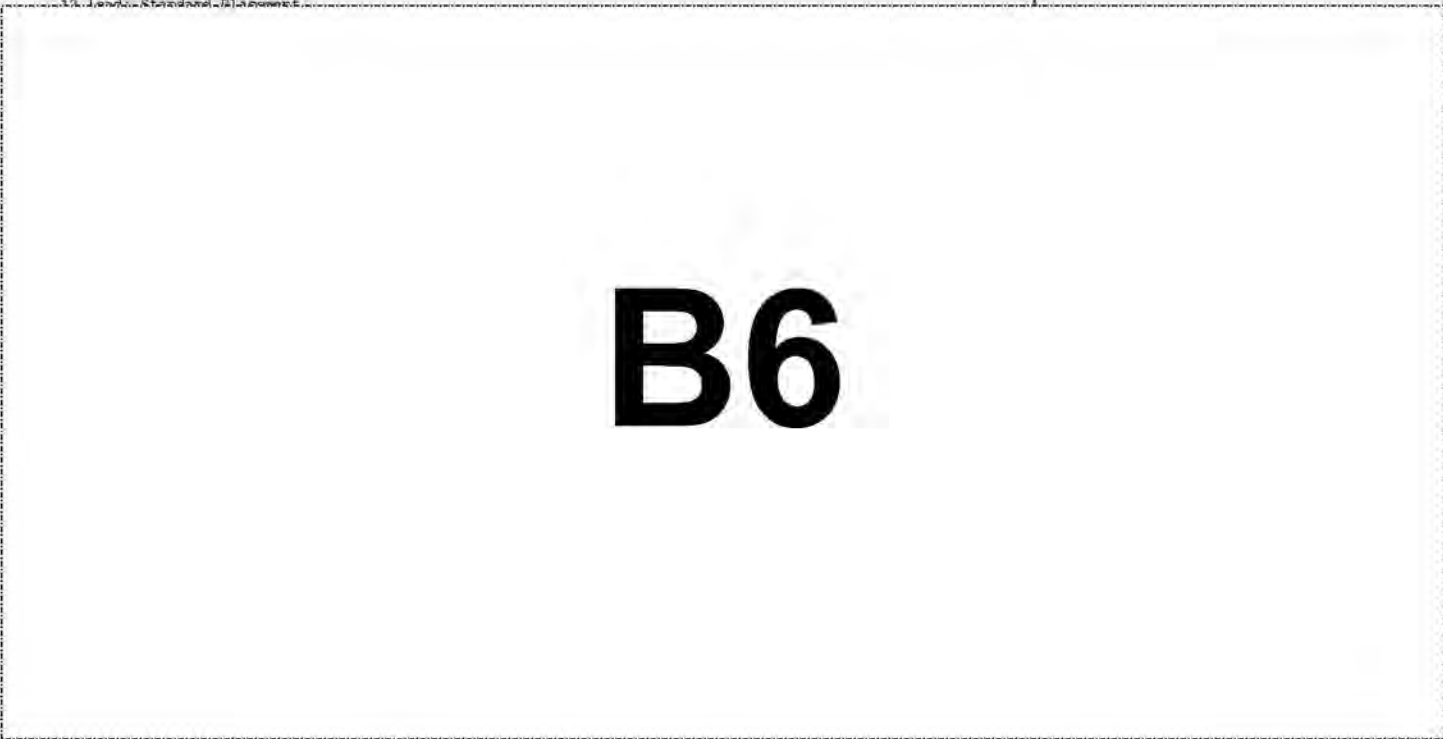
B6

Client: **B6**
Patient: **B6**

ECG from Cardio

B6

B6 3:34:39 PM Page 1 of 2
Tufts University
Tufts Cummings School of Vet Med
Cardiology



Client: **B6**
Patient:

ECG from Cardio

B6

B6

3:34:39 PM

Page 2 of 2

Tufts University
Tufts Cummings School of Vet Med
Cardiology

B6

From: PFR Event <pfpreventcreation@fda.hhs.gov>
To: Cleary, Michael *; HQ Pet Food Report Notification; [B6]
Sent: 2/24/2019 9:32:37 PM
Subject: Poulin Pro Form Lamb and Rice Adult Maintenance Dry: Lisa Freeman - EON-380706
Attachments: 2063113-report.pdf; 2063113-attachments.zip

A PFR Report has been received and PFR Event [EON-380706] has been created in the EON System.

A "PDF" report by name "2063113-report.pdf" is attached to this email notification for your reference. Please note that all documents received in the report are compressed into a zip file by name "2063113-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380706

ICSR #: 2063113

EON Title: PFR Event created for Poulin Pro Form Lamb and Rice Adult Maintenance Dry; 2063113

AE Date	12/22/2018	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Irish Wolfhound		
Age	6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063113

Product Group: Pet Food

Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry

Description: Had [B6] in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.

Submission Type: Initial

Report Type: Adverse Event (a symptom, reaction or disease associated with the product)

Outcome of reaction/event at the time of last observation: Stable

Number of Animals Treated With Product: 1

Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Poulin Pro Form Lamb and Rice Adult Maintenance Dry		

Sender information

Lisa Freeman
200 Westboro Rd
North Grafton, MA 01536
USA

Owner information

B6

USA

To view this PFR Event, please click the link below:

<https://eon.fda.gov/eon//browse/EON-380706>

To view the PFR Event Report, please click the link below:

<https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspx?decorator=none&e=0&issueType=12&issueId=397715>

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Report Details - EON-380706

ICSR: 2063113
 Type Of Submission: Initial
 Report Version: FPSR.FDA.PETF.V.V1
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)
 Reporting Type: Voluntary
 Report Submission Date: 2019-02-24 16:24:11 EST

Reported Problem:

Problem Description: Had **B6** in September 2018; re-presented in December 2018 when arrhythmias were noted. Cardiology consult identified arrhythmias and reduced contractile function (and eating BEG diet). Unclear whether this was primary problem or secondary to systemic illness. Rechecked by cardiology 2/5/19 and still had arrhythmia and reduced contractility. NT-proBNP and cTnI elevated. Owner already changed diet in January to Purina Pro Plan Chicken and Rice so will continue on this diet and will recheck in 3 months.

Date Problem Started: 12/22/2018

Concurrent Medical Problem: Yes

Pre Existing Conditions: **B6** Sept and Dec 2018

Outcome to Date: Stable

Product Information:

Product Name: Poulin Pro Form Lamb and Rice Adult Maintenance Dry

Product Type: Pet Food

Lot Number:

Package Type: BAG

Product Use Information: **Description:** Please see diet history form for more details

Manufacturer /Distributor Information:

Purchase Location Information:

Animal Information:

Name: **B6**

Type Of Species: Dog

Type Of Breed: Irish Wolfhound

Gender: Female

Reproductive Status: Intact

Pregnancy Status: Not Pregnant

Lactation Status: Not lactating

Weight: 60.5 Kilogram

Age: 6 Years

Assessment of Prior Health: Good

Number of Animals Given the Product: 1

Number of Animals Reacted: 1

Owner Information: **Owner Information provided:** Yes

Contact: **Name:** **B6**

Phone: **B6**

Email: **B6**

Address: **B6**

		B6 United States
Healthcare Professional Information:	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Contact Name:	Lisa Freeman
	Phone:	(508) 887-4523
	Email:	lisa.freeman@tufts.edu
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact Phone:	5088874523
	Contact Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Email
Additional Documents:	Attachment:	cbc and profile.pdf
	Description:	Will send by email
	Type:	Medical Records