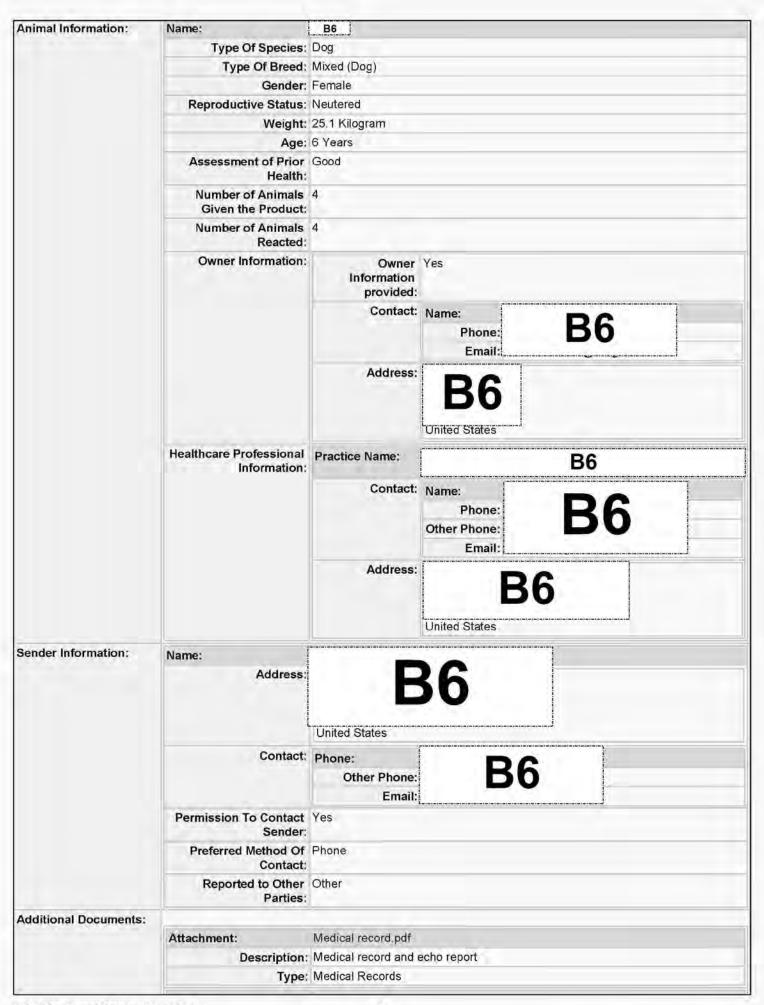
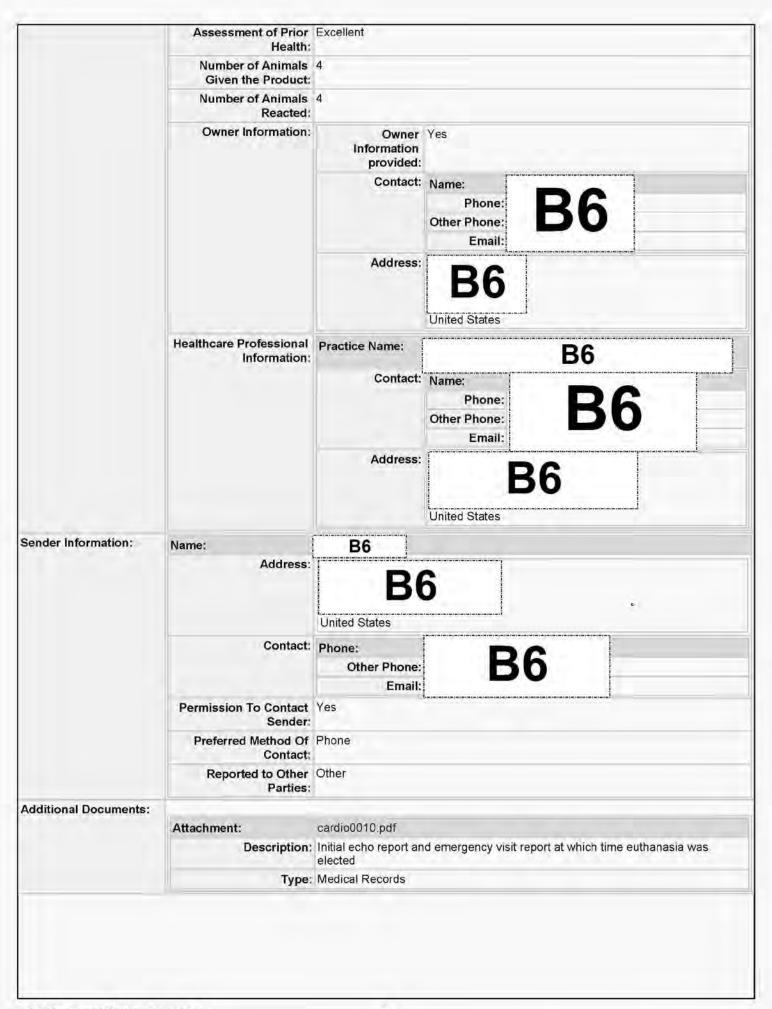
Report Details - EON-	345822					
ICSR:	2040525					
Гуре Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated with the product)			
Reporting Type:	Voluntary					
Report Submission Date:	2018-01-22 17:19:17 EST					
Reported Problem:	Problem Description:	B6 was presented for evaluation of cough, labored breathing, multiple episodes of collapse, cardiomegaly, and suspected congestive heart failure. Congestive heart failure was confirmed with thoracic radiographs and echocardiogram revealed dilated cardiomyopathy.				
	Date Problem Started:	12/30/2017				
	Concurrent Medical Problem:					
	Pre Existing Conditions:	B8				
	1	B6				
	Outcome to Date:	Better/Improved/Red	covering			
Product Information:	Product Name:	California Natural G	rain-Free Kangaroo and Red Lentils Recipe			
	Product Type:	·				
	Lot Number:					
	Package Type:	BAG				
	Purchase Date:	: 01/02/2018				
	Possess Unopened Product:					
	Possess Opened Product:					
	Product Use Information:	Description:	B6 had been eating this dog food since she first displaced signs of B6 as a puppy and food allergy was considered as a potential contributor.			
		Last Exposure Date:	01/10/2018			
		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:	Probably related			
		Other Foods or Products Given to the Animal During This Time Period:				
	Manufacturer	humananananananananananananananananananan	2			
	/Distributor Information:	77777777				
	Purchase Location Information:					

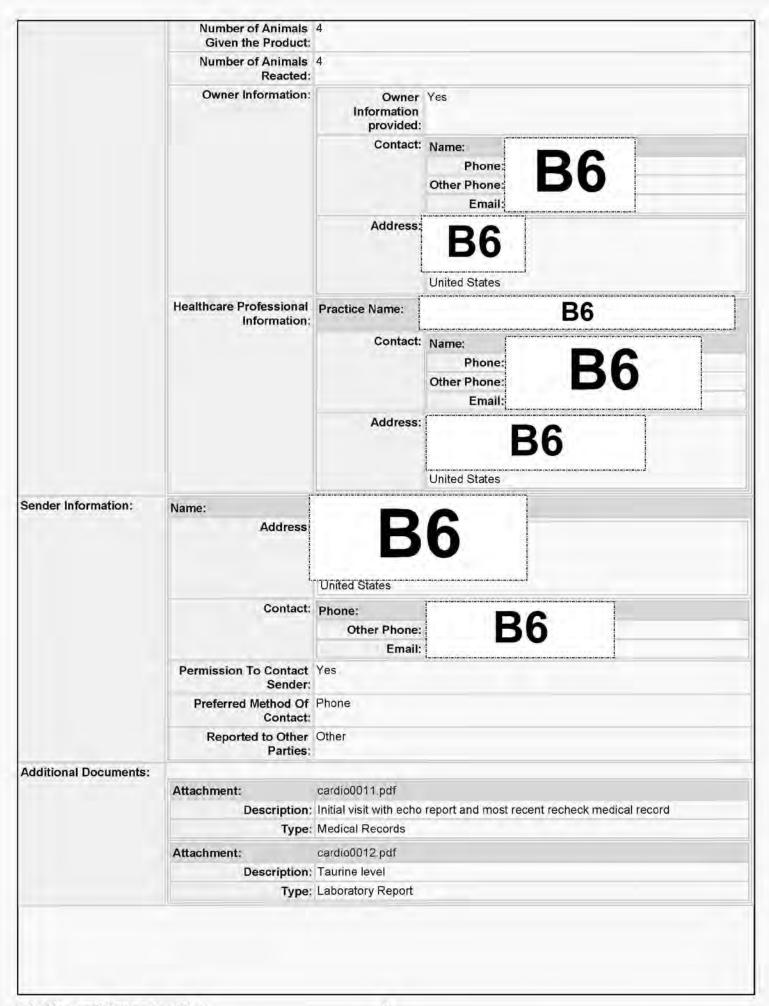


Attachment:	Taurine level.pdf
Description:	Taurine level
Type:	Laboratory Report
Attachment:	Listserve on kangaroo and lentil diets.pdf
	Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils
	Other

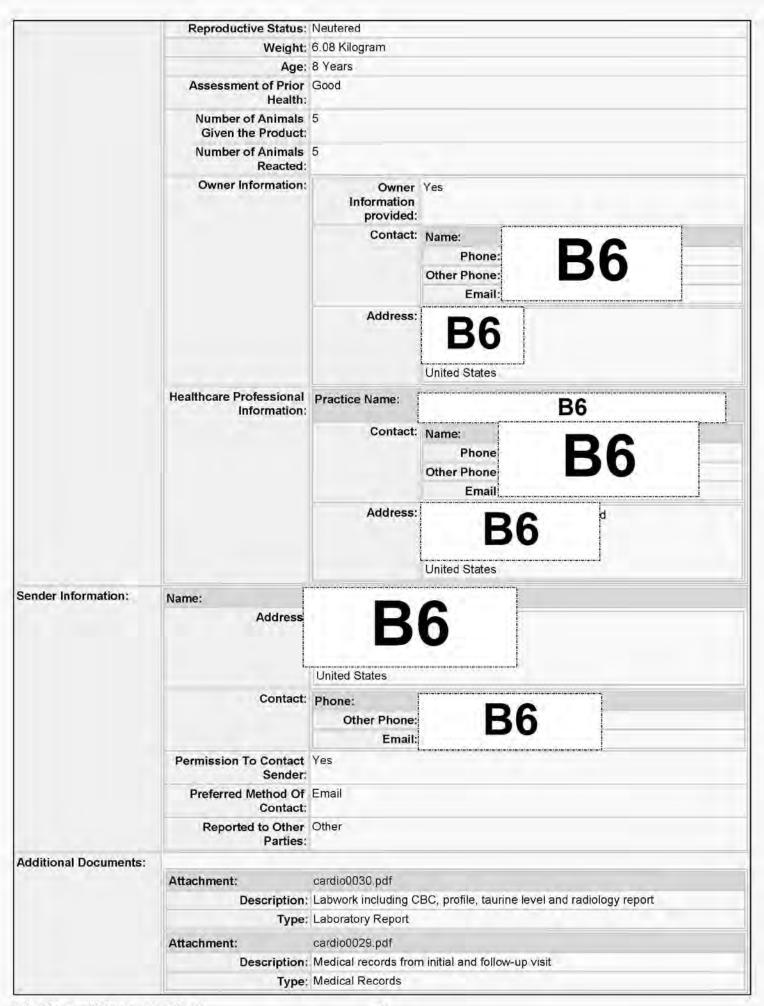
Report Details - EON-	345833					
ICSR:	2040529					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated with the product)			
Reporting Type:	Voluntary					
Report Submission Date:	2018-01-22 18:21:03 EST					
Reported Problem:	Problem Description:	B6 had been diagnosed with a new heart murmur a couple of months earlier, then developed difficulty breathing and cough and was diagnosed with congestive heart failure. Echocardiogram showed evidence of dilated cardiomyopathy and chronic degenerative valve disease. 1 B6 B6 B6 FDA ICSR ID 2040528				
	Date Problem Started:	08/18/2017				
	Concurrent Medical Problem:					
	Pre Existing Conditions:	B6				
	Outcome to Date:	Died Euthanized				
	Date of Death:	B6				
Product Information:	Product Name:	California Natural G	rain-Free Kangaroo and Red Lentils Recipe			
	Product Type:	2	,			
	Lot Number:					
	Package Type:	BAG				
	Possess Unopened Product:					
	Possess Opened Product:					
	Product Use Information:	Description:	B6 had been fed this product for years for management of food allergy.			
		Last Exposure Date:				
		Product Use Stopped After the Onset of the Adverse Event:				
		Adverse Event Abate After Product Stop:				
		Product Use Started Again:				
		Perceived Relatedness to Adverse Event:	Probably related			
	Manufacturer					
	/Distributor Information:	7				
	Purchase Location Information:					
Animal Information:	Name:	B6				
	Type Of Species:					
	3	Retriever - Labrador				
	Gender:	1				
	Reproductive Status:	2				
		25.6 Kilogram				
	Age:	5 Years				
	31	3				

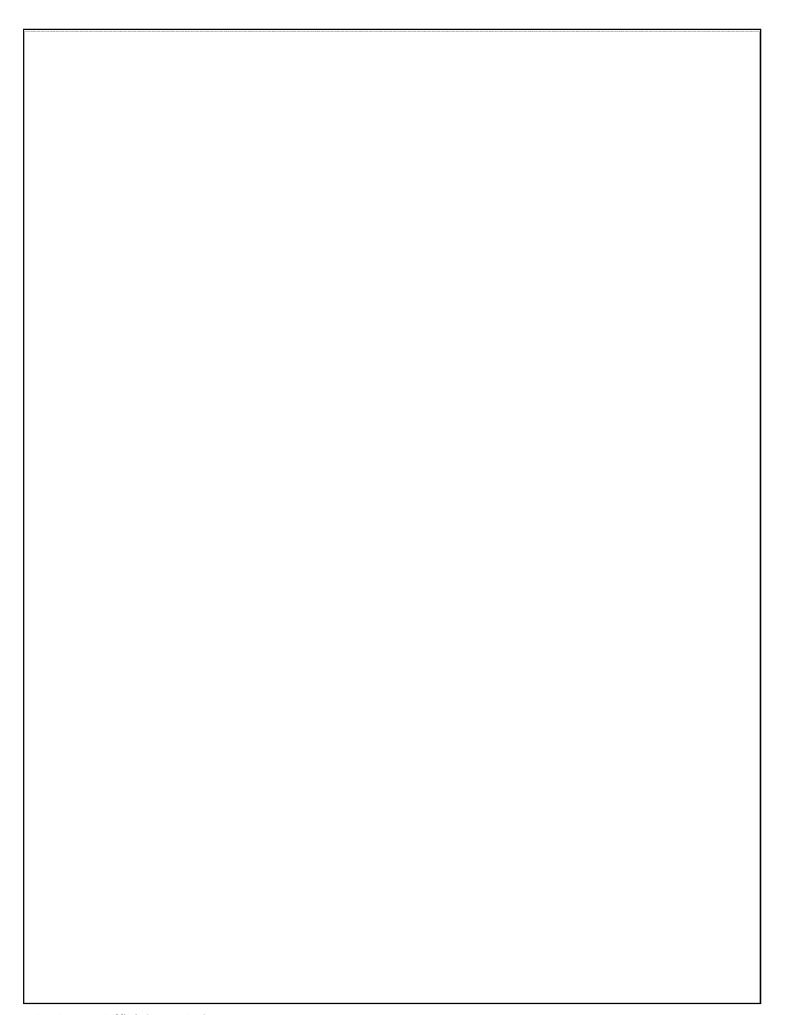


Report Details - EON-	345835					
ICSR:	2040532					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)					
Reporting Type:	Voluntary					
	2018-01-22 18:42:17 EST					
Reported Problem:	Problem Description: Date Problem Started:	B6 had been presented to his regular veterinarian for a week long history of cough on August 22, 2017. Radiographs were taken and B6 was initially placed on B6 for presumed B6 Radiographs were reviewed by a radiologist who revised the diagnosis to congestive heart failure and B6 were added. I evaluated B6 on September 5, 2017 and diagnosed him with dilated cardiomyopathy with congestive heart failure.				
	Concurrent Medical Problem:	No				
		: Better/Improved/Recovering				
Product Information:	4	2				
Product information.	Product Name:	1	Limited Ingredient Formula Dry Dog Food			
	Product Type: Lot Number:	}				
		3				
	Package Type: Possess Unopened Product:	No				
	Possess Opened Product:	No				
	Product Use Information:	Description:	B6 had been fed this diet since he was one year of age because it was recommended by B6 He was also			
		Time Interval between Product Use and Adverse Event:				
		Product Use Stopped After the Onset of the Adverse Event:				
		Product Use Started Again:	V4			
		Perceived Relatedness to Adverse Event:	Probably related			
	Manufacturer					
	/Distributor Information: Purchase Location					
	Information:					
Animal Information:	Name:	В6				
	Type Of Species:	Dog				
	Type Of Breed:	I: Spaniel - Cocker American				
	Gender:	Male				
	Reproductive Status:	Neutered				
	Weight:	15.5 Kilogram				
	Age:	4 Years				
	Assessment of Prior Health:	Excellent				



Report Details - EON-	345965			
ICSR:	2040808			
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:	2018-01-25 12:18:44 EST			
Reported Problem:	Problem Description:	At his scheduled visit to my clinic, thoracic radiographs showed generalized cardiomegaly which had been progressive compared to prior chest radiographs from his regular veterinarian but there was no evidence of cardiogenic edema. Echocardiogram was performed which showed dilated cardiomyopathy. Fundic exam was abnormal with a suspected. B6 Diet history revealed that B6 was eating a kangaroo based diet. At this time the patient was continued on the was eating a kangaroo based diet. At this time the patient was continued on the was discontinued, and B6 2.5mg a.m., 1.25mg p.m.) B6 [1.25mg BID), and taurine (500mg BID) were started. Taurine was discontinued after a normal taurine level was received. Cough persisted despite these changes and a course of B6 was prescribed (50mg BID x 10days). The cough improved significantly but did not completely resolve so the B6 was continued an additional 14 days. The dog has since been lost to follow-up. I have attempted to contact the owner and am waiting for a response. I did contact the referring veterinarian and to their knowledge the dog is still alive.		
	Date Problem Started:	04/24/2017		
	Concurrent Medical Problem:	Yes		
	Pre Existing Conditions:	B6 was presented to me for evaluation of lethargy and progressive cough of 6 months duration. He had been treated with a cough suppressant B6 1/2 tab PO BID) and B6 (5mg once daily) prior to presentation with no response.		
	Outcome to Date:	; Unknown		
Product Information:	Product Name: Product Type:			
	Lot Number: Possess Unopened	Unknown		
	Product: Possess Opened Product:	Unknown		
	Storage Conditions:			
	Product Use Information:	Description: History in medical record describes diet but does not indicate duration of administration.		
		Product Use Stopped After the Onset of the Adverse Event:		
		Perceived Probably related Relatedness to Adverse Event:		
	Manufacturer /Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Shih Tzu		
	Gender:	Male		



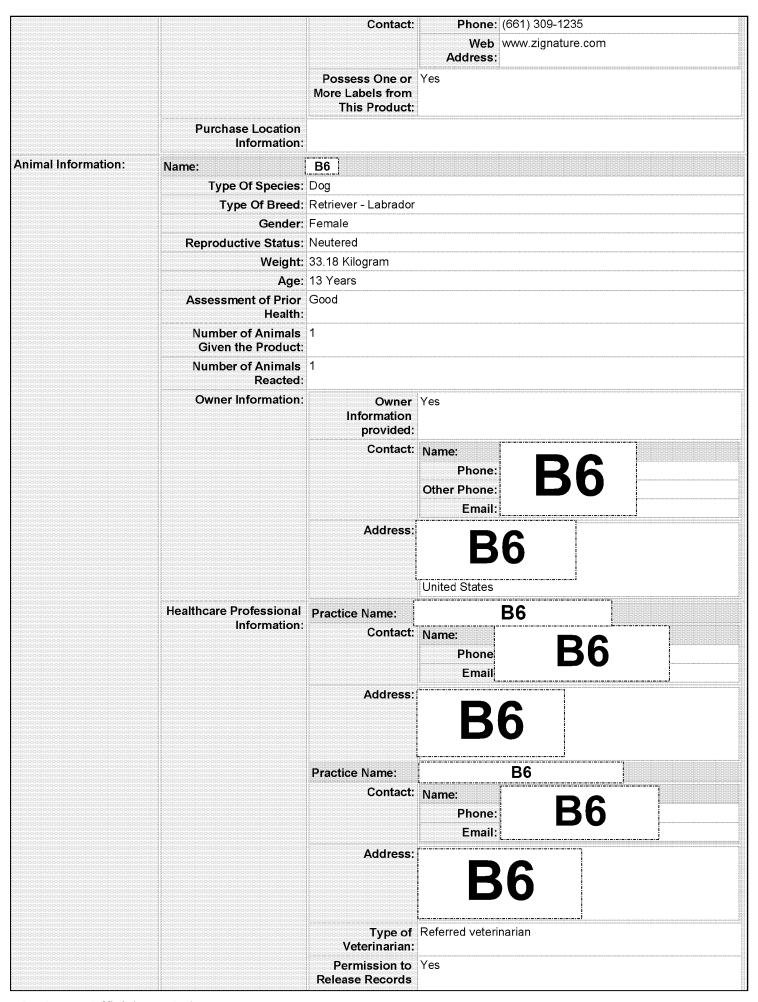


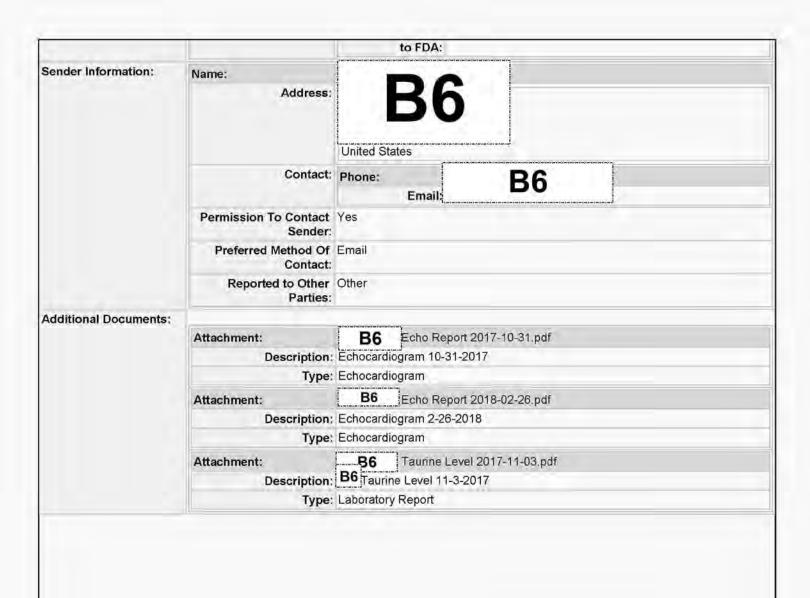
Report Details - EON-	349594				
ICSR:	2043914				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated with the product)		
Reporting Type:	Voluntary				
Report Submission Date:	2018-03-16 08:19:04 EDT				
Reported Problem:	Problem Description:	Suspected that Acana Lamb and Apple Singles Formula diet provides insufficient levels of taurine, contributing to development of B6 dilated cardiomyopathy. B6 presented to his primary care veterinarian October 21, 2017 for progressive panting at night over the past 3-4 months. Chest radiographs revealed cardiomegaly and congestive heart failure (CHF). We examined B6 on 10/25/17 and was diagnosed with dilated cardiomyopathy (DCM) and CHF A whole blood taurine level was tested on 10/25/17 and the result was low. B6 has been on Acana's limited-ingredient Lamb and Apple grainfree diet for the entirety of his life for the management of B6 supplementation with taurine and I-carnitine. His diet was also switched from Acana Lamb and Apple diet to a commercial veterinary prescription diet (Hill's I/d). Since starting medications and supplementation with taurine/I-carnitine and changing the diet, he has had remarkable improvement in his cardiac size and function. He is no longer at risk for CHF and is being tapered off the B6 His systolic function is near normal. We do not see these improvements with medical therapy alone - only with taurine deficiency Normal left atrial size - previously severe - Moderate left ventricular enlargement - mildly improved - Mild to moderate right atrial and right ventricular dilation - improved - Low normal, improved decrease in systolic function - previously severe decrease			
	Date Problem Started:	I: 10/25/2017			
	Concurrent Medical Problem:				
	Outcome to Date:	: Better/Improved/Recovering			
Product Information:	Product Name:	Acana Lamb & Apple Singles Formula Dog Food			
	Product Type:	: Pet Food			
	Lot Number:				
	Package Type:	; BAG			
	Purchase Date:	09/01/2017			
	Possess Unopened Product:				
	Possess Opened Product:				
	Product Use	Description:	This product was fed to the animal as a main diet source.		
	Information:	Product Use Stopped After the Onset of the Adverse Event:			
		Adverse Event Abate After Product Stop:			
		Product Use Started Again:	No		
		Perceived Relatedness to Adverse Event:	Probably related		
		Other Foods or Products Given to the Animal During This Time Period:			

	Manufacturer	Name:	Acana - Champion Petfoods LP			
	/Distributor Information:		Manufacturer			
			11403 186 St NW			
			Edmonton			
			Alberta T5S 2W6			
			Canada			
		Contact:	Phone: 780-784-0300			
		Johnson	Web https://acana.com			
			Address:			
		Possess One or				
		More Labels from				
		This Product:				
	Purchase Location					
	Information:					
Animal Information:	Name:	B6				
	Type Of Species:	Dog				
	Type Of Breed:	Retriever - Golden				
	Gender:	Male				
	Reproductive Status:	Neutered				
	Weight:	29.6 Kilogram				
	Age:	10 Years				
	Assessment of Prior Health:	Excellent				
	Number of Animals					
	Given the Product:					
	Number of Animals Reacted:					
	Owner Information:	Owner Information provided:				
		Contact:	::			
			Phone: B6			
			Email:			
		Address:				
		Addices.	B6			
			DU			
			United States			
	Healthcare Professional Information:		B6			
	imormation.	Contact:	Name:			
			Phone B6			
			Email			
		Address:				
			B6			
			United States			
		Practice Name:	B6			
		Contact:	Name:			
			Phone: B 6			
			Email:			
		Address:	D6			
			B6			
			748			

		Veterinarian:	Referred veto	Windowski ()	
		Date First Seen:	10/25/2017		
		Permission to Release Records to FDA:			
Sender Information:	Name:				
	Address:	B(5		
	Contact:	Phone: Email		B6	
	Permission To Contact Sender:				reserved.
	Preferred Method Of Contact:	Email			
	Reported to Other Parties:	Other			
Additional Documents:	h				
	Attachment:	B6 Ec	ho 10-25-17.p	df	
	Description:	Echocardiogram 10-	25-2017		
	Type:	Echocardiogram			
	Attachment:	B6 BV	V Taurine 10-2	26-17.pdf	
	Description:	Taurine Level 10-26	-2017		
	Type:	Laboratory Report			
	Attachment:	B6	ho Data 3-9-1	8 pdf	
	ACCOUNT AND ACCOUNT OF THE PARTY OF THE PART	Echocardiogram 3-9		9.541	
		Echocardiogram			
			DDV/M frame	1000017 001	
	Attachment:		PDVM from .		
		Primary care record Medical Records	o ii uiri Januar	y 2017	
		Caretarenerene		14	
	Attachment:		ho 11-21-17.p	df	
	The second section of the sect	Echocardiogram 11-	21-2017		
	Type	Echocardiogram			

Report Details - EON-	350158					
ICSR:	2044632					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)			
Reporting Type:	Voluntary					
Report Submission Date:	2018-03-27 15:12:36 EDT					
Reported Problem:	Problem Description:	At the time of diagnosis (10/31/17), B6 was a 13 year old female spayed Labrador retriever who had been maintained on a Zignature Kangaroo formula. She presented with a history of a progressive cough which, prior to presentation, became productive and she coughed up a small volume of pink foam (possible pulmonary edema). On examination she had a 2/6 left apical systolic heart murmur and on echo diagnosed with advanced dilated cardiomyopathy with severe left ventricular dilation, moderate to severe left ventricular systolic dysfunction, and moderate to severe left atrial dilation. Thoracic radiographs were suspicious for early congestive heart failure. A whole blood taurine level was submitted and was low at; B6 She was treatment with B6 B6 taurine and l-carnitine and her diet was changed to Royal Canin Early Cardiac. At her recheck in 2/26/18, B6 heart had improved significantly with now mild dilated cardiomyopathy with normalized left atrial dimensions, mild left ventricular dilation and low normal left ventricular systolic function. The B6 was able to be discontinued at this time.				
	Date Problem Started:	10/31/2017				
	Concurrent Medical Problem:					
	Outcome to Date:	Better/Improved/Recovering				
Product Information:	Product Name:	Zignature Kangaroo Formula				
	Product Type:	Pet Food				
	Lot Number:					
	Package Type:	BAG				
	Possess Unopened Product:					
	Possess Opened Product:					
	Product Use Information:	Product Use Stopped After the Onset of the Adverse Event:				
		Adverse Event Abate After Product Stop:				
		Product Use Started Again:	7.4 7.4			
		Perceived Relatedness to Adverse Event:	Probably related			
		Other Foods or Products Given to the Animal During This Time Period:				
	Manufacturer	Name:	Pets Global - Zignature			
	/Distributor Information:		Manufacturer			
		3				
		Address:	28334 Industry Dr Valencia California 91355 United States			



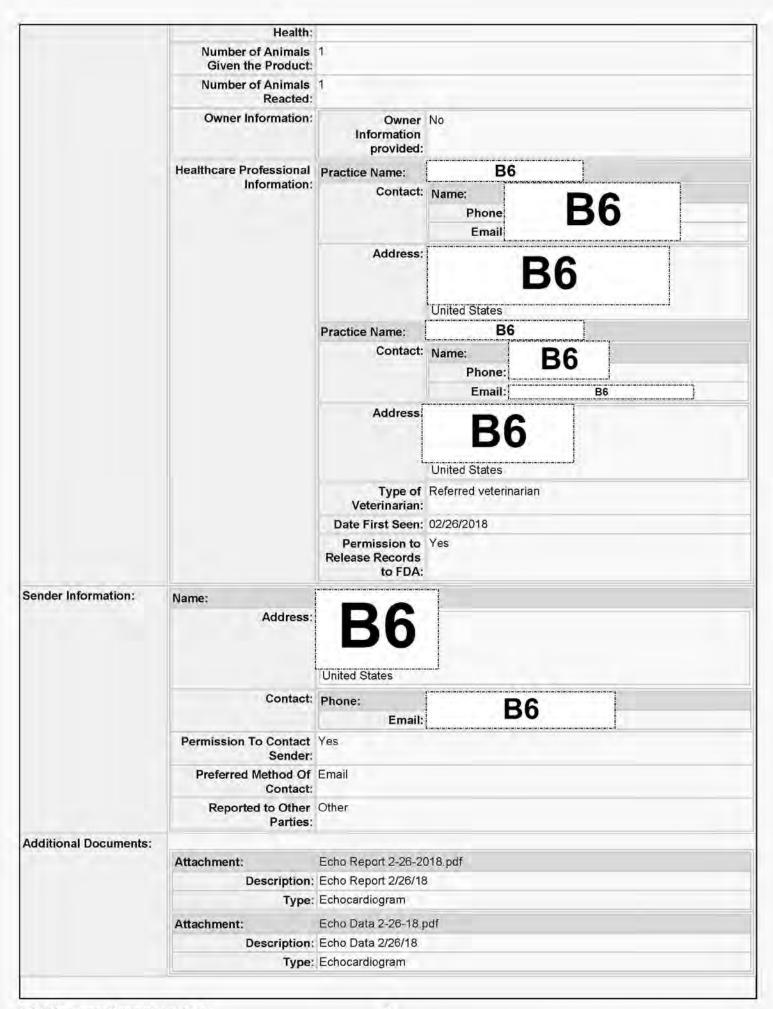


ICSR:	-350263 2044821					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)					
Reporting Type:	Voluntary					
Report Submission Date:	2018-03-30 15:41:47 EDT					
Reported Problem:	Date Problem Started: Concurrent Medical Problem: Pre Existing Conditions:	B6 is an 8 year old intact male Bull Terrier who was first diagnosed with severe degenerative valve disease with moderate decrease in contractility on 8//17. At that time, he was started on B6 supplementation was recommended but not started. On B6 he presented to the emergency service for a sudden increase in respiratory rate and effort and was hospitalized for congestive heart failure. Echo findings on B6 included progressive valve disease and severe, progressive decrease in contractility, the latter of which may either be a component of dilated cardiomyopathy vs secondary to B6 grain free diet (Nature's Recipe Salmon and Yam). Clinically, B6 has been tiring more quickly recently, He has had weight loss (3 kg since 8/2017) despite a good appetite. Prior to his B6 presentation, he had a 2-3 week history of collapsing/fainting episodes, in which he would go lim and paddle - no loss of bowels. Health history includes B6 previously or B6 - but otherwise no major illnesses or injuries. I have recommended adjustments to B6 medications as well as B6 supplementation; he will continue the Nature's Recipe Salmon and Yam diet due to significant B6 when changing the diet. 1 Yes 1 Yes				
		History of B6 i July 2017. :: Worse/Declining/Deteriorating				
D. J. A. J. S	1 km 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m					
Product Information:	Product Name: Product Type: Lot Number: Package Type: Possess Unopened	BAG				
		No				
	Product:					
	Product Use Information:	Description:				
		Last Exposure Date:	03/30/2018			
		Product Use Stopped After the Onset of the Adverse Event:				
		Relatedness to Adverse Event:				
	Manufacturer	Name:	J.M. Smucker Co. (formerly Big Heart Pet Brands)			
	/Distributor Information:	Type(s):	Manufacturer			
		Address:	1 Strawberry L Orrville Ohio 44667-9555 United States	ane		
		Contact:	Phone:	(888) 550-9555		
	1		38	https://www.naturesrecipe.com/dog-recipes		

			Address: /grain-fre pumpkin	e/salmon-sweet-potato-and- -recipe	
		Possess One or More Labels from This Product:			
	Purchase Location Information:				
Animal Information:	Name:	В6			
	Type Of Species:	Dog			
	Type Of Breed:	D-7-0-0-0			
	Gender:				
	Reproductive Status:				
		26.3 Kilogram			
		Andrew Control of the Control of the Control			
		: 8 Years			
	Assessment of Prior Health:	0.000			
	Number of Animals Given the Product:				
	Number of Animals Reacted:				
	Owner Information:	Owner Information provided:	No		
	Healthcare Professional Information:	Practice Name:	В6		
		Contact:	Name: B6		
			Phone:		
				B6	
		The Assessment	Email:	nacional de la composition della composition del	
		Address:	R6		
			United States		
Sender Information:	Name:		United States		
Sender Information:	Name: Address:	B6	United States		
Sender Information:	100.000	200000000000000000000000000000000000000	United States B6		
Sender Information:	Address	Phone: Email:			
Sender Information:	Address: Contact: Permission To Contact	Phone: Email: Yes			
Sender Information:	Contact: Permission To Contact Sender: Preferred Method Of	Phone: Email: Yes Email			
Sender Information: Additional Documents:	Permission To Contact Sender: Preferred Method Of Contact: Reported to Other	Phone: Email: Yes Email			
	Contact: Permission To Contact: Sender: Preferred Method Of Contact: Reported to Other Parties:	Phone: Email: Yes Email Other	B6		
	Address: Contact: Permission To Contact: Sender: Preferred Method Of Contact: Reported to Other Parties: Attachment:	Phone: Email: Yes Email Other	B6		
	Contact: Permission To Contact: Sender: Preferred Method Of Contact: Reported to Other Parties: Attachment: Description:	Phone: Email: Yes Email Other B6 Echo Report: B6	B6		
	Contact: Permission To Contact Sender: Preferred Method Of Contact: Reported to Other Parties: Attachment: Description: Type:	Phone: Email: Yes Email Other B6 Echo Report: B6 Echocardiogram	B6		
	Contact: Permission To Contact: Sender: Preferred Method Of Contact: Reported to Other Parties: Attachment: Description:	Phone: Email: Yes Email Other B6 Echo Report: B6	B6	f	
	Contact: Permission To Contact: Sender: Preferred Method Of Contact: Reported to Other Parties: Attachment: Description: Type: Attachment:	Phone: Email: Yes Email Other B6 Echo Report: B6 Echocardiogram	B6 Echo B6 pdf		

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	Echocardiogram
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Attachment:	B6 Echo Date B6 pdf
	Echo Data B6
Туре;	Echocardiogram

Report Details - EON-	350359					
ICSR:	2044946					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction o	r disease a	ssociated with	the product)	
Reporting Type:	Voluntary	TOUGHON C	. u.oodoo o			
Report Submission Date:	11.1) 2003 2014					
Reported Problem:	Problem Description:	2/26/18 w /amino ad Patient is suspected contribution B6 Medication will be rec	A heart murmur was auscultated on a routine exam and patient was diagnosed on 2/26/18 with moderate dilated cardiomyopathy - ruleout idiopathic vs. taurine /amino acid responsive - with moderately decreased left ventricular contractility. Patient is on a grain free diet - Nature's Recipe Salmon and Sweet Potato. It is suspected that some grain free diets provide insufficient levels of taurine, contributing to the development of dilated cardiomyopathy. At presentation, B6 had no cough; normal appetite and attitude; no exercise intolerance. Medication management and B6 supplementation was recommended. She will be rechecked in June 2018.			
	Date Problem Started:	02/26/201	8			
	Concurrent Medical Problem:	Yes				
	Pre Existing Conditions:	History of B6 B6				
	Outcome to Date:	Unknown				
Product Information:	Product Name:	Grain Free Easy to Digest Salmon, Sweet Potato, & Pumpkin Recipe				
	Product Type:		c Lusy to L	ngest cannon,	oweer route, a rumpom recipe	
	Lot Number:	1 011 000				
	Package Type:					
	Product Use	order de la constant				
	Information:	Relate		Probably relate		
	Manufacturer /Distributor Information:	Name:	Type(s):	The J.M. Smuc	sker Co.	
				1 Strawberry L Orrville Ohio 44667 United States	ane	
			Contact:	Phone:	(888) 550-9555	
				Web Address:	www.naturesrecipe.com	
		More La	ss One or bels from s Product:	Yes		
	Purchase Location Information:				· · · · · · · · · · · · · · · · · · ·	
Animal Information:	Name:					
	Type Of Species:	Dog				
	Type Of Breed:	4	Cocker Am	erican		
		er: Female				
	Reproductive Status:	Neutered				
		11.7 Kilog	ıram			
	-3)	13 Years				
	Assessment of Prior	Good				



Report Details - EON-	350487					
ICSR:	2045119					
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:	2018-04-04 16:10:23 EDT					
Reported Problem:	Problem Description:	B6 has a history of cough - she was initially treated for kennel cough. Developed B6 and was evaluated by cardiology practice on 3/19/18. Diagnosed with advanced dilated cardiomyopathy, atrial fibrillation with rapid ventricular response rate and right-sided congestive heart failure with B6. Started on medical therapy and B6 supplementation - will recheck echo in 4-5 months. Diet is Taste of the Wild Grain Free - rotates througall varieties except for those containing chicken. There is concern that the diet provides insufficient levels of taurine, contributing to the development of dilated cardiomyopathy.				
	Date Problem Started:	03/19/2018				
	Concurrent Medical Problem:	Yes				
		Otherwise previously				
	Outcome to Date:	te: Better/Improved/Recovering				
Product Information:	Product Name:					
	Product Type:					
	Lot Number:					
	Package Type:	Гуре: BAG				
	Product Use	Description:	Daily as main diet			
	Information:	Relatedness to	Probably related			
	Manufactura	Adverse Event:				
	Manufacturer /Distributor Information: Purchase Location Information:					
Animal Information:	Name:	B6				
	Type Of Species:					
	Type Of Breed:	Hound - Afghan				
	Gender:	Female				
	Reproductive Status:	Neutered				
	Weight:	32.4 Kilogram				
	Age:	11 Years				
	Assessment of Prior Health:	Excellent				
	Number of Animals Given the Product:	1				
	Number of Animals Reacted:	1				
	Owner Information:	Owner Information provided:	No			
	Healthcare Professional	Practice Name:	B6			

	Information;	Contact:	Name: Phone: Email:	В6		
		Address:		36		
		Type of Veterinarian:	Referred veterinaria	in		
		Permission to Release Records to FDA:				
ender Information:	Name:					
	Address	B6 United States				
	Contact	The contract of the contract o	[]====================================	(414) 414(414) 414(414) 414(414) 414(41)		
	Contact:	Phone: Email:	В	6		
	Permission To Contact Sender:	Yes				
	Preferred Method Of Contact:	Email				
	Reported to Other Parties:	Other				
Additional Documents:						
	Attachment:	B6 CG	3-13-2018.pdf			
		ECG 3/13/2018				
	Type:	e; Other				
	Attachment:	B6 cho Report 3-19-2018.pdf				
	Description:	Echo Report 3/19/20	018			
	Type:	Echocardiogram				
	Attachment:	B6 ECG	4-2-2018.pdf			
	Description;	ECG 4/2/2018				
		Other				
	Attachment:	B6 Echo	Data 3-19-2018.pdf			
	A SECTION OF THE PROPERTY OF T	Echo Data 3/19/201				
		Echocardiogram				

Report Details - EON-	351031					
ICSR:	2045676					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated	d with th	ne prod	uct)
Reporting Type:	Voluntary					
Report Submission Date:	.g					
Reported Problem:	Problem Description:	Feb 23, 2018 Patien	it nrecente	ad to th	a cardio	Now service of Pc
	İ	B6 card <u>iomy</u> opathy and was B6 ref 200-35 Zignature Kangaroo	fort	conges level <	He was tive hea 150). At	diagnosed with dilated art failure. Whole blood taurine level the time, patient consuming
	Date Problem Started:	02/22/2018				
	Concurrent Medical Problem:	Yes				
	Pre Existing Conditions:	History of B		on: B6	В6	10mg every other day since 2015
	Outcome to Date:	Stable				
Product Information:	Product Name:	Zignature Kangaroo	Formula			
	Product Type:	{				
	Lot Number:					
	Package Type:					
	Possess Unopened Product:	No				
	Possess Opened Product:					
	Product Use Information:	Description: Last Exposure Date:	03/01/20	······································	for 2-3 y	ears prior to diagnosis.
		Time Interval between Product Use and Adverse Event:	3 Years			
		Product Use Stopped After the Onset of the Adverse Event:				
		Perceived Relatedness to Adverse Event:	7.9 7.9 7.9 7.9 7.9 7.9 7.9	related		
		Other Foods or Products Given to the Animal During This Time Period:				
	Manufacturer /Distributor Information:					
	Purchase Location Information:	Name:	Chewy.c	om		
Animal Information:	Name:	B6				
	Type Of Species:	·				
		Retriever - Golden				
	Gender:	7				
	Reproductive Status:	7			······	
		40 Kilogram				
	vveigit.	. o mogram				

	Age:	6 Years		an control
	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	
		Address:	B6	
			United States	
	Healthcare Professional Information:		B6	<u> </u>
		Contact:	Phone: B6	
		Address:	B6	c
			United States	X X X X X X X X X X X X X X X X X X X
		Type of Veterinarian: Date First Seen:	Referred veterinarian 02/23/2018	
Sender Information:	Name: Address:	B6 United States		
	Contact:		B6	
	Reporter Wants to Remain Anonymous:	Email: No		
	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:	:;; ;;;					
Reported Problem:	Problem Description:	heart failure by the of Her disease has been on grain free diets, a cardiology service. V	sed with dilated cardiomyopathy and left sided congestive sardiology service at B6 8/4/2016. En stable. Due to reports of DCM related to taurine deficiency whole blood taurine level was submitted on 3/2/2018 by the Whole blood taurine water (ref range 200-350, critical <150). To stop current diet and start taurine supplementation.			
	Date Problem Started: Concurrent Medical					
	Problem:					
	Pre Existing Conditions:	Heart murmur first d	ocumented 4/3/2016 - 2/6 left basilar systolic			
	Outcome to Date:	Stable				
Product Information:	Product Name:	Kirkland Signature N	lature's Domain Turkey Meal and Sweet Potato Dog Food			
	Product Type:		·			
	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:				
		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:				
	Manufacturer /Distributor Information:					
	Purchase Location Information:	Name:	Costco Wholesale			
Animal Information:	Name:	В6				
	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
		Address:	
			B6
			United States
	Healthcare Professional Information:	Practice Name:	B6
		Contact:	Name: B6
		Address:	
			United States
		Type of Veterinarian:	Referred veterinarian
		Date First Seen:	08/04/2016
Sender Information:	Name:		
	Address:	B6	
		United States	
	Contact:	Phone: Email:	B6
	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-	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:	castrated male Dobe Basics salmon and p free version of this d was Be hmol/ml. Sta and fish oil (may als deficiency-related D	ON-351747). FDA CVM resubmitting as PFR. 7 year old erman pinscher with DCM. Has been eating Blue Buffalo potato dry food since 2012 (rotates between regular and grain liet). Recently, diagnosed with DCM and whole blood taurine inted on cardiac medications by B6 J and just started taurine o start L-carnitine and coenzyme Q10). Unclear if taurine CM or related to current concerns with "grain free" diets. DCM ov Owner has bad of food that she's keeping until we hear B6		
	Date Problem Started:	04/03/2018			
	Concurrent Medical Problem:				
	Outcome to Date:	Unknown			
Product Information: Product Name: Product Type: Lot Number:					
	Package Type:				
	Possess Unopened Product:				
	Possess Opened Product:				
	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:			
		Adverse Event Abate After Product Stop:			
		Product Use Started Again:			
		Perceived Relatedness to Adverse Event:	Possibly related		
		Other Foods or Products Given to the Animal During This Time Period:			
	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:				
	Number of Animals Given the Product:	1			
	Number of Animals 1 Reacted: Owner Information:	1			
		Owner Information provided:			
	Healthcare Professional	Practice Name:	Tufts Cumming	s School of Veterinary Medicine	
	Information:	Contact:		Lisa Freeman (508) 887-4523	
				lisa.freeman@tufts.edu	
		Address:	200 Westboro North Grafton Massachusetts 01536 United States		
		Type of Veterinarian:	Referred veterinarian		
		Date First Seen:	Date First Seen: 04/19/2018		
		Practice Name:	B6		
		Contact:		B6 Unknown	
		Type of Veterinarian:	Primary/regula	r 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@t	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:		presentation and an arrange			
	Attachment:	B6 ecord	s.pdf		
	The second secon	Medical records			
		Record			
	Attachment:		I-19-18.pdf		
		Nutrition report (Tuft	s)		
	Type:	Record			

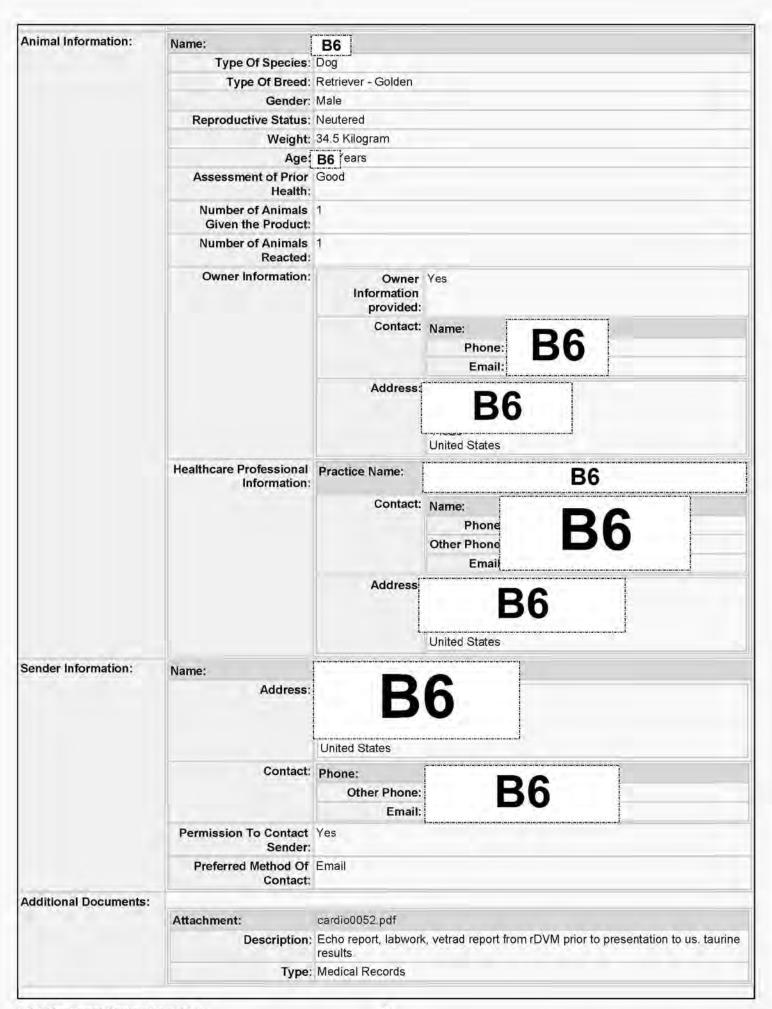
Report Details - EON-	354251					
ICSR:	2048125					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated with th	ne product)		
Reporting Type:	Voluntary					
Report Submission Date:	2018-05-21 07:55:06 EDT					
Reported Problem:	Problem Description:	Reported as RFR Edeaten 4Health dog for Owner has switched	ood (large breed)	dry) since 6/2		
	Date Problem Started:					
	Concurrent Medical Problem:	5 3				
	Outcome to Date:	Unknown				
Product Information:	Product Name:	4Health large breed	dry food			
	Product Type:	,	,			
	Lot Number:					
	Package Type:	BAG			10000 00000 00000 00000 00000 00000 00000	
	Possess Unopened					
	Product:					
	Possess Opened Product:	10.000) 10.000)				
	Product Use	Description:	Has eaten 4Hea	alth dog food (large breed dry) since 6/2016	
	Information:	First Exposure Date:				
		Product Use Stopped After the Onset of the Adverse Event:	Yes			
		Adverse Event Abate After Product Stop: Product Use				
	Manufacturer	Started Again:				
	/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:				
		Contact:	Name:	B6		

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

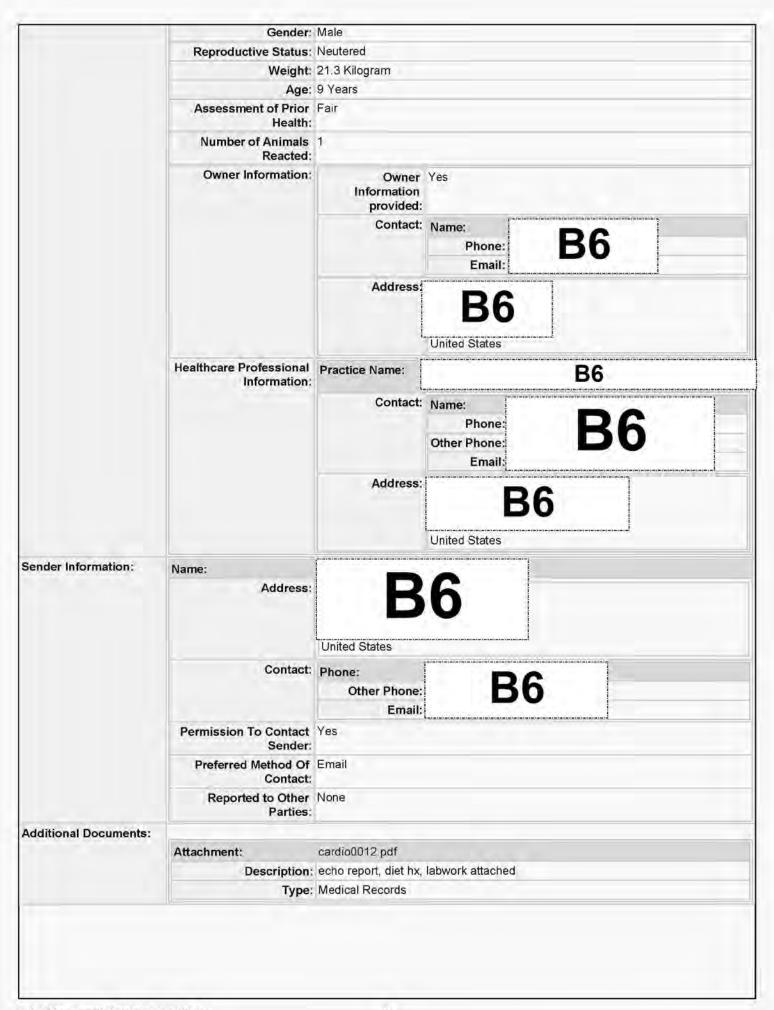
Report Details - EON	-355703				
ICSR:	2049063				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Adverse Event (a symptom	reaction or disease a	associated with the product)		
Reporting Type:	Voluntary		, , , , , , , , , , , , , , , , , , ,		
Report Submission Date	() () ()				
Reported Problem:	Problem Description:	Food. Owner was as	ated DCM 4health Grain-Free Large Breed Formula Adult Dog sked to save food. Plasma taurine [B6] (ref range 60-120), WB e 200-350) DCM diagnosed by echocardiography		
	Date Problem Started: Concurrent Medical	05/29/2018			
	Problem:				
	Outcome to Date:	Unknown			
Product Information:	Product Name:	4health Grain-Free L	arge Breed Formula Adult Dog Food		
	Product Type:	·			
	Lot Number:	(d			
	Package Type:	BAG			
	Possess Unopened Product:	Unknown			
	Possess Opened Product:				
	Product Use Information:	Product Use Stopped After the Onset of the Adverse Event:	Unknown		
	Manufacturer /Distributor Information:				
	Purchase Location Information:				
Animal Information:	Name:	4			
The state of the s	Type Of Species:	Dog			
	Type Of Breed:	ii			
) (Unknown			
		3			
	Reproductive Status: Assessment of Prior Health:	3			
	Number of Animals Given the Product:	1			
		1			
	Owner Information:	Owner Information provided:	Yes		
		Contact:	Name: B6		
			Email:		
		Address:			
			B6		
			United States		
	Healthcare Professional Information:				

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

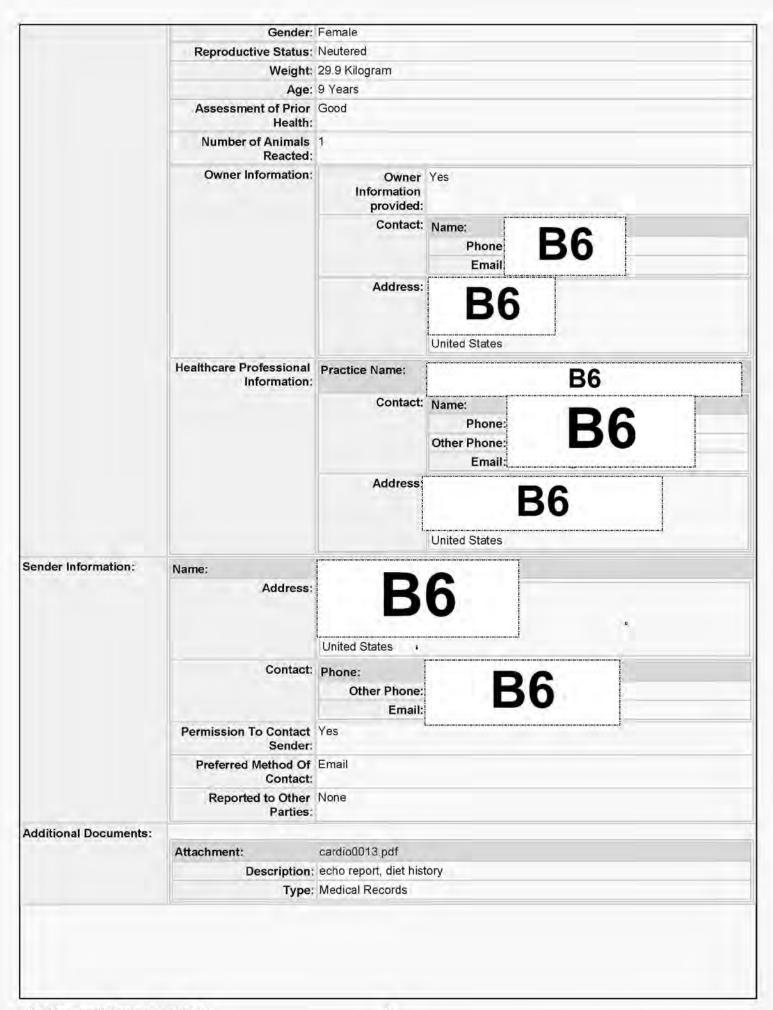
Report Details - EON-	356322			
ICSR:	2049280			
Type Of Submission:	Initial			
Report Version:	FPSR.FDA.PETF.V.V1			
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)	
Reporting Type:	Voluntary			
Report Submission Date:	-			
Reported Problem:	Problem Description: Date Problem Started:	B6 presented at B6 for difficulty breathing/enlarged heart. B6 was diagnosed on Thursday with an enlarged heart with RDVM. RDVM sent B6 home with instructions to limit activity. B6 collapsed twice this weekend. Once was when B6 was outside walking and saw a squirrel and the other episode was when B6 saw the neighbor and came running to neighbor B6 has been eating normal, but B6 did have soft stool yesterday. B6 has continued to breathe heavy throughout the weekend and has been experiencing coughing/ barking episodes of discomfort B6 is up to date on vaccines. B6 littermate was diagnosed with a heart murmur at 1.5 years old.		
	Date of Recovery: Concurrent Medical Problem:	Unknown		
	Outcome to Date:	Better/Improved/Recovering		
Product Information:	Product Name:	4health Grain Free Beef & Potato Formula		
	Product Type:			
	Lot Number:			
	UPC:	104615599		
	Package Type:	BAG		
	Package Size:	:: 30 Pound		
	Possess Unopened Product:	Interest of the second of the		
	Possess Opened Product:			
	Product Use Information:	Description:	1 and 1/2 cup dry food fed BID since 2013. Also fed Old Mother Hubbard Mini Treats, Marrow Bones, and small amounts of peanut butter, green beans, bananas, and carrots. Pet also licks plates. Pet receives Mature Made Fish Oil-1 1200mg capsule PO SID.	
		First Exposure Date:		
		Last Exposure Date:	05/29/2018	
		Product Use Stopped After the Onset of the Adverse Event:	Unknown	
		Perceived Relatedness to Adverse Event:	Probably related	
		Other Foods or Products Given to the Animal During This Time Period:	Yes	
	Manufacturer			
	/Distributor Information:	1		
	Purchase Location Information:	Name: Address:	B6	
]		United States	



Report Details - EON-	358128					
ICSR:	2051197					
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:	2018-07-02 16:02:14 EDT					
Reported Problem:	Problem Description:	Developed dry, harsh coughing in late May, which rDVM initially treated with B6 Cough did not resolve and B6 became very lethargic, inappetent, extremely exercise intolerant, and has increased respiratory effort. rDVM radiographs showed cardiomegly and it was suspected that B6 had developed pneumonia B6 was presented to B6 for further evaluation, at which time B6 was diagnosed with heart failure and cardiac medications were initiated B6 responded right away to cardiac medications, with improved appetite, energy levels, and a dramatic decrease in cough. The owner reports that B6 has lost a noticeable amount of weight since the ER visit, a week ago, despite doubling the amount of food offered. Taurine level pending				
	Date Problem Started:	05/29/2018				
	Concurrent Medical Problem:					
	Pre Existing Conditions:	Hx of being B6 Rx'ed Rx'ed Which caused GI upset. Owner feeding bland diet of lean ground beef and rice for 3 weeks. Recently added in canned Blue Buffalo to help medicated B6				
	Outcome to Date:	Better/Improved/Recovering				
Product Information:	Product Name:	Zignature Kangeroo and Lentil				
	Product Type:	Pet Food				
	Lot Number:					
	Package Type:	BAG				
	Possess Unopened Product:					
	Possess Opened Product:	Yes				
	Product Use Information:	Product Use Stopped After the Onset of the Adverse Event:	Zignature diet Fed BID for the last 12 months; also offered Venison Jerky and bully sticks as treats. For the past 3 weeks, owner has offered bland diet of 85-93% lean ground beef and rice at 2-4 cups a day, as well as canned Blue Buffalo for administering medications. No			
		Perceived Relatedness to Adverse Event:	Probably related			
		Other Foods or Products Given to the Animal During This Time Period:				
	Manufacturer /Distributor Information:					
	Purchase Location Information:	Address:	B6 United States			
Animal Information:	Name:	B6				
	Type Of Species:					
	Type Of Breed:					
	A					



Report Details - EON-	358131						
ICSR:	2051199						
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:							
Reported Problem:	Problem Description:	Presented as emera	ency appointment for evaluation of intermittent, persistent				
	į	cough, first documented five weeks ago. After cough did not respond to course of B6 and B6 Was added with no improvement. rDVM thoracic radiographs taken on 6/22/18 showed cardiomegaly. Owner describes cough as dry and harsh, which is worse in the evening and wher B6 is in sternal recumbency B6 is very active, without any exercise intolerance or weakness. She tends to graze throughout the day, though has been slower to finish her meals recently B6 has lost a noticeable amount of weight in the last four weeks. Diagnosed with DCM and taurine level is pending.					
	Date Problem Started:						
	Concurrent Medical Problem:	Yes					
	Pre Existing Conditions:	Hx of bein B6					
	Outcome to Date:	Better/Improved/Recovering					
Product Information:	Product Name:	4Health Grain Free					
	Product Type:	Pet Food					
	Lot Number:						
	Package Type:	BAG					
	Possess Unopened Product:						
	Possess Opened Product:						
	Product: Product Use Information:	Description:	4Health grain free dry- 4 cups daily since late 2016. Also offered rawhide chews from Walmart for years, Canine Carryout Treats for years, and varous ham, chicken, and beef table scraps for years.				
		Time Interval between Product Use and Adverse Event:					
		Product Use Stopped After the Onset of the Adverse Event:	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:	Address:	B6 United States				
Animal Information:	Name:	В6					
	Type Of Species:	Dog					
	Type Of Breed:	Mixed (Dog)					



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 a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:			
Reported Problem:	Problem Description:	Routine echo during	treatment for <u>B6</u> Normal left ventricular wall ed contractile function
	Date Problem Started:		
	Concurrent Medical Problem:	.7 	
	Pre Existing Conditions:	B6]	
	Outcome to Date:	4	
Product Information:	Product Name:	Merrick arain free sa	ilmon and sweet potato dry
	Product Name. Product Type:	<u> </u>	amon and sweet potato dry
	Lot Number:	TOUT	
	Package Type:	BAG	
	Product Use Information:		
	Manufacturer	7.7 7.7 7.7 7.7 7.7 7.7 7.7 7.7 7.7	
	/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
		Address:	
			United States
	Healthcare Professional	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Information:	Contact:	
		Jointoot,	Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts

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

Report Details - EON-	358519		
ICSR:	2051555		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:	2018-07-09 08:43:16 EDT		
Reported Problem:	Problem Description:	Diagnosed with LV o	avity dilation and reduced contractile function
	Date Problem Started:	06/20/2018	
	Concurrent Medical Problem:	Yes	
	Pre Existing Conditions	В	6
	Outcome to Date:	Unknown	
Product Information:	Product Name:	Earthborn Coastal C	atch dry
	Product Type:		
	Lot Number:	4	
	Package Type:	BAG	
	Product Use Information:		
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:		
	5 [Boxer (German Boxe	er)
	Gender:	Female	
	Reproductive Status:	Neutered	
	Weight:	33.2 Kilogram	
	Age:	B6 Years	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	
		Contact:	Name: B6
		Address:	B6
	Healthcare Professional	Practice Name:	United States Tufts Cummings School of Veterinary Medicine
	Information:	Contact:	Name: Lisa Freeman Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States

	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
	Contact:	Phone: 5088874523
Permission To	Contact	Email: lisa.freeman@tufts.edu Yes
	Sender:	
2	Contact:	
Reported t	Parties:	None
Additional Documents:		

Report Details - EON-	358522		
ICSR:	2051557		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:	2018-07-09 08:50:19 EDT		
Reported Problem:	Problem Description:	DCM and CHF Taur	ine not measured
	Date Problem Started:	06/29/2018	
	Concurrent Medical Problem:	No	
	Outcome to Date:	Stable	
Product Information:	Product Name:	Halo grain-free dry fo	ood (exact variety unknown)
	Product Type:		
	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:	64 Kilogram	
	Age:	B6 Years	
	Assessment of Prior Health:	Unknown	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: B6
		Address:	B6
	Healthcare Professional	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Information:	Contact:	
			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	
		Address.	200 Westboro Rd North Grafton Massachusetts 01536 United States

Sender Information:	Name:	Lisa Freeman		
	Addre	s: 200 Westboro R	54	- Anna
		North Grafton	\u	200
		Massachusetts		nananan nananan
		01536		***************************************
		United States		Anna Anna Anna Anna Anna Anna Anna Anna
	61-		F000074F00	1
	Conta	ct: Phone:	5088874523	
		Em	nail: lisa.freeman@tufts.edu	
	Permission To Conta	ct Yes		2
	Send			
	Preferred Method	of Email		
	Conta	et.		PART OF THE PART O
	Reported to Oth	er None		
	Partie	S:		AND THE STATE OF T
Additional Documents:				
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Report Details - EON-	358523		
ICSR:	2051558		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:			
Reported Problem:	Problem Description:	DCM and CHF	
	Date Problem Started:		
	Concurrent Medical Problem:	No	
	Outcome to Date:	Stable	
Product Information:	Product Name:	Taste of the Wild gra	ain free lamb dry
	Product Type:		,
	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 - Labrador	
	Gender:	Male	
	Reproductive Status:	Neutered	
	Weight:	50.8 Kilogram	
	Age:	B6 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: B6
		Address:	
			Rp
			United States
	Healthcare Professional Information:	i ractice maine.	Tufts Cummings School of Veterinary Medicine
	mnormation.	Contact:	Name: Lisa Freeman
			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States

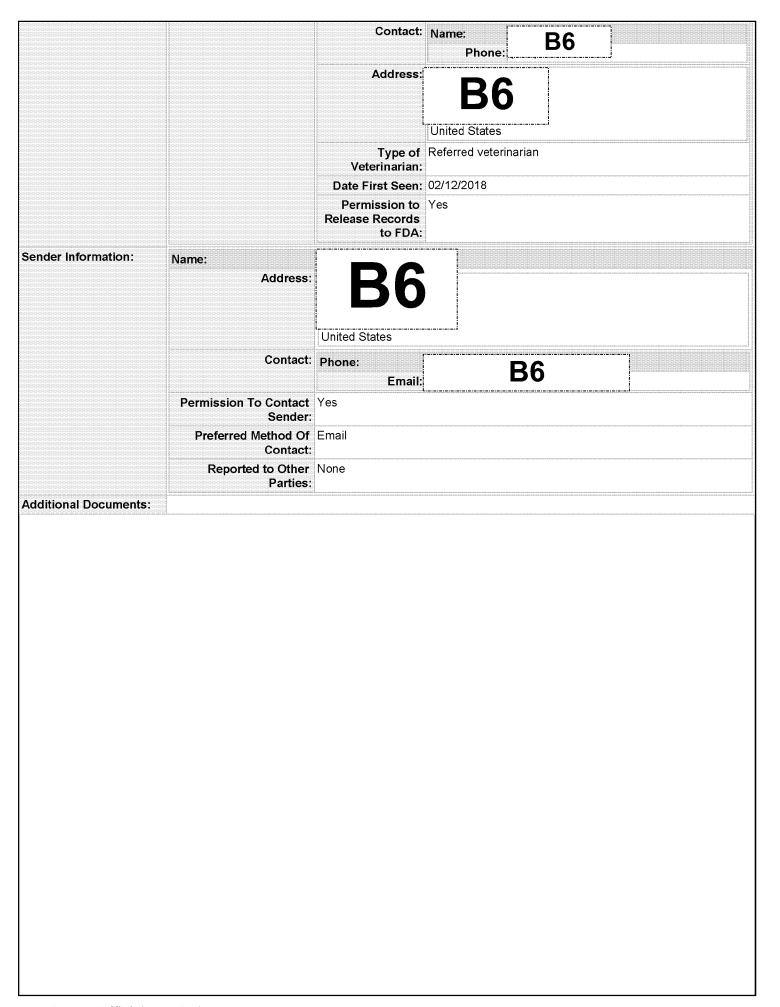
Sender Information:	Name:	Lisa Freeman		
	Addre	s: 200 Westboro R	54	- Anna
		North Grafton	\u	200
		Massachusetts		nananan nananan
		01536		***************************************
		United States		Anna Anna Anna Anna Anna Anna Anna Anna
	61-		F000074F00	1
	Conta	ct: Phone:	5088874523	
		Em	nail: lisa.freeman@tufts.edu	
	Permission To Conta	ct Yes		2
	Send			
	Preferred Method	of Email		
	Conta	et.		PART OF THE PART O
	Reported to Oth	er None		
	Partie	S.		AND THE STATE OF T
Additional Documents:				
Additional Documents.	3			
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	6 FON 2522	
Consumer Complaint Issue	e Screen - EUN-358842	
Complaint Number:	154120	
Complaint Date:	07/09/2018	
Receiving Organization:	NWE-DO	
Complaint Identification:	Name:	
отрини такиналог.	Address:	B6
	Phone (H): Phone (W):	
Complaint/Injury:	Complaint Description:	Products: (1) Taste of the Wild Prey Angus Beef Limited Ingredient Formula for
Complaint Symptoms		Dogs (Grain-Free) and (2) Taste of the Wild Pacific Stream Canine Recipe with Smoked Salmon Dog Food (Grain-Free): A 2 y/o, female Great Dane,
Complaint Symptoms:	Symptom:	Change in mood quality or level; anxiety - lethargic following hospitalization Changes in skin and nail coloration (cyanosis, flushing) - red skin throughout body from consumption of Pacific Stream dog food, 2x in mid and late 12/2017. ONSET time could not be determined Coughing - dog coughed loudly 1x; ONSET could not be determined Itching (pruritis) - itchiness throughout body from consumption of Pacific Stream dog food, 2x in mid and late 12/2017; ONSET time could not be determined
Health Care Professional:	Provider Name:	
	Address:	B6
Hospital Information:	Hospital Name:	
,	Address:	
		US

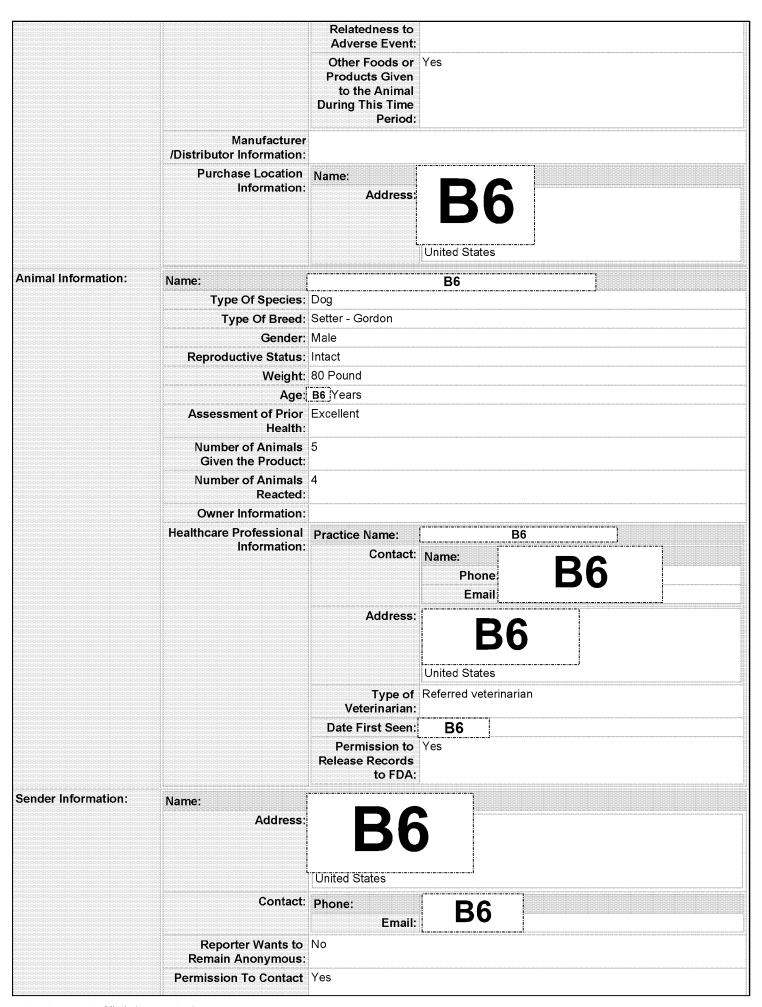
	Phone:	B6
Product and Labeling:	Brand Name:	Taste of the Wild
	Product Name:	Prey Angus Beef Limited Ingredient Formula for Dogs (Grain Free)
	UPC Code:	not provided
	Lot/Serial #:	not provided
	Exp/Use by Date:	not provided

Report Details - EON-	359051				
ICSR:	2051919				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Both				
Reporting Type:	Voluntary				
Report Submission Date:	3 				
Reporter is the Animal Owner:	Yes				
Reported Problem:	Date Problem Started: Concurrent Medical Problem: Pre Existing Conditions: Outcome to Date: Date of Death:	Yes In CY 2014 B6 had B6 r which was cured by neutering. Died Euthanized			
Product Information:	Product Name:	Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Dog Food			
	n	(Grain Free)			
	Product Type:	rei rood			
	Lot Number:	DAC			
	Package Type:	3			
	Package Size:				
	Possess Unopened Product:				
	Possess Opened Product:				
		Stored in a plastic dog food bin (sealed lid) in hall closet.			

	Storage Conditions:				
	Product Use	Description:	Fed daily for several years to my dog.		
	Information:	First Exposure			
		Date:			
		Last Exposure Date:			
		Time Interval	2 Years		
		between Product Use and Adverse Event:			
		Product Use Stopped After the Onset of the Adverse Event:			
		Perceived Relatedness to Adverse Event:	Probably related		
		Other Foods or Products Given to the Animal During This Time Period:			
	Manufacturer /Distributor Information:				
	Purchase Location	•			
	Information:	Name: Address:	B6		
			United States		
Animal Information:	Name:	В6			
	Type Of Species:	hranararad			
	Type Of Breed:				
	Gender:				
	Reproductive Status:				
		eight: 60 Pound			
	<u> </u>	12 Years			
	Assessment of Prior Health:				
	Number of Animals Reacted:	1			
	Owner Information:				
	Healthcare Professional	Practice Name:	B6		
	Information:	Contact:	Name:		
			Phone B6		
		Address:	<u></u>		
		Address.	D6		
			DU		
			United States		
		Type of	Primary/regular veterinarian		
		Veterinarian: Date First Seen:			
		Permission to			
		Release Records to FDA:			
		Practice Name:	Veterinary Cardiology Consultants		



Report Details - EON-	359060				
ICSR:	2051931				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Both				
Reporting Type:	Voluntary				
Report Submission Date:					
Reporter is the Animal Owner:	Yes				
Reported Problem:	Problem Description: Date Problem Started: Concurrent Medical Problem:	al No			
	Outcome to Date:				
	Date of Death:	B6			
Product Information:	Product Name:		rain frag hisan lamb pasifis		
r rodder mormanon.	Product Name: Product Type: Lot Number:				
	Package Type:	BAG			
	Package Size:	7			
	<u> </u>	9: 02/08/2018			
	Number Purchased:				
	Possess Unopened				
	Product:	Normal Control of the			
	Possess Opened Product:	No			
	Storage Conditions:	Until opened stored in metal container after opening open product stored in cupboard in orig pkg.			
	Product Use Information:	Description:	2 times a day per recommended feeding instructions for weight		
		First Exposure Date:	W4		
		Last Exposure Date:			
		Time Interval between Product Use and Adverse Event:			
		Product Use Stopped After the Onset of the Adverse Event:			
		Adverse Event Abate After Product Stop:			
		Product Use Started Again:	No		
		Perceived	Definitely related		

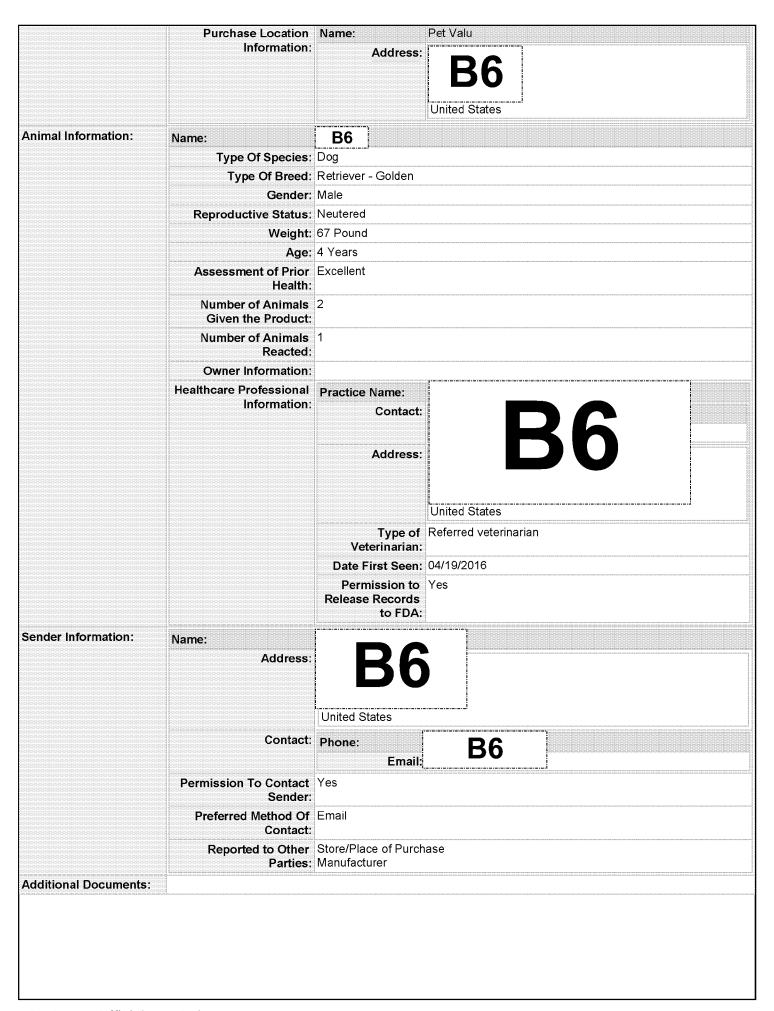


	Sender:	
	Preferred Method Of	Email
	Contact:	
	Reported to Other	Other Store/Place of Purchase
A 11111 - 1 D	raiues.	Stole/Flace of Fulcilase
Additional Documents:		

Report Details - EON-	359067					
ICSR:	2051935					
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:	:) ;;					
Reporter is the Animal Owner:	Yes					
Reported Problem:	Problem Description:	cardiomyopathy. Pri- minimize the effects this, B6 was fed heart became enlarg	diagnosed with early-onset heart failure caused by dilated or to this diagnosis, he was in great health. Were able to of the heart failure with meds and prescription diet. Prior to a steady diet of Blue Buffalo - and prior to that, Beneful. Dog's ged and ultimately led to his death.			
	Date Problem Started:	7 				
	Concurrent Medical Problem:					
	Outcome to Date:	2 0				
	Date of Death:	R6				
Product Information:	Product Name:	ADULT and SENIOF	Blue Buffalo Life Protection Formula Chicken and Brown Rice Recipe For both ADULT and SENIOR; Blue Buffalo FREEDOM - Grain Free Chicken Recipe For both ADULT and SENIOR;			
	Product Type:	Pet Food				
	Lot Number:					
	Package Type:	; BAG				
	Possess Unopened Product:					
	Possess Opened Product:					
	Storage Conditions:	stored in canister.				
	Product Use Information:	Product Use Stopped After the Onset of the Adverse Event:	Dog was fed one cup in morning and one in the evening. Yes			
		Adverse Event Abate After	No			
		Product Stop: Perceived Relatedness to Adverse Event:	Possibly related			
		Other Foods or Products Given to the Animal During This Time Period:	Unknown			
	Manufacturer /Distributor Information:					
	Purchase Location Information:					
Animal Information:	Name:	В6				
	Type Of Species:	7				
	5 [<u> </u>	fied)			
	Gender:	d: Schnauzer (unspecified)				
	Reproductive Status:					
	roproductive otatus,					

		35 Pound		********************************	
	Age:	1			
	Assessment of Prior Health:				
	Number of Animals Given the Product:	1			
	Number of Animals Reacted:	1			
	Owner Information:				
	Healthcare Professional Information:	Contact:	Name:	В6	
			Phone:	В6	
		Date First Seen:	02/05/2014	•••••	
		Permission to Release Records to FDA:			
Sender Information:	Name: [B6			
	Contact:	Email	B6		
	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-	361371				
ICSR:	2053236				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)		
Reporting Type:	Voluntary				
Report Submission Date:	2018-08-04 21:25:50 EDT				
Reporter is the Animal Owner:	Yes				
Reported Problem:	Problem 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 taur 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. I is not know at this time if the dog food contributed to his disease or caused it. T study is still on going.			
	Date Problem Started:	04/12/2016			
	Concurrent Medical Problem:	74 74 75 75 75 75 75 75 75 75 75 75 75 75 75			
	Outcome to Date:	Unknown			
Product Information:	Product Name:	Acana Pork and Squ	uash		
	Product Type:	Pet Food			
	Lot Number:				
	Package Type:				
	Package Size:				
	Purchase Date:				
	Number Purchased:				
	Possess Unopened Product:				
	Possess Opened Product:	INO			
	Storage Conditions:	The product is stored	d in it's original bag and then placed in a air tight container.		
	Product Use	Description:	The product was feed 2xs per day.		
	Information:	Last Exposure Date:			
		Product Use Stopped After the Onset of the Adverse Event:	Yes		
		Adverse Event Abate After Product Stop:			
		Product Use Started Again:			
		Perceived Relatedness to Adverse Event:	Possibly related		
		Other Foods or Products Given to the Animal During This Time Period:			
	Manufacturer /Distributor Information:				



Report Details - EON-	323519					
ICSR:	2023230					
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:	2017-07-11 17:32:14 EDT	2017-07-11 17:32:14 EDT				
Reported Problem:	Problem Description:	Please note: Dr. Jennifer Jones was consulted prior to submission of this report. She would like to be involved in the case review B6 housemate, B6 (separate report submitted) was diagnosed with DCM and CHF 2/17 and was euthanized after aggressive treatment of CHF. At that time B6 had 2 syncopal events closely related to each other. His appetite for dog food declined but he would eat it if tempted with treats mixed in. He was presented 6/22/17 for more syncopal events and was similarly diagnosed with severe DCM and CHF. He was able to be successfully treated however and is clinically doing well on CHF medications as of 7/10/17. A re-review of the myocardial histopathology for B6 housemate B6 was requested at this time because of the unusual diagnosis of DCM in a small breed dog living in the same house as another dog similarly diagnosed a few months ago. This re-review by one of our pathologists showed myofiber vacuoles reminiscent of the changes seen in doxorubicin toxicity. Since the dog had not received doxorubicin, the pathologist recommended culturing the food for Streptomyces peucetius - the bacterium which produces doxorubicin. Halso recommended testing for Fusarium spp. a fungus which produces Fumonis B1, a toxin that produces heart failure in pigs. Like B6 (unrelated, younger miniature schnauzer), B6 had been fed Caifornia Naturals Adult - both kangar with lentils and venison with lentils along with Milo's kitchen treats. We have samples of these foods from 6/17 but not the original bags from when he was presented 2/17. These samples were provided at the time B6 also presented with severe DCM and CHF. Like B6 had extensive infectious disease testing which was negative and nutritional amino acid deficiencies were ruled ou Because of this, their unrelated lineages (although the same breed, they were from different lines), different ages but similar time of presentation, we are considering common environmental factors which could precipitate DCM, including food contamination or toxin exposure. We have pla				
	Date Problem Started:	06/22/2017				
	Date of Recovery:	: 07/10/2017				
	Concurrent Medical Problem:					
	Outcome to Date:	; Stable				
Product Information:	Product Name:		between: California Natural Adult Limited Ingredient Grain en Lentils Recipe Dog Food and Kangaroo and Lentils			
	Product Type:	Pet Food				
	Lot Number:					
	Package Type:	BAG				
	Package Size:	26 Pound				
	Storage Conditions:	In the bag in a cabin	et			
	Product Use Information:	Description:	the Venison and Kangaroo types were alternated depending on store availability and were fed twice daily along with Milo's kitchen treats			
		Perceived Relatedness to Adverse Event:	Possibly related			
	Manufacturer /Distributor Information:					
	Purchase Location Information:					
Animal Information:	Name:	B6				

	Type Of Species:	Dog			ADDITION OF THE PERSON OF THE
	Type Of Breed:	Schnauzer - Miniatur	re		
	Gender:	Male			
	Reproductive Status:	Neutered			
	(9.6 Kilogram			
	3 100000000000000000000000000000000000	7 Years			
	Assessment of Prior	}			
	Health: Number of Animals	2			
	Given the Product: Number of Animals	2	a bira a biba a a braa a lib bira a bira a in braa a bira a b		
	Reacted:	_			5
	Owner Information:	Owner Information provided:	Yes		
		Contact:	Name:		
			Phone:	B	
			Email:		00 to
		Address:	LIMIL		
		Address.	B	6	
			United States	i	0 1 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	Healthcare Professional	Practice Name:	North Carolina 9	Stata University (Collogo of Votorinany
	Information:		Medicine	state Offiversity, v	College of Veterinary
		Contact:	Name:	Darcy Adin	
			5 6 m m m m m m m m m m m m m m m m m m	(919) 513-6694	77 - 7 77 - 7 70 - 7 70 - 7 70 - 7 70 - 7 70 - 7
			Other Phone:	6145829798	0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5 0.5
			Email:	dbadin@ncsu.ed	u day
		Address:	1060 William M Raleigh New York 27607 United States	oore Dr	
		Practice Name:	North Carolina S	State University,	College of Veterinary Medic
		Contact:	Name: Phone: Other Phone:	B6	
		Practice Name:	North Carolina S	State University,	College of Veterinary Medic
		Contact:	Name: Phone: Other Phone:	B6	
Sender Information:			٠.		
Sender information:	Name:	Darcy Adin			
	Address:	1060 William Moore Raleigh New York 27607 United States	· Dr		
	Contact:	Phone:	9195136694		
		Other Phone	B6	······	
		Email:	dbadin@ncsu.e	du !	
	Permission To Contact				
	Sender:				

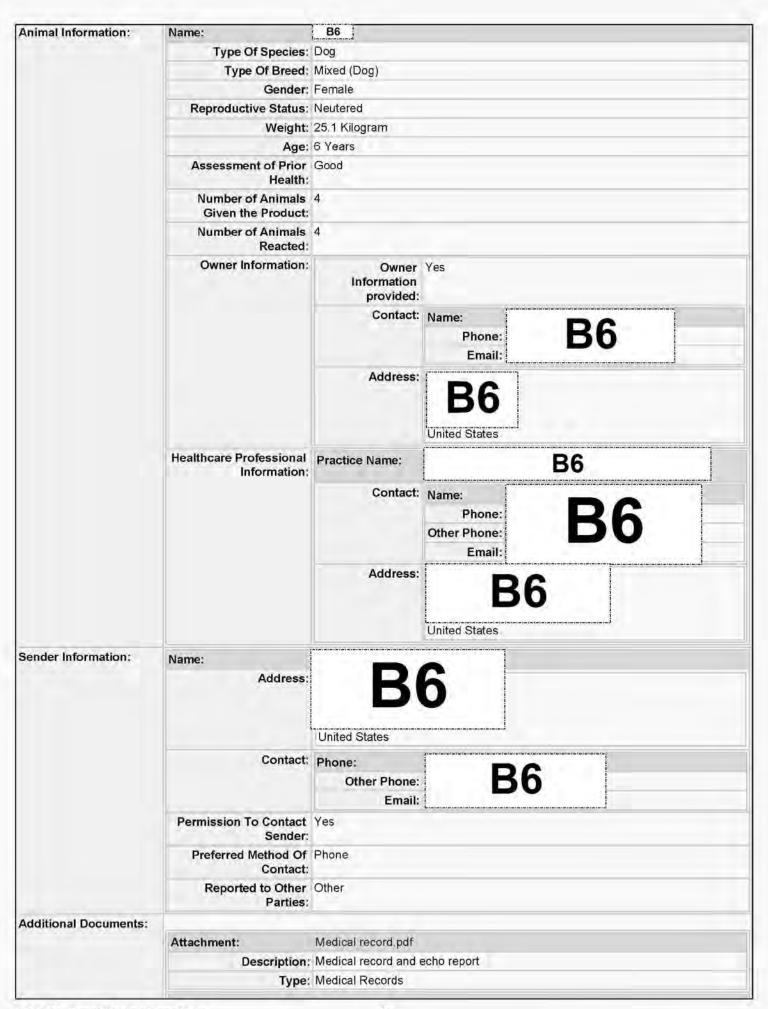
	Preferred Method Of Contact:	Email
	Reported to Other Parties:	
Additional Documents:	Parties:	
, administration		

Report Details - EON-	323515				
ICSR:	2023228				
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				
	: 2017-07-11 17:06:59 EDT				
and the second second second second second second	Problem Description:	She would like to be unsuccessfully with vomiting prior to pre Radiographs showe severe Dilated Card however, he decline continued CHF treat and aquaphoresis witherapy and was eutand carnitine analysicause for DCM and review of the myoca myofiber vacuoles rethe dog had not received food for Streptomyoralso recommended B1, a toxin that prod Naturals Adult - both Milo's kitchen treats original bags from with time his housem presented with seve patient. Both dogs hand nutritional aminurrelated lineages (considering common including food contains)	inifer Jones was consulted prior to submission of this report. Involved in the case review 3 week history of cough treated B6 3 day history of inappetence and sentation to B6 1 for dyspnea. If or dyspnea, disevere pulmonary edema and echocardiogram showed iomyopathy. There was an initial response to diuretic therapy diand was placed on the ventilator for respiratory support and ment. Attempts to wean off the ventilator were unsuccessful as performed. He continued to decline despite aggressive thanized. Infectious disease testing was negative and taurine is showed adequate levels. Necropsy initially did not reveal a supported alveolar injury (possibly ventilator related). A rerdial histopathology by one of our pathologist showed eminiscent of the changes seen in doxorubicin toxicity. Since envel doxorubicin, the pathologist recommended culturing the espeucetius - the bacterium which produces doxorubicin. He testing for Fusarium spp. a fungus which produces Fumonisin uces heart failure in pigs B6 had been fed Caifornia a kangaroo with lentils and venison with lentils along with. We have samples of these foods from 6/17 but not the hen he was presented 2/17. These samples were provided at ate B6 (unrelated, older miniature schnauzer) also re DCM and CHF. I will enter this dog as a separate affected and extensive infectious disease testing which was negative to acid deficiencies were ruled out. Because of this, their although the same breed, they were from different lines), milar time of presentation B6 had clinical signs at the time ut didn't present with CHF for several months), we are nenvironmental factors which could precipitate DCM, mination or toxin exposure.		
	Date Problem Started:	B6 j			
	Concurrent Medical Problem:	No			
	Outcome to Date:	Died Euthanized			
	Date of Death:	В6			
Product Information:	Product Name:	Alternated between: -California Natural Adult Limited Ingredient Grain Free Venison & Green Lentils and Kangaroo & Red Lentils Recipe			
	Product Type:	200000000000000000000000000000000000000	· ·		
	Lot Number:				
	75.55.55.55.55.55.55.55.55.55.55.55.55.5	not available			
	Package Type:	7.0000000000000000000000000000000000000			
	Package Size:				
	Purchase Date:	Market Control Control			
	Possess Unopened	1274			
	Product:				
	Possess Opened Product:				
	Storage Conditions:	In a cabinet, in the c	riginal bag		
	Product Use Information:	Description:	twice daily feeding The sample we have is from 6/17, however, we do not have food samples from 2/17 when both dogs started with clinical signs.		
		Time Interval between Product	2 Years		

		Use and Adverse	50 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
		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:	Address:	United States
Animal Information:	Name:	B6	
	Type Of Species:	Dog	
	Type Of Breed:	Schnauzer - Miniatui	re
	Gender:	<u> </u>	
	Reproductive Status:		
		8.2 Kilogram	
		B6 Years	
	Assessment of Prior Health:	 	
	Number of Animals Given the Product:	2	
	Number of Animals Reacted:	2	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: Phone: Email:
		Address:	
			B6 United States
	Healthcare Professional Information:	Practice Name:	North Carolina State University, College of Veterinary Medicine
		Contact:	Name: Darcy Adin
			Phone: (919) 513-6694
			Other Phone: 6145829798
			Email: dbadin@ncsu.edu
		Address:	1060 William Moore Dr Raleigh New York 27607 United States
		Practice Name:	North Carolina State University College of Veterinary Medici
		Contact:	Name: B6

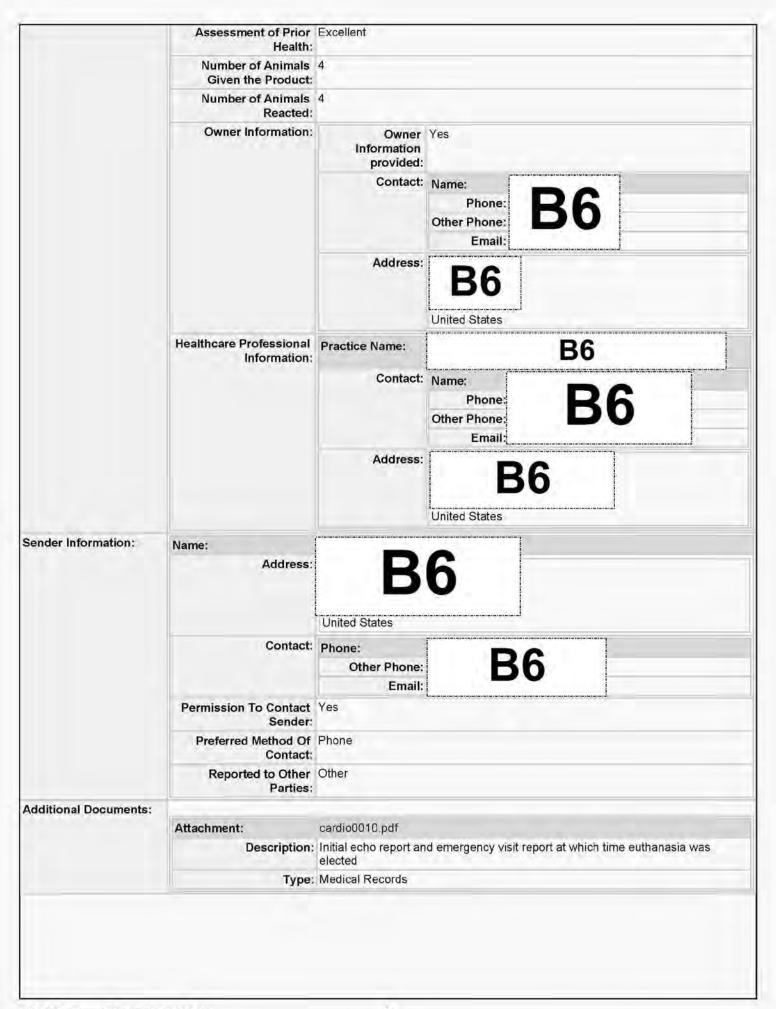
			Other Phone: B6			
		Practice Name:	North Carolina state University, College of Veterinary Medic			
		Contact:				
			Phone: B6			
			Other Phone:			
Sender Information:	Name:	Darcy Adin				
	[2000 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100	1060 William Moore	Dr			
		Raleigh				
		New York 27607				
		United States				
	Contact:	Phone:	9195136694			
		Other Phone:	B6			
		Email:	dbadin@ncsu.edu			
	Permission To Contact Sender:	Yes				
	Preferred Method Of	{				
	Contact:	4				
	Reported to Other Parties:	Manufacturer				
Additional Documents:		7.				

Report Details - EON-	345822				
ICSR:	2040525				
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:	2018-01-22 17:19:17 EST				
Reported Problem:	Problem Description:	B6 was presented for evaluation of cough, labored breathing, multiple episodes of collapse, cardiomegaly, and suspected congestive heart failure. Congestive heart failure was confirmed with thoracic radiographs and echocardiogram revealed dilated cardiomyopathy.			
	Date Problem Started:	12/30/2017			
	Concurrent Medical Problem:	Yes			
	Pre Existing Conditions:		B6		
	Outcome to Date:	Better/Improved/Red	covering		
Product Information:	Product Name:	California Natural G	rain-Free Kangaroo and Red Lentils Recipe		
	Product Type:	<u> </u>	S		
	Lot Number:				
	Package Type:	BAG			
	Purchase Date:				
	Possess Unopened Product:	No			
	Possess Opened Product:	Yes			
	Product Use Information:	Description:	otion: B6 had been eating this dog food since she first displaced signs of B6 is a puppy and food allergy was considered as a potential contributor.		
		Last Exposure Date:	01/10/2018		
		Time Interval between Product Use and Adverse Event:			
		Product Use Stopped After the Onset of the Adverse Event:			
		Adverse Event Abate After Product Stop:			
		Product Use Started Again:			
		Perceived Relatedness to Adverse Event:	Probably related		
		Other Foods or Products Given to the Animal During This Time Period:			
	Manufacturer /Distributor Information:				
	Purchase Location Information:				

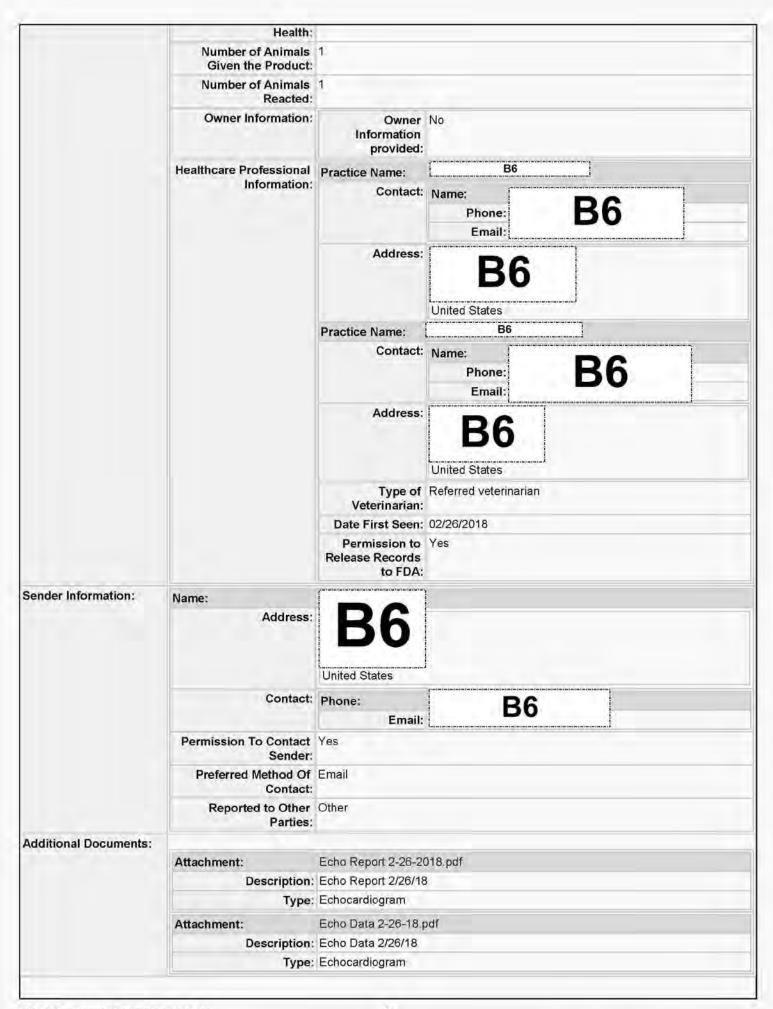


Description: Taurine level Type: Laboratory Report Attachment: Listserve on kangaroo and lentil diets pdf Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils Type: Other	Type: Laboratory Report Attachment: Listserve on kangaroo and lentil diets pdf Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils
Attachment: Listserve on kangaroo and lentil diets pdf Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils	Attachment: Listserve on kangaroo and lentil diets pdf Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils
Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils	Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils
Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils	Description: Discussion amongst veterinary cardiologists of dilated cardiomyopathy in patients eating either kangaroo and lentil or vegan diets with lentils
Type: Other	Type: Other

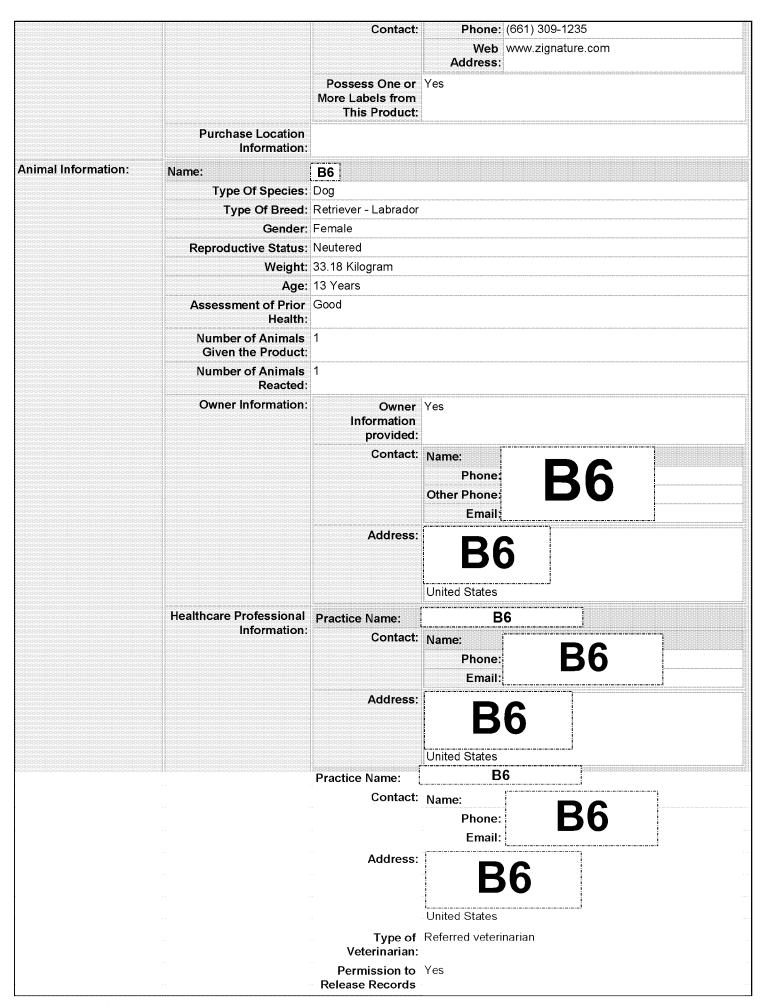
Report Details - EON-	345833					
ICSR:	2040529					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated with the product)			
Reporting Type:	Voluntary		······································			
Report Submission Date:	::) ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;					
Reported Problem:	Problem Description:	R6 had been dia	gnosed with a new heart murmur a counte of months earlier			
•	r roblem bescription.	B6 had been diagnosed with a new heart murmur a couple of months earlier, then developed difficulty breathing and cough and was diagnosed with congestive heart failure. Echocardiogram showed evidence of dilated cardiomyopathy and chronic degenerative valve disease. * B6 - FDA ICSR ID 2040528				
	Date Problem Started:	08/18/2017				
	Concurrent Medical Problem:	Yes				
	Pre Existing Conditions:		B6			
	Outcome to Date:	Died Euthanized				
	Date of Death:	В6				
Product Information:	Product Name:	California Natural G	rain-Free Kangaroo and Red Lentils Recipe			
	Product Type:					
	Lot Number:	1				
	Package Type:	BAG				
	Possess Unopened Product:	No				
	Possess Opened Product:	No				
	Product Use Information:	Description:	B6 had been fed this product for years for management of food allergy.			
		Last Exposure Date:	08/24/2017			
		Product Use Stopped After the Onset of the Adverse Event:	Yes			
		Adverse Event Abate After Product Stop:	No			
		Product Use Started Again:	N2			
		Perceived Relatedness to Adverse Event:	Probably related			
	Manufacturer /Distributor Information:					
	Purchase Location Information:					
Animal Information:	Name:	B6				
	Type Of Species:					
		: Retriever - Labrador				
	Gender:					
	Reproductive Status:					
		: 25.6 Kilogram				
	Λ	5 Years				



Report Details - EON-	350359					
ICSR:	2044946					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with	the product)		
Reporting Type:	Voluntary					
Report Submission Date:	2018-04-02 15:19:51 EDT					
Reported Problem:	Problem Description:	A heart murmur was auscultated on a routine exam and patient was diagnosed on 2/26/18 with moderate dilated cardiomyopathy - ruleout idiopathic vs. taurine /amino acid responsive - with moderately decreased left ventricular contractility. Patient is on a grain free diet - Nature's Recipe Salmon and Sweet Potato. It is suspected that some grain free diets provide insufficient levels of taurine, contributing to the development of dilated cardiomyopathy. At presentation, had no cough; normal appetite and attitude; no exercise intolerance. Medication management and taurine supplementation was recommended. She will be rechecked in June 2018.				
	Date Problem Started:	02/26/2018				
	Concurrent Medical Problem:	Yes				
	Pre Existing Conditions:			B6		
	Outcome to Date:	Unknown				
Product Information:	Product Name:	Grain Free Easy to [Digest Salmon, 9	Sweet Potato, & Pumpkin Recipe		
	Product Type:)				
	Lot Number:					
	Package Type:	BAG				
	Product Use	Description:	Daily as main o	diet		
	Information:					
	Manufacturer /Distributor Information:		The J.M. Smucker Co.			
		1)	Manufacturer 1 Strawberry Lane			
		Addicas.	Orrville Ohio 44667 United States	ane		
		Contact:	Phone:	(888) 550-9555		
			Web Address:	www.naturesrecipe.com		
		Possess One or More Labels from This Product:	33			
	Purchase Location Information:					
Animal Information:	Name:					
	Type Of Species:	Dog				
	Type Of Breed: Spaniel - Cocker American					
	Gender: Female					
	Reproductive Status:	tatus: Neutered				
	-	t: 11.7 Kilogram				
	Age:	ge: 13 Years				
	Assessment of Prior	or Good				



Report Details - EON-	350158			
ICSR:	2044632			
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:	2018-03-27 15:12:36 EDT			
Reported Problem:	At the time of diagnosis (10/31/17), B6 was a 13 year old female spayed Labrador retriever who had been maintained on a Zignature Kangaroo form She presented with a history of a progressive cough which, prior to present became productive and she coughed up a small volume of pink foam (possibility pulmonary edema). On examination she had a 2/6 left apical systolic heart murmur and on echo diagnosed with advanced dilated cardiomyopathy with severe left ventricular dilation, moderate to severe left ventricular systolic dysfunction, and moderate to severe left atrial dilation. Thoracic radiograph suspicious for early congestive heart failure. A whole blood taurine level was submitted and was low at B6 She was treatment with B6 Taurine and lecarnitine and her diet was changed the progression of the progre		the had been maintained on a Zignature Kangareo formula. It is a history of a progressive cough which, prior to presentation, and she coughed up a small volume of pink foam (possible On examination she had a 2/6 left apical systolic heart of diagnosed with advanced dilated cardiomyopathy with a dilation, moderate to severe left ventricular systolic inderate to severe left atrial dilation. Theracic radiographs were congestive heart failure. A whole blood taurine level was own at B6 She was treatment with B6 Itaurine and I-carnitine and her diet was changed to cardiac. At her recheck in 2/26/18, B6 heart had improved with mild dilated cardiomyopathy with normalized left atrial to tentricular dilation and low normal left ventricular systolic	
	Date Problem Started:	Managaran and an		
	Concurrent Medical Problem:			
	Outcome to Date:	: Better/Improved/Recovering		
Product Information:	Product Name:	Zignature Kangaroo Formula		
	Product Type:	Pet Food		
	Lot Number:			
	Package Type:	BAG		
	Possess Unopened Product:	•		
	Possess Opened Product:	Unknown		
	Product Use Information:	Product Use Stopped After the Onset of the Adverse Event:		
		Adverse Event Abate After Product Stop:		
		Product Use Started Again:	TA CONTRACTOR OF THE CONTRACTO	
		Perceived Relatedness to Adverse Event:	Probably related	
		Other Foods or Products Given to the Animal During This Time Period:		
	Manufacturer		Pets Global - Zignature	
	/Distributor Information:	Type(s):	Manufacturer	
		Address:	28334 Industry Dr	
			Valencia	
			California 91355	
			United States	

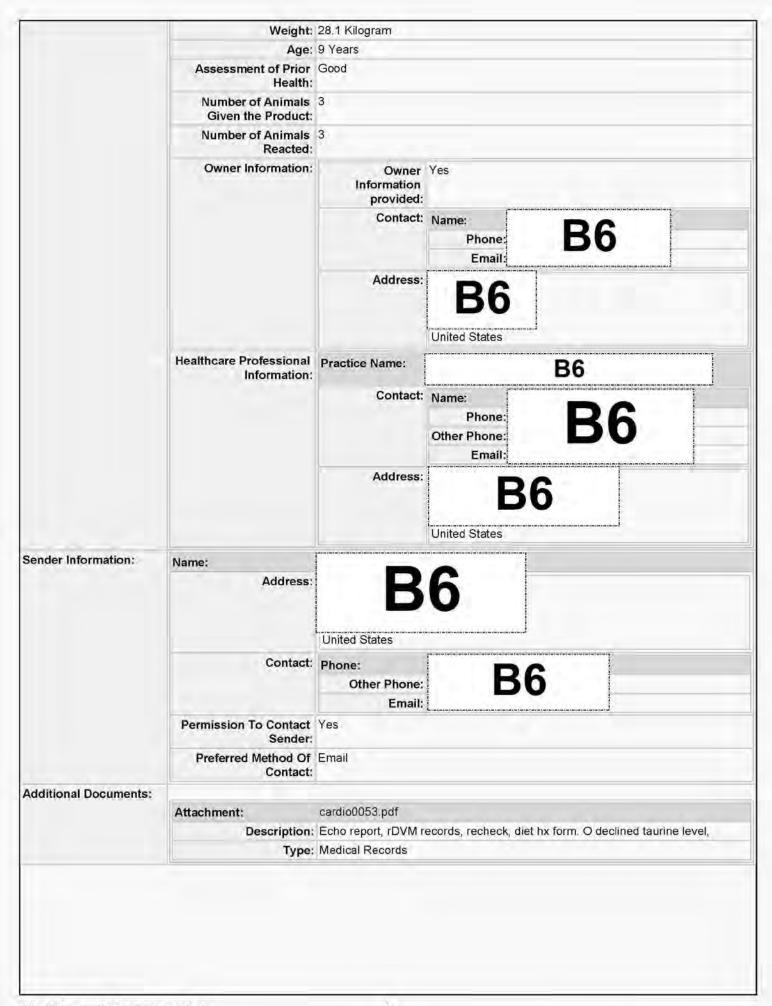


		to FDA:
Sender Information:	Name:	
	Address:	B6
	Contact	
	Contact,	t: Phone: B6
	Permission To Contact Sender:	7 (7 2 3)
	Preferred Method Of Contact:	
	Reported to Other Parties:	
Additional Documents:		
	Attachment:	B6 Echo Report 2017-10-31.pdf
	Description:	n: Echocardiogram 10-31-2017
	Type:	e: Echocardiogram
	Attachment:	B6 Echo Report 2018-02-26.pdf
	Description:	n; Echocardiogram 2-26-2018
	Type:	e: Echocardiogram
	Attachment:	B6 Taurine Level 2017-11-03.pdf
	Description	B6 Taurine Level 11-3-2017
	The second of th	e: Laboratory Report

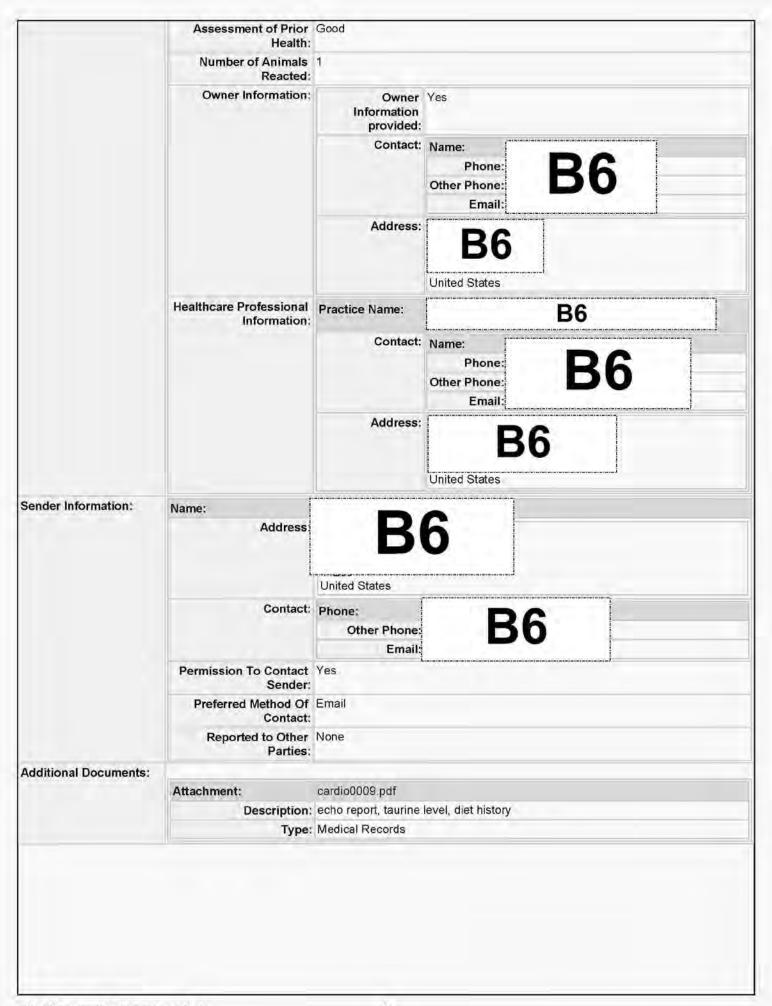
Report Details - EON-	351031			
ICSR:	2045676			
Type Of Submission:	Initial			
Report Version:	FPSR.FDA.PETF.V.V1			
Type Of Report:	Adverse Event (a symptom,	reaction or disease	associated with the product)	
Reporting Type:	Voluntary			
Report Submission Date:	2018-04-12 13:26:01 EDT			
Reported Problem:	Problem Description:	Feb 23, 2018 Patient presented to the cardiology service at B6		
		B6 for tachypnea. He was diagnosed with dilated cardiomyopathy and left side congestive heart failure. Whole blood taurine level was B6 ref 200-350, critical level <150). At the time, patient consuming Zignature Kangaroo Formula and was advised to change.		
	Date Problem Started:	02/22/2018		
	Concurrent Medical Problem:			
	Pre Existing Conditions	·;	B6	
	Outcome to Date:	Stable		
Product Information:	Product Name:	Zignature Kangaroo	Formula	
	Product Type:	ş 		
	Lot Number:	55 		
	Package Type:			
	Possess Unopened Product:	No		
	Possess Opened Product:			
	Product Use Information:	Description: Last Exposure Date:		
		Time Interval between Product Use and Adverse Event:		
		Product Use Stopped After the Onset of the Adverse Event:		
		Perceived Relatedness to Adverse Event:	Possibly related	
		Other Foods or Products Given to the Animal During This Time Period:		
	Manufacturer /Distributor Information:			
	Purchase Location Information:	Name:	Chewy.com	
Animal Information:	Name:	В6		
	Type Of Species:			
		Retriever - Golden		
	Gender:			
	Reproductive Status:			
	···	40 Kilogram		

	Λαe:	6 Years			1
	Assessment of Prior				
	Health:	Good			
	Number of Animals Given the Product:	1			
	Number of Animals Reacted:	1			
	Owner Information:	Owner	Vec		ALADA
	owner information.	Information provided:	res		
		Contact:	Name:	DC	
			Phone:	В6	
		Address:	DC		50 5 5 50 7 7 50 7 7 50 7 7 50 7 7 50 7 7
			B6		
			United States		00 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
	Healthcare Professional	Practice Name:	В6	<u>-</u>	
	Information:	Contact:	Name:		-
			Phone:	B6	
		Address:			
			B6		00 3 3 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
			United States	į	00 to 1 to
		Type of	Referred veterinaria	an	00 C C C C C C C C C C C C C C C C C C
		Veterinarian:			
		Date First Seen:	02/23/2018		THE RESERVE OF THE PROPERTY OF
Sender Information:	Name:				
	Address:	DC			A Parameter State of the Control of
		B6			nere v venere.
					re un anne de la companya de la comp
		United States			Annotative grant and the second grant gran
	Contact:	Phone:	В6		
		Email:	L.		
	Reporter Wants to Remain Anonymous:	No			
	Permission To Contact Sender:	Yes			
	Preferred Method Of	Email			
	Contact: Reported to Other	None			
	Parties:				
Additional Documents:					

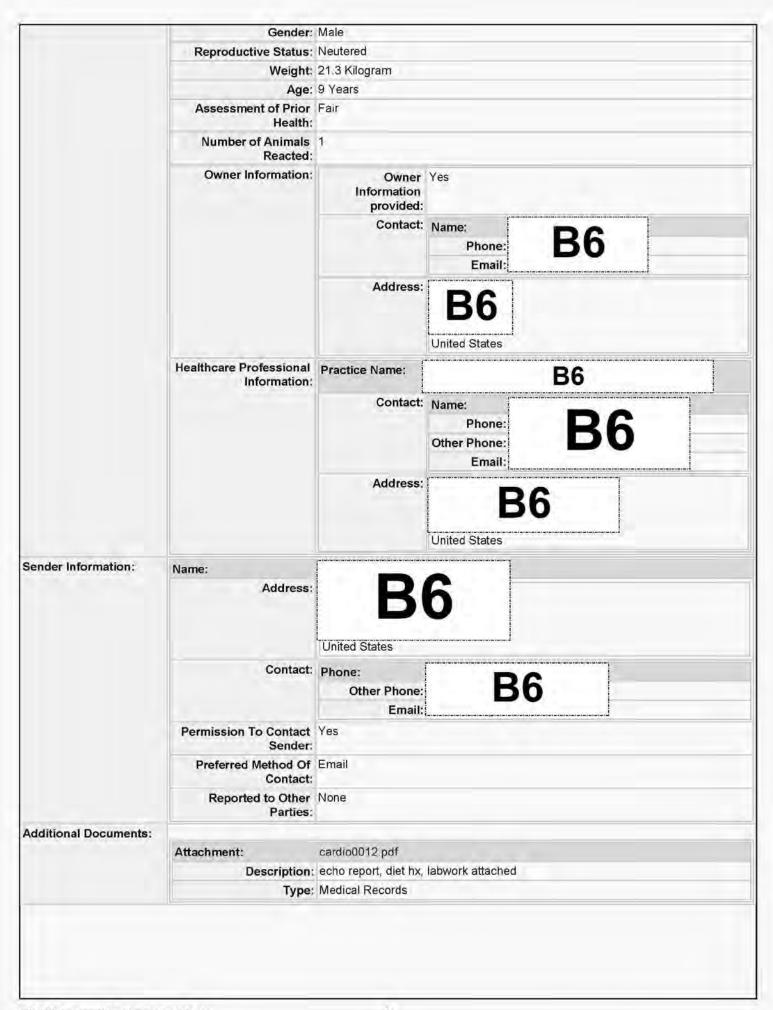
Report Details - EON-	356326				
ICSR:	2049281				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)				
Reporting Type:	Voluntary				
Report Submission Date:	2018-06-12 11:47:05 EDT				
Reported Problem:	Problem Description:	Presented as ER case after evaluation at B6 the previous afternoon. Owner report distended and uncomfortable stomach, with a decrease in activity and an increase in vagal collapse episodes, that have been associated with bowel movements. B6 appetite is also decreased and he vomited after one collapse episode. The collapse episodes have been occurring more frequently over the last few days, with at least 1 occurring each day B6 removed 1500ml of fluid from B6 abdomen and gave him 2mg/kg injection of B6			
	Date Problem Started:				
	Concurrent Medical Problem:	Yes			
	Pre Existing Conditions:		B6		
	Outcome to Date:	Stable			
Product Information:	Product Name:	Zignature Lamb			
	Product Type:	Pet Food			
	Lot Number:				
	Package Type:	BAG			
	Possess Unopened Product:				
	Possess Opened Product:				
	Product Use Information:	Description:	B6 was fed 1 cup dry food BID since May 2015. He also receives Fruitable Treats, peanut, butter, and Fish Oil-1000 mg BID.		
		First Exposure Date:	05/01/2015		
		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:	777		
	Manufacturer /Distributor Information:				
	Purchase Location	A. al al a. a	no I		
	Information:	Address:	United States		
Animal Information:	Name:	В6			
	Type Of Species:				
	Type Of Breed:				
	Gender:	=			
	Reproductive Status:	Neutered			



Report Details - EON-	358119			
ICSR:	2051190			
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			
	2018-07-02 14:28:07 EDT			
Reported Problem:	Problem Description:	years ago. Murmur i March. Diagnosed w has good energy lev	or heart murmur evaluation, which was first documented 3 is now progressive and [B6] has also developed a cough in with tracheal collapse at that time due to radiographs. B6 wels and the owner is restricting her activity since March. B6 B6 B6 B6 B6 B6 B6 B6	
	Date Problem Started:	06/18/2018		
	Concurrent Medical Problem:			
	Pre Existing Conditions:	Heart murmur docur	mented 1 year prior to diet. Medications include B6 B6	
	Outcome to Date:	Better/Improved/Red	covering	
Product Information:	Product Name:	Zignature Kangeroo	and Lentil	
	Product Type:	Pet Food		
	Lot Number:			
	Package Type:	BAG		
	Possess Unopened Product:			
	Possess Opened Product:			
	Product Use Information:	Description: Time Interval between Product Use and Adverse Event:		
		Product Use Stopped After the Onset of the Adverse Event:		
		Perceived Relatedness to Adverse Event:	Probably related	
		Other Foods or Products Given to the Animal During This Time Period:		
	Manufacturer /Distributor Information:			
	Purchase Location Information:	Address:	B6 United States	
Animal Information:	Name:	B6		
	Type Of Species:	L		
	Type Of Breed:			
	Gender:			
	Reproductive Status:			
	<u>-</u>	4.9 Kilogram		
	_	12 Years		



Report Details - EON-	358128				
ICSR:	2051197				
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:	2018-07-02 16:02:14 EDT				
Reported Problem:	Problem Description:	extremely exercise is radiographs showed pneumonia B6 was which time B6 was initiated B6 respos appetite, energy level B6 has lost a notice despite doubling the	h coughing in late May, which rDVM initially treated with did not resolve and B6 became very lethargic, inappetent, intolerant, and has increased respiratory effort. rDVM cardiomegly and it was suspected that B6 had developed as presented to B6 on 6/23 for further evaluation, at a diagnosed with heart failure and cardiac medications were nded right away to cardiac medications, with improved els, and a dramatic decrease in cough. The owner reports that the eable amount of weight since the ER visit, a week ago, amount of food offered. Taurine level pending		
	Date Problem Started:	3			
	Concurrent Medical Problem:				
	Pre Existing Conditions:	3	B6 Rx'ed		
	Tro Existing Conditions.	B6 which d	raused GI upset. Owner feeding bland diet of lean ground reeks. Recently added in canned Blue Buffalo to help		
	Outcome to Date:	Better/Improved/Red	covering		
Product Information:	Product Name:	Zignature Kangeroo and Lentil			
	Product Type:	Pet Food			
	Lot Number:				
	Package Type:	BAG			
	Possess Unopened Product:	£			
	Possess Opened Product:	Yes			
	Product Use Information:	Description:	Zignature diet Fed BID for the last 12 months; also offered Venison Jerky and bully sticks as treats. For the past 3 weeks, owner has offered bland diet of 85-93% lean ground beef and rice at 2-4 cups a day, as well as canned Blue Buffalo for administering medications.		
		Product Use Stopped After the Onset of the Adverse Event:			
		Perceived Relatedness to Adverse Event:			
		Other Foods or Products Given to the Animal During This Time Period:			
	Manufacturer /Distributor Information:				
	Purchase Location Information:	Address:	B6 United States		
Animal Information:	Name:	В6			
	Type Of Species:	.			
	Type Of Breed:	_			
	,,	, 3,			



From: PFR Event <pfreventcreation@fda.hhs.gov>

To: Cleary, Michael *; HQ Pet Food Report Notification; B6

Sent: 2/24/2019 10:08:57 PM

Subject: Acana: Lisa Freeman - EON-380708

Attachments: 2063115-report.pdf; 2063115-attachments.zip

A PFR Report has been received and PFR Event [EON-380708] has been created in the EON System.

A "PDF" report by name "2063115-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 "2063115-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380708

ICSR #: 2063115

EON Title: PFR Event created for Acana Natural Balance Petcurean (see diet history for additional details);

2063115

AE Date	02/16/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	j -
Animal Species	Dog	Outcome to Date	Stable
Breed	Terrier - Bull - American Pit		
Age	B6 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063115

Product Group: Pet Food

Product Name: Acana, Natural Balance, Petcurean (see diet history for additional details)

Description: DCM and CHF diagnosed 2/16/19. Eating multiple BEG diets Taurine and troponin pending Dog changed to Purina HA vegetarian dry while in hospital and owner has continued this. Will try switching to Pro Plan Sensitive Skin and Stomach Salmon when bag of HA runs out. If she tolerates that, will stay on it. If not, will switch back to HA since she's done well on that.

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, Natural Balance, Petcurean (see diet history for additional details)		

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-380708

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=397717

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Report Details - EON-	380708			
ICSR:	2063115			
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 17:00:13 EST			
Reported Problem:	Problem Description:	DCM and CHF diagnosed 2/16/19. Eating multiple BEG diets Taurine and troponin pending Dog changed to Purina HA vegetarian dry while in hospital and owner has continued this. Will try switching to Pro Plan Sensitive Skin and Stomach Salmon when bag of HA runs out. If she tolerates that, will stay on it. If not, will switch back to HA since she's done well on that.		
	Date Problem Started:	02/16/2019		
	Concurrent Medical Problem:			
	Pre Existing Conditions:	Diarrhea would develop 2-3 weeks after starting a new food. Owner rotated foods to try to avoid this.		
	Outcome to Date:	Stable		
Product Information:	Product Name:	Acana, Natural Balance, Petcurean (see diet history for additional details)		
	Product Type:			
	Lot Number:	3		
	Package Type:	BAG		
	Product Use			
	Information:	written on diet history form is "Natural Balance"		
	Manufacturer /Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	<u> </u>		
	7 }	Terrier - Bull - American Pit		
	Gender:			
	Reproductive Status:			
	., ,	18 Kilogram		
	3 }	B6 Years		
	Assessment of Prior Health:	, -		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	· Owner · Yes Information		
		provided: Contact: Name:		
		Phone: $\mathbf{B6}$		
		Email:		
		Address: DC		
		D 0		
		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 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:	Email: lisa.freeman@tufts.edu	
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Additional Documents:				
	Attachment:	rpt_medical_record_	preview.pdf	
		Medical records		
	Type:	Medical Records		

Veterinary Medical Center AT TUFTS UNIVERSITY

Foster Hospital for Small Animals

55 Willard Street North Grafton, MA 01536 (508) 839-5395

All Medical Records

B6 Address:

Patient: | B6 Breed: Pit Bull **B6** DOB:

Species: Canine Female Sex: (Spayed)

Home Phone: **B6** Work Phone: (Cell Phone: (

Referring	Information

B6

Client: **B6** Patient:

Initial Complaint:

Emergency

Client:

B6 9:00AM -**B6** SOAP Text

Subjective

NEW VISIT (ER)

Doctor: **B6 B6** V'20 Student Presenting complaint: CHF Referral visit? **B6**

Diagnostics completed prior to visit: rads Chest x-rays (at rDVM) - in ER email

HISTORY:

Signalment: 5yo FS Pitbull

Current history:

Coughing 2-3 weeks ago - after physical exercise gotten worse after any exercise, hacking some fluid a little productive, labored breathing, low energy, still eating/drinking, normal bathroom, no v/d. lost weight, looking skinny.

Prior medical history: allergies

Current medications: none

Diet: dry. 2 cups a day (o unsure exactly which diet - rotates through 4 different types of food) Vaccination status/flea & tick preventative use: UTD, no heartworm preventative or flea/tick

Page 2/46

Client:	DC
Patient:	DO

Resuscitation code (i	f admitting to IC	CU): B6			
SOAP approved (DVN	√l to sign):	В6	DVM		
SOAP Text B6	9:49AM {	B6			
DUPLICATE. IGNORE.	,				
SOAP Text B6	10:25AM -	В6]		
B6					

<u>Signalment:</u> 5yo FS Pitbull presenting for biventricular heart failure due to DCM, respiratory distress. Day 1 of hospitalization

Presenting history:

Coughing 2-3 weeks ago - after physical exercise gotten worse after any exercise, hacking some fluid a little productive, labored breathing, low energy. still eating/drinking, normal bathroom, no v/d. lost weight, looking skinny to the owner. Prior medical history: allergies

Current medications: none

Diet: dry. 2 cups a day (o unsure exactly which diet - rotates through 4 different types of food)- brought in samples to fill out forms for the diet study she is enrolled in.

Vaccination status/flea & tick preventative use: UTD, no heartworm preventative or flea/tick Travel history: none

EXAM:

B6

C/V: grade 2/6 apical systolic murmur, no arrhythmia, ssfp

B6

ASSESSMENT:

A1: Congestive heart failue r/o secondary to DCM vs other

Client: B6	
Diagnostics performed B6 - AFAST/TFAST: B lines, subjectively dec	creased contractily of heart, mild amount of abdominal effusion; scan
B6	
B6	

- BP (did not obtain because patient was in respiratory distress)
- Chest x-rays (at rDVM) in ER email
 - Diffuse interstitial pattern bilaterally, pulmonary vessels not easily visible. Severe cardiomegaly with left mainstem bronchi compression and trachea is dorsally deviated.

Diagnostics performed	В6		
		B6	

PLAN:

Treatments/monitoring:

Deposit & estimate status

Resuscitation code (if admitting to ICU): **B6**

SOAP approved (DVM to sign): B6 DVM

11:55AM - B6 **SOAP Text**

Signalment: 5yo FS Pitbull presenting for biventricular heart failure due to DCM, respiratory distress. Day 1 of hospitalization

Presenting history:

Coughing 2-3 weeks ago - after physical exercise gotten worse after any exercise, hacking some fluid a little productive, labored breathing, low energy. still eating/drinking, normal bathroom, no v/d. lost weight, looking skinny to the owner. Prior medical history: allergies

Current medications: none

Diet: dry. 2 cups a day (o unsure exactly which diet - rotates through 4 different types of food)- brought in samples to fill out forms for the diet study she is enrolled in.

Vaccination status/flea & tick preventative use: UTD, no heartworm preventative or flea/tick Travel history: none

Overnight update:

Very bright, RR 24-36, eating well and passing urine frequently.

Subjective

Client: B6 Patient:
EXAM, GENERAL
Subjective (S) Very BAR
Objective (O)
B6
H/L: regualr rhythm, II/VI murmur LHS. Strong and synchronous peripheral pulses.
B6
ASSESSMENT: A1: Dilated Cardiomyopathy
Diagnostics performed - AFAST/TFAST: B lines, subjectively decreased contractily of heart, mild amount of abdominal effusion; scant pericardial effusion - AFAST/TFAST: B lines, subjectively decreased contractily of heart, mild amount of abdominal effusion; scant pericardial effusion
- BP (did not obtain because patient was in respiratory distress) - Chest x-rays (at rDVM) - in ER email - Diffuse interstitial pattern bilaterally, pulmonary vessels not easily visible. Severe cardiomegaly with left mainstem bronchi compression and trachea is dorsally deviated.
Diagnostics performed B6
Plan: B6 SOAP completed by B6 BVSc
Initial Complaint:

Recheck -

В6

- DCM Study

Client: B6

SOAP Text | B6 | :53PM - | B6

Disposition/Recommendations

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Client:	B6 j	
Veterinaria	n:	
Patient ID:	B6	
Visit ID:		

Lab Results Report

Foster Hospital for Small Animals

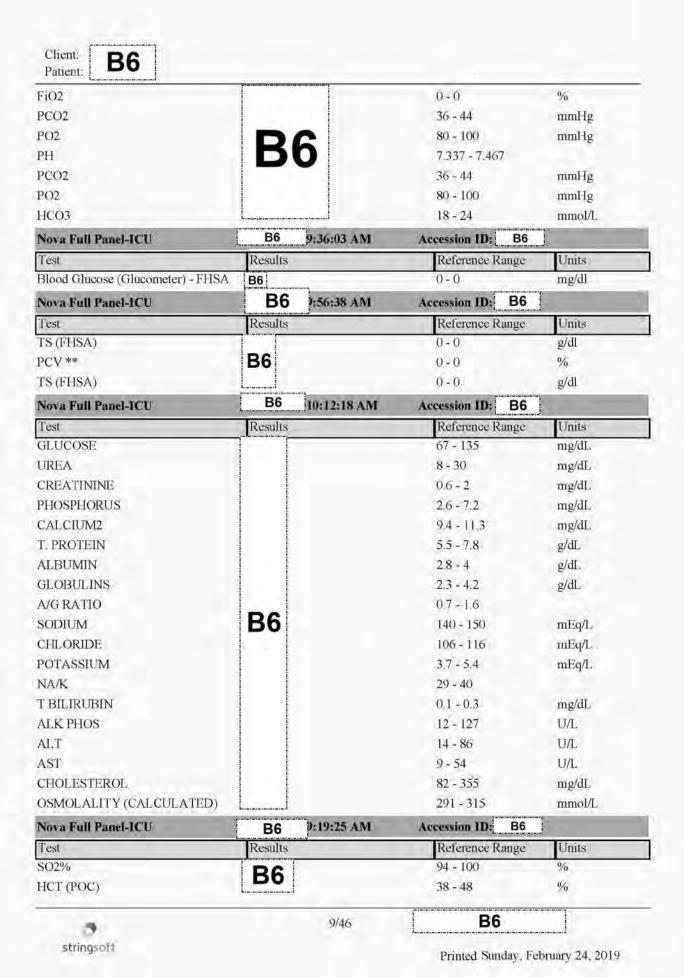
55 Willard Street North Grafton, MA 01536 (508) 839-5395

Patient:	B6	
Species:	Canîne	
Breed:	Pit Bull	
Sex:	Female (Spayed)	
Age:	B6 Years Old	

Nova Full Panel-ICU	B6 9:28:25 AM	Accession ID: B6	
Test	Results	Reference Range	Units
SO2%		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)	(4)	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)	B6	12 - 28	mg/dL
CREAT (POC)	11	0.2 - 2.1	mg/dL
TCO2 (POC)		0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG		0 - 0	mmol/L
GAP		0 - 0	mmol/L
CA/MG		0 - 0	mol/mol
BEecf	(a)	0 - 0	mmol/L
BEb		0 - 0	mmol/L
A		0 - 0	mmHg
NOVA SAMPLE	L. A. C.	0 - 0	
-	8/46	B6	

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Printed Sunday, February 24, 2019



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C (POC) CL(POC)		3.6 - 4.8 109 - 120	mmol/L mmol/L
CL(POC)			
CA (ionized)	4	1.17 - 1.38	mmol/L
MG (POC)		0.1 - 0.4	mmol/L
GLUCOSE (POC)	1	80 - 120	mg/dL
LACTATE		0 - 2	mmol/L
BUN (POC)		12 - 28	mg/dL
CREAT (POC)	1	0.2 - 2.1	mg/dL
TCO2 (POC)	400	0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG	B6	0 - 0	mmol/L
GAP	טט	0 - 0	mmol/L
CA/MG		0 - 0	mol/mol
BEecf	Town to the Control of the Control o	0 - 0	mmol/L
BEb	· Carlon	0 - 0	mmol/L
A		0 - 0	mmHg
NOVA SAMPLE	-	0 - 0	
FiO2	1	0 - 0	%
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
PH	-	7.337 - 7.467	
PCO2		36 - 44	mmHg
PO2	100	80 - 100	mmHg
HCO3		18 - 24	mmol/L
Nova Full Panel-ICU	B6 9:27:23 AM	Accession ID: B6	-te
Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	B6	0 - 0	%
TS (FHSA)		0 - 0	g/dl
		De De	-(0)-10-1-1
	10/46	B6	j
stringsoft		Printed Sunday, F	Sebruary 24, 2010
		rimed Suiday, r	Columny 24, 2019
Vitale Posulta			
Vitals Results	A SAMPLE OF		14.00.14.00.14.00.1
9:09:11 AM	Weight (kg)		
The second secon	Notes		
9:09:38 AM	rvotes		
9:09:38 AM 9:10:28 AM	Lasix treatment note		6
		В	6

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Vitals	Results
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1:21:01 AM					
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5:26:16 PM Lasix treatment note		5:19:29 PM	Heart Rate (/min)		
		5:19:47 PM	FiO2 (%)		
5:47:32 PM Respiratory Rate		5:26:16 PM	Lasix treatment note		
		5:47:32 PM	Respiratory Rate		į

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ratient.		
Vitals Results		
5:47:46 PM	Quantify IV Fluids (CRI) in mls	
5:47:47 PM	Catheter Assessment	
6:01:17 PM	Eliminations	
6:54:17 PM	FiO2 (%)	
6:54:24 PM	Respiratory Rate	
7:11:55 PM	Heart Rate (/min)	
7:12:08 PM	Temperature (F)	
7:44:34 PM	FiO2 (%)	
7:44:43 PM	Quantify IV Fluids (CRI) in mls	
7:44:44 PM	Catheter Assessment	
7:45:08 PM	Respiratory Rate	
9:03:32 PM	FiO2 (%)	
9:03:41 PM	Respiratory Rate	
9:17:37 PM	Weight (kg)	
9:18:17 PM	Heart Rate (/min)	
9:19:05 PM	Quantify IV Fluids (CRI) in mls	
9:19:06 PM	Catheter Assessment	
9:19:42 PM	Eliminations	
9:21:04 PM	Lasix treatment note	
9:45:41 PM	Respiratory Rate	DC
B6 9:45:54 PM	FiO2 (%)	B6
10:49:36 PM	Respiratory Rate	
10:50:01 PM	FiO2 (%)	
11:31:31 PM	Quantify IV Fluids (CRI) in mls	
11:31:32 PM	Catheter Assessment	
11:32:09 PM	Heart Rate (/min)	
11:46:46 PM	Respiratory Rate	
11:47:01 PM	FiO2 (%)	
12:46:34 AM	FiO2 (%)	
12:46:44 AM	Respiratory Rate	
1:07:50 AM	Eliminations	
1:38:01 AM	Quantify IV Fluids (CRI) in mls	
1:38:02 AM	Catheter Assessment	
1:39:26 AM	Heart Rate (/min)	
1:56:06 AM	FiO2 (%)	
1:56:16 AM	Respiratory Rate	
3:06:11 AM	FiO2 (%)	
3:06:25 AM	Respiratory Rate	
3:12:19 AM	Lasix treatment note	
3:12:37 AM	Quantify IV Fluids (CRI) in mls	
3:12:38 AM	Catheter Assessment	

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B6

Vitals Results		
4:06:40 AM	Respiratory Rate	
4:07:00 AM	FiO2 (%)	
4:07:08 AM	Heart Rate (/min)	
4:49:25 AM	FiO2 (%)	
4:49:37 AM	Respiratory Rate	
4:52:42 AM	Eliminations	
4:59:34 AM	Amount eaten	
5:24:06 AM	Nursing note	
5:24:55 AM	Heart Rate (/min)	
5:45:41 AM	Respiratory Rate	
5:45:53 AM	FiO2 (%)	
6:44:05 AM	FiO2 (%)	
6:44:44 AM	Respiratory Rate	
7:57:10 AM	Respiratory Rate	
7:57:26 AM	FiO2 (%)	
7:59:14 AM	Nursing note	
8:02:34 AM	Heart Rate (/min)	
8:05:21 AM	Temperature (F)	
8:08:24 AM	Lasix treatment note	
8:14:38 AM	Weight (kg)	B6
B6 8:16:10 AM	Eliminations	
9:02:29 AM	FiO2 (%)	
9:03:17 AM	Respiratory Rate	
10:02:20 AM	FiO2 (%)	
10:04:29 AM	Heart Rate (/min)	
10:08:31 AM	Respiratory Rate	
10:59:22 AM	FiO2 (%)	
10:59:52 AM	Respiratory Rate	
11:47:25 AM	FiO2 (%)	
11:47:53 AM	Respiratory Rate	
11:53:10 AM	Heart Rate (/min)	
11:53:48 AM	Eliminations	
12:59:52 PM	FiO2 (%)	
1:00:37 PM	Respiratory Rate	
2:17:38 PM	Respiratory Rate	
2:17:51 PM	Heart Rate (/min)	
2:22:20 PM	Lasix treatment note	
2:59:31 PM	Respiratory Rate	
3:30:08 PM	Heart Rate (/min)	
3:52:22 PM	Respiratory Rate	
4:58:59 PM	Respiratory Rate	

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Client:
Patient:

B6

5:16:42 PM	Amount eaten
5:17:09 PM	Eliminations
5:28:18 PM	Heart Rate (/min)
6:03:04 PM	Respiratory Rate
6:54:20 PM	Respiratory Rate
6:56:33 PM	Weight (kg)
7:20:10 PM	Temperature (F)
7:20:22 PM	Heart Rate (/min)
7:56:01 PM	Respiratory Rate
8:17:54 PM	Eliminations
9:00: 3 7 PM	Respiratory Rate
9:15:46 PM	Heart Rate (/min)
9:41:52 PM	Respiratory Rate
9:43:34 PM	Lasix treatment note
10:40:52 PM	Respiratory Rate
11:31:23 PM	Heart Rate (/min)
11:31:28 PM	Respiratory Rate
12:28:12 AM	Respiratory Rate Eliminations Heart Rate (/min)
B6 1:05:10 AM	Eliminations
1:12:38 AM	Heart Rate (/min)
1:12:45 AM	Respiratory Rate
2:47:00 AM	Respiratory Rate
3:16:57 AM	Heart Rate (/min)
3:37:24 AM	Respiratory Rate
4:23:24 AM	Respiratory Rate
5:36:11 AM	Amount eaten
5:36:20 AM	Heart Rate (/min)
5:36:27 AM	Respiratory Rate
5:40:28 AM	Lasix treatment note
5:59:29 AM	Eliminations
6:21:11 AM	Eliminations
6:51:01 AM	Respiratory Rate
7:42:21 AM	Weight (kg)
8:08:18 AM	Temperature (F)
8:08:28 AM	Respiratory Rate
8:08:42 AM	Heart Rate (/min)
9:06:23 AM	Eliminations
9:07:04 AM	Respiratory Rate

Client:	D
Patient:	D

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В6	9:20:15 AM 10:02:30 AM 10:02:36 AM 10:02:52 AM 11:09:18 AM 12:17:30 PM 12:17:40 PM 12:17:48 PM 1:05:31 PM 1:36:34 PM 1:36:58 PM 1:36:58 PM	Catheter Assessment Heart Rate (/min) Respiratory Rate Eliminations Respiratory Rate Respiratory Rate Heart Rate (/min) Eliminations Respiratory Rate Catheter Assessment Respiratory Rate Heart Rate (/min) Weight (kg)	B6
]:25:45 PM]:53:45 PM	Weight (kg) Lasix treatment note	

Patient History

c			
	09:09 AM	Vitals	
	09:09 AM	Vitals	
	09:09 AM	Purchase	
	09:10 AM	Purchase	
	09:10 AM	Purchase	
	09:10 AM	Vitals	
	09:28 AM	Purchase	
	09: 3 6 AM	Labwork	
	09:45 AM	Vitals	
	09:55 AM	Treatment	
	09:56 AM	Labwork	
_	09:57 AM	Treatment	
IR	10:04 AM	Prescription	Rh
	10:08 AM	Prescription	B6
	10:45 AM	Vitals	
	10:55 AM	Treatment	
	11:21 AM	Treatment	
	11:21 AM	Vitals	
	11:21 AM	Treatment	
	11:21 AM	Vitals	
	11:21 AM	Vitals	
	11:23 AM	Purchase	
	11:23 AM	Purchase	
			t

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Patient History			
	11:42 AM	UserForm	
	11:54 AM	Treatment	
	11:56 AM	Purchase	
	11:56 AM	Purchase	
	12:19 PM	Vitals	
	12:37 PM	Treatment	
	12:37 PM	Vitals	
	12:37 PM	Vitals	
	12:37 PM	Vitals	
	12:37 PM	Treatment	
	12:37 PM	Vitals	
	12:38 PM	Treatment	
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	02:11 PM	Vitals	
	02:11 PM	Treatment	
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	03:20 PM	Treatment	
	03:20 PM	Vitals	
	03:20 PM	Treatment	
	03:20 PM	Vitals	
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B6

Patient History

102.20 DM	Vitala	[
03:20 PM	Vitals	
03:22 PM	Treatment	
03:23 PM	Treatment	!
03:45 PM	Treatment	l
03:45 PM	Vitals	
03:45 PM	Vitals	
04:07 PM	Treatment	
04:07 PM	Vitals	
04:07 PM	Treatment	
04:07 PM	Vitals	
04:09 PM	Vitals	
04:18 PM	Treatment	
04:18 PM	Vitals	
04:18 PM	Treatment	
04:18 PM	Vitals	
04:18 PM	Vitals	
04:38 PM	Purchase	
04:39 PM	Purchase	
D 6 05:12 PM	Treatment	
B6 05:12 PM 05:12 PM	Vitals	
05:12 PM	Treatment	B6
05:12 PM	Vitals	
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05:13 PM	Treatment	
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P	atient	Histor	V

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05:47 PM	Vitals	
96:01 PM	Vitals	
06:54 PM	Treatment	
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26:54 PM	Vitals	
06:54 PM	Treatment	
96:54 PM	Vitals	
97:11 PM	Treatment	
97:11 PM	Vitals	
97:12 PM	Treatment	
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99:17 PM	Treatment	
99:17 PM	Vitals	
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99:45 PM	Treatment	
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09:45 PM	Treatment	
09:45 PM	Vitals	
10:49 PM	Treatment	
10:49 PM	Vitals	
10:50 PM	Treatment	
10:50 PM	Vitals	

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Client:	D
Patient:	D

11:07 PM	Purchase	
11:31 PM	Treatment	
11:31 PM	Vitals	
11:31 PM	Vitals	
11:32 PM	Treatment	
11:32 PM	Vitals	
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B6

Patient History

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Page 20/46

Patient	History
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Patient History

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Client:	B6
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Patient History

	02:22 PM	Purchase	В6
B6	03:19 PM	Appointment	Appointment Made for 5/13/2019 1:00:00 PM for B6 for Recheck B6
	03:21 PM	Email	DCM Study Emailed Form to B6

Foster Hospital for Small Animals 55 Willard Street Horth Grafton, MA 01536 Telephone (908) 839-2525 Fax (908) 839-7951 http://www.chin/bs.edu/

Discharge Instructions

me po			Owner	-1		
water Bo		own/White Female (Spaye	() Pit Bull	Name: Address:	B6	V
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required hospit B6 : Billed dilated or She has done in condition. It is a Mornitoring at O We wo rest. Ti O Ingeni breath Dreath O An inci If diffici that an	afication in a p control he ardiomyopai rell today an also very imp home: add like you he doses of o eral, most di s per minuti , is minimal rease in brea afty breathin recheck exa are instruction	an oxygen bennel alongside or breathing. Ednocardiograthy B6 has responded we do an now go home. B6 montant that is fed the presonant that is adjusted base ogs with heart failure that is in addition, the breathing if heart failure is controlled of thing rate or effort will us the sub-shield and/or that is so for monitoring breathing is for monitoring breathing.	intralevals mephy (heart scand) to treatment ust receive all libration hypeals of thing rate and don the basath is well controlled effort, noted but ally mean that it your dog be egand a form to	edications (i) showed that she and soon started l ner medications in repolic food ONLY effort at home, ide ing rate and effort d have a breathin by the amount of b you should give a started by an em b help beep track of	B6 I had a dilated hear breathing well outs order to manage hearly during sleep of the manage hearly wall motion us nextra dose of them well enguicy direction of breathing rate and the management of the managem	t, a condition ide of coygen er heart r at a time of than 35 to 4 ed for each B6 re ressmones
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required hospit B6 Called dilated c She has done in Condition. It is a Morvitoring at O We wo rest. Ti O Ingent breath breath O An incomit dilated O There O We ak the bed O If you i	affection in a processor of the control he ardiomyopal related as wery implicated by the control of the control	in oxygen bennel alongside in breathing. Echocardiograthy B6 has responded we did cannow go home. B6 in certant that is fed the presonant that is fed the presonant will be adjusted base by with heart failure that is in addition, the breathing if heart failure is controlled of thing rate or effort will us gis not improved by within the subschild and/or that ins for monitoring breathings for monitoring breathings for monitoring breathings indicate that we show in the subschild and or have your subscription of the subscription of the subscription indicate that we show in the subscription of the subscription in the subscri	eintralevals me phy (heartscand) to treatment ust receive all pription hyperall of thing rate and don the basath is well controlled and more than 30-60 minute tyour dog be every and a form to tufts edu/heart ollapse, a reducted do a reche ould do a reche	edications () showed that she and soon started I ner medications in organic food ONLY effort at home, ide ing rate and effort d have a breathing y the amount of b you should give a s after giving walkated by an em to help keep track o smart/at-home-m tion in appetite, w dx examination.	B6 had a dilated hear breathing well cuts order to manage heart galey during sleep of the manage heart and the man	t, a condition ide of coygen er heart r at a time of than 35 to 4 ed for each B6 re recommend dung doses distention of

B6

Diet suggestions:

B6 should continue to be fed Purina HA dry. She seemed to like that food while in hospital.

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.tufis.edu/heartsmart/diet/).

Your dog's usual diet may also have more sodium than recommended - we want your dog to continue to eat their normal diet for the first 7 to 14 days so we can make sure they are tolerating medications well. 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.). 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.

- O The FDA is currently investigating an apparent association between diet and a type of heart disease called dilated cardiomyopathy. The exact cause is still undear, but it appears to be associated with boutique diets and those containing exotic ingredient or are grain-free. Therefore, we are currently recommending that dogs do not eat these types of diets.
- We recommend switching B6 to commercial diet made by a well-established company that is not grain-free and
 does not contain any exotic ingredients, such as kangaroo, duck, lamb, venison, lentils, peas, beans, buffalo,
 tapioca, barley, and chickpeas.
- O The FDA issued a statement regarding this issue (https://www.fda.gov/Animal/eterinary/NewsEvents/CVI/Updates/ucm613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings School's Petfoodology blog can further explain these findings (http://vetnutrition.tufts.edu/2018/06/a-broken-heart-risk-of-heart-disease-in-boutique-or-grain-free-diets-and-e-xotic-ingredients/).
- Our nutritionists have compiled a list of dog foods that are good options for dogs with beart disease.

if your dog has special nutritional needs or requires a homecooked diet, we recommend you schedule an appointment with our nutritionists (508-887-4696).

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/Follow-usc

A redieck exam has been scheduled for

Friday, February 22, 2019 at 1:00pm with	B6

Cummings Veterinary Medical Center AT TUFTS UNIVERSITY Cardiology Liaison: 508-887-4696

Patient D: B6

Patient D: B6

Canine

B6 | Canine
Fears Old Female (Spayed) Pit Bull

Brown/White BW: Weight (kg) 19.00

Cardiology Consultation ENROLLED IN DCM STUDY

All 1 and a second control of the second con						
Weight Weight (kg) 19.00						
Requesting Clinician: B6						
Attending Cardiologist John E. Rush DVM, MS, DA	CVIM (Cardiology), DACVECC					
В	36					
Cardiology Resident:						
B6						
Thoracic radiographs available for Yes - in ER email Yes - in PACS	rreview?					
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Presenting complaint and import	ant concurrent diseases: Dyspnea nainder of form to be filled out by Cardiol	ogy*				
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Presenting complaint and imports *STOP - rem Physical Examination Muscle condition: Normal Mild muscle loss Cardiovascular Physical Exam	B6	ogy*				

	□ vi/vi
Murmur location/description: left ap	oical systolic (animal panting, difficult auscultation)
Jugular vein:	
Bottom 1/3 of the neck Middle 1/3 of the neck	☐ Top 2/3 of the neck ☐ 1/2 way up the neck
Arterial pulses:	
Weak vs.	Bounding
Fair at most	Pulse deficits
Good	Pulsus paradoxus
☐ Strong	Other (describe):
Arrhythmia:	
■ None	■ Bradycardia
☐ Sinusarrhythmia	☐ Tachycardia
Premature beats	
Gallop:	
■ Yes	Pronounced
■ No	Other:
Intermittent	
Pulmonary assessments:	
Eupneic Eupneic	Pulmonary Cradkles
Mild dyspnea	Wheezes
Marked dyspnea	Upper airway stridor
Normal BV sounds	Other auscultatory findings:
Abdominal exam:	
Normal	Abdominal distension
Hepatomegaly	Mild ascites
Echocardiogram Findings:	
	B6
Mitual inflow: not assessed	
Summated Normal	Pseudonormal Restrictive
	THE RAINCE

Radiographic findings: Diffuse interstitial pattern bilaterally, pulm mainstern bronchi compression and trache Assessment and recommendations: Marked LV contractile dysfunction with ser CHF. Severe PTHN could be post (L-CHF) or of HW preventative, recommend 4DX. Unc secondary to severe RV dilation and PHT. F PS and +/- bubble study. Keep patient in O depending on clinical response. As patient As patient has been on a variety of diets w	ea is dorsally deviated. vere LA dilation, and to pre-capillary (primary lear whether there is Recommend repeat ec 2 chamber B6	horacic radiographs are s y lung disease). As patien TV dysplasia or severe TR	auggestive of It has no histor It is just
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nonboutique diet made by a well-establish days or as soon as patient is stable.			
Acklendum			
B6 - Patient improved resp rate over		was discontinued; pati	ent should
tolerate oxygen trial this morning. Echocar	diogram revealed slig	ht decrease in PHTN	B6
B6 (100bpm) and no crackles bilaterally.		Heart ra ed q6-8h and assess resp	ate is lower
hourly and kidney values today. Treatment plan:			
	B6		
Final Diagnosis: DCM with LCHF; PHTN			•
Heart Failure Classification Score:			
SACHC Classification:	-		
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ACVIM CHF Classification:			

Delayed relaxation

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	(0.790 - 1.140) !
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	ml %
	B6

LV Minor om Sphericity Index LVID LAX om LVAd LAX om LVEDV A-L LAX ml **LVEDV MOD LAX** ml LVLS LAX om LVAS LAX om **LVESV A-L LAX** ml **B6 LVESV MOD LAX** ml **BPM** HR EF A-L LAX % **LVEF MOD LAX** % SV A-L LAX ml SV MOD LAX ml CO A-L LAX /min CO MOD LAX **Vmin** RVIDD om RVIDS an Doppler MR Vmax m/s MR maxPG mmHg MV E Vel m/s MV DecT ms MV Dec Slope m/s MV A Vel m/s MV E/A Ratio E' m/s E/E **B6** A' m/s 5 m/s IVRT ms **AV Vmax** m/s AV maxPG mmHg PV Vmax m/s PV maxPG mmHg TR Vmax m/s TR maxPG mmHg

Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://vetmed.turks.edu/

Discharge Instructions

Patient Name: B6 Species: Canine Brown/White Female (Spayed) Pit Bull Birthdale: B6	Owner B6 B6	Patient ID: B6
Attending Cardiologist:		
B6		
Cartillov Besilent	**************************************	THE COLUMN TO SERVICE STATE OF THE COLUMN TWO SERVICES STATE OF TH
Cardiology Technician:		
Student B6 V19	in the second of	
Admit Date: 2/22/2019 12:37:33 PM Discharge Date: 2/22/2019 Diagnoses: Dilated cardiomyopathy (DCM Diagnostic test results and findings: O Labwork findings: The labwork re O ECG: The ECG did not show any a Case summary: Therefore the principal RG in for evaluating	suits are pending. We will call you w mhythmias on examination today.	rith these results. In the recently diagnosed heart disease.
On exam today B6 was bright and alert	You report that she is doing well at h did not show any arrhythmia: B6 We are going to keep her on her our	nome and her respiratory rate has been was breathing slightly harder after her exam
of rest. The doses of drugs will be of in general, most dogs with heart to breaths per minute. In addition, to breath, is fairly minimal if heart to of An increase in breathing rate or e	adjusted based on the breathing ratifailure that is well controlled have a line breathing effort, noted by the amiliure is controlled. If or will usually mean that you shou	breathing rate at rest of less than 30-34 bount of belly wall motion used for each ald give an extra close B6 If
	ed by within 30-60 minutes after giving and/or that your dog be evaluated.	

- 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/).
- 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.
- Of 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	
DU	

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 86 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 has been scheduled for

Monday, May 13, 2019 at 1:00PM with B6

Thank you for entrusting us with B6 care. Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiology liaison at (508)-887-4696 or email us at cardiology liaison at (508)-887-4696 or email us at

Please visit our HeartSmart website for more information http://vet.tulis.edu/heartsmart/

Prescription Refill Discloimer:

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 of promising new test or treatment. Please see our website: website: website: websit			
Case B6	Owner B6	Discharge Instructions	

Cardiology Liaison: 508-887-4696

Date: 2/22/2019

Prior ATE? N

Prior arrhythmia? N

Syncope or collapse? No

Shortness of breath or difficulty breathing? No

B6

Patient D: B6

Canine

Jeans Old Female (Spayed) Pit Bull

Brown/White

Cardiology Appointment Report -Patient enrolled in the DCM study-

Attending Cardiologist John E. Rush DVM. MS. DACVIM (Cardiology). DACV B6	PECC.
DU	
Cardiology Resident:	raconario de la companio del companio de la companio della compani
B6	
Cardiology Technician:	
B6 Studen B6 V19 Presenting Complaint: DCM	
General Medical History:	
Lajarrajarrajarrajarrajarrajarrajar	murmur. Echo showed decreased contractility.
marked RH dilation, thickened MV and TV, 2+ MR. O reports doing well at home since discharge	
Diet and Supplements:	
Prescription purina cardiac diet, eating well	
coconut oil to give medication	
Cardiovascular History:	
Prior CHF diagnosis? N	
Deine honet encessor 2 V	

Monitoring respiratory rate and effort at home? Yes, once a day, around 18-24 Cough? Coughed a few times last night, otherwise no cough, some sneezing

Sudden onset lameness? No Exercise intolerance? No

Sinus arrhythmia

Premature beats

Current Medications Pertinent to CV System: **B6** Cardiac Physical Examination: **B6** Muscle condition: Normal Moderate cachecia Mild muscle loss Marked cachexia Cardiovascular Physical Ecam: Murmur Grade: IV/VI None **■** I/VI ■ v/vi II IVVI ■ vyvi ₩ III/VI Murmur location/description: left apical systolic Jugular vein: Bottom 1/3 of the neck 1/2 way up the neck Middle 1/3 of the neck Top 2/3 of the neck Arterial pulses: Bounding Weak Fair Pulse deficits Good Pulsus paradoxus Other: Strung Arrhythmia: Mone Name Bradycardia

■ Tachycardia

M No		Pron			
Inter	millent				
	assessments:				
Eupn Eupn			onary craddes		
	dyspnea with excitement	■ Whe			
	sed dyspnea nal BV sounds	Uppe	rairway stridor		
bdominal o	exam:				
North		Mild	asites		
☐ Hepa	rtomegaly	Mari	ed ascites		
	minal distension				
roblems:					
XCM - CHF					
	Diagnoses:				
liet-induce	d DCM vs. primary DCM				
) Diagnostic ₍		-			
Miles Co.	cardiogram		sis profile		
- Barrier	nistry profile	Service Control of the Control of th	ocicradiographs		
EOG	re-uation	400	TOBNP		
Rena		Trop			
□ Blook	dpressure	□ Othe	rtests		
OG finding	S :				
		В	6		
eats obser	and recommendations:			posses	sa tanangan ang sa tangan sa tang
eats obser	ved.			ory rate is	В6
eats obser ssessment atient imo B6	ved. t and recommendations: royed since discharge, nor	mal appetite, goo 86	d energy level and respirat and then increase to B6 n	ory rate is	B6 ingand

Final Diagnosis: DCM - r/o primary vs. diet-induced.		
Heart Failure Classification Score:		
ISACHC Classification:		
□ la	IIIa	
□ tb	III IIIb	
■ II		
ACVIM Classification:		
□ A	C C	
□ B1	□ D	
■ B2		
. □ B2		

case patient develops clinical signs consistent with worsening of the disease.

Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Te lephone (508) 839-5395 Fax (508) 839-7951 http://wetmed.turks.edu/ Referring Vet Direct Line 508-887-4988

Notice of Patient Admit

Date: B6 :55:09 AM Referring Doctor: B6 Client Bane: B6 Patient Bane:	Case ∎o: B6
Dear B6 Your patient presented to our Emergency service. Pl communication with our team.	lease make note of the following information to facilitate
The attending doctor is: B6 The reason for admission to the FHSA is: DCM,	, РИТ, СИГ
If you have any questions regarding this particular o Information is updated daily, by noon.	case, please call 508-887-4988 to reach the ECC Service.
Thank you for your referral to our Emercency Service	ne.



Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://webmed.tufts.edu/

B6	Ferr	nale (Spayed)
		Brown/White

ear B	6		
hank you for		B6	with their pet B6

If you have any questions, or concerns, please contact us at 508-887-4988.

Thank you,

2/22/2019

B6 DVM (Resident - Cardiology)



Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://wetmed.tufts.edu/

B6	Ferr	nale (Spayed)
Canine B6		Brown/White

21	23	m	11	q
-				-

Dear I	B6									
Thank you fo	rreferring	B6	with th	eir pet B	6					
B6 presente	d to the Tu	ils ER an	B6	significan	t respirati	ry distress. Shewas	diagnose	d with co	ngestiveher	art
failure secon								B6	Half-Hard-Arterial and Co.	
B6	≥ B6	vas enrolle	dintoar	esearch p	roject with	our Cardiology Serv	rice invest	igating ar	ı associatior	1
between DO	A and dogs	fed grain	ree diets.	She has o	ione well a	rnd was discharged o	B6	with	B6	
B6	ar	d Purina H	A dry foo	1			Lastinia			
B6 has a rec	heck appo	intment sci	reduled v	vith(В6	Resident in Card	blogy, an	2 <i>[22]</i> 19.		
If you have a	ny questio	ns, or con	erns, ple	ase conta	ct us at 50	18-887-4988.				
Thank you,										
B6	BVSc (Re	sident - Er	nergency	& Critica	(Care)					

To: Cleary, Michael *; HQ Pet Food Report Notification; B6

Sent: 2/25/2019 1:45:06 PM

Subject: Acana lamb and apple dry: Lisa Freeman - EON-380747

Attachments: 2063136-report.pdf; 2063136-attachments.zip

A PFR Report has been received and PFR Event [EON-380747] has been created in the EON System.

A "PDF" report by name "2063136-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 "2063136-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380747

ICSR #: 2063136

EON Title: PFR Event created for Acana lamb and apple dry; 2063136

AE Date	01/22/2019	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Spaniel - Cocker English		
Age	5 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063136

Product Group: Pet Food

Product Name: Acana lamb and apple dry

Description: At ortho recheck 1/22/19, new murmur was noted to cardio consult performed. DCM identified. Dog eating BEG diet. Recommended diet change but owner has major concerns about dietary components triggering seizures. Enrolled in our DCM study and dog completed baseline measurements but then owner elected to withdraw from study. Unclear what she will do in terms of diet change. I have not provided owner contact information. If you wish to contact owner, please let me know and I can ask if ok to do so.

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 lamb and apple dry		

Sender information

Lisa Freeman 200 Westboro Rd North Grafton, MA 01536 USA

To view this PFR Event, please click the link below: https://eon.fda.gov/eon//browse/EON-380747

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=397756

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.

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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.

380747	
2063136	
<u> </u>	
	reaction or disease associated with the product)
<u></u>	
.:) 	
	At ortho recheck 1/22/19, new murmur was noted to cardio consult performed.
	DCM identified. Dog eating BEG diet. Recommended diet change but owner has major concerns about dietary components triggering seizures. Enrolled in our DCM study and dog completed baseline measurements but then owner elected to withdraw from study. Unclear what she will do in terms of diet change. I have not provided owner contact information. If you wish to contact owner, please let me know and I can ask if ok to do so.
Date Problem Started:	01/22/2019
Concurrent Medical Problem:	Yes
Pre Existing Conditions:	B6
Outcome to Date:	Stable
Product Name:	Acana lamb and apple dry
Product Type:	
Lot Number:	
Product Use	Description: Please see diet history
Information:	
Manufacturer /Distributor Information:	
Purchase Location Information:	
Name:	B6
Type Of Species:	Dog
Type Of Breed:	Spaniel - Cocker English
Gender:	Male
Reproductive Status:	Neutered
Weight:	15.8 Kilogram
Age:	5 Years
Assessment of Prior Health:	Good
Number of Animals Given the Product:	1
Number of Animals Reacted:	1
Owner Information:	Owner No Information
···.	provided:
	•
inioiniadon.	Contact: Name: Lisa Freeman
	Phone: (508) 887-4523
	Email: lisa.freeman@tufts.edu
	Address: 200 Westboro Rd
	North Grafton
	Massachusetts - 01536
	United States
	Initial FPSR.FDA.PETF.V.V1 Adverse Event (a symptom, Voluntary 2019-02-25 08:34:16 EST Problem Description: Date Problem Started: Concurrent Medical Problem: Pre Existing Conditions: Outcome to Date: Product Name: Product Type: Lot Number: Product Use Information: Manufacturer /Distributor Information: Purchase Location Information: Purchase Location Information: Name: Type Of Species: Type Of Breed: Gender: Reproductive Status: Weight: Age: Assessment of Prior Health: Number of Animals Given the Product: Number of Animals Given the Product: Number of Animals Reacted:

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:	d Method Of Email		
Additional Documents:				
	Attachment:	rpt_medical_record_preview.pdf		
	Description:	Records		
	Type:	Medical Records		
	Attachment:	discharge 1-22-19.pdf		
	Description:	Discharge		
	Type:	Other		
	Attachment:	cardio report 1-22-19.pdf		
	Description:	Cardio report 1/22/19		
	Type:	Echocardiogram		

Cummings Veterinary Medical Center At the transport Scardiology Liaison: S08-887-4696

Patient D: B6

B6 Canine

B6 Years Old Male (Neutered) English
Cocker Spaniel
Red/White BW: Weight (kg) 15.80

Cardiology Consultation ENROLLED IN DCM STUDY

Date: 1/22/2019		
Weight Weight (lig) 15.80		
Requesting Circuian: B6 DVM, MS, DACVS	LA, DACVS SA	
Attackee Cardiology John E. Rush DVM, MS, DACVIM (Cardiology). DACVECC	
R6		
В		
	······································	
B6		
Thoracic radiographs available for review?		
Yes - in SS		
Yes - in PACS (from 12/6/18) No No		
Patient location: B ward		
Presenting complaint and important compret d	senes:	
Presenting for 6 week recheck post-op	B6	Wæs
hit by ca B6 Plan for hip radiographs today.		·
	~	
В	b	
Current medications and doses:		
В	6	
At-Name diet (name, form, amount, frequency)		<u></u>
Key indication for consultation: Murmur, left apex	, 2-3/6	
Questions to be consend		

New heart murmur heard on physical exam today. Safe to sedate for radiographs?

□ No	
STOP - remain	nder of form to be filled out by Cardiology
Physical Examination	
	B6
Muscle condition:	
Normal	Moderate cachexia
Mild muscle loss	Marked cachexia
ardiovascular Physical Exam	
lurmur Grade:	
None	□ IV/VI
□ I/VI	□ v/vi
II/VI	□ vi⁄vi
□ III∕vi	
urmur location/description; Left ap	oical/mid cardiac systolic
igular vein:	
■ Bottom 1/3 of the neck	■ Top 2/3 of the neck
Middle 1/3 of the neck	1/2 way up the neck
terial pulses:	
Weak	Bounding .
Fair	Pulse deficits
■ Good	Pulsus paradoxus
☐ Strong	Other (describe):
rhythmia:	tele or a
None	☐ Bradycardia
Sinus arrhythmiaPremature beats	☐ Tachycardia
allop:	
Yes	Pronounced
No No	Other:
Intermittent	
Imonary assessments:	
Eupneic	Pulmonary Crackles
Mild dyspnea	Wheezes
Marked dyspnea	Upper airway stridor
Normal BV sounds	Other auscultatory findings:
odominal exam:	

Normal Hepatomegaly	Abdominal distension Mild ascites
	B6
CM (primary vs. diet related vs. mb/grain free diet, we would re dicated at this time. The patier	ns: toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists. can be used instead.
CM (primary vs. diet related vs. mb/grain free diet, we would re dicated at this time. The patier norths per study schedule. For s B6	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists.
CM (primary vs. diet related vs. mb/grain free diet, we would re dicated at this time. The patier norths per study schedule. For s B6 inal Diagnosis: symptomatic DCM	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists.
CM (primary vs. diet related vs. mb/grain free diet, we would re dicated at this time. The patier norths per study schedule. For B6 inal Diagnosis: symptomatic DCM eart Failure Classification Score ACHC Classification:	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists. can be used instead.
CM (primary vs. diet related vs. mb/grain free diet, we would redicated at this time. The patier conths per study schedule. For selection Diagnosis: symptomatic DCM cart Failure Classification Score ACHC Classification:	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists.
CM (primary vs. diet related vs. amb/grain free diet, we would rendicated at this time. The patier norths per study schedule. For selection Diagnosis: symptomatic DCM leart Failure Classification Score ACHC Classification:	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists. can be used instead.
CM (primary vs. diet related vs. mb/grain free diet, we would redicated at this time. The patier conths per study schedule. For selection Diagnosis: symptomatic DCM cent Failure Classification Score ACHC Classification:	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists. can be used instead.
CM (primary vs. diet related vs. amb/grain free diet, we would rendicated at this time. The patier norths per study schedule. For selection Diagnosis: symptomatic DCM leart Failure Classification Score ACHC Classification: a	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists. can be used instead. Illa Illb
amb/grain free diet, we would rendicated at this time. The patier nonths per study schedule. For self-conths per s	toxin) with no IA enlargement. Given that the patient is on a ecommend changing to a regular commercial diet. No medications are it is enrolled in the DCM diet study. Recheck echocardiogram in 3 sedation today, we would recommend avoiding alpha-2 agonists. can be used instead.

M-Mode		
IVSd		cm
LVIDd		om
LVPWd		om
IVSs		om
LVIDs		om
LVPWs		cm
EDV(Teich)		ml
ESV(Teich)	B6	ml
EF(Teich)	БО	%
%FS		*
SV(Teich)		ml
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA		cm
EPSS		cm
	latinos posicionik	1940
M-Mode Normalized	particular and a series of the	
IVSdN		(0.290 - 0.520)
LVIDdN		(1.350 - 1.730)
LVPWdN		(0.330 - 0.530)
IVSsN	B6	(0.430 - 0.710)
LVIDsN	В	(0.790 - 1.140)!
LVPWsN		(0.530 - 0.780)
Ao Diam N		(0.680 - 0.890)
LA Diam N	11	(0.640 - 0.900)
20		
SALA	(**************************************	cm
Ao Diam		om
SA LA / Ao Diam		5000
IVSd		cm
LVIDd		om
LVPWd		om
EDV(Teich)		ml
IVSs		om
LVIDs		om
LVPWs	B6	om
ESV(Teich)	100	ml
EF(Teich)		%
%FS		%
SV(Teich)		ml
LVId IAX		cm
LVAd LAX		om
LVEDV A-L LAX		ml
LVEDV MOD LAX		ml
LVISTAX		
LIBUM	Lucialization	cm

LVAs LAX	Principle of the column and the colu	cm
LVESV A-L LAX		ml
LVESV MOD LAX		ml
HR	The state of the s	BPN
EF A-L LAX	DC	%
LVEF MOD LAX	B6	%
SV A-L IAX		ml
SV MOD LAX		ml
CO A-L LAX		Vm
CO MOD LAX		l/m
Doppler		
MV E Vel		m/s
MV DecT		ms
MV Dec Slope	The state of the s	m/
MVAVel		m/
MV E/A Ratio		-
E		m/
E/E	B6	
A'		m/
2,		m/
AV Vmax		m/
AV maxPG	1100	ITMT
PV Vmax		m/
PV maxPG		FTWT

Cummings Veterinary Medical Center AT TUFTS UNIVERSITY

Foster Hospital for Small Animals 55 Willard Street

North Grafton, MA 01536 (508) 839-5395

Client: Address:

Home Phone

Work Phone: Cell Phone:

B6

B6

Medical Record for 1/22/2019

B6 Patient:

English Cocker Spaniel Breed:

DOB:

B6

Species: Canine

Male (Neutered)

	B6	
lient: B6		
Artemente et en en en en en en en el e		
itial Complaint:		
B6		
AP Text B6 11:31AM	B6	

Cummings Veterinary Medical Center

Foster Hospital for Small Animals

55 Willard Street North Grafton, MA 01536 (508) 839-5395

AT TUFTS U	NIVERSITY	
Client:	B6	
Veterinarian:		
Patient ID:	B6	

Patient:	B6	
Species:	Canine	
Breed:	English Cocker Spaniel	
Sex:	Male (Neutered)	
Age:	B6 Years Old	

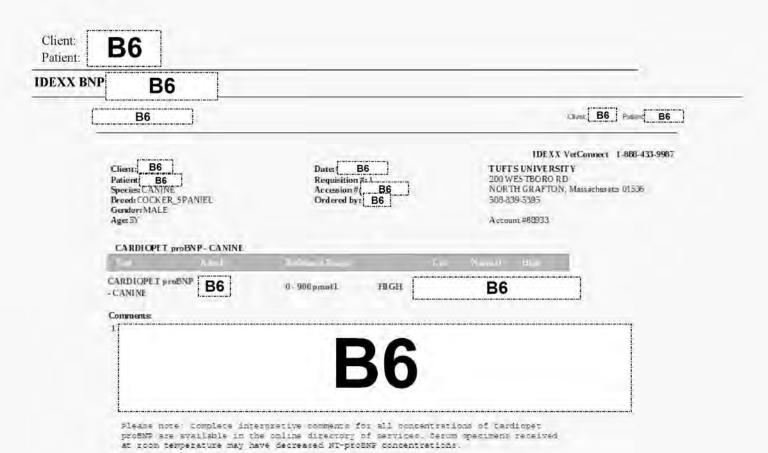
Lab Results Report

Visit ID:

B6	B6 1:31:00 AM	M Accession ID: B6	
Test	Results	Reference Range	Units
B6	B6	10 - 40	ug/mL

3/19 B6

Printed Monday, February 25, 2019



Feet of 1

B6

Patient's Full Name_	B6	Case #	B6
Owner's Towr	36	_ Sx performed	CIT HATOTELL
Location of patient	B6	Date of surgery_	R6
Dr. of record: B6		Date of discharge	טט
Pet is clean and dry			
Catheter is removed	d and green banda	age placed	
Green bandage rem	noved OR in rare in	nstances owner instructe	d to remove
△ Biogard/Tegaderm	is removed		
₼ Urinary catheter AN	ND stay sutures are	e removed	
₫ Telemetry pads are	removed		
☑ Orthopedic bandag owner for bandage ca	Committee of the second second second	licable, otherwise instruc	tions given to
d/c meds given to c	wner with instruc	tions	
₫ owner informed wh	nen to start medic	ations	
₫ owners meds return	ned		
owner informed las	t time pet ate		
d collar/leash/person	al belongings retu	irned	
e-collar given to ow	ner, if necessary		
□ recheck appointme	nts not needed		
	24.42		
Or: Suture remove	0	4	
	son in 6 Wkg	3/26 10:00	2

Taurine	B6
Patient:	B6
Client:	DC

Cummings School of Veterinary Medicine

Clinical Pathology Laboratory 200 Westboro Road North Grafton, MA 01536

Name/DOB: Patient ID B6	Sex: CM	Provider. B6 Order Location: V320559: Investigation into
Phone number:	Age: 5	Sample ID: 1901220112
Collection Date: B6 37 PM	Species: Canine	Service of the service
Approval date: 1/31/2019 7:55 AM	Breed: English Cocker Spaniel	

TEST NAME	RESULT OUT OF RANGE	RANGE	UNITS	REFERENCE RANGE
				(
Faurine Panel				L B6
Plasma Taurine	B6		nmol/mL	60-120
D1/22/19 2:51 PM	>40 nmol/mL=no risk for tautine defic	ien DC		
Whole Blood Taurine	B6	DO	nmol/mL	200-350
01/22/19 2:51 PM	>200 nmol/ml=no risk for taurine defi	cie		

Sample ID: 1901220112/1 END OF REPORT (Final) Reviewed by:

RDVM 2/2/19

B6

B6

Page 7/19

Client: Patient: **B6**

RDVM 2/2/19

Amino Acid Labs Taurine Panel 1/22/19

Cat	Normal Range 80-120	No known risk for deficiency >40	Normal Range	No known risk for deficiency >200
	Normal Range		Normal Range	The second secon
	Plasma (nMol/ml)	Whole Bloo	od (nMol/ml)
Plasma: B(6 Whole Blood:	B6 Urin	e:	Food:
aurine Res	sults (lab use only)			
Test: Taurin	e Complete Amir	no Acids Other:		
Sample type:	Plasma Whole	Blood Urine	Food Other	
Current Diet : _	Acamo		<u> </u>	
Breed:	CLERT	Own	er's Name:	B6
Patient Name:	B6	Spec	iles: (())	INTE
Billing Contact I	Phone: B6	Taxi	D:	
Billing Contact:	B6	Ema	il: B6	
Telephone: _5	08-887-4669	Fax:	508-839-7936	
Email:Clinpa	ath@tufts.edu car	diovet@tuft	s.edu	
Address: 200 V	Vestboro Road, North G	irafton MA 015369		
Clinic/Compan	y Name: Tufts Cummi	ngs School of Vet, M	ed Clinical Patholo	gy Laboratory_
Veterinarian Co	ontact: B6]		
	ucdavis.edu/labs/amir	no-acid-laboratory		
Email: ucd.ami	0-752-5058, Fax: 5: noacid.lab@ucdavis.e	du		Ithrum Nepsi -
Amino Acid Lat	Laboratory Sar poratory, 1089 Veterin	nary Medicine Drive	Davis Ca 9561 P	HIP H ICE PHONS
A I A -I -				PM
	Ti an			Ca

^{*} Please note with the recent increase in the number of dogs screened for taurine deficiency, we are seeing dogs with values within the reference ranges (or above the "no known risk for deficiency range") yet are still exhibiting signs of cardiac disease. Veterinarians are welcome to contact our laboratory for assistance in evaluating your patient's results.

Amino Acid Labs Taurine Panel 1/22/19

UNIVERSITY OF CALIFORNIA, DAVIS

BERKELEY + DAVIS + IRVINE + LOS ANGELES + MENGED + RIVERSIDE + SAN DIEGO + SAN FRANCISCO



SANTA BARBARA . SANTA CRUZ

STERN CARDIAC GENETICS LABORATORY JOSHUA A. STERN, DVM, PHD, DACVIM (CARDIOLOGY) sterngenetics@ucdavis.edu; August 9, 2018

FREQUENTLY REQUESTED INFORMATION REGARDING TAURINE & DILATED CARDIOMYOPATHY IN GOLDEN RETRIEVERS

Taurine reference ranges for Golden Retrievers: The Stern Lab suggests that the following clinical reference ranges be used for Golden Retrievers and be considered for other known taurinesensitive breeds such as Newfoundlands or American Cocker Spaniels. This is primarily based on 3 observations:

- Golden Retrievers with marginal taurine levels (defined below) have been diagnosed with dilated cardiomyopathy and have documented disease reversal after taurine supplementation and diet change.
- Previously published work documents taurine sensitivity in Golden Retrievers.
- The most recently published reference on normal blood taurine values shows higher levels than previously reported.
 - Normal whole blood taurine: >250nmol/mL
 - Normal plasma taurine: >70nmol/mL
 - Marginal whole blood taurine: 200-250nmol/mL
 - Marginal plasma taurine: 60-70nmol/mL 0
 - Low whole Blood taurine: <200nmol/mL
 - Low plasma taurine: <60nmol/mL 0

References:

Kramer GA, Kittleson MD, Fox PR, Lewis I, Pion PD, Plasma taurine concentrations with normal dogs and in dogs with heart disease. J Vet Intern Med 1995;9:253-258

Belanger MC, Ouellet M, Queney G, Moreau M. Taurine-deficient dilated cardiomyopathy in a family of golden retrievers. J Am Anim Hosp Assoc 2005;41:284-291.

Kittleson MD, Keene B, Pion PD, Loyer CG, MUST Study Investigators. Results of the multicenter spaniel trial (MUST): taurine- and carnitine-responsive dilated cardiomyopathy in American Cocker Spaniels with decreased plasma faurine concentration. | Vet Intern Med 1197;11:204-211.

Backus RC, Choen G, Pion PD, Good KL, Rogers QR, Fascetti AJ. Taurine deliciency in Newfoundlands fed commercially available complete and balanced diets. J Am Vet Med Assoc 2003;223:1130-1136. Fascetti AJ, Reed JR, Rogers QR, Backus RC. Taurine deficiency in dogs with dilated cardiomyopathy: 12 cases (1997-2001), J Am Vet Med

Assoc 2003;223:1137-1141. Freeman LM, Michel KE, Brown DJ, Kaplan PM, Stamoulis ME, Rosenthal SL, Keene BW, Rush JE. Idiopathic dilated cardiomyopathy in

Dalmatians: nine cases (1990-1995). J Am Vet Med Assoc 1996;209:1592-1596.

Delaney SJ, Kass PH, Rogers QR, Fascetti AJ. Plasma and whole blood taurine in normal dogs of varying size fed commercially prepared food. J Anim Physiol a Anim Nutr 2003;87:236-244.

Plasma vs. whole blood taurine testing:

If at all possible, we recommend that paired (plasma and whole blood) taurine samples be submitted for analysis. A low value on either or both tests is clinically relevant. If your dog is diagnosed with DCM, submitting paired taurine samples (plasma and whole blood) is imperative. We recommend that the UC Davis Amino Acid Laboratory be used for taurine testing, as this is where the literature utilized for our reference ranges was generated. https://www.vetmed.ucdavis.edu/labs/amino-acidlaboratory. If a single test is submitted the Stern Lab recommends that whole blood be submitted preferentially. This is due to the false elevation of taurine levels that is possible in plasma samples due to sample handling issues. This is an area of some debate between clinicians and conflicting information on preference for plasma vs. whole blood exists. This underscores the value of paired sampling.

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Clinical Recommendations for Golden Retrievers based on taurine levels:

If taurine levels test <200nmol/mL in whole blood or <60nmol/mL in plasma

- An echocardiogram by a board-certified veterinary cardiologist is indicated
- After echocardiogram has been completed, a diet change is recommended.
 - If DCM is diagnosed, this patient may need a variety of cardiac medications that would be prescribed by the attending cardiologist.
 - If DCM is diagnosed, prescribed supplementation with oral taurine and 1-carnitine is recommended.
 - Reevaluation of taurine levels is warranted after three months of diet change and supplementation.
 - Cardiology reevaluation schedules will be recommended by the attending clinician pending echocardiographic findings.
 - Many Golden Retrievers with taurine-deficient DCM in our study showed slow and steady improvement over a period of 6-12 months.

If taurine levels test 200 - 250nmol/mL in whole blood or 60-70nmol/mL in plasma

- An echocardiogram by a board-certified cardiologist is recommended.
- After echocardiogram has been completed, a diet change is recommended.
- We recognize that many dogs in this category may have normal echocardiograms and thus
 the value of screening should be carefully considered. If the dog is eating a diet that falls
 within the FDA warning or shares features with the diets identified in our study (see diets of
 concern section below), we encourage echocardiographic screening with greater enthusiasm.
- If an echocardiogram is not performed, a diet change is still recommended and a taurine level reevaluation after three months on the new diet should be considered.
- If DCM is diagnosed, this patient may need a variety of cardiac medications that would be prescribed by the attending cardiologist.
 - If DCM is diagnosed, prescribed supplementation with oral taurine and I-carnitine is recommended.
 - Reevaluation of taurine levels is warranted after three months of diet change and supplementation.
 - Cardiology reevaluation schedules will be recommended by the attending clinician pending echocardiographic findings.
 - Many Golden Retrievers with taurine-deficient DCM in our study showed slow and steady improvement over a period of 6-12 months.

If taurine levels test >250nmol/mL in whole blood or >70nmol/mL in plasma

- Diet change is recommended if you are feeding a diet that falls within the FDA warning or shares features with the diets identified in our study (see diets of concern section below)
- If your pet shows any signs of cardiac disease (trouble breathing, exercise intolerance, fainting/collapse, coughing) we recommend your veterinarian evaluate your pet.

Amino Acid Labs Taurine Panel 1/22/19

Diets of Concern & Choosing a diet

The FEA alert called attention to several dietary ingredients that should be considered when evaluaing whether your pet is at risk (for example legumes like peas and lentils, white or sweet pota tos). These findings were largely recapitulated in our current study of Golden Retrievers with low taurine levels and DCM. Our lab considers these ingredients to be of greatest concern when pres en within the first 5 listed ingredients on the dog food bag. Additionally, we noted a high percent of diets in our study were using protein sources other than chicken or beef and labeled as grain-free.

Points to consider when making a diet change:

- Choose a diet that does not contain the concerning components listed above
- Choose a diet that meets the WSAVA Global Nutrition Assessment Guidelines published as consensus by veterinary nutritionists from around the world:
 - a https://www.wsava.org/WSAVA/media/Arpita-and-Emma-editorial/Selecting-the-Best-Food-for-your-Pet.pdf
- FDA alert found here:
 - o https://www.fda.gov/AnimalVeterinary/NewsEvents/CVMUpdates/ucm613305.htm

Choosing a taurine or 1-carnitine supplement:

Selecting supplements should be performed based upon those that match their stated contents and are readily available for absorption. Luckily a previous publication tested multiple taurine and Icarnitite supplements. Based upon this publication our laboratory recommends the following supplements as those meeting our quality criteria. (Bragg et al. 2009 J Am Vet Med Assoc; 234(2))

Tested taurine supplements that test within 5% of stated contents and if applicable disintegrated within 30 minutes

- Mega taurine caps by Twinlab (1000 capsule)
- Taurine by Swanson Health Products (500mg capsule)
- Taurine by NOW foods (500mg capsule)
- Taurine 500 by GNC (500mg tablet)

Tested L-carnitine supplements that test within 5% of stated contents and if applicable disintegrated within 30 minutes

- L-carnitine 500 by Jarrow Formulas (500mg capsule)
- L-camitine caps by Country Life (500mg capsule)
- Maxi L-carnitine by Solgar Vitamin and Herb (500mg tablet)
- L-carnitine by Puritan's Pride (500mg tablet)

The Stern lab does not recommend the empirical supplementation of taurine or l-carnitine to dogs without evidence of DCM and/or significant deficiency. If DCM is diagnosed we typically recommend dogs over 50lbs receive 1000mg of taurine every 12hrs and dogs under 50lbs receive 500mg of taurine every 12hours. We recommend L-carnitine at a dose of ~50mg/kg orally with food every 8hrs. Your veterinary cardiologist or family veterinarian should be consulted for prescribing the best dose for your dog.

Reporting to the FDA:

Understanding the basis of this condition requires a great deal of research and investigation. Clients with affected dogs can contribute their data to help propel this research forward. You can report cases of taurine deficiency, dilated cardiomyopathy, sudden cardiac death, or any combination of these events to the FDA by following the information found here: https://www.fda.gov/animalveterinary/safetyhealth/reportaproblem/ucm182403.htm

> Additional questions or comments: sterngenetics@ucdavis.edu This document last updated: Aug. 20, 2018

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Amino Acid Labs Taurine Panel 1/22/19



CARDIOLOGY SERVICE UPDATES: DOG FOOD & DILATED CARDIOMYOPATHY

The Cardiology Service has developed this document in response to the alerts from the FDA. These alerts identify an associated risk for some grain-free diets containing certain ingredients (legumes like peas, pea components, lentils; white potatoes, sweet potatoes) and a diagnosis of dilated cardiomyopathy (DCM). The links provided throughout this document can be copied and pasted to obtain additional information.

FDA Alerts found here;

https://www.fda.gov/AnimalVeterinary/NewsEvents/CVMUpdates/ucm613305.htm https://www.fda.gov/AnimalVeterinary/ResourcesforYou/AnimalHealthLiteracy/ucm616279.htm

What is Dilated Cardiomyopathy (DCM)?

DCM is a heart muscle disorder that results in a weak pump function and heart chamber enlargement. In the early stages of this disease pets may appear totally healthy with no apparent clinical signs. Later in the course of this disease, dogs may have a heart murmur, an arrhythmia (irregular heart beat), collapse episodes, weakness or tiredness with exercise, and even trouble breathing from congestive heart failure. While there are some breeds of dogs (like Dobermans) that have a genetic predisposition to development of DCM, there are also nutritional factors that may result in this disease.

What should I do?

If you are feeding a diet of concern based upon the FDA alert we recommend that you consult with your veterinarian or veterinary cardiologist. We provide 4 general points for guidance below:

1. An initial step is to consider whether you are willing or interested in performing additional testing to assess whether your pet is affected with DCM. If you believe your dog is at risk, showing any of the aforementioned clinical signs or would prefer to simply rule out any heart disease, we recommend that you first have your pet's taurine levels tested (both whole blood and plasma levels) as well as seek an echocardiogram by a board-certified veterinary cardiologist. Low taurine levels are associated with development of DCM in dogs and are sometimes a component of this current issue.

Information on taurine testing can be found here: https://www.vetmed.ucdavis.edu/labs/amino-acid-laboratory

2. At this time, diet change is recommended when possible and should be considered regardless of the results obtained from any testing. You can consult with your veterinarian in selecting a new diet that avoids the ingredients of concern listed by the FDA. When selecting this diet, we recommend that you choose a diet that is manufactured with rigorous quality control measures and research behind the formulation. A way to ensure that your diet meets these recommendations is to follow the following guidelines that were generated by a large number of the world's leading experts in veterinary nutrition.

Food selection guidelines found here: https://www.wsava.org/WSAVA/media/Arpita-and-Emma-editorial/Selecting-the-Best-Food-for-your-Pet.pdf

3. If your pet is identified through testing to have a low blood taurine level or evidence of DCM by echocardiogram, we urge you to report this information to the FDA.

FDA reporting guidelines found here: https://www.fda.gov/AnimalVeterinary/SafetyHealth/ReportaProblem/ucm182403.htm

4. Work with your veterinarian(s) to determine the best course of action and medical treatments if indicated. In the case of a DCM diagnosis, diet change alone may not be sufficient and additional medications may be prescribed.

Please continue to monitor the FDA website and the UC Davis School of Veterinary Medicine Newsfeeds for updates and recommendations regarding this issue.

Diet history 2/13/19

's name.	B6	Owner's name:	B6		Today's da	te: <u>2/13/2019</u>
How would y	ou assess y	our pet's appetite? (mark the	point on the line	e below that bes	st represents yo	ur pet's appetite)
Example:	Poo	r			Excellent	
		Poor_) Ex	cellent
X Eats abou	t the same a	nge in your pet's appetite ove amount as usual DEats le ant foods than usual DOthe	ss than usual	□Eats r	that apply) more than usual	
		has your pet (check one) d weight X Stayed about t	the same weight	□Don't know		
currently eat	s and that y	t foods, people food, treats, ou have fed in the last 2 year	S.			
		fetail that we could go to the				2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
		cific product and flavor) n, Lentil, & Sweet Potato Add	Form ult dry	Amount	How often? 2x/day	Jan 2016-present
85% lean ha		n, Lenui, o Sweet Folato Aut	microwaved		1x/week	June -Aug 2016
Pupperoni o		lavor	treat	1/2	1x/day	Sept 2016-present
Rawhide		= V	treat	6 inch twist	1x/week	Dec 2018-present
Acana Lam	b & Apple		dry	% cup	daily	2013 - JAN 2019
Carrot slices		OWn pieces	treat	1 - 2 pieces	3x/week	
Raw beef rib		THE PORCES	treat	1-2	weekly	
			+			
	any dietary	mation can be listed on the b supplements to your pet (for es □No If yes, please list Bran	example vitamin	ns, glucosamine give brands and	, fatty acids, or lamounts:	any other
Taurine		□Yes X No	ranount	per sury	-	
Camitine		□Yes X No				
Antioxidants		□Yes X No				
Multivitamin		□Yes X No				
		□Yes X No			20,000	-
Fish oil	010	□Yes X No				
Fish oil Coenzyme C	- 14					
	e list):				Nature's Bount	V

Client:	DC
Patient:	DO

Diet history 2/13/19

our pet? mouth without food food imilar product _Mostly banana slices		
Mostly banana slices	or pure peanut butter	

	,
Client:	DC
Patient:	DO
	·

Vitals Results

B6 3:10:53 PM Nursing note B6 4:15:34 PM Nursing note

to. Lead. .. Standard. Blace

B6

B6 2:59:42 PM

Tufts University Tufts Cummings School of Vet Med Cardiology

B6

ECG from Cardio

12 Lead: Standard Placement

B6

B6

3:08:04 PM Tufts University Tufts Cummings School of Vet Med Cardiology

B6

Patient History

11:28 AM	UserForm	
11:31 AM	Purchase	
11:36 AM	UserForm	
11:41 AM	UserForm	
	0.0000	
01:46 PM	Treatment	B6
01:47 PM	Purchase	
02:08 PM	Prescription	
02:10 PM	Prescription	
02:13 PM	Prescription	
02:28 PM	Deleted Reason	
	_	
03:10 PM	Treatment	
03:10 PM	Purchase	
03:10 PM	Vitals	
B6		
04:15 PM	Treatment	
04:15 PM	Vitals	
04:27 PM	Purchase	
04:27 PM	Deleted Reason	
		B6
04:27 PM	Deleted Reason	
05:24 PM	Purchase	
05:24 PM	Purchase	
05:24 PM	Purchase	
05:24 PM	Purchase	
06.00 D) 6	D1	
06:02 PM	Purchase	
04:45 PM	Email	
09:35 AM	Purchase	
11:08 AM	Purchase	

湿

From: PFR Event <pfreventcreation@fda.hhs.gov>

To: Cleary, Michael *; HQ Pet Food Report Notification; B6

Sent: 2/25/2019 12:52:56 PM

Subject: Wellness Core grain-free ocean fish dry-Wellness core grain free turkey: Lisa

Freeman - EON-380742

Attachments: 2063133-report.pdf; 2063133-attachments.zip

A PFR Report has been received and PFR Event [EON-380742] has been created in the EON System.

A "PDF" report by name "2063133-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 "2063133-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380742

ICSR #: 2063133

EON Title: PFR Event created for Wellness Core grain-free ocean fish dry Wellness core grain free turkey chicken liver & turkey liver canned Wellness Hearty Cuts grain-free in gravy chicken and turkey recipe; 2063133

AE Date	01/15/2019	Number Fed/Exposed	6
Best By Date		Number Reacted	3
Animal Species	Dog	Outcome to Date	Stable
Breed	Bulldog		
Age	8.5 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063133

Product Group: Pet Food

Product Name: Wellness Core grain-free ocean fish dry Wellness core grain free turkey, chicken liver & turkey

liver canned Wellness Hearty Cuts grain-free in gravy chicken and turkey recipe

Description: DCM and CHF diagnosed 1/15/19 Eating BEG diet. 6 dogs being fed this diet - so far, 3 have been diagnosed with DCM/ARVC. One other had a normal NT-proBNP and 2 others will be tested Diet has been changed to Royal Canin Early Cardiac and we will recheck in 3 months. I have sample of dry and canned food

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: 6 Number of Animals Reacted With Product: 3

Product Name	Lot Number or ID	Best By Date
Wellness Core grain-free ocean fish dry Wellness core grain free turkey, chicken liver & turkey liver canned Wellness Hearty Cuts grain-free in gravy chicken and turkey recipe		

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-380742

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=397751

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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-	380742		
ICSR:	2063133		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:	.5		
Reported Problem:	Problem Description:	far, 3 have been diag proBNP and 2 others	nosed 1/15/19 Eating BEG diet. 6 dogs being fed this diet - so gnosed with DCM/ARVC. One other had a normal NT- s will be tested Diet has been changed to Royal Canin Early recheck in 3 months. I have sample of dry and canned food
	Date Problem Started:	01/15/2019	
	Concurrent Medical Problem:	Yes	
	Pre Existing Conditions:	B6	
	Outcome to Date:	Stable	
Product Information:	Product Name:	Wellness Core grain- liver & turkey liver ca turkey recipe	-free ocean fish dry Wellness core grain free turkey, chicken inned Wellness Hearty Cuts grain-free in gravy chicken and
	Product Type:	<u> </u>	
	Lot Number:		
	Product Use Information:	Description:	Please see diet history
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	ą	
	Type Of Breed:	ļ	
	Gender:		
	Reproductive Status:	Neutered	
		19.8 Kilogram	
	3 }	8.5 Years	
	Number of Animals Given the Product:	6	
	Number of Animals Reacted:	3	
	Owner Information:	Owner Information provided:	
	ah	Contact:	Name: Phone: Email: B6
		Address:	B6 United States
	Healthcare Professional	Practice Name:	Tufts Cummings School of Veterinary Medicine
	Information:	Contact:	- · · · · · · · · · · · · · · · · · · ·
			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:			
Additional Documents:				
	Attachment:	rpt_medical_record_	preview.pdf	
	Description:	Med records		
	Type:	Medical Records		

Cummings Veterinary Medical Center AT TUFTS UNIVERSITY

Client:

Address:

home with no concerns.

Prior medical history:

Current medications

Foster Hospital for Small Animals

55 Willard Street North Grafton, MA 01536 (508) 839-5395

All Medical Records
Patient: B6

Patient: **B**6 Breed:

English Bulldog DOB: В6

Species: Canine Female (Spayed)

Home Phone Work Phone: Cell Phone:

	m plant it men and a men it men i	B6
Client: Patient:	В6	
Initial Comp Emergency	olaint:	
SOAP Text	B6	9:31PM - B6
Subjective NEW VISIT (ER)	
Doctor:	B6	
Student:		
	complaint: T	achypnea
Referral visi		
Diagnostics	completed p	prior to visit radiographs, 2 view thorax, in ER email
HISTORY:		
Signalment:	8 yo SF Eng	lish Bulldog
Current hist		um caures
		ound her laying and trembling with shallow and rapid breathing. Owner also noticed that sh

had a hacking non productive cough. Has not appreciated it before today. Went to rDVM where radiographs were performed. No history of heart or pulmonary disease. No recent vomiting or diarrhea. Has recently been doing well at

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once daily in PM, had tonight

B6 otherwise healthy

B6 Diet: Core Wellness, mix of wet and dry, grain free diet Vaccination status/flea & tick preventative use: UTD

Travel history: unknown

EXAM: performed with flow by O2

B6

C/V: no murmur or arrythmia ausculated, difficult to appreciate over increased lung sounds, femoral pulses strong and synchronous

RESP: increased BVS bilaterally, no crackles or wheezes, panting

B6

ASSESSMENT:

A1: Dyspnea-- open for pnuemonia vs CHF vs non cardiogenic pulmonary edema vs other

PLAN:

B6

Treatments:

B6

Diagnostics completed:

AFAST/TFAST--no FF in either cavity, cardiac sillhoutte difficult to visualize, mild number B lines

B6

Diagnostics pending:

CBC

Client: Patient:	B6
^h a maia+m	

Chemistry BNP

Client communication:

Confirmed history with owner. Discussed that no apparent murmur and significant structural changes on TFAST, but cannot rule out heart as underlying process. Also concern for pneumonia at this time. Recommended hospitalization for supportive care, O2, diagnostics, cardio consultation and repeat imaging as indicated. O ok with plan.

for supportive care, O2, diagnostics, cardio consultation and repeat imaging as indicated. O ok with plan.
Deposit & estimate status: B6
Resuscitation code (if admitting to ICU) B6
SOAP approved (DVM to sign): B6 DVM
SOAP Text B6 8:38AM B6
SIGNALMENT: 8yo FS English Bulldog
PRESENTING COMPLAINT: dyspnea
HISTORY: Presented on B6 after O found her laying and trembling with shallow and rapid breathing. Owner also noticed that she had a hacking non productive cough. Has not appreciated it before today. Went to rDVM where radiographs were performed. No history of heart or pulmonary disease. No recent vomiting or diarrhea. Has recently been doing well at home with no concerns. Prior medical history: B6 , otherwise healthy Current medications: B6 once daily in PM, had tonight
Diet: Core Wellness, mix of wet and dry, grain free diet
On presentation, P was dyspneic and tachycardic. rDVM rads unable to be assessed as CHF vs. pneumonia, so placed in O2 on Unasyn overnight with bloodwork pulled for CBC/Chem and nt-proBNP. Minimal improvement overnight with persistent tachycardia, but excellent appetite and good spirits.
SUBJECTIVE:
B6
C/V: tachycardic with no murmurs or arrhythmias on auscultation. fair pulse quality with pink injected mm and CRT 1sec RESP: Bilaterally harsh lung sounds with no discernable crackles or wheezes

Page 3/47

nn i	Client: DC	
SESSMENT: Dyspnea open for pnuemonia vs CHF vs non cardiogenic pulmonary edema vs other AN: B6 B6 B86 AST/TIFAST: no FF in either cavity, cardiac sillhoutte difficult to visualize, mild number B lines B6 B86 AST/TIFAST: No FF in abdomen, possible scant pleural effusion, contiguous B-lines bilaterally, ventrally C: WNL R: - Diffuse bronchial and interstitial pulmonary pattern may indicate concurrent chronic lower airway disease lergic, infectious, or parasitic) and interstitial lung disease. Airway sampling can be considered. dild cardiomegaly and left atrial enlargement without evidence of decompensation. Echocardiography can be insidered (to evaluate mitral valve and to evaluate for pulmonary hypertension). B6 G10io Consult: DCM, suspect early CHF - add	Patient: B6	
B6 B6 B86 B87 BSTITEAST: No FF in either cavity, cardiac sillhoutte difficult to visualize, mild number B lines B6 B87 B87 B87 B87 B87 B87 B87	В6	
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B6 B6 B6 B7 B5 B6 B6 B5 B5 B7 B5 B6 B6 B5 B5 B5 B5 B5 B5 B5		
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STORY:		
	OAP Text B6	7:43AM - Clinician, Unassigned FHSA
	STORV.	
		glish Bulldog that presented o B6 for sudden onset dyspnea. O found her laving and

recent vomiting or diarrhea, hasbeen doing well at home with no concerns. Was on Core Wellness dry and wet grain

Client: Patient: B6
free diet.
On presentation to ER, P was dyspneic and tachycardic. rDVM rads unable to be assessed as CHF vs. pneumonia, so placed in O2 on Unasyn overnight with bloodwork pulled for CBC/Chem and nt-proBNP. Minimal improvement overnight on 1/16 with persistent tachycardia, but excellent appetite and good spirits. Cardio consult was difficult to assess due to dyspnea and conformation, but showed DCM and suspect CHF.
Overnight, P had normal vitals, with RR 24-36 with no to mild effort in O2 cage. Walked well outside of O2 cage, but a 3:45am after a walk was trembling and anxious in the cage, was given B6 and calmed after. Excellent appetite this morning. Has received 3 doses of B6 so far since B6
Subjective BAR, euhydrated, MM pink moist, CRT <2
<u>Objective</u>
B6
H/L: No murmur ausculted although very difficult auscultation due to the constant panting. No obvious arrhythmia either. Jugular pulse bottom 1/3 of the neck. Femoral pulses strong and synchronized with heawrt beat. Normal BVS bilateral
B6
Diagnostics completed:
B6 AFAST7 TFAST: no FF in either cavity, cardiac sillhoutte difficult to visualize, mild number B lines B6
B6 AFAST/TFAST: No FF in abdomen, possible scant pleural effusion, contiguous B-lines bilaterally, ventrally
CBC: WNL Chem: WNL
CXR: - Diffuse bronchial and interstitial pulmonary pattern may indicate concurrent chronic lower airway disease (allergic, infectious, or parasitic) and interstitial lung disease. Airway sampling can be considered. - Mild cardiomegaly and left atrial enlargement without evidence of decompensation. Echocardiography can be
considered (to evaluate mitral valve and to evaluate for pulmonary hypertension).
B6
Cardio Consult: DCM, suspect early CHF - add B6 q8

Diagnostics pending:

BNP

Client: Patient: B6
Froponin Faurine
Assessment (A) A1: Dyspnea- suspect DCM and early CHF vs less likely pneumonia vs neoplasia
Plan (P)
B6
SOAP completed by: B6 V19 SOAP reviewed by B6 DVM
Addendum:
B6
SOAP Text B6 :28AM - B6
B6 is an 8.5 yo FS English Bulldog that presented a B6 for sudden onset dyspnea. O found her laying and crembling with shallow and rapid breathing. Owner also noticed that she had a hacking non productive cough. Has not appreciated it before. Went to rDVM where radiographs were performed. No history of heart or pulmonary disease. No recent vomiting or diarrhea, hasbeen doing well at home with no concerns. Was on Core Wellness dry and wet grain free diet.
On presentation to ER, P was dyspneic and tachycardic. rDVM rads unable to be assessed as CHF vs. pneumonia, so placed in O2 on Unasyn overnight with bloodwork pulled for CBC/Chem and nt-proBNP. Minimal improvement overnight on B6 with persistent tachycardia, but excellent appetite and good spirits. Cardio consult was difficult to assess due to dyspnea and conformation, but showed DCM and suspect CHF.
Since yesterday P has been out of oxygen, increased B6 to TID, and restarted B6 . Overnight, P had normal vitals, with RR 28-32 with no effort, but panting earlier in the night. Walks well outside, and still has excellent appetite.
Subjective BAR, euhydrated, MM pink moist, CRT <2

Objective B6 **B6**

H/L: No murmur ausculted although very difficult auscultation due to the constant panting. No obvious arrhythmia either. Jugular pulse bottom 1/3 of the neck. Femoral pulses strong and synchronized with heart beat. Normal BVS bilateral

B6

Diagnostics completed:

B6

AFAST/TFAST: no FF in either cavity, cardiac sillhoutte difficult to visualize, mild number B lines

B6

B6

AFAST/TFAST: No FF in abdomen, possible scant pleural effusion, contiguous B-lines bilaterally, ventrally

CBC: WNL Chem: WNL

CXR: - Diffuse bronchial and interstitial pulmonary pattern may indicate concurrent chronic lower airway disease (allergic, infectious, or parasitic) and interstitial lung disease. Airway sampling can be considered.

- Mild cardiomegaly and left atrial enlargement without evidence of decompensation. Echocardiography can be considered (to evaluate mitral valve and to evaluate for pulmonary hypertension).

B6

Cardio Consult: DCM, suspect early CHF - add **B6** q8

B6 B6

Diagnostics pending:

Troponin

Taurine

Assessment (A)

A1: DCM and suspect early CHF vs less likely pneumonia

B6

Client: B6 Patient:	
SOAP completed by: B6 SOAP reviewed by: B6	V19 DVM
Addendum: -PCV/TS B6 -Chem- WNL B6 Disposition/Recommendations	

Cummings Veterinary Medical Center

Lab Results Report

AT TUFTS UNIVERSITY

Client:	B6	
Veterinarian	:	
Patient ID:	B6	
Visit ID:		

55 Willard Street North Grafton, MA 01536 (508) 839-5395

Foster Hospital for Small Animals

Patient:	B6	
Species:	Canîne	
Breed:	English Bulldog	
Sex:	Female (Spayed)	
Age:	B6 Years Old	

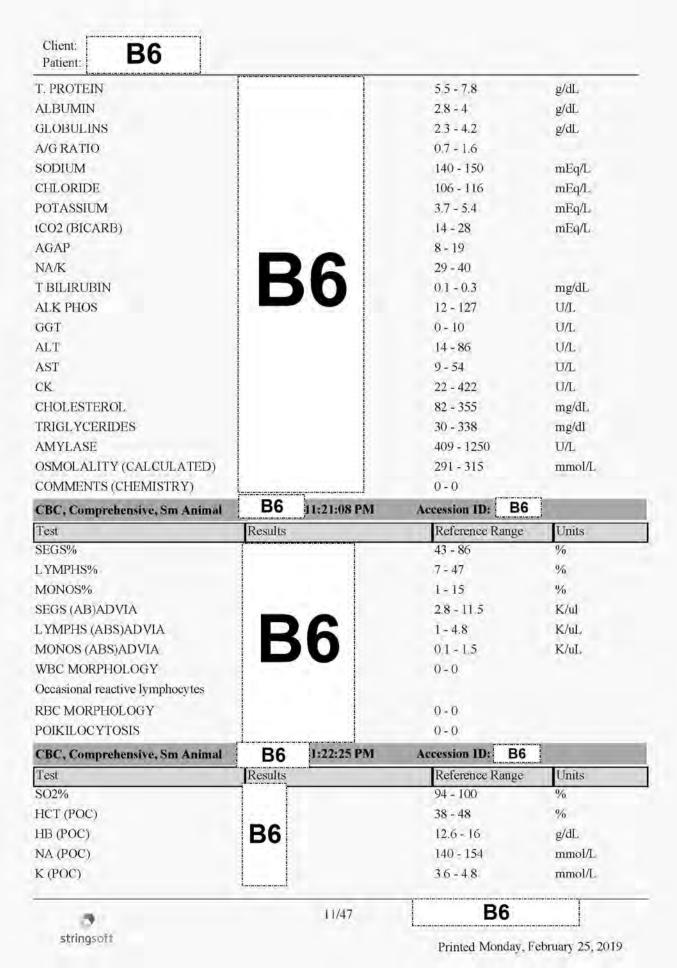
CBC, Comprehensive, Sm Animal	B6	1:21:12 PM	Accession ID: B6	
Test	Results	-,- -	Reference Range	Units
WBC (ADVIA)			4.4 - 15.1	K/uL
RBC(ADVIA)			5.8 - 8.5	M/uL
HGB(ADVIA)	1 1		13,3 - 20,5	g/dL
HCT(ADVIA)			39 - 55	%
MCV(ADVIA)			64.5 - 77.5	fL
MCH(ADVIA)			21.3 - 25.9	pg
MCHC(ADVIA)	B6		31.9 - 34.3	g/dL
RDW (ADVIA)			11.9 - 15.2	
PLT(ADVIA)			173 - 486	K/uL
MPV (ADVIA)			8.29 - 13.2	fl
PLTCRT			0.129 - 0.403	%
RETIC(ADVIA)			0.2 - 1.6	%
RETICS (ABS) ADVIA			14.7 - 113.7	K/uI.

CBC, Comprehensive, Sm Animal	B6 1:21:26 PM	Accession ID: B6	
Test	Results	Reference Range	Units
GLUCOSE		67 - 135	mg/dL
UREA	B6	8 - 30	mg/dL
CREATININE		0.6 - 2	mg/dL
PHOSPHORUS		2.6 - 7.2	mg/dL
CALCIUM2		9.4 - 11.3	mg/dL
MAGNESIUM 2+	<u> </u>	1.8 - 3	mEq/L
	10/47	B6	

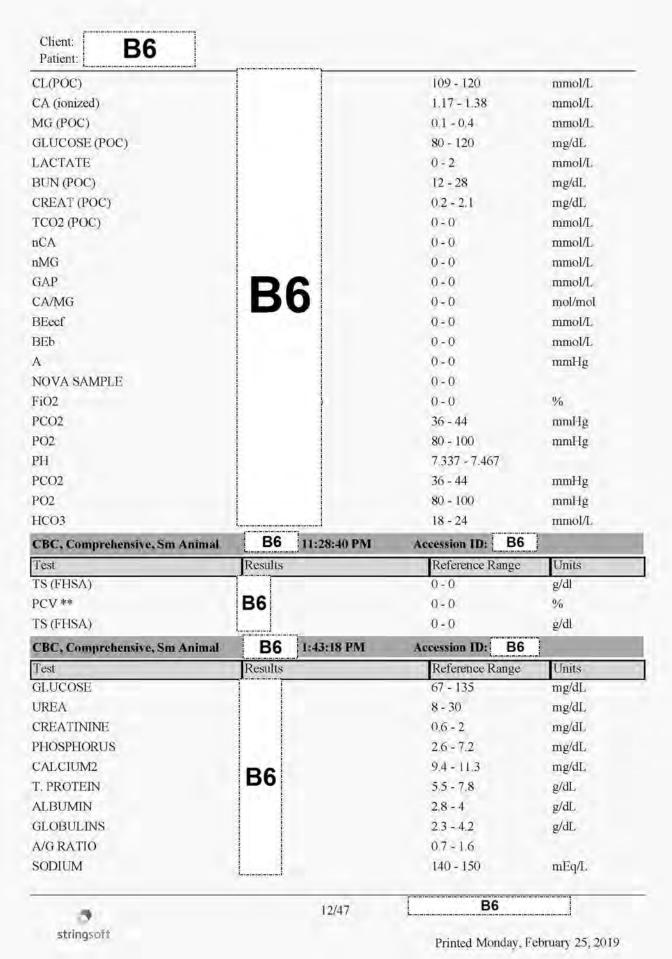
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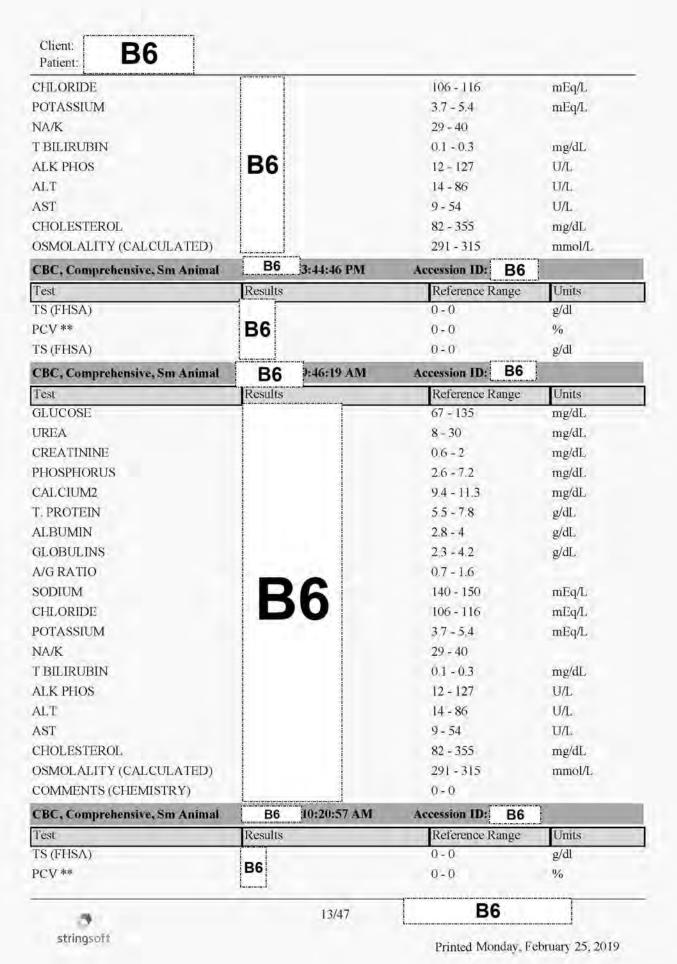
Printed Monday, February 25, 2019



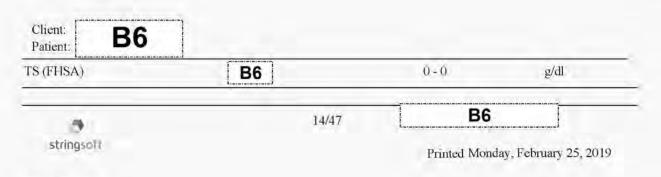
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Vitals Results

elecelecelecelecel	11 2 2 2 1 1 2 2	[
6:41:14 PM	Heart Rate (/min)	
6:41:15 PM	Respiratory Rate	
6:41:16 PM	Temperature (F)	
6:41:17 PM	Weight (kg)	
11:17:43 PM	Heart Rate (/min)	
11:17:51 PM	Respiratory Rate	
11:22:41 PM	Notes	
11:26:08 PM	FiO2 (%)	
1:03:01 AM	Respiratory Rate	
2:54:19 AM	Catheter Assessment	
2:56:22 AM	Heart Rate (/min)	
2:56:33 AM	FiO2 (%)	
2:57:15 AM	Respiratory Rate	
5:07:52 AM	Respiratory Rate	
7:34:37 AN	Eliminations	
7:35:59 AN	FiO2 (%)	B6
B6 7:37:34 AM	Temperature (F)	Bh
7:37:44 AM	Amount eaten	
7:46:29 AM	Respiratory Rate	
7:46:58 AM	Heart Rate (/min)	
7:47:06 AM	Catheter Assessment	
9:13:53 AM	Weight (kg)	
9:14:50 AM	Respiratory Rate	
11:03:18 A	FiO2 (%)	
11:03:33 A	f Catheter Assessment	
11:03:43 A	Heart Rate (/min)	
11:03:52 A	Respiratory Rate	
12:50:07 PM	Lasix treatment note	
1:10:13 PM	Respiratory Rate	
1:10:22 PM	Eliminations	i e e e e e e e e e e e e e e e e e e e
3:18:03 PM	Catheter Assessment	
3:18:20 PM	FiO2 (%)	
3:18:55 PM	Respiratory Rate	

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V	'ita	ls	Res	ults
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	3:20:08 PM	Heart Rate (/min)	
	4:46:44 PM	Amount eaten	
	5:41:52 PM	Respiratory Rate	
	7:04:34 PM	FiO2 (%)	
	7:04:58 PM	Catheter Assessment	
	7:06:54 PM	Heart Rate (/min)	
	7:07:03 PM	Temperature (F)	
	7:34:10 PM	Weight (kg)	
	7:34:17 PM	Eliminations	
	7:45:53 PM	Lasix treatment note	
	7:46:17 PM	Respiratory Rate	
	8:55:18 PM	Nursing note	
	8:55:56 PM	Eliminations	
	9:53:33 PM	Respiratory Rate	
	11:31:43 PM	Catheter Assessment	
	11:32:37 PM	Catheter Assessment	
	11:34:10 PM	Heart Rate (/min)	
	11:34:31 PM	Amount eaten	
	11:49:45 PM	FiO2 (%)	
20	11:49:58 PM	Respiratory Rate	
36	1:55:25 AM	Respiratory Rate Respiratory Rate Lasix treatment note	
	3:35:30 AM	Lasix treatment note	
	3:37:10 AM	Catheter Assessment	
	3:45:10 AM	Heart Rate (/min)	
	3:45:19 AM	Eliminations	
	3:53:42 AM	FiO2 (%)	
	3:53:53 AM	Respiratory Rate	
	4:55:04 AM	Nursing note	
	5:55:31 AM	Respiratory Rate	
	6:11:40 AM	Nursing note	
	7:19:26 AM	Respiratory Rate	
	7:19:52 AM	FiO2 (%)	
	7:20:14 AM	Temperature (F)	
	7:20:30 AM	Heart Rate (/min)	
	7:20:46 AM	Amount eaten	
	7:33:19 AM	Weight (kg)	
	7:33:27 AM	Eliminations	
	8:01:36 AM	Catheter Assessment	
	9:32:45 AM	Respiratory Rate	

B6

Vitals	Results
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	1105 4105		
[11:16:45 AM	FiO2 (%)	
	12:41:34 PM	Catheter Assessment	
	12:41:43 PM	Respiratory Rate	
	12:42:33 PM	Heart Rate (/min)	
	12:42:50 PM	Lasix treatment note	
	1:52:56 PM	Heart Rate (/min)	
	3:03:09 PM	FiO2 (%)	
	3:03:22 PM	Respiratory Rate	
	3:40:13 PM	Respiratory Rate	
	3:55:45 PM	Eliminations	
	5:04:09 PM	Respiratory Rate	
	5:40:13 PM	Amount eaten	
	5:52:28 PM	Eliminations	
	5:54:07 PM	Respiratory Rate	
	5:54:57 PM	Heart Rate (/min)	
	5:55:05 PM	Catheter Assessment	
	6:52:18 PM	Respiratory Rate	
	7:17:27 PM	Eliminations	
	7:45:11 PM	Respiratory Rate	
	8:01:23 PM	Lasix treatment note	DC
B	8:17:14 PM	Eliminations	B6
	8:54:56 PM	Respiratory Rate	
	9:32:19 PM	Heart Rate (/min)	
	9:32:26 PM	Catheter Assessment	
	9:32:35 PM	Eliminations	
	9:43:25 PM	Respiratory Rate	
	10:41:18 PM	Respiratory Rate	
	11:18:27 PM	Eliminations	
	11:18:49 PM	Weight (kg)	
	11:42:42 PM	Eliminations	
	11:53:16 PM	Respiratory Rate	
	12:52:00 AM	Respiratory Rate	
	1:22:40 AM	Heart Rate (/min)	
	1:22:46 AM	Catheter Assessment	
	1:45:25 AM	Respiratory Rate	
	2:53:51 AM	Respiratory Rate	
	3:34:16 AM	Lasix treatment note	
	3:34:45 AM	Respiratory Rate	
	3:43:47 AM	Eliminations	
	4:50:44 AM	Respiratory Rate	
Ĺ	4:52:32 AM	Nursing note	

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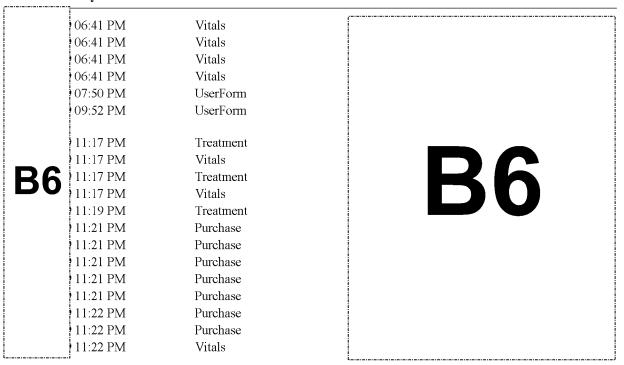
Client:
Patient

B6

Vitale	Results
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5:25:32 AM	Catheter Assessment	
5:27:43 AM	Heart Rate (/min)	
5:27:50 AM	Respiratory Rate	
5:28:01 AM	Amount eaten	
6:42:00 AM	Respiratory Rate	
7:25:45 AM	Respiratory Rate	
7:26:00 AM	Weight (kg)	
7:26:12 AM	Eliminations	
8:56:03 AM	Respiratory Rate	
9:47:19 AM	Respiratory Rate	
B6 9:50:04 AM	Catheter Assessment	B6
9:50:22 AM	Heart Rate (/min)	
11:05:09 AM	Respiratory Rate	
12:00:28 PM	Respiratory Rate	
12:00:44 PM	Eliminations	
12:05:36 PM	Lasix treatment note	
12:55:52 PM	Respiratory Rate	
1:55:49 PM	Respiratory Rate	
3:12:43 PM	Respiratory Rate	
3:17:41 PM	Eliminations	
4:02:34 PM	Respiratory Rate	

Patient History



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B6

Patient History

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11:22 PM Pur	chase
!	chase
!	atment
11:26 PM Tre	atment
11:26 PM Vit	als
11:26 PM Tre	atment
11:28 PM Lat	owork
12:50 AM Tre	atment
12:53 AM Tre	atment
01:03 AM Tre	atment
01:03 AM Vit	als
02:54 AM Tre	atment
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B6

B6 Fermale (Spayer)

Canine English Building Brown/White
Patient ID: B6

STANDARD CONSENT FORM

I am the owner, or agent for the owner, of the above described animal and have the authority to execute consent. I hereby authorize the Cummings School of Veterinary Medicine at Tufts University (herein after Cummings School) to prescribe for treatment of said animal according to the following terms and conditions.

Cummings School and its officers, agents and employees will provide such veterinary medical care as they deem reasonable and appropriate under the circumstances.

Cummings School and its officers, agents, and employees will use all reasonable care in the treatment of the above mentioned animal, but will not be liable for any loss or accident that may occur or any disease that may develop as a result of the care and treatment provided.

Lunderstand that the above identified animal may be treated by Cummings School students under the supervision and assistance of Cummings School staff members.

In executing this form, I hereby expressly addrowledge that risks, benefits and alternative forms of treatment have been explained to me. I understand said explanation, and I consent to treatment. Should any additional treatments or diagnostics be required during the continued care of my animal, I understand that I will be given the apportunity to discuss and consent to these additional procedures. I understand that further or additional treatment may be required without an apportunity for discussion and consideration by me, in the case of the development of any life-threatening emergency during the continued care of my animal and I expressly consent to all such reasonable treatment as required. I realize and understand that results cannot be guaranteed.

If any equipment is left with the animal, it will be accepted with the understanding that Cummings School assumes no responsibility for any loss of equipment that may occur.

I agree to pick up the animal when notified that it is ready for release.

In the event the animal is not picked up, and if ten (10) days have expired since a registered letter was sent to the address given above, notifying me to call for the animal, the animal may be sold or otherwise disposed of in a humane manner and the proceeds applied to the charges incurred in caring and treating the animal. Failure to remove said animal will not and does not relieve me from obligation for the costs of services rendered.

I hereby grant to the Cummings School of Veterinary Medicine at Tuffs University, its officers and employees (collectively referred to herein as Cummings School), and its agents and assigns (the Grantees) the irrevocable rights to photograph / videotape the operation or procedure to be performed, including appropriate and otherwise use such photographs and images for, and in connection with, a Grantee's medical, scientific, educational, and publicity purposes, by any means, methods and media (print and electronic) now known or, in the future, developed that the Grantee deems appropriate (provided that such photographs and images may not be used in for-profit commercials, unless such commercials are publicizing educational programs at Cummings School). As medical and surgical treatment necessitates the removal of tissue, cells, fluids or body parts of my animal, I authorize the Grantees to dispose of or use these tissues, cells, fluids or body parts for scientific and educational purposes.

Lunderstand that a FINANCE CHARGE will be applied to all accounts unpaid after 30 days. The FINANCE CHARGE is computed on a monthly rate of 1.33% per month, which is an annual percentage rate of 1.6% applied to the average daily balance outstanding, with a minimum fee of \$.50.

I do further agree that should any payment, or the full amount of the sum stated above, become overdue more than 20 days from the above agreed upon time of payment or payments, the entire balance shall be considered in default and become due and payable. I further agree to be responsible for any or all collection agency and/or attorney fees necessary to collect the full amount.

I do further agree to comply with hours of visitation in conjunction with our Hospital's policy.

I have read, understand, and agree to accept the terms and conditions herein.

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Owner's address	B6	(M) (a market and m) and m)
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If the individual admitting the animal is someone other than the legal owner, please complete the portion below:

The owner of the animal, owner to pay the veterinary r described above	B6 nedical servic	has granted me authority to obtain medical treatment and to bind this es provided at Cummings School pursuant to the terms and conditions
Authorized Agent - Please Pri	ıt.	Agent's Signature
Street Address		Date
Town/City State		

Treatment Plan

55 Willard Street North Grafton MA 01536 (508) 839-5395 http://vetmed.tufts.edu/

Foster Hospital for Small Animals

Estimated Charges B6

B6

This estimate is based upon our preliminary examination. This is an estimate and is not the final bill. Every effort will be made to keep you informed of the current status of your bill throughout your animal's hospitalization. The final fee may vary considerably from this estimated cost.

Patient	Description	LowQty	Low Extended	HighCity.	High Extended
B6	Estimate to include hospitalization, supportive care, bloodwork, imaging, cardiology consultation as indicated, medications, and other treatments or diagnostics as warranted.	1.00	В6	1,00	B6

Doctor of Record: **B6** l understand that no guarantee of successful treatment is made. I certify that I have read and fully High Total understand the authorization for medical and/or surgical treatment, the reason for why such medical **B6** Lew Total and/or surgical treatment is considered necessary, as well as its advantages and possible complications, If any, I also assume financial responsibility for all charges incurred to this patents). I 75% Deposé agree to pay 75% of the estimated cost at the time of admission. Additional deposits will be required if additional care or procedures are required. If urther agree to pay the balance of the charges when this patient(s) is released. Procedural billing is inclusive up to and including the estimated duration of no spitalization. There will be additional expenses if hospitalization extends beyond the specified duration. I have read, understand, and agree to accept the conditions of this teatment plan. Thank you for entrusting us with your pers care. Printed Page 1/1 **B6**

Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://vetmed.tufts.edu/

Radiology Request & Report

Patient	Owner		ý nejtrati nije kiel	
Name: B6	Names	B6	Patient II): B6	
Species: Canine	Address:	B6	Date of request:	B6
Brown/White Female (Spayed)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
English Bulldog	B6			
Birthdate: B6				
Attending Clinician: B6	DVM (Emerge	ncy & Critical Carel	Resident) Student:	
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Date of exam: B6				
0.000	: ICU 02		Weight (kg) 1	n on
Patient Location: Ward/Cage	: ICU OZ		weight (kg) 1	3.00
		Sedation		
■ Inpatient		BAG		
Outpatient Time:		OBAG		
Waiting		1/2 dose (NO.AC	
Emergency		Butorphan		
		M Anesthesia	to sedate/anesthetize	
			1 4 4 4	
Examination Desired: 3-view	thorax (prior	itize VD/DV and	L lat)	
	4.44			
Presenting Complaint and Cli	inical Questic	or dains now saw	ans wer:	
Emergency				
Pertinent History:				
acute onset dyspnea, no knov	un hy _ nnorm	nonia uc CHE		

Findings:

THORAX, THREE VIEWS:

The cardiac silhouette is mildly enlarged, characterized by increased height on the lateral view, with mild dorsal displacement of the carina. There is mild left atrial enlargement. The pulmonary vessels are normal. There is a patchy interstitial pattern throughout the pulmonary parenchyma with corresponding blurring of vessel margins. There is multifocally increased conspicuity of the bronchi, most apparent in the right cranial and middle lung lobes. The pleural space is normal. The mediastinum is widened and fat-filled consistent with breed. The included abdomen is unremarkable. There is multifocal intervertebral disk space narrowing with endplate sclerosis, multifocal vertebral anomalies, ventral spondylosis deformans. There is moderate bilateral elbow and right stifle degenerative joint disease.

Condusions:

 Diffuse bronchial and interstitial pulmonary pattern may indicate concurrent chronic lower airway disease (allergic, infectious, or parasitic) and interstitial lung disease. Airway sampling can be considered.

 Mild cardiomegaly and left atrial enlargement without evidence of decompensation. Echocardiography can be considered (to evaluate mitral valve and to evaluate for pulmonary hypertension).

Radiologists
Primary: B6 DVM
Reviewing:

Parties
Reported B6
Finalized

Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://wetmed.tufts.edu/

Discharge Instructions

Patient Name B6 Species Canin Brown/White I Buildog Birthdate:	emale(Spaye	d) English	Owner Name Address	B6) B6	Patient D. B6
Attending Care John E		AS, DACVIM	(Cardiology), D	ACVEOC	
	E	36			
Caronology No	SHORTE		36		
Cardiology Tex	B6				
Student	В6	V19			
Admit Date: Discharge Da	B6) PM			
Diagnoses: Dil	ated cardiomy	i Jopathy (DC)	M) with congest	ive heart failure	
o Echoc o ECG	radiograph () ardiogram fin ndings: The EC	ray) linding dings: All ch G showed a	ambers of the l normal sinus rf	neartare enlarged and lythm	uspected fluid in the lungs there is decreased contractile function. rt damage was elevated (Nt-proBNP)
Case summary	F	Touvada			i DC
for sudden ons given antibioti her lungs that a workup showe	et of respirators cs and mild se was suspected d that B6	ry distress a datives to la I to be fluid : ad enlargen	nd a cough: B eep her comfort secondary to he sent of her hear	6 was stabilized with su able. X-rays of B6 ch art disease, but pneumo	riginally presented to the Tufts ER on B6 pplemental oxygen in the ICU and was est showed a diffuse increased opacity in his could not be ruled out. A cardiology test showed that one of the indicators of
common in lag	ge and giant b	reed dogs a	nd is characteriz	ed by thirming of the wa	liumyopathy (DOM). This disease is more ils of the heart, reduced cardiac pump DOM will also have significant ambythmias

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 her breathing easier.

B6 has been breathing well outside of the oxygen cage, and her recheck examinations, echocardiograms, and chest x-rays have been stable. At this time we are happy with her condition, and are comfortable to send her home.

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.
- 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 close of B6 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 direct.
- O There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tuits HeartSmart web site (http://web.tuits.edu/heartsmart/ab-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.
- 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:		
	DC	
	B6	

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://wet.tufts.edu/heartsmart/diet/)

Your dog's usual diet may also have more sodium than recommended - we want her to continue to eat her normal diet for the first 7 to 14 days so we can make sure she 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.

The FDA is currently investigating an apparent association between diet and DCM. The exact cause is still unclear, but it appears to be associated with boutique diets and those containing exotic ingredient or are grain-free. Therefore, we are currently recommending that dogs do not eat these types of diets.

We recommend switching B6 to commercial diet made by a well-established company that is not grain-free and does not contain any exotic ingredients, such as kangaroo, duck, lamb, venison, lentils, peas, beans, buffalo, tapicca, barley, and chidosess.

The FDA issued a statement regarding this issue

(https://www.fda.gov/AnimalVeterinary/NewsEvents/CVMUpdates/uom613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings School's Petfoodology blog can further explain these findings

(http://vebrutrition.tuffs.edu/2018/06/a-broken-heart-risk-of-heart-disease-in-boutique-or-grain-free-diets-and-exotic-ingredients/).

Our nutritionists have compiled a list of dog foods that are good options for dogs with heart disease.

Dry Food Options:

Royal Canin Early Cardiac (veterinary diet)

Royal Canin Boxer

Purina Pro Plan Adult Weight Management

Purina Pro Plan Bright Mind Adult Small Breed Formula

Carmed Food Options:

Hill's Science Diet Adult Beef and Barley Entree

Hill's Science Diet Adult 1-6 Healthy Cuisine Roasted Chicken, Carrot, and Spinach Stew

Royal Canin Mature 8+

if your dog has special nutritional needs or requires a homecooked diet, we recommend you schedule an appointment with our nutritionists (508-887-4696).

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, 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, she is such a spirited girl! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@buits.edu for scheduling and non-emergent questions or concerns.

Sincerely,				
B6				
	HeartSmart website .edu/heartsmart/	for more inform	ation	
a ballon hill palating the last of the control of t		A company of the Committee of the last	must have had	on examination by one of our veterinarions within the past
please call 7-10		887-4629) to en	sure the food i	nded diet(s). If you wish to purchase your food from us, in stock. Alternatively, veterinary diets can be ordered from
Clinical Trials:				
	studies in which our est or treatment. Plea			and your pet to investigate a specific disease process or a /cumc/almicul-studies
-	Cases R6	Owner	R6	Discharge Instructions

Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://vetmed.tufts.edu/

Radiology Request & Report

Patient	Owner				
Name B6	Name	В6	Patient E	biominima and a second	
Species: Canine	Address	B6	Date of	equest: B	6
Brown/White Female (Spayed) English Bulldoe	B6				
Birthdate: B6	L_B0_1				
				See and the second	
Attending Clinician	B6	DVM (Resident, Can	fiology)	Student	B6
Date of exam B6					
Patient Location: Ward/Cage	e: Cardio, ICl	1		Weight (kg) 1	9.60
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Examination Desired: 2 view	CXR-DV and	R lateral			
TECHS TO HANDLE ONLY	- be careful d	ue to dyspnea, do	not stress fur	ther if dyspne	eic .
Presenting Complaint and Cl	inical Questic	ens you wish to and	wer:		
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Pertinent History:	D6 1				
DCM, suspected CHF on radé	B6				
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Findings			J R6	1	
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improved but not completely			and the second s		The state of the s
appreciated.		and services and the		panisaria j po	
The pleural space is again nor	mal. The med	liastinum is widen	ed and fat-fill	ed consistent	with breed. The

included abdomen is unremarkable. There is multifocal intervertebral disk space narrowing with endplate

sclerosis, multifocal vertebral anomalies, ventral spondylosis deformans. There is unchanged moderate bilateral elbow and right stifle degenerative joint disease.

-				
Com	-	rei.	-	75

Finalized:

- lm	proving int	erstitial	pulmonary	pattern	is consistent w	<i>r</i> ith response	to medic	al manager	ment.
------	-------------	-----------	-----------	---------	-----------------	-----------------------	----------	------------	-------

 Unchanged mild cardiomegaly 	and similar to mildly im	proved left atrial enlargement.
	B6	

Radiologists
Primary: B6 VMD
Reviewing:

Dates
Reported: B6

Cardiology Liaison: 508-887-4696

B6

Patient IX: B6
B6 Canine
B6 Years Old Female (Spayed) English
Bulldog
Brown/White BW: Weight (kg) 19.80

Cardiology Inpatient ENROLLED IN DCM STUDY Date **B6** Weight: Weight (kg) 19.80 Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC Cardiology Resident: **B6** Thoracic radiographs available for review? Yes - in SS Yes-in PACS No. Patient location: ICU 02 5/6 Presenting complaint and important concurrent diseases: Presenting for new onset dyspnea, radiographs unintelligible between pneumonia and CHF. Persistent sinus tachycardia overnight Current medications and doses: **B6** At-home diet: (name, form, amount, frequency) Core Wellness grain-free wet + dry Key indication for consultation: (murmur, arrhythmia, needs fluids, etc.) dyspnea, contiguous B-lines Questions to be answered: fluid vs. lasix **Is your consult time-sensitive?** (e.g., anesthesia today, owner waiting, trying to get biopsy today) Yes (explain):

STOP - remainder of form to be filled out by Cardiology

Physical Examination	
	DG
	B6
Muscle condition:	
Normal	Moderate cachexia
Mild muscle loss	Marked cachexia
Cardiovascular Physical Exam	
Morne Wery name to listen of	ue to the marked dyspnea and referred upper airway.
□ I/VI	□ v/vi
□ I/VI	□ VI/VI
□ II/VI	= v/vi
Murmur location/description:	
lugular vein:	
Bottom 1/3 of the neck	☐ Top 2/3 of the neck
Middle 1/3 of the neck	1/2 way up the neck
Arterial pulses: n/a	
□ Weak	Bounding
Fair	Pulse deficits
Good	Pulsus paradoxus
Strong	Other (describe):
Arrhythmia:	
None	☐ Bradycardia
Sinusarrhythmia	□ Tachycardia
Premature beats	= (aliylardia)
C-0	
Gallop:	Pronounced
M No	Other:
Intermittent	- utner:
Pulmonary assessments:	
Eupneic	Pulmonary Crackles
Mild dyspnea	Wheezes
Marked dyspnea	Upper airway stridor
Normal BV sounds	Other auscultatory findings:
Abdominal anama (a	

Normal Hepatomegaly Echocardiogram Findings:	Abdominal distension Mild ascites	
	B6	
Mitual inflow: Summated Normal Delayed relaxation Radiographic findings:	Pseadonomal Restrictive	
Assessment and recommendation	B6 ns: hocardiogram pictures obtained today, we suspect the patient	t to have
DCM with moderate to marked Libulldog radiographs, but we suspicious visualized. Treatment for HF shout in favor for CHF B6 treatmout. B6 / was given with at least 2 mg/kg IV TID overwas enrolled in Dr. Freeman's stu	A enlargement. The radiographs are very hard to interpret, typi ect CHF to be one of the main differential despite the atypical lid be iniated and improvement of the clinical condition would ent should be continued since pneumonia cannot be complete en during the echocardiogram and we would recommend cont	ical for pattern be a vote ely rule tinuing patient sy for the

pulled and will be very interesting in order to better assess the cardiovascular status of the patient since there is still some suspicions that the changes seen on radiographs are not all secondary to CHF. An ACEI should be started long term as well. Chest radiographs could be repeated tomorrow after the

pu.			
patient has received som	(a)		tem would confirm the
suspected diagnosis of CHF			
another disease process. A			
patient is more stable in ord	der to confirm today's findi	ings. Bloodwork should	be repeated tomorrow as
well as 10-14 days after the			
recommended in 3 months	or sooner ifhte patient de	velops clinical signs con	sistent with worsening
heart disease.			
Addendum:	MATERIAL MAT		
Patient's NT-proBNP was	management of the second		
radiographs revealed impro	it is the property of the contract of the property of the prop	to the second se	attern. The patient is
scheduled to go home toda	y with a recheck in 7-10 day	rs.	
Final Diagnosis:			
- Suspected DCM with mod	erate to marked LA enlarge	ment and suspected Cl	HF.
Heart Failure Classification	Score:		
ISACHC Classification:			
☐ la	☐ Illa		
□ (b	≥ nıb		
ACVIM CHF Classification:			
□ A	■ c		
■ B1	■ D		
□ B2			
M-Mode			
IVSd			om
LVIDd			om
LVPWd			cm
IVSs			cm
LVIDs		56	cm
LVPWs		B6	om
EDV(Teich)			ml
ESV(Teich)			ml
EF(Teich)			%
%FS			%
SV(Teich)		L.	mi
M-Mode Normalized		\$	
IVSdN			(0.290 - 0.520)
LVIDdN			(1.350 - 1.730) !
LVPWdN		B6	(0.330 - 0.530)
IVSsN		50	(0.430 - 0.710)
LVIDsN			(0.790 - 1.140) !
LVPWsN			(0_530 - 0.780)
<u>2D</u>			
SALA		B6	cm
		40,00000	

Ao Diam	Internations	om
SA LA / Ao Diam		32.5
iVSd		om
LVIDd		cm
LVPWd		on
EDV(Teich)		ml
IVSs		cm
LVIDs	1_2	on
LVPWs	B6	om
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)		ml
IVSd		am
LVIDd		cm
EDV(Teich)		ml
LVPWd		cm
	Section and processing and the second section 1	

Foster Hospital for Small Animals 95 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://webned.turks.edu/ Referring Vet Direct Line 508-887-4988

Notice of Patient Admit

Date: B6 7:49:24 PM Referring Doctor: B6 Client Bane: B6 Patient Bane: B6	Case ∎o: B6
Dear B6	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: Dys	pnea (pneumonia > CHF)
if you have any questions regarding this particular	case, please call 508-887-4988 to reach the ICU Service.
Information is updated daily, by noon.	



Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Far (508) 839-7951 http://retmed.tufts.edu/Chloe

B6 Female (Spayed)
Canine English Bulklog
Brown/White
B6

Daily Update From the Cardiology Service

Today's date:	В6			
Dear Drs at	В6			
Thank you for re University.	eferring pati	ients to the Foste	r Hospital for Small Animals at the Cummings School of T	uf
Your patient	В6	was admitted	and is being cared for by the Cardiology Service.	
Today, B6				
is critica	the oxygen lly ill			
Today's treatme				
4000	The state of the s	DCM and L-CHF		
The second second second		cedure planned		
ongoing ongoing	treatment	for CHF		
		for thrombosis		
ongoing	treatment i	for arrhythmia		
Additional plans				
Control of the Contro		ays for reports to	be finalized upon patient discharge.	
Please call (508)	887-4696 L	pefore 5om or em	nail us at cardiovet@tufts.edu if you have any questions	
Thank you!				E
Attending Clinic	ian:	B6	DVM (Resident, Cardiology)	
	breaken and a second	DVM, DACVIM,	- Harrison Harris C. (2012). A contract of the	
Senior student:				



Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://wetmed.tufts.edu/

B6	Female (Spayed)
	glish Bulldog
Brown/WI	nite
B6	

1/21/2019

Dear	В6			
Thank y	ou for referring	B6	with their pet B6]
lf you h	ave any questions,	or concerns,	please contact us at 50	8-887-4988
Thank y	ou,			
e (m) even e (m) ev	B6	DVM (Re	sident, Cardiology)	

From:	PFR Event <pfreventcreation@fda.hhs.gov></pfreventcreation@fda.hhs.gov>
То:	Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent:	2/25/2019 1:05:02 PM
Subject:	Wellness CORE Grain-Free Ocean Whitefish dry-Wellness Core grain free turkey: Lisa Freeman - EON-380743
Attachments:	2063134-report.pdf; 2063134-attachments.zip

A PFR Report has been received and PFR Event [EON-380743] has been created in the EON System.

A "PDF" report by name "2063134-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 "2063134-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380743

ICSR #: 2063134

EON Title: PFR Event created for Wellness CORE Grain-Free Ocean Whitefish dry Wellness Core grain free turkey chicken liver and turkey liver formula canned Wellness Core Hearty Cuts grain-free in gravy chicken and turkey recipe; 2063134

AE Date	02/01/2019	Number Fed/Exposed	6
Best By Date		Number Reacted	3
Animal Species	Dog	Outcome to Date	Stable
Breed	Bulldog		
Age	8 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063134

Product Group: Pet Food

Product Name: Wellness CORE Grain-Free Ocean Whitefish dry Wellness Core grain free turkey, chicken liver, and turkey liver formula canned Wellness Core Hearty Cuts grain-free in gravy chicken and turkey recipe Description: Housemate (half sister; B6 [- (ICSR) of 2063133) diagnosed with DCM and CHF so screened by RDVM for BNP which was elevated. Evaluated at Tufts 2/1/19. ARVC/diet-induced DCM with

ventricular arrhythmia. Diet changed to Royal Canin Early Cardiac and will re-evaluate in 3 months I have diet

sample. 3 other dogs in household (1 had normal BNP, other 2 not yet evaluated)

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: 6 Number of Animals Reacted With Product: 3

Product Name	Lot Number or ID	Best By Date
Wellness CORE Grain-Free Ocean Whitefish dry Wellness Core grain free turkey, chicken liver, and turkey liver formula canned Wellness Core Hearty Cuts grain-free in gravy chicken and turkey recipe		

Sender information

Lisa Freeman 200 Westboro Rd North Grafton, MA 01536 USA

Owner information

B6

JSA

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

https://eon.fda.gov/eon//browse/EON-380743

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=397752

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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.

ICSR:	2063134	***************************************		
Type Of Submission:	Initial		·····	
Report Version:	FPSR.FDA.PETF.V.V1			
Type Of Report:	Adverse Event (a symptom,	reactio	n or disease	associated with the product)
Reporting Type:	Voluntary			
Report Submission Date:	2019-02-25 07:58:43 EST			
Reported Problem:	Problem Description:	DCM a Tufts 2 to Roya	/1/19. ARVC/ al Canin Early	ter B6 - (ICSR) of 2063133) diagnosed with creened by RDVM for BNP which was elevated. Evaluated at diet-induced DCM with ventricular arrhythmia. Diet changed a Cardiac and will re-evaluate in 3 months I have diet sample. Sehold (1 had normal BNP, other 2 not yet evaluated)
	Date Problem Started:	02/01/2	2019	
	Concurrent Medical Problem:	Yes		
	Pre Existing Conditions:	В6	rauma as pu	ppy
	Outcome to Date:	Ļ	<u>.</u>	
Product Information:	Product Name:	chicker	n liver, and tu	ain-Free Ocean Whitefish dry Wellness Core grain free turkey rkey liver formula canned Wellness Core Hearty Cuts grain- n and turkey recipe
	Product Type:	Pet Fo	od	
	Lot Number:			
	Product Use Information:	Descri	iption:	Please see diet history for more info (and refer to B6 diet history for more complete info - all dogs eat same diets)
	Manufacturer /Distributor Information: Purchase Location Information:			
Animal Information:	Name:	B6		
	Type Of Species:	ři	5	
	Type Of Breed:	\$	······································	
	Gender:	2	,	
	Reproductive Status:	}	ed	
	Weight:	? 		
		8 Years	***************************************	
	Assessment of Prior Health:	3		
	Number of Animals Given the Product:	6		
	Number of Animals Reacted:	3		
	Owner Information:		Owner Information provided:	
			Contact	Name:
			Address:	Phone: B6
			, wai coo.	B6 United States
	Healthcare Professional			Tufts Cummings School of Veterinary Medicine

	Information:	Contact:	Name:	Lisa Freeman	
			Phone:	: (508) 887-4523	
				: lisa.freeman@tufts.edu	
		Address:	200 Westboro North Grafton Massachusett 01536 United States	s	
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 record			
	Type;	Medical Records			

Foster Hospital for Small Animals

55 Willard Street North Grafton, MA 01536 (508) 839-5395

	All	Medical	Record	1
--	-----	---------	--------	---

Client: Address: B6

Referring Information

Patient: B6
Breed: English Bulldog
DOB: B6

Species: Canine Sex: Male (Neutered)

Home Phone Work Phone: Cell Phone: B6

	B6	
Client: B6		
nitial Complaint:		
nitial Complaint:		
nitial Complaint:		
nitial Complaint:		
nitial Complaint:		
nitial Complaint:		

Client: Patient:	B6				
Initial Con Scanned R	=				
Initial Cor Cardiology	=	come fasted - u/f sa	mples		
SOAP Tex	st Feb 1 2019 11	:50AM - Rush, Joh	ın		
Disposition	n/Recommendatio	ons			

Client:	B6	
Veterinarian	1:	
Patient ID:	B6	
Visit ID:		

Lab Results Report

Foster Hospital for Small Animals

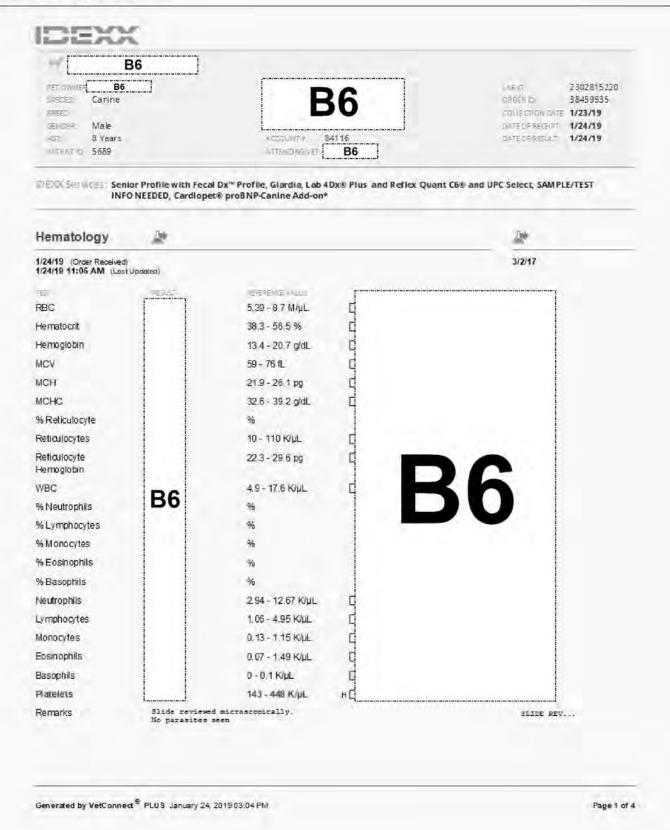
55 Willard Street North Grafton, MA 01536 (508) 839-5395

Patient:	B6	
Species:	Canine	
Breed:	English Bulldog	
Sex:	Male (Neutered)	
Age:	B6 Years Old	

		Accession ID:	
l'est	Results	Reference Range Units	
	4/34	[B6]	
stringsoft			

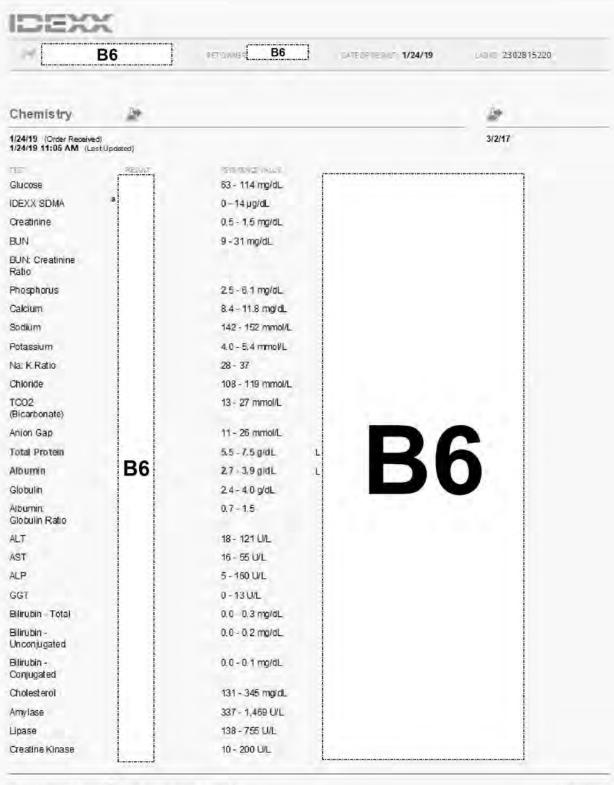
Printed Monday, February 25, 2019

IDEXX Hematology 1/24/19



B6

IDEXX Hematology 1/24/19



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IDEXX Hematology 1/24/19

	36 DATEOPREDAT 1/24/19	2302815220
Chemistry (cont		
nemisuy (com	nueu)	-
ST.	是我们。 · · · · · · · · · · · · · · · · · · ·	1
emolysis Index		
pemia Index	B6 B0	
indiopet	0 - 900 pmol/L H	
vBNP - inine	Lancon and	
	BOTH SIMA AND CREATINING ARE WITHIN THE REFERENCE INTERVAL which indicates	
	hidney function is likely good. Evaluate a complete urinalysis and confirm there is no other evidence of hidney disease.	
	b Index of N, 1+, 2+ exhibits no significant effect on chemistry values.	
	C Index of N, 1+, 2+ exhibits no significant effect on chemistry values.	
	d Cardiopet proBNP >1800pmol/L Abnormal. NT-proBNP concentration is compatible with increased stretch and stress on the myocardium. Clinically significant heart disease is likely at	
	this time. For dogs (<20kg) with mitral valve disease (MVD), there is increased risk of heart failure within the next 12 months. If clinical sign:	
	(i.e. respiratory and/or exercise intolerance) are present, they are likely due to heart failure. Additional diagnostics including thoracic	
	radiographs, electrocardiogram and echocardiogram are strongly recommended to	0
	diagnose and assess severity of cardiac disease.	
	Please note: Complete interpretive comments for all concentrations of	
	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	
	Please note: Complete interpretive comments for all concentrations of Cardiopet proBNP are available in the online directory of services. Serum	
	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	
indocrimalogy	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	Zie .
OTHER DESIGNATION	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	<i>₩</i>
24/19 (Order Received)	Please note: Complete interpretive comments for all concentrations of Cardiopet proBMP are available in the online directory of services. Serum specimens received at room temperature may have decreased NT-proBMP concentrations.	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last	Please note: Complete interpretive comments for all concentrations of Cardiopet profile are available in the online directory of services. Serum openimens received at from temperature may have decreased NT-profile contentrations. Updated)	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last	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. Updated)	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last	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. Updated) B6 1-4 µg/dL B6	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last	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 contentrations. Updated) B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference interval are likely sushyroid. For dogs on thyroid supplement,	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last	Please note: Complete interpretive comments for all concentrations of Cardiopet proBMP are available in the online directory of services. Serum specimens received at room temperature may have decreased NT-proBMP concentrations. Updated) **BGO** **CEFEVENUE** B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last	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 contentrations. Updated) B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference interval are likely sushyroid. For dogs on thyroid supplement,	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last 3 3/1al T4	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 contentrations. Updated) B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference interval are likely sushyroid. For dogs on thyroid supplement,	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last 3 3/1al T4	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 contentrations. Updated) B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference interval are likely sushyroid. For dogs on thyroid supplement,	3/2/17
24/19 (Order Received) 24/19 11:05 AM (Last otal T4 ierology 24/19 (Order Received)	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 contentrations. B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference interval are likely sushyroid. For dogs on thyroid supplement, recommended therapeutic levels are 2.1-5.4 µg/dL.	3/2/17
Endocrimalogy (24/19 (Order Received) (24/19 11:05 AM (Last otal T4 Serology (24/19 (Order Received) (24/19 11:05 AM (Last	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 contentrations. B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference interval are likely sushyroid. For dogs on thyroid supplement, recommended therapeutic levels are 2.1-5.4 µg/dL.	3/2/17
(24/19 (Order Received) (24/19 11:05 AM (Last otal T4 Serology (24/19 (Order Received) (24/19 11:05 AM (Last	Updated) B6 1-4 µg/dL B6 Dogs with no clinical signs of hypothyroidism and results within the reference innerval are likely euchypoid. For dogs on phyroid supplement, recommended therapeutic levels are 2.1-5.4 µg/dL. Updated)	3/2/17

IDEXX Hematology 1/24/19

erology (contin	ued) RESUI			
		B6		
Other	20-			
1/24/19 (Order Received 1/24/19 11:05 AM (Les) t Updated)			
More Information	ASSUCT		B6	
Needed				

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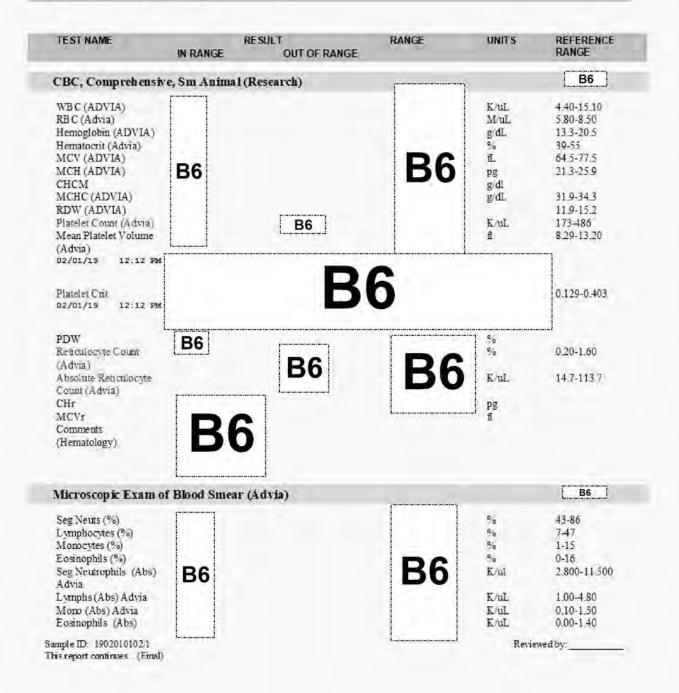
B6

cbc and profile 2/1/19

Cummings School of Veterinary Medicine

Clinical Pathology Laboratory 200 Westboro Road North Grafton, MA 01536

Name/DOB: B6 Sex: CM Provider: Dr. John Rush
Patient ID Sex: CM Order Location: V320559: Investigation into
Phone number: Age: 8 Sample ID: 1902010102
Collection Date: 2/1/2019 11:52 AM Species: Canine
Approval date: 2/1/2019 12:57 PM Breed:



cbc and profile 2/1/19

Cummings School of Veterinary Medicine

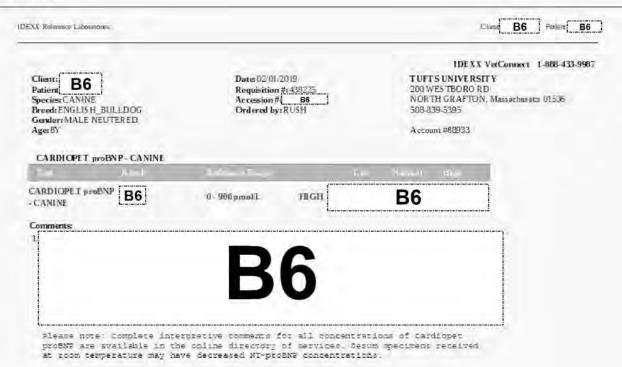
Clinical Pathology Laboratory 200 Westboro Road North Grafton, MA 01536

Name/DOB:	CHO PATRICIPATION IN THE PATRI	Provider, Dr. John Rush
Name/DOB: Patient ID: B6	Sex: CM	Order Location: V320559: Investigation into
Phone number:	Age: 8	Sample ID: 1902010102
Collection Date: 2/1/2019 11:52 AM	Species: Canine	Control of the Contro
Approval date: 2/1/2019 12:57 PM	Breed:	

TEST NAME	IN RANGE	RESULT OUT OF RANGE	RANGE	UNITS	REFEREN RANGE	CE
Microscopic Exam	of Blood Smer	ar (Advia) (cont'd)			[B6	1
Advia WBC Morphology RBC Morphology	B6					
Research Chemistr	y Profile - Sm	all Animal (Cobas)			■ B6]
Glucose Urea Creatinine Phosphorus Calcium 2 Magne sium 2+ Total Protein Alburnin Globulins A/G Ratio Sodium Chloride Potassium tCO2(Bicarb) AGAP NA/K Total B ilirubin Alkaline Phosphatase GGT ALT AST Creatine Kinase Cholesterol Triglycerides Amylase Osmolality (calculated	B6	B6	B 6	mg/dL mg/dL mg/dL mg/dL mg/dL g/dL g/dL g/dL mEq/L mEq/L mEq/L mEq/L u/L U/L U/L U/L U/L U/L U/L U/L mg/dL mg/dL mg/dL mg/dL mg/dL mg/dL	67-135 8-30 0.6-2.0 26-72 9.4-113 1.8-3.0 55-7.8 2.8-4.0 2.3-4.2 0.7-1.6 140-150 106-116 3.7-5.4 14-28 8.0-19.0 29-40 0.10-0.30 12-127 0-10 14-86 9-54 22-422 82-355 30-338 409-1250 291-315	

Sample ID: 1902010102/2 END OF REPORT (Final) Reviewed by: _____ Page 2

NT-proBNP 2/1/19



CBC/CHEM



Tufts Cummings School Of Veterinary Medicine

200 Westboro Road North Grafton, MA 01536

DUPLICATE

Name/DOB: B6	Sex: CM	Provider: Dr. John Rush Order Location: V320559: Investigation into
Phone number:	Age: 8	Sample ID: 1902010102
Collection Date: 2/1/2019 11:52 AM	Species: Canine	
Approval date: 2/1/2019 12:57 PM	Breed:	

Hematocrit (Advia) MCV (ADVIA) MCH (ADVIA) MCH (ADVIA) CHCM MCHC (ADVIA) RDW (ADVIA) Platelet Count (Advia) D2/01/19 12:12 PM Platelet Cit D2/01/19 12:12 PM Platelet Cit D2/01/19 12:12 PM PDW Reticulocyte Count (Advia) H Absolute Reticulocyte Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	39-55 % 64.5-77.5 fL 21.3-25.9 pg 31.9-34.3 g/dL 11.9-15.2 173-486 K/uL 8.29-13.20 fl 0.129-0.403 %
Hemoglobin (ADVIA) Hematocrit (Advia) MCV (ADVIA) MCH (ADVIA) MCH (ADVIA) MCHC (ADVIA) RDW (ADVIA) Platelet Count (Advia) Mean Platelet Volume (Advia) 02/01/19 12:12 PM Platelet Crit 02/01/19 12:12 PM Platelet Crit 02/01/19 12:12 PM B6 PDW Refliculocyte Count (Advia) H Absolute Refliculocyte Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	13.3-20.5 g/dL 39-55 % 64.5-77.5 fL 21.3-25.9 pg 31.9-34.3 g/dL 11.9-15.2 173-486 K/uL 8.29-13.20 fl 0.129-0.403 % 0.20-1.60 %
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Platelet Count (Advia) Mean Platelet Volume (Advia) 02/01/19 12:12 PM Platelet Crit 02/01/19 12:12 PM PDW Reticulocyte Count (Advia) H Absolute Reticulocyte Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	0.20-1.60 %
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Platelet Crit 02/01/19 12:12 PM Platelet Crit 02/01/19 12:12 PM PDW Reticulocyte Count (Advia) H Absolute Reficulocyte Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	0.20-1.60 %
Platelet Crit D2/01/19 12:12 PM PDW Reticulocyte Count (Advia) H Absolute Reticulocyte Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	0.129-0.403 % 0.20-1.60 % 14.7-113.7 K/uL
PDW Reticulocyte Count (Advia) H Absolute Reticulocyte H Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	0.20-1.60 %
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Count (Advia) CHr MCVr Comments (Hematology) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	14.7-113.7 K/uL
COURT (Advia) CCHr MCVr Comments (Hematology) >25 pratelets/100x field (estimated count of >500,000/ul) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	
MCVr Comments (Hematology) >23 pratelets/100x field (estimated count of >500,000/ul) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	
Comments (Hematology) >23 pratelets/100x field (estimated count of >500,000/ul) Microscopic Exam of Blood Smear (Advia) CSTCYR Seg Neuts (%) Lymphocytes (%)	
CSTCYR Seg Neuts (%) Lymphocytes (%)	
Seg Neuts (%) Lymphocytes (%)	
Lymphocytes (%)	Ref. Range/Males
	43-86 %
	7-47%
Monocytes (%)	1-15 %
Eosinophils (%) Seg Neutrophils (Abs) B61	0.16%
Seg Neutrophils (Abs) B6 1 Advia	2.800-11.500 K/ul
Lymphs (Abs) Advia	1.00-4.80 K/uL
Mono (Abs) Advia	0.10-1.50 K/uL
Eosinophils (Abs) Advia	0.00-1.40 K/uL
WBC Morphology No Morphologic Abnormalities	
RBC Morphology No morphologic abnormalities	
Research Chemistry Profile - Small Animal (Cobas)	

Sample ID: 1902010102/1 This report continues... (Final)

Reviewed by:



CBC/CHEM



Tufts Cummings School Of Veterinary Medicine

200 Westboro Road North Grafton, MA 01536

DUPLICATE

	TO SECURE TO SEC	
Name/DOB: B6	Sex: CM	Provider. Dr. John Rush Order Location: V320559: Investigation into
Phone number:	Age: 8	Sample ID: 1902010102
Collection Date: 2/1/2019 11:52 AM	Species: Canine	
Approval date: 2/1/2019 12:57 PM	Breed:	

Research Chemistry Profile - Small Animal (Cobas) (cont'd) SMACHUNSKI Ref. Range/Males Glucose 67-135 mg/dL Urea 8-30 mg/dL 0.6-2.0 mg/dL Creatinine Phosphorus 2.6-7.2 mg/dL 9.4-11.3 mg/dL 1.8-3.0 mEq/L Calcium 2 Magnesium 2+ Total Protein 5.5-7.8 g/dL L Albumin 2.8-4.0 g/dL Globulins 23-4.2 g/dL L A G Ratio H 0.7-1.6 140-150 mEq/L Sodium Chloride 106-116 mEq/L 3.7-5.4 mEq/L Potassium **B6** tCO2(Bicarb) 14-28 mEq/L 8.0-19.0 AGAP NA/K 29-40 0.10-0.30 mg/dL Total Bilirubin 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 82-355 mg/dL Triglycerides 30-338 mg/dl 409-1250 U/L Amylase Osmolality (calculated) 291-315 mmol/L

Sample ID: 1902010102/2

REPRINT: On g. printing on 2/1/2019 (Final)

Reviewed by: ______ Page 2

Taurine level

do 27291 WEB

Amino Acid Laboratory Sample Submission Form

Amino Acid Laboratory, 1089 Veterinary Medicine Drive, Davis, Ca 95616

Telephone: 530-752-5058, Fax: 530-752-4698

Email: ucd.aminoacid.lab@ucdavis.edu

B6

www.vetmed.ucdavis.edu/labs/amino-acid-lab	oratory	150
Veterinarian Contact: B6		
Clinic/Company Name: <u>Tuffs Cummings School</u>	of Vet. Med Clinical Pathology Laboratory	
Address: 200 Westboro Road, North Grafton, MA	015369	
Email:Clinpath@tufts.edu	@tufts.edu	
Telephone: _508-887-4669	Fax: 508-839-7936	
Billing Contact: B6	Email: B6	
Billing Contact Phone: B6	Tax ID:	
Patient Name: B6	Species: CANINE	
Breed: Fryglish Bulldag	Owner's Name:	5
Current Diet: Wellwess Core		
Sample type: Plasma Whole Blood	Urine Food Other	
Test: Taurine Complete Amino Acids	Other:	
Taurine Results (lab use only)		

	Plasma (nMol/ml)	Whole Bloc	od (nMol/ml)
	Normal Range	No known risk for deficiency	Normal Range	No known risk for deficiency
Cat	80-120	>40	300-600	>200
Dog	60-120	>40	200-350	>150

Food:

B6

Whole Blood:

^{*} Please note with the recent increase in the number of dogs screened for taurine deficiency, we are seeing dogs with values within the reference ranges (or above the "no known risk for deficiency range") yet are still exhibiting signs of cardiac disease. Veterinarians are welcome to contact our laboratory for assistance in evaluating your patient's results.

Diet history 2/1/19

				Pleas	CARDIOLOGY se answer the follow		4	nat.	
Pe	t's name:	В	6		Owner's name ;	В	6	Today's date:	02-01-19
1.	How would y	ou asse		ur pet's	appetite? (mark the po	int on the line be			
		Poo				1	Exc	ellent	
							1		
2.	Exts about	t the sar	ne am	ount as	pet's appetite over the usual Deats less han usual Dother_		check all that Eats more that		
3.	Over the last	t few we	eks, h ained	as your weight	pet (check one) 图Stayed about the	same weight	Don't know		
4.	Please list be currently eat	elow <u>AL</u> s. Pleas	L pet f	oods, p	eople food, treats, sna brand, specific product	ck, dental chews, , and flavor so w	rawhides, and a e know exactly v	any other food ite what you pet is ea	m that your pet iting.
					please provide enoug				
	Nutra Crain	Ema Ch	speci	l ontil	luct and flavor) & Sweet Potato Adult	Form	Amount	How often?	Fed since
	85% lean ha			Lenn,	Sweet Potato Adult	dry microwaved	1 ½ cup 3 oz	2x/day 1x/week	Jan 2018 Jan 2015
	Pupperoni o			vor		treat	1/2	1x/day	Aug 2015
	Rawhide	iginai u	GUINA	voi		treat	6 inch twist	1x/week	Dec 2015
	Mellness	1,00	Ca	media	hullen	wet	4 02	7x day	Dec 2015
	The loss				, vince	Hru	74 7JD	2x/day	Dec 7015
	Welmess			>44		tirat		x day	0-1 2013
	Pacificia	- ca			71	-1100	3 ACS.	1 1 min	
	16	ca	E	36	FORM				
	()	- i.							
		TOR	EXA	CIF	rups/				
			4	DALAG	45				
	*Any addition	nal diet	inform	ation ca	n be listed on the back	of this sheet			
5.	Do you give supplements	any die	ary su	ppleme No	nts to your pet (for exa If yes, please list whi	ch ones and give	lucosamine, fatt brands and am	ounts:	
	Taurine		DVac	□No	201,001,001	concentration		Amo	unt per day
	Carnitine			DNo					
	Antioxidants			DNo				-	
	Multivitamin			□No					
	Fish oil			□No					
	Coenzyme (210	□Yes	□No_					
	Other (pleas								
	Example: Vii	tamin C			Nat	ure's Bounty		500 mg table	ts – 1 per day
				-				===	
6.	How do you				r pet?	(LYAUCH	& DIET WIN BARLY	75
	☐ I put them	directly	in my	pet's m	outh without food		ROWAL P	LUA TARIS	1
	put them	in my p	et's de	og/cat fo	od		1.0116 CA	WIND DINEC	7
	put them				nilar product		Own	9e_	

Troponin 2/1/19



Gastrointestinal Laboratory Dr. J.M. Steiner Department of Small Animal Clinical Sciences Texas A&M University 4474 TAMU College Station, TX 77843-4474



Website User ID: clinpath@tufts.edu

GI Lab Assigned Clinic ID: 11405

Phone: Dr. Freeman Tufts University-Clinical Pathology Lab Attn: Joyce Knoll Animal Name 200 Westboro Road

North Grafton, MA 01536 USA

508 887 4669 9 508 839 7936

Owner Name: Species

Date Received:

В6

Canine Feb 12 2019

GI Lab Accession: **B6**

Test Result Control Range Assay Date Ultra-Sensitive Troponin I Fasting B6 ng/mL ≤0.06 02/12/19

> Interpretation: Increased troponin I value. If clinical signs of heart disease are present additional diagnostic work-up is recommended Patients who are being supplemented with biotin may exhibit a slightly higher ultra-sensitive troponin result (10% or lower); however, the ability of the assay to detect serial increases or decreases of ultra-sensitive troponin is maintained

Comments:		

Troponin 2/1/19

Important Notices: Internal Medicine Conference

Join us for a unique continuing education event in Phuket, Thailand Oct 7th - 11th, 2019. For details see http://texasimconference.tamu.edu

Ongoing studies

Cobalamin Supplementation Study- Dogs and cats with cobalamin deficiency with normal PLI, and either normal or low(consistent with EPI) TLI to compare the efficacy of oral vs parenteral cobalamin supplementation. Contact Dr. Chang at chichang@cvm tamu edu for further information.

Chronic Pancreatitis with Uncontrolled Diabetes Mellitus-Seeking dogs with chronic pancreatitis and uncontrolled diabetes mellitus for enrollment into a drug trial(medication provided at no cost). Contact Dr. Sue Yee Lim at slim@cvm.tamu.edu or Dr. Sina Marsilio at smarsilio@cvm.tamu.edu

Dogs with Primary Hyperlipidemia- Prescription diet naive dogs newly diagnosed with primary hyperlipidemia are eligible to be enrolled in a dietary trial. Contact Dr. Lawrence at ylawrence@cvm.tamu.edu for more in formation.

Dogs with Chronic Pancreatitis-Dogs with chronic pancreatitis (cPLi >400µg/L) and hypertriglyceridemia (>300 mg/di) are eligible to be enrolled in a dietary trial. Contact Dr. Lawrence at ylawrence@cvm.tamu.edu

Chronic enteropathies in dogs-Please fill out this brief form http://tinyuri.com/rbd-enroll to see if your patient qualifies.

Feline Chronic Pancreatitis- Cats with chronic pancreatitis for more than 2 weeks and fPLI >10 µg/L are eligible for enrollment into a treatment trial investigating the efficacy of prednisolone or cyclosporine. Please contact Dr. Vamkate for further information at pyamkate@cvm tamu edu

We can not accept packages that are marked "Bill Receiver"

Use our preprinted shipping labels to save on shipping. Call 979-862-2861 for assistance. The GI Lab is not here to accept packages on the weekend. Samples may be compromised if you ship for arrival on Saturday or Sunday or if shipped via US Mail.

GI Lab Contact Information

Phone (979) 862-2861 Fax: (979) 862-2864 Email: gliab@cvm.tamu.edu velmed.tamu.edu/gilab

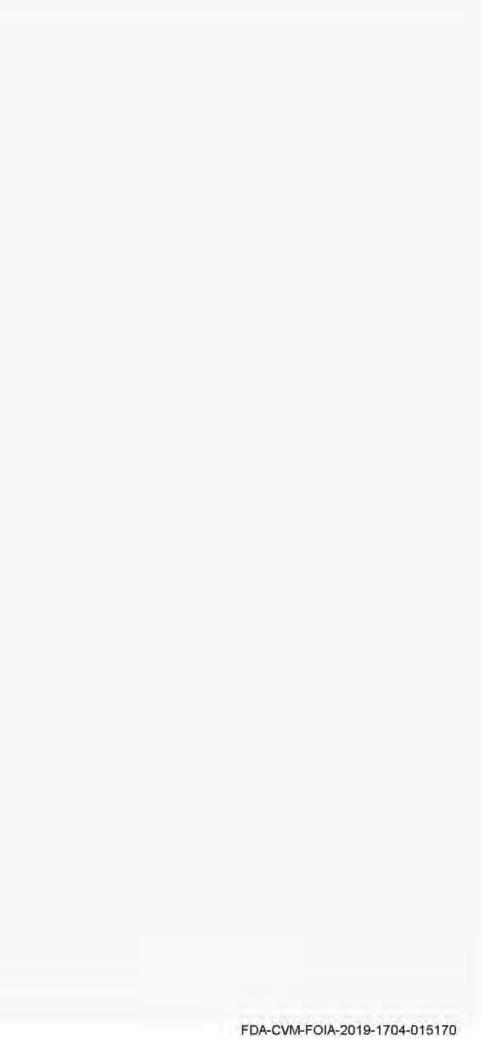
	,
Client:	D6
Patient:	DU
	·

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2/1/2019 11:00:04 AM Weight (kg) 22.1000

Patient History

01/28/2019 03:52 PM	Appointment	
02/01/2019 08:05 AM 02/01/2019 08:05 AM	UserForm UserForm	
02/01/2019 10:37 AM 02/01/2019 10:38 AM 02/01/2019 10:44 AM 02/01/2019 11:00 AM 02/01/2019 12:03 PM 02/01/2019 12:50 PM	UserForm UserForm Purchase Vitals UserForm Appointment	B6
02/01/2019 12:58 PM	Prescription	
02/20/2019 12:08 PM	Patient Merge	
02/21/2019 04:32 PM 02/21/2019 04:32 PM	Purchase Purchase	



B6

B6 Male(Neutered)
Canine English Buildog Brown/White
Patient ID: B6

STANDARD CONSENT FORM

I am the owner, or agent for the owner, of the above described animal and have the authority to execute consent. I hereby authorize the Cummings School of Veterinary Medicine at Tufts University (herein after Cummings School) to prescribe for treatment of said animal according to the following terms and conditions.

Cummings School and its officers, agents and employees will provide such veterinary medical care as they deem reasonable and appropriate under the circumstances.

Cummings School and its officers, agents, and employees will use all reasonable care in the treatment of the above mentioned animal, but will not be liable for any loss or accident that may occur or any disease that may develop as a result of the care and treatment provided.

Lunderstand that the above identified animal may be treated by Cummings School students under the supervision and assistance of Cummings School staff members.

In executing this form, I hereby expressly addrowledge that risks, benefits and alternative forms of treatment have been explained to me. I understand said explanation, and I consent to treatment. Should any additional treatments or diagnostics be required during the continued care of my animal, I understand that I will be given the opportunity to discuss and consent to these additional procedures. I understand that further or additional treatment may be required without an opportunity for discussion and consideration by me, in the case of the development of any life-threatening emergency during the continued care of my animal and I expressly consent to all such reasonable treatment as required. I realize and understand that results cannot be guaranteed.

If any equipment is left with the animal, it will be accepted with the understanding that Cummings School assumes no responsibility for any loss of equipment that may occur.

I agree to pick up the animal when notified that it is ready for release.

In the event the animal is not picked up, and if ten (1.0) days have expired since a registered letter was sent to the address given above, notifying me to call for the animal, the animal may be sold or otherwise disposed of in a humane manner and the proceeds applied to the charges incurred in caring and treating the animal. Failure to remove said animal will not and does not relieve me from obligation for the costs of services rendered.

I hereby grant to the Cummings School of Veterinary Medicine at Tuffs University, its officers and employees (collectively referred to herein as Cummings School), and its agents and assigns (the Grantees) the irrevocable rights to photograph / videotape the operation or procedure to be performed, including appropriate and otherwise use such photographs and images for, and in connection with, a Grantee's medical, scientific, educational, and publicity purposes, by any means, methods and media (print and electronic) now known or, in the future, developed that the Grantee deems appropriate (provided that such photographs and images may not be used in for-profit commercials, unless such commercials are publicizing educational programs at Cummings School). As medical and surgical treatment necessitates the removal of tissue, cells, fluids or body parts of my animal, I authorize the Grantees to dispose of or use these tissues, cells, fluids or body parts for scientific and educational purposes.

Lunderstand that a FINANCE CHARGE will be applied to all accounts unpaid after 30 days. The FINANCE CHARGE is computed on a monthly rate of 1.33% per month, which is an annual percentage rate of 1.6% applied to the average daily balance outstanding, with a minimum fee of \$50.

I do further agree that should any payment, or the full amount of the sum stated above, become overdue more than 20 days from the above agreed upon time of payment or payments, the entire balanceshall be considered in default and become due and payable. I further agree to be responsible for any or all collection agency and/or attorney fees necessary to collect the full amount.

I do further agree to comply with hours of visitation in conjunction with our Hospital's policy.

I have read, understand, and agree to accept the terms and conditions herein.

Owner's name: B	6) Date: 2/	1/2019	
Owner's address:	B6		
RA		01 00 10	5
	/	Oate OZ~	1

If the individual admitting the animal is someone other than the legal owner, please complete the portion below:

The owner of the animal B6 owner to pay the veterinary medical described above		ranted me authority to obtain medical treatment and to b led at Cummings School pursuant to the terms and condition	
Authorized Agent - Please Print		Agent's Signature	
Street Address		Date	8
Town/City State	Zio		



B6

Patient ID: B6

36 Canine

B6 Years Old Male (Neutered) English
Bulklog
Body Weight: Weight (kg) 0.00

Brachycephalic Consent Form Anesthesia, Sedation and Hospitalization

Brachycephalic is a term for "short-nosed". Several dog breeds may experience difficulty breathing due to the shape of their head, muzzle and throat. Shorter nosed dogs include English Bulldogs, French Bulldogs, Pugs, Boston Terriers and many other breeds. The shorter than average nose and face in proportion to their body size can cause problems for these breeds at times. Owners with brachycephalic breeds must pay extra attention to their animals during exercise, heat and while obtaining veterinary care.

Overview

The purpose of this form is to inform you of the risks associated with anesthesia/sedation and occasionally hospitalization, which are inherent for dogs with shorter noses (brachycephalic). Not all of these problems may apply to your dog, but these are part of the brachycephalic syndrome. Please discuss any specific concerns with your attending veterinarian.

Respiratory problems

Brachycephalic dogs have a shortened skull, resulting in a compressed nasal passage and abnormal throat anatomy. The abnormal upper airway anatomy causes increased negative pressure while taking a breath, leading to inflammation, deformation of throat tissues, and obstruction of breathing. We encourage corrective surgery in moderate to severely affected dogs.

Cooling problems

As dogs cool by pariting, dogs with narrowed airways may have difficulty cooling themselves. This may be made worse by anxiety or stress.

Stomach and intestinal problems

Brachycephalic dogs may swallow a lot of air which can lead to increased vomiting or regurgitation, and this could lead to pneumonia. If possible, we pre-treat brachycephalic dogs with medications to reduce stomach acids, and to promote stomach emptying.

Restraint challenges

Due to their airway, and in some bulldogs, their intrinsic personality as "tough" dogs, it may be difficult to restrain them safely. This is a particularly significant problem with more aggressive dogs. We

occasionally need to sedate them, or ask family members to help with some routine procedures to avoid unnecessary stress on the patient.

Sedation and anesthesia

While sedation and anesthesia are commonly performed in brachycephalic breeds, especially buildogs, recovery from anesthesia may be more difficult for these patients due to a narrowed airway. We have our anesthesia team very closely involved in sedation and anesthesia of brachycephalic breeds especially buildogs. They have found that careful monitoring is essential to a good outcome. In fact, many dog owners travel some distance in order to ensure that a Tufts board-certified anesthesiologist is present during anesthesia or sedation to minimize the risk of complications.

We consider brachycephalic dogs a high risk population. Please be sure you talk with your doctor about the following:

- 1. Any medical and/or surgical treatment alternatives for your pet
- 2. Sufficient details of this consent form and how they apply to your dog
- 3. How fully your pet might respond or recover and how long it could take
- 4. The most common complications and how serious they might be

I grant permission for my pet to undergo general anesthesia/sedation/hospitalization at Tufts Foster Hospital for Small Animals at the Cummings School of Veterinary Medicine.

I am aware that my pet has physical characteristics that make anesthesia and sedation more challenging and possibly more risky than for the average dog with a longer nose.

I am aware that brachycephalic breeds, such as the English and French bulldog, Boston Terrier, Pug, and Pekingese have a shortened skull, resulting in a compressed nasal passage and abnormal throat anatomy. The abnormal upper airway anatomy causes increased negative pressure while taking a breath, leading to inflammation, deformation of throat tissues, and obstruction of breathing.

I am aware that if my brachycephalic pet undergoes sedation or general anesthesia the potential complications include partial or complete airway obstruction during recovery and regurgitation/vomiting which could lead to aspiration pneumonia/respiratory distress. With airway surgery, death has been reported as a rare complication in <3% of cases.

I am aware that anesthetizing or sedating a brachycephalic animal for any reason can lead to the development of significant complications as described in this document.

Please answer YES or NO to the following questions:

My pet has demonstrated difficulty breathing, exercise intolerance, and/or collapse episodes.

YES	□NO	
the second secon	monstrated difficulty eating, such as gagging, vomiting, and regurgitation.	
■ YES	NO	
My pet is rece	iving or has recently received a non-steroidal anti-inflammatory drug (e.g., Rima NO	łyi)
Your signature	indicates that you have read and understand the above information and give you	
consent for tre		
Owner signatu	B6	
Date: 2/1/201	9	

Cardiology Liaison: 508-887-4696

Patient

Foster Hospital for Small Animals 56 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://vetmed.tufts.edu/

Discharge Instructions

Name: B6	Name: B6	Patient ID: B6
	Address B6	Name of the control of the distriction of the distr
Brown/White Male (Neutered) English	<u> </u>	
Building		
Birthdate: B6		
Attending Cardiologist:	The state of the s	
John E. Rush DVM, MS, DACVIM (Car	rdiology), DACVECC	
DC		
B6	9	
Cardioloev Resident:		
B6		
Cardiology Technician:		
B6		
DO		
L		
Veterinary II otritionist : Dr. Lisa Freema		
Student: B6 V19		
Lateral and the control of the contr		
Admit Date: 2/1/2019 10:36:11 AM		
Discharge Date: 2/1/2019		

Diagnoses: Arrhythmogenic right ventricular cardiomyopathy (ARVC) with marked right heart enlargement, ventricular premature depolarizations, and left ventricular dysfunction; possible component of diet-related cardiomyopathy

Clinical findings: 86 has been diagnosed with a primary heart muscle disease called arrhythmogenic right ventricular cardiomyopathy (ARVC). This disease is common in buildogs and is characterized by replacement of the normal heart muscle by fat and/or scartissue which may result in serious ventricular arrhythmias (abnormal heart rhythms originating from the lower chamber of the heart), cardiac enlargement and congestive heart failure, or both. Dogs with ARVC may experience syncope (fainting) or sudden death as the result of ventricular arrhythmia. Though we cannot reverse the changes in the heart muscle, we can control the heart disease with medical management.

The following diagnostic test results were obtained today:

ECG findings: The ECG shows a number of premature ventricular contractions (VPCS) orginating from the right ventricle.

Echocardiogram findings: The right ventricle is moderate to markedly enlarged. The left ventricle is mildly dilated with the left ventricular free wall thinned. There is reduced vigor of contraction of the left ventricle. The left atrium is mildly to oderately enlarged. There is some mitral and triouspid valve regungitation. The hepatic veins are markedly distended.

Monitoring at house: Please monitor for any signs of lethargy, weakness, palegums, cough, shortness of breath, inappetence, or collapse. If a collapsing episode is noted, please check your dog's gum color and try to get a sense of whether the heart rate is slow or fast. If you have an iPhone or Android smartphone device, you may want to explore the

option of purchasing the Kardia Mobile device which will allow you to monitor the heart rate and rhythm at home (<u>www.aliveor.com</u>). If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.

B6 may also benefit from wearing a Holter EKG, which is a harnessed EKG that he would wear for 24 hours. We can place that here, and send him home for the 24 hours duration. He would then return here the next day where we can remove the Holter and analyze his heart rythmn to fully assess his arrhythmia. Call if you decide to do this test.

Recommended Medications

B6

Diet suggestions: Dogs with ARVC may benefit from the addition of omega-3 fatty acids (fish oil) to the diet. Diets such as the Royal Canin Boxer or Early Cardiac diet, or Hill's j/d have ample fish oil and may not require much (or any) additional supplementation. Additional information on supplements such as fish oil or other supplements that you might have questions about may be found on the Tufts HeartSmart web site: (http://vet.tufts.edu/heartsmart/diet/).

- O The FDA is currently investigating an apparent association between diet and a type of heart disease called dilated cardiomyopathy. The exact cause is still unclear, but it appears to be associated with boutique diets and those containing exotic ingredient or are grain-free. Therefore, we are currently recommending that dogs do not eat these types of diets.
- We recommend switching B6 to commercial diet made by a well-established company that is not grain-free and does not contain any exotic ingredients, such as langaroo, duck, lamb, venison, lentils, peas, beans, buffalo, tapioca, barley, and chickpeas.
- O The FDA issued a statement regarding this issue (https://www.lda.gov/AnimalVeterinary/NewsEvents/CVMUpdates/uom613385.html) and a recent article published by Dr. Lisa Fræman on the Cummings School's Petfoodology blog can further explain these findings (http://wetnutrition.tufts.edu/2018/06/a-broken-heart-risk-of-heart-disease-in-boutique-or-grain-free-diets-and-exotic-ingredients/).
- Our nutritionists have compiled a list of dog foods that are good options for dogs with heart disease.

Dry Food Options:

Royal Canin Early Cardiac (veterinary diet)

Royal Canin Boxer

Purina Pro Plan Adult Weight Management

Purina Pro Plan Bright Mind Adult Small Breed Formula

Canned Food Options:

Hill's Science Diet Adult Beef and Barley Entree

Hill's Science Diet Adult 1-6 Healthy Cuisine Roasted Chicken, Carrot, and Spinach Stew

Royal Canin Mature 8+

We recommend slowly introducing one of the diets on the above list as follows: 25% of the new diet mixed with 75% old diet for 2-3 days, then 50:50, etc.

Hopefully you can find a diet on the list that B6 will enjoy!

If your dog has special nutritional needs or requires a homecooked diet, we recommend you schedule an appointment with our nutritionists (508-887-4696).

Exercise recommendations: Generally we recommend limited activity for dogs with heart disease - Leash walk only is ideal. Repetitive or strenuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are not recommended as these activities may result in worsened arrhythmia or even sudden death.

Recheck visits: We would like to recheck B6 in 3 months, at which point we can discuss additional medications and

treatments as needed (such as antia purchase the AliveCor and send us a	The second secon		mmend recheck ECGs every 3 months, or you can
Thank you for entrusting us with cardiovet@tults.edu for scheduling			Cardiology liaison at (508)-887-4696 or email us at r concerns.
Please visit our HeartSmart website	for more inform	ation	
Please visit our HeartSmart website	for more inform	ation	
http://vei.tufis.edu/heartsmart/			
Prescription Refit Discloiner:	V 45 T-1		
For the safety and well-being of our p year in order to obtain prescription me		must have had a	n examination by one of our veterinarians within the post
Ordering Food:			
	A best August and August and August and August and August and August and August August and August Au		led det(s). If you wish to purchase your food from us,
please call 7-10 days in advance (508 online retailers with a prescription/vet	The second secon	ure the food is in	a stock. Alternatively, veterinary diets can be ordered from
Clinical Trials:			
Clinical triols are studies in which our promising new test or treatment. Plea			nd your pet to investigate a specific disease process or a wmc/clinical-studies
Case B6	Owner.	B6	Discharge Instructions
	Tarres		

Cardiology Liaison: 508-887-4696

Prior ATE? N

B6

Patient Dt B6 B6 Years Old Male (Neutered) English Bulldog Brown/White

Cardiology Appointment Report Enrolled in DCM Study

Date: 2/1/2019		
Attending Cardiologist:		
John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC		
B6		
Cardiology Resident:		
B6	i	
Cardiology Technician:		
B6		
Student: B6 V19		
Presenting Complaint: Here for possible entry to DCM study. Half-sister	В6	came in last
month for CHF. B6 had high proBNP on bloodwork B6.		
Concurrent Diseases: B6		
General Medical History:		
Principal princi	ys seen a	t Tufts.
Sedentary lifestyle, but healthy. Half-sister B6 here last month concerns for DCM. Fasted today.	h in CHF,	which is what started
Had reason for concern of DCM based on diet and sister, came in based on	NTproBN	P leveL
<u>Diet and Supplements</u> : Grain free diet-Wellness Core. Chicken and Turkey wet food 4oz BID. Fish d	and the same	/A man DID
C4540 1099 1184 - 40540 655 C1855 C1856 C18860 288 100 857 WELL 1180 WILLIAM		4 cup bill
No supplements or treats.	ry IONA 1,	
LENGTH CONTROL OF THE CONTROL OF THE STATE O	ry touc 1,	
No supplements or treats.	ry total 1	

20-30 at rest . Cough? N Shortness of breath or difficulty breathing? Syncope or collapse? N Sudden onset lameness? N Exercise into lerance? N- Normally low energ	BY
B6	
Cardiac Physical Examination:	
	B6
Muscle condition:	
Mormal	Moderate cachesia
Mild muscle loss	Marked cacheda
Cardiovascular Physical Exam:	
Murmur Grade:	
None	□ rv/vı
□ I/M	□ v/vi
□ i/vi	□ v _V /v _I
□ III/VI	
Murmur location/description:	
Jugular vein:	
Bottom 1/3 of the neck	1/2 way up the neck
☐ Middle 1/3 of the neck	Top 2/3 of the neck
Arterial pulses:	
Weak - obese and difficult to palpate	Bounding
Fair Fair	Pulse delicits
Good	Pulsus paradioxus
Strong	Other:
Arrhythmia:	
None	Bradycardia
Sinus arrhythmia Premature beats infrequent	Tachycardia Tachycardia
Gallop:	
Yes	Pronounced
- 10	(a-1) - 4 / Al /

No Intermittent	Other:
Pulmonary assessments: Eupneic Mild dyspnea Marked dyspnea Normal BV sounds	Pulmonary crackles Wheezes Upper airway stridor
Abdominal exam: Normal Hepatomegaly Abdominal distension mostly adipose tissue?	Mild ascites Marked ascites
Problems: Related dog with DCM Has a high NT-proBNP	
Differential Diagnoses: DCM vs other	
Diagnostic plan: Echocardiogram Chemistry profile ECG Renal profile Blood pressure	☐ Dialysis profile ☐ Thoracic radiographs ☑ NT-proBNP ☑ Troponin I ☑ Other tests: Study bloodwork
Echocardiogram Findings:	
	B6

Assessment and recommendations:

Findings are consistent with ARVC with concurrent LV dysfunction which is either related to ARVC or could have a component of diet-related cardiomyopathy. There was not enough arrhythmia seen today to clearly trigger antiarrhythmic therapy, but a 24 hour Holter monitor could be performed for a better assessment of arrhythmia burden, or Alivecor tracings could be evaluated serially. Recommend starting B6 Smg PO BID. Recommend switching the diet. Dog was enrolled in the DCM study, and troponin, NTproBNP, taurine levels, CBC/Chem were submitted via the study. Recheck echo, ECG, and blood work in

3, 6, and 9 months for the study. Discussed pros and cons of starting antiarrhythmic treatment today, or ACEi - owner leaning toward fewer drugs at this stage.

_	-	Street Section
1000	Diag	PACKET !

ARVC with LV dysfunction (possible component of diet associated cardiomyopathy)

Heart Failure Classification Score:		
ISACHC Classification:		
□ la	Illa Illa	
₩ lb	Шив	
ACVIM Classification:		
□ A	□ c	
■ B1	□ D	
₩ B2		
M-Mode		
IVSd		cm
LVIDd		cm
LVPWd		cm
IVSs		cm
LVIDs		cm
LVPWs	10 10	cm
EDV(Teich)		ml
ESV(Teich)		ml
EF(Teich)	B6	%
%FS		%
SV(Teich)		ml
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA		cm
TAPSE		cm
M-Mode Normalized	the construction (and proceedings of the construction of the const	
IVSdN		(0.290 - 0.520) !
LVIDdN	1	(1.350 - 1.730)
LVPWdN		(0.330 - 0.530)
IVSsN	B6	(0.430 - 0.710)
LVIDsN	50	(0.790 - 1.140)
LVPWsN		(0.530 - 0.780) !
Ao Diam N		! (088.0 - 086.0)
LA Diam N		(0.640 - 0.900) !

SALA cm Ao Diam cm SALA / Ao Diam IVSd cm LVIDd cm LVPWd cm EDV(Teich) mi **IVSs** cm LVIDS cm LVPWs cm ESV(Teich) mi EF(Teich) % %FS % SV(Teich) ml LV Major cm LV Minor cm **B6** Sphericity Index **LVLd LAX** cm LVAd LAX cm LVEDV A-LIAX ml **LVEDV MOD LAX** mi **LVLs LAX** cm LVAS LAX cm **LVESV A-L LAX** mi **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 MV E Vel m/s **MV DecT** ms MV Dec Slope m/s MV A Vel m/s MV E/A Ratio E m/s **B6** E/E' A' m/s 5 m/s **AV Vmax** m/s AV maxPG mmHg **PV Vmax** m/s mmHg PV maxPG TR Vmax m/s



Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951 http://wetmed.tufts.edu/

B6	Male (Neutered)
Canine Er	glish Bulklog
Brown/W	hite
B6	

2/12/2019

Dear B6			
Thank you for referring	B6	with their pet	В6

If you have any questions, or concerns, please contact us at 508-887-4988.

Thank you,

John Rush DVM, DACVIM (Cardiology), DACVECC