

ENRICHING PET LIFE THROUGH DIAGNOSTIC TESTING world-wide personal mail-in diagnostic lab for vets and pets



HEMOLIFE (Diagnostic Division of HEMOPET)

11561 Salinaz Avenue, Garden Grove, CA 92843 Tel: 714-891-2022; Fax: 714-891-2123 www.hemopet.org www.nutriscan.org E-Mail: info@hemopet.org

Status: Notes:	FINAL REPOR		ealthy and robust.		
Diet:	Homemade Ra	w			
Accession No HML	o. Doctor	Owner	Pet Name	R	eceived
Species	Breed	Sex	Pet Age	R	eported
Canine		MN	6 Yrs 93 lbs		
Test Reques	sted	Result	Case Specific	General Range	Units
T4		1.34	1.20 - 3.00	0.80 - 3.80	ug/dL
Free T4		↓ 0.66 +/-	0.70 - 1.80	0.55 - 2.32	ng/dL
T4/FT4 Ratio)	2.03 See below		1.25 - 1.75	
Т3		63.3	30 - 70	30.0 - 70.0	ng/dL
Free T3		2.20	1.6 - 3.5	1.60 - 3.50	pg/mL
Thyroglobul (TgAA) Parvo/Dister (ELISA)	in Autoantibody nper Titer	< 1 Negative VG/VG (Very Good Level, Good Level); see		< 10	%

Dear **Example 1**: **The second** fT4 is borderline here. As he is not currently displaying symptoms, supplementation is not indicated but recommend recheck levels in 6 months. --Andrew Zuckerman DVM

*T4/FT4 Ratios **at or below 1.25** generally, but not always, signify the presence of non-thyroidal illness (NTI), or, hypothyroidism + NTI. High T4/FT4 Ratios usually are not clinically relevant except in thyroxine overdose or thyroid-secreting tumors.

TGAA CONFIRMATORY TEST RANGES < 10% =Negative; 10%-25% =Equivocal;>25%= Positive

If positive (elevated), the TGAA level confirms autoimmune thyroiditis. False positive results can occur if the dog has been vaccinated for rabies within 30 to 40 days. Thyroid hormone supplementation can decrease TGAA levels. Performed using the preferred Non-Specific Binding (NSB) Method.

PARVOVIRUS VACCINE TITER (ELISA)

Parvovirus (IgG) Greater than 1:80

VERY GOOD LEVEL TITER



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Status: FINAL REPORT Notes: Follow up behavior seems altered, Diet: Homemade Raw								
Accession No	o. Doctor	Owner	Pet Name	Receive	d			
HML								
Species	Breed	Sex	Pet Age	Reported	d			
Canine		MN	6 Yrs 3 Months					
			96 lbs					
Test Reques	sted	Result	Case Specific	General Range Units	\$			
T4	ſ	0.96	1.20 - 3.00	0.80 - 3.80 ug/dL	_			
Free T4	ſ	0.56	0.70 - 1.80	0.55 - 2.32 ng/dL	-			
T4/FT4 Ratio)	1.72 See below		1.25 - 1.75				
Т3		58.2	30 - 70	30.0 - 70.0 ng/dL	-			
Free T3		2.10	1.6 - 3.5	1.60 - 3.50 pg/ml	L			

Dear **T4** levels are now too low indicating hypothyroid disease. Recommend Thyro-Tabs or equivalent 0.1 mg per 12-15# BID (e.g. **0.7 mg BID**) followed by retesting thyroid profile in 4-6 weeks. **Dose based on optimum weight.** --Andrew Zuckerman DVM

Optimal therapeutic response levels should be achieved at 4-6 hours post-BID thyroxine. <u>To ensure</u> optimal absorption and consistent thyroid blood levels, thyroxine is best given by mouth, at least 1 hour before or 3 hours after a meal.

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listean Doords, DVM

HEMOLIFE assays and reports use patented non-RIA technology and interpretations. Thyroid 5TM is a trademark.



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Status: Notes:	FINAL REPOR	FINAL REPORT Recheck thyroid values and advise/previous HML						
Diet: Medication:	Homemade Ra 4, Thyro-Tabs,							
Accession No HML	o. Doctor	Owner	Pet Name	Received				
Species	Breed	Sex	Pet Age	Reported				
Canine		MN	6 Yrs 6 Months 95 lbs					
Test Reques	ted	Result	Case Specific	General Range Units				
Τ4		1.91	1.25 - 3.50	0.80 - 3.80 ug/dL				
Free T4		1.39	0.75 - 1.85	0.55 - 2.32 ng/dL				
T4/FT4 Ratio)	1.37 See below		1.25 - 1.75				
Т3		64.4	30 - 70	30.0 - 70.0 ng/dL				
Free T3		2.30	1.6 - 3.5	1.60 - 3.50 pg/mL				

Dear thyroid levels are good at current dose of supplement. Recommend annual retesting. --Andrew Zuckerman DVM

Optimal therapeutic response levels should be achieved at 4-6 hours post-BID thyroxine. <u>To ensure</u> optimal absorption and consistent thyroid blood levels, thyroxine is best given by mouth, at least 1 hour before or 3 hours after a meal.

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