From:	Related PFR Event <pfrsignificantactivitycreation@fda.hhs.gov></pfrsignificantactivitycreation@fda.hhs.gov>
То:	Rotstein, David; Cleary, Michael *; HQ Pet Food Report Notification; B6
Sent:	6/11/2019 6:08:45 PM
Subject:	Taste of the Wild Sierra Mountain dry: Lisa Freeman - EON-390197
Attachments:	2068089-report.pdf; 2068089-attachments.zip

A PFR Report has been received and Related PFR Event [EON-390197] has been created in the EON System.

A "PDF" report by name "2068089-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 "2068089-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-390197

ICSR #: 2068089

EON Title: Related PFR Event created for Taste of the Wild Sierra Mountain dry; 2068089

AE Date	01/02/2019	Number Fed/Exposed	7
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Retriever - Golden		
Age	3 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2068089

Product Group: Pet Food

Product Name: Taste of the Wild Sierra Mountain dry

Description: Eating Taste of the Wild Sierra Mountain since June 2018 (Acana Heritage Poultry before that). This diet was fed to multiple dogs - have not screened other dogs yet so unknown whether they are also affected. Echo showed reduced contractility and mild left atrial enlargement. BNP and troponin mildly elevated, troponin Taurine WNL B6 Changing to Pro Plan Sensitive Skin/Stomach dry and will recheck in 3 months

Submission Type: Followup

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

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

Number of Animals Treated With Product: 7 Number of Animals Reacted With Product: 1

Product Name	Lot Number or ID	Best By Date
Taste of the Wild Sierra Mountain dry		

This report is linked to:

Initial EON Event Key: EON-376361

Initial ICSR: 2061171

Sender information

Lisa Freeman 200 Westboro Rd North Grafton, MA 01536 USA

Owner information

B6 Us

To view this Related PFR Event, please click the link below: https://eon.fda.gov/eon//browse/EON-390197

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

 $\underline{https://eon.fda.gov/eon//EventCustomDetailsAction!viewReport.jspa?decorator=none\&e=0\&issueType=10100\&issueId=407469\&parentIssueTypeId=12$

This email and attached document are being provided to you in your capacity as a Commissioned Official with the U.S. Department of Health and Human Services as authorized by law. You are being provided with this information pursuant to your signed Acceptance of Commission.

This email message is intended for the exclusive use of the recipient(s) named above. It may contain information that is protected, privileged, or confidential. Any dissemination, distribution, or copying is strictly prohibited.

The information is provided as part of the Federal-State Integration initiative. As a Commissioned Official and state government official, you are reminded of your obligation to protect non-public information, including trade secret and confidential commercial information that you receive from the U.S. Food and Drug Administration from further disclosure. The information in the report is intended for situational awareness and should not be shared or acted upon independently. Any and all actions regarding this information should be coordinated

through your local district FDA office.

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

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Report Details - EON-	390197		
ICSR:	2068089		
Type Of Submission:	Followup	10000000000000000000000000000000000000	
Report Version:	FPSR.FDA.PETF.V.V1	a anto a métria a mo a minto a a mora la mora a more è a mora a mote e	
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:) 		
Initial Report Date:	01/14/2019		
Parent ICSR:	2061171		
	Yes		
Follow-up Report to FDA Request:			
Reported Problem:	Problem Description:	Poultry before that). dogs yet so unknown contractility and mild troponin B6 Tau /Stomach dry and wi	Wild Sierra Mountain since June 2018 (Acana Heritage This diet was fed to multiple dogs - have not screened other in whether they are also affected. Echo showed reduced left atrial enlargement. BNP and troponin mildly elevated, urine WNL B6 Changing to Pro Plan Sensitive Skin Il recheck in 3 months
	Date Problem Started:		
	Concurrent Medical Problem:	No	
	Outcome to Date:	Stable	
Product Information:	Product Name:	Taste of the Wild Sie	erra Mountain dry
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:	BAG	
	Product Use Information:	Description:	See diet history for more details. TOTW fed June, 2018 to present; Acana Heritage Free Run Poultry before that
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
	iiioiiiauoii.	7.000.000.000.000	
Animal Information:	Name:	B6	
	Type Of Species:	<u> </u>	
	Type Of Breed: Gender:	Retriever - Golden Female	
	Reproductive Status:	1	
	Pregnancy Status:	<u> </u>	
	Lactation Status:	<u>-</u>	
	2.	30.4 Kilogram	
	()	3 Years	
	Assessment of Prior		
	Health:	Excellent	
	Number of Animals Given the Product:	7	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: Phone: Email: B6

		Address:	B6 United States
	Healthcare Professional	Practice Name:	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
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Additional Documents:			
	Attachment:	Follow-up medical re	ecords pt 2 pdf.pdf
		Med records	
	Type:	Medical Records	
	Attachment:	Follow-up medical re	ecords pt 1.pdf
		Med records	
	Type:	Medical Records	

Cardiology Liaison: 508-887-4696

Date: 5/3/2019

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	1		
Patient ID:	B6		
	descentarion of		
B6 Can			
B6	Female	Golden	Retriever
Cream			

Cardiology Appointment Report DCM STUDY

I, MS, DAC	VIM (Cardiology	v). DACVECC		
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	B6			
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sh	1			
		B6 B6	B6	B6 B6

<u>Presenting Complaint</u>: DCM study recheck; o reports doing well at home, good energy, no other concerns.

Concurrent Diseases: None

General Medical History: On 1/2/19 was referred here by rDVM for elevated BNP (B6), rDVM prompted to check b/c of grain-free diet. Echo in January showed mild systolic dysfunction w/mild LAE. Transitioned to new diet. CBC, chem, BNP WNL.

Diet and Supplements:

Purina sensitive stomach

Cardiovascular History:

Prior CHF diagnosis? N
Prior heart murmur? N
Prior ATE? N
Prior arrhythmia? N
Monitoring respiratory rate and effort at home? N
Cough? N

Shortness of breath or difficulty breathing? N Syncope or collapse? N Sudden onset lameness? N Exercise intolerance? N **Current Medications Pertinent to CV System:** Medication: Taurine Formulation/Tab Size: 500mg capsules Administration Frequency: 2 capsules PO BID Need refills? Cardiac Physical Examination: Muscle condition: Mormal Normal Moderate cachexia Mildmuscleloss Marked cathexia Cardiovascular Physical Exam: Murmur Grade: IV/VI None III I/VI ■ v/vi II IVVI ■ VI/VI 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: Week Bounding Fair Pulse delicits Good Pulsus paradoxus **■** Strung Other: **Arrhythmia**: **■** None ☐ Bradycardia Sirus arrhythmia ■ Tachycardia Aremature beats Gallop: Yes Pronounced NO. Other: Intermittent Pulmonary assessments: Eucneic Pulmonary craddes

Mild ascites Marked ascites
Dialysis profile Thoracic radiographs NT-proBNP Troponin I Other tests:
\mathbf{B}_{6}
Pseudonomal Restrictive
6

Stable systolic function compared to previous exams, despite mild increase in LV cavity size (r/o daily variation or interobserver variation). Recommend keeping current supplementation with Taurine and recheck echocardiogram in 3 months or sooner if patient develops clinical signs consistent with worsening heart disease such as increased RR/RE, cough, exercise intolerance, or syncope.

Final Diagnosis:

Mild systolic dysfunction with mild LA enlargement-r/o early stage DCM vs. diet induced systolic dysfunction.

Heart Failure Classification Score: ISACHC Classification: III IIIa la la W Ib II II ACVIM Classification: ■c -A ■ B1 D ■ B2 M-Mode IVSd. CITY LVIDd cm LVPWd cm **IVSs** cm LVIDs cm LVPWs cm EDV(Teich) ml ESV(Teich) ml EF(Teich) % %FS % SV(Teich) ml Max LA cm Time ms HR **BPM** CO(Teich) I/min CI(Teich) l/minm Ao Diam cm **B6** LA Diam cm LA/An TAPSE cm **EPSS** cm M-Mode Normalized (0.290 - 0.520) **IVSdN** LVIDAN (1.350 - 1.730)! LVPWdN (0.330 - 0.530) ! **IVS SN** (0.430 - 0.710) ! (0.790 - 1.140) ! LVIDSN LVPWsN (0.530 - 0.780)2D **IVSd** cm LVIDd CITI LVPWd cm EDV(Teich) ml

IVSs LVIDs LVPWs ESV(Teich) EF(Teich) %FS SV(Teich) LV Major LV Minor Sphericity Index LVLd A4C **LVEDV MOD A4C** LVLs A4C **LVESV MOD A4C LVEF MOD A4C** SV MOD A4C

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

E

A'

B6

cm cm mi % mi cm cm cm mi mi mi

> m/s ms m/s m/s

ml

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

m/s m/s

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Popert Datails FON	200106		
Report Details - EON-			
ICSR:	2068087		
Type Of Submission:	Followup		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	ssociated with the product)
Reporting Type:	Voluntary	D148D1748B1748B1748B1748B1748B1774B17748B1774B1774	
Report Submission Date:	2019-06-11 13:56:24 EDT		
Initial Report Date:	02/24/2019		
Parent ICSR:	2063118		
Follow-up Report to FDA Request:	Yes		
Reported Problem:	Problem Description:	murmur and elevated on exam (see previo breathing so we scre but normal BNP. Cha Salmon and will rech Labrador 5 years old	o 7 dogs. We evaluated her other dog B6 who had a BNP, with reduced contractility and elevated troponin found us report - 2061171). Owner worried about this dog's ened her and found reduced contractility, elevated troponin, anging diet on both dogs to Pro Plan Sensitive Skin/Stomach eck in 3 months Other dogs we have not screened: B6 B6 Golden 3 1/2 years old B6 Golden 3 years old B6 Golden 3 years old
	Date Problem Started:	01/14/2019	
	Concurrent Medical Problem:	No	
	Outcome to Date:	Better/Improved/Red	overing
Product Information:	Product Name:	Taste of the Wild Sie	rra Mountain Dry
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:	BAG	
	Product Use	Description:	Please see diet history for additional information
	Information: Manufacturer	Description:	Please see that history for additional information
	/Distributor Information:		
	Information:		
Animal Information:	Name:	<u> B6</u>	
	Type Of Species:	Dog	
	Type Of Breed:	Retriever - Golden	
	Gender:	Female	
	Reproductive Status:	Neutered	
	Weight:	25.8 Kilogram	
	Age:	5 Years	
	Assessment of Prior Health:	Excellent	
	Number of Animals Given the Product:	7	
	Number of Animals Reacted:	2	
	Owner Information:	Owner Information provided: Contact:	
			Phone: B6
			Email:
		Address:	B6

			B6 United States
	Healthcare Professional	Practice Name:	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
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:	Follow-up medical re	ecords pt 2 pdf
	The state of the s	Med records	
	Type:	Medical Records	
	Attachment:	Follow-up medical re	cords pt 1.pdf
		Med records	
	Type:	Medical Records	

ICSR:	2068089			
Type Of Submission:	Followup			
Report Version:	FPSR.FDA.PETF.V.V1	annaan neemaan maaan loraan naaa lannaan tareesa an tareesa		
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	ssociated with	the product)
Reporting Type:	Voluntary			
Report Submission Date:	2			
Initial Report Date:	01/14/2019			
Parent ICSR:	2061171			
Follow-up Report to FDA Request:	Yes			
Reported Problem:	Problem Description:	Poultry before that). dogs yet so unknowr contractility and mild troponin = B6 Tau /Stomach dry and wi	This diet was fent whether they and left atrial enlargerine WNL !	ntain since June 2018 (Acana Heritage d to multiple dogs - have not screened other are also affected. Echo showed reduced gement. BNP and troponin mildly elevated, B6 Changing to Pro Plan Sensitive Skin nonths
	Date Problem Started: Concurrent Medical	<u> </u>		
	Problem:	JIVU		
	Outcome to Date:	Stable		
Product Information:	Product Name:	Taste of the Wild Sie	rra Mountain dr	у
	Product Type:	Pet Food		
	Lot Number:			
	Package Type:	BAG		
	Product Use Information:	Description:	See diet histor present, Acana	for more details. TOTW fed June, 2018 to Heritage Free Run Poultry before that
	Manufacturer			
	/Distributor Information: Purchase Location Information:			
Animal Information:	24	BA I		
Ammai miormanon.	Name:	B6		
	Type Of Species:	2		
	\$ {	Retriever - Golden		
	Gender:	<u> </u>		
	Reproductive Status:	1		
	Pregnancy Status: Lactation Status:	\$		
		· · · · · · · · · · · · · · · · · · ·		
	·	30.4 Kilogram 3 Years		
	Assessment of Prior	<u> </u>	intrantilitaan taaniaalintaan taaniaan taaniaa	
	Health:	LACCHETT		
	Number of Animals Given the Product:	7		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	Yes	
		Contact:	Name:	
	1			B6
			Phone:	

		Address:	B6	
			United States	
	Healthcare Professional	Practice Name:	Tufts Cummings	School of Veterinary Medicine
	Information:	Contact:	Name: L	isa Freeman
			Phone: (508) 887-4523
			Email: li	sa.freeman@tufts.edu
		Address:	200 Westboro R North Grafton Massachusetts 01536 United States	d
Sender Information:	Name:	Lisa Freeman		
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	Contact:	Phone:	5088874523	
		Email:	lisa.freeman@tu	fts.edu
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Additional Documents:				
	Attachment:	Follow-up medical re	ecords pt 2 pdf.pd	f
		Med records		
	Type:	Medical Records		
	Attachment:	Follow-up medical re	ecords pt 1.pdf	
		Med records		
	Type:	Medical Records		

From: Freeman, Lisa <Lisa.Freeman@tufts.edu>

To: Jones, Jennifer L
Sent: 2/24/2019 11:19:19 PM

Subject: B6

Attachments: rpt_medical_record_preview.pdf

Hi Jen

Sorry – only attached the dog's previous visit, not the current one. Here's the full record.

This is a housemate of a previously reported dog.

Thanks

Lisa

Lisa M. Freeman, DVM, PhD, DACVN
Board Certified Veterinary NutritionistTM
Professor
Cummings School of Veterinary Medicine
Friedman School of Nutrition Science and Policy
Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org

AT TUFTS UNIVERSITY

Client: Address

B6

Home Phone: Work Phone: Cell Phone:

Foster Hospital for Small Animals

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

All Medical Records

B6 Patient:

Breed: Labrador Retriever **B6** DOB:

Species: Canine Female (Spayed)

Referring Information

B6

Client: **B6** Patient

Initial Complaint:

Emergency

SOAP Text **B6** 1:23PM -

B6 12:13 PM NEW VISIT (ER)

Doctor: **B6** Presenting complaint **B6**

Diagnostics completed prior to visit: Recent blood work at rDVM per owner, normal results before dental cleaning

B6

B6

HISTORY:

Signalment: 3 yo FS Labrador retriever

Current history:

Current medications: None

Prior medical history:

Diet: Acana, whole earth

Vaccination status/flea & tick preventative use: Ivermectin, Advantix II

B6

Page 1/20

Client: B6
C/V: no murmurs or arrhythmias ausculted, femoral pulses strong and synchronous
B6
ASSESSMENT: A1 B6
PLAN: 1) 2) 3) 4) B6
B6
SOAP approved (DVM to sign) B6 MD
B6 1:25:46 PM Prescribed
Initial Complaint: Cardiology DCM study
SOAP Text Jan 16 2019 3:09PM - Rush, John
Subjective
Objective
Assessment

Page 2/20

Plan

Disposition/Recommendations

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Veterinary Medical Center

AT TUFTS UNIVERSITY

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:	Canîne	
Breed:	Labrador Retriever	
Sex:	Female (Spayed)	
Age:	B6 Years Old	

		Accession ID:
Test	Results	Reference Range Units
- 5	4/20	B6
stringsoft		Printed Sunday, February 24, 2019
Vitals Results		

Patient History

12:14 PM	UserForm
12:15 PM	UserForm
12:21 PM	Vitals
12:21 PM	Vitals
B6 12:21 PM	Vitals
DU 12:21 PM	Vitals
12:21 PM	Vitals
51:37 PM	Prescription
51:44 PM	UserForm
01:48 PM	Purchase

B6

Page 4/20

	,	
Client:	DC	ι
Patient:	DU	
	L/	

Patient History

02:06 AM	Vitals	
02:06 AM	Vitals	
D C 11:40 AM	Email	
B6 11:40 AM 01:27 PM	Appointment	B 6
01:30 PM	UserForm	
02:03 PM	Treatment	
03:14 PM	UserForm	
<u>i</u>		
		L



B6

B6
Fernale (Spayer)
Canine Labrador Retriever Yellow
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 Tults 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.

I understand 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 adknowledge 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 (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 Tufts 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) nowlmown 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, Lauthorize 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	В6	Date	В6	
Owner's address:		В6		
Owner's Name Sig	nature			Date
	If the individu			al is someone other than the legal owner, ethe portion below:
The owner of the a to pay the vetering above	Taratal annual and			eauthority to obtain medical treatment and to bind this own ings School pursuant to the terms and conditions described
Authorized Agent	- Please Print		-	Agent's Signature
Street Address			-	Date
Town/City	State	Zip	_	

B6
Fermale (Spayer)
Canine Labrador Retriever Yellow
Patient ID B6

STANDARD CONSENT FORM

(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 Tults 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.

I understand 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 advisowledge 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 (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 Tufts 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) nowlenown 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.

Owner's name B6	Date B6	
Owner's address:	B6	P(0) 2 11 (10) 2 11 (10) 2 11 (10) 2
В	6	B6
Owner's Name Signature		Date

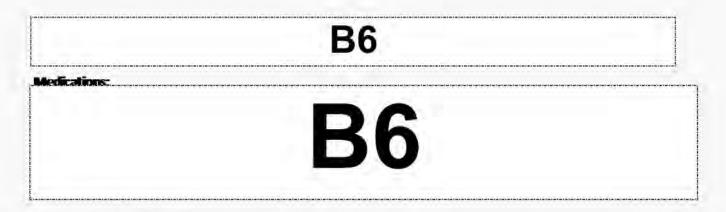
If the individual admitting the arimal is someone other than the legal owner, please complete the portion below:

The owner of the animal, to pay the veterinary medica above	B6 I services p		ted me authority to obtain medical treatment and to bind this o Cummings School pursuant to the terms and conditions describe	
Authorized Agent - Please Pr	rt		Agent's Signature	
Street Address			Date	
Town/City State	e	Zip		

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

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

(Spayed) Labrador Retrieves B6 ncy Clinician: B6 Privisor: B6 Discharge Instruction Date: B6 Labrador Retrieves B6 VMD Discharge Instruction Date: B6 B6 B6 B6	ictions	
B6 ventoristant: B6 ventoristant: B6 Discharge Instruction Date: B6 12:13:36 PM Out Date: B6		
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Care Instructions:		



Prescription Refill Discloimer:

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

Ordering Food:

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

Clinical Trials:

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

(p(m)protectorers)+	D.C	
Case D.C	Owner B6	Discharge Instructions
COSC IND		Decimies and occurs

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

Discharge Instructions

Patient	Owner	
Marne B6	Mane B6	Patient Dr. B6
Species: Canine	Later Proposition and Company of the	To propriet the contract of th
Yellow Female (Spayed) Latiradur	Adoress: B6	
Retriever	Anterior de la companya del companya de la companya del companya de la companya d	
Birthdate: B6		
Attending Cardiologist: John E. Rush DVM. MS. DACV	M.(Cardioloev). DACVECC	
Cardiology Resident:		
	B6	
Cardiology Technicism:		
B6		
Student: B6 V19		
Admit Date: 1/16/2019 1:29:08 PM Discharge Date: 1/16/2019		
	o screen her for heart disease related to be sical exam, she had no heart murmur. She	
beats (arrhythmia - ventricular premat was also slightly enlarged. These chang	ver heart was not contracting with normal ture depolarizations). Her left atrium was a ges could perhaps be a variation of normal pecause of the premature heartbeats (arrh	iso slightly enlarged, and her right heart in athleticologs, but we think it is more
blood tests and will contact you with the and wewould like to start taurine supplementation. Either way, it's very you are currently feeding. 86 does	DCM study looking at heart disease associa he results when available. The taurine leve elementation in the interim. If the taurine important to change her diet, and we wou not require any other heart medications at oBNP or an elevated troponin), we will wa langed.	is will take up to 2-3 weeks to come back level comes back low, we'll give taurine ld have you continue with the Purina diet t this time, however if she does qualify for
If her NT-rmBNP and trononin are me	mal then she does not qualify for the sturb	hit wewnidremment arenet edu

in 8 to 10 months, because of the changes we saw today with the heart and the premature heart beats.

Medications and supplements:

None at this time.
Monitoring at Home:
B6 does not appear to have any significant heart disease at this time. However, please monitor for any weakness or
collapse, exercise intolerance, cough or distension of the belly. If you notice any abnormalities we would like to see her fi
retherk earn.
Diet Suppestions:
Please continue the Purina diet that B6 is now eating.
Recheck Visits and Follow Up: The taurine levels will take 2-3 weeks so we'll let you know when we get these back. If sh
does qualify for the study (based on an elevated NT-proBNP or an elevated troponin), we will want to follow up with
another echo in 3 months and in 6 months. If she does not qualify then a recheck cardiac exam is recommended in 8 to 1
months.
Thank you for entrusting us with B6 care - she is a sweet, beautiful girl and we loved meeting her today!
Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and
non-emergent questions or concerns.
Plesse visit our HeartSmart website for more information
http://wet.tufis.edu/heartsmart/
Prescriptivo 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 pa
year in order to obtain prescription medications.
Ordering Food:Please check with your primary veterinarion 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 ca
be ordered from online retailers with a prescription/veterinary approval.
Clinical Trials:
Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a
promising new test or treatment. Please see our website: vet.tufbs.edu/cvmc/clinical-studies

AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient © B6

Canine
B6 ars Old Female (Spayed) Labrador Retriever
Yellow

Cardiology Appointment Report ENROLLED IN DCM STUDY

B6	
illent	
B6	
	BOOK STREET STRE
B6	

Presenting Complaint:

Possible exercise intolerance, eats grain free food

Exercise intolerance start at about one year - breathes loudly, more hard, will sometimes lay down; same all year, been at a stable state since noticing at one year old

	-
Concurrent Disease	B6

General Medical History:

Overall good at home, good appetite, no coughing

Diet and Supplements:

Taste of the wild, has had Acana in the past On purina pro plan switched about 1 week ago

Cardiovascular History:

Prior CHF diagnosis? no
Prior heart murmur? no
Prior ATE? no
Prior arrhythmia? no
Monitoring respiratory rate and effort at home? no
Cough? no

Shortness of breath or difficulty breathing? yes but since a puppy

Syncope or collapse? no Sudden onset lameness? no Exercise intolerance? yes but since dog is a puppy

Current Medications Pertinent to CV Syst	tem
--	-----

None

Cardiac Physical Examination:		
B6		
Murmur location/description: None heard Jugular vein:		
Bottom 1/3 of the neck Middle 1/3 of the neck	1/2 way up the neck Top 2/3 of the neck	
Arterial pulses: Weak Fair Good Strong	Bounding Pulse deficits Pulsus paradoxus Other:	
Arrhythmia: None Sinus arrhythmia Premature beats	Bradycardia Tachycardia	
Gallop: Yes No Intermittent	Pronounced Other:	
Pulmonary assessments: Eupneic Mild dyspnea Marked dyspnea Normal BV sounds	Pulmonary crackles Wheezes Upper airway strider	
Abdominal exam:		

Hepatomegaly Abdominal distension	Mild ascites Marked ascites
Problems: Exercise intolerance	
Differential Diagnoses:	
DCM vs pain related (hx TPLO x2) vs	congenital
Diagnostie plan: Echocardiogram Chemistry profile ECG Renal profile Blood pressure	Dialysis profile Thoracic radiographs NT-proBNP Troponin t Other tests:
Echocardiogram Findings:	
	B6
Assessment and recommendations Overall the LV cavity has slightly res	: fuced contractile function and the IA looks to be mildly enlarged.
Overall the LV cavity has slightly res	
Overall the LV cavity has slightly res	fuced contractile function and the IA looks to be mildly enlarged.
Overall the LV cavity has slightly rec Final Diagnosis: Mildly reduced LV contractile function Heart Failure Classification Score: ISACHC Classification:	fuced contractile function and the LA looks to be mildly enlarged. ion R/O diet related vs variation of normal.
Overall the LV cavity has slightly rec Final Diagnosis: Mildly reduced LV contractile functi Heart Failure Classification Score:	fuced contractile function and the IA looks to be mildly enlarged.
Overall the LV cavity has slightly rec Final Diagnosis: Mildly reduced LV contractile funct Heart Failure Classification Score: ISACHC Classification: la lb	fuced contractile function and the LA looks to be mildly enlarged. ion R/O diet related vs variation of normal.
Overall the LV cavity has slightly rec Final Diagnosis: Mildly reduced LV contractile funct Heart Failure Classification Score: ISACHC Classification: la	fuced contractile function and the IA looks to be mildly enlarged. ion R/O diet related vs variation of normal. IIIa IIIb
Overall the LV cavity has slightly rec Final Diagnosis: Mildly reduced LV contractile funct Heart Failure Classification Score: ISACHC Classification: la lb ACVIM Classification:	fuced contractile function and the IA looks to be mildly enlarged. ion R/O diet related vs variation of normal.

M-Mode	denomination on the same	
IVSd		cm
LVIDA		cm
LVPWd		cm
IVSs		cm
LVIDs		cm
LVPWs		cm
EDV(Teich)		ml
ESV(Teich)	B6	ml
EF(Teich)	В	%
%FS		%
SV(Teich)		ml
Ao Diam		cm
LA Diam		cm
LA/Ao		
Max LA		cm
EPSS		cm
M-Mode Normalized	Ammontonical	
IVSdN	[(0.290 - 0.520)
LVIDAN		(1.350 - 1.730)
LVPWdN		(0.330 - 0.530)
IVSeN		(0.430 - 0.710)
LVIDsN	B6	(0.790 - 1.140) !
LVPWsN		(0.530 - 0.780)
Ao Diam N		(0.680 - 0.890)
LA Diam N		(0.640 - 0.900)
District	<u>L</u>	tanta anala
2D		
SALA		cm
Ao Diam	10	cm
SA LA / Ao Diam		
IVSd		cm
LVIDA	10.	cm
LVPWd	11	om
EDV(Teich)		ml
IVSs		cm
LVIDs		cm
LVPWs	DC	cm
ESV(Teich)	B6	ml
EF(Teich)		%
%FS		*
SV(Teich)	CA.	ml
LV Major	100	cm
LV Minor		cm
Sphericity Index		6703
LVId LAX		om
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LVESV MOD LAX		ml
HR		BPM
EF A-L LAX	1 1	%
LVEF MOD LAX	D 0	%
SV A-L LAX	B6	ml
SV MOD LAX		ml
COALIAX		Vmin
CO MOD LAX	1 1	Vmin
R-R		ms
HR		BPM
COALIAX		Vmin.
CO MOD LAX		Vmin
COMODEA		y
Doppler		
MV EVel		m/s
MV DecT		ms
MV Dec Slope		m/s
MV A Vel	1	m/s
MV E/A Ratio		
E		m/s
E/E	B6	
A'	= -	m/s
5		m/s
AV Vmax		m/s
AV maxPG		mmHg
PV Vmax		m/s
	4 1	

PV maxPG

mmHg



B6			
Dear B6			
Thank you for referring	В6	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

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)
Canine Lab	rador Retriever Yellow

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

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

Sent: 2/24/2019 11:24:38 PM

Subject: Taste of the Wild Sierra Mountain Dry: Lisa Freeman - EON-380714

Attachments: 2063118-report.pdf; 2063118-attachments.zip

A PFR Report has been received and PFR Event [EON-380714] has been created in the EON System.

A "PDF" report by name "2063118-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 "2063118-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-380714

ICSR #: 2063118

EON Title: PFR Event created for Taste of the Wild Sierra Mountain Dry; 2063118

AE Date	01/14/2019	Number Fed/Exposed	7
Best By Date		Number Reacted	2
Animal Species	Dog	Outcome to Date	Stable
Breed	Retriever - Golden		
Age	5 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2063118

Product Group: Pet Food

Product Name: Taste of the Wild Sierra Mountain Dry

Description: BEG diet being fed to 7 dogs. We evaluated her other dog, **B6** who had a murmur and elevated BNP, with reduced contractility and elevated troponin found on exam (see previous report - 2061171). Owner worried about this dog's breathing so we screened her and found reduced contractility, elevated troponin, but normal BNP. Changing diet on both dogs to Pro Plan Sensitive Skin/Stomach Salmon and will recheck in 3 months Other dogs we have not screened: Max Labrador 5 years old **B6** Golden 3 1/2 years old **B6** Golden 3 years 5 months **B6** Golden 3 years 9 months

Submission Type: Initial

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

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

Number of Animals Treated With Product: 7 Number of Animals Reacted With Product: 2

Product Name	Lot Number or ID	Best By Date
Taste of the Wild Sierra Mountain Dry		

Sender information

Lisa Freeman 200 Westboro Rd North Grafton, MA 01536 USA

Owner information

B6

USA

To view this PFR Event, please click the link below: https://eon.fda.gov/eon//browse/EON-380714

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=397723

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Failure to adhere to the above provisions could result in removal from the approved distribution list. If you think



Report Details - EON-	380714		
ICSR:	2063118		
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:	2019-02-24 18:16:40 EST		
Reported Problem:	Problem Description:	murmur and elevate on exam (see previor breathing so we scree but normal BNP. Ch. Salmon and will rech. Labrador 5 years old B6 Golden 3 years.	o 7 dogs. We evaluated her other dog B6 who had a d BNP, with reduced contractility and elevated troponin found us report - 2061171). Owner worried about this dog's ened her and found reduced contractility, elevated troponin, anging diet on both dogs to Pro Plan Sensitive Skin/Stomach neck in 3 months Other dogs we have not screened: B6 B6 Golden 3 1/2 years old B6 Golden 3 years old s 5 months B6 Golden 3 years 9 months
	Date Problem Started:	01/14/2019	
	Concurrent Medical Problem:		
	Outcome to Date:	Stable	
Product Information:	Product Name:	Taste of the Wild Sie	erra Mountain Dry
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:	BAG	
	Product Use Information:	Description:	Please see diet history for additional information
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	} -	
	Type Of Breed:	Retriever - Golden	
	Gender:	Female	
	Reproductive Status:	Neutered	
	· · · · · · · · · · · · · · · · · · ·	25.8 Kilogram	
	5 to 100 to	5 Years	
	Assessment of Prior Health:		
	Number of Animals Given the Product:	,	
	Number of Animals Reacted:		ş
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name:
			Phone: B6
		Address:	B6
			United States
	Healthcare Professional	D	Turke Cummings Sahari at Wateria ay Maddina
	TICALLICATE FIVIESSIUITAL	Practice Name:	Tufts Cummings School of Veterinary Medicine

	Information:	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:	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		

Report Details - EON-	376363		
ICSR:	2061172		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom	reaction or disease a	associated with the product)
Reporting Type:	Voluntary		
Report Submission Date:	2019-01-14 17:14:59 EST		
Reported Problem:	Problem Description:	Canin Early Cardiac	veloped DCM and CHF 4/11/18 Owner changed diet to Royal and dog has improved significantly. Will recheck again in 3 often approval for you to contact owner but sent an email today
	Date Problem Started:	04/11/2018	
	Concurrent Medical		
	Problem:	3	
	Outcome to Date:	Better/Improved/Red	overing
Product Information:	Product Name:	Zignature kangaroo	dry
	Product Type:	Pet Food	
	Lot Number:	19 19 19 19 19 19 19	
	Package Type:	BAG	
	Product Use Information:	Description:	See diet history for more details. Zignature Sept 2017-April 2017 Acana Pork/Squash before that
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	В6	
	Type Of Species:	Dog	
	Type Of Breed:	Retriever - Golden	
	Gender:	Female	
	Reproductive Status:	Neutered	
	Weight: 26.3 Kilogram		
	7 *************************************	B6 Years	
	Assessment of Prior Health:		
	Number of Animals Given the Product:		
	Number of Animals Reacted:	[4] 	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name:
			Phone: B6
			Email:
		Address:	
			R6
			United States
	Healthcare Professional	D===4i== Al====	
	Information:	. radiida mama.	Tufts Cummings School of Veterinary Medicine
		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:	Email		
Additional Documents:				
	Attachment:	rpt_medical_record_	preview B6 pdf	
	Description;	Records	Limited	
	Type:	Medical Records		

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

Sent: 10/8/2018 7:28:33 PM

Subject: Pro Plan Savory dry - chicken: Lisa Freeman - EON-367850

Attachments: 2055797-report.pdf; 2055797-attachments.zip

A PFR Report has been received and PFR Event [EON-367850] has been created in the EON System.

A "PDF" report by name "2055797-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 "2055797-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

EON Key: EON-367850

ICSR #: 2055797

EON Title: PFR Event created for Pro Plan Savory dry - chicken beef or lamb (1 cup TID); 2055797

AE Date	B6	Number Fed/Exposed	1
Best By Date		Number Reacted	1
Animal Species	Dog	Outcome to Date	Stable
Breed	Retriever - Labrador		
Age	7 Years		
District Involved	PFR-New England DO		

Product information

Individual Case Safety Report Number: 2055797

Product Group: Pet Food

Product Name: Pro Plan Savory dry - chicken, beef, or lamb (1 cup TID)

Description: Presented to ER o **B6** for CHF and DCM (had rads at RDVM for cough). Full echo on

8/28/18. Unlikely to be associated with diet but reporting because he is sometimes fed the lamb formula Pro Plan.

Taurine WNL

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
Pro Plan Savory dry - chicken, beef, or lamb (1 cup TID)		

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-367850

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=384772

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Report Details - EON-	367850					
ICSR:	2055797					
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:	2018-10-08 15:17:24 EDT					
Reported Problem:	Problem Description:	Presented to ER on Full echo on 8/28/18 is sometimes fed the	. Unlikely to be	associated	with diet	s at RDVM for cough). but reporting because he NL
	Date Problem Started:	B6 J				
	Concurrent Medical Problem:	2				
	Pre Existing Conditions:	B6 .				
	Outcome to Date:	Stable				
Product Information:	Product Name:	Pro Plan Savory dry	- chicken, beef,	or lamb (1	cup TID)
	Product Type:	-		*		·
	Lot Number:	<u> </u>				
	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:	37.7 Kilogram				
	Age:	7 Years				
	Assessment of Prior Health:	Good				
	Number of Animals Given the Product:	1				
	Number of Animals Reacted:	1				
	Owner Information:	Owner Information provided:	Yes			
		Contact:	Name:	В6		
			Phone:	1		
			Email:	E	36	
		Address:				
			B6			
			United States			
	Healthcare Professional	Practice Name:	Tufts Cumming	ıs School o	f Veterin	ary Medicine
	Information:	Contact:	2	Lisa Freer		
			1	(508) 887-		

Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States Contact: Phone: 5088874523 Email: Ilsa.freeman@tufts.edu Permission To Contact Sender: Preferred Method Of Contact: Email
Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States Contact: Phone: 5088874523 Email: lisa.freeman@tufts.edu Permission To Contact Sender: Preferred Method Of Contact: Additional Documents: Attachment: compiled medical records B6 pdf Description: Compiled medical records
North Grafton Massachusetts 01536 United States Contact: Phone: 5088874523 Email: lisa.freeman@tufts.edu Permission To Contact Sender: Preferred Method Of Contact: Preferred Method Of Contact: Additional Documents: Attachment: compiled medical records Description: Compiled medical records
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Additional Documents: Attachment: compiled medical records B6 pdf Description: Compiled medical records
Description: Compiled medical records
Description: Compiled medical records
Type: Medical Records

Cummings Veterinary Medical Center

Foster Hospital for Small Animals

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

10.10		
86	Breed: Labrador Retriever DOB: B6	Species Sex:
ne: B6]		
n		
	В6	
	B6 B6 B6	All Medical Records Patient: B6 Breed: Labrador Retriever DOB: B6 The B6 B6 B6 B6 B6 B6 B6 B7 B6 B6

:54PM - Clinician, Unassigned FHSA

Initial	Com	plaint:
Limora	245 (35)	

B6

Emergency

SOAP Text

NEW VISIT (ER)

Doctor: B6
Presenting complaint: cardiomegaly
Referral visit? yes
Diagnostics completed prior to visit: CXR (on disk), cardiomegaly, B6
HISTORY:
Signalment: 7yo NM lab
Current history: Presented for cardiomegaly diagnosed at rDVM. Developed cough and went to rDVM on Tuesday,
where was put on B6 with presumtive diagnosis of kennel cough (was boarded last week). Better for about a
day. However, last night was coughing a lot and seemed uncomfortable. Restless last night and this morning. Seems to
have increased effort breathing. Productive cough this am. Took to rDVM this am where they took chest rads and saw
cardiogenic pulmonary edema and cardiomegaly. Non-febrile at that time. Was coughing quite a bit previously at
rDVM. No prior c/s/v/d/PU/PD. This past week had decreased appetite and lethargic.
Prior medical history: Hx of kennel cough last year. Was boarded again last week. Other dog doesnt show any signs. Hx
of B6 Takes B6 from June throuhout summer B6
Current medications: B6 Got B6 this morning.
Diet: Purina ProPlan.
Vaccination status/flea & tick preventative use: UTD. Flea/tick and heartworm preventative. Just had heartworm test

Canine Male (Neutered)

Client Patient: B6	
(negative) Travel history: None	
EXAM:	
B6	
C/V: grade IV-V/VI L systolic heart murmur, thready pulse quality, no arrythmia ausculted	
B6	
DU	
ASSESSMENT:	
A1: Heart murmur, cardiomegaly, r/o DCM, CHF A2: B6	
A3: D0	

PLAN:
B6

Diagnostics completed: NOVA

Diagnostics pending: CBC/Chem, cardio consult

Client communication:

Told O that gave B6 Also told them that he had significant heart murmur today. On rads he has enlarged heart and pulmonary edema. Gave B6 o draw fluid out of lungs. On triage US also has decreased contractility. This is seen with DCM, which can be seen with genetics and age. Gave diuretic because heart is being inefficient and have fluid back-up into lungs. Told O that should be admitted to hospital, get recheck rads tomorrow, and likely will need repeat of B6 Needs cardio consult and an echo-likely wont get until Monday. Also may need oxygen supplementation. O asked if common to see acute signs with DCM. Told O that likely had minor progreesive changes culminating in breathing difficulty. O asked if fluid could be related to pneumonia. Told O that unlikely, but also why we do recheck rads (looking to see improvement with B6 if it is CHF). O asked about treatment for DCM. Informed O that will be diuretic to make them urinate out his retained fluid. O asked if will drink more. Told will need free choice water while on diuretic. O asked what other drugs he might be on. Discussed B6 which will help

Client: Patient

B6

with contractility. Also informed O that with DCM are at risk for arrhythmia, which we havent noticed yet but he may need medication for if he develops it. O asked if drugs might shrink his heart. Told it likely won't make a significant difference in heart size. However, may shrink heart enough to relieve any compression on trachea and may help with relieving cough. rDVM was worried that cardiomegaly was contributing to his coughing. Told O that coughing is likely related to pulmonary edema. O asked about prognosis and told them that the goal is 6 months without another episode of failure. Some dogs may live longer than that, but on average they generally come back in failure in 6 months. O asked when they might be able to take him home, told them likely Monday. O was very distressed about 6 month timeline, was very surpirsed and upset. Told O that we frequently have dogs live past the 6 months, but it is hard for us to tell beyond that. Told O that he will need to be on medications and have follow-up with Cardio. O asked if he can go back to his normal acitivty levels. Told O that he will need to have pretty strict exercise restriction and that Cardio will guide them further.

Deposit & estimate status: **B6** Resuscitation code (if admitting to ICU) SOAP approved (DVM to sign): **B6 DVM ECC Resident SOAP Text** 9:40AM **B6 B6** 7 yo MN LRT - Presented B6 for cardiomegally and suspected cardiogenic edema (rDVM rads) Coughing since start of the week, initially received doxy b/c boareded at week; not febrile at rDVM Subjective: - BAR, friendly, lovely dog Objective: **B6** CVS: 3-4/6 systolic left murmur, crt normal, pulses SS, mmbr PM, peripheral limbs warm Assessment: 1. CHF, suspected secondary to DCM ,Plan:..

Client: B6	
B6	
Initial Complaint: New - B6 presumed DCM from ICU	
SOAP Text Aug 28 2018 5:23PM - B6	

Cummings	
Veterinary Medical	and the same of
AT TUFFS UNIVERSITY	03400340

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

Foster Hospital for Small Animals

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

Patient:	B6	
Species:	Canîne	
Breed:	Labrador Retriever	
Sex:	Male (Neutered)	
Age:	B6 Years Old	

Lab Results Report

Nova Full Panel-ICU	B6 9:58:25 PM	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)		1.17 - 1.38	mmol/L	
MG (POC)		0.1 - 0.4	mmol/L	
GLUCOSE (POC)		80 - 120	mg/dL	
LACTATE	DC	0 - 2	mmol/L	
BUN (POC)	B6	12 - 28	mg/dL	
CREAT (POC)		0.2 - 2.1	mg/dL	
TCO2 (POC)		0 - 0	mmol/I.	
nCA	-	0 - 0	mmol/L	
nMG		0 - 0	mmol/L	
GAP		0 - 0	mmol/L	
CA/MG		0 - 0	mol/mol	
BEecf		0 - 0	mmol/L	
ВЕБ	de la constant de la	0 - 0	mmol/L	
A		0 - 0	mmHg	
NOVA SAMPLE		0 - 0		
	6/27	B6		

PCO2 PO2 PH PCO2 PO2 HCO3 Nova Full Panel-ICU Test WBC (ADVIA) RBC(ADVIA)	B6 Results	6 10:02:12 PM	36 - 44 80 - 100 7.337 - 7.467 36 - 44 80 - 100 18 - 24 Accession ID: B6	mmHg mmHg mmHg mmHg mmol/
PH PCO2 PO2 HCO3 Nova Full Panel-ICU Test WBC (ADVIA) RBC(ADVIA) HGB(ADVIA)	B6		7.337 - 7.467 36 - 44 80 - 100 18 - 24	mmHg mmHg
PCO2 PO2 HCO3 Nova Full Panel-ICU Test WBC (ADVIA) RBC(ADVIA) HGB(ADVIA)	B6		36 - 44 80 - 100 18 - 24	mmHg
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Test WBC (ADVIA) RBC(ADVIA) HGB(ADVIA)	Anna ana ana ana an	10:02:12 PM	Accession 1D: B6	7
WBC (ADVIA) RBC(ADVIA) HGB(ADVIA)	Results			1
RBC(ADVIA) HGB(ADVIA)			Reference Range	Units
HGB(ADVIA)	1 1		4.4 - 15.1	K/uL
			5.8 - 8.5	M/uL
TOTAL A DATE A S			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	L		14.7 - 113.7	K/uL
Nova Full Panel-ICU	B6	10:02:28 PM	Accession ID B6	
l'est	Results	recent.	Reference Range	Units
GLUCOSE			67 - 135	mg/dL
UREA			8 - 30	mg/dL
CREATININE	1 1		0.6 - 2	mg/dL
PHOSPHORUS	1 1		2.6 - 7.2	mg/dL
CALCIUM2			9.4 - 11.3	mg/dL
MAGNESIUM 2+			1.8 - 3	mEq/L
Γ. PROTEIN			5.5 - 7.8	g/dL
ALBUMIN	DC		2.8 - 4	g/dL
GLOBULINS	B6		2.3 - 4.2	g/dL
A/G RATIO			0.7 - 1.6	
SODIUM			140 - 150	mEq/L
CHLORIDE			106 - 116	mEq/L
POTASSIUM			3.7 - 5.4	mEq/L
CO2 (BICARB)			14 - 28	mEq/L
AGAP			8 - 19	
NA/K			29 - 40	
17.4	Server contractions of control		B6	

		8/27	B6	
ino (1 oc)	F(s)ensu-(s)ed		V.1 = V.7	
MG (POC)			0.1 - 0.4	mmol/I
CA (ionized)			1.17 - 1.38	mmol/I
CL(POC)			109 - 120	mmol/I
K (POC)	B6		3.6 - 4.8	mmol/I
NA (POC)			140 - 154	g/dL mmol/l
HB (POC)			12.6 - 16	
HCT (POC)			38 - 48	% %
Test SO2%	Results		Reference Range 94 - 100	Units %
Nova Full Panel-ICU	Same and a series	11:42:25 AM	Accession ID: B6	IT TO SE
TS (FHSA)	B6		0-0	g/dl
PCV **	B6		0 - 0	% ~/.11
TS (FHSA)	DC		0 - 0	g/dl
Test	Results		Reference Range	Units
	Presentation	30:49:50 PW	Personance	IT CA
Nova Full Panel-ICU	B6	10:49:36 PM	Accession ID: B6	
No morphologic abnormalities			D-0	
RBC MORPHOLOGY			0 - 0	
No Morphologic Abnormalities			4.5	
WBC MORPHOLOGY	- Internetial		0 - 0	
MONOS (ABS)ADVIA			0.1 - 1.5	K/uL
LYMPHS (ABS)ADVIA			1 - 4.8	K/uL
SEGS (AB)ADVIA	B6		2.8 - 11.5	K/ul
MONOS%	De		1 - 15	%
LYMPHS%			7 - 47	%
SEGS%	1		43 - 86	%
Test	Results		Reference Range	Units
Nova Full Panel-ICU	B6	10:02:07 PM	Accession ID: B6	
COMMENTS (CHEMISTRY)			0 - 0	
OSMOLALITY (CALCULATED)			291 - 315	mmol/I
AMYLASE			409 - 1250	U/L
TRIGLYCERIDES			30 - 338	mg/dl
CHOLESTEROL			82 - 355	mg/dL
CK			22 - 422	U/L
AST		JU	9 - 54	U/L
ALT		36	14 - 86	U/L
GGT			0 - 10	U/L
ALK PHOS			12 - 127	U/L
I BILIRUBIN			0 - 0.2	mg/dL
D.BILIRUBIN			0.1 - 0.3 0 - 0.1	mg/dL mg/dL
T BILIRUBIN				

GLUCOSE (POC)		80 - 120	mg/dL	
LACTATE		0 - 2	mmol/L	
BUN (POC)		12 - 28	mg/dL	
CREAT (POC)		0.2 - 2.1	mg/dL	
CO2 (POC)		0 - 0	mmol/L	
nCA		0 - 0	mmol/L	
ıMG		0 - 0	mmol/L	
GAP		0 - 0	mmol/L	
CA/MG		0 - 0	mol/mol	
BEecf	B6	0 - 0	mmol/L	
ВЕЬ	טט	0 - 0	mmol/L	
A		0 - 0	mmHg	
NOVA SAMPLE		0 - 0		
FiO2		0 - 0	%	
PCO2		36 - 44	mmHg	
PO2.		80 - 100	mmHg	
PH	-	7.337 - 7.467		
PCO2		36 - 44	mmHg	
PO2		80 - 100	mmHg	
HCO3	<u> </u>	18 - 24	mmol/L	
Nova Full Panel-ICU	B6 11:47:47 AM	Accession ID: B6		
Test	Results	Reference Range	Units	
ΓS (FHSA)		0 - 0	g/dl	
PCV **	B6	0 - 0	%	
ΓS (FHSA)	Lj	0 - 0	g/dl	
Nova Full Panel-ICU	8/28/2018 5:24:21 PM	Accession ID: B6	Accession ID: B6	
Test	Results	Reference Range	Units	
GLUCOSE		67 - 135	mg/dL	
UREA		8 - 30	mg/dL	
CREATININE		0.6 - 2	mg/dL	
PHOSPHORUS		2.6 - 7.2	mg/dL	
CALCIUM2		9.4 - 11.3	mg/dL	
Γ. PROTEIN		5,5 - 7.8	g/dL	
ALBUMIN	B6	2.8 - 4	g/dL	
GLOBULINS		2.3 - 4.2	g/dL	
A/G RATIO		0.7 - 1.6		
SODIUM		140 - 150	mEq/L	
CHLORIDE		106 - 116	mEq/L	
POTASSIUM		3.7 - 5.4	mEq/L	
NA/K		29 - 40		
	biological desired			
	9/27	B6		

T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS	B6	12 - 127	U/L
ALT	50	14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)	į	291 - 315	mmol/L
COMMENTS (CHEMISTRY)		0 - 0	
Slight hemolysis: Slight lipemia			

Nova Full Panel-ICU	8/28/2018 5:27:40 PM	Accession ID: B6		
Test	Results	Reference Range Uni		
TS (FHSA)		0 - 0	g/dl	
PCV **	B6	0 - 0	9/0	
TS (FHSA)	L	0 - 0	g/dl	

В6 10/27 Harporle

Client:
Patient:

B6

RDVM B6 referral B6



REFERRAL FORM

Gummings School of Vetermary Meditine
Henry and Lots Forer Hospital for Small Actionals
Hospital for Large Attitude
200 Westborn Road, Route 30
North Graften, MA 01556

105-859-5595

Service to Whith Referred; Appointment Dave Charles and the second CHEMICA INFORMATION **B6** PATIENT INFORMATE **B6** Regulered Name/ID: Biraco. **Apactes** CASE HISTORY Chief Coopers/Trenscena: Diagnosin: Veccination Eletters Diagnostic Test Results 19 possible, please stack results' Are Rattingraphs enclosed? **B6** Current Throupy & Motheston Lincible designer. Special Community Requires Superior REFERENG VETERINARIAN INFORMATION Chty State: Zig Code Address If an arrowal is being referred which has had lab work done at TVDL, please include copies of the lab results. on the TVDL accession number. If you are fazing its information about a clinical case which has been referred please see fax mumber (508) 859 7951.

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Reference Ranges (nmcl/a3)

Tourine Results (nmol/mil)

Owner's Name

Sample Type: Toxii ttansa: **B6**

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UNIVERSITY OF CALIFORNIA, DAVIS

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STEEN CARDIAC GENETICS LABORATORY JOHN A STEAN, DVM. PHD. DACYDA (CARDIOLOGY)

FREQUENTLY REQUESTED INFORMATION RECARDING TABLERS A GILATER CARDIOMYOFATHY IN GOLDEN RETERIVERS

Therefore reference ranges for Golden Retrievers: The Seco Lab suggests that the following placingly between ranges be used for Golden Retrievers and be considered for other known taurities measure baseds and as Netchanollands or American Cocker Spanish. This is primarily based on 3 observations:

- Golden Retrievers with nurgical texture lysels (defined before) have been thangumed with disend cardiomentative and have discusseded disease reversal after texture supplementation and met change.
- 2. Previously published work document taume southisty in Colpos Retterens.
- 3. The must exceeding published reference on present those taurem values shows higher service than presimilar opportunit.
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Plasma vs. whole blood tractor testing:

If at all possible, we elemented that purel (pleases and whole blood) tourise complex be substanted for analysis. A line value on either or both term is clinically relevant. If your dog is disgraped with ICM, estending paired tearine samples (pleases and whole blood) is imperative. We recommend that the UC Baros Arino Acid Laboratory be used for buring as this is where the themses attract for our reference ranges was generated. https://www.extract.underto.gdy/labs/sentro-used-possition.

[Boundon, J. H. emgle test is submitted the form Lab recommends that rebote blood by substituted professional perferences.] This is the to the faire elevation of teatres levels that is possible in piguous supples for to supply handling immen. This is a real of sums diplot between clinicales and conflicting attraction on preference for plantes is, whele based exists. This is determined the value of pound cataging.

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- The discussion is recommended if yets are bending a deat that faith white the PDA verming or their attempts with the dark isomitted to one short (one dark of transation section below)
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Page 1 of 1



CARDIOLOGY REPOYCE UPDATED: DOG FOOD A DILATED CARDINDATORATHY

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Burner, Berryan J. & Berry, B. Stein, M. Vertin, Stein, and M. Stein, and T. P. M. Market and Control of T. D. M. Jones, and M. S. Stein, a

Wheel is Dilated Cardsonsocama (DCM)?

DCM is a family moved therein that ments is a security programmed from the programmed in the state, staging at the decision of the programmed in the state, staging at the decision of the programmed in the state, staging at the decision of the programmed in the programmed in the programmed and complete a programmed in the programmed and complete a programmed and complete and compl

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Planting (1970-base 50 institutor Planting) was more than \$45 (Param School of Antonian) Abudicana Newschilden Son applicable and approximate the applicable and applicable



Vitals Results

	7:19:38 PM	Heart Rate (/min)	
	7:19:39 PM	Respiratory Rate	
	7:19:40 PM	Temperature (F)	
	7:19:41 PM	Lasix treatment note	
	8:01:18 PM	Nursing note	
	10:51:29 PM	Cardiac rhythm	
	10:51:30 PM	Heart Rate (/min)	
	10:52:15 PM	Respiratory Rate	
	10:55:36 PM	Lasix treatment note	
	11:11:46 PM	Respiratory Rate	
	11:15:36 PM	Eliminations	
	11:59:29 PM	Cardiac rhythm	
	11:59:30 PM	Heart Rate (/min)	
	1:06:28 AM	Respiratory Rate	
	1:06:38 AM	Cardiac rhythm	
	1:06:39 AM	Heart Rate (/min)	
	1:07:29 AM	Respiratory Rate	
	1:16:20 AM	Catheter Assessment	
	1:16:30 AM	Temperature (F)	
B 6	1:16:40 AM	Amount eaten	B6
D	J 1:24:55 AM	Eliminations	DU
	1:59:16 AM	Cardiac rhythm	
	1:59:17 AM	Heart Rate (/min)	
	2:00:45 AM	Nursing note	
	3:07:42 AM	Cardiac rhythm	
	3:07:43 AM	Heart Rate (/min)	
	3:08:14 AM	Respiratory Rate	
	3:51:34 AM	Respiratory Rate	
	3:51:49 AM	Cardiac rhythm	
	3:51:50 AM	Heart Rate (/min)	
	3:56:33 AM	Eliminations	
	4:53:31 AM	Respiratory Rate	
	4:53:41 AM	Cardiac rhythm	
	4:53:42 AM	Heart Rate (/min)	
	5:05:59 AM	Catheter Assessment	
	5:47:32 AM	Cardiac rhythm	
	5:47:33 AM	Heart Rate (/min)	
	5:47:43 AM	Respiratory Rate	
	6:58:01 AM	Cardiac rhythm	
	6:58:02 AM	Heart Rate (/min)	

Page 18/27

2:46:00 PM

2:50:43 PM

4:29:41 PM

Vitals Results		
6:58:10 AM	Respiratory Rate	[
7:36:37 AM	Weight (kg)	
7:36:43 AM	Eliminations	
7:36:58 AM	Respiratory Rate	
7:40:41 AM	Amount eaten	
7:40:57 AM	Cardiac rhythm	
7:40:58 AM	Heart Rate (/min)	
8:15:42 AM	Lasix treatment note	
8:57:02 AM	Cardiac rhythm	
8:57:03 AM	Heart Rate (/min)	
8:57:12 AM	Respiratory Rate	
9:02:45 AM	Catheter Assessment	B6
B6 9:02:59 AM	Eliminations	
9:58:29 AM	Respiratory Rate	
11:03:50 AM	Respiratory Rate	
11:36:45 AM	Respiratory Rate	
11:36:53 AM	Heart Rate (/min)	
11:42:00 AM	Eliminations	
12:53:35 PM	Respiratory Rate	
1:51:27 PM	Amount eaten	
2:11:08 PM	Respiratory Rate	
2:32:31 PM	Lasix treatment note	
2:32:41 PM	Catheter Assessment	

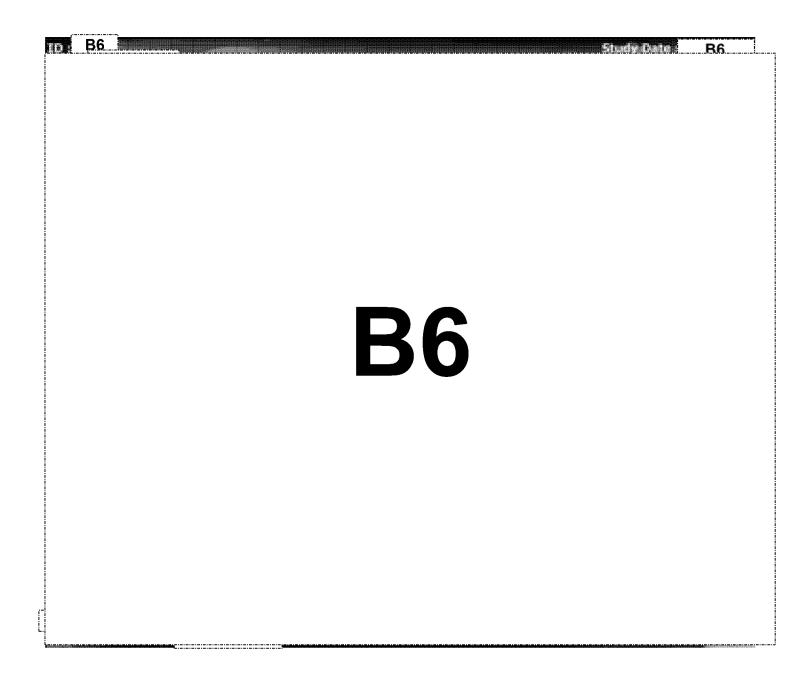
Respiratory Rate

Eliminations

Weight (kg)

Client: Patient: B6

RDVM B6 Rad B6



В6 В6 ID: Study Date: **B6**

Client: **B6**

RDVM B6 Rads B6

B6

Patient History

06:37 PM	UserForm	
07:19 PM	Vitals	
08:01 PM	Vitals	
08:13 PM	Prescription	
09:00 PM	UserForm	
09:24 PM	Purchase	
09:24 PM	Purchase	
09:25 PM	Purchase	
09: 25 PM	Purchase	
09: 25 PM	Purchase	
09:58 PM	Purchase	
10:02 PM	Purchase	
10:02 PM	Purchase	
10:06 PM	Purchase	
10:06 PM	Purchase	
10:49 PM	Labwork	
10:51 PM	Treatment	
		B6
B6 10:51 PM 10:51 PM	Vitals	
	Vitals	
10:52 PM	Treatment	
10:52 PM	Vitals	
10:55 PM	Vitals	
10:55 PM	Treatment	
11:11 PM	Treatment	
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11:15 PM	Treatment	
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11:59 PM	Treatment	
11:59 PM	Vitals	
11:59 PM	Vitals	
01:06 AM	Treatment	
01:06 AM	Vitals	
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i i	Heatment	
01:06 AM	Vitals	
01:06 AM	Vitals	
01:07 AM	Treatment	
01:07 AM	Vitals	
01:16 AM	Treatment	
01:16 AM	Vitals	

Page 23/27

Patient History		
01:16 AM	Treatment	
01:16 AM	Vitals	
01:16 AM	Treatment	
01:16 AM	Vitals	
01:24 AM	Treatment	
01:24 AM	Vitals	
01:59 AM	Treatment	
01:59 AM	Vitals	
01:59 AM	Vitals	
02:00 AM	Vitals	
03:07 AM	Treatment	
03:07 AM	Vitals	
03:07 AM	Vitals	
03:08 AM	Treatment	
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B6 03:56 AM 03:56 AM	Vitals	
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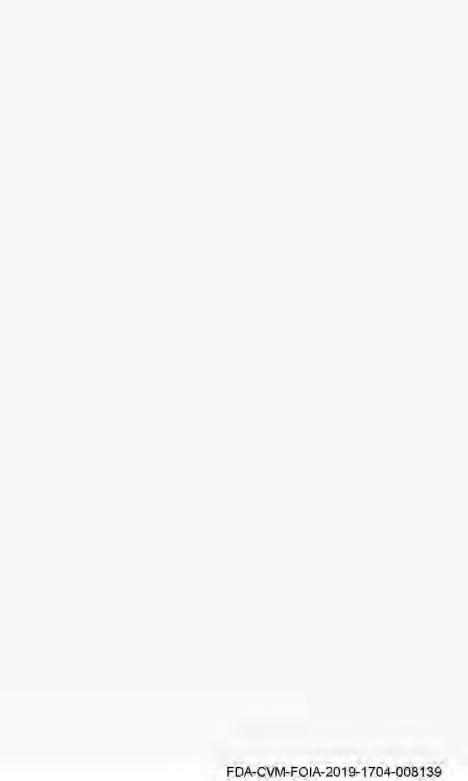
Page 24/27

B6

Patient History		
07:36 AM	Vitals	
97:36 AM	Treatment	
07:36 AM	Vitals	
97:40 AM	Treatment	
07:40 AM	Treatment	
07:40 AM	Vitals	
07:40 AM	Treatment	
07.40.43.5		
07:40 AM	Vitals	
07:40 AM	Vitals	
08:15 AM	Vitals	
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08:57 AM	Vitals	
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08:57 AM	Vitals	
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09:02 AM	Vitals	
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B6 09:11 AM	Purchase	
09:22 AM	Purchase	
09:52 AM	UserForm	
09:58 AM	Treatment	
09:58 AM	Treatment	
09:58 AM	Vitals	
10:04 AM	Deleted Reason	
11:03 AM	Treatment	
11:03 AM	Vitals	
11:29 AM	Treatment	
11:31 AM	Purchase	
11:36 AM	Treatment	
11:36 AM	Vitals	
11:36 AM	Treatment	
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11:42 AM	Purchase	
11:47 AM	1 dichase	į
11.4/ Alvi	Labwork	

Page 25/27

Patient History		
12:53 PM	Vitals	
01:51 PM	Treatment	
01:51 PM	Treatment	
01:51 PM	Vitals	
02:11 PM	Treatment	
02:11 PM	Vitals	
02:30 PM	Prescription	
02:31 PM	Prescription	
02:32 PM	Vitals	
02:32 PM	Treatment	
02:32 PM	Treatment	
02:32 PM	Vitals	
02:34 PM	Purchase	
02:46 PM	Treatment	B6
02:46 PM	Vitals	
02:50 PM	Treatment	
B6 02:50 PM 02:50 PM	Vitals	
03:05 PM	UserForm	
12:25 PM	Appointment	
04:00 PM	UserForm	
04:00 PM	Purchase	
04:04 PM	Treatment	
04:29 PM	Vitals	
04:49 PM	Purchase	
05:24 PM	Purchase	
05:27 PM	Labwork	
06:02 PM	UserForm	Cardio Discharge - DCM CHF Form Saved to Record
06:17 PM	Prescription	
06:19 PM	Purchase	B6
09:54 AM	Prescription	
09:54 AM	Purchase	



Report Details - EON-3 ICSR: Type Of Submission: Report Version: Type Of Report: Reporting Type:	2063119 Initial								
Type Of Submission: Report Version: Type Of Report: Reporting Type:	Initial								***************************************
Report Version: Type Of Report: Reporting Type:	<u></u>						2063119		
Type Of Report: Reporting Type:	FPSR FDA PFTF V V1	Initial							
Reporting Type:	FPSR.FDA.PETF.V.V1								
	Adverse Event (a symptom, reaction or disease associated with the product)								
	Voluntary								
Report Submission Date:	2019-02-24 18:45:24 EST	•							
Reported Problem:	Problem Description:	Has been regularly reventricular contractile Owner changed to R	e function noted	on most i	ecent e	cho. E	ating		t.
	Date Problem Started:	01/02/2019							
	Concurrent Medical Problem:								
	Pre Existing Conditions:	1115							
	Outcome to Date:								
Product Information:	Product Name:	Solid Gold Mighty Mi	ni Beef, Sweet F	otato, ar	d Apple	grain	free d	lry	
	Product Type:		<u> </u>	,				-	
	Lot Number:								
	Package Type:	BAG		***************************************					
	Product Use Information:	Description: 1/4 cup kibble (divided into 2 meals) 1 tbsp cooked chicken BID Owner switched to Weight Control version of same diet (salmon, lentil, green bean) just a few days before visit							
	Manufacturer /Distributor Information:			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Juyu		
	Purchase Location Information:								
Animal Information:	Name:	В6							
	Type Of Species:	s: Dog							
	Type Of Breed:								
		: Female							
	Reproductive Status:			***************************************					***************************************
		3.72 Kilogram							
		9 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:	В6	 				100 100 100 100 100
			Phone:	В6			_		UUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUUU
			Email:		B6				000000000000000000000000000000000000000
		Address:							, , , , , , , , , , , , , , , , , , ,
			B 6						0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		6	United States						0 0 0
	Healthcare Professional	Practice Name:	Tufts Cummings	School	of Veter	inary I	Medici	ne	

			Phone: (508) 887-4523	
			Email: lisa.freeman@tufts.edu	
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
Sender Information:	Name:	Lisa Freeman		
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	Contact:	Phone:	5088874523	
		Email:	lisa.freeman@tufts.edu	
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Additional Documents:				
	Attachment:	achment: T_26346.pdf		
	Description: Taurine - will send rest of records by email (too large)			
	Type: Laboratory Report			

{					
Report Details - EON-	390030				
ICSR:	2067990				
Type Of Submission:	Followup				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)				
Reporting Type:	Voluntary				
Report Submission Date:					
Initial Report Date:	02/24/2019				
Parent ICSR:	2063119				
Follow-up Report to FDA Request:	Yes				
Reported Problem:	Problem Description: Has been regularly rechecked after B6 Progressive reduction in left				
. (cpc. tou.)	Date Problem Started: Concurrent Medical Problem:	al Yes			
	Pre Existing Conditions:	ns: B6			
	Outcome to Date:	e: Better/Improved/Recovering			
Product Information:	Product Name:	Solid Gold Mighty M	ni Beef, Sweet Potato, and Apple grain free dry		
	Product Type:				
	Lot Number:	WINT.			
	Package Type:				
	Product Use		d/A avva killabla /divided into O wasala) d they as alred shipkan		
	Information:	Description:	1/4 cup kibble (divided into 2 meals) 1 tbsp cooked chicken BID Owner switched to Weight Control version of same diet (salmon, lentil, green bean) just a few days before visit		
	Manufacturer /Distributor Information:				
	Purchase Location Information:				
Animal Information:	Name:	B6			
	Type Of Species:	Dog			
	Type Of Breed:				
	Gender:	<u></u>			
	Reproductive Status:	1			
		3.72 Kilogram			
	· · · · · · · · · · · · · · · · · · ·	9 Years			
	Assessment of Prior				
	Health:	Ith: als 1 act			
	Given the Product:				
	Number of Animals Reacted:				
	Owner Information:	Owner Information provided:			
		Contact:	Phone: B6		
			Email: B6		
	1				

		Address:			
		1,000	B6		
			DU		
			United States		
	Healthcare Professional	Practice Name:	Tufts Cumming:	s School of Veterinary Medicine	
	Information:	Contact:	the same and the same and the same and the	Lisa Freeman	
				(508) 887-4523	
				lisa.freeman@tufts.edu	
		Address:	200 Westboro	34	
			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@to	ufts.edu	
	Permission To Contact Sender:	Yes			
	Preferred Method Of Contact:	:			
	Reported to Other Parties:				
Additional Documents:					
	Attachment:	NT-proBNP & Diet H	lx 4-5-19 pdf		
	Description:	Note that the second se			
	Туре:	: Laboratory Report			
	Attachment:	B6 -2019-01-03-1008 NT-proBNP - Copy.pdf			
	Description:	lab work			
	Type:	Laboratory Report			
	Attachment:	troponin 5-30-2019.p	odf		
	Commence of the commence of th	n: lab work results			
		Laboratory Report			



B6

PET CIWNER:

B6

Canine SPECIES! BREED: Chihuahua Unknown GENDER MGE, 9 Years

PAHENTID:

Tufts University Attn: Lisa Freeman

200 Westboro Rd. North Grafton, MA 01536

508-839-5395

ACCOUNT #:

B6 ATTENDING VET B6

2303280698

338315 LODIN (D. COLLECTION DATE: 1/1/19

DATE OF RECEIPTY 1/2/19 DATE OF RESULT: 1/3/19

IDEXX Services:

Chemistry

1/2/19 (Order Received) 1/3/19 10:08 AM (Last Updated)

Cardiopet proBNP (Canine) **B6**

REFERENCE VALUE

0 - 900 pmol/L

B6

Please note: Complete interpretive comments for all concentrations of Cardiopet proBNP are available in the online directory of services. Serum specimens received at room temperature may have decreased NT-proBNP concentrations.

Jones, Jennifer L </o=ExchangeLabs/ou=Exchange Administrative Group From: (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo> 'Freeman, Lisa' To: Sent: 3/12/2019 11:00:00 AM RE: GILab Results Subject: Thanks, Lisa! Jennifer Jones, DVM Veterinary Medical Officer Tel: 240-402-5421 DA U.S. FOOD & DRUG From: Freeman, Lisa < Lisa. Freeman@tufts.edu> Sent: Sunday, March 10, 2019 2:48 PM To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov> Subject: FW: GILab Results Hi Jen, Troponin results on a bunch of the dogs that I've already reported. The 4 boxers are recheck values -**B5** Lisa Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary NutritionistTM Professor **Cummings School of Veterinary Medicine** Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org From: Tufts Veterinary Cardiology Service Sent: Friday, March 08, 2019 10:40 AM To: Freeman, Lisa <Lisa.Freeman@tufts.edu>; **B6** Subject: FW: GILab Results I can put into SS. From: Clinical Pathology Lab <<u>clinpath@tufts.edu</u>> Sent: Friday, March 8, 2019 8:28 AM To: Tufts Veterinary Cardiology Service <cardiovet@tufts.edu> Subject: FW: GILab Results

Forwarding Troponin Results that I think were sent through Cardio service.

B6
Clinical Pathology Laboratory
B6
From: gilab@cvm.tamu.edu [gilab@cvm.tamu.edu] Sent: Wednesday, March 06, 2019 6:21 PM To: Clinical Pathology Lab Cc: B6 Subject: GILab Results
Greetings:
Please see the attachment for updated results for your patient(s).
To obtain results faster, you can also login to our website at http://vetmed.tamu.edu/gilab/service/clinic-login to view results immediately when they become available. Your username is B6
Thank you for using the GI Lab
The GI Lab - Promoting gastrointestinal health in companion animals (979) 862 2861; FAX (979) 862 2864; http://vetmed.tamu.edu/gilab
Accession B6 Patient: B6

Timing: Fasting Result B6 Range: 0 - 0.06
B6

Accession B6 Patient: B6

Ultra-Sensitive Troponin I Fasting
Timing: Fasting Result B6 Range: 0 - 0.06
B6

Report Comments: ************************************
Accession B6 Patient B6

Timing: Fasting Result: B6 Range: 0 - 0.06
B6

Report Comments: ************************************
Accession B6 Patient: B6

Ultra-Sensitive Troponin I Fasting
Timing: Fasting Result: B6
Range: 0 - 0.06
B6

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Accession B6 Patient: B6

Fiming: Fasting Result: B6 Range: 0 - 0.06
B6

Accession B6 Patient B6

Fiming: Fasting Result: B6 Range: 0 - 0.06
B6

Accession B6
Patient: B6

Ultra-Sensitive Troponin I Fasting
Timing: Fasting
Result B6 Range: 0 - 0.06
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Accession B6
Patient: B6

Timing: Fasting
Result: B6
Range: 0 - 0.06
B6

Report Comments: ************************************
Accession B6 Patient: B6

Ultra-Sensitive Troponin I Fasting

Timing: Fasting Result: B6 Range: 0 - 0.06
B6

Accession B6 Patient: B6
######################################
Timing: Fasting Result B6 Range: 0 - 0.06
B6

(FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-

Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP

DROTSTEI>

To: Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee

Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David

Sent: 11/11/2018 1:56:12 AM

Subject: DCM (not Lisa Freeman and/or Tufts) 11/10/2018 2055

Attachments: Wellness Simple Limited Ingredient Diet Grain-Free Healthy Weight Salmon & Peas Formula

Dry Dog Food: **B6** - EON-370755

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





From:

This e-mail message is intended for the exclusive use of the recipient(s) named above. It may contain information that is protected, privileged, or confidential, and it should not be disseminated, distributed, or copied to persons not authorized to receive such information. If you are not the intended recipient, any dissemination, distribution, or copying is strictly prohibited. If you think you received this e-mail message in error, please e-mail the sender immediately at david.rotstein@fda.hhs.gov.

-370755 2058695					
TF.V.V1					
	reaction or disease a	associated with the product)			
(a cymptom,					
35·47 FST					
: 2018-11-10 13:35:47 EST Yes					
cription:	Low taurine level, ea and Wellness Core I was B6 Echo show	ating Wellness Simple grain free for 3 months prior to testing Low fat Grain Free food for 3 years before that. Taurine level wed NO DCM			
em Started:	08/06/2018				
ent Medical Problem:					
me to Date:	Unknown				
> :	Wellness Simple Limited Ingredient Diet Grain-Free Healthy Weight Salmon & Peas Formula Dry Dog Food				
oduct Type:					
ot Number:					
UPC:	7634489329				
kage Type:					
ckage Size:	<u></u>				
	05/21/2018				
Unopened Product:					
ss Opened Product:					
Conditions:	In original bag in cov	vered container in garage			
Product Use Information:	Description:	4 cups a day			
	First Exposure Date:				
	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 Relatedness to Adverse Event:	Definitely related			
	Other Foods or Products Given to the Animal During This Time Period:	No			
a	nufacturer	Started Again: Perceived Relatedness to Adverse Event: Other Foods or Products Given to the Animal During This Time			

	/Distributor Information:	Type(s)	Distributor		
			Massachusetts 01876-1274 United States		
		Contact			
		Possess One or More Labels from This Product			
	Purchase Location Information:	Name:	Chewy.com United States		
Autoral Information	No. of the last of	referencementary	Office States		
Animal Information:	Name:	B6			
	Type Of Species:	A feet to add to compress the compress of			
		Retriever - Golden			
	Gender:				
	Reproductive Status:	A CONTRACTOR OF THE PARTY OF TH			
		71 Pound			
		B6 Years			
	Assessment of Prior Health:	Excellent			
	Number of Animals Given the Product:	1			
	Number of Animals Reacted:	1			
	Owner Information:				
	Healthcare Professional	Practice Name:	UC Davis		
	Information:	Contact	Name: Joshua Stern		
		3,33,830	Phone: (530) 752-2475		
		Address			
		Type of Veterinarian	Referred veterinarian		
		Date First Seen	08/14/2018		
		Permission to Release Records to FDA			
Sender Information:	Name:	· · · · · · · · · · · · · · · · · · ·			
	Address:	B6 United States			
	Contact:	Email	B6)		
	Reporter Wants to Remain Anonymous:	No			
	Permission To Contact Sender:	Yes			
	Preferred Method Of Contact:	f Email			
	Reported to Other Parties:	r None			
Additional Documents:		entrance.			
	Attachment:	B6 taurine leve	pdf		
	Particular and Company of the Compan	Taurine results from	W. 100		
		ype: Laboratory Report			
	(JPC, Educator) Neport				

Attachment:	B6 echo pdf	
Descr	ption: Echocardiagram report	
	Type: Echocardiogram	



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

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.

Palmer, Lee Anne </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP From:

(FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=CF7C8BD53B6C45A39318A596ACEA7C53-

LPALMER>

To: Reimschuessel, Renate; Ceric, Olgica; Nemser, Sarah; Jones, Jennifer L; Peloquin, Sarah

CC: Rotstein, David; Carey, Lauren; Hartogensis, Martine

8/1/2018 12:11:35 PM Sent:

EON-359970 RE: 800.267-FDA Case Investigation for **B6** Subject:

Thanks – I have been following a FB page from my home computer (without commenting in any way, of course). I wonder if it's the same - many had been working with Josh Stern at UC Davis. Hopefully some will report to us as well.

From: Reimschuessel, Renate

Sent: Wednesday, August 1, 2018 8:01 AM

To: Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Jones, Jennifer

L <Jennifer.Jones@fda.hhs.gov>; Peloquin, Sarah <Sarah.Peloquin@fda.hhs.gov>

Cc: Rotstein, David <David.Rotstein@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov>; Palmer, Lee

Anne <LeeAnne.Palmer@fda.hhs.gov>; Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>

Subject: FW: 800.267-FDA Case Investigation for **B6** EON-359970

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This morning I received the file, and again suggested she advise owners to submit to FDA through the portal.

I'm sharing the file for your additional information.

Renate Reimschuessel V.M.D. Ph.D. Director Vet-LIRN

Phone 1-240-402-5404

Fax 301-210-4685

http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm

From: Reimschuessel, Renate

Sent: Wednesday, August 1, 2018 7:54 AM

B6 B6 EON-359970

Subject: RE: 800.267-FDA Case Investigation for

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A consumer complaint can be submitted through the Safety Reporting Portal: https://www.safetyreporting.hhs.gov

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Phone 1-240-402-5404

Fax 301-210-4685

From	B6				
Sent: ີ	Tuesday, July 31, 2018 10:57 PM				
To : Re	eimschuessel, Renate < <u>Renate.Reimschuessel</u>	@fda.hhs.gov>			
Subje	ct: Re: 800.267-FDA Case Investigation for	B6 EON-359	9970		
Hi Dr.	Reimschuessel,				
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(FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=CF7C8BD53B6C45A39318A596ACEA7C53-

LPALMER>

To: Hartogensis, Martine; Reimschuessel, Renate; Ceric, Olgica; Nemser, Sarah; Jones, Jennifer L;

Peloquin, Sarah

CC: Rotstein, David; Carey, Lauren

Sent: 8/1/2018 12:16:19 PM

Subject: RE: 800.267-FDA Case Investigation for B6 EON-359970

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Sent: Wednesday, August 1, 2018 8:13 AM

To: Reimschuessel, Renate <Renate.Reimschuessel@fda.hhs.gov>; Ceric, Olgica

<Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Jones, Jennifer L

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Anne <LeeAnne.Palmer@fda.hhs.gov>

Subject: RE: 800.267-FDA Case Investigation fc B6 EON-359970

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rr

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Phone 1-240-402-5404

Fax 301-210-4685

 $\underline{\text{http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm}}$

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Renate Reimschuessel V.M.D. Ph.D. Director Vet-LIRN Phone 1-240-402-5404 Fax 301-210-4685 http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm
From: Sent: Tuesday, July 31, 2018 10:57 PM To: Reimschuessel, Renate < <u>Renate Reimschuessel@fda.hhs.gov</u> > Subject: Re: 800.267-FDA Case Investigation for B6 EON-359970
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RREIMSCH>

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Sent: 8/1/2018 12:19:56 PM

Subject: RE: 800.267-FDA Case Investigation for B6 FEON-359970

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Sent: Wednesday, August 1, 2018 8:16 AM

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

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Renate Reimschuessel V.M.D. Ph.D. Director Vet-LIRN Phone 1-240-402-5404 Fax 301-210-4685 http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm
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Jones, Jennifer L </o=ExchangeLabs/ou=Exchange Administrative Group From: (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo> Reimschuessel, Renate; Palmer, Lee Anne; Hartogensis, Martine; Ceric, Olgica; Nemser, Sarah; To: Peloquin, Sarah CC: Rotstein, David; Carey, Lauren Sent: 8/1/2018 12:25:18 PM RE: 800.267-FDA Case Investigation for **B6** EON-359970 Subject: Yes-Josh was in a group we spoke with. He mentioned his cases all involved Acana. After speaking w/ Andrea **B5** Fascetti at Davis, Jennifer Jones, DVM Veterinary Medical Officer Tel: 240-402-5421 æ∆ U.S. FOOD & DRUG From: Reimschuessel. Renate Sent: Wednesday, August 01, 2018 8:20 AM To: Palmer, Lee Anne <LeeAnne.Palmer@fda.hhs.gov>; Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>; Nemser, Sarah <Sarah.Nemser@fda.hhs.gov>; Jones, Jennifer L <Jennifer.Jones@fda.hhs.gov>; Peloguin, Sarah <Sarah.Peloquin@fda.hhs.gov> Cc: Rotstein, David <David.Rotstein@fda.hhs.gov>; Carey, Lauren <Lauren.Carey@fda.hhs.gov> Subject: RE: 800.267-FDA Case Investigation for **B6** EON-359970 This was sent to me by the owner of a dog that did report to FDA and has been sending me the dog's medical records. She mentioned the FB page. It looks like it might be the one Lee Anne has looked at since most of the bloodwork is from Davis. Jen – has Josh Stern been in the group that we spoke with? Renate Reimschuessel V.M.D. Ph.D. Director Vet-LIRN Phone 1-240-402-5404 Fax 301-210-4685 http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm From: Palmer, Lee Anne

Sent: Wednesday, August 1, 2018 8:16 AM

To: Hartogensis, Martine <Martine.Hartogensis@fda.hhs.gov>; Reimschuessel, Renate

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Subject: RE: 800.267-FDA Case Investigation for B6 EON-359970

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From:		hangeLabs/ou=Exchange Adminis =Recipients/cn=0f6ca12eaa93489	
To:	'Darcy Adin'		
CC:	B6		
Sent:	1/30/2019 4:37:05 PM		
Subject:	RE: Sample?		
Hi Darcy, Thank you for the kind delay.	words. {	B6	I apologize for the
We are definitely intere here: https://www.safet	-	ed a complaint submitted through	the Safety Reporting Portal found
- · · · · · · · · · · · · · · · · · · ·	as there also a full necropsy re ou submit. ou have questions.	R number (confirmation of report seport seport with medical records you cou	submission). We can send you a box uld share as well? Those can be
Jennifer Jones, DVM Veterinary Medical Offic Tel: 240-402-5421	cer		
Original Message From: Darcy Adin <dba Sent: Friday, January 2 To: Jones, Jennifer L < Cc: Subject: Sample?</dba 	din@ncsu.edu> 5, 2019 5:01 PM Jennifer.Jones@fda.hhs.gov>		
Hi Jen,			
I hope you are doing w	ell - not sure how the partial go	overnment shutdown is impacting	your area specifically?
are wondering if we sho Yorkie mix that was dia to change the diet to a grain free). He represe grain-based supplemer	ould hang on to this in a -80 frognosed in April 2018 and was grain based Royal canin diet bented in September 2018 for Chated with boiled chicken and rivith no improvement in systolic	eezer or send you the sample for	c GF Small Breed. The owners tried was changed to Primal (raw and nm Adult Gold Small breed, ed at each exam
Thanks for your though Take care Darcy	ts!		

From:	B6
To:	Jones, Jennifer L; B6 ADIN, DARCY BRITTAIN
Sent:	1/31/2019 4:47:01 PM
Subject:	Fwd: Safety Report ID 252600 Submission Confirmation
Hi Jennifer,	
	to an and Constitution Discourse of the constitution of the consti
flere is the Safety	Report Confirmation. Please contact me if you need any additional information.
B6	
Forwarded	nessage
From: < <u>noreply.safe</u>	<u>yreporting@hhs.gov</u> >
Date: Thu, Jan 31, 2	019 at 11:37 AM
Subject: Safety Rep	rt ID 252600 Submission Confirmation
To: B6	

Your initial Pet Food Safety Report, ID 252600, was successfully submitted on 1/31/2019 11:24:47 AM EST to the FDA, and it was issued an Individual Case Safety Report Number (ICSR) of 2062004.

Thank you for using the Safety Reporting Portal.

Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions please refer to the Portal's Contact Us page for further instructions.

From: To: CC: Sent: Subject:	Jones, Jennifer L B6 ADIN,DARCY BRITTAIN Peloquin, Sarah 2/1/2019 3:16:52 PM RE: 800.267-cc-212- Safety Report ID 252600 Submission Confirmation
	ng the report. It to collect the frozen heart tissue. You'll reuse the box, package the sample, use the we provide, and call UPS for the pick-up. Please return ship the box to us on a Monday
***If for some reason w shutdown. *** Thank you again for yo Jen	ve are furloughed again mid-February, please do not ship during the government our help,
Jennifer Jones, DVM Veterinary Medical Office Tel: 240-402-5421 DA U.S. FOOD & DRUG ADMINISTRATION	
Sent: Thursday, Janua To: Jones, Jennifer L < ADIN,DARCY BRITTAI	Jennifer.Jones@fda.hhs.gov> B6
Hi Jennifer, Here is the Safe additional inform B6	ty Report Confirmation. Please contact me if you need any mation.
Forwarded me From: < <u>noreply.safetyro</u> Date: Thu, Jan 31, 201 Su <u>bject: Safety Report</u> To B6	eporting@hhs.gov>

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From: To:	Reimschuessel, Renate Jones, Jennifer L; Nemser, Sarah
Sent: Subject:	B6 12:17:41 PM FW: Nutritionally-mediated DCM case necropsy recommendations
Attachments:	800.267-Vet-LIRN Rapid Necropsy-DCM-v7.pdf
fyi	
Renate Reimschuessel Phone 1- 240-402	V.M.D. Ph.D. Director Vet-LIRN -5404
Fax 301-210-4685 http://www.fda.gov/AnimalVeterin	nary/ScienceResearch/ucm247334.htm
Sent: B6	n <jstern@ucdavis.edu> 10:39 PM</jstern@ucdavis.edu>
Cc: Reimschuessel, F	Renate <renate.reimschuessel@fda.hhs.gov> -mediated DCM case necropsy recommendations</renate.reimschuessel@fda.hhs.gov>
future cases we have a carnation supplementa	ough I wasn't on clinic I heard about B6 . This is such a sad case. For what it is worth for seen some dogs take 9-12months to show improvement after diet change and taurine + ation (regardless of measured taurine levels). I'm so glad to hear the owner had a positive his case wasn't ending this way for everyone!
you are abele to use they will pay necrops	se the help with tissue samples. Please ensure that you report the case to the FDA and if he attached protocol to obtain samples for them they would greatly appreciate it. I believe y costs and cover shipping for you. The person to contact (Renate Reimschuessel) at the smail. Your willingness to help us get to the bottom of this horrible disease is greatly
Best	
Josh	

Joshua Stern, DVM, PhD, DACVIM (Cardiology)
Associate Professor & Chief of Service: Cardiology

Interim Small Animal Clinic Director Department of Medicine & Epidemiology University of California Davis; CCAH Room 258 (614) 390.1516 cell (530) 752.2475 office jstern@ucdavis.edu

Associate Editor - Journal of Veterinary Cardiology www.journals.elsevier.com/journal-of-veterinary-cardiology

Rapid necropsy for Vet-LIRN's Case Investigation into Canine Dilated Cardiomyopathy (DCM) 2018

Prior to Necropsy:

- Contact Vet-LIRN if you think you have a case of DCM to request authorization for payment to conduct a necropsy.
- 2. Submit a pet food report through the FDA Safety Reporting Portal. (https://www.safetyreporting.hhs.gov)
- 3. Refrigerate the body if the necropsy can be done in 1 day, otherwise freeze the body.

Necropsy

- 4. Photograph any lesions place a tag with the dog's name in each picture.
- 5. Record any gross findings in detail
 - Describe location, number, size, color, and texture.
 - b. Photograph the heart in situ.
- 6. Sampling and FIXING (10% neutral buffered formalin, 10:1 NBF to tissue):
 - a. Heart Weigh it (remove clots first) place in NBF without cutting
 - b. Eye (#1, record OD or OS) inject with NBF, and place in NBF
 - c. Lungs Weigh lungs, then fix the perihilar region and caudo-dorsal
 - d. Muscles sample gastrocnemius and abdominal muscle, labelling each.
 - e. Organs sample:
 - i, lleum
 - ii. Pancreas
 - iii. Liver
 - iv. Gall bladder
 - v. Spleen
 - vi. Kidney (1/2 of each)
 - vii. Adrenal
 - viii. Thyroid
 - f. Sample any tissues with gross lesions.

7. Sampling for FROZEN TISSUES

- a. Eye (#2, record OD or OS)
- b. Liver (4x4 cm section state size or weight)
- c. Skeletal muscle-gastrocnemius and abdominal muscle
- d. Kidney (1/2 of each)
- e. Fat (abdominal)

If available:

- f. small intestinal contents and feces (for bile acids)
- g. Whole blood and/or Plasma
- h. Urine

Sample Shipping to Vet-LIRN:

- 8. Vet-LIRN will send you 2 boxes one for fixed samples, one for frozen samples.
 - a. The boxes will contain packaging instructions and a prepaid shipping label.
 - b. Vet-LIRN will need to know the *final weights* of both the collective frozen and fixed tissues, separately.
 - c. Call UPS to schedule box pick-up ONLY FOR Monday through Wednesday.

Reimbursement:

9. Submit an invoice (email or fax: 301-210-4685) for the necropsy charges.

Histopathology-to be done by FDA:

10. Vet-LIRN will send histopathology results to the veterinarian to share with the owner.

From:	B6
To:	Jones, Jennifer L
Sent:	B6 4:32:34 PM
Subject:	Necropsy authorization
gave us your cor today. We have B6 is in CHF a	on your number this morning but figured I would also follow up with an email. Dr. Josh Stern ntact information – I reached out to both Renate and Sarah but both appear out of the office a nutrition mediated DCM case, diagnosed at UC Davis that will be euthanized B6 nd isn't responding to treatment. She is a 3.5yrold, FS, Golden Retriever. The owner is willing to tissues towards research on this condition. Please give me a call at your earliest convenience steps B6
	36
- 1	B6
Tel B6 Fax B6	
₩ Facebook	Find us on Yelp 🔀

From: Jones, Jennifer L </o=ExchangeLabs/ou=Exchange Administrative Group (FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo> To: CC: 'Reimschuessel, Renate (Renate.Reimschuessel@fda.hhs.gov)'; Peloquin, Sarah **B6** 5:40:43 PM Sent: 800.267-cc-295-RE: Necropsy authorization Subject: 02-Vet-LIRN-NetworkProceduresVets-12.22.2015.pdf; 03-Vet-LIRN-Network Attachments: ProceduresOwners-12.22.2015.pdf Good afternoon B6 Thank you for contacting us about your case. As we discussed on the phone, for me to send you a box to collect the samples, I'll need an official report. You can mention in the report, that I recommended you submit a complaint. Can you please submit a consumer complaint here? https://www.safetyreporting.hhs.gov/ • Please send me the ICSR number (confirmation code) from the report. We will send you 2 boxes with the materials to collect the fixed and frozen samples, including jars with formalin. You will reuse the boxes we send and package the samples per the instructions in the box. • Please send me an estimate for the necropsy. After the necropsy is complete, we will call back with our VISA information to reimburse your hospital. • After the necropsy is complete, please send me the approximate weight of the following individual groups: Fixed tissues in the jars o Frozen tissues We will use this information to make prepaid shipping labels for you. You'll affix the prepaid shipping label to the box and call UPS for a pick-up on Monday-Wednesday. I attached a copy of our network procedures. They explain how Vet-LIRN operates and how veterinarians help with our case investigations. An owner friendly version is also attached. For more information, please also visit our open access article in JAVMA that explains the FDA Animal Food Concern Reporting process. It's free and located here: https://avmajournals.avma.org/doi/pdf/10.2460 /javma.253.5.550 Thank you again, Jen

Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421



From:		В	6	
Sent:	Tuesday,	86	12:33 PM	

To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Subject: Necropsy authorization

Dear Dr. Jones,

I left a message on your number this morning but figured I would also follow up with an email. Dr. Josh Stern gave us your contact information – I reached out to both Renate and Sarah but both appear out of the office today. We have a nutrition mediated DCM case, diagnosed at UC Davis that will be euthanized

B6 is in CHF and isn't responding to treatment. She is a 3.5yrold, FS, Golden Retriever. The owner is willing to submit the body/tissues towards research on this condition. Please give me a call at your earliest convenience

to discuss next steps
Sincerely,
B6

B6

B6

Tel: B6

Fax: B6

B6

Find us on Yelp



Network Procedures for Owners

The purpose of this Network Procedure is to help you, the owner, understand how the Veterinary Laboratory Investigation and Response Network (Vet-LIRN) Program Office conducts case investigations (follow up to consumer complaints).

The following items are explained below:

- General Introduction
- Billing
- · Step by Step Process
- Types of Services and Tests

1. General Introduction:

1.1. What is the goal of the case investigation?

The goal of the case investigation is to determine if the product is causing your pet's illness. Our case investigation MAY NOT provide a definitive diagnosis for your pet's illness, although we may rule out several other potential reasons for your pet's illness.

1.2. What is the focus of a case investigation?

Most case investigations focus on diagnostic samples (such as blood, urine or tissue from the pet), although we occasionally request and test pet food samples.

1.3. What is my veterinarian's role during the case investigation?

Your veterinarian helps our investigation into FDA- regulated products by providing information about your pet's medical history and by obtaining any diagnostic samples like blood, urine or tissue.

1.4. What will Vet-LIRN ask of me during a case investigation?

We may ask that your veterinarian perform certain tests or services or provide diagnostic samples to FDA or a Vet-LIRN cooperating laboratory.

Network procedures for owners

Version-05

Page 1 of 4



1.5. Will Vet-LIRN pay for tests or services requested?

Yes, we will pay veterinarians or laboratories for tests or services requested by Vet-LIRN and approved through our government purchasing system. We cannot, however, reimburse owners for tests already performed or not specifically requested by Vet-LIRN. We recommend that you discuss with your veterinarian which tests and services will be billed to you and which will be covered by Vet-LIRN. For instance, Vet-LIRN may request that your veterinarian perform a urinalysis on your pet while he or she is hospitalized. Vet-LIRN will pay for the collection and testing of the sample, but would not cover the cost of your pet's stay in the hospital.

1.6. Is the information received in the consumer complaint confidential?

Generally, the information received in the consumer complaint is not kept confidential. In most cases, only protected personal information (such as names and addresses) is withheld in an effort to prevent the complaint from being traced back to the individual who submitted it.

2. Billing:

2.1. Will Vet-LIRN pay for bills related to the case investigation?

Vet-LIRN will cover the cost of services and testing that we specifically request. You should understand that Vet-LIRN *CANNOT* reimburse owners for any veterinary bills. Services *MUST* be pre-authorized and paid directly to the veterinarian.

2.2. Will Vet-LIRN pay for testing that was not requested by Vet-LIRN?

No, we will only pay for testing that we request and authorize.

2.3. Will Vet-LIRN pay for treatments or private cremation?

No, we cannot pay for treatment or cremation.



2.4. If I allow my veterinarian to submit my pet's body for testing, will I be able to have back his or her remains?

Each Vet-LIRN member laboratory has its own procedures for handling remains. Some Vet-LIRN member laboratories offer private cremation services for a fee payable directly to the laboratory. We advise you to discuss directly with the member laboratory the possibilities and costs for obtaining your pet's remains after examination are complete.

3. Step by Step Process:

Vet-LIRN will do the following during a case investigation:

- 3.1. Assign a case number which MUST be included in all correspondences
- 3.2. Discuss the case with you and your veterinarian
- 3.3. Request medical records from your veterinarian
- 4. Coordinate with your veterinarian and you to obtain and submit samples for testing
- 3.5. Provide results to your veterinarian who will discuss the results with you.

Vet-LIRN requests that:

- 3.6. Any follow-up veterinary visits related to the investigation are reported to Vet-LIRN
- 3.7. Additional laboratory reports are reported to Vet-LIRN by your veterinarian.

4. Types of Services and Tests:

4.1. What may a veterinary examination include once the case investigation is started?

A veterinary examination may include:

- an office visit and physical examination to assess your animals current health
- collection of clinical samples from your animal (blood, urine, feces).

4.2. Will your animal be tested more than once?



It is possible that Vet-LIRN may request additional tests or examinations depending on results from initial testing.

4.3. Will Vet-LIRN need to conduct a necropsy in the event of an animal death?

Yes, if you are willing, we may request that your veterinarian or another Vet-LIRN cooperating laboratory to conduct a necropsy to collect samples for testing. The samples collected may be tested right away or may be held for future testing or archiving. If the veterinarian completes the necropsy then the remains will be handled according the veterinarians normal procedures. If a Vet-LIRN cooperative laboratory completes the necropsy the remains are usually disposed of by that laboratory. Vet-LIRN cannot pay for private cremation. You are welcome to discuss normal procedures with the laboratory.

4.4. Will Vet-LIRN ask for a food sample?

Our main focus is on testing diagnostic tissue or fluid samples from the animal, but we may need to test the food. Please hold all food samples once the consumer complaint is submitted. If needed, we will make arrangements to collect the food.

4.5. What are some general tests that Vet-LIRN may request?

General tests that we may request include, but are not limited to:

- Hematology
- Microbial cultures
- Urinalysis
- · Fecal examination
- Necropsy/Histology/Toxicology

4.6. Will I get results from Vet-LIRN requested tests?

Results of testing on your animal's diagnostic tissue or fluid samples will be forwarded to your veterinarian who will be asked to share the results with you.

Nemser, Sarah </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP From: (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=5FC1EB8D2F5944ECAA02F40E225C2054-SNEMSER> To: Jones, Jennifer L B6 11:44:34 PM Sent: Subject: FW: Necropsy authorization Forwarding this one on - DCM Sarah Nemser M.S. Vet-LIRN Network Coordinator tel: <u>240-402-0892</u> fax: 301-210-4685 sarah.nemser@fda.hhs.gov **B6** From: 12:01 PM Sent: To: Nemser, Sarah <Sarah.Nemser@fda.hhs.gov> Subject: Necropsy authorization Hi Sarah, I left a message on your number this morning but figured I would also follow up with an email. Dr. Josh Stern gave us your contact information. We have a nutrition mediated DCM case, diagnosed at UC Davis that will be euthanized this afternoon. B6 is in CHF and isn't responding to treatment. She is a 3.5yrold, FS, Golden Retriever. The owner is willing to submit the body/tissues towards research on this condition. **B6** is out of the office today. Please give me a call at your earliest convenience to discuss next steps **B6** Sincerely, ____B6

Find us on Yelp &

Facebook

Veterinary Medical Center AT TUFTS UNIVERSITY

Home Phone Work Phone: Cell Phone:

B6

Foster Hospital for Small Animals

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

All	Medical	Records
	1.00	

Patient:

Breed: English Bulldog

B6

DOB:

B6

Species: Canine Female

(Spayed)

Referring Information

B6

Client: **B6** Patient:

Initial Complaint:

Emergency

Client:

Address:

B6 SOAP Text 9:31PM -**B6**

Subjective

NEW VISIT (ER)

Doctor: B6

Student: -

Presenting complaint: Tachypnea

Referral visit? Yes

Diagnostics completed prior to visit-- radiographs, 2 view thorax, in ER email

HISTORY:

Signalment: 8 yo SF English Bulldog

Current history:

Earlier this afternoon, 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: anxiety, otherwise healthy

Current medications: B6 2mL once daily in PM, had tonight

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

ASSESSMENT:

В6

PLAN:

Diagnostics:

B6

Treatments:

B6

Diagnostics completed:

B6

Diagnostics pending:

CBC

Client: B6	
Patient:	
Chemistry BNP	
Client communication:	
	B6
Deposit & estimate status	В6
Resuscitation code (if admitti	ing to ICU) B6
SOAP approved (DVM to sign): B6 DVM
SOAP Text B6 3:38	BAM B6
SIGNALMENT: 8yo FS English	Bulldog
PRESENTING COMPLAINT: dy	rspnea
she had a hacking non product performed. No history of hea home with no concerns. Prior medical history: Current medications: Diet: Core Wellness, mix of words on presentation, P was dysproduced to the control of th	und her laying and trembling with shallow and rapid breathing. Owner also noticed that ctive cough. Has not appreciated it before today. Went to rDVM where radiographs were art or pulmonary disease. No recent vomiting or diarrhea. Has recently been doing well at B6 B6 Vet and dry, grain free diet neic and tachycardic. rDVM rads unable to be assessed as CHF vs. pneumonia, so placed in a bloodwork pulled for CBC/Chem and nt-proBNP. Minimal improvement overnight with excellent appetite and good spirits.
	B6

Client: B6
RECTAL: NP
ASSESSMENT:
A1: B6
PLAN: P1: P2: P3: P4: P5: P7:
Diagnostics completed:
B6
B6
Cardio Consult: DCM, suspect early CHF - add B6 q8
Diagnostics pending: BNP Troponin Taurine
Deposit & estimate status B6
Resuscitation code (if admitting to ICU) B6
B6 , DVM (ECC Resident) SOAP Text B6 7:43AM - Clinician, Unassigned FHSA
HISTORY:

B6 is an B6 yo FS English Bulldog that presented on B6 for sudden onset dyspnea. 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. 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

;	,					
Client: Patient:	B6					
free diet.						
placed in B6 on overnight on B6	B6 overnig with persiste	ht with bloodwor	k pulled for CBC, ut excellent appe	Chem and nt-pr tite and good sp	ssessed as CHF vs. pneum oBNP. Minimal improven irits. Cardio consult was d	nent
					alked well outside of O2 o and calmed after. Excellen	
this morning. Ha	s received	В6	so far sinc B	3		
<u>Subjective</u>						
	В6					
<u>Objective</u>						
			B6			
			DU			
		3 of the neck. Fen	noral pulses stroi		t panting. No obvious arrh zed with heawrt beat. No	-
			B6			
Diagnostics com	pleted:					
			36			
			P6			
N 4:1 1			B6	- C ·	San Falanan P	
_	•	ial enlargement w valve and to evalu			ion.Echocardiography ca	n pe
······································		B6		<u></u>		
	CM, suspect e					

Diagnostics pending:

BNP

Client: Patient: B6	
Froponin Faurine	
Assessment (A)	
B6 P	
Plan (P)	
B6	
SOAP completed by: B6 DVM	
i	
Addendum:	
B6	
SOAP Text B6 7:28AM B6	
HISTORY: B6 is an B6 p FS English Bulldog that presented on B6 for sudden onset B6 O found her laying and crembling with shallow and rapid breathing. Owner also noticed that she had a hacking non productive cough. Has reppreciated it before. Went to rDVM where radiographs were performed. No history of heart or pulmonary disease eccent vomiting or diarrhea, hasbeen doing well at home with no concerns. Was on Core Wellness dry and wet grainee diet.	e. No
On presentation to ER, P was dyspneic and tachycardic. rDVM rads unable to be assessed as CHF vs. pneumonia, so placed in O2 on B6 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 <u>B6</u> to TID, and restarted <u>B6</u> . Overnight, P had normal vitals, with RR 28-32 with no effort, but panting earlier in the night. Walks well outside, and still has excelled appetite.	
<u>Subjective</u>	
B6	
<u>Objective</u>	
B6	
J	

Client:
Patient.

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

- 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 pimobendan and Lasix q8

B6

Diagnostics pending:

Troponin

Taurine

Assessment (A)

A1: DCM and suspect early CHF vs less likely pneumonia

Plan (P)

B6

Client: B6 Patient:	
SOAP completed by: B6 SOAP reviewed by: B6	DVM
Addendum:	
B6 Disposition/Recommendations	

Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY

Lab Results Report

Client:	B6	
Veterinarian	A record and the record on the record of the record on the record of the record on the	
Patient ID:	437321	
Visit ID:		

Foster Hospital for Small Animals

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

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

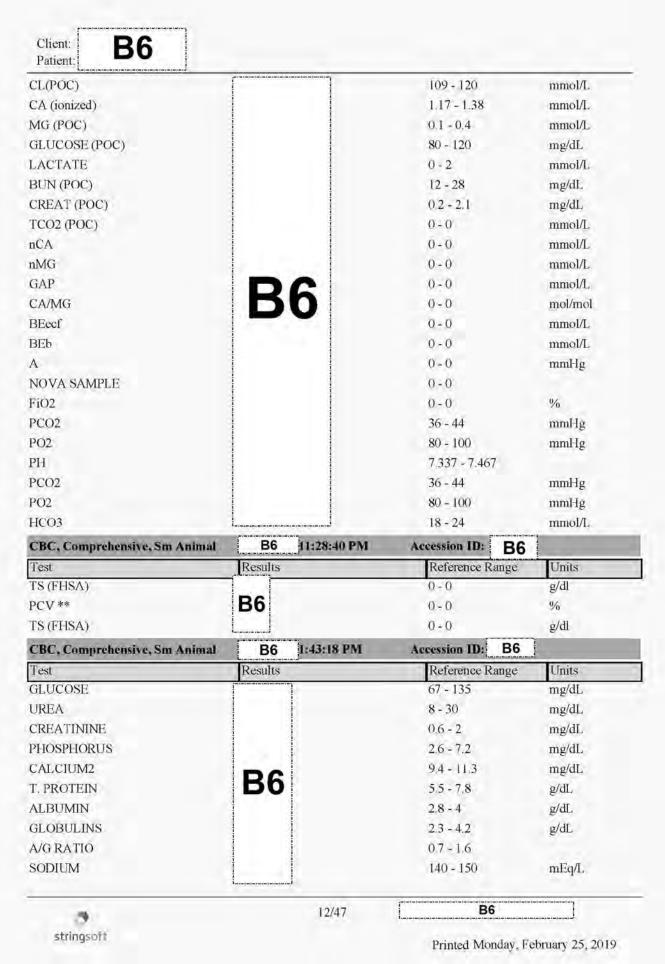
CBC, Comprehensive, Sm Animal	B6	11:21:12 PM	Accession ID: B	6
Test	Results	HI TO THE STATE OF	Reference Range	Units
WBC (ADVIA)			4.4 - 15.1	K/uL
RBC(ADVIA)			5.8 - 8.5	M/uL
HGB(ADVIA)			13,3 - 20,5	g/dL
HCT(ADVIA)			39 - 55	%
MCV(ADVIA)			64.5 - 77.5	fL.
MCH(ADVIA)			21.3 - 25.9	pg
MCHC(ADVIA)	DC		31.9 - 34.3	g/dL
RDW (ADVIA)	B6		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		19 11:21:26 PM	Accession ID: B	6
Test	Results		Reference Range	Units
GLUCOSE			67 - 135	mg/dL
UREA			8 - 30	mg/dL
CREATININE			0.6 - 2	mg/dL
PHOSPHORUS	B6		2.6 - 7.2	mg/dL
CALCIUM2			9.4 - 11.3	mg/dL
MAGNESIUM 2+			1.8 - 3	mEq/L
	-languarid	10/47	B6	
stringsoft			Printed Monday	Fabruary 25, 20

Printed Monday, February 25, 2019

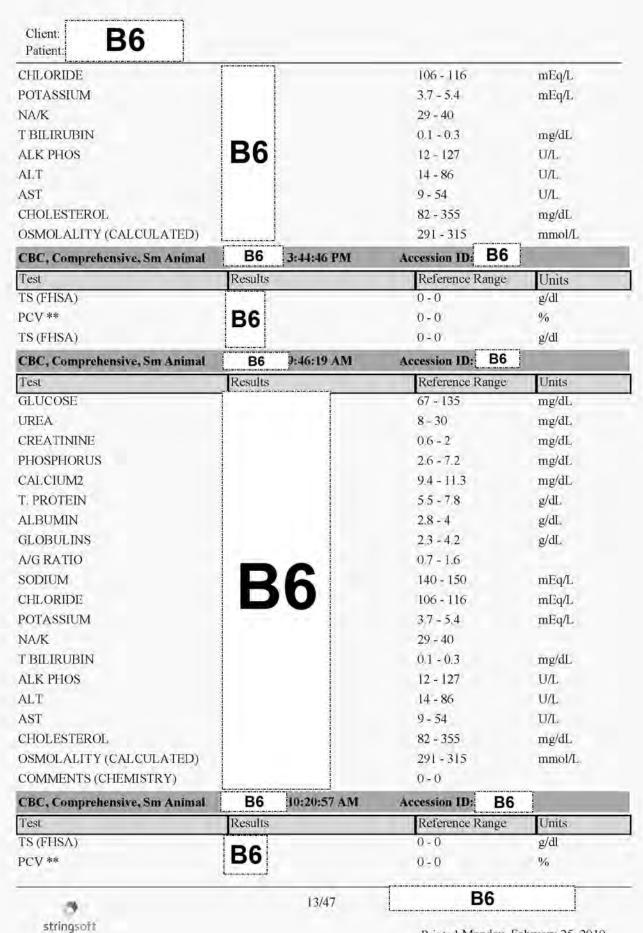
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		11/47	B6	
K(FOC)			3.0 - 4.8	mmol/L
K (POC)			3.6 - 4.8	mmol/L
NA (POC)	B6		140 - 154	mmol/I.
HB (POC)	50		12.6 - 16	g/dL
HCT (POC)			38 - 48	%
SO2%	[]		94 - 100	%
CBC, Comprehensive, Sm Animal Test	Results	11:22:25 PM	Accession ID:	(Armie) ateriales
		11-22-25 PM		B6
POIKILOCYTOSIS			0-0	
RBC MORPHOLOGY		1	0 - 0	
Occasional reactive lymphocytes		1		
WBC MORPHOLOGY			0 - 0	1,000
MONOS (ABS)ADVIA			0.1 - 1.5	K/uL
LYMPHS (ABS)ADVIA		6	1 - 4.8	K/uL
SEGS (AB)ADVIA			2.8 - 11.5	K/ul
MONOS%			1 - 15	%
LYMPHS%		1	7 - 47	%
SEGS%			43 - 86	%
Test	Results		Reference Ran	ige Units
CBC, Comprehensive, Sm Animal	B6	11:21:08 PM	Accession 1D:	B6
COMMENTS (CHEMISTRY)			0 - 0	Value Control
OSMOLALITY (CALCULATED)			291 - 315	mmol/I
AMYLASE	1	1	409 - 1250	U/L
TRIGLYCERIDES			30 - 338	mg/dl
CHOLESTEROL			82 - 355	mg/dL
CK	1		22 - 422	U/L
AST		-	9 - 54	U/L
ALT	-		14 - 86	U/L
		1		
GGT			0 - 10	U/L
ALK PHOS			12 - 127	U/L
T BILIRUBIN		6	0.1 - 0.3	mg/dL
NA/K	P	0	29 - 40	
AGAP			8 - 19	4,000
ICO2 (BICARB)			14 - 28	mEq/L
POTASSIUM			3.7 - 5.4	mEq/L
CHLORIDE			106 - 116	mEq/L
SODIUM			140 - 150	mEq/L
A/G RATIO			0.7 - 1.6	
GLOBULINS			2.3 - 4.2	g/dL
ALBUMIN			2.8 - 4	g/dL
	r	į.	5.5 - 7.8	g/dL

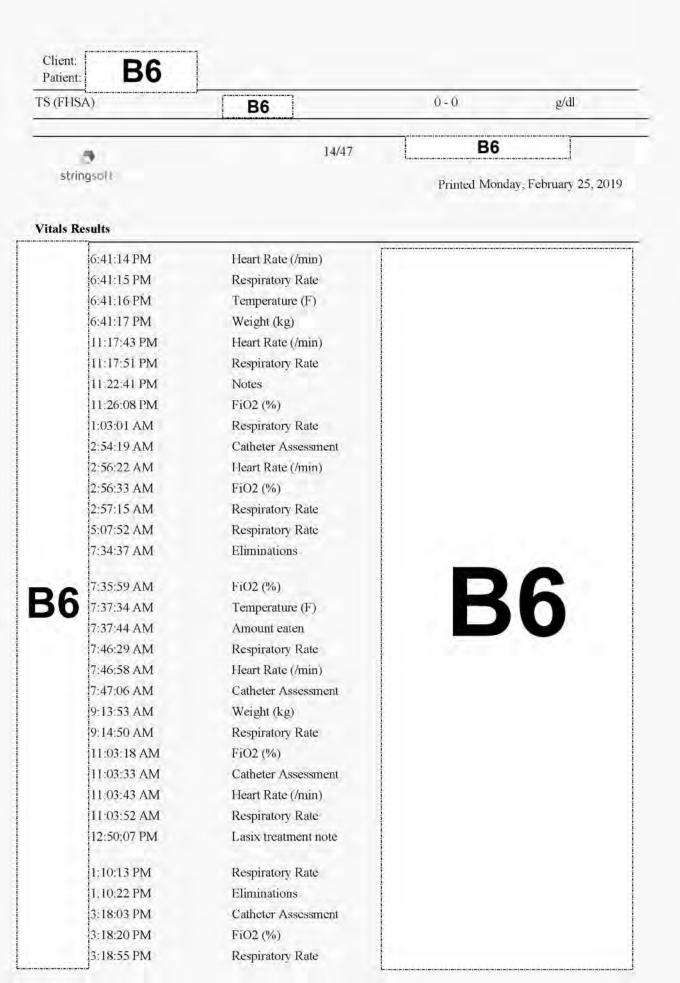
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Printed Monday, February 25, 2019



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Vitals Results

-		
	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 (%)
DC	11:49:58 PM	Respiratory Rate Respiratory Rate Lasix treatment note
B6	1:55:25 AM	Respiratory Rate
	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
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Client:
Patient:

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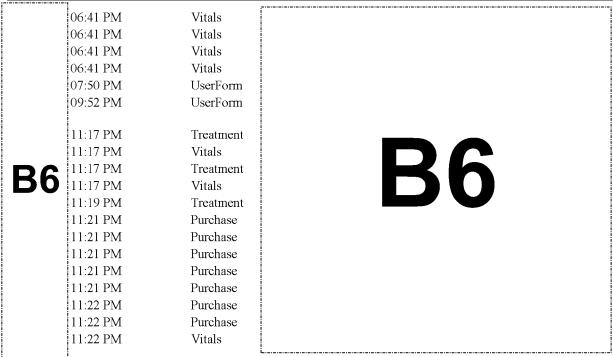
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12:42:33 PM	Heart Rate (/min)	
12:42:50 PM	Lasix treatment note	
1:52:56 PM	Heart Rate (/min)	
3:03:09 PM	FiO2 (%)	
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3:40:13 PM	Respiratory Rate	
3:55:45 PM	Eliminations	
5:04:09 PM	Respiratory Rate	
5:40:13 PM	Amount eaten	
5:52:28 PM	Eliminations	
5:54:07 PM	Respiratory Rate	
5:54:57 PM	Heart Rate (/min)	
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4:50:44 AM	Respiratory Rate	
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Vitals Results

Patient History



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Patient History

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Patient History

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Patient History

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Patient History

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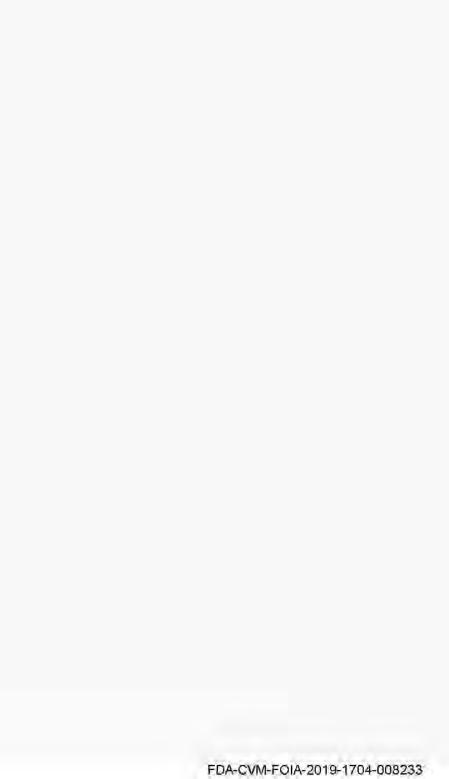
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Client:	!
Patient	į

Patient History

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B6
B6
Female (Spayed)
Canine English Bulldog Brown/White
Patient ID: 437321

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 Tults 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.

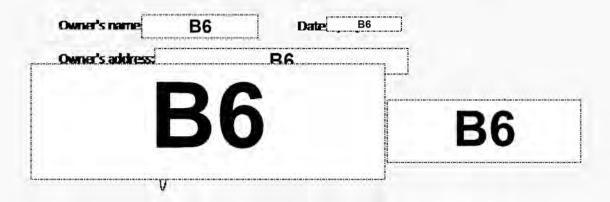
I hereby grant to the Cummings School of Veterinary Medicine at Tuffs University, its officers and employees (collectively referred to herein as Cummings School), and its agents and assigns (the Grantees) the irrevocable rights to photograph / videotape the operation or procedure to be performed, including 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.



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 described above	B6 medical serv	has granted me authority to obtain medical treatment and to bind this ices provided at Cummings School pursuant to the terms and conditions
Authorized Agent - Please Pr	int	Agent's Signature
Street Address		Date
Town/City State	2	



Treatment Plan

Folimated Chartes

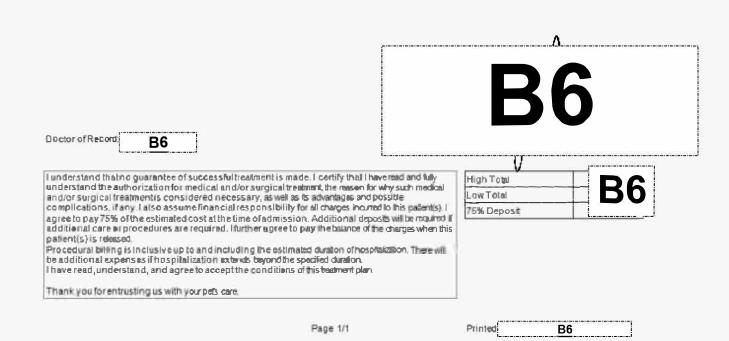
B6

Foster Hospital for Small Animals

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

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

Patient	Describe	Lowellto	Low Extended	Highlity	High Externlar
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Cummings Veterinary Medical Center

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: 86 b	Name	B6	Patient ID: 437321
Species: Canine	Address:	D¢	Date of request: B6
Brown/White Female (Spayed)		B6	
English Bulldog	01373		
Birthdate: B6			
Attending (Enician: B6	DVM (Emergen	cy & Critical CareRes	ident) Student:
Date of exam: B6			
Patient Location: Ward/Cage	:: ICU O2		Weight (kg) 19.80
	S	edation	
■ Inpatient		BAG	
Outpatient Time:		OBAG	
Waiting		1/2 dose OB	AG
■ Emergency		■ Butorphanol	
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		E Paresulesia u	o serancy are surenze
Examination Desired: 3-view	thorax (priori	tize VD/DV and L I	at)
Presenting Complaint and Cli Emergency	nical Questio	ns you wish to an	iwa:
Pertinent History:			
Be	} 		
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THORAX, THREE VIEWS:			
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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).
- Multifocal intervertebral disk disease and breed-associated vertebral anomalies.
- Moderate bilateral elbow and right stifle degenerative joint disease.

Primary:	B6	, DVM
Reviewing:	ernernen nernern	re-interit
Dates		
Reported	B6	

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	Owner		
Maine: B6	Rane:	B6	Patient ID: 437321
Species: Canine	Address	B6	
Brown/White Female (Spayed) Eng	şish <u> </u>	DO	
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beginning in the second			
Attending Cardiologist: Mohn E. Rush DVM, MS, D.	ACVIM (Cardiology), DAC	VECC	
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Cardioloev Resident:			
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Cardioloev Technician:			
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Student: B6			
Admit Date: B6 7:49:24 Pf			
Admit Date: B6 7:49:24 Pl Discharge Date: B6			
Transmission and the second			
Diagnoses: Dilated cardiomyopati	by (DCM) with congestive	heart failure	
Diagnostic test results and finding		(*(*)*(*)*(*)*(*)*(*)*(*)*(*)*(*)*(*)*(
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Case summary:			
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heart stretch was elevated, thus s			
and the second s			myopathy (DOM). This disease is more
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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 (B6, If
difficulty breathing is not improved by within 30-60 minutes after giving extr. 86 then we recommend
that a recheck exam be scheduled and/or that your dog be evaluated by an emergency dinic.
O There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on
the Tulis HeartSmart web site (http://vet.tulis.edu/heartsmart/at-home-monitoring/). O Wealso want you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the
bely 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
B 6

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 chickpeas.

The FDA issued a statement regarding this issue

(https://www.lida.gov/AnimalVeterinary/NewsEvents/CVMUpdates/ucm613305.htm) and a recent article published by Or. Lisa Freeman on the Cummings School's Petfoodology blog can further explain these findings

(http://webnubrition.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 homecocked 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 $100 \, \mathrm{m}$ 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@tuits.edu for scheduling and non-emergent questions or concerns.

Juday,				
Dr.	B6			
Please v	it our HeartSnert website for mure inflometion			
http://v	tuls edu/heaturest/			
Presuip	o Ref T Oischierer:			
For the s	iety and well-being of our patients, your pet must have had an examination by one of our veteriouriess within the pa	ьt		
yeor in c	er to obtain prescription medicaticus.			
Ondering				
	ck with your primary veteriourien to purchase the recommended diet(s). If you wish to purchase your food from us,			
please a	7-10 days in advance (508 887-4629) to ensure the food is in stock. Alternatively, veterinary diets can be ordered fr	OM)		
online re	iles with a premiplion/reterioory approval.			
Clinical i	ok:			
Clinical i	ols are studies in which our veterioury ductors work with you and your pet to investigate a specific disease process or a	ø		
promisio	new test or treatment. Please see our website: vet.tufts.edg/tvmt/faiii/sudia			
•				

B6

Discharge Instructions

Case B6

Owner.

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

Radiology Request & Report

Patient .	Owner			
Name B6	Name	B6	Patient ID: 4	ESYMMENT AS TANK HOUSE
Species: Canine	Address:	B6	Date of requ	est
Grown/White Female (Spayed)			i i	
English Building	01373			
Bithdae B6				
Attending (Grician)	B6	OVM (Resident, Ca	rdiology) S	indent B6
Date of exam:86				
Patient Location: Ward/Cage	e: Cardio, ICI	IJ	We	ight (kg) 19.60
		Sediction		
■ Inpatient		□ BAG		
Ovtpatient Time:		OBAG		
 Waiting		1/2 dose 0	RAG	
Emergency			r/Buturphanul	
- Interior in the second			to sedate/ane stho	rtizo
		E TO E SOTE ME		
TECHS TO HANDLE ONLY			o not stress furthe	r if dyspneic
Presenting Complaint and Cl Recheck rads for CHF before		are you wish to a	mwa.	
Pertinent History:				
OCM, suspected CHF on rade	В6			
Findings:				
		B6		

B6

Conditions

- Improving interstitial pulmonary pattern is consistent with response to medical management.
- Unchanged mild cardiomegaly and similar to mildly improved left atrial enlargement.
- Unchanged multifocal intervertebral disk disease and breed-associated vertebral anomalies.
- Unchannged moderate bilateral elbow degenerative joint disease.

Contract of the Contract of th	•	
Primary.	- B6	VMD
Reviewing:		
Dates		
Reported:	B6	
Finalized:		

Cardiology Liaison: 508-887-4696

B6

Patient IX: 437321

B6 Canine

B6 Years Old Female (Spayed) English
Bulklog
Brown/White BW: Weight (kg) 19.80

Cardiology Inpatient ENROLLED IN DOM 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	
P-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	The state of the s
. B	66
Muscle condition:	
Normal	Moderate cachexia
Mild muscle loss	Marked cachexia
Cardiovascular Physical Exam	
Murmur Grade: Very hard to listen de	ue to the marked dyspnea and referred upper airway.
■ None	□ IV/VI
□ I/VI	■ v/v i
□ 11/VI	■ vi/vi
□ III/VI	
Murmur location/description:	
Jugular 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	
Gallop:	
☐ Yes	Pronounced
₩ No	Other:
Intermittent	
Pulmonary assessments:	
Eupneic Eupneic	Pulmonary Crackles
Mild dyspnea	Wheezes
Marked dyspnea	Upper airway stridor
Normal BV sounds	Other auscultatory findings:
Abdominal exam: n/a	

B6 Wittel inflow: Summated Normal Delayed relaxation Restrictive B6 Assessment and recommendations: Restrictive Restrictive Restrictive Assessment and recommendations: Restrictive Restrictive Restrictive Assessment and recommendations: Restrictive Restri	☐ Normal ☐ Hepatomegaly	Abdominal distension Mild ascites
Assessment and recommendations: Pseudonormal Restrictive	chocardiogram Findings:	
B6 Section inflow: Summated Normal Delayed relacation Restrictive B6 Section of the commendations: Despite the poor quality of the echocardiogram pictures obtained today, we suspect the patient to have pulled gradiographs, but we suspect CHF to be one of the main differential despite the atypical pattern will do gradiographs, but we suspect CHF to be one of the main differential despite the atypical pattern will be infacted and improvement of the condition would be a vote of the main differential despite the atypical pattern of the main differential despite the atypical patte		B6
Fittal inflow: Summated Normal Restrictive Restrictive B 6 Assessment and resommendations: Respite the poor quality of the echocardiogram pictures obtained today, we suspect the patient to have CM with moderate to marked IA enlargement. The radiographs are very hard to interpret, typical for sulldog radiographs, but we suspect CHF to be one of the main differential despite the atypical pattern isualized. Treatment for HF should be iniated and improvement of the clinical condition would be a vote favor for CHF. Antibiotic treatment should be continued since pneumonia cannot be completely rule at the last of the clinical condition would be as well as several last of the continued since pneumonia cannot be completely rule at the last of the continued since pneumonia cannot be completely rule at the last of the continued since pneumonia cannot be completely rule at the last of the continued since pneumonia cannot be completely rule at the last of the last of the patient, as enrolled in Dr. Freeman's study due to its current grain free diet and blood was pulled today for the today. The patient, once more stable, B6 An NT-proBNP was	dderdum eam:	
Summated Normal Restrictive Re		B6
respite the poor quality of the echocardiogram pictures obtained today, we suspect the patient to have CM with moderate to marked LA enlargement. The radiographs are very hard to interpret, typical for culldog radiographs, but we suspect CHF to be one of the main differential despite the atypical pattern is unliked. Treatment for HF should be iniated and improvement of the clinical condition would be a vote favor for CHF. Antibiotic treatment should be continued since pneumonia cannot be completely rule ut. B6 was given during the echocardiogram and B6 The patient as enrolled in Dr. Freeman's study due to its current grain free diet and blood was pulled today for the tudy. The patient, once more stable, B6 An NT-proBNP was	Summated Normal Delayed relaxation	August 1 Transaction and 1 Company
Respite the poor quality of the echocardiogram pictures obtained today, we suspect the patient to have perfect the patient to have perfect the marked LA enlargement. The radiographs are very hard to interpret, typical for sulldog radiographs, but we suspect CHF to be one of the main differential despite the atypical pattern is usualized. Treatment for HF should be iniated and improvement of the clinical condition would be a vote favor for CHF. Antibiotic treatment should be continued since pneumonia cannot be completely rule out. B6 was given during the echocardiogram and B6 The patient was enrolled in Dr. Freeman's study due to its current grain free diet and blood was pulled today for the tudy. The patient, once more stable, B6 An NT-proBNP was		B6
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vas enrolled in Dr. Freeman's study due to its current grain free diet and blood was pulled today for the tudy. The patient, once more stable, B6 . An NT-pro BNP was		B6 The patient
The state of the s	\$1.5. TUTO T 20 O THE STATE OF SELECTION OF STATE OF STA	due to its current grain free diet and blood was pulled today for the
rulled and will be very interesting in order to better assess the cardiovascular status of the patient sinc here is still some suspicions that the changes seen on radiographs are not all secondary to CHF. B6	ulled and will be very interesting in	order to better assess the cardiovascular status of the patie <u>nt s</u> inc

suspected diagnosis of CHF version another disease process. A reche patient is more stable in order to well as 10-14 days after the star recommended in 3 months or so heart disease.	eck echocardiogram sho o confirm today's finding t of the cardiac medicat	uld be repeated as wel s. Bloodwork should be ons. Full recheck echo	l tomorrow once the e repeated tomorrow as cardiogram is
Addendum:	#(#1479 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1414 (#1		
	B6		
Final Diagnosis: - Suspected DCM with moderate	to marked LA enlargem	ent and suspected CHF	
Heart Failure Classification Scor	er		
ISACHC Classification:	7		
☐ la	■ Illa		
■ lb	■ ntb		
ACVIM CHF Classification:			
□ A	≥ C		
■ B1	■ D		
□ B2			
M-Mode		1	
IVSd			om
LVIDd			an
LVPWd			om
IVSs			om
LVIDs LVPWs			om
EDV(Teich)			on ml
ESV(Teich)			mi
EF(Teich)			%
%FS			%
SV(Teich)		B6	ml
M-Mode Normalized		טט	
IVSdN			(0.290 - 0.520)
LVIDdN			(1.350 - 1.730)
LVPWdN			(0.330 - 0.530)
IVSsN			(0.430 - 0.710)
LVIDsN			(0.790 - 1.140)
LVPWsN			(0.530 - 0.780)
<u>20</u>			
SALA			cm

Ao Diam		am
SA LA / Ao Diam		
IVSd		an
IVIDd		om
LVPWd		am
EDV(Teich)		ml
IVSs		om
LVIDs	Ball	am
LVPWs	B6	om
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)		ml
IVSd		am
LVIDd		cm
EDV(Teich)	1	ml
LVPWd		am



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

Notice of Patient Admit

Date: B6 7:49:24 PM Referring Doctor: B6	Case No: 437321	
Client Name B6		
Dear B6		
Your patient presented to our Emergency service. Ples communication with our team.	ase make note of the following information to facilitate	
The attending doctor is: B6		
The reason for admission to the FHSA is: Dyspne	sa (pneumonia > CHF)	
If you have any questions regarding this particular ca: Information is updated daily, by noon.	se, please call 508-887-4988 to reach the ICU Service.	

AT TUFTS UNIVERSITY

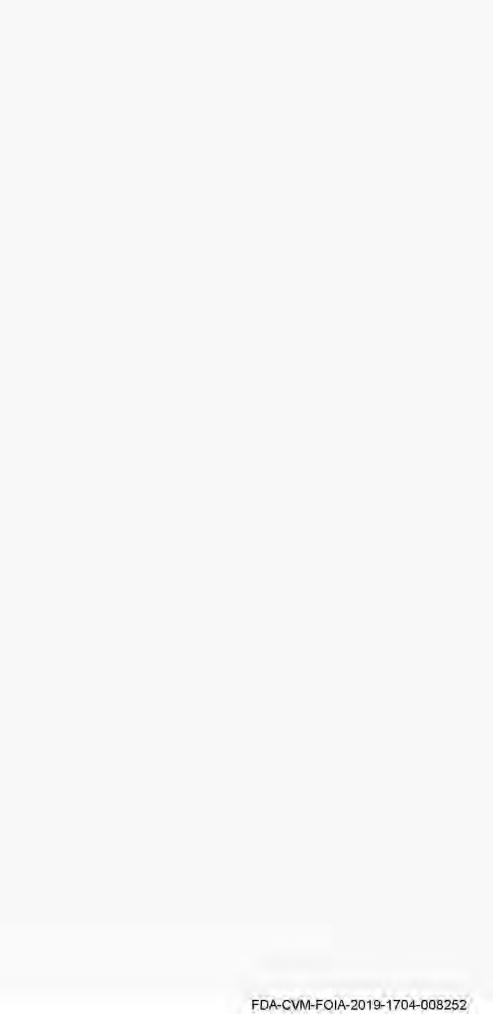


Foster Hospital for Small Animals 55 Willard Street Horth Grafton, MA 0156 Telephone (508) 839-5395 Fax (508) 839-7951 http://vetmed.tu/ts.edu/Chloe

B6 Female (Spayed)
Canine English Bulldog
Grown/White
437321

Daily Update From the Cardicley Service

Today's date: 💹	_B6				
Today's date: Dear Drs at	B6	16			
Thank you for refe University.	sving patie	ents to the Foster	r Hospital for Small An	imals at the Comm	ings School of Tuft
Your patient	B6	was admitted	and isbeing cared for	by the Cardiology !	Service.
Today, B6					
∭ is in stable ☐ is still in th ☐ is critically ☐ discharge	e oxygen (ill				
Today's treatment	s incl ude :				
📃 cardiac ca	pgraphy - (OCM and L-CHF cedure planned			
ongoing tr ongoing tr ongoing tr	eatment fo	r thrombosis			
Addi tionalplans: Please allow 3-5 b	usiness da	ys for reports to	be finalized upon pati	ent discharge.	
Please call (508) 8 Thank you!	87 -46 96 bo	efore 5pm or em	ail us at extensión	fsab if you have	e any questions.
Attending Clinician	14	B6	DVM (Resident,	Cardio logy)	
Faculty Clinician:	lohn Rush	DVM, DACVIM, I	DACVECC		
Senior student:					



B6

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)
Canine English Buildog
Brown/White
437321

1/21/2019

Dear Dr.	В6			
Thank yo	u for referring	В6	with their pet B6	
lf you hav	re any questions	s, or concerns,	, please contact us at 508-8	87-4988.
Thank yo	u,			
Dr	В6)VM (Re	sident, Cardiology)	

From: Freeman, Lisa <Lisa.Freeman@tufts.edu>

To: Jones, Jennifer L **Sent:** 3/1/2019 9:50:52 PM

Subject: FW: taurine results for B6

Attachments: Stern Lab Taurine Recommendations.pdf; T_27754.pdf; UCD Diet and DCM Handout.pdf

FYI

B6 3 bulldogs from same household and on same diet
DCM and CHF had B6 plasma and B6 WB

B6 - with ARVC and arrhythmias had B6 and B6
this most recent one (likely ARVC) was B6 and B6

Lisa

Lisa M. Freeman, DVM, PhD, DACVN
Board Certified Veterinary NutritionistTM
Professor
Cummings School of Veterinary Medicine
Friedman School of Nutrition Science and Policy
Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org



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

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.

From: Freeman, Lisa <Lisa.Freeman@tufts.edu>

 To:
 Jones, Jennifer L

 Sent:
 B6
 5:29:55 PM

Subject: B6 - time sensitive

Importance: High

Hi Jen

I also left you a voice message but I just heard that B6 died suddenly B6 This is one of at least 3 dogs in the household affected by DCM eating the same diet. We're actually scheduled to see the 3 dogs tomorrow and to evaluate a 4th dog in the household that has an elevated BNP. So, this is a particularly interesting household.

The referring vet contacted me and said the owner is bringing **B6** n for cremation. He will ask if he can get samples for you but we'd need to know what tissues to get, how to store them, etc.

Please let me know next steps Thanks Lisa

Lisa M. Freeman, DVM, PhD, DACVN
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Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org
508-887-4523

From: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Sent: Tuesday, March 26, 2019 1:50 PM **To:** Freeman, Lisa <Lisa.Freeman@tufts.edu>

Subject: RE: Cobalt

Hi Lisa,

We based this on the 25 mg/kg diet for chicks, rats, and sheep per Mineral Tolerances of Animals 2nd Ed, 2005 (NRC). The cobalt in the products we tested was below 1 ppm.

Hope you're well,

Jen

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



From: Freeman, Lisa < Lisa.Freeman@tufts.edu > Sent: Saturday, March 23, 2019 11:43 AM

To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Subject: Cobalt

Hi Jen

In the Feb, 2019 Vet-LIRN report, it states that cobalt was tested in the diets and was within normal nutrient

ranges recommended by AAFCO. Since Co is not an essential nutrient listed in the AAFCO profiles, are you using the max of 10 ppm that is for all species from AAFCO (ie, the level that "will not impair animal performance and should not produce unsafe residues in human food derived from that animal"?

Thanks, Lisa

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Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org

From: Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP

(FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-

DROTSTEI>

 To:
 Jones, Jennifer L

 CC:
 Peloquin, Sarah

 Sent:
 B6 5:51:07 PM

Subject: RE: B6 - time sensitive

Jen,

I guess from my point of view, having an additional case would be helpful as I think some of the cases that I looked at will fall out of the counting.

I agree it's a predisposed breed, so perhaps it may make a good comparison (though I suspect we won't see a huge difference).

I will go the way of the consensus (three on the email (3))

Dave

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





This e-mail message is intended for the exclusive use of the recipient(s) named above. It may contain information that is protected, privileged, or confidential, and it should not be disseminated, distributed, or copied to persons not authorized to receive such information. If you are not the intended recipient, any dissemination, distribution, or copying is strictly prohibited. If you think you received this e-mail message in error, please e-mail the sender immediately at david.rotstein@fda.hhs.gov.

From:	<u>Jones,</u>	<u>Jennifer</u>	L			
Sent:		B6	≥	:43 PM		
To: Ro	tstein, [David <d< th=""><th>avid.Rc</th><th>tstein@</th><th>fda.hh</th><th>s.gov></th></d<>	avid.Rc	tstein@	fda.hh	s.gov>
Cc: Pe	loquin,	Sarah <	Sarah.P	<u>e</u> loquin	@fda.h	hs.gov
Subject	ct: FW:	В	6	- time	sensiti	ve
Import	:ance: ˈi	High		i		

Dave,
I know we're chatting Thursday about the results and next steps.

B5

You're looking at the histo, though, what do you think?

You're looking at the histo, though, what do you think? Jen

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



From: Freeman, Lisa < Lisa. Freeman@tufts.edu>

Sent: B6 2:30 PM

To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Subject: B6 - time sensitive

Importance: High

Hi Jen

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Please let me know next steps Thanks Lisa

Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary NutritionistTM Professor **Cummings School of Veterinary Medicine** Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org 508-887-4523

From: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Sent: Tuesday, March 26, 2019 1:50 PM

To: Freeman, Lisa < Lisa. Freeman@tufts.edu>

Subject: RE: Cobalt

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We based this on the 25 mg/kg diet for chicks, rats, and sheep per Mineral Tolerances of Animals 2nd Ed, 2005 (NRC). The cobalt in the products we tested was below 1 ppm.

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Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421 DA U.S. FOOD & DRUG



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To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

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Thanks, Lisa

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Jones, Jennifer L </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP From: (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0F6CA12EAA9348959A4CBB1E829AF244-JENNIFER.JO> To: Freeman, Lisa CC: Peloquin, Sarah Sent: B6 11:05:51 AM time sensitive (cc-297) Subject: RE: Thank you, Lisa. I see Jake sent you the necropsy procedures. Yes, we can work on a prioritized list for veterinarians collecting limited tissue sets. We can also have veterinarians freeze the bodies until we send them supplies (esp. if large intact hearts). veterinarian contact me directly to coordinate the sample collection and reimbursement. Please havi **B6** I'll be at my desk until 3 pm. Jennifer Jones, DVM Veterinary Medical Officer Tel: 240-402-5421 DA U.S. FOOD & DRUG ADMINISTRATION From: Freeman, Lisa < Lisa. Freeman@tufts.edu> Sent: <u>B6</u> 2:30 PM To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov> Subject: _____ - time sensitive Importance: High Hi Jen I also left you a voice message but I just heard that B6 died suddenly This is one of at least 3 dogs in the household affected by DCM eating the same diet. We're actually scheduled to see the 3 dogs tomorrow and to evaluate a 4th dog in the household that has an elevated BNP. So, this is a particularly interesting household. The referring vet contacted me and said the owner is bringing **B6** in for cremation. He will ask if he can get samples for you but we'd need to know what tissues to get, how to store them, etc. Please let me know next steps Thanks Lisa Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary NutritionistTM Professor **Cummings School of Veterinary Medicine** Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org

From: Jones, Jennifer L < <u>Jennifer.Jones@fda.hhs.gov</u>>

Sent: Tuesday, March 26, 2019 1:50 PM **To:** Freeman, Lisa <Lisa.Freeman@tufts.edu>

508-887-4523

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Tel: 240-402-5421



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Tufts University
www.petfoodology.org

From: To: Sent: Subject: Importance:	Freeman, Lisa <lisa.freeman@tufts.edu> Peloquin, Sarah B6 6:32:46 PM FW: B6 - time sensitive High</lisa.freeman@tufts.edu>
Hi Sarah Got a message that Je permission Thanks Lisa	n is out today so wanted to see how we can get samples assuming owner gives
	ary Nutritionist TM
From: Freeman, Lisa Sent: B6 To: Jones, Jennifer L < Subject: B6 Importance: High	2:30 PM SJennifer.Jones@fda.hhs.gov> - time sensitive
of at least 3 dogs in the	nessage but I just heard that B6 died suddenly B6 This is one household affected by DCM eating the same diet. We're actually scheduled to see the 3 evaluate a 4 th dog in the household that has an elevated BNP. So, this is a particularly
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	ary Nutritionist TM

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To: Freeman, Lisa < Lisa. Freeman@tufts.edu >

Subject: RE: Cobalt

Hi Lisa,

We based this on the 25 mg/kg diet for chicks, rats, and sheep per Mineral Tolerances of Animals 2nd Ed, 2005 (NRC). The cobalt in the products we tested was below 1 ppm.

Hope you're well,

Jen

Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421



From: Freeman, Lisa < Lisa.Freeman@tufts.edu>

Sent: Saturday, March 23, 2019 11:43 AM

To: Jones, Jennifer L < Jennifer.Jones@fda.hhs.gov>

Subject: Cobalt

Hi Jen.

In the Feb, 2019 Vet-LIRN report, it states that cobalt was tested in the diets and was within normal nutrient ranges recommended by AAFCO. Since Co is not an essential nutrient listed in the AAFCO profiles, are you using the max of 10 ppm that is for all species from AAFCO (ie, the level that "will not impair animal performance and should not produce unsafe residues in human food derived from that animal"?

Thanks, Lisa

Lisa M. Freeman, DVM, PhD, DACVN
Board Certified Veterinary NutritionistTM
Professor
Cummings School of Veterinary Medicine
Friedman School of Nutrition Science and Policy
Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org

Freeman, Lisa <Lisa.Freeman@tufts.edu> From: Jones, Jennifer L To: CC: Peloquin, Sarah Sent: _____в6___11:13:21 AM RE: **B6** - time sensitive (cc-297) Subject: Thanks, Jen I think that would be helpful. These obviously happen with no warning so that would be great to have ready to tell vets. Including the option of freezing on that same sheet would be great. These owners wanted to get the body back for cremation so this seemed like the best option. I heard last night that the owners gave permission for sample collection and B6 was going to take the heart and some liver If you could send him a box for shipping, that would be great We'll be seeing the other 3 dogs in the household today Thanks Lisa Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary NutritionistTM Professor Cummings School of Veterinary Medicine Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org From: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov> Sent: B6 7:06 AM To: Freeman, Lisa < Lisa. Freeman@tufts.edu> Cc: Peloquin, Sarah <Sarah.Peloquin@fda.hhs.gov> Subject: RE: B6 - time sensitive (cc-297) Thank you, Lisa. I see Jake sent you the necropsy procedures. Yes, we can work on a prioritized list for veterinarians collecting limited tissue sets. We can also have veterinarians freeze the bodies until we send them supplies (esp. if large intact hearts). veterinarian contact me directly to coordinate the sample collection and reimbursement. Please have

I'll be at my desk until 3 pm.

Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421





From:	Freeman,	Lisa < <u>Li</u>	sa.F	reem	an@t	ufts.∈	<u>edu</u> >
Sent: [B6]2:30	PM		
To: Joi	nes, Jenni	fer L <je< th=""><th>nnif</th><th><u>er.Jor</u></th><th>nes@</th><th>fda.h</th><th><u>hs.gov</u>></th></je<>	nnif	<u>er.Jor</u>	nes@	fda.h	<u>hs.gov</u> >
Subjec	ct: E	36	ስ - t	ime s	ensiti	ve	

Importance: High

Hi Jen
I also left you a voice message but I just heard that B6 died suddenly B6 This is one of at least 3 dogs in the household affected by DCM eating the same diet. We're actually scheduled to see the 3 dogs tomorrow and to evaluate a 4th dog in the household that has an elevated BNP. So, this is a particularly

interesting household.

The referring vet contacted me and said the owner is bringing **B6** in for cremation. He will ask if he can get samples for you but we'd need to know what tissues to get, how to store them, etc.

Please let me know next steps Thanks Lisa

Lisa M. Freeman, DVM, PhD, DACVN
Board Certified Veterinary NutritionistTM
Professor
Cummings School of Veterinary Medicine
Friedman School of Nutrition Science and Policy
Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org
508-887-4523

From: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Sent: Tuesday, March 26, 2019 1:50 PM To: Freeman, Lisa < Lisa. Freeman@tufts.edu >

Subject: RE: Cobalt

Hi Lisa,

We based this on the 25 mg/kg diet for chicks, rats, and sheep per Mineral Tolerances of Animals 2^{nd} Ed, 2005 (NRC). The cobalt in the products we tested was below 1 ppm.

Hope you're well,

Jen

Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421





From: Freeman, Lisa < <u>Lisa.Freeman@tufts.edu</u>> Sent: Saturday, March 23, 2019 11:43 AM

To: Jones, Jennifer L < Jennifer.Jones@fda.hhs.gov>

Subject: Cobalt

Hi Jen,

In the Feb, 2019 Vet-LIRN report, it states that cobalt was tested in the diets and was within normal nutrient ranges recommended by AAFCO. Since Co is not an essential nutrient listed in the AAFCO profiles, are you using the max of 10 ppm that is for all species from AAFCO (ie, the level that "will not impair animal performance and should not produce unsafe residues in human food derived from that animal"?

Thanks, Lisa

Lisa M. Freeman, DVM, PhD, DACVN
Board Certified Veterinary NutritionistTM
Professor
Cummings School of Veterinary Medicine
Friedman School of Nutrition Science and Policy
Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org

ICSR:	·				************	
	2059621					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with th	ne product)		
Reporting Type:	Voluntary					
Report Submission Date:	2018-12-04 17:59:30 EST					
Reported Problem:	Problem Description:			d subjectively reduced contractility; ele turine pending Owner changing diet an		
	Date Problem Started:	11/20/2018			100000000000000000000000000000000000000	
	Concurrent Medical	No				
	Problem:					
	Outcome to Date:	: Stable				
Product Information:	Product Name:	Earthborn Meadow F	⁼ east dry			
	Product Type:	pe: Pet Food				
	Lot Number:					
	Package Type:	:: BAG				
	Product Use					
	Information:					
	Manufacturer /Distributor Information:					
	Purchase Location Information:	NO. 0				
Animal Information:	Name:	B6				
	Type Of Species:	Dog				
	Type Of Breed:	: Boxer (German Boxer)				
	Gender:	r: Female				
	Reproductive Status:	ı: Intact				
	Pregnancy Status:	Not pregnant				
	Lactation Status:	Not lactating				
	() 	30.3 Kilogram				
	Age:	3 Years				
	Assessment of Prior Health:					
	Number of Animals Given the Product:	5				
	Number of Animals Reacted:	4				
	Owner Information:	Owner Information provided:	Yes			
		Contact:	Name:	B6		
			Phone:	В6		
			Email:	B6		
		Address:	7 times and the second	1		
			B6			
			United States			
	Healthcare Professional	Practice Name:	Tufts Cummings	School of Veterinary Medicine		
	Information:	Contact:	, 	Lisa Freeman		

			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:		
	Preferred Method Of Contact:		
Additional Documents:			
	Attachment:	rpt_medical_record_	preview.pdf
	Description:	Medical records	
	Type:	Medical Records	

Report Details - EON-	5					
ICSR:	2059624					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom,	reaction or disease a	associated with th	ie product)		
Reporting Type:	Voluntary					
Report Submission Date:	2018-12-04 18:12:06 EST					
Reported Problem:	Problem Description:	Littermate diagnosed with reduced cardiac contractility Eating BEG diet (Earthborn) so screened all housemates Subjectively reduced contractility on echo and elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months				
	Date Problem Started:	11/20/2018				
	Concurrent Medical Problem:					
	Outcome to Date:	Stable				
Product Information:	Product Name:	Earthborn Meadow F	east dry			
	Product Type:	Pet Food				
	Lot Number:					
	Package Type:	BAG				
	Product Use Information:	Description: See diet history in medical record for more info				
	Manufacturer /Distributor Information:					
	Purchase Location Information:					
Animal Information:	Name:	В6				
	Type Of Species:					
	Type Of Breed:	: Boxer (German Boxer)				
	Gender:	Male				
	Reproductive Status:	Neutered				
	Weight:	30.3 Kilogram				
	Age:	3 Years				11011111111111111111111111111111111111
	Assessment of Prior Health:	Tenda Tenda Tenda				
	Number of Animals Given the Product:	5				
	Number of Animals Reacted:	4				
	Owner Information:	Owner Information provided:	Yes			
		Contact:	Name:	B6		
			Phone:	В6		
			Email:	B6		
		Address:	B6			
			United States			
	Healthcare Professional	i iudiido ituilio:	,	School of Veteri	nary Medicir	16
	Information:	Contact:	Phone: (_isa Freeman (508) 887-4523 isa.freeman@tuft		

		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:			
Accessed to the second	Attachment:	B6	records.pdf
	Description:	Medical records	
	Type:	Medical Records	

Foster Hospital for Small Animals

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

Client:	
Address:	B6

Home Phone:	B6
Work Phone:	() -
Cell Phone:	B6

All	Medical	Record	5

Patient:	B6
Breed:	Boxer
DOB:	B6

Species: Canine Sex: Male (Neutered)

	B6	
ent: B6		
al Complaint:		
ned Record		
AP Text Nov 20 2018 12:22PM	B6	
	Болом (по том состоя (по том состоя по том би	
ial Complaint		
100 20 20 10 12 12 11	Lancacione de la constanta de	
i <mark>al Complaint:</mark> M Study		

AT TUFTS UNIVERSITY

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:	Boxer	
Sex:	Male (Neutered)	
Age:	B6 Years Old	

	11/20/2018 5:45:23 PM	Accession ID: B6	
Test	Results	Reference Range	Units
Proponin I Research - FHSA	B6	0 - 0.08	mg/dl

stringsoft

B6 B6 3/13

Printed Tuesday, December 04, 2018

IDEXX BNP - 11/20/2018



CARDIAC TROPONIN/TEXGI SST 11/20/18



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

Tufts, University-Clinical Pathology Lab Attn: B6 200 Westboro Road North Grafton, MA 01536 USA

Phone: Fax:

508 887 4669 9 508 839 7936

Animal Name: Owner Name:

B6

Species: Date Received:

Canine Nov 27, 2018

Tufts University-Clinical Pathology Lab Tracking Number: 1811200093

GI Lab Accession

B6

Ultra-Sensitive Troponin I Fasting B6 no/mL

Reference Interval

Assay Date 11/27/18

Result

Comments:

B6

11/20/2018 1:18 PM CARDIAC TROPONIN/TEXGI

GI Lab Contact Information

Phone: (979) 862-2861 Fax: (979) 862-2864

Email: gilab@cvm.tamu.edu vetmed.tamu.edu/gilab

CARDIAC TROPONIN/TEXGI SST 11/20/18



Gastrointestinal Laboratory

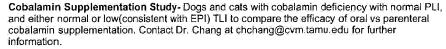
Dr. J.M. Steiner

Department of Small Animal Clinical Sciences Texas A&M University 4474 TAMU

College Station, TX 77843-4474



Ongoing studies



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 naïve 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 information.

Dogs with Chronic Pancreatitis-Dogs with chronic pancreatitis (cPLi >400µg/L) and hypertriglyceridemia (>300 mg/dl) 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://tinyurl.com/ibd-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. Yamkate 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: gilab@cvm.tamu.edu vetmed.tamu.edu/gilab

Diet hx

			CARDIOLOGY lease answer the folio	DIET HISTOR			
-	's name: E	36	Owner's na				ZO NOV ZOT
	How would you a	ssess your p	et's appetite? (mark the p				
		001				ellent	no opposito,
	F	00r			Exc	ellent	
	DEats about the	same amoun	your pet's appetite over t t as usual Eats les ds than usual Other	s than usual	? (check all that DEats more tha	apply) n usual	
	Over the last few Lost weight	weeks, has y Gained wei	rour pet (check one) ght Stayed about the	same weight E	Don't know		
	currently eats. Ple	ease include	s, people food, treats, so the brand, specific produ	ct, and flavor so v	ve know exactly v	vhat you pet is e	eating.
			nie – please provide enou				
	Nutro Grain Erna	Chicken Lov	product and flavor) httl, & Sweet Potato Adult	Form	Amount 1 1/2 cup	How often?	Fed since Jan 2018
	85% lean hambur		iui, a Sweet Foldio Adult	microwaved	3 oz	2x/day 1x/week	Jan 2018 Jan 2015
	Pupperoni origina			treat	1/2	1x/day	Aug 2015
	Rawhide	BOO! HOVO!		treat	6 inch twist	1x/week	Dec 2015
	FARTHBORN	- MEAN	DPEAST	DEY	~ 14zc +	2x DAY	FPS 2016
	*Any additional di	et informatio	a can be listed on the bac	k of this sheet			
	Do you give any o supplements)?	lietary supple	ements to your pet (for ex lo If yes, please list wh Brand/	ample: vitamins, lich ones and give Concentration	glucosamine, fatt e brands and amo	ounts:	other ount per day
	Taurine	□Yes □					
	Carnitine	□Yes □				_	
	Antioxidants Multivitamin	□Yes □N				-	
	Fish oil	OYes ON			_	_	
		□Yes □N				-	
	Other (please list)						
	Example: Vitamin	C	NUPRO - DOG	ture's Bounty		500 mg table	ets - 1 per day
	How do you admi	y medication					
	□ I put them in m □ Lout them in a	y pet's dog/c Pill Pocket or	at food	- CHEESE			

Client: Patient:

B6

ECG from Cardio

B6

11/20/2018 3:27:51 PM Tufts University

Tufts University Tufts Cummings School of Vet Med Cardiology



B6

11/20/2018 3:28:15 PM

Page 1 of 2

Tufts University Tufts Cummings School of Vet Med Cardiology



ECG from Cardio

B6

11/20/2018 3:28:15 PM

Page 2 of 2

Tufts University Tufts Cummings School of Vet Med Cardiology

B6

Patient History

11/20/2018 11:45 AM	Appointment
11/20/2016 11.43 AIVI	Appointment
11/20/2018 12:23 PM	UserForm
11/20/2018 01:11 PM	UserForm
11/20/2018 04:04 PM	Purchase
11/20/2018 04:04 PM	Purchase
11/20/2018 04:04 PM	Purchase
11/20/2018 04:55 PM	Treatment
11/20/2018 05:45 PM	Labwork
11/20/2018 05:46 PM	Purchase
11/21/2018 11:25 AM	UserForm
11/26/2018 11:33 AM	Email

B6

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 Box	er Fawn
433149	

11/22/2018			
Dear B6			
Thank you for referring	В6	with their pet	B6
If you have any question	is, or concern	rs, please contact	us at 508-887-4988
Thank you,			
В6	DVM, DACV	DM (Cardiology)	

Report Details - EON-	5						
ICSR:	2059624						
Type Of Submission:	Initial						
Report Version:	FPSR.FDA.PETF.V.V1						
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)						
Reporting Type:	Voluntary						
Report Submission Date:	2018-12-04 18:12:06 EST						
Reported Problem:	Problem Description:	Littermate diagnosed with reduced cardiac contractility Eating BEG diet (Earthborn) so screened all housemates Subjectively reduced contractility on echo and elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months					
	Date Problem Started:	11/20/2018					
	Concurrent Medical Problem:						
	Outcome to Date:	Stable					
Product Information:	Product Name:	Earthborn Meadow F	east dry				
	Product Type:		7				
	Lot Number:						
	Package Type:						
	Product Use Information:	Description:	See diet history	in medical record for	more info		
	Manufacturer /Distributor Information:						
	Purchase Location Information:						
Animal Information:	Name:	B6					
	Type Of Species:	;; Dog					
	Type Of Breed:	d: Boxer (German Boxer)					
	Gender:	r. Male					
	Reproductive Status:	Neutered					
	Weight:	:: 30.3 Kilogram					
	Age:	: 3 Years					
	Assessment of Prior Health:	THE CONTROL OF THE CO					
	Number of Animals Given the Product:	5					
	Number of Animals Reacted:	4					
	Owner Information:	Owner Information provided:	171.77				
		Contact:	Name:	В6			
			Phone:	B6			
			Email:	B6			
		Address:					
			B6				
			United States	i			
	Healthcare Professional	Practice Name:	Tufts Cummina	s School of Veterinan	v Medicine		
	Information:	Contact:	? 	Lisa Freeman	,		
			Phone:	(508) 887-4523			
			Email:	lisa.freeman@tufts.e	du		

Sender Information: Address: 200 Westboro Rd North Grafton Massachusetts 01536 United States	
North Grafton Massachusetts 01536 United States Contact: Phone: 5088874523 Email: lisa.freeman@tufts.edu Permission To Contact Sender: Preferred Method Of Contact: Additional Documents:	
Permission To Contact Sender: Preferred Method Of Email Contact: Additional Documents:	
Permission To Contact Yes Sender: Preferred Method Of Email Contact: Additional Documents:	
Sender: Preferred Method Of Email Contact: Additional Documents:	
Contact: Additional Documents:	
AND THE PROPERTY OF THE PROPER	
Attachment: B6 records.pdf	
Description: Medical records	
Type: Medical Records	

Report Details - EON-	380707					
ICSR:	2063114					
	Initial					
Type Of Submission:	75 15 17					
Report Version:	FPSR.FDA.PETF.V.V1 Adverse Event (a symptom, reaction or disease associated with the product)					
Type Of Report:		reaction or disease a	associated with the product)			
Reporting Type:	Voluntary					
Report Submission Date:	-4 	*				
Reported Problem:	Problem Description:	controlled Eating Pu reporting just in case months 2 other dogs	nosed Aug 2018 We saw 1/11/19 - CHF still not well rina Lamb and Rice - unlikely to be associated with DCM but when we consider the Owner is now changing to different diet and will recheck in 3 seating same diet - we have not screened them yet. BNP = but taurine normal (B6 plasma, B6 whole blood)			
	Date Problem Started:	08/01/2018				
	Concurrent Medical Problem:	No				
	Outcome to Date:	Worse/Declining/Det	teriorating			
Product Information:	Product Name:	Purina One Smart B	lend Lamb and Rice dry			
	Product Type:	7	•			
	Lot Number:	4 2 2 2 2 4 4 7				
	Product Use Information:	Description:	1/2 cup twice daily since a puppy See diet history for additional details			
	Manufacturer /Distributor Information:					
	Purchase Location Information:	4				
Animal Information:	Name:	B6				
	Type Of Species:	1				
		Doberman Pinscher				
	Gender:	5				
	Reproductive Status:	{				
	3}	29.9 Kilogram				
		B6 Years				
	Assessment of Prior Health:	ž				
	Number of Animals Given the Product:	3				
	Number of Animals Reacted:	1				
	Owner Information:	Owner Information provided:	Yes			
		Contact:	Phone: B6			
		Address:	R6			
			United States			
	Healthcare Professional Information:	Practice Name:	Tufts Cummings School of Veterinary Medicine			
	miormation;	Contact:	Name: Lisa Freeman			
			Phone: (508) 887-4523			
			Email: lisa.freeman@tufts.edu			

Sender Information: Address: ddress: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Address: Add			Address:	200 West North Gra Massacht 01536 United Sta	afton usetts	
North Grafton Massachusetts 01536 United States Contact: Phone: 5088874523 Email: lisa.freeman@tufts.edu Permission To Contact Sender: Preferred Method Of Contact: Preferred Method Of Contact: Medicional Documents: Attachment: rpt_medical_record_preview B6 pdf Description: Medical records	ender Information:					
Permission To Contact Yes Sender: Preferred Method Of Email Contact: dditional Documents: Attachment: rpt_medical_record_preview B6 pdf Description: Medical records		Address:	North Grafton Massachusetts 01536			
Permission To Contact Yes Sender: Preferred Method Of Contact: Additional Documents: Attachment: rpt_medical_record_previev B6 pdf Description: Medical records		Contact:	Phone:	50888745	23	
Sender: Preferred Method Of Email Contact: dditional Documents: Attachment: rpt_medical_record_preview B6 pdf Description: Medical records			Email:	lisa,freem	an@tufts.edu	
Preferred Method Of Email Contact: dditional Documents: Attachment: rpt_medical_record_preview B6 pdf Description: Medical records			Yes			
Attachment: rpt_medical_record_previev B6 pdf Description: Medical records		Preferred Method Of	Email			
Description: Medical records	dditional Documents:			p-1000p-1	но-тио-тио-тиод	
				previev	B6 pdf	
Type: Medical Records		Description:	Medical records			

Report Details - EON-	380709					
ICSR:	2063117					
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 17:31:22 EST					
Reported Problem:	Problem Description:	referred to us for studiet related. Screene and their hearts were	dy. Eating Fromm Lg ed other 2 standard p	VM. Echoed by another cardiologist who Breed Adult (not grain free) so unclear if oodles in household eating same diet changed diet for all 3 dogs to lams iths		
	Date Problem Started:	01/29/2019				
	Concurrent Medical Problem:	Yes				
	Pre Existing Conditions:		B	6		
	Outcome to Date:	Stable				
Product Information:	Product Name:	Fromm Large Breed	Adult dry			
	Product Type:	e: Pet Food				
	Lot Number:	K				
	Package Type:	e: BAG				
	Product Use Information:	Description:	Please see diet histo	ory for additional details		
	Manufacturer /Distributor Information:					
	Purchase Location Information:					
Animal Information:	Name:	В6				
	Type Of Species:	Dog				
	Type Of Breed:	Poodle - Standard				
	Gender:	Male				
	Reproductive Status:	Neutered				
	Weight:	24 Kilogram				
	Age:	16 Years				
	Assessment of Prior Health:	Good				
	Number of Animals Given the Product:	3				
	Number of Animals Reacted:	1				
	Owner Information:	Owner Information provided:	Yes			
		Contact:	Name:			
			Phone:	B6		
			Email:			
		Address:	DC			
			B6 United States			
	Healthcare Professional Information:	Practice Name: Contact:		hool of Veterinary Medicine Freeman		

			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Additional Documents:			
	Attachment:	rpt_medical_record_	preview.pdf
	The state of the s	Medical records	
	Type:	Medical Records	

Report Details - EON-	380709		
ICSR:	2063117		
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 17:31:22 EST	
Reported Problem:	Problem Description:	referred to us for studiet related. Screene and their hearts were	mia ausculted by RDVM. Echoed by another cardiologist who dy. Eating Fromm Lg Breed Adult (not grain free) so unclear if ed other 2 standard poodles in household eating same diet e fine. Owners have changed diet for all 3 dogs to lams will recheck in 3 months
	Date Problem Started:	01/29/2019	
	Concurrent Medical Problem:	Yes	
	Pre Existing Conditions:		B6
	Outcome to Date:		
Product Information:	Product Name:	Fromm Large Breed	Adult dry
	Product Type:	ļ	
	Lot Number:	7	
	Package Type:	BAG	
	Product Use Information:	Description:	Please see diet history for additional details
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	В6	
	Type Of Species:	Dog	
	3)	Poodle - Standard	
	Gender:	7	
	Reproductive Status:	Neutered	
	Weight:	24 Kilogram	
	Age:	16 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Given the Product:	3	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: Phone: Email:
		Address:	B6 United States
	Healthcare Professional Information:	Practice Name: Contact:	Tufts Cummings School of Veterinary Medicine

			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Additional Documents:			
	Attachment:	rpt_medical_record_	preview.pdf
	Description:	Medical records	
	Type:	Medical Records	

Foster Hospital for Small Animals

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

All Medical Records

B6

Patient: B6
Breed: Poodle
DOB: B6

Species: Canine Sex: Male (Neutered)

Home Phone: B6
Work Phone: Cell Phone: () -

Referring Information

Client:

Address:

B6

Client; B6

Initial Complaint:

Scanned Record

Initial Complaint:

Cardiology New - per Dr. Freeman

SOAP Text Feb 1 2019 9:52AM - Rush, John

Initial Complaint:

Blood draw and ECG for DCM study

Client: Patient:

B6

Disposition/Recommendations

0						
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Cu	ш	ш	ш	ш	9	
Vato	rin	via	Mα	dic	2	1

Veterinary Medical Center

Lab Results Report

Client	[B6	
Veterinar	ian:	
Patient ID): [B6]	
Visit ID:		

Foster Hospital for Small Animals

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

Patient:	B6	
Species:	Canine	
Breed:	Poodle	
Sex:	Male (Neutered)	
Age:	B6 Year's Old	

		Accession ID:	
Test	Results	Reference Range	Units

		4/24	B6
stringsoft			Printed Sunday, February 24, 2019
Vitals Results			
2/1/2019 1:49:26 PM	Weight (kg)		24,0000

Patient History

1 attent History		
01/30/2019 12:06 PM	Appointment	
02/01/2019 08:30 AM	UserForm	
02/01/2019 08:30 AM	UserForm	
02/01/2019 08:38 AM	UserForm	
02/01/2019 09:06 AM	Purchase	
02/01/2019 01:49 PM	Vitals	
02/01/2019 05:45 PM	UserForm	
02/06/2019 04:01 PM	Appointment	

Page 4/24

Client:	DC
Patient:	Вб

P	atient	History

Appointment	
Purchase Purchase Purchase	DC
UserForm Appointment	B 0
Email Purchase	
	Purchase Purchase UserForm Appointment Email

B6.
B6 Male(Neutered)
Carrine Poodle Beige
Patient ID:438325

STANDARD CONSENT FORM

Lam the owner, or agent for the owner, of the above described animal and have the authority to execute consent. It hereby authorize the Commings School of Veterinary Medicine at Tuths University (herein after Commings 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 resourchée and appropriate under the circumstances.

Currenings 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 advantedge 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-threate-dry emergency during the continued care of my animal and I expressly consent to all such resourche treatment as required. I realize and understand that results carnot 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 pided 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 dvarges incurred in caring and treating the arrival. 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 Turbs University, its officers and employees (collectively referred to herein as Cummings School), and its agents and assigns (the Grantees) the inexcuable 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) nowlonown 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 cruse 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.

Owner's name	B6]	Date: 2/1/2019	3
	D	2	
	D)	2/1/19
	tar energia e des sias sias energias e des sias energias e des sias e de se		Date /

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

The owner of the animato pay the veterinary med above	B6 ical servio		I me authority to obtain medical treatment and to bind this owner Cummings School pursuant to the terms and conditions described
Authorized Agent - Please	Print		Agent's Signature
Street Address			Date
Town/City S	tate	Zip	

upper heart chamber as well.

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

Name: B6	Name B6	Patient ID: 438325
Name: B6 Species: Canine	Religion	**************************************
Beige Male (Neutered) Poodle	B6	
Birthdate: B6	Lauren auaren au	1
Attending Cardiologist:	ЛМ (Cardiology), DACVEOC	
Be	3	
Cardiology Resident:		
	B6	hat the control of
	/A(X/A) &/A(X/A) &/A(tananda d
the second second		
Cardiology Technician:		
B6		
БО		
	a(w) at the a(w) at the a(w) = 1	
Also Veterinary Nutritionist Dr. Lisa Fi	reeman	
Student: B6		
Admit Date: 1/30/2019 10:27:28 AM		
Discharge Date: 2/1/2019		
Disenses: Dilated cardiomymathy	(DCM) with concestive heart failure vent	tricular arrhythmias (ventricular tachycardia,
ventricular bigeminy), short runs of s	The above the first the fi	
Case Summary:		and the second of the second
		dilated cardiomyopathy (DOM). This disease it
		of the walls of the heart, reduced cardiac
	heupper chambers of the heart. Many d	
		ent. If you notice that 86 breathing 86 also have some arrhythmias that are
		ions to try to limit the arrhythmias that he is
	B6 diet and we provided some die	
Diagnostic test results and findings:		
	e walls of the chambers of his heart are t	thirner than normal and he has reduced
	ventricle and left atrium are dilated.	
 ECG findings: The ECG show 	ed arrhythmias that are moatly ventricula	ar in origin but there are alos some from the

Q Labwork findings: We will call you when we have the results of his bloodwork. Most of it should come back

tomorrow, but some of it will take a week or so to return.

Monitoring at home:

- O We would like you to monitor your dog's breathing rate and effort at home, ideally during sleep or at a time of rest.
 The doses of drugs will be adjusted based on the breathing rate and effort.
- O In general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled.
- O There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug closes, on the Tufts HeartSmart web site (http://vet.tufts.edu/heartsmart/at-home-monitoring/).
- O Wealso want you to watch for wealmess 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.

Recognine	- Indian	RAVE	-

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 him/her to continue to eat his/her normal diet for the first 7 to 14 days so we can make sure he is tolerating medications well, but after that time we would recommend slowly introducing one of the lower sodium diets on the HeartSmart list (25% of the new diet and 75% old diet for 2-3 days, then 50.50, etc.). Hopefully you can find a diet on the list that your dog likes to eat. Alternatively, if you are attached to the current diet you can research the amount of sodium in the diet to ensure that the sodium content is similar to those on the list.

- The 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.
- Werecommend switchin B6 in commercial diet made by a well-established company that is not grain-free and does not contain any exocongredients, such as langaroo, duck, lamb, venison, lentils, peas, beans, bulfalo, tapioca, barley, and chickpeas.
- O The FDA issued a statement regarding this issue (https://www.fda.gov/AnimalVeterinary/NewsEvents/CVMUpdates/uom613385.htm) and a recent article published by Dr. Lisa Freeman on the Cummings School's Petfoodology blog can further explain these findings (http://wetmutrition.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) Purina Pro Plan Adult Weight Management Purina Pro Plan Bright Mind Adult Small Breed Formula tams Chunks

Canned Food Options:

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:

We recommend limited activity. Leash walking only is ideal, and short walks to start. 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:

Thank you for enrolling 86 in our clinical study. Ideally 86 would get an ECG (or an Alivecor reading sent to us) in around two weeks once he has had some time on the anti-arrhythmic medication. It would also be great if you can obtain an Alivecor reading if 86 has an episode of collapse or abnormal behavior.

A recheck of liver values, kidney values, and electrolytes is recommended in 2-3 weeks and then about 1 month after that, so we can keep an eye on the liver values, kidney values, and potassium. This can be done at your primary care veterinarian.

B6 supposed to have an appointment here at Tufts in about 3 months. We will perform an echo, ECG and bloodwork at this time.

Thank you for entrusting us with 86 care! It was a pleasure to meet you all today and he was a very good boy. Please contact our Cardiology liaison at (508) 887-4696 or email us at cardioves@tuits.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more information http://wet.tulits.edu/heartsmart/

Prescription Refill Discholer:

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 coll 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 Triols:

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

Case B6	Owner B6	Discharge Instructions
COSC. DO	Company of the Compan	Extraction of a second contracts

B6

B6

B6 Male (Neutered)

Canine Poode Beige Patient ID: 438325

Outside Prescription Log

B6

3. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

4. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

5. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

6. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

7. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

8. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

9. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

10. Date:

Clinician:

Prescription:

Pharmacy sent to:

Completed by:

Origin of request:

Cardiology Liaison: SO8-887-4696

Medication:

B6

B6

Patient ID: 438325

B6 Canine
ars Old Male (Neutered) Poodle
Beige

Cardiology <u>Appointment</u> Report Enrolled in DCM Study

Date: 2/1/2019 Attending Condidugist John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC (FREMARY) Cardiology Resident: Cardidacy Technician: Presenting Complaint OCM diagrosed 1/29/19 by (VPCs but asymptomatic). Eating BEG diet x 3 years **B6 B6** Comparent Diseases: **B6** Gereral Medical History: **B6** Diet and Supplements: Fromm Large Breed Adult dry Conference History: Prior CHF diagnosis? no Prior heart murmur? yes Prior ATE? no Prior arrhythmia? yes Monitoring respiratory rate and effort at home? no Cough? maybe Shortness of breath or difficulty breathing? no Syncope or collapse? no Sudden onset lameness? chronic lameness and weak was back legs Exercise intolerance? limited by above Current Medications Pertinent to CV System:

В6			
Medication:	B6		
Cardiac Physical Exami	istion:		
		B6	
Muscle condition:			
Normal Mild muscle loss		Moderate cachexia Marked cachexia	
Cardiovascular Physical	Ecom:		
Murmur Grade:		m and	
None		□ rv/v₁ □ v/v₁	
■ 1/VI		W/VI	
III/VI		_ ', ', '	
Murmur location/descri	ption: left apical		
lugular vein:			
Bottom 1/3 of then Middle 1/3 of then		1/2 way up the neck Top 2/3 of the neck	
Arterial pulses:			
■ Weak ■ Fairto		Bounding Pulse delicits	
Good		Pulsus paradoxus	
Strong		Other:	
Arrhythmia:			
None		■ Bradycardia	
Sinus arrhythmiaPremature beats		☐ Tachycardia	
Gallop:			
Yes		Pronounced	
No Intermittent		Other:	
Pulmonary assessments	:		
Eupneic .		Rulmonary craddes	
Mild dyspnea		Wheezes	
Marked dyspnea Normal BV sounds		Upper airway stridor	
Abdominal exam: minim	ial exam		
Normal		Mild ascites	
Hepatomegaly		Marked asciles	

Abduminal distension	
Problems:	
Prior DCM, arrhythmia, +/- cough/g	gag from laryngeal disease vs other
Diagnostic plan:	
Echocardiogram	Dialysis profile
Chemistry profile	Thoracicradiographs
EOG Renal profile	MT-proBNP Troponin I
Blood pressure	Other tests: DOM study testing
	B6
related to more chronic laryngeal d at rest. DCM may be related to diet at B6 since maybe arrhythmias m furosemide if dyspnea develops, ido bloodwork so will have to watch thi an antiarrhythmic today B6 we start this then follow LEs closely might not get supraventricuair ecto	e runs of SVT and ventricular tachycardia. Suspect the cough/gag is lisease, but the dog is breathing with slightly more effort than normal or may be unrelated. Recommend continuing B6 put may be one frequent now than before selly start low dog B6 if tolerated (potassium is a bit high on recent is serially too). The dog has enough arrhythmia that I would likely start might be the choice, but the dog has increased liver enzymes - if an not sure if sotalol would be tolerated. In B6 is TID and appy, but this might be an option if B6 is not well tolerated. Sended. Recheck ECG and kidney values, potassium, and liver enzymes.
DCM with VPCs and APCs and some related to more chronic laryngeal d at rest. DCM may be related to diet at B6 since maybe arrhythmias more furosemide if dyspnea develops, ide bloodwork so will have to watch this an antiarrhythmic today — B6 we start this then follow LEs closely might not get supraventricual rector Diet change +/- taurine is recomme	e runs of SVT and ventricular tachycardia. Suspect the cough/gag is lisease, but the dog is breathing with slightly more effort than normal or may be unrelated. Recommend continuing B6 but maybe ore frequent now than before 88 vs day-to-day variation?), give eally start low dos B6 if tolerated (potassium is a bit high on recent is serially too). The dog has enough arrhythmia that I would likely start might be the choice, but the dog has increased liver enzymes - if y. I am not sure if sotalol would be tolerated. I B6 is TID and app, but this might be an option if B6 is not well tolerated. Secheck ECG and kidney values, potassium, and liver enzymes.
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DCM with VPCs and APCs and some related to more chronic laryngeal dat rest. DCM may be related to diet at B6 since maybe arrhythmias must be some since the second because the second because the second because the supravent ricular ector diet change +/- taurine is recomme in about 2 weeks. Discussed Aliveco beautiful because the second because the secon	e runs of SVT and ventricular tachycardia. Suspect the cough/gag is lisease, but the dog is breathing with slightly more effort than normal or may be unrelated. Recommend continuing B6 put may be one frequent now than before B6? vs day-to-day variation?), give eally start low dos B6 if tolerated (potassium is a bit high on recent is serially too). The dog has enough arrhythmia that I would likely star might be the choice, but the dog has increased liver enzymes - if y. I am not sure if sotalol would be tolerated. It B6 is TID and apy, but this might be an option if B6 is not well tolerated. Sended. Recheck ECG and kidney values, potassium, and liver enzymes or option with owners.
DCM with VPCs and APCs and some related to more chronic laryngeal dat rest. DCM may be related to diet at B6 since maybe arrhythmias more furosemide if dyspnea develops, ide bloodwork so will have to watch the an antiarrhythmic today B6 we start this then follow LEs closely might not get supraventricual rector Diet change +/- taurine is recomme in about 2 weeks. Discussed Alivect Final Diagnosis: DCM with cardiac arrhythmias Heart Failure Classification Secre: ISACHC Classification: I la II b close to II III ACVIM Classification:	e runs of SVT and ventricular tachycardia. Suspect the cough/gag is lisease, but the dog is breathing with slightly more effort than normal cor may be unrelated. Recommend continuing B6 but may be unrelated. Recommend continuing B6 but may be one frequent now than before \$\frac{100}{200} \crop \text{ so day-to-day variation?}, give eally start low dos \$\frac{100}{200} \text{ if tolerated (potassium is a bit high on recent is serially too). The dog has enough arrhythmia that I would likely star might be the choice, but the dog has increased liver enzymes—if \$\frac{100}{200} \text{ lam not sure if sotalol would be tolerated. \$\frac{100}{200} \text{ is TID and poy, but this might be an option if \$\frac{100}{200} \text{ low ments and liver enzymes or option with owners.} Illa Illa Illa Illib

M-Mode IVSd CITI LVIDd cm LVPWd cm IVS5 cm LVIDs cm LVPWs cm EDV(Teich) ml ESV(Teich) ml EF(Teich) % %FS % SV(Teich) ml Ao Diam cm LA Diam cm LA/Ao Max LA cm TAPSE1 cm M-Mode Normalized **IVSdN** (0.290 - 0.520)LVIDAN (1.350 - 1.730) ! LVPWdN (0.330 - 0.530)IVS SN (0.430 - 0.710)LVIDSN **B6** (0.790 - 1.140) ! LVPWsN (0.530 - 0.780)! (0.680 - 0.890)Ao Diam N LA Diam N (0.640 - 0.900) ! 2D SALA cm Ao Diam CITI SA LA / Ao Diam IVSd cm LVIDd cm LVPWd cm EDV(Teich) ml IVS5 cm LVIDs cm LVPWs cm ESV(Teich) ml EF(Teich) % % %FS SV(Teich) ml LV Major cm LV Minor CITI Sphericity Index LVLd LAX CITE

LVAd LAX **LVEDV A-L LAX LVEDV MOD LAX** LVLS LAX LVAS LAX LVESV A-L LAX **LVESV MOD LAX** HR EF A-L IAX **LVEF MOD LAX** SV A-L LAX SV MOD LAX CO A-L LAX CO MOD LAX R-R HR CO A-L LAX CO MOD IAX

Doppler

MR Vmax MR maxPG MV E Vel MV DecT

MV Dec Slope

MV A Vel MV E/A Ratio

E'E' A' S'

AV Vmax

AV maxPG

PV Vmax

PV maxPG

TR Vmax TR maxPG **B6**

cm ml ml cm cm mi ml **BPM** % % ml ml l/min l/min ms **BPM** l/min l/min

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

m/s

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

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

Dischar	ee la	wiru	die	2
THE RESERVE AND ADDRESS.		-		

	Discharge Instructions	
	Cardiology Technician	
entiont .	Owner	
Name B6	Name B6	Patient ID: 438325
Species: Canine	Address	34-35-312-32
Beige Male (Neutered) Poodle	B6	
Sirthdate: B6	describe an accompanie of the control of the contro	
Attending Cardiologist:	militaria de la completa	
John E. Rush DVM, MS, DAC	VIM (Cardiology), DACVECC	
R		
D		
ardiology Resident:		
	B6	
ardiology Technician:		
B6		
DO		
L. A. M. (190) A. M. (190) A. M. (190) A. (190)		
Date: 2/20/2019		
	d a chemistry panel. We are happy to hear he is d	
	last week. Dr Rush saw a bit more arrhthmia tod	
see. His bloodwork looked ok, althou beta blooker called Carvadilol.	igh his liver values are still moderatly elevated. He	would like to add in a low dose of a
oesa biodker caned Carvadiloc		
Medications:		

B6

Recheck Visits: A recheck visit is scheduled for May 30th at 10:00am Thank you for bringing B6 i to see us today, he is such a sweet boy! Kind Regards, B6 Thank you for entrusting us with **B6** care. Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tulis.edu for scheduling and non-emergent questions or concerns. Please visit our HeartSmart website for more information http://vei.tufts.edu/heartsmart/ Prescription Refill Discholorer: 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 Triols: Clinical trials are studies in which our veterinary ductors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/dinical-studies **B6**

Discharge Instructions

Case B6



B6 Male (Neutered)
Canine Poodle Beige
B6

North Grafton, MA 01536 Telephone (508) 839-5395 Fax (508) 839-7951

Foster Hospital for Small Animals

55 Willard Street

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,



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	
B6	Mak (Neutered)
	oodle Beige
B6	

2/12/2019

Dear B6			
Thank you for referring	B6	with their pet	B6

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

Thank you,



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	
B6	Male (Neutered) odde Beige
[B6]	4.0

2/23/2019

Dear B6				
Санизания				
			2.001031	
Thank you for referring	R6	with the	rnot Re	
man you in receiving		I SAME OF	- per Du	

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

Thank you,



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

Foster Hospital for Small Animals

B6	Ì
B6	Male (Neutered)
Canne	Poodle Beige
B6	

2/23/2019

Dear B6			
Thank you for referring	В6	with their pet	B6

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

Thank you,

Report Details - EON-	380720			
ICSR:	2063120			
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:	2019-02-24 19:08:40 EST			
Reported Problem:	Problem Description:	showed DCM. We ev	valuated as part	r. Echo done by mobile ultrasonographer of study 2/1/19 - has DCM Eating BEG diet ement dry and we will recheck in 3 months
	Date Problem Started:	02/01/2019		
	Concurrent Medical	Yes		
	Problem:			
	Pre Existing Conditions:	7	<u> </u>	
	Outcome to Date:	Stable		
Product Information:	Product Name:	Earthborn Coastal C	atch dry	
	Product Type:	Pet Food		
	Lot Number:			
	Package Type:	BAG		
	Product Use	Description:	Please see die	t history for more info
	Information:			
	Manufacturer /Distributor Information:			
	Purchase Location	75 72 72 73 73 74 74 75 75 75 75 75 75 75 75 75 75 75 75 75		
	Information:			
Animal Information:	Name:	В6		
	Type Of Species:	Dog		
	Type Of Breed:	Retriever - Golden		
	Gender:	Male		
	Reproductive Status:	Neutered		
	Weight:	36.3 Kilogram		
	Age:	B6 Years		
	Assessment of Prior Health:	Excellent		
	Number of Animals Given the Product:	1		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	Yes	
		Contact:	Name:	DA
			Phone:	B6
			Email:	***************************************
		Address:		
			B6	
				'
			United States	i
	Healthcare Professional	Draotico Ness	Tuffe Cummin-	se Sahaal of Votorinany Madicina
	Information:	Practice Name:	2	s School of Veterinary Medicine
		Contact:	1	Lisa Freeman
			Phone:	(508) 887-4523

			Email: lisa freeman@tufts.edu
			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:		
	Preferred Method Of Contact:		
Additional Documents:			
	Attachment:	rpt_medical_record_	preview.pdf
	Description:	Medical records	
	Type:	Medical Records	

Report Details - EON-	380720		
ICSR:	2063120		
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		7
Report Submission Date:	-9 Quantum		
Reported Problem:	Problem Description:	showed DCM. We ev	dentified murmur. Echo done by mobile ultrasonographer valuated as part of study 2/1/19 - has DCM Eating BEG diet in Weight management dry and we will recheck in 3 months
	Date Problem Started:	· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Concurrent Medical Problem:	5 	
	-	B6	
	Pre Existing Conditions: Outcome to Date:	7	
Product Information:	Product Name:	Earthborn Coastal C	atch dry
22 2.22 - 2.11	Product Type:	<u> </u>	J. J
	Lot Number:	7	
	Package Type:	BAG	
	Product Use	Description:	Please see diet history for more info
	Information:	J. J	r leader see discriminary for more mile
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:		
	Type Of Species:	B6	
	3	Retriever - Golden	
	Gender:	7	
	Reproductive Status:	<u> </u>	
	3)	36.3 Kilogram	
		B6 Years	
	Assessment of Prior	<u>:</u> :::::::::::::::::::::::::::::::::::	
	Health: Number of Animals	1	
	Given the Product:		
	Number of Animals Reacted:	- The state of the	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name:
			Phone: B6
			Email:
		Address:	
		- 123,000	B6
			DU
			i United States
	Healthcare Professional	Tufts Cummings School of Veterinary Medicine	
	Information:	Practice Name:	1
		Contact:	
	1		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:	Medical records		
	Type:	pe: Medical Records		

Jones, Jennifer L </o=ExchangeLabs/ou=Exchange Administrative Group

(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo>

To: 'cvca B6 @cvcavets.com'

Sent: 3/28/2018 6:40:32 PM

Subject: FDA Case investigation for B6 (EON-350158)

Attachments: 02-Vet-LIRN-NetworkProceduresVets-12.22.2015.pdf; 03-Vet-LIRN-Network

ProceduresOwners-12.22.2015.pdf

Good afternoon **B6**

From:

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

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

Full Medical Records

- Please email (preferred) or fax (301-210-4685) a copy of entire medical history (not just this event).
- o Do you have records from her referring veterinarian?

• Potentially Test Remaining OPEN product

- O Do you have any remaining product left?
- o Is there a lot number or best by date for the leftover food?
- Hold any remaining UNOPENED product for potential collection.

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

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

Thank you kindly,

Dr. Jones

Jennifer L. A. Jones, DVM

Veterinary Medical Officer U.S. Food & Drug Administration Center for Veterinary Medicine Office of Research

Veterinary Laboratory Investigation and Response Network (Vet-LIRN)

8401 Muirkirk Road, G704 Laurel, Maryland 20708 new tel: 240-402-5421 fax: 301-210-4685

e-mail: jennifer.jones@fda.hhs.gov

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



From: To:	CVCA - Cardiac Care for Pets Jones, Jennifer L	B6
Sent: Subject:	3/28/2018 10:08:41 PM Re: FDA Case investigation for B6	(EON-350158)
Dear Dr. Jones,		
Thank you for followincluding the primare Unfortunately, the d this in mind for future of the control of the co	y veterinarian history that we have and iagnosis was made in October and the cre patients with dilated cardiomyopathy sample and record the lot number for for	will be sending you our complete records for B6 I the history from her previous emergency room visclient has disposed of the diet. We will certainly key which could potentially be diet-related and have future testing/tracking. Thank you again for looking
Sincerely, B6 VMD, D	ACVIM - Cardiology	
On Wed, Mar 28, 20	118 at 2:40 PM, Jones, Jennifer L < <u>Jenn</u>	nifer.Jones@fda.hhs.gov> wrote:
Good afternoon E	36	
Thank you for subm	itting your consumer complaint to FDA	A. I'm sorry to hear about B6 illness.
As part of our invest	tigation, we'd like to request:	
event). O Do you Potentially To Do you Is there		tover food?
	our Vet-LIRN network procedures. The elp with our case investigations.	e procedures describe how Vet-LIRN operates and
Please respond to t	his email so that we can initiate our in	nvestigation.
Thank you kindly,		
Dr. Jones		

Jennifer L. A. Jones, DVM

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

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

fax: 301-210-4685

e-mail: jennifer:jones@fda.hhs.gov

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





CVCA - Cardiac Care for Pets

B6

Phone: Fax: B6

Email: B6 cvcavets.com Visit our website at: www.cvcavets.com

"Like" us on Facebook at: www.facebook.com/CVCAVETS

"Follow" us on Instagram at: www.instagram.com/CVCAVETS

We want to hear from you! Access our online survey by clicking here.

If there is anything that we can do to improve our service for you, please do not hesitate to contact us directly. We would greatly appreciate your feedback and invite you to fill out a survey based on your experience with CVCA.

Share your photos with us!

If you have a photo that you would like to share, we would love to post it on our Facebook page. Like us on Facebook and post to our wall or you can email the image with a fun fact to evcainfo@evcavets.com and we will forward it to our Facebook administrator.

Please note -- Images are usually posted within 1 month of submission.

From:	CVCA - Cardiac Care for Pets	B6	
To:	Jones, Jennifer L		
Sent:	3/28/2018 10:27:10 PM	,	
Subject: Attachments:	Re: FDA Case investigation for B6 BW.pdf; B6 BW1.pdf; B6 ech B6 ech data.pdf; B6 ech report B6 labs3.pdf; B6 labs38.pdf; B6	io adata.pdf; <mark>B6</mark> hx.pdf; 1.pdf <mark>; B6</mark> er.pdf; <mark>B6</mark> fe	B6 consult.pdf; B6 echo 2.pdf; ecal.pdf; B6 hx2.pdf; B6 hx44.pdf;
Attached is entire medi Thank-	ical records for B6 Please	let us know if you nee	d anything else-
On Wed, Mar 28, 2018 wrote:	at 6:08 PM, CVCA - Cardiac Card	e for Pets	B6
Dear Dr. Jones,			
including the primary v Unfortunately, the diag this in mind for future	ng up on our patient, B6 Weterinarian history that we have an enosis was made in October and the patients with dilated cardiomyopat mple and record the lot number for patients.	nd the history from her e client has disposed of thy which could potent	previous emergency room visit. f the diet. We will certainly keep ially be diet-related and have
B6 VMD, DAC	CVIM - Cardiology		
On Wed, Mar 28, 2018	at 2:40 PM, Jones, Jennifer L < <u>Jen</u>	nnifer.Jones@fda.hhs.g	gov> wrote:
Good afternoon B6			
Thank you for submitti	ing your consumer complaint to FI	DA. I'm sorry to hear a	bout B6 illness.
As part of our investiga	ation, we'd like to request:		
• Full Medical Re	<u>ecords</u>		
 Please ema 	ail (preferred) or fax <u>(301-210-468</u>	(<u>5</u>) a copy of B6 en	tire medical history (not just this
event).			
_	ve records from her referring veter	rinarian?	
•	Remaining OPEN product		
•	ve any remaining product left?	0 0 10	
	ot number or best by date for the le		
 Hold any remai 	ning UNOPENED product for po	otential collection.	

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Thank you kindly,

Dr. Jones

Jennifer L. A. Jones, DVM

Veterinary Medical Officer U.S. Food & Drug Administration Center for Veterinary Medicine Office of Research Veterinary Laboratory Investigation and Response Network (Vet-LIRN) 8401 Muirkirk Road, G704 Laurel, Maryland 20708 new tel: 240-402-5421

fax: 301-210-4685

e-mail: jennifer.jones@fda.hhs.gov

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





CVCA - Cardiac Care for Pets

	В	6
Phone:	В	6
Fax:	В6	
Email:	В6	@cvcavets.com

Visit our website at: www.cvcavets.com

"Like" us on Facebook at: www.facebook.com/CVCAVETS

"Follow" us on Instagram at: www.instagram.com/CVCAVETS

We want to hear from you! Access our online survey by clicking here.

If there is anything that we can do to improve our service for you, please do not hesitate to contact us directly. We would greatly appreciate your feedback and invite you to fill out a survey based on your experience with CVCA.

Share your photos with us!

If you have a photo that you would like to share, we would love to post it on our Facebook page. Like us on Facebook and post to our wall or you can email the image with a fun fact to evcainfo@evcavets.com and we will forward it to our Facebook administrator. Please note -- Images are usually posted within 1 month of submission.

CVCA - Cardiac Care for Pets
B6
Phone B6
Fax: B6
Email: B6 @cvcavets.com
Visit our website at: www.cvcavets.com
"Like" us on Facebook at: www.facebook.com/CVCAVETS
"Follow" us on Instagram at: www.instagram.com/C\/CA\/FT

We want to hear from you! Access our online survey by clicking here.

If there is anything that we can do to improve our service for you, please do not hesitate to contact us directly. We would greatly appreciate your feedback and invite you to fill out a survey based on your experience with CVCA.

Share your photos with us!

If you have a photo that you would like to share, we would love to post it on our Facebook page. Like us on <u>Facebook</u> and post to our wall or you can email the image with a fun fact to <u>cvcainfo@cvcavets.com</u> and we will forward it to our Facebook administrator. *Please note -- Images are usually posted within 1 month of submission*.

Client:	В6	[] (8546)
Patient N	lame: [B6
Species:		
Breed: L	abrado	Retriever

Gender: Female/Spayed Weight: 67.60 lbs Age: 11 Years Doctor: B6

	В6
В6	
	B6

est	Results	Reference Interval	LOW	NORMAL	HIGH	
Catalyst Dx (N	lovember 14,	2017 4:20 PM)				10/27/17
ETN .		70 - 143 LOW				
REA		0,5 - 1.8				
UN		7 - 27	ŧ			
UN/CREA			į			
HOS		2.5 - 6.8	į.			
A.		7.9 - 12.0				
P		5.2 - 8.2	k			
LB		2.2 - 3.9	ŀ			
LOB		2.5 - 4.5 HIGH	Ļ			
LB/GLOB		40 405	r		6	
LKP	B6	10 - 125	Ŕ			
		23 - 212 HIGH	H			
GT BIL		0 - 11 HIGH 0.0 - 0.9	K			
HOL		110 - 320	H			
MYL		500 - 1500	H			
IPA		200 - 1800	H			
la		144 - 160	H			
,		3,5 - 5.8	H			
la/K		-10 0.0	L.			
		109 - 122	Γİ			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4			
il Osm Calc		109 - 122				

Printed: November 14, 2017 4:20 PM

Client:	В6	(8546)
Patient	Name: B	6
Specie	s: Canine	

Breed: Labrador Retriever

Gender: Female/Spayed Weight: 67.60 lbs

Age: 11 Years
Doctor: B6

	B6
B6	
	B6

Test	Results	Reference la	nterval	LOW	NORMAL	HIGH	
Catalyst Dx (No	vember 14, 20	17 4:20 PM)					10/27/17
GEU CREA BUN BUN/CREA PHOS CA TP ALB GLOB ALB/GLOB ALT ALKP GGT TBIL CHOL AMYL LIPA Na K Na/K CI Osm Calc	B6	79 - 143 0.5 - 1.8 7 - 27 2.5 - 6.8 7.9 - 12.0 5.2 - 8.2 2.2 - 3.9 2.5 - 4.5 10 - 125 23 - 212 0 - 11 0.0 - 0.9 110 - 320 500 - 1500 200 - 1800 144 - 160 3.5 - 5.8 109 - 122	HIGH HIGH		В	6	

Patient Demographics

B6 Study Date: 11/01/2017

Patient ID: 121217B Accession #: Alt ID:

DOB: Age: Gender: Ht: Wt: 67lb 4oz BSA:

Institution: CVCA B6

Referring Physician:

Physician of Record: Performed By:

Comments:

Adult Echo: Measurements and Calculations

2D

LVIDd (2D)	LVAd (A4C)	IVSd (2D)
LVPWd (2D)	LVAs (A4C)	RVIDd/LVIDd
EDV (2D- Teich)	EDV (A4C) B6	RVIDd (2D) B6
EDV (2D- Cubed)	ESV (A4C)	LA Area
A4Cd LV Vol LV Length B6	LV Mass (Cubed)	LA Dimen (2D)
LV Area A4Cs LV Vol LV Length	IVS/LVPW (2D) B6	LA/Ao (2D) B6
LV Area LVLd (A4C) LVLs (A4C)	SV (A4C) EF (A4C)	AoR Diam (2D) B6

MMode

IVSd (MM)	SV (MM- B6 Teich)	LVPW % (MM)
LVIDd (MM)	FS (MM-Teich) B6	RVIDd (MM)
LVPWd (MM)	EF (MM-Teich)	LA Dimen (MM)
IVSs (MM) B	EDV (MM- Cubed)	AoR Diam B6
LVIDs (MM)	ESV (MM- Cubed) B6	LA/Ao (MM)
LVPWs (MM)	SV (MM- Cubed)	MV D-E Exc Dist
IVS/LVPW	EF (MM-	MV D-E Slope
(MM)	Cubed)	Incommunication and I

B6 121217B

11/01/2017

Created: 03:40AM 11/01/2017

1/4

EDV (MM-FS (MM-MV E-F Slope **B6** Teich) Cubed) **B6 B6** IVS % (MM) ESV (MM-MV EPSS Teich) Doppler **LVOT Vmax** Lat A Vel MV Peak A Vel **B6** Max PG Vel Vmax PG **RVOT Vmax** MV E/A E'/A' Lateral B6 В6 Max PG **B6** Vmax Lat E `Vel MR Vmax TR Vmax Max PG Max PG **B6** Vmax Vmax MV Peak E Vel E/Lat E Vel **B6** PG Other Measurements Dimensions: 2D LAX LA lax (2D) **Dimensions: Diameters** LVID/Ao (2D) EF & Volume: Simpson's **B6** Sphericity Id **Dimensions: Diameters** LVEDDN LVID/Ao (2D) **Images B6**



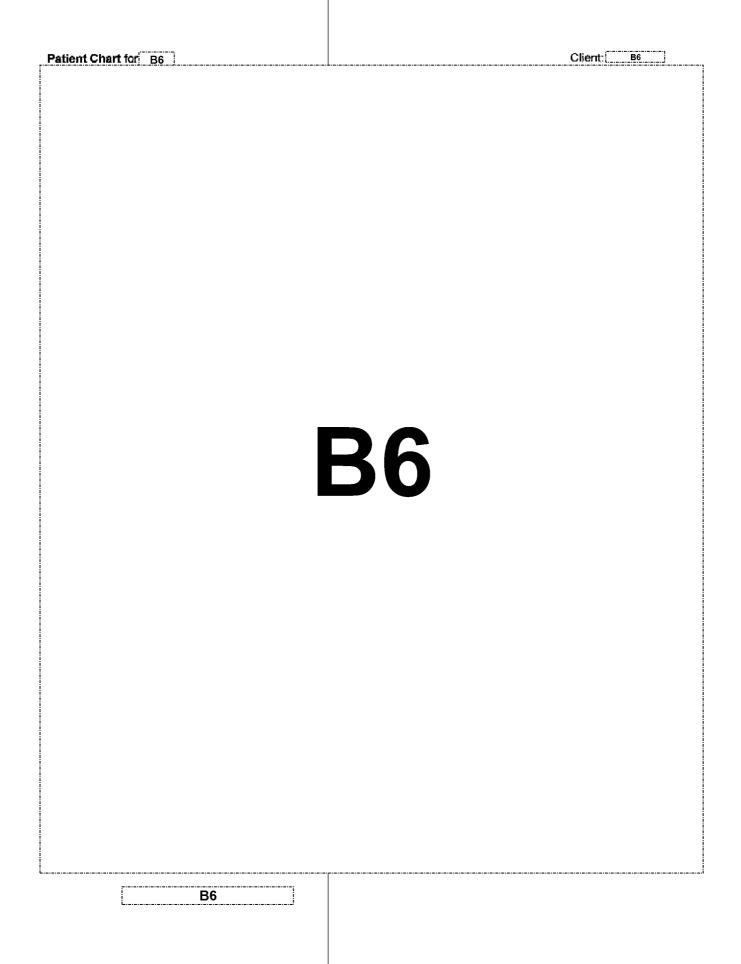


Signature

Signature:

Name(Print):

Date:



B6

B6

	D 0		RRAL CORRESPONDENCE	. 77
Primary Veterina Phone number:				- 18 - 18
, (i	j			
Owner's name Phone number	B 6	a.		續・ *:
Patient Name:	B6	Weight:	28.6 Kgs	ra,
Species:	Canine	Breed:	Retriever, Golden	× 20,
Sex:	Spayed Female	Age:	B6	A A A A A A A A A A A A A A A A A A A
dmission Date:	DC	e.	ie ei	*
ischarge Date:				
the state of the s				
	Ll			ş 4.
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCN	B6 is currently in a Grain	n free diet and a
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCM rk. No signs of care	B6 is currently in a Grain	n free diet and a l
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCN rk. No signs of card	B6 is currently in a Grain diac disease noted by the ow	n free diet and a l ner.
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCM rk. No signs of card	B6 is currently in a Grain clac disease noted by the ow	n free diet and a l
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCN rk. No signs of card	B6 is currently in a Grain liac disease noted by the ow	n free diet and a l
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCN rk. No signs of card	B6 is currently in a Grain cliac disease noted by the ow	n free diet and a l ner.
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCN rk. No signs of card	B6 is currently in a Grain liac disease noted by the ow	n free diet and a l
listory: Presente	Ll ed for Screening Echoc	rk. No signs of card	diac disease noted by the ow	n free diet and a l
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listory: Presente	Ll ed for Screening Echoc	rk. No signs of card	diac disease noted by the ow	n free diet and a liner.
listory: Presente	Ll ed for Screening Echoc	ardiogram for DCM rk. No signs of card	diac disease noted by the ow	n free diet and a l
listory: Presente	Ll ed for Screening Echoc	rk. No signs of card	diac disease noted by the ow	n free diet and a l
listory: Presente	Ll ed for Screening Echoc	rk. No signs of card	diac disease noted by the ow	n free diet and a
listory: Presente	Ll ed for Screening Echoc	rk. No signs of card	diac disease noted by the ow	n free diet and a

Diagnostic Tests Performed

Echocardiogram: Evidence of occult dilated cardiomyopathy (DCM) based systolic dysfunction and left ventricular dilation noted on the echocardiogram today. Treatment with B6 las been shown to significantly delay the onset of congestive heart failure (CHF) in these dogs. Since B6 is an atypical breed to develop DCM, and the fact that she was being fed a grain free diet, with a low blood taurine level, we suspect that the cause is dietary taurine deficiency in golden retriever.

Clinical Diagnosis: Occult Dilated Cardiomyopathy - suspect dietary deficiency. Taurine is an amino acid that is found in high concentrations in heart and muscle. Among its many functions, it aids in normal contractile function. Evidence shows that taurine helps mediate calcium channel transports and modulates calcium sensitivity of the myofibrils. Taurine deficiency as a cause of dilated cardiomyopathy (DCM) is not a new issue. Taurine deficiency in cats was characterized by Pion et al in the late 1980s. Taurine deficiency has since been characterized as a cause of acquired DCM in dogs as well.

Treatment and Recommendations: Ongoing monitoring is recommended for signs of lethargy, decreased appetite, coughing, weakness/collapse, increased respiratory effort or rate (>40 breaths per minute AT REST) as these may be signs of progression of cardiac disease. If any of these signs are noted, please contact a veterinarian.

Medications:

B6

Diet: We recommend switching diet to a regular dog balanced diet and supplement Taurine and Omega 3 as follow. Taurine dose in dogs is 500 mg/ dog PO q 12h. Omega-3 fatty acids may improve appetite and reduce cachexia (EPA 30-40 mg/kg PO q 24h, DHA 20-25 mg/kg PO q 24h). Consider I -carnitine (110 mg/kg PO q 12h) in dogs not responding to taurine.

Results Pending: None.

Progress Exam: We recommend a recheck Echocardiogram in 1 month, or sooner should you notice clinical signs listed above.

	Questions or Pi	roblems: If	any problems or	questions arise	associated with	the proce	duradan'i	titos
	neament penoin	ned at i	B6	i please	do not hesitate	to reall in	e at B6	
j	B6 If any	problems or	questions arise co	oncerning B6	general health	i please d	ontact Dr	1
Ĺ	B6	If you hav	e an emergency	outside of our	business hours	nlease o	ontact that.	5 de 1
ì		B6	i.	with locations in		R6	3	1.3
ĺ	B6	1		r				~ !"''
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В6

B6 Approved By:

B6

Owner/Agent's Signature of

B6

Doctor 🔽

Park I Ida

(1) 11 15 T

B4

DISCHARGE INSTRUCTIONS AND REFERRAL CORRESPONDENCE

Primary Veterinarian: B4 B6
Phone number: B4, B6

Owner's name: Phone number B6

Patient Name: B6
Species: Canine

Sex: Spayed Female

Admission Date: 10/19/2018 Discharge Date: 10/19/2018

History: Presented for Screening Echocardiogram for DCM. **B6** is currently in a Grain free diet and a low Taurine level was noted on her blood work. No signs of cardiac disease noted by the owner.

Weight:

Breed:

Age:

28.6 Kgs

Retriever, Golden

1 Yrs. 10 Mos.

B6

Diagnostic Tests Performed: Echocardiogram: Evidence of occult dilated cardiomyopathy (DCM) based systolic dysfunction and left ventricular dilation noted on the echocardiogram today. Treatment with has been shown to significantly delay the onset of congestive heart failure (CHF) in these dogs. Since B6 is an atypical breed to develop DCM, and the fact that she was being fed a grain free diet, with a low blood taurine level, we suspect that the cause is dietary taurine deficiency in golden retriever. Clinical Diagnosis: Occult Dilated Cardiomyopathy - suspect dietary deficiency. Taurine is an amino acid that is found in high concentrations in heart and muscle. Among its many functions, it aids in normal contractile function. Evidence shows that taurine helps mediate calcium channel transports and modulates calcium sensitivity of the myofibrils. Taurine deficiency as a cause of dilated cardiomyopathy (DCM) is not a new issue. Taurine deficiency in cats was characterized by Pion et al in the late 1980s. Taurine deficiency has since been characterized as a cause of acquired DCM in dogs as well. Treatment and Recommendations: Ongoing monitoring is recommended for signs of lethargy, decreased appetite, coughing, weakness/collapse, increased respiratory effort or rate (>40 breaths per minute AT REST) as these may be signs of progression of cardiac disease. If any of these signs are noted, please contact a veterinarian. Medications: 1. **B6** Diet: We recommend switching diet to a regular dog balanced diet and supplement Taurine and Omega 3 as follow. Taurine dose in dogs is 500 mg/ dog PO q 12h. Omega-3 fatty acids may improve appetite and reduce cachexia (EPA 30-40 mg/kg PO q 24h, DHA 20-25 mg/kg PO q 24h). Consider I -carnitine (110 mg/kg PO q 12h) in dogs not responding to taurine. Results Pending: None. Progress Exam: We recommend a recheck Echocardiogram in 1 month, or sooner should you notice clinical signs listed above. Questions or Problems: If any problems or questions arise associated with the procedures and treatment performed at: please do not hesitate to call us at B6 If any problems or questions arise concerning B6 general health, please contact Dr. **B6** If you have an emergency outside of our business hours, please contact the B **B6 B6** Board Certified Specialist - Cardiology **B6** Approved By: Owner/Agent's Signature of **B6**

Doctor

Report Details - EON-	364577		
ICSR:	2054750		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)		
Reporting Type:	Voluntary		
Report Submission Date:	2018-09-07 17:16:09 EDT		
Reported Problem:	Problem Description:	Not true DCM but re	duced contractility B6 taurine (whole blood)
	Date Problem Started:	09/05/2018	
	Concurrent Medical Problem:	No	
	Outcome to Date:	Stable	
Product Information:	Product Name:	Ziwi Peak (recently s	started)
	Product Type:	-	
	Lot Number:		
	Package Type:	BAG	
	Product Use Information:		
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
	Product Name:	Honest Kitchen Who	le Grain Turkey, Beef, or CHicken
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:	BAG	
	Product Use Information:		
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	В6	
	Type Of Species:	ļ	
	2	Retriever - Golden	
	Gender:	ļ	
	Reproductive Status:	3	
	-5 \$4444044444444444444444444444444444444	31.5 Kilogram B6 Years	
	Age. Assessment of Prior Health:	1	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Information provided:	Yes
		Contact:	Name: B6
			Phone: B6
		Address:	
		Addiess.	B6
			United States

	Healthcare Professional	Practice Name:	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
		Practice Name:	Tufts Cummings School of Veterinary Medicine
		Contact:	Name: B6 Phone: B6
		Permission to Release Records to FDA:	Management and an analysis analysis and an analysis and an analysis and an analysis and an analysis and an analysis and an analysis and an analysis and an ana
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		100	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Additional Documents:			
	Attachment:	cardio discharge 9-5	i-18.pdf
	Description:	Cardio discharge	
	Type:	Medical Records	
	Attachment:	t4.pdf	
	Description;		
	Type:	Laboratory Report	
	Attachment:	rdvm records.pdf	
	Carried Street, Street	RDVM records	
		Medical Records	
	Attachment:	cardio report 9-5-18.	pdf
		Cardio report	
		Medical Records	

Cardiology Liaison: 508-887-4696

B6

Patient ID: 426744

B6 Canine

B6 Years Old Male (Neutered) Golden Retriever

Cardiology Appointment Report

Date: 9/5/2018	
Attending Cardiologist:	
John E. Rush DVM, MS, DA	CVIM (Cardiology), DACVECC
В	6
Cardiology Resident:	
	B6
Cardiology Technician:	
B6	
getting an echo. Tested positive fo	e level <u>B6</u> On facebook page with UC Davis. Dr Stern recommended or B6 but is not symptomatic. Has been treated in the past. Has
breathing difficulties or coughing.	ts out of the pool sooner than usual. Slowing down on hikes, but no May breathe faster than other dog (86 bpm). ine test after reading about low taurine on line.
breathing difficulties or coughing. Owner sent out whole blood tauri	May breathe faster than other dog (B6 bpm).
breathing difficulties or coughing. Owner sent out whole blood tauri	May breathe faster than other dog (86 bpm). ine test after reading about low taurine on line.
breathing difficulties or coughing. Owner sent out whole blood tauri Consument Diseases:	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6
breathing difficulties or coughing. Owner sent out whole blood tauri Consument Diseases: General Medical History:	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6
breathing difficulties or coughing. Owner sent out whole blood tauri Consument Diseases: General Medical History:	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6
breathing difficulties or coughing. Owner sent out whole blood tauri Concurrent Diseases: General Medical History: Is on B6 prevention every	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6
breathing difficulties or coughing. Owner sent out whole blood tauri Consument Diseases: General Medical History: Is on B6 prevention every Diet and Supplements:	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6
breathing difficulties or coughing, Owner sent out whole blood tauri Consument Diseases: General Medical History: Is on B6 prevention every Diet and Supplements: ZiwePeak grain free, air dried; hon	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months B6 me cooked. Switched to honest kitchen about 3 years ago. Bravo canne
breathing difficulties or coughing. Owner sent out whole blood tauri Concurrent Diseases: General Medical History: Is on B6 prevention every Diet and Supplements: ZiwePeak grain free, air dried; hor rotates food, got treats will grains	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months B6 me cooked. Switched to honest kitchen about 3 years ago. Bravo canne
Dwner sent out whole blood tauri Concurrent Diseases: General Medical History: Is on B6 prevention every Dist and Supplements: ZiwePeak grain free, air dried; hon rotates food, got treats will grains	May breathe faster than other dog (86 bpm). ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months. B6
Diversity of the Consument Diseases: Consument Diseases:	May breathe faster than other dog (86 bpm). ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months. B6
breathing difficulties or coughing. Owner sent out whole blood tauri Concurrent Diseases: General Medical History: Is on B6 prevention every Diet and Supplements: ZiwePeak grain free, air dried; hor rotates food, got treats will grains Cardiovascular History: Prior CHF diagnosis? no Prior heart murmur? no	May breathe faster than other dog (86 bpm). ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months. B6
breathing difficulties or coughing, Owner sent out whole blood tauri Consument Diseases: General Medical History: Is on B6 prevention every Diet and Supplements: ZiwePeak grain free, air dried; hon rotates food, got treats will grains Cardiovascular History: Prior CHF diagnosis? no Prior heart murmur? no Prior ATE? no	May breathe faster than other dog (B6 bpm). ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months B6 me cooked. Switched to honest kitchen about 3 years ago. Bravo canne
breathing difficulties or coughing. Owner sent out whole blood tauri Concurrent Diseases: General Medical History: Is on B6 prevention every	May breathe faster than other dog (B6 bpm). Ine test after reading about low taurine on line. B6 B6 y 6 weeks to 2 months. B6 me cooked. Switched to honest kitchen about 3 years ago. Bravo cannets. Sardines.

Sudden onset lameness? no Exercise intolerance? starting last year started leaving the pool sooner, coughs to clear throat **Current Medications Pertinent to CV System:** Medication: **B6** Formulation/Tab Size: **B6** Administration Frequency: Need refills? Medication: Formulation/Tab Size: B6 Administration Frequency: Give 1 Tablet Twice a day Need refills? Medication: **B6** Formulation/Tab Size: **B6** Administration Frequency: Need refills? Cardiac Physical Examination: Muscle condition: Normal Moderate cachexia Mild muscle loss Marked cachexia Cardiovascular Physical Exam: Murmur Grade: IV/VI None II I/VI ■ v/vi ■ IV/VI ■ III/VI Jogular 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: Week **Bounding** Fair Pulsedeficits Good Pulsus paradonus ■ Strong Other: **Arrhythmia**: None Bradycardia Sirvus arrhythmia Tachycardia Premature beats

Shortness of breath or difficulty breathing? no

Syncope or collapse? no

Yes	Promounced	
₩ No	Other:	
intermittent	w) Other:	
ulmonary assessments:		
Eupneic	Pulmonary crackles	
Mild dyspnea	Wheezes	
Marked dyspnea	Upper airway stridor	
Normal BV sounds		
bdominal exam:	The second secon	
Normal	Mild ascites	
☐ Hepatomegaly ☐ Abdominal distension	Marked ascites	
rablems:		
ow whole blood taurine, on grain fre	e diet	
iagnostic plan:		
Echocardiogram	Dialysis profile	
Chemistry profile	Thoracic radiographs	
EOG	NT-proBNP	
Renal profile	Troponin I Other tests:	
Blood pressure	III OUR IESES.	
	B6	
Stral inflow:	B6	***********
Summated	Pseutrurmal	
Summated Normal		
Surrenated	Pseutrurmal	
Normal Delayed relaxation CG Endings:	Pseutrurmal	
Summated Normal Delayed relaxation	Pseutrurmal	
Summated Normal Delayed relaxation Gindings: B6	Pseutrurmal	
Summated Normal Normal Delayed relaxation CG findings: B6 ssessment and recommendations:	Pseudorumal Restrictive	nt ce
Summated Normal Normal Delayed relaxation Gindings: B6 sses sment and recommendations: chocardiogram reveals mildly reduce	Pseudonormal Restrictive d contractile function with no evidence of chamber enlargeme	
Summated Normal Normal Delayed relaxation Gindings: B6 sees sment and recommendations: chocardiogram reveals mildly reduced that these	Pseudonormal Restrictive discontractile function with no evidence of chamber enlargement mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency/diet, but other mild changes are related to taurine deficiency.	rild
Summated Normal Normal Delayed relaxation Given the second seco	Pseudonormal Restrictive d contractile function with no evidence of chamber enlargement mild changes are related to taurine deficiency/diet, but other more variation for this individual cannot be ruled out. An NTproBN	rild IP

B6

Finel Diagnosis:

Mildly reduced LV contractile function

1.11		
M-Mode IVSd	formation	444
LVIDd		cm
LVPWd		Cm
IVSs		cm
LVIDs		cm
(A. N. A. C.	B6	cm
LVPWs %FS	B0	cm %
Ao Diam		cm
LA Diam	-	cm
LA/Ao Max LA		cm
M-Mode Normalized IVSdN LVIDdN LVPWdN IVSsN	(0.29 - 0.52) (1.35 - 1.73) (0.33 - 0.53) B6 (0.43 - 0.71)	
LVIDsN	(0.79 - 1.14)	
LVPWsN	(0.53 - 0.78)	
Ao Diam N	(0.68 - 0.89)	
LA Diam N 2D	(0.64 - 0.90)	
SAIA	J	244
Ao Diam		cm
SA IA / Ao Diam	B6	cm
IVSd	Bu	-
LVIDd	111	cm
LVIUG	l-monocond.	cm

	grader (exemple)	
LVPWd		cm
EDV(Teich)		ml
IVSs		CITI
LVIDs		cm
LVPWs		cm
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)		ml
LVId AZC	100	cm
LVEDV MOD A2C	i i	ml
LVIs A2C		cm
LVESV MOD A2C		ml
LVEF MOD A2C		%
SV MOD A2C	B6	ml
LVId LAX	ВО	cm
LVAd LAX	l l	cm
LVEDV A-L IAX		ml
LVEDV MOD LAX		ml
LVLs LAX		cm
LVASLAX		cm
LVESV A-L LAX		ml
LVESV MOD LAX		ml
HR	į į	ВРМ
EF A-L LAX		%
LVEF MOD LAX		%
SV A-L IAX		ml
SV MOD LAX	1	ml
CO A-L LAX		l/min
CO MOD IAX		l/min
	h	
<u>Doppler</u>	parameter exercis	
MV E Vel		m/s
MV DecT		ms
MV A Vel		m/s
MV E/A Ratio		
F		m/s
A'		m/s
E/E	B6	
PV Vmax		m/s
PV maxPG		mmHg
AV Vmax		m/s
AV maxPG		mmHg
TR Vmax		m/s
TR maxPG		mmHg
	L	2.2.2.2

Report Details - EON-	367347				
ICSR:	2055560				
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:	2018-10-01 16:59:24 EDT				
Reported Problem:	Problem Description:		ed with reduced contractile function on echo B6 atic NT-proBNP tested at RDVM. Will send results		
	Date Problem Started:	09/27/2018			
	Concurrent Medical Problem:	No			
	Outcome to Date:	Stable			
Product Information:	Product Name:	Honest Kitchen whol again) - see diet hist	le grain turkey, beef, or chicken + Ziwi Peak (just started ory for B6 attached		
	Product Type:	The state of the s			
	Lot Number:				
	Package Type:	BAG			
	Product Use Information:	Description:	See attached diet history		
	Manufacturer /Distributor Information:				
	Purchase Location Information:				
Animal Information:	Name:	B6			
	Type Of Species:	Dog			
	Type Of Breed:	d: Retriever - Golden			
	Gender:	: Female			
	Reproductive Status:	Neutered			
	Weight:	29.1 Kilogram			
	Age:	B6 Years			
	Assessment of Prior Health:	Excellent			
	Number of Animals Given the Product:	1			
	Number of Animals Reacted:	1			
	Owner Information:	Owner Information provided:			
		Contact:	Name: B6		
			Email:		
		Address:			
		Addition.	B6		
			United States		
	Healthcare Professional	Practice Name:	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
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:			
Additional Documents:	Attachment:	B6 1810011	
Additional Documents:	1	B6 1810011 Diet history (for	(m) F (m) m (m) m (m) m (m) m (m) m (m) m (m) m
Additional Documents:	Description;	emicrosconcionales Automotics	
Additional Documents:	Description;	Diet history (for	
Additional Documents:	Description: Type:	Diet history (for Medical Records echo 9-27-18.pdf	
Additional Documents:	Description: Type: Attachment: Description:	Diet history (for Medical Records echo 9-27-18.pdf	
Additional Documents:	Description: Type: Attachment: Description:	Diet history (for Medical Records echo 9-27-18.pdf Echo	B6 - housemates)
Additional Documents:	Description: Type: Attachment: Description: Type:	Diet history (for Medical Records echo 9-27-18.pdf Echo Echocardiogram discharge 9-27-18.p	B6 - housemates)
Additional Documents:	Description: Type: Attachment: Description: Type: Attachment: Description:	Diet history (for Medical Records echo 9-27-18.pdf Echo Echocardiogram discharge 9-27-18.p	B6 - housemates)
Additional Documents:	Description: Type: Attachment: Description: Type: Attachment: Description:	Diet history (for Medical Records echo 9-27-18.pdf Echo Echocardiogram discharge 9-27-18.p Discharge Medical Records	B6 - housemates)
Additional Documents:	Description: Type: Attachment: Description: Type: Attachment: Description: Type:	Diet history (for Medical Records echo 9-27-18.pdf Echo Echocardiogram discharge 9-27-18.p Discharge Medical Records taurine.pdf	B6 - housemates)

Report Details - EON-	364577					
ICSR:	2054750					
Type Of Submission:	Initial					
Report Version:	FPSR.FDA.PETF.V.V1					
Type Of Report:	Adverse Event (a symptom	, reaction or disease a	associated with the	product)		
Reporting Type:	Voluntary					
Report Submission Date:	2018-09-07 17:16:09 EDT					
Reported Problem:	Problem Description:	Not true DCM but re	duced contractility.	B6 taurine	(whole blood)	
	Date Problem Started:	<u>, </u>		barawai		***************************************
	Concurrent Medical Problem:	62 ·				
	Outcome to Date:	Stable				
Product Information:	Product Name:	Ziwi Peak (recently s	started)			
	Product Type:					
	Lot Number:	(<u> </u>				
	Package Type:	BAG				
	Product Use Information:					
	Manufacturer /Distributor Information:					
	Purchase Location Information:					
	Product Name:	Honest Kitchen Who	ile Grain Turkey, B	eef, or CHic	ken	
	Product Type:	Pet Food				
	Lot Number:					
	Package Type:	BAG				
	Product Use Information:					
	Manufacturer /Distributor Information:		1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A 1200 A			
	Purchase Location Information:					
Animal Information:	Name:	B6				
	Type Of Species:	Dog				
	Type Of Breed:	Retriever - Golden				
	Gender:	Male				
	Reproductive Status:					
	: <u>;;;:::::::::::::::::::::::::::::::::</u>	31.5 Kilogram				
		B6 Years	u			
	Assessment of Prior Health:					~~~~~~~~
	Number of Animals Reacted:	1				
	Owner Information:	Owner	Yes			
		Information provided:	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
		Contact: Address:	Name: Phone:	B6		
		Address.	B6			
			United States			

	Healthcare Professional	Practice Name:	Tufts Cumming	s School of Veterinary Medicine
	Information:	Contact:	Name:	Lisa Freeman
			Phone:	(508) 887-4523
			Email:	lisa.freeman@tufts.edu
		Address:	200 Westboro North Grafton Massachusetts 01536 United States	
		Practice Name:	Tufts Cumming	s School of Veterinary Medicine
		Contact:	Name:	Emily Karlin
			Phone:	508-887-4696
		Permission to Release Records to FDA:	Yes	
Sender Information:	Name:	Lisa Freeman		
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	Contact:	Phone:	5088874523	
		Email:	lisa.freeman@t	ufts.edu
	Permission To Contact Sender:	Yes		
	Preferred Method Of Contact:	Email		
Additional Documents:				
	Attachment:	cardio discharge 9-5	-18.pdf	
	Description:	Cardio discharge		
	Type:	Medical Records		
	Attachment:	t4.pdf		
	Description;			
		Laboratory Report		
	Attachment:	rdvm records.pdf		
	The second secon	RDVM records		
		Medical Records		
	Attachment:	cardio report 9-5-18.	pdf	
	The state of the s	Cardio report		
		Medical Records		

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

Discharge Instructions

Maine: B6			
Language and a second	Mame:	B6	Patient ID: 426744
Species: Canine Gold Male (Neutered) Golden Retriever	Address:	B6	
Rirthdale: 86 Attending Cardiologist:			
John E. Rush DVM, MS, DACVIM	(Cardiology), DA	CVEOC	
B6			
Cardiology Resident:	·····		
Cardiology Technician:	B6		
B6	1		
Date: 9/5/2018			
Low blood taurine levels Clinical Findings:Thank you for bringing	B6 infore	valuation of his heart. His l This could be a variation o	heart is normal in size, but his finnemal for him, but it is also nossibl
Low blood taurine levels Clinical Findings: Thank you for bringing contractile function is not quite as vigorouthat it could be related to low taurine. We heart health. We also submitted a total Te	B6 infore as as some dogs have submitter to assess B	This could be a variation of I an NTproBNP test to gat	f normal for him, but it is also possibl
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Low blood taurine levels Clinical Findings: Thank you for bringing contractile function is not quite as vigorouthat it could be related to low taurine. We heart health. We also submitted a total Tawith these results within the next few day Monitoring at Home: Please watch for a Diet Suggestions: We recommend a chankibble we recommend scheduling a Nutriticooked diet then please schedule an appoint the Recommended Medications: B6 ca	B6 in fore is as some dogs have submitte to assess B is. ny exercise intolo ge in B6 tion consultation bintment with in have normal a	This could be a variation of an NiproBNP test to gath 6 thyroid on his current armoe, weakness, or collablet. If you would like to provide the provide	if normal for him, but it is also possibler more information about B6 nt level of medication. We will call you pse. Jursue a mix of home cooking and ne ou would like to feed primarily home

(508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.

Please visit our HeartSmart website for more infor	mation
http://wet.tufts.edu/heartsmart/	

Prescription Refill Discloimer:

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

Ordering Food:

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

Clinical Trials:

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

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Case: B6	Owner: B6	Discharge Instructions
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Cardiology Liaison: 508-887-4696

B6

Patient ID: 426744 B6 Canine B6 Years Old Male (Neutered) Golden Retriever

Cardiology Appointment Report

Date: 9	/5/2018			
	ing Cardiologist:			
ļ	John E. Rush DVM, MS, D/	ACVIM (Cardiology), D	ACVECC	
- Paragraphic Para	В	36		
Correlated	oev Resident:		· · · · · · · · · · · · · · · · · · ·	
		B6		
Cardiol	ogy Technician:			
1	B6	12101230,0101230,01010		
	DO	<u> </u>		
		powierwise.		
		Anternative.	book page with UC Davis. Dr	
	an echo. Tested B6	CONTRACTOR CONTRACTOR	ptomatic. Has been treated	to be the state of
	하셨는 것은 민이는 40일에 가는 소리를 되었는데 되었다.		ner than usual. Slowing dow	n on hikes, but no
bearing the 's	na difficulties or counting			
oreann	ing diriticulties or coughing	, May breathe faster t	han other dog B6	
bream	ng amounte a coagaing	, May breathe taster t	han other dog B6	
	sent out whole blood taur		Line (w) = rece (w) = rec!	
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Syncope or collapse? no Sudden onset lameness? no Exercise intolerance? starting last year started leaving the pool sooner, coughs to clear throat **Current Medications Pertinent to CV System:** Medication: **B6** Formulation/Tab Size B6 twice a day Administration Frequency: Need refills? Medication: **B6** Formulation/Tab Size B6 Administration Frequency: Give 1 Tablet Twice a day Need refills? Medication: omega 3 fatty acids Formulation/Tab Size: nordic naturals once a day 2 teaspoons Administration Frequency: Need refills? Cardiac Physical Examination: Muscle condition: Moderate cachexia Normal Mild muscle loss Marked cachexia Cardiovascular Physical Exam: Murmur Grade: IV/VI None II I/VI ■ v∧ı ■ IV/VI ■ III/VI Jogular 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 **Bounding** Fair Pulsedeficits Good Pulsus paradonus ■ Strong Other: Arrhythmia: None ■ Bradycardia Sirvus arrhythmia Tachycardia Premature beats

Shortness of breath or difficulty breathing? no

Gallop:		
Yes	Pronounced	
Mo No	Other:	
Intermittent		
Pulmonary assessments:		
Eupneic	Pulmonary craddes	
Mild dyspnea	Wheezes	
Marked dyspnea	Upper airway stridor	
Mormal BV sounds	**************************************	
Abdominal exam:		
Mormal Normal	Mild ascites	
■ Hepatomegaly	Marked ascites	
Abdominal distension		
Problems:		
Low whole blood taurine, on grain free	e diet	
Diagnostic plan:		
■ Echocardiogram	Dialysis profile	
Chemistry profile	Thoracic radiographs	
■ EOG	■ NT-proBNP	
Renal profile	Trapanin I	
☐ Blood pressure	Other tests:	
Echocardiogram Findings:		
ESIG-STORYSIN PROBES		
	DC	
	B6	
Constitution of the Consti		
Mitral inflow:		
Surrenated	Pseudonomial	
Mormal Normal	Restrictive	
Delayed relaxation		
ECG findings:		
B6		
Assessment and recommendations:		
Educardianean muscle mildle meluca	d contractile fraction with an acidemen of shouther o	at the first and the same

Ethocardiogram reveals mildly reduced contractile function with no evidence of chamber enlargement or wall thinning. It is possible that these mild changes are related to taurine deficiency/diet, but other mild cardiomyopathy, age related change, or variation for this individual cannot be ruled out. An NTproBNP level was submitted for additional information. Patient is receiving thyroid supplementation and T4 has not been checked recently, so T4 was also submitted today (6 hours post pill). Recommend taurine

supplementation and diet change	В6	
	B6	

Final Diagnosis:

Mildly reduced LV contractile function

M-Mode	i and the same of	
IVSd	-	cm
LVIDd		CITI
LVPWd		cm
IVSs	de la contraction de la contra	cm
LVIDs	Da	cm
LVPWs	B6	cm
%FS	1	%
Ao Diam		cm
LA Diam	1	cm
LA/Ao	4	
Max LA	Land of the Control o	cm
M-Mode Normalized		
IVSdN	(0.29 - 0.52)	1
LVIDAN	(1.35 - 1.73)	
LVPWdN	(n 33 - n 53)	
IVSsN	B6 (0.43 - 0.71)	
LVIDSN	(0.79 - 1.14)	
LVPWsN	(0.53 - 0.78)	
An Diam N	(0.68 - 0.89)	E
LA Diam N	(0.64 - 0.90)	
20		
<u>2D</u>	J1	Wall.
SA IA		cm
Ao Diam	B6	cm
SA LA / Ao Diam	В	
IVSd		cm
LVIDd	Lincippi	cm

	(emerco) emerco) en	
LVPWd		cm
EDV(Teich)	1	ml
IVSs	1	CITI
LVIDs		cm
LVPWs	1	cm
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)	1	ml
LVLd A2C		CITI
LVEDV MOD A2C		ml
LVIs A2C		cm
LVESV MOD A2C	1	ml
LVEF MOD A2C	1 - 1	%
SV MOD A2C	B6	ml
LVId LAX	129	cm
LVAd LAX	1	cm
LVEDV A-L IAX	1	ml
LVEDV MOD LAX		ml
LVLS LAX		cm
LVAsLAX		cm
LVESV A-L LAX	İ	ml
LVESV MOD LAX		ml
HR		ВРМ
EFA-L LAX	1	%
LVEF MOD LAX		%
SV A-L LAX		ml
SV MOD LAX		ml
CO A-L LAX		l/min
CO MOD IAX	The second second second second second	l/min
Doppler		
MV EVel		m/s
MV DecT		ms
MV A Vel		m/s
MV E/A Ratio		
E		m/s
A'	D6	m/s
E/E	B6	
PV Vmax		m/s
PV maxPG		mmHg
AV Vmax		m/s
AV maxPG		mmHg
TR Vmax TR maxPG		m/s
		mmHg

AT TUFTS UNIVERSITY Cardiology Liaison: 508-887-4696

Date: 9/27/2018

B6

Patient ID: 426794

B6 Canine
B6 Tears Old Female (Spayed) Golden Retriever
Gold

Cardiology Appointment Report

John E. Rush DV	M, MS, DACVIM (Cardiology), DACVECC B6
Cardiology Resident:	
	B6
Cardiology Technician:	
E	B6
Student: B6 Presenting Complaint:	, V'19 Check for DCM (has been on grain free diet)
Concurrent Diseases: n	one
	greenway 0.
	y: B6 had been on a grain free diet at home, and another golden retriever of
	y: B6 had been on a grain free diet at home, and another golden retriever of rine B6 taurine level was normal)- owner wants to make sure B6 does no

Diet and Supplements:

Honest Kitchen (grain free), primal once a month, home cooked here and there (Old diet) Now on Canine Natural, Bag of royal canin Golden retriever, zee wee peak

Omega 3 fatty acid oil

Eye drops- diclofenac for pigmentary uveitis

On heartworm preventative

Cardiovascular History:

Prior CHF diagnosis? No Prior heart murmur? No Prior ATE? No Prior arrhythmia? No Monitoring respiratory rate and effort at home? No Cough? No Shortness of breath or difficulty breathing? No Syncope or collapse? no Sudden onset lameness? no Exercise intolerance? no

Current Medications Pertinent to CV System: None

Cardiae Physical Examination:		
	B6	
Muscle condition:	☐ Moderate cachesia	
Mild muscle loss	Marked cacheda	
Cardiovascular Physical Exam:		
Murmur Grade:		
None	□ IV/VI	
□ I/M	□ v/vi	
□ II/VI	□ vi∧i	
□ III/VI		
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	Bounding	
Pair Pair	Pulse deficits	
■ Good	Pulsus paradoxus	
☐ Strong	Other:	
Arrhythmia:		
Mone Name	- Bradycardia	
Premature beats	☐ Tachycardia	
Gallop:		
Yes	Pronounced	
■ No	Other:	
Intermittent		
Pulmonary assessments:		
Eupneic Eupneic	Pulmonary craddes	
Mild dyspnea	Wheezes	
Marked dyspnea	Upper airway stridor	
Normal BV sounds		
Abdominal exam:	The same of the sa	
Normal	Mild ascites	
Hepatomegaly	Marked ascites	

Problems: Hx of grain free diet; a	sparerity neartry dug		
Xiagnostiic plan: Echocardiogram Chemistry profile ECG	Dialysis profile Thoracic radiographs NT-proBNP		
Renal profile Blood pressure	Troponin i Other tests:		
iii bioopresure	LI OTHER LESIS.		
chocardiogram Findings:			
	B6		
	DU		
Vitral inflow:			
Summated	Pseudonormal		
Mormal Delayed relaxation	Restrictive		
i Deaparean			
ECG findings:			
NAK. OK SULKINI			
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	ns:		
Assessment and recommendation	ns: duced contractile function with no eviden	ce of chamber enlarger	nent or
Assessment and recommendation in the commendation is a commendation in the commendation in the commendation in the commendation is a commendation in the commendation in the commendation in the commendation is a commendation in the commendation in the commendation in the commendation in the commendation is a commendation in the commendation in t			
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Assessment and recommendation Echocardiogram reveals mildly rec wall thinning. It is possible that th age related change, or variation o	duced contractile function with no eviden ese mild changes are related to diet, but o	other mild cardiomyopa out. An NTproBNP level	athy,
Assessment and recommendation Echocardiogram reveals mildly rec wall thinning. It is possible that th age related change, or variation o	duced contractile function with no eviden ese mild changes are related to diet, but of f normal for this patient cannot be ruled o	other mild cardiomyopa out. An NTproBNP level	athy,
Assessment and recommendation Echocardiogram reveals mildly recommendation wall thinning. It is possible that the age related change, or variation of submitted for additional information final Diagnosis:	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6	athy,
Assessment and recommendation Echocardiogram reveals mildly recovall thinning. It is possible that the age related change, or variation of submitted for additional information final Diagnosis:	duced contractile function with no eviden ese mild changes are related to diet, but of f normal for this patient cannot be ruled o	other mild cardiomyopa out. An NTproBNP level ciation B6	athy,
Assessment and recommendation Echocardiogram reveals mildly recommendation wall thinning, it is possible that the age related change, or variation of submitted for additional information submitted for additional information final Diagnosis: Mildly reduced LV contractile fundation	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6	athy,
Assessment and recommendation Echocardiogram reveals mildly recommendation wall thinning. It is possible that the age related change, or variation of submitted for additional informat Final Diagnosis: Mildly reduced LV contractile functions M-Mode IVSd	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6 ormal)	athy,
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Assessment and recommendation Echocardiogram reveals mildly recommendation Echocardiogram reveals mildly recommendation wall thinning. It is possible that the age related change, or variation of submitted for additional informat submitted for additional informat final Diagnosis: Mildly reduced LV contractile fund M-Mode LVSd LVIDd LVPWd	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6 omal)	athy,
Assessment and recommendation Echocardiogram reveals mildly recommendation wall thinning. It is possible that the age related change, or variation of submitted for additional informat Final Diagnosis: Mildly reduced LV contractile fund M-Mode IVSd LVPWd IVSs	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary assobility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6 ormal) om om	athy,
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Assessment and recommendation Echocardiogram reveals mildly recommendation wall thinning. It is possible that the age related change, or variation of submitted for additional informat Final Diagnosis: Mildly reduced LV contractile fund M-Mode IVSd LVIDd LVPWd IVSs LVIDs LVPWs	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary assobility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6 omal) om om om	athy,
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wall thinning. It is possible that the age related change, or variation of submitted for additional informational informational Diagnosis:	duced contractile function with no evidencese mild changes are related to diet, but of normal for this patient cannot be ruled of ion. Given the possibility of a dietary assobility of a dietary asso	other mild cardiomyopa out. An NTproBNP level ciation B6 omal) om om om	athy,

EPSS	B6	om
Max LA	DO	om
M-Mode Normalized		
IVSdN	(0.29 - 0.52)	
LVIDAN	(1.35 - 1.73)	
LVPWdN	(0.33 - 0.53)	
IVSeN	B6 (0.43 - 0.71)	I
LVIDSN	DO (0.79 - 1.14)	
LVPWsN	(0.53 - 0.78)	
Ao Diam N	(0.68 - 0.89)	
LA Diam N	(0.64 - 0.90)	
<u>2D</u>	January 1997	
Ao Diam		om
IVSd		cm
LVIDd		cm
LVPWd		cm
EDV(Teich)	***	ml
IVSs		om
LVIDs		om
LVPWs		cm
ESV(Teich)		ml
EF(Teich)		%
EF(Cube)	4	%
%FS		%
SV(Teich)		ml
LVId LAX		cm
LVAd LAX LVEDV A-L LAX	100	cm
LVEDV MOD LAX	many and a second	ml
LVISTAX	B6	ml
LVASLAX	Bo	om
LVESV A-L LAX	4	ml
LVESV MOD LAX		ml
HR		BPM
EFA-L LAX		%
LVEF MOD LAX		%
SV AL IAX		ml
SV MOD LAX	and the same of th	ml
CO A-L IAX		V min
CO MOD LAX		Vmin
SA IA		an
Doppler MV F Vol		
MV Evel		m/s
MV DecT		ms
MV Dec Slope		m/s
MV A Vel		m/s

From:	Freeman, Lisa <lisa.freeman@tufts.edu></lisa.freeman@tufts.edu>
To:	Reimschuessel, Renate
CC:	Jones, Jennifer L
Sent:	7/20/2018 12:06:11 PM
Subject:	RE: 800.267-FDA Case Investigation for B6 (EON-358523)
confusion about t and there will pro Thanks Lisa	bnable. I was never contacted about the other cases that I submitted. There was some he way I submitted them so I want to be sure you actually got them B6 B6 I'm sure you're all getting slammed with reports obably be even more coming now) but just wanted to check to be sure they got recorded.
	essel, Renate [mailto:Renate.Reimschuessel@fda.hhs.gov]
•	v 20, 2018 7:55 AM
	a <lisa.freeman@tufts.edu></lisa.freeman@tufts.edu>
Subject: RE: 800	fer L <jennifer.jones@fda.hhs.gov> 0.267-FDA Case Investigation for B6 (EON-358523)</jennifer.jones@fda.hhs.gov>
Subject. INE. 000	1.207-1 DA Case Investigation for Do (LON-550525)
	ring the information. are getting so many reports since our CVM update, we should pass on the B6 case as it is
think Jen is more Thank you again r	e familiar with the B6 case, so I'll let her respond regarding that one. for all your work on this investigation.
Renate Reimschuesse Phone 1-240- Fax 301-210-4	
	Veterinary/ScienceResearch/ucm247334.htm
Sent: Thursday, <mark> To: Reimschuess</mark>	Lisa [mailto:Lisa.Freeman@tufts.edu] July 19, 2018 5:59 PM sel, Renate < <u>Renate.Reimschuessel@fda.hhs.gov</u> > 0.267-FDA Case Investigation for B6 (EON-358523)
Subject. RE. 600	7.207-FDA Case Investigation for B6 (EON-336323)
mitral valve disea	arough this case, I'm not sure this is a completely clear-cut one. The dog has degenerative se and CHF but also has reduced cardiac contractility so might be a combination. me to collect the info below?
Also, I have an up you want that. Thanks ∟isa	odate on B6 who died at home last week. I do have food from the owner if
_isa M. Freeman, [⊃] rofessor	, DVM, PhD, DACVN

Cummings School of Veterinary Medicine Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org

From: Reimschuessel, Renate < Reimschuessel@fda.hhs.gov >

Sent: Tuesday, July 17, 2018 11:48 AM

To: Freeman, Lisa < lisa.freeman@tufts.edu>

Subject: 800.267-FDA Case Investigation for **B6** (EON-358523)

Dear Dr. Freeman,

Thank you for submitting your consumer complaint to FDA. I'm sorry to hear about **B6** illness. As part of our investigation, we'd like to request:

- Full Medical Records
 - Please email (preferred) or fax (301-210-4685) a copy of **B6** entire medical history (not just this event), including any referral diagnostics.
- Phone interview about B6 diet and environmental exposures
 - Please confirm permission to contact the owner.
 - o The interview generally lasts 30 minutes.

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

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

Thank you kindly, especially for submitting multiple cases, Dr. Reimschuessel

Renate Reimschuessel V.M.D. Ph.D.

Director: Vet-LIRN

(Veterinary Laboratory Investigation and Response Network)

Center For Veterinary Medicine, FDA, 8401 Muirkirk Road, Laurel, MD 20708

Phone 1-240-402-5404 Fax 301-210-4685

EMAIL: renate.reimschuessel@fda.hhs.gov

Vet-LIRN

 $\underline{\text{http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm}}$

Phish-Pharm

 $\underline{\text{http://www.fda.gov/Animal/Veterinary/ScienceResearch/ToolsResources/Phish-Pharm/default.htm}}$

Aquaculture

 $\underline{\text{http://www.fda.gov/AnimalVeterinary/ScienceResearch/ResearchAreas/ucm130892.htm}}$

From:	Jones, Jennifer L
110111.	(FYDIBOHF23SPDLT)/cn=Recipients/cn=0f6ca12eaa9348959a4cbb1e829af244-Jennifer.Jo>
To:	'Freeman, Lisa'
Sent:	8/31/2018 1:03:03 PM
Subject:	B6
	<u> </u>
Thank you, Lisa! Jen	Enjoy your weekend,
Jennifer Jones, DV Veterinary Medical Tel: 240-402-5421	
TA U.S. FOOD & DRU	G Nedura
Sent: Wednesday	Lisa <lisa.freeman@tufts.edu> /, August 29, 2018 6:45 PM er L <jennifer.jones@fda.hhs.gov> B6</jennifer.jones@fda.hhs.gov></lisa.freeman@tufts.edu>
(he is deceased).	B6 owner. I already submitted his case and sent in his food earlier this week sion to be contacted directly for more info. Their phone is B6
Board Certified Vo Professor Cummings School Friedman School	DVM, PhD, DACVN eterinary Nutritionist TM of Veterinary Medicine of Nutrition Science and Policy Translational Science Institute
To: Reimschuess	Lisa luly 19, 2018 5:59 PM el, Renate < <u>Renate.Reimschuessel@fda.hhs.gov</u> > .267-FDA Case Investigation for <u>B6</u> (EON-358523)
mitral valve disea	rough this case, I'm not sure this is a completely clear-cut one. The dog has degenerative se and CHF but also has reduced cardiac contractility so might be a combination. me to collect the info below?
Also, I have an up you want that. Thanks Lisa	odate on B6 who died at home last week. I do have food from the owner if
Lisa M. Freeman, Professor	DVM, PhD, DACVN

Cummings School of Veterinary Medicine Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org

From: Reimschuessel, Renate < Reimschuessel@fda.hhs.gov >

Sent: Tuesday, July 17, 2018 11:48 AM **To:** Freeman, Lisa < lisa.freeman@tufts.edu>

Subject: 800.267-FDA Case Investigation for B6 (EON-358523)

Dear Dr. Freeman,

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 - Please confirm permission to contact the owner.
 - o The interview generally lasts 30 minutes.

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

Thank you kindly, especially for submitting multiple cases, Dr. Reimschuessel

Renate Reimschuessel V.M.D. Ph.D.

Director: Vet-LIRN

(Veterinary Laboratory Investigation and Response Network)

Center For Veterinary Medicine, FDA, 8401 Muirkirk Road, Laurel, MD 20708

Phone 1-240-402-5404 Fax 301-210-4685

EMAIL: renate.reimschuessel@fda.hhs.gov

Vet-LIRN

http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm

Phish-Pharm

http://www.fda.gov/AnimalVeterinary/ScienceResearch/ToolsResources/Phish-Pharm/default.htm

Aquaculture

 $\underline{\text{http://www.fda.gov/Animal/Veterinary/ScienceResearch/ResearchAreas/ucm130892.htm}}$

From: To: Sent: Subject: Attachments:	Freeman, Lisa <lisa.freeman@tufts.edu> Jones, Jennifer L 8/1/2018 10:33:10 PM RE: 800.267-FDA Case Investigation for B6 (EON-358523) B6 dcm taurine deficiency 7 7 17.pdf; B6 august 2017 echo.prnx; B6 B6 medical records.prnx; B6 nutrition request.prnx; B6 diet history.prnx</lisa.freeman@tufts.edu>
Tufts records includin	their records. I'm attaching what I have from B6 and the primary care vet plus some g diet history. still has the original food but will check
	nary Nutritionist TM Veterinary Medicine Iutrition Science and Policy nslational Science Institute
Sent: Wednesday, Au To: Freeman, Lisa <li 800.267="" cc:="" i="" lisa.="" please="" re:="" reimschuessel,="" send<="" subject:="" td="" thank="" yes,="" you,=""><td>er L <jennifer.jones@fda.hhs.gov> ugust 01, 2018 2:53 PM sa.freeman@tufts.edu> Renate <renate.reimschuessel@fda.hhs.gov> 7-FDA Case Investigation for B6 (EON-358523) B6 medical records. We can send you a box to collect the foods. Where would be will have a prepaid shipping label, and you can reuse the box to ship the samples by UPS.</renate.reimschuessel@fda.hhs.gov></jennifer.jones@fda.hhs.gov></td>	er L <jennifer.jones@fda.hhs.gov> ugust 01, 2018 2:53 PM sa.freeman@tufts.edu> Renate <renate.reimschuessel@fda.hhs.gov> 7-FDA Case Investigation for B6 (EON-358523) B6 medical records. We can send you a box to collect the foods. Where would be will have a prepaid shipping label, and you can reuse the box to ship the samples by UPS.</renate.reimschuessel@fda.hhs.gov></jennifer.jones@fda.hhs.gov>
Jennifer Jones, DVM Veterinary Medical Offic Tel: 240-402-5421 J.S. FOOD & DRUG	
Sent: Wednesday, Au To: Jones, Jennifer L Cc: Reimschuessel, I	[mailto:Lisa.Freeman@tufts.edu] ugust 01, 2018 2:45 PM <jennifer.jones@fda.hhs.gov> Renate <renate.reimschuessel@fda.hhs.gov> 7-FDA Case Investigation for B6 EON-358523)</renate.reimschuessel@fda.hhs.gov></jennifer.jones@fda.hhs.gov>
Hi Jen I'm still working on ge this time of year.	tting permission from B6 owners. They may be on vacation – tough to get people at
_	B6 (Boxer with low taurine eating Petcurean) has improved even further on e and taurine supplementation. I submitted that but wanted to be sure that got entered into His cardiologist and I are happy to provide records.

Lisa

Lisa M. Freeman, DVM, PhD, DACVN
Board Certified Veterinary NutritionistTM
Professor
Cummings School of Veterinary Medicine
Friedman School of Nutrition Science and Policy
Tufts Clinical and Translational Science Institute
Tufts University
www.petfoodology.org

From: Jones, Jennifer L < <u>Jennifer.Jones@fda.hhs.gov</u>>

Sent: Friday, July 20, 2018 8:47 AM

To: Freeman, Lisa < lisa.freeman@tufts.edu>

Cc: Reimschuessel, Renate < Renate.Reimschuessel@fda.hhs.gov >

Subject: RE: 800.267-FDA Case Investigation for B6 (EON-358523)

Good morning Lisa,

Yes, we got the reports you previously submitted and recorded the information for our database. Will you please forward any medical records for:

• B6 are you able to send any updates on the Taurine testing or echocardiogram (if done?)

• B6 \Iso was an autopsy done?

Thank you in advance and for your time to report all the cases! Jen

Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421





From: Freeman, Lisa [mailto:Lisa.Freeman@tufts.edu]

Sent: Friday, July 20, 2018 8:06 AM

To: Reimschuessel, Renate < Renate. Reimschuessel@fda.hhs.gov >

Cc: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Subject: RE: 800.267-FDA Case Investigation for **B6** EON-358523)

Dear Renata and Jennifer

That seems reasonable. I was never contacted about the other cases that I submitted. There was some

confusion about the way I submitted them so I want to be sure you actually got them

I'm sure you're all getting srammed with reports

(and there will probably be even more coming now) but just wanted to check to be sure they got recorded.

Thanks

Lisa

From: Reimschuessel, Renate [mailto:Renate.Reimschuessel@fda.hhs.gov]

Sent: Friday, July 20, 2018 7:55 AM

To: Freeman, Lisa < Lisa. Freeman@tufts.edu>

Cc: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Subject: RE: 800.267-FDA Case Investigation for RG (EON-358523)

Dear Lisa

Thanks for gathering the information.

I think, since we are getting so many reports since our CVM update, we should pass on the B6 case as it is

not clear-cut.
I think Jen is more familiar with the B6 case, so I'll let her respond regarding that one. Thank you again for all your work on this investigation.
Renate Reimschuessel V.M.D. Ph.D. Director Vet-LIRN Phone 1- 240-402-5404 Fax 301-210-4685 http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm
From: Freeman, Lisa [mailto:Lisa.Freeman@tufts.edu] Sent: Thursday, July 19, 2018 5:59 PM To: Reimschuessel, Renate < Renate.Reimschuessel@fda.hhs.gov > Subject: RE: 800.267-FDA Case Investigation for B6 (EON-358523)
Dear Renate In looking back through this case, I'm not sure this is a completely clear-cut one. The dog has degenerative mitral valve disease and CHF but also has reduced cardiac contractility so might be a combination. Do you still want me to collect the info below?
Also, I have an update on B6 who died at home last week. I do have food from the owner if you want that. Thanks Lisa
Lisa M. Freeman, DVM, PhD, DACVN Professor Cummings School of Veterinary Medicine Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org
From: Reimschuessel, Renate < Renate.Reimschuessel@fda.hhs.gov > Sent: Tuesday, July 17, 2018 11:48 AM To: Freeman, Lisa < lisa.freeman@tufts.edu > Subject: 800.267-FDA Case Investigation for B6 (EON-358523)
Dear Dr. Freeman, Thank you for submitting your consumer complaint to FDA. I'm sorry to hear about B6 illness. As part of our investigation, we'd like to request: • Full Medical Records • Please email (preferred) or fax (301-210-4685) a copy of this event), including any referral diagnostics. • Phone interview about B6 diet and environmental exposures • Please confirm permission to contact the owner. • The interview generally lasts 30 minutes. I attached a copy of our Vet-LIRN network procedures. The procedures describe how Vet-LIRN operates and how veterinarians help with our case investigations. Please respond to this email so that we can initiate our investigation.

Thank you kindly, especially for submitting multiple cases, Dr. Reimschuessel

Renate Reimschuessel V.M.D. Ph.D.

Director: Vet-LIRN

(Veterinary Laboratory Investigation and Response Network)

Center For Veterinary Medicine, FDA, 8401 Muirkirk Road, Laurel, MD 20708

Phone 1- 240-402-5404 Fax 301-210-4685 **EMAIL:** renate.reimschuessel@fda.hhs.gov

Vet-LIRN

http://www.fda.gov/AnimalVeterinary/ScienceResearch/ucm247334.htm

Phish-Pharm

http://www.fda.gov/AnimalVeterinary/ScienceResearch/ToolsResources/Phish-Pharm/default.htm

Aquaculture

http://www.fda.gov/AnimalVeterinary/ScienceResearch/ResearchAreas/ucm130892.htm

Report Details - EON-	367344				
ICSR:	2055558				
Type Of Submission:	Initial				
Report Version:	FPSR.FDA.PETF.V.V1				
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)				
Reporting Type:	Voluntary				
Report Submission Date:	2018-10-01 16:39:24 EDT				
Reported Problem:	Problem Description:	showed no overt DC	Eating grain-free diet so owner wanted baseline echo. No clinical sig <u>ns E</u> cho show <u>ed no overt DCM but reduced contractility. Taurine low (plasma <mark>B6</mark> WB≕ B6 Recommended diet change and taurine supplementation</u>		
	Date Problem Started:	09/19/2018			
	Concurrent Medical Problem:				
	Outcome to Date:	Stable			
Product Information:	Product Name:	Honest Kitchen Grain Free beef (love), fish (zeal), chicken (force), or turkey (keen). Also, Instinct raw beef patties			
	Product Type:				
	Lot Number:	3			
	Product Use Information:	Description:	See diet history	/	
	Manufacturer /Distributor Information:				
	Purchase Location Information:				
Animal Information:	Name:	B6			
	Type Of Species:	Dog			
	Type Of Breed:	Retriever - Golden			
	Gender:	Female			
	Reproductive Status:	Neutered			
	† <u> </u>	25.9 Kilogram B6 Years			
	Assessment of Prior Health:				
	Number of Animals Given the Product:	4			
	Number of Animals Reacted:	1			
	Owner Information:	Owner Information provided:	Yes		
		Contact:	Name:	DC	
			Phone:	B6	
			Email:		
		Address:			
			B6		
			DU		
		United States			
	Healthcare Professional	11			
	Information:	Contact:		Lisa Freeman	
		Contact.			
			1	(508) 887-4523 lisa.freeman@tufts.edu	
			Email.	3 II-SA. II EEI IIAII (W. LUITS. EUU	
		Address:			

		1	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: 5	088874523
		Email: li	sa,freeman@tufts.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Additional Documents:			
	Attachment:	rdvm records.pdf	
	Description;	RDVM records	
	Type:	Medical Records	
	Attachment:	B6 diet history 9-1	19-18.pdf
	Description:	Diet history	
	Type:	Medical Records	
	Attachment:	cardio discharge.pdf	
	Description:	Cardio discharge	
	Type:	Medical Records	
	Attachment:	echo 9-19-18.pdf	
	Description:	Carling and Carling	
	The state of the s	Echocardiogram	
	Attachment:	taurine B6 jpg	
	Description:	Taurine results	
	The second secon	Laboratory Report	

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

Discharge Instructions

Name: B6 Name: B6 Restient III: B6 Species Carrier Refress Carrier Refress Carrier Refress B6 Restient III: B6	Palient	Owner	
Blonde Fernale (Spayed) Golden Retriever Birthdate: B6 Attending Cardiologist: B6 Cardiology Resident: B6 Cardiology Resident: B6 Cardiology Resident: B6 Date: 9/19/2018 Diagnoses: B6 Date: 9/19/2018 Diagnoses: B6 bose on the cardiology evaluation since the has been eating grain free dog food. We did a echocardiogram and found that B6 bose not have any major changes to her heart, but the does have mildy reduced contractile function. There is some normal variation in dogs, so it is hard to say if this is clearly something that could be related to dector if it could just be her normal. We submitted Faurine levels today, and should have those results within 2 weeks. We will plan to call you with the results, but if you have not heard from us in 25 weeks then feel free to give us acal. Monitoring at Blome: We don't expect any concerns related to B6 heart at this time, but please call if you notice any trouble breathing, caughing, or collapse. Diet suggestions: We recommend feeding a main-stream brand, non-grain-free diet. Dry options that our nutritionist recommends are Royal Canin Early Cardiae, Royal Canin Boxer, or Purina Problem Adult Weight Management. B6 heart dranges are very mild, so she would not be restricted to one of these diets as long as it is from a large company such as Purina, Royal Canin, or Hills. If you are struggling to find a diet that B6 does well on then you can schedule a nutrition consult with Dr Isa Freeman or one of the other Tults Nutritionists.	Mane B6	Mane B6	Patient ID: B6
Retriever Birthdate: B6 Attending Cardiologist: B6 Cardiology Resident: B6 Cardiology Resident: B6 Cardiology Resident: B6 Date: 9/19/2018 Diagnoses: Thank you for bringing B6 to see us for her cardiology evaluation since she has been eating grain free dug food. We did a echocardiogram and found that B6 ploes not have any major changes to her heart, but she does have mildly reduced contractile function. There is some normal variation in dogs, so it is hard to say if this is clearly something that could be related to diet or if it could just be her normal. We submitted Taurine levels today, and should have those results within 2 weeks. We will plan to call you with the results, but if you have not heard from us in 2.5 weeks then feel free to give us a call. Monitoring at House: We don't expect any concerns related to B6 heart at this time, but please call if you notice any trouble breathing, coughing, or collapse. Diet Suggestions: We recommend feeding a main-stream brand, non-grain-free diet. Dry options that our outritionist recommends are Royal Canin Bry Cardios. Royal Canin Boxer, or Purina ProPlan Adult Weight Management. B6 heart changes are very mild, so she would not be restricted to one of these diets as long as it is from a large company such as Purina, Royal Canin, or Hills. If you are struggling to find a diet that B6 idness well on then you can schedule a nutrition consult with Dr Lisa Freeman or one of the other Tults Nutritionists.	Species: Canine	Address DC	An arm arm arm arm
Attending Cardiologist: B6	Blande Fernale (Spayed) Golden	[D0]	
Attending Cardiologist: Dohn E. Rush DVM, MS, DACVIM (Cardiology), DACVEOC B6 Cardiology Resident: B6 Cardiology Resident: B6 Date: 9/19/2018 Diagnoses: Thank you for bringing B6 to see us for her cardiology evaluation since she has been eating grain free dog food. We did a echocardiogram and found that B6 bloes not have any major charges to her heart, but she does have middly reduced our contractile function. There is some normal variation in dogs, so it is hard to say if this is clearly something that could be related to diet or if it could just be her normal. We submitted Taurine levels today, and should have those results within 2 weeks. We will plan to call you with the results, but if you have not heard from us in 2.5 weeks then feel free to give us a call. Microlioning at House: We don't espect any concerns related to B6 heart at this time, but please call if you notice any trouble breathing, coughing, or collapse. Dist Suggestions: We recommend leading a main-stream brand, non-grain-free diet. Dry options that our outritions trecommends are Royal Canin Boxer, or Purina ProPlan Adult Weight Management. B6 heart changes are very mid, so she would not be restricted to one of these diets as long as it is from a large company such as Purina, Royal Canin, or Hills. If you are struggling to find a diet that B6 bloes well on then you can schedule a nutrition consult with Dr Lsa Freeman or one of the other Tufts Nutritionsis.	/aterateraterateratera		
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B6 Cardiology Resident: B6 Cardiology Resident: B6 Date: 9/19/2018 Diagnoses: Thank you for bringing B6 to see us for her cardiology evaluation since she has been eating grain free dog food. We did a echocardiogram and found that B6 thoes not have any major changes to her heart, but she does have mildly reduced contractile function. There is some normal variation in dogs, so it is hard to say if this is clearly something that could be related to diet or if it could just be her normal. We submitted Taurine levels today, and should have those results within 2 weeks. We will plan to call you with the results, but if you have not heard from us in 25 weeks then feel free to give us a call. Microlibring at Home: We don't expect any concerns related to B6 heart at this time, but please call if you notice any trouble breathing, coughing, or collapse. Diet suggestions: We recommend feeding a main-stream brand, non-grain-free diet. Dry options that our outrolibriosist recommends are Royal Canin Boxer, or Purina ProPlan Adult Weight Management. B6 heart divarges are very mild, so she would not be restricted to one of these diets as long as it is from a large company such as Purina, Royal Canin, or Hills. If you are struggling to find a diet that B6 boss well on then you can schedule a nutrition consult with Dr Lisa Freeman or one of the other Tuffs Nutritionists. Energise Recommendations:			
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		B6 does well on then you can schedule a r	utrition consult with Dr Lisa Freeman or
B6 can continue to have normal exercise and activity.	Exercise Recommendations:		
	B6 can continue to have normal ex	rcise and activity.	

Recommended Medications:
You could consider supplementing with taurine B6 dose would be 500mg by mouth twice daily. We recommend
Swanson, NOW, or GNC brands, and you can get this over the counter from a vitamin store.
Recheck Visits: A recheck visit is recommened in 6-12 months. At this visit we would recheck the contractile function of B6 heart, and decide if continued cardiology rechecks are necessary.
Thank you for entrusting us with B6 care. She is such a sweet girl! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovel@fulfs.edu for scheduling and non-emergent questions or concerns.
Please visit our HeartSmart website for more information
http://wet.tufts.edu/heartsmart/
Prescription Refit Discloimer: For the safety and well-being of our patients, your pet must have had an examination by one of our veterinarians within the pay year in order to obtain prescription medications.
Orderina 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 Triuls:
Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a
promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/dinical-studies
Case B6 Owner B6 Discharge Instructions

Cardiology Liaison: 508-887-4696

B6

Patient ID: B6

B6 Years Old Female (Spayed) Golden Retriever

Cardiology Appointment Report

Attending Card	ialogist:	
	Rush DVM, MS, DACVIM (Cardiology), DACVEC	c
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Student: None

<u>Presenting Complaint</u>: Would like a base-line echo because she has been on a grain free diet. Has been on raw (Instinct) as well. Is on heartworm prev.

Consument Diseases: Front legs will shake sometimes when she is standing or lying down. No clear cause or associations. Passes on own.

General Medical History:

<u>Diet and Supplements</u>: Honest Kitchen - fish, beef, turkey, chicken gives her itchy feet. Previously Instinct Raw. When puppy Taste of the Wild.

Cardiovascular History:

Prior CHF diagnosis? no
Prior heart murmur? no
Prior ATE? no
Prior arrhythmia? no
Monitoring respiratory rate and effort at home? no
Cough? no
Shortness of breath or difficulty breathing? no
Syncope or collapse? no
Sudden onset lameness? no
Exercise intolerance? no

None Cardiac Physical Examination: Muscle condition: Moderate cachecia Normal Mildmuscle loss Marked cachecia Cardiovascular Physical Exam: Murmur Grade: None ■ IV/VI ■ I/vī ■ v/vi ■ VI/VI ■ IVVI 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 Bounding Fair Pulse deficits Good Pulsus paradosus Strong Other: Arrhythmia: M None ■ Bradycardia Sinus arrhythmia Tachycardia Premature beats Gallop: Yes Programmed No. Other: Intermittent Pulmonary assessments: Pulmonary crackles **Euprieic** Mild dyspnea Wheezes Marked dyspnea Upperairway stricks Normal BV sounds Abdominal exam: Mild ascites Normal Hepatomegaly Marked agrites Abdominal distension Problems: Grain free diet

Current Medications Pertinent to CV System:

Diagnostic plan: Echocardiogram Chemistry profile ECG Renal profile Blood pressure	Dialysis profile Thoracic radiographs NT-proBNP Troponin (Other tests:	
Echocardiogram Findings:		
	B6	
Mittral inflow: Summated Normal Delayed relaxation	Pseudonormal Restrictive	
ECG findings:		
B6		
B6 Assessment and recommendations:		
B6 Assessment and recommendations: Echocardiogram reveals mildly reduce	d contractile function, but no overt evi	
B6 Assessment and recommendations: Echocardiogram reveals mildly reduce	d contractile function, but no overt evi whole blood and plasma submitted tod	
B6 Assessment and recommendations: Echocardiogram reveals mildly reduce		
Assessment and recommendations: Echocardiogram reveals mildly reduce thinning or LV or LA dilation. Taurine value of the Diagnosis: Grain free diet		B6
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M-Mode Normalized		
IVSdN	(0.29 - 0.52)	
LVIDAN	(1.35 - 1.73)	
LVPWdN	B6 (0.33 - 0.53)	
IVSsN	B6 (0.43 - 0.71)	r.
LVIDSN	(0.79 - 1.14)	
LVPWsN	(0.53 - 0.78)	
LVPWSN	[] (u.33 - u.76)	
<u>20</u>	postantini munimini ming	
SA LA		om
Ao Diam		cm
SA LA / Ao Diam		
IVSd		om
LVIDd		cm
LVPWd		cm
EDV(Teich)		mi
IVSs		om
LVIDs	1	cm
LVPWs		am
ESV(Teich)	1	ml
EF(Teich)	1	%
%FS		%
SV(Teich)		ml
LVId LAX	B6	om
LVAd LAX		om
LVEDV A-L IAX		mi
LVEDV MOD LAX		ml
LVLs LAX		on
LVAs LAX		cm
LVESV A-L LAX		ml
LVESV MOD LAX		ml
HR	† †	BPM
EF A-L LAX		%
LVEF MOD LAX		%
SV A-L LAX		ml
SV MOD LAX		ml
CO A-L IAX		Vmin
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<u>Doppler</u>	γ̂α(α) € 1411-141) = 1 €	2-4
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MVAVel	Company Company	m/s
MV E/A Ratio	B6	44.5
E		m/s
A'		m/s
E/E		10000
PV Vmax	1	m/s

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Report Details - EON-				
ICSR:	2068038			
Type Of Submission:	Followup			
Report Version:	FPSR.FDA.PETF.V.V1			
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)			
Reporting Type:	Voluntary			
Report Submission Date:	2019-06-10 16:15:32 EDT			
Initial Report Date:	05/28/2019			
Parent ICSR:	2067510			
Follow-up Report to FDA Request:	Yes			
Reported Problem:	Problem Description: Date Problem Started: Concurrent Medical Problem: Pre Existing Conditions:	Yes		
	Outcome to Date:	Better/Improved/Recovering		
Product Information:	Product Name:	Fromm Game Bird Recipe Dog · Four-Star · Dry Grain-Free formula		
Troduct information.	Product Type:	<u> </u>		
	Lot Number:			
	Package Type:	BAG		
	Product Use Information:	<u> </u>		
	Manufacturer /Distributor Information:			
	Purchase Location Information:			
Animal Information:	Name:			
	Type Of Species:	Dog		
		Hound (unspecified)		
	Gender:			
	Reproductive Status:			
		38.9 Kilogram		
		B6 Years		
	Assessment of Prior Health:	4		
	Number of Animals	1		

	Given the Product:					
	Number of Animals Reacted:	1				
	Owner Information:	Owner Information provided:	Yes			
		Contact:	Name: Phone:	В6		
		Address:	B6 United States			
	Healthcare Professional	Practice Name:	Tufts Cummings	School of Vet	erinary Med	icine
	Information:	Contact:	Name: Phone: Email:	В	3	
		Address:	200 Westboro Road North Grafton Massachusetts 01536 United States			
		Practice Name:	Tufts University	Cummings Sc	hool of Vete	rinary Medicine
		Contact:	Name:	Lisa Freeman		
			Phone:	(508) 887-4696	5	
		Address:	200 Westboro F North Grafton Massachusetts 01536 United States	Road		
		Permission to Release Records to FDA:	Yes			
Sender Information:	Name:	B6				
	Address:					
	Contact:	Phone: Email:	B6			
	Permission To Contact Sender:	t Yes				
	Preferred Method Of Contact:					
	Reported to Other Parties:	None				
Additional Documents:						
	Attachment:	Complete amino aci	d analysis 5-29-2	019.pdf		
	Description:	Na Maria Cara Cara Cara Cara Cara Cara Cara				
	Туре:	Laboratory Report				
	Attachment:	troponin 5-30-2019.	19.pdf			
	Description:					
	Туре:	Laboratory Report				

Attachment:	Follow-up medical records pdf	
	tion: Medical Records	
	Type: Medical Records	1
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Cummings Veterinary Medical Center

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

Discharge Instructions

Patient	Owner	
Name B6	Mane: B6	Partient IDc B6
Species: Canine	Address DC	Antonio (m) esterio (d)
Blande Female (Spayed) Golden	B6	
Retriever		
Bithdate B6		
Attending Cardiologist:		
John E. Rush DVM, MS, DACVI	M (Cardiology), DACVECC	
B6	The first desired to the first	
Cardiology Resident:		
personal And And Electric Control of Electric	B6	1
Cardiology Technician:		-4
B6		
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n t ababasa		
Date: 9/19/2018		
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Thank you for bringing B6 to see us echocardiogram and found that B6 contractile function. There is some non related to diet or if it could just be her of the submitted Taurine levels today, and but if you have not heard from us in 2.5 Monitoring at Home: We don't expect any concerns related to coughing, or collapse. Diet Suggestions: We recommend feeding a main-stream Canin Early Cardiac, Royal Canin Boxer, so she would not be restricted to one of Hills.	does not have any major changes to her himal variation in dogs, so it is hard to say if normal. d should have those results within 2 weeks weeks then feel free to give us a call. to B6 heart at this time, but please call through the properties the properties the please call through the properties the please call through the please call through the please call through the properties the please call through thr	eart, but she does have mildly reduced this is clearly something that could be s. We will plan to call you with the results, if you notice any trouble breathing, hat our nutritionist recommends are Roya nent. B6 heart changes are very mild, impany such as Purina, Royal Canin, or
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Recommended Medications:
You could consider supplementing with taurine: B6 dose would be 500mg by mouth twice daily. We recommend
Swanson, NOW, or GNC brands, and you can get this over the counter from a vitamin store.
Recheck Visits: A recheck visit is recommened in 6-12 months. At this visit we would recheck the contractile function of B6 heart, and decide if continued cardiology rechecks are necessary.
Thank you for entrusting us with B6 care. She is such a sweet girl! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.
Please visit our HeartSmart website for more information
http://wet.tufts.edu/heartsmart/
Prescription Refit Discloimes: 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 stack. Alternatively, veterinary diets can be ordered from
online retailers with a prescription/veterinary approval.
Clinical Triuls:
Clinical trials are studies in which our veterinary dactors work with you and your pet to investigate a specific disease process or a
promising new test or treatment. Please see our website: <u>vet.tufts.edu/cvmc/clinical-studies</u>
Case B6 Owner B6 Discharge instructions

B6

100 H		Patient I	<u>nforma</u>	tion		
Patient: B6		Age: 6	years	Referring Vete	rinarian:	B6
Patient Number: B	3	Weight:(kg)	25,10	Cardiologist:		B6
Breed: lab mix		Sex: F		Client Number:	: 147921	
Exam Date: 01/10/20	18 08:21	BSA: 0.87		:::::::::::::::::::::::::::::::::::::		
December 3 in length of circled, fell 5th. Labwo low normal. of days ago tick prevent Kangaroo ar B6; twice d	Unremarkable abdomin 1/10/18: B6 Echo - see below. Sinu Taurine level (whole b Thoracic radiographs: 1 1/9/18). Resolving card Hospitalization: An IV catheter was plan was started on	we heart failure nitially treated we. On January out a minute. Stild elevation of A short of breath sed stance after negative for hearth treath less are all the sed fine crackles nal palpation. In stackycardia or lood): pending. Mild decrease ir liogenic edema. Mild decrease ir liogenic edema. Mild decrease ir liogenic edema.	with a humin 4th she had he has a second ALT and AS and tires ea ward. She intworm 9/9/nd 2 thso of B6 apical systol left cranial left	a collapse episond less severe of a collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less episond les episond less episond les ep	by her rD and ode during episode or crease in (d a squirre heartwor alifornia Nn. She is nued yested as comparate heartwork as comparate heartwork as comparate heartwork as comparate heartwork and and a had octobed to pe	VM on a decrease g which she in January CK. T4 was let a couple im, flea and let let let let let let let let let let

Echocardiographic Report

Left Ventricle:

IVS Percent Thickening MM

Severe dilation (normalized LVIDd 2.85) with severe myocardial dysfunction (normalized LVIDs

LA Systolic Diameter MM

Aortic Root Diameter MM

2.34). Increased sphericity.

Left Atrium;

Severe dilation.

Right Ventricle:

Mild dilation with subjective decrease in contractility.

Right Atrium:

Mild dilation.

Mitral Valve:

Normal valve morphology. 4+ central mitral regurgitation.

Aortic Valve:

Normal.

Tricuspid Valve:

Mildly thickened valve leaflets. 1+ tricuspid regurgitation. Normal regurgitant velocities.

Pulmonic Valve:

Mildly thickened valve leaflets. Mild pulmonic insufficiency.

Aorta:

Normal

Pericardium:

Normal

Diagnosis

Dilated cardiomyopathy - This is a disease characterized by weakening of the heart muscle and dilation of the heart chambers. As the disease progresses, it can lead to congestive heart failure (fluid in the lungs causing shortness of breath and cough). Abnormal heart rhythms are common and can result in sudden death. Most commonly this is an inherited disease, though it can occur secondary to a deficiency in an amino acid called taurine.

Left sided congestive heart failure

Recommendations

01/10/2018 08:21

Give all medications as directed:

B6

One thing that can be very helpful for home monitoring is checking sleeping or resting respiratory rates. A recent study showed that even pets with severe heart disease rarely have resting respiratory rates greater than 30 breaths per minute unless they are starting to decompensate for that disease. Elevated respiratory rates at home may be even more sensitive than chest radiographs at picking up early decompensation. Count your pet's respiratory rate when he/she is at rest or sleeping (not within 20 minutes of being active). If his/her respiratory rate is greater than 30 breaths per minute, recheck again in a couple of hours. If persistently elevated above this level, call.

With advanced heart disease, our biggest dietary concerns are adequate calorie content and low sodium content. We aim for less than 80mg sodium per 100 kilocalories (kcal) in patients that have developed congestive heart failure. We do not advise protein restriction unless there is concurrent kidney disease (i.e. kidney diets are not advised unless there is concurrent kidney disease). Please refer to our diet handouts with a list of currently adequate diets and treats, though this list is not exclusive. If you wish to feed a diet that is not on these lists, you will need to call the manufacturer of the diet to obtain a sodium content.

As we discussed, we have had three other cases of severe DCM where the dogs have been eating a kangaroo and lentil diet. There is no data that has shown an association with this diet and DCM but we are concerned there may be a connection there and are looking into it at this time. For this reason, we would consider changing B6 diet.

We sent B6 home with a few cans of Hill's Science Diet Canine Maintenance canned food. This food has an appropriate level of sodium for dogs in congestive heart failure and is available at most pet stores. Lamb should be avoided as a protein source but any other protein is appropriate (with the exception of kangaroo).

The very best diet for dogs with DCM/heart failure is probably Hill's Science Diet Prescription j/d. This food has a good source of taurine, carnitine and fatty acids. However, this diet is rather costly.

We have submitted a taurine level and will call you with the results when they are available.

Exercise is also a concern in advanced heart disease. While cage rest is ideal with active heart failure, some exercise is permissible in asymptomatic disease. However, vigorous or extended exercise should be avoided.

***As long as B6 does well at home we would like to re-evaluate her in 7-10 days. At this time we will recheck her kidney values/electrolytes and blood pressure as well as repeat chest x-rays.

ECHO REPORT	<u></u>	B6				01/10/2018 08:21
В6	DVM, DAC	VIM (Cardiology)				
(Electronically S	Signed)					
Final Date:						
		Like	rus on Fa	icebook!		
		www.facebo		B6		
***Notes to our						
-Please bring all	medications to yo	our pet's scheduled	appointments.			
- we require a 48	s hour notice for a	Ill refills When yo	u call to reque	t a refill, please lea	ave the pharmacy	nhone number or
AFTER!	it.vou.nian.oo.nid B6	7-681	ton at our facil	IIV. PKESCRIP II	ON REFILLS AF	E NOT AVAILABLE
weekends).		K	EGULAR BUS	INESS HOURS (Evenings, Fridays	s, holidays and
-Check out	B6	and enter your le	real zin enda te	canent for the har	ar <u>Levi</u> niu in eet e	nedications at your
local pharmacies			was Esp code to	scarch for the des	e prices on your n	nedications at your
-If an emergency	arises with your	net.	R6	o o o o o o o o o o o o o o o o o o o	*1*1	

Withheld in Full as B5

Withheld in Full as B5

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:						
Reported Problem:	Problem Description: , Eeb 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:					
	Concurrent Medical Problem:					
	Pre Existing Conditions:	B6				
	Outcome to Date:	Stable				
Product Information:	Product Name:	Zignature Kangaroo	Formula			
	Product Type:	{				
	Lot Number:	7				
	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:	B6				
	Type Of Species:	}i				
	1	Retriever - Golden				
	Gender:	7				
	Reproductive Status:	7				
		40 Kilogram				
	wweight.	,				

	Age:	6 Years	
	Assessment of Prior		
	Health: Number of Animals	1	
	Given the Product:	1	
	Reacted: Owner Information:	_	
	Owner Information:	Owner Information provided:	
		Contact:	Name: B6
		Address:	
			B6 United States
	Healthcare Professional	Practice Name:	B6
	Information:	Contact:	I
		Address:	
			L! United States
		Type of Veterinarian:	Referred veterinarian
		Date First Seen:	02/23/2018
Sender Information:	Name:	В6	
	Address:		
		B6 United States	
	Contact:	1	B6
	Contact: Reporter Wants to Remain Anonymous:	Phone: Email:	B6
	Reporter Wants to	Phone: Email:	B6
	Reporter Wants to Remain Anonymous: Permission To Contact Sender: Preferred Method Of Contact:	Phone: Email: No Yes Email	B6
	Reporter Wants to Remain Anonymous: Permission To Contact Sender: Preferred Method Of	Phone: Email: No Yes Email	B6
Additional Documents:	Reporter Wants to Remain Anonymous: Permission To Contact Sender: Preferred Method Of Contact: Reported to Other	Phone: Email: No Yes Email	B6
Additional Documents:	Reporter Wants to Remain Anonymous: Permission To Contact Sender: Preferred Method Of Contact: Reported to Other	Phone: Email: No Yes Email	B6
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Additional Documents:	Reporter Wants to Remain Anonymous: Permission To Contact Sender: Preferred Method Of Contact: Reported to Other	Phone: Email: No Yes Email	B6
Additional Documents:	Reporter Wants to Remain Anonymous: Permission To Contact Sender: Preferred Method Of Contact: Reported to Other	Phone: Email: No Yes Email	B6

Report Details - EON-	367845						
ICSR:	2055793						
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:	2018-10-08 14:34:26 EDT						
Reported Problem:	Problem Description:	DCM and atrial fibrill	ation diagnosed 10/5/18				
	Date Problem Started:	-					
	Concurrent Medical Problem:						
	Pre Existing Conditions:	s: B6					
	Outcome to Date:	: Stable					
Product Information:	Product Name:	Rawz meal free dry	food limited recipe wild salmon dry				
	Product Type:	7					
	Lot Number:						
	Package Type:	4					
	Product Use Information:						
	Manufacturer /Distributor Information:						
	Purchase Location Information:						
Animal Information:	Name:	B6					
	Type Of Species:	Section 19 and 1					
	Type Of Breed:						
	Gender:	r: Male					
	Reproductive Status:	Neutered					
	3)	t: 33.2 Kilogram e: 10 Years r Excellent					
	Age:						
	Assessment of Prior Health:						
	Number of Animals Given the Product:						
	Number of Animals Reacted:	1					
	Owner Information:	Owner Information provided:	Yes				
		Contact:	Name: B6				
			Phone: B6				
			Email: B6				
		Address:					
			B6				
			United States				
	Healthcare Professional	Practice Name:	Tufts Cummings School of Veterinary Medicine				
	Information:	Contact:	Name: Lisa Freeman				
			Phone: (508) 887-4523				
			Email: lisa.freeman@tufts.edu				
		Address:	200 Westboro Rd				

		Compiled records Medical Records		
Additional Documents:	Attachment:	B6 compiled rec	ords small.pdf	
4 1 100 - 15	Contact:			
	Preferred Method Of	Email		
	Permission To Contact Sender:	Yes		
		Email:	lisa.freeman@tufts.edu	
	Contact:	Phone:	5088874523	
		North Grafton Massachusetts 01536 United States		
	Address:	200 Westboro Rd		
Sender Information:	Name:	Lisa Freeman		
			North Grafton Massachusetts 01536 United States	

Cummings Veterinary Medical Center

North Grafton, MA 01536 Telephone (508) 839-5395 Far (508) 839-7951 http://vebmed.tufts.edu/

55 Willard Street

Foster Hospital for Small Animals

Discharge Instructions

Patient	Chance	graduate advance.
Name: B6	Mame B6	Patient ID: B6
Species: Canine	Address: B6	
Yellow Male (Neutered) Labrador	Leaving and the second and the secon	
Retriever Rirthdate: B6		
Attending Cardiologist:	A (Cardiology), DACVECC	
B6	And the second s	
Cardiology Resident:	B6	
Cardiology Technician:		
D6		
DO		
	increte control of th	
Student: B6 V19		
Date B6		
Diagnoses: DOM (Dilated Cardiomyopal	but history of connective beart failure	
magness own product caree nythe	ing, itsury or our gestive item t to the	
Clinical Findings:		
		DCM. You report that B6 has been doing
very well at home, as he is not coughing		
intolerance. B6 has been taking his m	NEONCAL NUMS WASH, AIRNO FRAS FROM FREEDIED AFT	y acutocinal cities.
Today we did a recheck echocardiogram	(ultrasound of the heart) and ECG. Ou	findings were consistent with the last
 In Sun Administration of the print of the control of	at the control of the	il valve, but the measurements have not
worsened. We are very happy that B6	is stable and doing well at home!	
We are also running a blood test to the		
we are ago uniming a moon test in the	B6 rena values, and we will carry	ou with theresurs.
Monitoring at Home:		
 Wewauld like you to monitor 	and a second sec	e, ideally during sleep or at a time of rest.
	sted based on the breathing rate and eff	
		a breathing rate at rest of less than 35 to amount of belly wall motion used for each
breath, is fairly minimal if heart	[] - []	and a conjugate to the
	r effort will usually mean that you shou	id aine an extra dans i B6

If difficulty breathing is not improved by within 30-60 minutes after giving extra furosemide, you can try giving him a second extra dose. If his breathing is still not improved within an hour after the second extra dose, then we

recommend that a recheck exam be scheduled and/or that B6 be evaluated by an emergency clinic. O There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug closes, or the Tufts HeartSmart web site (http://wet.tufts.edu/heartsmart/at-home-monitoring/). O Wealso want you to watch for wealness or collapse, a reduction in appetite, worsening cough, or distertion of the
belly as these findings indicate that we should do a recheck examination. o If you have any concerns, please call or have B6 evaluated by a veterinarian. Our emergency clinic is open 24 hours/day.
Dief. Suggestions: You may continue B6 normal diet, but we recommend avoiding the lamb flavor, as foods with lamb may be associated with heart disease. Please avoid high sodium foods. A fish oil supplement may be considered as well.
Exercise Recommendations: Intense activity is not advisable for dogs with heart disease. However, we understand that B6 is an active dog and it is a balancing act between moderating his activity and letting him live his life as a happy dog B6 can continue being active within reason, but 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 stremuous high energy activities (repetitive ball chasing, running fast off-leash, etc.) are generally not advised at this stage of heart disease.
Recommended Medications
B6
Recheck Visits: We would like to see <u>B6</u> again in about 4-6 months for a recheck echocardiogram, or sooner if he is not feeling well at home. Please call or email to schedule this appointment.
Thank you for entrusting us with B6 care, he is always a pleasure! Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@twits.edu for scheduling and non-emergent questions or concerns.
Please visit our HeartSmart website for more information http://wet.tuits.edu/heartsmart/
Prescription Nefit Dis doiner: 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.

Pres

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.

Choical Trials:

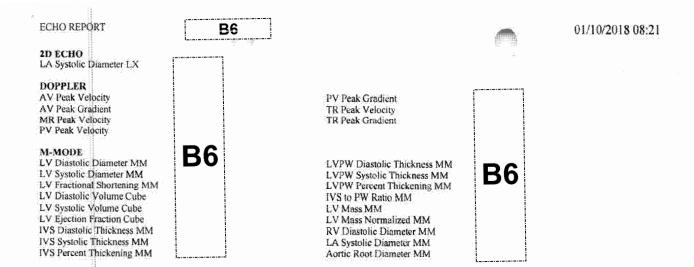
Clinical trials are studies in which our veterinary ductors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/dinicol-studies

	- iamemamemement	
Case B6	Owner: B6	Discharge Instructions
	CAMPINETS DO	Cranings accuration
Lamonad	Lancas DO	Distribution of the state of th

B6

100 H		Patient I	<u>nforma</u>	tion		
Patient: B6		Age: 6	years	Referring Vete	rinarian:	B6
Patient Number: B	3	Weight:(kg)	25,10	Cardiologist:		B6
Breed: lab mix		Sex: F		Client Number:	: 147921	
Exam Date: 01/10/20	18 08:21	BSA: 0.87		:::::::::::::::::::::::::::::::::::::		
December 3 in length of circled, fell 5th. Labwo low normal. of days ago tick prevent Kangaroo ar B6; twice d	Unremarkable abdomin 1/10/18: B6 Echo - see below. Sinu Taurine level (whole b Thoracic radiographs: 1 1/9/18). Resolving card Hospitalization: An IV catheter was plan was started on	we heart failure nitially treated we. On January out a minute. Stild elevation of A short of breath sed stance after negative for hearth treath less are all the sed fine crackles nal palpation. In stackycardia or lood): pending. Mild decrease ir liogenic edema. Mild decrease ir liogenic edema. Mild decrease ir liogenic edema.	with a humin 4th she had he has a second ALT and AS and tires ea ward. She intworm 9/9/nd 2 thso of B6 apical systol left cranial left	a collapse episond less severe of a collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less severe of the collapse episond less episond les episond less episond les ep	by her rD and ode during episode or crease in (d a squirre heartwor alifornia Nn. She is nued yested as comparate heartwork as comparate heartwork as comparate heartwork as comparate heartwork and and a had octobed to pe	VM on a decrease g which she in January CK. T4 was let a couple im, flea and let let let let let let let let let let

Echocardiographic Report



Left Ventricle:

Severe dilation (normalized LVIDd 2.85) with severe myocardial dysfunction (normalized LVIDs

2.34). Increased sphericity.

Left Atrium:

Severe dilation.

Right Ventricle:

Mild dilation with subjective decrease in contractility.

Right Atrium:

Mild dilation.

Mitral Valve:

Normal valve morphology. 4+ central mitral regurgitation.

Aortic Valve:

Normal.

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Mildly thickened valve leaflets. 1+ tricuspid regurgitation. Normal regurgitant velocities.

Pulmonic Valve:

Mildly thickened valve leaflets. Mild pulmonic insufficiency.

Aorta:

Normal

Pericardium:

Normal

Diagnosis

Dilated cardiomyopathy - This is a disease characterized by weakening of the heart muscle and dilation of the heart chambers. As the disease progresses, it can lead to congestive heart failure (fluid in the lungs causing shortness of breath and cough). Abnormal heart rhythms are common and can result in sudden death. Most commonly this is an inherited disease, though it can occur secondary to a deficiency in an amino acid called taurine.

Left sided congestive heart failure

Recommendations

Give all medications as directed:

B6

One thing that can be very helpful for home monitoring is checking sleeping or resting respiratory rates. A recent study showed that even pets with severe heart disease rarely have resting respiratory rates greater than 30 breaths per minute unless they are starting to decompensate for that disease. Elevated respiratory rates at home may be even more sensitive than chest radiographs at picking up early decompensation. Count your pet's respiratory rate when he/she is at rest or sleeping (not within 20 minutes of being active). If his/her respiratory rate is greater than 30 breaths per minute, recheck again in a couple of hours. If persistently elevated above this level, call.

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ECHO REPORT	<u></u>	B6				01/10/2018 08:21
В6	DVM, DAC	VIM (Cardiology)				
(Electronically S	Signed)					
Final Date:						
		Like	rus on Fa	icebook!		
		www.facebo		B6		
***Notes to our						
-Please bring all	medications to yo	our pet's scheduled	appointments.			
- we require a 48	s hour notice for a	Ill refills When yo	u call to reque	t a refill, please lea	ave the pharmacy	nhone number or
AFTER!	it.vou.nian.oo.nid B6	7-681	ton at our facil	IIV. PKESCRIP II	ON REFILLS AF	E NOT AVAILABLE
weekends).		K	EGULAR BUS	INESS HOURS (Evenings, Fridays	s, holidays and
-Check out	B6	and enter your le	real zin enda te	canent for the har	ar <u>Levi</u> niu in eet e	nedications at your
local pharmacies			was Esp code to	scarch for the des	e prices on your n	nedications at your
-If an emergency	arises with your	net.	R6	o o o o o o o o o o o o o o o o o o o	*1*1	

Report Details - EON-	367850					
ICSR:	2055797					
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:	2018-10-08 15:17:24 EDT					
Reported Problem:	Problem Description:	Presented to ER of Full echo on 8/28/18 is sometimes fed the	B6 or CHF and DCM (had Unlikely to be associated with lamb formula Pro Plan. Tauring	diet but reporting because he		
	Date Problem Started:	В6				
	Concurrent Medical Problem:	Yes				
	Pre Existing Conditions:	Atopy (on Atopica)				
	Outcome to Date:	Stable				
Product Information:	Product Name:	Pro Plan Savorv dry	- chicken, beef, or lamb (1 cup	TID)		
	Product Type:	<u> </u>	, , , , , , , , , , , , , , , , , , , ,			
	Lot Number:	<u></u>		***************************************		
	Package Type:	<u> </u>				
	Product Use Information:			***************************************		
	Manufacturer /Distributor Information:	er i				
	Purchase Location Information:	on				
Animal Information:		· · · · · · · · · · · · · · · · · · ·				
Animai information.	Name:					
	Type Of Species:					
		d: Retriever - Labrador				
	1	r: Male				
	Reproductive Status:					
		t: 37.7 Kilogram				
	<u> </u>	: 7 Years				
	Assessment of Prior Health:					
	Number of Animals Given the Product:	1				
	Number of Animals Reacted:	1				
	Owner Information:	Owner Information provided:	Yes			
		Contact:				
			Phone: B6			
			Email:			
		Address:				
			B 6			
			United States			
	Healthcare Professional	Practice Name:	Tufts Cummings School of Vet	erinary Medicine		
	Information:	Contact:	<u> </u>	,		
		Jonadi	1			
			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 Yes Sender:				
	Preferred Method Of Contact:	Email			
Additional Documents:			Administrative states		
	Attachment:	compiled medical re-	cords B6 nall pdf		
	Description:		Compiled medical records		
	Type:	Medical Records			

ICSD:	2060740				
ICSR:	2060740				
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:	Weight loss x 3-4 weeks Coughing and dyspnea developed - too to B6 B6 where they did T-FAST and suspected DCM. Started on B6 and before we saw him Eating BEG diet. Taurine pending. Switched to new food. Will also try to evaluate other dog in their home eating the same diet (15 years old) Owners happy to provide additional info and have saved some of the food they've been feeding (4Health)			
	Date Problem Started:	: 12/20/2018			
	Concurrent Medical Problem:	No			
	Outcome to Date:	e. Stable			
Product Information:	Product Name:	4Health grain=free b	eef and potato		
	Product Type:		•		
	Lot Number:				
	Package Type:	BAG			
	Product Use Information:	Description: See diet history for additional info			
	Manufacturer /Distributor Information:				
	Purchase Location Information:				
Animal Information:	Name:	В6			
	Type Of Species:	Dog			
	Type Of Breed:	Retriever - Golden			
	Gender:	r: Male			
	Reproductive Status:	s: Intact			
	Weight:	it: 29.2 Kilogram			
	Age:	e: B6 Years			
	Assessment of Prior Health:	Excellent			
	Number of Animals Given the Product:				
	Number of Animals Reacted:	1			
	Owner Information:	Owner Information provided:			
		Contact:	Name: B6		
		Address:	Email:		
			United States		
	Healthcare Professional Information:	Practice Name: Contact:	Tufts Cummings School of Veterinary Medicine Name: Lisa Freeman		

Report Details - EON-	375111				
ICSR:	2060740				
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:	-9 Quantum				
Reported Problem:	Problem Description: Date Problem Started: Concurrent Medical Problem:	B6 where they die B6 before new food. Will also to (15 years old) Owne the food they've bee 12/20/2018	d B6 and s we saw him Ea ry to evaluate o rs happy to pro	suspected DCM. Start ting BEG diet. Taurine ther dog in their home vide additional info an	pending. Switched to
	Outcome to Date:	Stable			ana anda a mada a m
Product Information:	Product Name: Product Type: Lot Number: Package Type: Product Use Information: Manufacturer /Distributor Information: Purchase Location			y for additional info	
	Information:				
Animal Information:	Name:	B6			
	Type Of Species:				
	Type Of Breed:	Retriever - Golden			
	Gender:	Male			
	Reproductive Status:				
	3 (0.000.000.000.000.000.000.000.000.000.	29.2 Kilogram			
	3 1000000000000000000000000000000000000	e: B61/ears			
	Assessment of Prior Health:	Excellent			
	Number of Animals Given the Product:	2	автавина выпонита вта та то на в		
	Number of Animals Reacted:	1	автая піння пона піння в пла віння вт		
	Owner Information:	Owner Information provided:			
		Contact:	Name: Phone Email		
		Address:	B6 United States)	
	Hoolthoere Drofessier -		40		
	Healthcare Professional Information:	Practice Name: Contact:	ç	gs School of Veterinal Lisa Freeman	y Medicine

			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:				
	Preferred Method Of Contact:				
Additional Documents:			guide la maria (maria)		
	Attachment:	rpt_medical_record_	previet B6 smaller.pdf		
	Description:	Forsell records			
	Type:	Medical Records			

From:	Freeman, Lisa <lisa.f< th=""><th>Freeman@tufts.edu></th><th>•</th></lisa.f<>	Freeman@tufts.edu>	•
To:	Jones, Jennifer L		
Sent:	B6 5:06:38 PM	Л	
Subject:	RE: B6		
Hi Jen			
It is B6	ha:	s been my contact	and I let her know you'd be arranging for a box.
She removed the heart	last night and put it	in formalin so that's	and I let her know you'd be arranging for a box. s ready to ship. We won't be able to get other
tissues but hopefully th			
If you need additional in	nfo, please let me kn	low. I have a bunc	h of cases I need to report to you so I'll get those
submitted asap.	•		,
Thanks			
Lisa			
Lisa M. Freeman, DVM	1, PhD, DACVN		
Board Certified Veterina	arv Nutritionist TM		
Professor	,		
Cummings School of V	eterinary Medicine		
Friedman School of Nu	•	Policy	
Tufts Clinical and Trans			
Tufts University			
www.petfoodology.org			
Erom: longs lennifor	L < lennifor lones@	fda hhe gov>	
From: Jones, Jennifer Sent: B6			
Sent: B6 To: Freeman, Lisa <lis< th=""><th>O.J.J. Frooman@tuffs.oc</th><th>41VI</th><th></th></lis<>	O.J.J. Frooman@tuffs.oc	41VI	
Cubicet DE:	<u>sa.rreeman@</u> tuits.ed	iu>	
Subject: RE: B6	. <u></u> j		
Hi Lisa,			
•	arose necroney if the	vet will perform th	at and collect the tissues on the list. Alternatively,
		-	ct into 10% NBF. Either way, we can send a box to
collect.	ie neart, they can pu	it the full heart intac	of thic 10% NDF. Either way, we can send a box to
Collect.			
Will you please confirm	that it's	B6	'll need to make a purchase request.
Thank you again,	r triat it 3		ii ricca to make a parchase request.
Jen			
Jen			
Jennifer Jones, DVM			
Veterinary Medical Office	r		
Tel: 240-402-5421	ı		
(MONTHONIAN)	<**		
ADMINISTRATION			
	*		
Franci Francis Line	dian Francisco Otrofte	n. m. al	
From: Freeman, Lisa <			
Sent B6			
To: Jones, Jennifer L <		. <u>nns.gov</u> >	
Subject: RE: B6			
Li lon			
Hi Jen	حالية والمواقع الأراباء	ا د داد مطلالم مسا	a ala al da da la mial a duna fan a constitue (a d
	-	_	scheduled to be picked up for cremation today.
			opproach to getting heart and any other selected
-	vet is willing to help	get some samples	and I can probably drive to B6 tonight
to pick up			

Thanks Lisa

Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary NutritionistTM Professor **Cummings School of Veterinary Medicine** Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org

From: Jones, Jennifer L < Jennifer.Jones@fda.hhs.gov>

7:58 AM Sent **B6** To: Freeman, Lisa < Lisa Freeman@tufts.edu>

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

Subject: RE: B6

Hi Lisa,

Thank you for the head's up. If the owner can bring the body to Tufts for the necropsy, we can authorize and pay for it. I attached the most recent version of the necropsy protocol. Your lab can perform the gross necropsy and histopathology of the non-heart tissues. We'll need a set of slide recuts sent to us for review. We'll need to collect the intact formalin-fixed heart, fresh frozen tissues, and slide recuts. When the time comes, I can send you a box for this with a prepaid shipping label.

If you're willing to do this, please send me an estimate for the necropsy and histopathology with recuts. I'll make the purchase request today.

Thank you for bringing this to our attention, Jen

Jennifer Jones, DVM Veterinary Medical Officer

Tel: 240-402-5421



U.S. FOOD & DRUG

From: Freeman Lisa < Lisa Freeman@tufts.edu>

Sent B6 4:19 PM

To: Jones, Jennifer L < Jennifer. Jones@fda.hhs.gov>

Subject: B6 Importance: High

Hi Jen

I left a message on your machine but in case you're checking email, one of the cases I submitted The owner has given permission for a necropsy or getting heart samples so I am hoping to get in touch with you asap to see if we can work it out (I'm assuming you're back at work since I got this email from you)

thanks

Lisa

Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary NutritionistTM Professor **Cummings School of Veterinary Medicine** Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org

From: Jones, Jennifer L < Jennifer.Jones@fda.hhs.gov>
Sent: B6 10:02 AM
To: Freeman, Lisa <lisa.freeman@tufts.edu></lisa.freeman@tufts.edu>
Subject: RE: B6
Thank you for the update, Lisa. I'm sorry to hear that he passed away. Can you please forward the records for his case?
Jennifer Jones, DVM Veterinary Medical Officer Tel: 240-402-5421
U.S. FOOD & DRUG
From: Freeman, Lisa <lisa.freeman@tufts.edu> Sent: B6 3:13 PM To: Jones, Jennifer L <jennifer.jones@fda.hhs.gov> Subject: B6</jennifer.jones@fda.hhs.gov></lisa.freeman@tufts.edu>
Hi Jen Wanted to let you know that B6 died unexpectedly due to choking yesterday while eating. Owner said he had been doing well and we were going to do a recheck in Feb. So sad BLisa
Lisa M. Freeman, DVM, PhD, DACVN Board Certified Veterinary Nutritionist TM Professor Cummings School of Veterinary Medicine Friedman School of Nutrition Science and Policy Tufts Clinical and Translational Science Institute Tufts University www.petfoodology.org

Report Details - EON-	367903					
ICSR:	2055827					
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:	Serial echoes were being done for SAS. Cardiologist noted reduced contractile function over time and that dog was eating BEG diet so recommended change. Owner changed from Orijen to Royal Canin Early Cardiac Diet. Significant improvement in cardiac size and function (and NT-proBNP) after diet change. Had taurine level checked in 2014 - was normal then. Was not retested.				
	Date Problem Started:	01/18/2018				
	Concurrent Medical Problem:					
	Pre Existing Conditions:	B6				
	Outcome to Date:	Better/Improved/Recovering				
Product Information:	Product Name:	Orijen 6 fish dry				
	Product Type:					
	Lot Number:					
	Package Type:	BAG				
	Product Use Information:					
	Manufacturer /Distributor Information:	1.				
	Purchase Location Information:					
Animal Information:	Name:	B6				
	Type Of Species:	Dog				
	Type Of Breed:	Mixed (Dog)				
	Gender:					
	Reproductive Status:	<u></u>				
		: 33.7 Kilogram				
	Age:	e: B6 Years				
	Assessment of Prior Health:					
	Number of Animals Given the Product:	1				
	Number of Animals Reacted:					
	Owner Information:	Owner Information provided:				
		Contact: Name: Phone Email				
		Address: B6				
	Healthcare Professional Information:					

			Phone: (508) 887-4523
			Email: lisa.freeman@tufts.edu
		1	200 Westboro Rd North Grafton Massachusetts 01536 United States
Sender Information:	Name:	Lisa Freeman	
	Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	Contact:	Phone:	5088874523
		Email:	lisa.freeman@tufts.edu
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Additional Documents:			
	Attachment:	B6 combined r	
	The state of the s	B6 combined	records
	Type: Medical Records		

Cummings Veterinary Medical Center

Cardiology Liaison: SO8-887-4696

Patient D: B6 Canine
B6 Cans Old Female (Spayed) Terrier Cross

Cardiology Appointment Report

Date: 1/17/2013
Attending Condicalogist Machine L. Rush DVM, MS, DACVIM (Cardiology), DACVECC (primary)
B6
Cardidagy Resident:
B6
Cardidogy Technician:
B6

L	·	
		and an order of the
Sheet-	B6	

Presenting Complaint:

Presenting for recheck of:

- -Subvolvular acriticatenosis with small acritic root mild to moderate disease
- -Mitral valvedisesse mild
- Left ventricular of lation with reduced contractile function mild and somewhat improved

Following as part of grain free/DCM

Coververt Diseases: none

General Medical History:

Exercise tolerance improved - goes out less bc cold

Overall doing very well at home

Off heart worm previright now - stopped 1 month or 2 mo ago and test again in spring

Diet and Supplements:

Royal canin early cardiac - been on it since August

Cardiovassular History:

Prior CHF diagnosis? no
Prior heart murmur? yes
Prior ATE? no
Prior arrhythmia? no
Monitoring respiratory rate and effort at home? yes

Cough? no
Shortness of breath or difficulty breathing? no
Syncope or collapse? no
Sudden onset lameness? no
Exercise into legance? mild

Current Medications Pertinent to CV System: **B6** Cardiae Physical Economication **B6** Muscle condition: Mormal - very musicular Moderate cachecia Mild muscle loss Marked carberia Cardia-seader Physical Exam: Murmur Grade □ N/VI ■ Nane □ I/VI ■ v/vı **■** IVVI ■ ww

Murmur location/description: III/VI left mid cardiac systolic, II/VI right systolic

Coppler feelings:

B6			
Mitral inflow: Summated Normal Oelayed relaxation	Restrictive		
BCG forthers: Sinus rhythm and sinus arrhythmia during the ed	tio		
Assessment and recommendations: There is impressive resolution of the findings sea better LV curroactile function - findings that migmild acrtic stenosis. It is suspected that most of	ght be considered typical for a dog wi	th SAS. There is still	
Recommend continue the diet, but maybe feed			
	B6		
Heart failure Classification Score: ISACHC Classification:	IIIa IIIIb IIIC II D		
SA LA Ao Diam SA LA / Ao Diam IVSd LVIDd LVPWd EDV(Teich) IVSs LVIDs LVPWs IIVV(Teich) EF(Teich) EF(Teich) SAFS SV(Teich) LV Major LV Minor Sphericity Index LVLd LAX LVAD LAX LVAD LAX	B6	am am am am am am am am am am am am am a	

LVEDV MOD LAX LVLS LAX LVAs LAX LVBSV A-L LAX LVBSV MOD LAX HR **EF A-L LAX LVEF MOD LAX** SV A-L LAX SV MOD LAX CO A-L LAX CO MOD LAX R-R HR CO A-L LAX CO MOD LAX

M-Mode

IVSd LVIDd **LVPWd** IVS₅ **LVIDs LVPWs** Ao Diam LA Diam Max LA

Doppler.

MV E Vel **MV** DecT MV Dec Slope MV A Vel MV E/A Ratio E/E A' 5

AV Vmax AV maxPG **PV Vmax** PV maxPG an ml ml **BPM** % % ml ml **Vmin l/min** ms **BPM Vmin** l/min

ml

an

am an an an an an an Œ

> m/s ms m/s m/s

an

m/s

m/s

m/s m/s mmHg m/s mmHg

Cardiology Liaison: SCB-887-4695

Foster Hospital for Small Animals 95 Willard Street Morth Grafton, MA 01336 Telephone (908) 839-5395 Fax (508) 839-7951 Mtp://www.th/tsedu/

Discharge Instructions

Ratient Owner			
Name B6 Ratient ID: B6			
Specie DC			
Blue Fernale (Spayed) Terrier Cruss DU Ritthdate: B6			
Attending Cardiologist: John E. Rush DVM, MS, DACVIM (Cardiology), OACVECC			
UBC. DC			
B6			
Cardialogy Resident			
Сагонору геничнае			
B6			
Provide Transit (Common and V			
Shalk-vit: B6			
Admit Oate: 1/17/2019 9:35:33 AM			
Oischarge Oate: 1/17/2019			
Oiagrusses: -Subvehular aurtic sterous is with small aurtic root - mild to moderate disease -Mitral valve disease - mild - trivial leak todayLeft vertricular of ation with reduced contractile function - essentially normal today			
Cinical Godings:			
Thank you for bringing B6 in to see the Tufts Cardinlugy Service for a resheck of her aortic sterosis, miral valve disease,			
and mildly reduced contractile function. B6 is reported to be doing very well at home and has adjusted well to her new			
diet over the last six months. It is hard to say exactly how her exercise tolerance levels are doing, due to the impact of			
winter on her activity levels.			
On exam today, her heart murmur remained stable(III/M) and her pulses were good. The exhuranding am (u/basound of			
the heart) showed that she curtivues to have improvement of her contractile function, and the heart size is getting smaller,			
and is essentially back to what I would think is "typica" for a dog with aurtic stemosis. Historically she has also had a small			
leak at her mitral valve, but today we saw only a trace leak at that valve, which is great. At this time, overall her heart looks to be that of a dog with only mild acrtic steroosis. She had no arrhythmia today.	•		
NOTE OF A GOOD ASSESSMENT OF THE STATE OF TH			
	7		
	į		
B6	ĺ		
	- 1		

Mordaring at home Please continue to monitor her at home as you have been doing. Recommended Medications: **B6** Diet seggestive **B6** Thank you for entrusting us with B6 care. Please content our Cardiology liaison at (508)-887-4096 or email us at Control of the state of the sta Please visit our HeartSmart website for more information http://vet.tufts.edu/heartsmart/ Presulption Refil Dischiner: For the safety and well-being of our patients, your pet must have had an examination by one of our veterior icus within the past year in order to obtain prescription medications. Ordering Food: Please the ak 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 (508-837-4629) to ensure the food is in stock. Alternatively, veterioury diets can be ordered from online retailers with a prescription/seterinory approval.

Clinical trials are studies in which our veteriousy ductors work with you and your pet to investigate a specific disease process or a

B6

Discharge Instructions

provising new test or treatment. Please see our website: vet.tufts.edu/twaz/ds-izul-studio-

B6

Owner O'

Clinical Tripls:

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:	:) 			
Reported Problem:		Diagnosed with LV cavity dilation and reduced contractile function		
reported i robiem.	Problem Description: Date Problem Started:	**************************************	avity dilation and reduced contractile function	
	Concurrent Medical Problem:	Yes		
	Pre Existing Conditions:			
	Outcome to Date:	7		
Product Information:	1	2		
Froduct information.	Product Name:	Earthborn Coastal C	atch dry	
	Product Type:	Pet Food		
	Lot Number:	, , , , , , , , , , , , , , , , , , ,		
	Package Type:	BAG		
	Product Use Information:			
	Manufacturer /Distributor Information:			
	Purchase Location Information:			
Animal Information:	imal Information: Name: B6			
	Type Of Species:	Dog		
	Type Of Breed:	Boxer (German Boxe	er)	
	Gender:	Female		
	Reproductive Status:	Neutered		
	Weight:	33.2 Kilogram		
	Age:	7.6 Years		
	Number of Animals Reacted:	1		
	Owner Information:	Owner Information provided:	Yes	
		Contact:	Name: B6	
		Address:	B6	
			United States	
	Healthcare Professional Information:	Practice Name: Contact:	Premine: Liou i rooman	
			Phone: (508) 887-4523 Email: lisa.freeman@tufts.edu	
		Address:	200 Westboro Rd North Grafton Massachusetts 01536 United States	
a 1 1 7 7		1	2°-	
Sender Information:	Name:	Lisa Freeman		

		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:	
	Reported to Other Parties:	None
Additional Documents:		

Cummings Veterinary Medical Center AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient D: 412374 Canine B6 rears Old Male (Neutered) Labrador Black BW: Weight(lbs) 0.00

Cardiology Consultation

Date: 2/9/2018
Weight (lbs) 98
Patient location: ICU
Registing Christian: B6 (Resident, Emergency & Critical Care)
Attending Continuent
John E. Rush DVM, MS, OACVIM (Cardiology), OACVECC
B6
Cardidary Resident:
B6
Thereis radiographs available for review?
Yes - in SS
Yes - in PACS
□ No
Presenting complaint and important compared diseases: Difficulty breathing, increased heart rate and lethargy since last night after running in the afternoon. Diagnosed with
Current medications and doses:
B6
Key indication for consultation: (murmur, arrhythmia, needs fluids, etc.): In CHF - has arrhythmia, pulmonary edema, increased size of left ventricle and right atrium. EKG: VPCs, Afib, tachycardia
Questions to be arrawared from the Coronalt
Reasonable <u>expectations</u> for future and quality of life? Dog is very high energy and o has difficulty restraining.
Is your consult time-sensitive? (e.g., aresthesia today, owner waiting, trying to get biopsy today)

STOP - remainder of form to be filled out by Cardiology

Physical Economication			
B6			
Muscle condition:			
	Moderate cachexia		
☐ Mild musde loss	Marked cachexia		
Cardiovascular Physical Exam			
Murmur Grade: difficult to ascult due to pa			
None	IV/VI		
□ I/VI	V/VI		
	■ vi∕vi		
Murmur location/description:			
Jugular vein: difficult to assess due to pant	ting		
Bottom 1/3 of neck	Top 2/3 of neck		
☐ Middle 1/3 of neck			
Arterial pulses:			
 Weak	Bounding		
■ Fair	Pulse deficits		
Good	Pulsus paradoxus		
Strong	Other (describe):		
Arrhythenia:	<u>~</u>		
Mone None	@ Gradycardia		
Sinus arrhythmia	III Tachycardia		
Premature beats			
Gallop:	_		
■ Yes	Pronounced		
™ No	Other:		
Intermittent			
Pulmonary assessments:	_		
Eupneic Eupneic	Pulmonary Craddes		
Mild dyspnea	Wheezes		
Marked dyspnea	Upper airway stridor		
Normal BV sounds	Other auscultotory findings:		
Abdominal exam:			
Normal	Abdominal distension		
Hepatomegaly	Mild ascites		

Edocadiceran निर्वाण्ः

General/2-D fordings:			
	B6		
Doppler findings:			
I+ MR.			
CG findings:			
	В6		
lafographic feelings:			
	B6		
Assessment and reconstruction	B.		<u>-</u>
DCM with clinical signs consistent		mmend continuing with	B6
noreasing	B6	Q	(if he is actually
higher dose) given the concern a	fthe renal values	We will rectue to his anti-	uthmia on his 2 week
inal Diagrasis:			
DCM with CHF and ventricular arrh	ythmia		
leart failure Classification Score:			
SACHC Classification:	☑ Illa		
i⊒ ia ∏ih	■ IIIb		
	- IIID		
ACVIM CHF Classification:			
■ A	₩c		
■ B1	■ D		
□ B2			
M-Mode		1	
IVSd ISUDA			cm —
LVIDd LVPWd			om om
IVSs			om om
LVIDs			om
LVPWs		B6	cm .
%FS			%
Ao Diam			cm .
LA Diam			cm
LA/Ao Max LA			
Max ra			am

EPSS		cm .
M-Mode Normalized IVSdN LVIDdN LVPWdN IVSsN LVIDsN LVPWsN Ao Diam N LA Diam N	B6	(0.29 - 0.52)! (1.35 - 1.73)! (0.33 - 0.53) (0.43 - 0.71)! (0.79 - 1.14)! (0.53 - 0.78) (0.68 - 0.89) (0.64 - 0.90)!
2D SA LA Ao Diam SA LA / Ao Diam Doppler AV Vmax		am am m/s
WA AIIIGK	4	nys

AV maxPG

mmHg

Cummings Veterinary Medical Center AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

Prior CHF diagnosis? Yes

B6

Patient ID: 412374 B6 Canine Years Old Male (Neutered) Labrador Black

Cardiology Appointment Report

Date: 2/21/2018
Attending Condinagiot John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC
B6
Cardiology Resident
B6
Cardickey Technisian
B6
B6 V18
Presenting Complaint: Recheck DCM with CHF
Coverant Diseases: None
General Medical History: O thinks he is doing better. No more gagging like he was doing prior to ER visit. RR was 30-35 first few days after ER visit and now has been 20-25/min. More hesitent to go up stairs. No coughing or collapses
Appetite is good and normal eliminations. Othinks there is a <u>secondary</u> process happening in the neck.
Has a mass on neck that has never been aspirated. Has a history of positional snorting/snoring. O interested in camitine and CoQv-10. O interested in immuno-booster.
Diet and Supplements: Feeding kibbles (Canidae with duck or bison) with chicken breast and yams
DC
DO

Prior ATE? No
Prior arrhythmia? Yes, episodes of VPCs, ventricular bigeminy
Cough? No
Shortness of breath or difficulty breathing? Increased RR/RE and gagging episodes
Syncope or collapse? No
Sudden onset lameness? No
Exercise intolerance? More hesitant to go upstairs
Prior heart mannar? Difficult to assess

B6

Need refills?

Cardias Physical Examination:			
B6			
Muscle condition: Normal Mild musde loss	Moderale cachesia Marked cachesia		
Cordinate lar Physical Exam: Murmur Grade: difficult to assess None	s due to breathing and temperament III IV/VI III V/VI III VI/VI		
Murmur location/description:			
Jugular vein: difficult to assess du Bottom 1/3 of neck Middle 1/3 of neck	e to breathing and temperament Top 2/3% of neck		
Arterial pulses: Weak	Rounding Pulse deficits		

Good Strong	Pulsus paraikous Other:		
Fortivithmia: None Sinus arrhythmia Premature beals	Bradycardia Tachycardia		
Gallop: Yes No Intermittent	Other:		
Pulmonary assembnests Expreix Mild dyspnea Marked dyspnea Normal BY sounds	Pulmonary crackles Wheeses Upper airway stridor		
Abdominal exem: Normal Hepatomegaly Abdominal distension	Mild ascites Marked ascites		
Problems: DCM with no active CHF Upper airway noise: r/o nasal (neoplasia vs FB)	vs laryngeal (lar par) vs tradheal mass		
Diagrestic plans Chocardiogram Chemistry profile ECG Renal profile Blood pressure	Oidysis profile Thoracic <u>radiographs</u> NT-proBNP Troponin I Other tests:		
Echocardiogram Findings: General/2-D feelings: not performed today			
Assessment and recommendations: Patient appears to be breathing comfortably. We will be resharking his renal values today. The upper airway noise does not appear to be associated with the heart disease (RR remains in the 20s at home, and the video that the owner recorded showed him breathing comfortably, and resting while making the snorting sound). This is likely an upper airway noise, which is also not related to the lipuma at the stemum. Continue with the current medication doses. Nutrition consultation is scheduled for tomorrow. Reshark echocardiogram, ECG, and renal values in 3-4 months.			
Final Diagnosis: DCM with history of LCHF			
Heart Failure Classification Score: ISACHC Classification:	■ Illa		

■ lb	III III III III III III III III III II
⊠II	
ACVIM Classification:	
■ A	₩ c
□ B1	■ D
□ R2	

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	Owner		
Name: B6	Names	B6	Patient E): B6
Species: Canine	Address		Transaction of the second
Black Male Doberman Pinscher Birthdate: B6		B6	
Attending Cardiologist: John E. Rush DVM, MS, DACVI	И (Cardiology), DA	ACVECC	
B0		110	
Cardiology Resident:	De		
Cardiology Technician:	B6		
B6	474.04.04.04		
Student: B6 V19			
Admit Date B6 103:15 PM Discharge Date B6			
Diagnoses: Dilated Cardiomyopathy with Congestiv	e Heart Failure		
Case Summary: Thank you for bringing B6 to the Tu B6 appetite has recently improved			
. No least the control of the contro	ermal rhythm). We	e also looked quickly at h	ythm. He has a normal rhythm and there is chest and heart with the ultrasound and
As discussed, B6 taurine levels wer taking his supplementation readily, you			re his taurine supplementation. If he is red.
We also took a blood sample to monitor either later today or tomorrow, and recimprove at home!			u with these results when they return, cations. We hope that <u>B6</u> continues to
Monitoring at Home:			
We would like you to monitor B6 of drugs will be adjusted based on the controlled have a breathing rate at re-	breathing rate an	nd effort. In general, mos	

noted by the amount of belly wall motion used for each breath, is fairly minimal if heart failure is controlled. An increase in breathing rate or effort will usually mean that you should give an extra dose of B6 If difficulty breathing is
not improved within 30-60 minutes after giving extra B6 then we recommend that a recheck exam be scheduled
and/or that B6 be evaluated by an emergency clinic. There are instructions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on the Tufts HeartSmart web site
(http://vet.tufts.edu/heartsmart/at-home-monitoring/).
Diet Suggestions:
We sent you home with Royal Canin Early Cardiac today. Please slowly mix this food in with his old food to transition his diet. We hope that he likes this food, but please contact us if you would like to try another diet (below are other possibilities).
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-
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:
As B6 heart failure has improved, you may start taking him on longer leash walks. 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.
Continue Medications:
B6
Recheck Visits:
B6 will need a recheck in 3 months for an echocardiogram and bloodwork. We may also reassess his heart rhythm with
an ECG at this appointment and a recheck echocardiogram.
Thank you for entrusting us with B6 care. Please contact our Cardiology liaison at (508)-887-4696 or email us at
cardiovet@tufts.edu for scheduling and non-emergent questions or concerns.
Sincerely,
B6
Please visit our HeartSmart website for more information

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

Prescription Refil Discloiner:

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

Clinical Trials:

Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: website: website: Case: B6	Owner: B6	Discharge Instructions

Cummings Veterinary Medical Center AT TUFTS UNIVERSITY

Cardiology Liaison: 508-887-4696

B6

Patient ID: B6 B6 Canine B6 Years Old Male Doberman Pinscher

Cardiology Appointment Report

1014	- RUSH DV	M, MS, DAC		аннову	
Cardiology R	esident:				
			B	3	
Cardiology To	dnicion:				
and the same of th	E	36			
				i i	
Student:	В6	V19			

General Medical History:

Hospitalized from B6 for coughing and increased RR/RE - diagnosed with DCM and CHF. Doing well since last here. Owner tried to switch his food and adding in new food, but he won't eat the new food, spits out those pieces. Since getting home his appetite wasn't that great, but over the last 1-2 days his appetite has finally gotten back to normal. RR at rest is usually around 25 brpm. When sleeping and awake he is shaking more than he used to. His urine stream is much slower since he has been home. Urinating frequently (2-3 times overnight). Activity is normal, has always been "lazy" and hasn't changed.

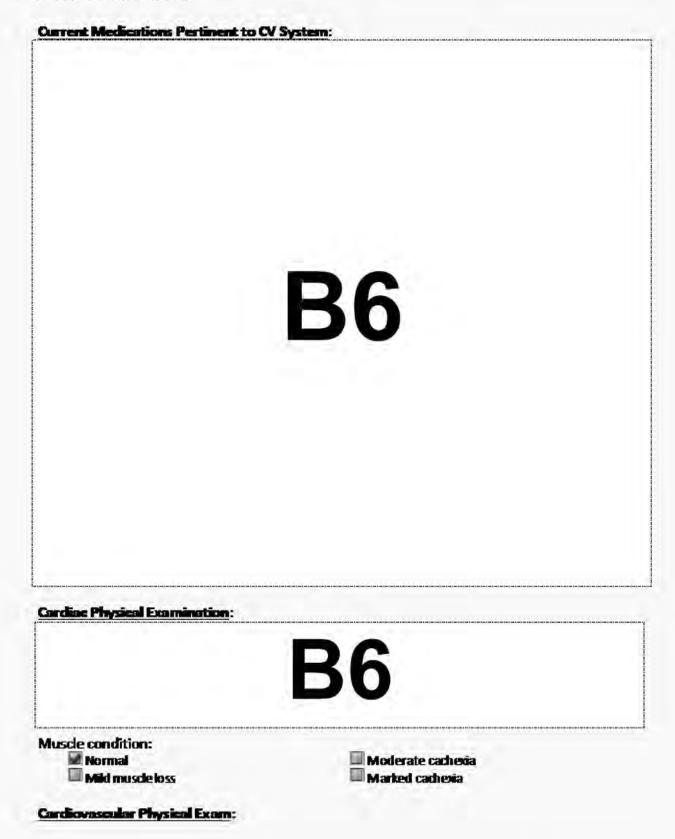
Diet and Supplements:

New food - Purina Sensitive Skin and Stomach Previous diet - Canidae

Cardiovascular History:

Prior CHF diagnosis? Y Prior heart murmur? N Prior ATE? N Prior arrhythmia?

Monitoring respiratory rate and effort at home? Y Cough? N Shortness of breath or difficulty breathing? N Syncope or collapse? N Sudden onset lameness? N Exercise intolerance? N



Murmur Grade:	
None	□ I v/v i
□ 1/VI	■ v/vi
III II/VI	■ VUVI
₩ ni/vr	= 1.4
Murmur location/description: Right ap	iical, 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:	
Weak	Bounding
Fair	Pulse deficits
Good	Pulsus paradoxus
Strong	Other:
Arrhythmia:	
None	☐ Bradycardia
Sinus arrhythmia	☐ Tachycardia
Premature beats	
Gallop:	
Yes	Pronounced
M No	Other:
Intermittent	
Pulmonary assessments:	
Eupneic .	Pulmonary crackles
Mild dyspnea	Wheezes
Marked dyspnea	Upper airway stridor
Mormal BV sounds	
Abdominal exam:	
Mormal Normal	Mild ascites
Hepatomegaly	Marked ascites
Abdominal distension	
Problems:	
DCM with CHF	
History of Atrial fibrillation	
Grade III/VI Right sided systolic heart r	numur
Differential diagnoses:	
	econdary to DCM vs valvular disease) vs pulmonic stenosis
Diagnostic plan:	
Echocardiogram	Dialysis profile
Chemistry profile	Theracic radiographs
ECG Prome	■ Intraductation aprils
Renal profile	Trepenin I
Blood pressure	Other tests:
Control of California	The state of the s

ECG findings: Normal sinus rhythm with no evidence of atrial fibrillation today. Assessment and recommendations: The patient has been doing well at home since the last appointment and the owner estimates that he is 85% back to his normal self. They tried switching him to the Purina sensitive skin and stomack but he didn't like the food and is back to his previous food. His RR and RE have been within normal limits and the owner do not have any issues giving the medications. Today 86 looked very good! There was no pleural effusion and he remains in sinus rhythm. We submitted some bloodwork to reassess his kidney and liver values today and decide if we need to adjust any of his current cardiac medications. We also send him home with a bag of Royal Canin Early Cardiac diet. Recheck echocardiogram is recommended in 3 months or sooner if the patient develops clinical signs consistent with worsening heart disease. Final Diagnosis: - DCM with history of active CHF

Illa

IIIIb

M C

III D

Echocardiogram Findings:

General/2-D findings: **Fluid check**

Heart Failure Classification Score:

ISACHC Classification:

ACVIM Classification:

□ la □ lb

W 11

A B

■ B1

■ B2

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

Name B6		me" am Do
Consists Consists	Name: B6	Patient IDc B6
Species: Canine Blue Male (Neutered) Great Dane	Address: B6	
Birthdate: B6	L	
Attending Cardiologist:	Cardiology), DACVECC	
B6		
Student: B6 V19		
Cardiology Technician:		
B6		
Admit Date 86 Discharge Date: 86		
Diagnoses: Dilated cardiomyopathy (DOM) with conge	stive heart failure	
	and activity level. Keep up the	nis heart function. We're happy to hear that B6 good work! You report that B6 did have one dose of furosemide.
- L	on a vacation) and email you	values as well as thyroid hormone level. We will of the results once they get available. Until we get
We also did a quick electrocardiogram chernews!	okol B6 heart, and we d	id not see previously noted VPC's. Which is good

If you have any concerns, please call or have Harley evaluated by a veterinarian. Our emergency clinic is open 24 hours/day
Diet Suggestions: As discussed, we have talked to our nutritionist for low sodium diet that's appropriate for B6. They have recommended Purina ONE Smartblend Healthy Puppy Formula (https://www.chewy.com/purina-one-smartblend-large-breed/dp/37580) for B6. We recommend giving 6 cups of this
food per day total (so 3 cups in the morning and 3 cups in the dinner schedule works well). We understand this diet is indicated for puppies, but considering his need to gain weight, we think this diet is the best option while meating the low sodium requirement of cardiac patients. Please monitor his weight regularly and increase the amount fed as needed.
You mentioned that you are using high calory syrup to coat medication for $[B6]$. We ask you to check the sodium content in that syrup and find a better alternative if the sodium level is too high. You can visit Tufts HeartSmart website for low sodium treat options.
You can start the supplements you've ordered for B6 anytime!
Exercise Recommendations: You can take B6 for a longer walks. As discussed, dogs with heart disease are usually good at self-regulating the amount of exercise they get, so please do not push Harley if he seemed exhausted and tired.
Recommended Medications:
B6 Recheck Visits:
A recheck echocardiogram is recommended in 3-4 months. Please schedule this as soon as possible as our appointment slot tends to fill up very quickly and may need to be scheduled up to 4 months in advance. Please contact our Cardiology liaison, B6, at (508)-887-4696 or email us at cardiovet@turits.edu for scheduling and non-emergent questions or concerns.
Thank you for entrusting us with B6 care. He is such a good boy, and always a pleasure to work with!
Please visit our HeartSmart website for more information http://vet.tufts.edu/heartsmart/
Prescription Refil Dischiner: 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: Clinical trials are studies in which our veterinary doctors work with you and your pet to investigate a specific disease process or a promising new test or treatment. Please see our website: vet.tufts.edu/cvmc/dinical-studies
Case: B6 Owner B6 Discharge Instructions

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

B6 Patient D B6 B6 canine
B6 cars Old Male (Neutered) Great Blue BW: Weight(lbs) 0.00

Cardiology inpatient
Date: 5/17/2018 Weight: Weight(lbs) 0.00
Attending Cardiologist John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC B6
Cardiology Resident:
B6
Thoracic radiographs available for review?
B6
Presenting complaint and important concurrent diseases:
suspect CHF with enlarged heart, suspect DCM
Current medications and doses:
B6
Key indication for consultation: (murmur, arrhythmia, needs fluids, etc.): murmur, tachycardia, enlarged heart on rads wth B-lines and pulmonary edema on rads
Questions to be answered from the Consult:
medication recommendations
Is your consult time-sensitive? (e.g., anesthesia today, owner waiting, trying to get biopsy today) Yes (explain) No
STOP - remainder of form to be filled out by Cardiology
Physical Examination
B6

Muscle condition:		
☐ Normal	Moderate cachexia	
☐ Mild muscle loss	Marked cachexia	
Cardiovascular Physical Exam		
Murmur Grade:		
None	□ IV/VI	
<u> </u>	<u>□</u> v/vι	
■ 11/ V 1	□ vi∕vi	
Murmur location/description: left a	apical sytolic	
Jugular vein:		
Bottom 1/3 of neck	■ Top 2/3 of neck	
Middle 1/3 of neck	in top 2/3 of ficts.	
Arterial pulses:		
₩ Weak	■ Bounding	
Fair	Pulse deficits	
Good	Pulsus paradoxus	
☐ Strong	Other (describe):	
Arrhythmia:		
None	Bradycardia	
SinusarrhythmiaPremature beats	■ Tachycardia	
Gallop:		
₩ Yes	Pronounced	
No 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:	The Advantus of working of	
Normal	Abdominal distension	
Hepatomegaly	Mild ascites	
Echocardiogram Findings:		ere de para de la companya de la com
	DC	
	B6	
		a contract of the contract of



Assessment and recommen			
Echocardiogram reveals DCN	I with a markedly enlarged B6	1	. Recommend starting e patient was moderately
dyspneic during the examina	tion with diffuse crackles a		
Once the	e patient is home and eatir	g with a good appe	tite, then an B6
	l as well. The MR gradient		
obtained. The patient has a l		region of the control	
remains a possibility since th			
continuing with a more "typi			
could be started as well. Rec		and the state of t	
recommended in 3 months o		elops dinical signs:	such as increased RR/RE,
cough, exercise intolerance,	or syncope.		
Final Diagnosis:		OF A	444
- Advanced DCM with severe	LA enlargement and activ	e CHF r/o genetic v	s. nutritional
Heart Failure Classification !			
ISACHC Classification:	MARC.		
a la	■ IIIa		
□ b	₩ UIb		
	- 1116		
ACVIM CHF Classification:	₩c		
ACVIM CHF Classification:	₩c		
ACVIM CHF Classification:			
ACVIM CHF Classification:			
ACVIM CHF Classification: A B1 B2		graduose inches essentiares	
ACVIM CHF Classification: A B1 B2 M-Mode			OTT
ACVIM CHF Classification: A B1 B2 M-Mode IVSd			om om
ACVIM CHF Classification: A B B1 B2 M-Mode IVSd LVIDd			om om
ACVIM CHF Classification: A B1 B2 M-Mode IVSd LVIDd LVPWd			cm
ACVIM CHF Classification: A B1 B2 M-Mode IVSd LVIDd LVPWd			om om
ACVIM CHF Classification: A B1 B2 M-Mode IVSd LVIDd LVPWd		B6	cm
ACVIM CHF Classification: A B1 B2 M-Mode IVSd LVIDd LVPWd IVSs LVIDs LVPWs		B6	om om om
ACVIM CHF Classification: A A B1 B2 M-Mode IVSd LVIDd LVPWd IVSs LVIDs		B6	om om om
ACVIM CHF Classification: A B1 B1 B2 M-Mode IVSd LVIDd LVPWd IVSs LVIDs LVPWs %FS		B6	om om om %
ACVIM CHF Classification: A B A B B B B B B B B B B B B B B B B		B6	om om om om % om

IVSdN		(0.29 - 0.52)
LVIDdN		(1.35 - 1.73)!
LVPWdN		(0.33 - 0.53)
IVSsN	B6	(0.43 - 0.71) !
LVIDsN		(0.79 - 1.14) !
LVPWsN Ao Diam N		(0.53 - 0.78) !
AO Diam N		(0.68 - 0.89) !
OA DIAM N	11	(0.64 - 0.90) !
<u>20</u>	International Control	
SALA		an
Ao Diam	1	on
SA LA / Ao Diam		
IVSd		om
LVIDd		an
LVPWd		om
EDV(Teich)		ml
IVSs		cm
LVIDs		om
LVPWs	1	om ml
ESV(Teich) EF(Teich)		%
%FS		%
SV(Teich)		ml
LVID A4C		om
LVEDV MOD A4C	i i	ml
LVLs A4C		am
LVESV MOD A4C	B6	ml
LVEF MOD A4C	100	%
SV MOD A4C		ml
Doppler		
MR Vmax		m/s
MR maxPG		mmHg
MV E Vel		m/s
MV DecT	1	ms
MV A Vel		m/s
MV E/A Ratio		
F	1	m/s
A'	e i i i i i i i i i i i i i i i i i i i	m/s
E/E	-	
PV Vmax	100	m/s
PV maxPG	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	mmHg
TR Vmax	Service Constitution of th	m/s
TR maxPG	in the second se	mmHg

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

B6	Owner Mame: Addres	B6		Patient D: 86
Attending Cardiologist:	rtioloesă.DA	MARKOC.		
Cardiology Resident:				
Student B6 719				
B6				
Admit Date: B6 Discharge Date: B6 Diagnoses: Dilated cardiomyopathy (DCM) w Diagnostic test results and findings:	rith congesti	ive heart failure		
Chest radiograph (x-ray) findings: The Echocardiogram findings: All chambe ECG findings: The ECG showed freque occuring side by side) Labwork findings:	ars of the he	art are enlarged and the	re is a leak at	
The kidney values are slightly The results of the blood taur				
Case summary:		and the same of th	· Production and	
Thank you so much for entrusting us with primary veterinarian who found enlarged hea	B6 art and fluid		Charge and the contract of	through referral from your
At Tufts, with further diagnostic tests, B6 cardiumyopathy (DOM). This disease is more walls of the heart, reduced cardiac pump fund DOM will also have significant annythmias when largement has now progressed to the point belly. Unfortunately this is a progressive disease.	common in ction, and e hich can be l t of congest	large and giant breed do nlargement of the upper life-threatening and also ive heart failure, meaning	gs and is char chambers of require medi g that fluid is	acterized by thinning of the the heart. Many dogs with cal management. The heart backing up into the lungs or

d B6 recovere	to monitor his ECG at his next recheck in 1-2 weeks to see if he continue to have abnormal rhythms. B6 overnight with aggressive medical management (bloodwork, ECG monitoring, medication), dithroughout the night. The recheck x-ray of his chest showed that there are no more fluid in his lungs, le sending him home with you today.
The doses o O in general, r breaths per	e: ke you to manitur B6 treathing rate and effort at home, ideally during sleep or at a time of rest. f drugs will be adjusted based on the breathing rate and effort. nost dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each irly minimal if heart failure is controlled.
	in breathing rate or effort will usually mean that you should give an extra dose of B6 If eathing is not improved by within 30-60 minutes after giving extra B6 Ithen we recommend
	dk exam be scheduled and/or that your dog be evaluated by an emergency dinic.
O There are in	structions for monitoring breathing, and a form to help keep track of breathing rate and drug doses, on
	sartSmart web site (http://wet.tufts.edu/heartsmart/at-home-monitoring/). nt you to watch for weakness or collapse, a reduction in appetite, worsening cough, or distention of the
belly as thes	e findings indicate that we should do a recheck examination.
o if you have a hours/day.	any concerns, please call or have Harley evaluated by a veterinarian. Our emergency clinic is open 24
commended Mer	fications:
	B6

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

Diet suggestions:	
Dogs with heart failure accumulate more fluid in their body if they eat large amounts of sod	
in all foods, but some foods are lower in sodium than others. Many pet treats, people foods,	
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://vei.tuits.edu/heartsmart/diet/)	
Because B6 and been fed a diet that is potentially deficient in taurine (amino acids that	nlaus a mile in huilding heart
muscles) levels, we recommend supplementing B6 with taurine for at least another 6 m	
B6 may also benefit from getting L-carnitine supplement. The recommended dose of L-	camiline for B6 5 2000 mg
(50 mg/kg) by mouth twice a day. You can find over-the-counterproduct for L-carnitine sup	plements, and there is no nee
to obtain prescription for it.	
Exercise Recommendations:	
For the first 7 to 10 days after starting medications for heart failure we recommend very lin	nited activity. Leash walking on
is ideal, and short walks to start. Once the heart failure is better controlled, then slightly lor	nger walks are acceptable.
However, if you find that B6 is lagging behind or needs to stop on a walk then this was t	oo long a wak and shorter wall
are advised in the future. Repetitive or strenuous high energy activities (repetitive ball chas	ing, running fast off-leash, etc.)
are generally not advised at this stage of heart failure.	
Recheck Visits:	
A recheck visit is recommended in 1-2 weeks. At this visit we will check your dog's breathin	g elliont and heart function, do a
blood test to recheck kidney values, and recheck B6 ECG readings. If we continue to fi	
may prescribe an anti-arrythmitic medication for him.	0.77.37.31.3.4.3.4.3.5.
A recheck echocardiogram is recommended in 3-4 months.	
Thank you for entrusting us with B6 care. Please contact our Cardiology liaison.	В6
email us at cardiovet@tuits.edu for scheduling and non-emergent questions or concerns.	
Sincerely,	
B6	
Please visit our HeartSmart website for more information	
http://vet.tufis.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	
please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, vet	terinary diets can be ordered from
online retailers with a prescription/veterinary approval.	
Clinical Triols:	
Clinical trials are studies in which our veterinary doctors work with you and your pet to investigat	te a specific disease process or a
promising new test or treatment. Please see our website: vet tufts edu/cvmc/olinical-studies	
processing the man or an account of the section of	

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

Radiology Request & Report

Patient Name: B6 Species: Canine Blue Male (Neutered) Great D Birthdate: B6	Name Addre Jane	B6	Patient II	B6 equest: 5/18/2018
Attending Clinician	В	6	**************************************	Student:
Date of exam: B6				
Patient Location:	B6		w	eight (kg) 46.10
I Inpatient	S	edation BAG		

Examination Desired: LA 1 view lateral

Presenting Complaint and Clinical Questions you wish to answer:

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

Pertinent History:

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

Findings

RIGHT LATERAL THORAX, TWO VIEWS. Compared to rDVM images in stringsoft.

The cardiac silhouette is mildly generally enlarged with the impression of being mildly smaller in size compared to the rDVM study. The cranial lobar vein remains mildly enlarged compared to the artery and the tertiary vessels within the caudodorsal lung field are more conspicuous than typically expected. The previously noted intersitial pattern has resolved. There are three ECG lead pads overlying the lateral thorax.

There are non-obstructive mineral opaque foci withwin the region of pylorus and intestines

cranioventrally. The visible osseous structures are normal.

Condusions:

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

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Primary: B6 DVM

Reviewing:

Dates

Reported: 5/18/2018

Finalized:

Cardiology Liaison: 508-887-4696

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B	atie	nt Di	B6	
	C. 3.5.	36	Canine	
	B6	ears	Old Male (Neutered)	Caucasian
		herd D		
G	ray,	/Black		

	Carthology Appointment Repor
Date: 6/12/2018	
Attending Cardiologist	M, MS, DACVIM (Cardiology), DACVECC
	B6
Cardiology Resident:	
L	B6
B6	
Cardickegy Technician:	36
Student B6	
Presenting Complaint: Recheck DCM and CHF for	rom 5/29/18
Concurrent Diseases: None	
General Medical History	
Dx with murmur at appn	oximately 2 years of age
Diet and Supplements:	
Royal Canin large breed	
Taurine (250 mg tablets)) - 4 tablets (1000 mg) PO SID
Cardiovascular History:	
Prior CHF diagnosis? Yes	
Prior ATE? None	
Prior arrhythmia? None	
Cough? None	

Shortness of breath or difficulty breathing? None Syncope or collapse? None Sudden onset lameness? None Exercise intolerance? Normal per owner Prior heart murmur? Yes **Current Medications Pertinent to CV System: B6** Muscle condition: Normal Moderate cachexia Mild muscle loss Marked cacheda Cardiovascular Physical Exam: Murmur Grade: IV/VI **₩** None **■** I/VI ■ v/vi II IVVI VI/VI III/VI **B6** Jugular vein: Bottom 1/3 of neck Top 2/3rd of neck Middle 1/3 of neck

Arterial pulses:

Weak	Bounding	
Fair Good	Pulse deficits Pulsus paradoxus	
Strong	Other:	
Arrhythmia:		
Mone	☐ Bradycardia	
Sinus arrhythmia	☐ Tachycardia	
Premature beats		
Gallop:		
Yes	☐ Pronounced	
No	Other:	
Intermittent		
Pulmonary assessments:		
Eupneic - panting	Pulmonary craddes	
Mild dyspnea	Wheezes	
Marked dyspnea	Upper ainway stridor	
Normal BV sounds		
Abdominal exam:		
Mormal	Mild ascites	
■ Hepatomegaly	Marked ascites	
Abdominal distension		
Problems:		
DCM		
CHF - controlled with medications		
Diagnostic plan:		
Echocardiogram	Dialysis profile	
Chemistry profile	Thoracic radiographs	
ECG	III NT-proBNP	
Renal profile	Trepenin I	
Blood pressure	Other tests:	
= uma persoe		
	R6	
de estada de est	DU	
Assessment and recommendation		
	18 revealed DCM with L-CHF. Serum taurine level was borderline or	
	els of taurine within normal limits. Sample of B6 grain free dog	
	er today for submission to FDA. Patient currently receiving taurine	
	ontinued if tolerated by B6 Clinically appears stable on current	
	ched to Royal Canin Large Breed diet. Patient panting during	
	ased respiratory effort. Recommend at home monitoring of respiratory	
rate and effort. Recommend cont	nuing on curren B6 If not azotemic on	
bloodwork, increase B6	in the morning and B6 in the evening; monitor for signs	
of weakness or lethargy. Recheck	echocardiogram recommended in 3-4 months or sooner if worsening	
dinical signs at home.	The state of the s	
300		

DCM with CHF (currently controlled on medications)

Patient D: B6

Patient D: B6

Canine

B6 | Canine

B6 | Years Old Male (Neutered)

Caucasian Shepherd Dog

Gray/Black BW: Weight (kg) 62.00

AT TUFTS UNIVERSITY Cardiology Liaison: 508-887-4696

Cardiology Inpatient

Date: 5/29/2018	
Weight: Weight (kg) 60.30	
Requesting Clinician:	B6
Attending Cardiologist:	
John E. Rush DVM, MS, DA	CVIM (Cardiology), DACVECC
В	6
Presenting complaint and import	ant concurrent diseases: Increased respiratory rate and effort for 1
그 아내는 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그	wks). No exercise intolerance noted.
Current medications and doses:	
B6	
Key indication for consultation:	creased respiratory rate/effort + dilated LV noted on TFAST.
Questions to be answered from t Differentiate cardiac vs respirator Assess cardiac structure and funct *STOP - ren	y cause of cough
Physical Examination	
	B6
Muscle condition:	
■ Normal	Moderate cachexia
Mild muscle loss	Marked cachexia
Cardiovascular Physical Exam	
Murmur Grade:	No. of the control of
None	□ IV/VI
	□ v/vi
<u> </u>	□ vi⁄vi
□ III / VI	

Jugular vein: Bottom 1/3 of neck Middle 1/3 of neck	■ Top 2/3 of neck	
Arterial pulses: Weak Fair Good Strong	Bounding Pulse deficits Pulsus paradoxus Other (describe):	
✓ None✓ Sinusarrhythmia✓ Premature beats	☐ Bradycardia ☐ Tachycardia	
Gallop: Yes No Intermittent S3	Pronounced Other:	
Pulmonary assessments: Eupneic Mild dyspnea Marked dyspnea Normal BV sounds	Pulmonary Crackles Wheezes Upper airway stridor Other auscultatory findings:	
Abdominal exam: Normal Hepatomegaly	Abdominal distension Mild ascites	
Echocardiogram Findings:		
	B6	

Assessment and recommendations:

Echocardiogram reveals DCM with L-CHF. Patient is on a grain-free diet. Submitted taurine levels. Will

submit diet and label to FDA. There also may or may not have a high VSD-may have covered over and no longer be patent; does not appear to be problematic at this time.

Trestment plan:	(e.e)e.ure(e)e.e.e.(e)e.ure(e)e.ure(e)e.ure(e)e.ure(e)e.u		
	36		
	MC-(MC-(MC-(MC-(MC-(MC-(MC-(MC-(MC-(MC-(
Final Diagnosis: DCM with CHF			
Heart Failure Classification Score:			
ISACHC Classification:			
☐ la	□ Ula		
□ lb	₩ III		
I II			
ACVIM CHF Classification:			
□ A	■ c		
■ B1	■ D		
■ B2			
M-Mode			
IVSd			om
LVIDd			om
LVPWd			cm
IVSs			cm
LVIDs			an
LVPWs			cm
%FS			%
Ao Diam			on
LA Diam			om
LA/Ao			
Max LA			an
EPSS			om
M-Mode Normalized		B6	
IVSdN			(0.29 - 0.52)
LVIDdN			(1.35 - 1.73) !
LVPWdN			(0.33 - 0.53) !
IVSsN			(0.43 - 0.71)!
LVIDsN			(0.79 - 1.14) !
LVPWsN			(0.53 - 0.78) !
Ao Diam N			(0.68 - 0.89) !
LA Diam N			(0.64 - 0.90) !
<u>2D</u>			
SA LA			cm
Ao Diam			om

21212		
SA LA / Ao Diam		
IVSd		cm
LVIDd		cm
LVPWd		om
EDV(Teich)		ml
IVSs	50	cm
LVIDs	B6	am
LVPWs	1=09	cm
ESV(Teich)		ml
EF(Teich)		%
%FS		%
SV(Teich)	T	ml
	1 1	

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

Discharge Instructions

Patient	Owner		
Maunez B6	Hane	B6	Patient ID B6
Species: Canine	Address	D¢	the section of the se
Gray/Black Male (Neutered) Car	ucasian	B6	
Shepherd Dog			
Rithdate: 86			
Attending Cardiologist:			
the same and the s	DACVIM/Cardiologid, DAC	MECC	
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	36	į	
		î Î	
		recentare ceremal.	
Cardiology Resident:	B6		
	D0		
Resident	DC		
Student:	B6	į	
Cardiology Technician:		eteropera reneral reneral f	
B6			
В			
Admit Date B6 655:16	PM		
Discharge Date B6			
Diagnoses:			
1. Dilated cardiomyopathy (DC)	40		
2. Congestive Heart Failure (CHI			
Diagnostic test results and fin		- 6 - 00 - 0 - 0 - 0	
) findings: The heart is enla		A STATE OF THE STA
			ere is a leak at the mitral valve
	al abnormal (ventricular) be		to the section
BIODOWALIK UNTERNA	ble bloodwork with no pre-	existing elevations in loc	ney values
Case summary:			
	with a crimary heart musck	e disease called dilated	cardiomyopathy (DCM). This disease is
tiological control of the second of the seco			e walls of the heart, reduced cardiac
	the state of the s		with DCM will also have significant
			heart enlargement has now progressed
	And the street, the second of		ngs. Unfortunately this is a progressive
			use cardiac medications and some
changes to the diet to make	B6 comfortable and ha	we him breathing easie	r. As wediscussed, this disease carries a

ograss or 5-6 markers given that it has progressed at the point or causing congestive heart failure with main on cardiac medications for the rest of his life. As long as we can control his congestive heart failure with edications, he can have a good quality of life for his remaining time.
entario 6, ne carriave a guou quanty or me no resimiling time.
lonitoring 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. We will use breathing rate and effort to make adjustments to drug doses.
O in general, most dogs with heart failure that is well controlled have a breathing rate at rest of less than 35 to 40 breaths per minute. In addition, the breathing effort, noted by the amount of belly wall motion used for each
breath, is fairly minimal if heart failure is controlled.
O An increase in breathing rate or effort will usually mean that you should give an extra close d Please do not he sitate to do so. If difficulty breathing is not improved by within 30-60 minutes after giving extra
B6 hen werecommend that a recheck exam be scheduled and/or that your dog be evaluated by an
emergency dinic. 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 reduck examination.
O If you have any concerns, please call or have your dog evaluated by a veterinarian. Our emergency clinic is open 24
hours/day.
ecommended Medications:
B6
iet suggestions: Ve suggest that you begin fæding B6 a heart-safe food that is not grain-free, as a link has been found between Imegrain-free diets and the development of DOM. For that reason, a Taurine level has been submitted for B6 and Bu have permitted us to submit his food to the FDA for further testing. While B6 should be switched to a diet that is

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

also appropriate for heart disease, we would recommend switching your other dogs at home to a different diet as well. We

suggest selecting a food made by Hill's, Purina, or Royal Canin, as these are trusted brands.

Jinical trials are studies in which our veterinary daztors work with you and your pet to investigate nomising new test or treatment. Please see our website: <u>vet.tufts.edu/cvmc/dinical-studies</u>	a sheeder mercer bare	714760
	a coordir diconce nos	CESS OF Q
Sinical Trials:		
please call 7-10 days in advance (508-887-4629) to ensure the food is in stock. Alternatively, veto unline retailers with a prescription/veterinary approval.	vinary diets can be on	dered from
Indexing Food: Please check with your primary veterinarion to purchase the recommended diet(s). If you wish to p	unchase your food fro	m us,
eur in order to obtain prescription medications.	ur veternio noto wion	orthe park
rescription Refil Disclaimen: for the safety and well-being of our patients, your pet must have had an examination by one of a	ur unteriornime milhi	a the rout
induty we trust early resistance y		
Please visit our HeartSmart website for more information http://vet.tulits.edu/heartsmart/		
hank you for entrusting us with B6 care. Please contact our Cardiology liaison mail us at cardiovet@tuits.edu for scheduling and non-emergent questions or concerns.	B6	
passino.		
isit we will check your dog's breathing effort and heart function, do a blood test to recheck! echeck a blood pressure. A recheck echocardiogram is recommended in 3-4 months.	kidneyvalues, and pr	obably
f this appointment does not work for you please call or email our liason, B6 as soon as p	ossible to rescheduk	e. At this
techeck Visits: A recheck visit is recommended in 1-2 weeks. We have scheduled an appointment for you	on lune 12, 2018 at	11:00am
nuvised in the nature, requalitive or strendous rightenergy activities (repeative dail chasing, r generally not advised at this stage of heart failure.	municipal (aprolitica)	, eujare
f you find that is lagging behind or needs to stop on a walk then this was too long idvised in the future. Repetitive or strenuous high energy activities (repetitive ball chasing, r		
s ideal, and short walks to start. Once the heart failure is better controlled, slightly longer w	alis are acceptable.	However,
beroise Recommendations. Or the first 7 to 10 days after starting medications for heart failure we recommend very lim	todactivity Loads w	ralleiner engl
	SIGNATURA NA SERVICIO	
While it is generally advisable to switch diets in a slow gradual manner, we would like you to: mmediately, as we are concerned that continuing his current grain-free diet could worsen h		ood
	, energia en en en en en en en en en en en en en	
ills often have more sodium than is desirable- a sheet that has suggestions for low sodium t leartSmart web site (http://vel.tufts.edu/heartsmart/diet/).	eas can de Journo d	nue

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

Discharge Instructions

Marrez B6		Owner		
		Kame	D	Patient ID; B6
Species: Canine		Addres	Bo	
Gray/Black Male (Neutered)	Cavucasiam	1		
Shepherd Dog				
Birthdate: B6				
Attending Cardiologist: John E. Rush DVM, N	AS, DACVIM (Cardiology), DA	CVEOC	
	B6			
Cardioloex Resident:				***************************************
	Е	36		
Small Animal Medicine Inte	T	B6		
Student: B6	~[50		
Cardiology Technician:	ooronis is			
	В	2		
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Admit Date: 6/12/2018 10:50	1-21 AM	(M) = 1 (M) = (M) = 1 (M) = 1 (M) = 1 (M) = 1	and and and and and and and and and and	
WIRE INTERIOR DATASETTO TO THE	1-2T MM			
Discharge Date: 6/12/2018	anniana.	2		
Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating Clinical Findings:	DOM and Cheart and wate the current d	IF while at Tult th his breathing loses of medica	s Veterinary Hospital on: ; We also retested his blo tions and make any nece	
Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating Clinical Findings: B6 recheck of blood	DOM and Or eart and wate the current d	IF while at Tult thins breathing loses of medica wed that his blo	s Veterinary Hospital on: ; We also retested his blo tions and make any nece ood pressure was mildlyd	5/28/18. Today we performed a physical nod pressure and bloodwork today to ssary adjustments. ecreased. His bloodwork showed that his
Discharge Date: 6/12/2018 Thank you for bringing B (OHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating Clinical Findings: B6 recheck of blood kidney values have increased	DOM and Or eart and wate the current d pressure sho slightly since	IF while at Tult thins breathing loses of medica wed that his blo his previous vis	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d it; these values are ourse	5/28/18. Today we performed a physical nod pressure and bloodwork today to essary adjustments. ecreased. His bloodwork showed that his ndy at the high end of normal. We did not
Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his hevaluate how he is tolerating Clinical Findings: B6 recheck of blood kidney values have increased hear any annythmias today in	n DOM and O eart and wate the current d pressuresho slightly since or any heart i	IF while at Tuft th his breathing loses of medica wed that his blo his previous vis murmurs. He w	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d it; these values are ourre ras pariting throughout h	5/28/18. Today we performed a physical nod pressure and bloodwork today to essary adjustments. ecreased. His bloodwork showed that his city at the high end of normal. We did not is examination thus making it difficult to
Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating Clinical Findings: B6 recheck of blood kidney values have increased hear any arrhythmias today rassess his respiratory effort.	n DOM and O eart and wate the current d pressuresho slightly since or any heart i	IF while at Tuft th his breathing loses of medica wed that his blo his previous vis murmurs. He w	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d it; these values are ourre ras pariting throughout h	5/28/18. Today we performed a physical od pressure and bloodwork today to essary adjustments. ecreased. His bloodwork showed that his ordy at the high end of normal. We did not its examination thus making it difficult to
Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating B Clinical Findings: B6 recheck of blood kidney values have increased hear any ambythmias today reasess his respiratory effort. I	n DOM and Oreart and water the current d pressure sho slightly since for any heart de did not app	IF while at Tult thhis breathing loses of medica wed that his blo his previous vis murmurs. He w pear to be in ar	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d it; these values are ourre was painting throughout h y respiratory distress tod	5/28/18. Today we performed a physical ood pressure and bloodwork today to ssary adjustments. Recreased. His bloodwork showed that his only at the high end of normal. We did not is examination thus making it difficult to bay.
Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his hevaluate how he is tolerating B recheck of blood kidney values have increased hear any analythmias today massess his respiratory effort. Monitoring at home: O Wewould like you to	n DOM and O eart and wate the current d pressure sho slightly since or any heart te did not app	IF while at Tuft th his breathing loses of medical wed that his blo wed that his blo his previous vis murmurs. He w pear to be in ar	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d sit; these values are ourre was pariting throughout h y respiratory distress tod ning rate and effort at ho	5/28/18. Today we performed a physical pod pressure and bloodwork today to essary adjustments. Recreased. His bloodwork showed that his ordy at the high end of normal. We did not also esamination thus making it difficult to lay.
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Discharge Date: 6/12/2018 Thank you for bringing B (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating Clinical Findings: B6 recheck of blood kidney values have increased hear any arrhythmias today rassess his respiratory effort. I Monitoring at home: O Wewould like you to rest. We will use bre o in general, most do	n DOM and Ofeart and water the current of pressure sho slightly since or any heart de did not app or monitor	IF while at Tult th his breathing loses of medica wed that his blo his previous vic murmurs. He w pear to be in ar B6 breatl ad effort to mal failure that is w	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildlyd it; these values are curre ias painting throughout h y respiratory distress tod ning rate and effort at ho e adjustments to drug d ell controlled have a bre	5/28/18. Today we performed a physical pod pressure and bloodwork today to essary adjustments. The bloodwork showed that his entry at the high end of normal. We did not also essamination thus making it difficult to lay. The ideally during sleep or at a time of oses. The at rest of less than 35 to 40
Discharge Date: 6/12/2018 Thank you for bringingB (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating Clinical Findings:BB recheck of blood kidney values have increased hear any arrhythmias today rassess his respiratory effort. I Monitoring at home: O Wewould like you to rest. We will use bre to in general, most do breaths per minute.	n DOM and Oreart and water the current d pressure sho slightly since or any heart i de did not app or monitor athing rate and s with heart i In addition, the	IF while at Tuit th his breathing loses of medica wed that his blo his previous vis murmurs. He w pear to be in ar B6 breath id effort to mal failure that is w he breathing el	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d oit; these values are curre vas painting throughout h y respiratory distress tod ning rate and effort at ho e adjustments to drug d ell controlled have a bre fort, noted by the amount	5/28/18. Today we performed a physical ood pressure and bloodwork today to essary adjustments. lecreased. His bloodwork showed that his ordy at the high end of normal. We did not also essamination thus making it difficult to lay. Inc., ideally during sleep or at a time of oses.
Discharge Date: 6/12/2018 Thank you for bringingB (CHF). He was diagnosed with examination to listen to his he evaluate how he is tolerating. Clinical Findings:B6 recheck of blood kidney values have increased hear any arrhythmias today ressess his respiratory effort. I Monitoring at home: O We would like you to rest. We will use bre o in general, most do breath, is fairly mini-	n DOM and Cheart and wate the current d pressure sho slightly since or any heart i he did not app or monitor athing rate and s with heart la In addition, the	IF while at Tult th his breathing bases of medical wed that his blo his previous vic murmurs. He w pear to be in ar B6 breath failure that is w he breathing eli iture is controll	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d oit; these values are ourre vas pariting throughout h ny respiratory distress tod ell controlled have a bre fort, noted by the amous ed.	5/28/18. Today we performed a physical ood pressure and bloodwork today to essary adjustments. Lecreased. His bloodwork showed that his ordy at the high end of normal. We did not also examination thus making it difficult to lay. Inc., ideally during sleep or at a time of oses. Athing rate at rest of less than 35 to 40 ort of belly wall motion used for each
Discharge Date: 6/12/2018 Thank you for bringing B (OFF). He was diagnosed with examination to listen to his hevaluate how he is tolerating Clinical Findings: B6 recheck of blood kidney values have increased hear any anhythmias today rassess his respiratory effort. I Monitoring at home: O We would like you to rest. We will use breath with the per minute. breath, is fairly minitoring at home: O An increase in breath	n DOM and Cheart and water the current d pressuresho slightly since or any heart he did not app monitor athing rate and swith heart fail fining rate or o	IF while at Tult th his breathing loses of medica wed that his blo his previous vis murmurs. He w pear to be in ar B6 breath ad effort to mal failure that is w he breathing el iture is controll effort will usus	s Veterinary Hospital on: We also retested his blo tions and make any nece ood pressure was mildly d sit; these values are ourre ras pariting throughout h y respiratory distress tod el controlled have a bre fort, noted by the amount ed. ally unean that you shou	5/28/18. Today we performed a physical ood pressure and bloodwork today to essary adjustments. Lecreased. His bloodwork showed that his city at the high end of normal. We did not also esamination thus making it difficult to lay. Inc., ideally during sleep or at a time of oses. Athing rate at rest of less than 35 to 40 at of belly wall motion used for each

Recheck Visits:

 Please schedule a recheck visit veterinarian to have a recheck bit 				[7] [47] [7] [7] [7] [7] [7] [7] [7] [8] [7] [7] [7] [7] [7] [7] [7] [7] [7] [7
B6 dose.	out may prome par	onies nissauci	SARC DIRECT DO	B DEGREGATION
2. We have scheduled a reched this appointment, please contact	Tults Cardiac Service a	s soon as possible.	At this visit we w	
effort and heart function, and re with a cardiologist in Permsylvan			rtotus visit, pie	ase schedule an appointment
If you are finding that B6 intolerance prior to that recheck				have concerns with his exercise
Tults Emergency Service is availa have concerns that he is having i			how increased w	eakness or lethargy, or if you
Thank you for entrusting us with Cardiology liaison, questions or concerns.				ork with! Please contact our cheduling and non-emergent
Please visit our HeartSmart webs http://wet.tufts.edu/heartsmart/		n		
Prescription Refill Discloimer: For the safety and well-being of or year in order to obtain prescription		st have had on exami	nation by one of a	ur veterinarions within the past
Ordering Food: Please the ok with your primary vet please call 7-10 days in advance & online retailers with a prescription,	508-887-4629) to ensure			
Clinical Trials: Clinical trials are studies in which a promising new test or treatment. I				a specific disease process or a
Case	B6		Discharge Instruc	tions

Cardiology Liaison: 508-887-4696

B6

Patient D: B6 B6 Canine

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

Cardiology Consultation

Date: B6	
Weight: Weight (kg) 71.60	
Requesting Clinician: Unassigned Clinician	
Attending Cardiologist:	
John E. Rush DVM, MS, DACVIM (Cardiology), DACVECC	
B6	
Cardiology Resident:	
B6	
Thoracic radiographs available for review?	
Yes - in SS	
Yes - in PACS	
No - CD in ER and ER email	
Partient location: ER	
Presenting complaint and important concurrent diseases:	
1 mo history of resp distress, worse in past week	
no coughing	
litter mate diagnosed with DCM	R6
CBC, chem, taurine done at rDVM - haven't gotten records yet (Taurine was	DO done at UCD)
Current medications and doses:	
B6	
decreased energy level and appetite, increased thirst litter mate diagnosed with DCM CBC, chem, taurine done at rDVM - haven't gotten records yet (Taurine was Current medications and doses:	B6 done at UCO

At-home diet: Was on Taste of the Wild grain free diet Switched to Purina Proplan Sensitive skin and stomach 1 month ago

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

Afib on EKG

Decreased contractility on TFAST

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

Yes (explain):	
■ No	a tall and a such that have been
STOP - remain	der of form to be filled out by Cardiology
Physical Examination	
	B6
Muscle condition:	
Normal	Moderate cachexia
Mild muscle loss	Marked cachexia
Cardiovascular Physical Exam	
Murmur Grade:	
None	□ IV/VI
□ INI	□ v/vi
□ II/VI	□ vi∧i
₩ III/VI	
Murmur location/description: Left apid	cal murmur
homebre arises	
lugular vein:	T 2/2 -f-4
Bottom 1/3 of the neck to	Top 2/3 of the neck
■ Middle 1/3 of the neck	1/2 way up the neck
Arterial pulses:	
☐ Weak	Bounding
Fair, variable	Pulse deficits
Good	Pulsus paradoxus
Strong	Other (describe):
Arrhythmia:	
None	☐ Bradycardia
Sinusarrhythmia	Tachycardia
Premature beats	- Jacopas viio
Gallop:	
Yes	Pronounced
No	Other:
Intermittent	- Other:
A CONTRACTOR OF THE CONTRACTOR	
Pulmonary assessments:	The best of the second of the
Eupneic	Pulmonary Crackles
Mild dyspnea	Wheezes
Marked dyspnea	Upper airway stridor
Normal BV sounds	Other auscultatory findings:
Abdominal exam:	
Normal	Abdominal distension
Hepatomegaly	Mild ascites

	B6	
	egular rhythm consistent with atrial fibrillations: Findings consistent with advanced DCM	
dilation with systolic dysfunction i	s observed. B6	are
	larly irregular consistent with AFib worsens	(1-18 (-) H - (8
cardiac output from loss of atrial i	contraction and fast ventricular rate.	B6
Treatment plan:		
	B6	
Finel Diagnosis:	B6	
Advanced DCM with active heart	B6	ar response, less frequen
Advanced DCM with active heart t VPCs.		ar response, less frequen
Advanced DCM with active heart t VPCs.		ar response, less frequen
Advanced DCM with active heart (VPCs. Moderate pleural effusion and as	cites.	ar response, less frequen
Advanced DCM with active heart (VPCs.) Moderate pleural effusion and as Heart Failure Classification Score (SACHC Classification:	cites.	ar response, less frequen
Advanced DCM with active heart (VPCs.) Moderate pleural effusion and assemble Failure Classification Score SACHC Classification:	cites.	ar response, less frequen
Advanced DCM with active heart (VPCs.) Moderate pleural effusion and as (Heart Failure Classification Score) SACHC Classification:	cites.	ar response, less frequen
Advanced DCM with active heart (VPCs.) Moderate pleural effusion and as (Heart Failure Classification Score SACHC Classification:	cites.	ar response, less frequen
Advanced DCM with active heart (VPCs.) Moderate pleural effusion and as Heart Failure Classification Score (SACHC Classification:	cites.	ar response, less frequen
VPCs. Moderate pleural effusion and ass Heart Failure Classification Score ISACHC Classification:	cites.	ar response, less frequen

M-Mode		
IVSd		am
LVIDd		am
LVPWd		am
IVSs		(371)
LVIDs		cm
LVPWs	De	am
%FS	B6	%
Ao Diam		cm
LA Diam		om
IA/Ao		
EPSS		cm
Max LA		cm
2D		
Ao Diam	(om
IVSd		om
LVIDd		am
LVPWd		am
IVSs	Be	om
LVIDs	B6	om
LVPWs		am
EF(Cube)		%
%FS		%
SA LA	was not not not not not not not not not not	cm
Doppler	A constant	
MR Vmax	Ī	m/s
MR maxPG		mmHg
AV Vmax	B6	m/s
AV maxPG	В	mmHg
TR Vmax		m/s
TR maxPG	J. J. J. J. J. J. J. J. J. J. J. J. J. J	mmHg

Report Details - EON-	363365		
ICSR:	2054221		
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:	Previously healthy dog. Eating Petcurean Go Limited ingredient dry primarily. Also, some Petcurean Now Fresh, Stella and Chewy Raw patties, lean treats, Wellness Core treats. Had been on Petcurean Now Fresh Ig breed puppy initially. See nutrition consultation for full diet history. Dilated cardiomyopathy diagnosed with low taurine level. DCM reversed after diet change and taurine and carnitine supplementation. Note: maxed out on attachments - will send more by email. Also, I am submitting this report in collaboration with B6 I will submit a small sample of dog's food when I ship other food samples on 8/27/18	
	Date Problem Started:	06/19/2017	
	Concurrent Medical Problem:		
	Outcome to Date:	Better/Improved/Recovering	
Product Information:	Product Name:	Petcurean Now Fresh	
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:	BAG	
	Product Use Information:		
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
	Product Name:	Petcurean Limited Ingredient Salmon Dry	
	Product Type:	Pet Food	
	Lot Number:		
	Package Type:		
	Product Use Information:	Description: Fed daily	
	Manufacturer /Distributor Information:		
	Purchase Location Information:		
Animal Information:	Name:	B6	
	Type Of Species:	ļd	
	(Boxer (German Boxer)	
	Gender:	garana na mana hiina a a mana hiina a a mana hiina a a mana na mana	
	Reproductive Status:		
	3.9000000000000000000000000000000000000	31.5 Kilogram	
	5 hannanaan maanaan ma	2 Years	
	Assessment of Prior Health:	Excellent	
	Number of Animals Given the Product:	1	
	Number of Animals Reacted:	1	
	Owner Information:	Owner Yes Information	

		provided:			
		Contact:	Name:	В6	
			Phone:	DO	1
			Email:	В	6
		Address:	**************************************	1	
			B6		
			United States	.)	
	Healthcare Professional	Transfer trainer I mise e all limited of the section of the section of		eterinary Medicine	
	Information:	Contact:	Name:	Lisa Freeman	
			Phone:	(508) 887-452	23
			Email:	lisa.freeman@	tufts.edu
		Address:	200 Westboro North Grafton Massachusetts 01536 United States		
		Practice Name:	В	6	
		Contact:	Name:	B6	
			Phone:	promountenens and a	1
		Type of	Referred veteri	Lanear management of the lane	~!
		Veterinarian: Permission to			
		Release Records to FDA:			
Sender Information:	Name:	Lisa Freeman			
sender information.	Address:	North Grafton Massachusetts 01536 United States			
	Contact:	t: Phone: 5088874523			
		Email:	lisa.freeman@t	ufts.edu	
	Permission To Contact Sender:	Yes			
	Preferred Method Of Contact:	Email			
Additional Documents:					
	Attachment:	B6 echo 3-1-18	pdf		
	Description:				
	Type:	Echocardiogram			
	Attachment:	B6 rdvm records.	pdf		
	Description:	RDVM records			
	The second of th	Medical Records			
	Attachment:		ultation 7-7-18 n	df	
	The state of the s	B6 nutrition consultation 7-7-18 pdf : Nutrition consultation			
		Other			
		are investment and	- 200		
	Attachment:	B6 echo 8-28-17	.par		
		Echo 8/28/17			
		Echocardiogram	i de		
	Attachment:	B6 diet hx form p	oat		

Description: Diet history	A PARTITION AND A PARTITION AN
Type: Other	AND WINDOW

Foster Hospital for Small Animals

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

Client:		
Veterinarian	B6	
Patient ID:		
Visit ID:	2492791	

Patient:	B6
Species:	Canine
Breed:	Doberman
Sex;	Male (Neutered)
Age:	B6 Years Old

Lab Results Report

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

stringsoft.

1/1

B6

Printed Monday, August 20, 2018

Foster Hospital for Small Animals 55 Willard Street North Grafton, MA 01536 Telephone (508) 839-5395 Fax (505) 839-7951 http://vetmed.tufts.edu/

<u>Patient</u>	,	<u>Owner</u>		
Name:	B6	Name: Address:	B6	
Signalment	B6 Years Old Red/White Male (Neutered) English Cocker	ACCEPTS:	DU	
	Spaniel	i i	i	
				
Patient ID:	В6			
Contact Clinician:	В6			
Alternate Clinician: Student:	B6 V19			
	RE-EXAI	MINATION FORM	l	
Date: 1/22/2019				
Problem: Ortho Reche	ut B6			
History: ,	••••••		·	
Thank you for bringing	B6 to the Tufts Orthopedic Surge			
	В6 нартем	ented to the Tufts ERor	n B6 afterhe was l	it by acar. Pelvic
radiographs shower	·	R6		
fractures B6 under	varient anglet A or	В6		
You connect that ha is do	ing well at home, and is standing up a	·	 Slen hac a hictory of	B6 which is
	logy service. He has a episode ci		and had one seizure s	
Physical Examination:				
		B6		
		DO		
Diagnosis/con last recheck	clusions: B6 mas ambulatory on a	all four legs, and appea	red much more stable	when walking than on his
Procedures Performed	l & Futuro Diane			
	nsuit with our Cardidogy department	to exclusie his heart n	normor exist to being	sedated for radiographs.
	B6 has a primary heart musde dis			
in large and giant breed	l dogs, and is characterized by thinnin	g of the walls of the he	art, reduced cardiac p	ump function, and
	per chambers of the heart. This diseas			
especially diets that are	grain-free or contain exotic ingredier	nts.Basedon B6	current diet and the fi	rdings of his cardiology
evaluation, we recomm	end switching B6 diet; some re	commendations are lis	ted below. At this time	e B6 doesnotrequire
any medications for his	heart disease; however we recomme	nd rechecking an echc	ardiogram (ultrasound	of the heart) in 3 months.
We also recommend st	arting B6 on a Taurine suppleme	nt, which may help the	heart muscle. You ha	e elected to enroll B6
m a swoyrelating diet a	and dilated cardiomyopathy in dogs.			

Medications: 1. Adin'ny Restitutions: 2. Diet: The FDA is currently investigating an apparent association between diet and 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 ourneathy recommending that dogs do note at these types of diets. We recommend switching like to commercial diet made by a well-established company that is not grain-free and does not contain any exotic ingredients, such as karagaroo, duck, lamb, werison, lentils, peas, beans, buffalo, tapiora, barley, and dridquess. The FDA Issued a statement regarding this issue (https://www.dda.gov/Anima/Nebrinary/News-Events/CVMUpdates/non613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings Schoot's Petfoodology blog can further explain these finding (http://webnatriton.turks.edu/2018/06/a-broben-beart-risk of-heart-disease in-boutique-or-grain-free-diets-and exotic ingredients/). Our mutritionists have compiled a list of dog foods that are good options for dogs with heart disease. Dry Food Options: Royal Canin Bover Purina Pro Plan Adult Weight Management Purina Pro Plan Bright Mand Adult Small Breed Formula Cannel Food Options: Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley Entree Hilf's Science Diet Adult Beef and Barley	В6	was sedated and	d В	6
Today we also due blood to check B6 level. His level today was B6 which is higher than his presions level, but is within the reference range. B6			В6	
Medications: 1. Adiavity Residion: Since B6 inadiographs look good we can begin to loosen his exercise restrictions. Since B6 has had decreased activity for the past few weeks, we want to gradually build up his exercise tolerance. You can gradually increase the length of his walks by 5 minutes every box weeks, until his next recheck. 2. Diet: The FDA is currently investigating an apparent association between diet and dilated cardiomyopathy. The exact cause is still uncless, 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 incommendation of a statement regarding this issue (man free and does not contain any exotic ingredients, such as licangaroo, duick, lamb, venison, lentils, peas, beans, buffalo, tapioca, barley, and childpeas. The FDA issued a statement regarding this issue (https://www.fda.gov/dxima/teterinary/beast-venis/CVMU.pdates/uom613305.htm) and a recent article published by D7. Lisa Freeman on the Currentings School's Petfoodology blog can further explain these findings (http://webutrition.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. Dyylood Options: Boyal Canin Boxer Parina Pro Plan Adult Weight Management Ruine Pro Plan Adult Weight Management Parina Pro Plan Adult Weight Management Ruine Pro Plan Adult Heef and Barley Entree Hiffs Science Diet Adult 1-6 i healthy Quesine Roasted Chicken, Carrot, and Spinach Stew Boyal Canin Mature 8- Byoyal Canin Mature 8- Byoyal Canin Mature 8- Byoyal Canin Server Bak hash for a surgery recheck in 6 weeks. Please contact the Surgery Itaison at (508) 887-4794 to arrange your next appointment. Bis pointment with our nutritionists (508-887-4794.) a surgery recheck in 6 weeks. Please contact the Surgery Itaison at (5	surge	ry. We will contact	you with the results of the radiographs when we re	ceive them.
Medications: 1. Adiavity Residion: Since B6 judiographs look good we can begin to loosen his exercise restrictions. Since B6 has had decreased activity for the past few weeks, we want to gradually build up his exercise tolerance. You can gradually increase the length of his walks by 5 minutes every box weeks, until his next recheck. 2. Diet: The FDA is currently investigating an apparent association between diet and 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 no commercial diet made by a well-established company with at is not grain-free and does not contain any exotic ingredients, such as languaroo, duck, lamb, venison, lentils, peas, beans, buffalo, tapioca, barley, and chidopeae. The FDA issued a statement regarding this issue (https://www.fda.gov/dnime/teterinary/NewsEvents/CVMU.pdates/uom613305.htm] and a recent article published by D1. Lisa Freeman on the Cummings School's Petfoodology blog can further explain these findings (http://webutrition.bufts.edu/2018/06/a broken-heart-risk-of-heart-disease in-boutique-or-grain-free diets-and-exotic ingredients/). Our mutritionists have compiled a list of dog foods that are good options for dogs with heart disease. Dry Food Options: Boyal Canin Roser Boyal Canin Roser Purine Pro Plan Englit Management Ruine Pro Plan Adult Weight Management Ruine Pro Plan Mature 8: Byoal Canin Mature 8: Byo	Today	vun skodun Nov	d to charact R6 local List local to	daywas B6 which is higher than his remisure level but is
Home Instructions: 1. Adia/Ny Residetion: SinceBBpatiographs look good we can begin to loosen his ever doe restrictions. Since _BBhas had decreased activity for the post few weeks, we want to gradually build up his everdoe tolerance. You can gradually increase the length of his walks by 5 minutes every hon weeks, until his next rethed. 2. Diet: The FDA is currently investigating an apparent association between diet and 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 east these types of deet. We are currently recommending that dogs do not east these types of deet. We are commend said-ing _BB _B _B 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, verison, lentils, peas, beans, buffalo, tapiota, barley, and chidquea. The FDA issued a statement regarding this issue _Ottps://www.fda.gogs/AnimatAvetrinary/Alexactventy/CVAA/plataes/unofil3305.htm] and a recent article published by Dr. Las Freeman on the Cummings Schoot's Petioodology blog can further explain these findings _Ottps://www.fda.gogs/alexactventy/CVAA/plataes/unofil3305.htm] and a recent article published by Dr. Las Freeman on the Cummings Schoot's Petioodology blog can further explain these findings _Ottps://www.fda.gogs.gogs.gogs.gogs.gogs.gogs.gogs.gog	within	n the reference can		not not not married lights married because of pare
Home Instructions: 1. Addivity Residicion: Since			16	
Home Instructions: 1. Addivity Restriction: Since	Medi	cations:		
1. Addivity Restiction: Since B6 ratiographs look good we can begin to loosen his everoise restrictions. Since B6 has had decreased activity for the past few weeks, we want to gradually hind up his everoise tolerance. You can gradually increase the length of his walks by 5 minutes every two weeks, until his next recheck. 2. Diel: The FDA is currently investigating an apparent association between diet and 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 such ingredients, such as kangaroo, duck, lamb, version, lentils, peas, beans, buffalo, tapiora, barley, and chidquess. The FDA issued a statement regarding this issue (https://www.ndta.gov/Anima/Netrinary/NewSents/CVMUpdates/uom613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings School's Petfootblogy blog can further explain these findings (http://webnutrition.tufts.edu/2018/06/a-broken-heart-risk of heart-disease in-boutique-or-grain-free-diets-and-exotic ingret thems.) Our nutritionists have compiled a list of dog foods that are good options for dogs with heart disease. Dry Food Options: Royal Canin Bover Purina Pro Plan Adult Weight Management Purina Pro Plan Bright Mind Adult Small Breed Formula Cannel Food Options: Hiffs Science Diet Adult Beef and Barley Entree Hiffs Science Diet Adult Beef and Barley Entree Hiffs Science Diet Adult Beef and Barley Entree Hiffs science Diet Adult Beef and Barley Entree Hiffs science Diet Adult Beef and Barley Entree 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 [Science Diet Adult Beef and Barley Entree Hiffs Science Diet Adult Beef and Barley Entree Hiffs Science Diet Adult Beef and Barley Entree Hiffs Science Diet Adult Beef and Barley Entree Hiffs Scien			B6	
1. Addivity Restrictions Since	·			······································
had decreased activity for the past few weeks, we want to gradually baid up his exercise tolerance. You can gradually increase the length of his walks by 5 minutes every boo weeks, until his next reched. 2. Diet: The FDAs currently investigating an apparent association between diet and 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 dets. We recommend switching 55 to commercial diet made by a well-established company that is not grain-free and does not contain any exotic ingredients, such as langaron, duck, lamb, wentson, lentils, pears, beans, buffalo, tapicoa, barley, and chidqueas. The FDA issued a statement regarding this issue (https://www.bda.gov//minat/vetorinary/News-Events/CVMUpdates/wom613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings Schools Petfootblogy blog can further explain these findings (http://web.wirtition.tufts.edu/2018/06/a-broken-heart-risk of-heart-disease in-boutique-or-grain-free dets-and-exotic ingre-dientsy). Our nutritionists have compiled a list of dog foods that are good options for dogs with heart disease. Dry Food Options: Royal Canin Barly Cardiac (veterinary diet) Royal Canin Barly Cardiac (veterinary diet) Royal Canin Barly Cardiac (veterinary diet) Royal Canin Broe Pian Adult Weight Management Purina Pro Pian Bright Mind Adult Small Breed Formula Cannel Food Options: Hilf's Science Diet Adult 16 Healthy Ouisine Roasted Chicken, Carrot, and Spinach Stew Royal Canin Mature 8+ Four dog has special nutritional needs or requires a homecooked diet, we recommend you schedule an appointment with our nutritionists (508-887-4696). We would like to see B6 back for a surgery recheck in 6 weeks. Please contact the Surgery liaison at (508) 887-4696. Prescription Refer Deskinisee: For the sofety and web-being of our potients, your pet must hove had on e	Hame		<u> </u>	, -
increase the length of his walks by 5 minutes every two weeks, until his next recheck. 2. Diet: The FDA is currently investigating an apparent association between diet and dilated cardiomyopathy. The exact cause is still unclear, but it appears to be associated with boutique diets and those containing exotic ingredients or are grain-free. Therefore, we are currently recommending that dogs do not eat these types of dets. We recommend switching 86. To commercial determated by a well-established company that is not grain-free and does not contain any exotic ingredients, such as kargaron, duck, lamb, wenison, lentils, peas, beans, buffalo, tapicua, barley, and chickpeas. The FDA issued a statement regarding this issue (https://www.fda.gov/Animalvebrinary/News-Events/CVMU.pda.es/wom613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings School's Petfootblogy blog can further explain these findings (https://webutrition.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 Bover Purina Pro Plan Bright Mand Adult Small Breed Formula Cannel Food Options: Hilf's Science Diet Adult Weight Management Purina Pro Plan Bright Mind Adult Small Breed Formula Cannel Food Options: Hilf's Science Diet Adult 1-6 Healthy Quisine Roasted Chicken, Carrot, and Spinach Stew Royal Canin Mature 8+ If your dog has special notitional needs or requires a homecooked diet, we recommend you schedule an appointment with our nutritionists 508-887-4696. We would like to see B6 back for a surgery recheck in 6 weeks. Please contact the Surgery Liaison at (508) 887-4794 to arrange your neet appointment. If you have any problems or questions, please contact B6 DWM, MS, DACAS IA, DACAS SA as soon as possible. If its an emergency, contact the emergency service on Tuesday, 4/23/19 at 1				
2. Diet: The FDA's currently investigating an apparent association between diet and 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 56—to commercial diet made by a well-established company that is not grain-free and does not contain any exotic ingredients, such as longaroo, duck, lamb, version, lentils, peas, beans, buffalo, tapioca, barley, and chidqueas. The FDA issued a statement regarding this issue (https://www.fda.gov/AnimalVeterinary/News-Events/CVPM.lpdates/wom613305.htm) and a recent article published by Dr. Lisa Freeman on the Cummings School's Perioodology blog can further explain these findings (http://welmtrition.tufts.edu/2018/06/a broken-heart-risk-of-heart-disease-in-boutique-or-grain-free-diets-and-exotic-ingre-dients/). 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 Cannel Food Options: Hilf's Science Diet Adult 1-6 Healthy Onisine Roasted Chicken, Carrot, and Spinach Stew Royal Canin Mature 8+ Four dog has special nutritional needs or requires a homecooked diet, we recommend you schedule an appointment with our nutritionists (SO8-887-4696). We would like to see B6 back for a surgery recheck in 6 weeks. Please contact the Surgery Itaison at (SO8) 887-4794 to arrange your next appointment. If you have any problems or questions, please contact the Surgery Itaison at (SO8) 887-4794 to arrange your next appointment. If you have any problems or questions, please contact the Surgery Itaison at (SO8) 887-4794 to arrange your next appointment. If you have any problems or questions, please contact the surgery recheck in 6 weeks. Please cont				
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■ 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 Orisine 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). We would like to see B6 back for a surgery recheck in 6 weeks. Please contact the Surgery Baisonat (508) 887-4794 to arrange your next appointment. If you have any problems or questions, please contact B6 DAM, MS, DACVS IA, DACVS SA as soon as possible. If it is an emergency, contact the emergency service at (508) 887-4623. We have scheduled a recheck for B6 with our Cardiology service on Tuesday, 4/23/19 at 11:30am. Please contact our Cardiology liaison at (508)-887-4696 or email us at cardiovet@tufts.edu if you need to reschedule this appointment, or it you have any non-emergent questions or concerns. You can schedule an appointment with our Nutrition service by calling 508-887-4696. Prescriptive Refit Districtor: For the sofety and well-being of our potients, your pet must have had an examination by one of our veterinarions within the past year in				
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Ordering Food:

Please check with your primary veterinarion 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/veterinory opproval.

Clinical Trials:

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

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Care B6	Owner B6	Discharge Instructions