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**From:** Darcy Adin <dbadin@ncsu.edu>  
**To:** Jones, Jennifer L  
**Sent:** 2/27/2018 3:36:45 AM  
**Subject:** blr0004.1.pdf  
**Attachments:** blr0004.1.pdf

Hi Jennifer,

Here is **B4, B5**

The talk of grain free related DCM is exploding on our list serve. One question people have is related to data collection and I thought I would get your input. Should we as a group:

**B5**

Thanks for your thoughts!  
Darcy

**From:** Freeman, Lisa <Lisa.Freeman@tufts.edu>  
**To:** Jones, Jennifer L; Darcy Adin; Joshua A Stern; Fries, Ryan C [REDACTED] **B5, B6**  
**CC:** Rotstein, David; Norris, Anne; DeLancey, Siobhan; Ceric, Olga  
**Sent:** 4/27/2018 11:26:51 PM  
**Subject:** DCM cases - proposed diet history  
**Attachments:** diet history form 4-27-18 external.doc

Hi everyone

I'm attaching a proposed diet history form. [REDACTED] **B5**

[REDACTED] **B5**

Please let me know if you have any comments – I know this is probably more info than you'd like to collect but hopefully, this could help us identify patterns as well as provide information. [REDACTED] **B5**

[REDACTED] **B5**

Once I get some input from you, I can make into a fillable form so we can send out electronically.

Our group also discussed a [REDACTED] **B5**

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](http://www.petfoodology.org)

**From:** Jones, Jennifer L [mailto:Jennifer.Jones@fda.hhs.gov]  
**Sent:** Friday, April 20, 2018 3:50 PM  
**To:** Darcy Adin <dbadin@ncsu.edu>; Freeman, Lisa <Lisa.Freeman@tufts.edu>; Joshua A Stern <jstern@ucdavis.edu>; Fries, Ryan C <rfries@illinois.edu>; [REDACTED] **B5, B6**  
**Cc:** Rotstein, David <David.Rotstein@fda.hhs.gov>; Norris, Anne <Anne.Norris@fda.hhs.gov>; DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>; Ceric, Olga <Olga.Ceric@fda.hhs.gov>  
**Subject:** RE: hold-call with Dr. Adin re: DCM cases  
**Importance:** High

My apologies for the repeat email. After further internal discussion, in lieu of submitting Consumer Complaints, you can just email me a spreadsheet with the data.

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



**From:** Jones, Jennifer L  
**Sent:** Friday, April 20, 2018 1:19 PM  
**To:** 'Darcy Adin' <dbadin@ncsu.edu>; Freeman, Lisa <lisa.freeman@tufts.edu>; Joshua A Stern <jstern@ucdavis.edu>; Fries, Ryan C <rfries@illinois.edu>; [REDACTED] **B5, B6**  
[REDACTED] **B5, B6**

Cc: Rotstein, David <David.Rotstein@fda.hhs.gov>; Norris, Anne <Anne.Norris@fda.hhs.gov>; DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>; Ceric, Olgica <Olgica.Ceric@fda.hhs.gov>  
Subject: RE: hold-call with Dr. Adin re: DCM cases

Thank you again for joining us on the call and providing the information about your cases. To help us catalogue and potentially act on these adverse events, please file an official consumer complaint. Instructions on how to report a pet food report can be found at: <https://www.fda.gov/AnimalVeterinary/SafetyHealth/ReportaProblem/ucm182403.htm>. The complaint can be submitted through the Safety Reporting Portal: <https://www.safetyreporting.hhs.gov>. You can attach documents already created that compile your case data. We will review the data and may contact you for possible follow-up.

In the meantime, if you have a dog with DCM on a grain free diet that dies or is euthanized, please do not dispose of the animal's body or any remaining food. Please submit an individual consumer complaint for that dog, and mention that you have been instructed to submit the report by Vet-LIRN. We will review the complaint for potential follow-up and may be able to offer a necropsy. I attached a copy of our Vet-LIRN network procedures that describe how we operate. I also included a version for animal owners.

Please email or call me with any questions. Thank you again for your time and expertise,  
Jen

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



From: Darcy Adin [mailto:dbadin@ncsu.edu]

Sent: Thursday, April 19, 2018 11:00 AM

To: Freeman, Lisa <lisa.freeman@tufts.edu>; Joshua A Stern <jstern@ucdavis.edu>; Fries, Ryan C <rfries@illinois.edu>;  
[Redacted] Jones, Jennifer L

[Redacted]  
<Jennifer.Jones@fda.hhs.gov>

Cc: Rotstein, David <David.Rotstein@fda.hhs.gov>; Norris, Anne <Anne.Norris@fda.hhs.gov>; DeLancey, Siobhan <Siobhan.Delancey@fda.hhs.gov>

Subject: Fwd: hold-call with Dr. Adin re: DCM cases

Dear Dr. Jones,

[Redacted]  
**B5**

Drs. [Redacted] Freeman [Redacted] Fries and Stern - the call details are in the forwarded email below.

Just a brief introduction for the FDA group:

[Redacted]  
**B6**

Dr. Lisa Freeman is a Professor of Clinical Nutrition at Tufts University, College of Vet Med

[Redacted]  
**B5, B6**

Dr. Ryan Fries is a Clinical Assistant Professor of Cardiology at Illinois, College of Vet Med

Dr. Josh Stern is an Associate Professor of Cardiology at UC Davis, College of Vet Med

Thank you everyone for making time in your schedule! I am looking forward to this.

Sincerely,

Darcy Adin

----- Forwarded message -----

From: **Jones, Jennifer L** <[Jennifer.Jones@fda.hhs.gov](mailto:Jennifer.Jones@fda.hhs.gov)>

Date: Thu, Apr 19, 2018 at 7:16 AM

Subject: hold-call with Dr. Adin re: DCM cases

To: "Rotstein, David" <[David.Rotstein@fda.hhs.gov](mailto:David.Rotstein@fda.hhs.gov)>, "Norris, Anne" <[Anne.Norris@fda.hhs.gov](mailto:Anne.Norris@fda.hhs.gov)>, "DeLancey, Siobhan" <[Siobhan.Delancey@fda.hhs.gov](mailto:Siobhan.Delancey@fda.hhs.gov)>, Darcy Adin <[dbadin@ncsu.edu](mailto:dbadin@ncsu.edu)>

-- Do not delete or change any of the following text. --

### Join WebEx meeting

Meeting number (access code) **B6**  
Meeting password: **B6**

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**B6** US Toll  
US Toll Free

[Global call-in numbers](#) | [Toll-free calling restrictions](#)

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If you are a host, [go here](#) to view host information.

IMPORTANT NOTICE: Please note that this WebEx service allows audio and other information sent during the session to be recorded, which may be discoverable in a legal matter. By joining this session, you automatically consent to such recordings. If you do not consent to being recorded, discuss your concerns with the host or do not join the session.

--

Darcy B. Adin, DVM, DACVIM (Cardiology)  
Clinical Assistant Professor of Cardiology  
North Carolina State University  
NC State Veterinary Hospital  
1060 William Moore Drive  
Raleigh, NC 27607  
919-513-6032

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; **B6**  
**Sent:** 8/5/2018 1:32:12 AM  
**Subject:** Acana Pork and Squash; **B6** EON-361371  
**Attachments:** 2053236-report.pdf

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

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

Below is the summary of the report:

**EON Key:** EON-361371  
**ICSR #:** 2053236  
**EON Title:** PFR Event created for Acana Pork and Squash; 2053236

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

**Product information**

**Individual Case Safety Report Number:** 2053236

**Product Group:** Pet Food

**Product Name:** Acana Pork and Squash

**Description:** This is not an event that suddenly occurred. My dog was diagnosed with dilated cardiomyopathy at 2 years old. I enrolled him in the taurine deficient study done by Dr. Joshua Stern at UC Davis. He was eating Acana Pork & Squash since he was a puppy. His taurine was tested (4-18) and his whole blood is 135 and plasma 28. Since his taurine level is low, I was told to supplement him with taurine and take him off the current dog food. I was told his food could cause taurine deficient dilated cardiomyopathy. He will be re-tested in the upcoming months. It is not know at this time if the dog food contributed to his disease or caused it. The study is still on going.

**Submission Type:** Initial

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

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

**Number of Animals Treated With Product:** 2

**Number of Animals Reacted With Product:** 1

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

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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

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

**Report Details - EON-361371**

<b>ICSR:</b>	2053236		
<b>Type Of Submission:</b>	Initial		
<b>Report Version:</b>	FPSR.FDA.PETF.V.V1		
<b>Type Of Report:</b>	Adverse Event (a symptom, reaction or disease associated with the product)		
<b>Reporting Type:</b>	Voluntary		
<b>Report Submission Date:</b>	2018-08-04 21:25:50 EDT		
<b>Reporter is the Animal Owner:</b>	Yes		
<b>Reported Problem:</b>	<b>Problem Description:</b>	This is not an event that suddenly occurred. My dog was diagnosed with dilated cardiomyopathy at 2 years old. I enrolled him in the taurine deficient study done by Dr. Joshua Stern at UC Davis. He was eating Acana Pork & Squash since he was a puppy. His taurine was tested (4-18) and his whole blood is 135 and plasma 28. Since his taurine level is low, I was told to supplement him with taurine and take him off the current dog food. I was told his food could cause taurine deficient dilated cardiomyopathy. He will be re-tested in the upcoming months. It is not know at this time if the dog food contributed to his disease or caused it. The study is still on going.	
	<b>Date Problem Started:</b>	04/12/2016	
	<b>Concurrent Medical Problem:</b>	No	
	<b>Outcome to Date:</b>	Unknown	
<b>Product Information:</b>	<b>Product Name:</b>	Acana Pork and Squash	
	<b>Product Type:</b>	Pet Food	
	<b>Lot Number:</b>		
	<b>Package Type:</b>	BAG	
	<b>Package Size:</b>	25 Pound	
	<b>Purchase Date:</b>	05/29/2018	
	<b>Number Purchased:</b>	1	
	<b>Possess Unopened Product:</b>	No	
	<b>Possess Opened Product:</b>	No	
	<b>Storage Conditions:</b>	The product is stored in it's original bag and then placed in a air tight container.	
	<b>Product Use Information:</b>	<b>Description:</b>	The product was feed 2xs per day.
		<b>Last Exposure Date:</b>	07/15/2018
		<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes
		<b>Adverse Event Abate After Product Stop:</b>	Unknown
<b>Product Use Started Again:</b>		No	
<b>Perceived Relatedness to Adverse Event:</b>		Possibly related	
<b>Other Foods or Products Given to the Animal During This Time Period:</b>		Yes	
<b>Manufacturer /Distributor Information:</b>			

	<b>Purchase Location Information:</b>	<b>Name:</b>	Pet Valu	
		<b>Address:</b>	<b>B6</b> United States	
<b>Animal Information:</b>	<b>Name:</b>	<b>B6</b>		
	<b>Type Of Species:</b>	Dog		
	<b>Type Of Breed:</b>	Retriever - Golden		
	<b>Gender:</b>	Male		
	<b>Reproductive Status:</b>	Neutered		
	<b>Weight:</b>	67 Pound		
	<b>Age:</b>	4 Years		
	<b>Assessment of Prior Health:</b>	Excellent		
	<b>Number of Animals Given the Product:</b>	2		
	<b>Number of Animals Reacted:</b>	1		
	<b>Owner Information:</b>			
	<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	<b>B6</b>	
		<b>Contact:</b>	<b>Name:</b>	<b>B6</b>
			<b>Phone:</b>	<b>B6</b>
<b>Address:</b>		<b>B6</b> United States		
<b>Type of Veterinarian:</b>		Referred veterinarian		
<b>Date First Seen:</b>		04/19/2016		
<b>Permission to Release Records to FDA:</b>	Yes			
<b>Sender Information:</b>	<b>Name:</b>	<b>B6</b>		
	<b>Address:</b>	<b>B6</b> United States		
	<b>Contact:</b>	<b>Phone:</b>	<b>B6</b>	
		<b>Email:</b>	<b>B6</b>	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			
<b>Reported to Other Parties:</b>	Store/Place of Purchase Manufacturer			
<b>Additional Documents:</b>				



**Report Details - EON-36777**

ICSR:	2055744
Type Of Submission:	Initial
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Both
Reporting Type:	Voluntary
Report Submission Date:	2018-10-06 21:13:52 EDT
Reporter is the Animal Owner:	Yes

<b>Reported Problem:</b>	<b>Problem Description:</b>	He was fine up until approximately [ B6 ] when he developed a cough. He was taken to the emergency vet and was diagnosed with Kennel Cough, which was a misdiagnosis. On [ B6 ] he was seen by his vet, [ B6 ] in [ B6 ] where they performed Chest X-ray and bloodwork and it was determined that [ B6 ] heart was enlarged and he was in Congestive Heart Failure. He was given a shot of Lasix, and placed on 3 medications and I was told he should be seen by a cardiologist. On [ B6 ] his symptoms worsened and he was take. Back to the Emergency Vet Hospital and was kept over night. On [ B6 ] he saw [ B4, B6 ] Vet Cardiologist, underwent a history and an echocardiogram where he was Diagnosed with Dilated Cardiomyopathy and the vet reported that he believed it was related to the grain free diet. He kept him in the hospital in [ B4, B6 ] overnight for treatment and oxygen. He encouraged me to buy Taurine and L-Carnitine and bring up the next day. The next morning, [ B6 ] [ B6 ] was worse and they recommended transferring to the ICU at [ B4, B6 ] On [ B6 ] despite all efforts, [ B6 ] was euthanized as he was not responding to treatments.
	<b>Date Problem Started:</b>	[ B6 ]
	<b>Concurrent Medical Problem:</b>	Yes
	<b>Pre Existing Conditions:</b>	He has seasonal and indoor allergies and was on Apoquel and Allergy injections. He may have had food allergies. He was placed on the grain free food 3-4 years ago. He was health and active. He was on ACANA SINGLES LIMITED INGREDIENT LAMB AMD APPLE AND SOMETIMES DUCK AND PEAR FOR THE PAST 3-4 YEARS EXCLUSIVELY.
	<b>Outcome to Date:</b>	Died Euthanized
	<b>Date of Death:</b>	[ B6 ]

<b>Product Information:</b>	<b>Product Name:</b>	Acana Singles Limited Ingredient Lamb and Apple 25 pound bag
	<b>Product Type:</b>	Pet Food
	<b>Lot Number:</b>	
	<b>Package Type:</b>	BAG
	<b>Package Size:</b>	25 Pound
	<b>Purchase Date:</b>	07/25/2018
	<b>Number Purchased:</b>	1
	<b>Possess Unopened Product:</b>	No
	<b>Possess Opened Product:</b>	Yes
	<b>Storage Conditions:</b>	The product was stored in an airtight and waterproof container in the basement. A weeks worth of food was put in an airtight container on the kitchen.
<b>Product Use Information:</b>	<b>Description:</b>	[ B6 ] ate 1 1/4 cup divided into two meals per day.
	<b>Last Exposure Date:</b>	[ B6 ]
	<b>Time Interval between Product Use and Adverse Event:</b>	4 Years
	<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes

		<b>Adverse Event Abate After Product Stop:</b>	Not Applicable
		<b>Product Use Started Again:</b>	No
		<b>Perceived Relatedness to Adverse Event:</b>	Definitely related
		<b>Other Foods or Products Given to the Animal During This Time Period:</b>	No
	<b>Manufacturer /Distributor Information:</b>		
	<b>Purchase Location Information:</b>	<b>Name:</b>	Perflow.com
		<b>Address:</b>	United States
<b>Animal Information:</b>	<b>Name:</b>	B6	
	<b>Type Of Species:</b>	Dog	
	<b>Type Of Breed:</b>	Spaniel - Cocker American	
	<b>Gender:</b>	Male	
	<b>Reproductive Status:</b>	Neutered	
	<b>Weight:</b>	28 Pound	
	<b>Age:</b>	5 Years	
	<b>Assessment of Prior Health:</b>	Excellent	
	<b>Number of Animals Given the Product:</b>	1	
	<b>Number of Animals Reacted:</b>	1	
	<b>Owner Information:</b>		
	<b>Healthcare Professional Information:</b>		
<b>Sender Information:</b>	<b>Name:</b>	B6	
	<b>Address:</b>	B6 United States	
	<b>Contact:</b>	<b>Phone:</b>	B6
		<b>Other Phone:</b>	B6
		<b>Email:</b>	B6
	<b>Permission To Contact Sender:</b>	Yes	
	<b>Preferred Method Of Contact:</b>	Phone	
	<b>Reported to Other Parties:</b>	Other	
<b>Additional Documents:</b>			

---

**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 10/26/2018 12:30:01 PM  
**Subject:** DCM cases 10/26/2018 0827  
**Attachments:** Blue Wilderness: [B6] - EON-369415; Nov 2015-Nov 2017: Nature's Variety Instinct Limited Ingredient Lamb-Nov 2017- Aug 2018: Blue Buffalo Basics Grain Free-Aug 2018-Oct 2018: American Journey Lamb and Sweet Potato: [B6] - EON-369375; taste of the wild grain free pacific stream-taste of the wild prey trout limited ingredients: [B6] - EON-369346; Taste of the Wild High Prairie: Lisa Freeman - EON-369325; WELLNESS CORE GRAIN FREE: [B6] - EON-369373

David Rotstein, DVM, MPVM, Dipl. ACVP  
CVM Vet-LIRN Liaison  
CVM OSC/DC/CERT  
7519 Standish Place  
[B6] (BB)



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**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6] .com  
**Sent:** 10/26/2018 11:32:24 AM  
**Subject:** Blue Wilderness; [B6] - EON-369415  
**Attachments:** 2058021-report.pdf

A PFR Report has been received and PFR Event [EON-369415] has been created in the EON System.

A "PDF" report by name "2058021-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-369415

**ICSR #:** 2058021

**EON Title:** PFR Event created for Blue Wilderness; 2058021

<b>AE Date</b>	01/01/2016	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Died Euthanized
<b>Breed</b>	Retriever - Labrador		
<b>Age</b>	11 Years		
<b>District Involved</b>	PFR; [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2058021

**Product Group:** Pet Food

**Product Name:** Blue Wilderness

**Description:** When the dog was 9 years old she started limping periodically. Had some gas. I looked for a grain free, soy free food with glucosamine. We decided on Blue Wilderness. In two years the dog had to be Euthanized for a enlarged heart/congestive heart failure.

**Submission Type:** Initial

**Report Type:** Both

**Outcome of reaction/event at the time of last observation:** Died Euthanized

**Number of Animals Treated With Product:** 1

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
Blue Wilderness		

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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Report Details - EON-369415	
ICSR:	2058021
Type Of Submission:	Initial
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Both
Reporting Type:	Voluntary
Report Submission Date:	2018-10-26 07:25:05 EDT
Reporter is the Animal Owner:	Yes
Reported Problem:	<b>Problem Description:</b> When the dog was 9 years old she started limping periodically. Had some gas. I looked for a grain free, soy free food with glucosamine. We decided on Blue Wilderness. In two years the dog had to be Euthanized for a enlarged heart /congestive heart failure.
	<b>Date Problem Started:</b> 01/01/2016
	<b>Concurrent Medical Problem:</b> Unknown
	<b>Outcome to Date:</b> Died Euthanized
	<b>Date of Death:</b> B6
Product Information:	<b>Product Name:</b> Blue Wilderness
	<b>Product Type:</b> Pet Food
	<b>Lot Number:</b>
	<b>Package Type:</b> BOX
	<b>Package Size:</b> 35 Pound
	<b>Possess Unopened Product:</b> No
	<b>Possess Opened Product:</b> No
	<b>Storage Conditions:</b> Dog food container
	<b>Product Use Information:</b> <b>Description:</b> Fed 2x's per day total of 4 cups
	<b>Perceived Relatedness to Adverse Event:</b> Probably related
<b>Manufacturer /Distributor Information:</b>	
<b>Purchase Location Information:</b>	
Animal Information:	<b>Name:</b> B6
	<b>Type Of Species:</b> Dog
	<b>Type Of Breed:</b> Retriever - Labrador
	<b>Gender:</b> Female
	<b>Reproductive Status:</b> Neutered
	<b>Weight:</b> 70 Pound
	<b>Age:</b> 11 Years
	<b>Assessment of Prior Health:</b> Good
	<b>Number of Animals Given the Product:</b> 1
	<b>Number of Animals Reacted:</b> 1
<b>Owner Information:</b>	
<b>Healthcare Professional Information:</b>	
Sender Information:	<b>Name:</b> B6

	<b>Address:</b>	<div style="border: 1px dashed black; padding: 5px; display: inline-block; font-size: 2em; font-weight: bold;">B6</div> United States	
	<b>Contact:</b>	<b>Phone:</b>	<div style="border: 1px dashed black; padding: 2px;">B6</div>
		<b>Email:</b>	<div style="border: 1px dashed black; padding: 2px;">B6</div>
	<b>Reporter Wants to Remain Anonymous:</b>	No	
	<b>Permission To Contact Sender:</b>	Yes	
	<b>Preferred Method Of Contact:</b>	Email	
<b>Reported to Other Parties:</b>	None		

**Additional Documents:**

---

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6] com  
**Sent:** 10/25/2018 8:01:06 PM  
**Subject:** Nov 2015-Nov 2017: Nature's Variety Instinct Limited Ingredient Lamb-Nov 2017- Aug 2018: Blue Buffalo Basics Grain Free-Aug 2018-Oct 2018: American Journey Lamb and Sweet Potato [B6] - EON-369375  
**Attachments:** 2057993-report.pdf; 2057993-attachments.zip

A PFR Report has been received and PFR Event [EON-369375] has been created in the EON System.

A "PDF" report by name "2057993-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 "2057993-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-369375

**ICSR #:** 2057993

**EON Title:** PFR Event created for Nov 2015-Nov 2017: Nature's Variety Instinct Limited Ingredient Lamb Nov 2017- Aug 2018: Blue Buffalo Basics Grain Free Aug 2018-Oct 2018: American Journey Lamb and Sweet Potato; 2057993

<b>AE Date</b>	10/02/2018	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Mixed (Dog)		
<b>Age</b>	4 Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2057993

**Product Group:** Pet Food

**Product Name:** Nov 2015-Nov 2017: Nature's Variety Instinct Limited Ingredient Lamb Nov 2017- Aug 2018: Blue Buffalo Basics Grain Free Aug 2018-Oct 2018: American Journey Lamb and Sweet Potato

**Description:** 02 Oct 2018 - presented for routine exam. A new grade II/VI murmur was noted. 13 Oct 2018 -



presented to a different veterinarian for 2nd opinion for the heart murmur. Chest rads revealed cardiomegaly but no signs of heart failure. A limited cardiac ultrasound revealed dilatation of all 4 heart chambers with poor myocardial contractility. Suspected grain free diet DCM. Changed diet to Purina Pro Plan Lamb and Rice. Rx: L-Carnitine 1 g BID, Taurine 500 mg BID and referred to **B6** for further work up. 17 Oct 2018: Grade II/VI left apical systolic murmur ausculted; no arrhythmias. Echocardiogram revealed mildly dilated left and right atria, moderately dilated left ventricle, decreased LV systolic function. Elevated left filling pressures based on doppler. Blood pressure, thyroid panel, platelet count and troponin levels all normal. Blood submitted for taurine level sent to **B6** still pending 25 Oct 2018. Diagnosis: Dilated Cardiomyopathy.

**Submission Type:** Initial

**Report Type:** Both

**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
Nov 2015-Nov 2017: Nature's Variety Instinct Limited Ingredient Lamb Nov 2017- Aug 2018: Blue Buffalo Basics Grain Free Aug 2018-Oct 2018: American Journey Lamb and Sweet Potato		

**Sender information**

**B6**

USA

**Owner information**

**B6**

USA

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

**B6**

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

**B6**

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

information pursuant to your signed Acceptance of Commission.

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

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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](mailto:FDAREportableFoods@fda.hhs.gov) immediately.

**Report Details - EON-369375**

ICSR: 2057993  
 Type Of Submission: Initial  
 Report Version: FPSR.FDA.PETF.V.V1  
 Type Of Report: Both  
 Reporting Type: Voluntary  
 Report Submission Date: 2018-10-25 15:47:25 EDT

**Reported Problem:**

**Problem Description:** 02 Oct 2018 - presented for routine exam. A new grade II/VI murmur was noted. 13 Oct 2018 - presented to a different veterinarian for 2nd opinion for the heart murmur. Chest rads revealed cardiomegaly but no signs of heart failure. A limited cardiac ultrasound revealed dilatation of all 4 heart chambers with poor myocardial contractility. Suspected grain free diet DCM. Changed diet to Purina Pro Plan Lamb and Rice. Rx: L-Carnitine 1 g BID, Taurine 500 mg BID and referred to [B6] for further work up. 17 Oct 2018: Grade II/VI left apical systolic murmur ausculted; no arrhythmias. Echocardiogram revealed mildly dilated left and right atria, moderately dilated left ventricle, decreased LV systolic function. Elevated left filling pressures based on doppler. Blood pressure, thyroid panel, platelet count and troponin levels all normal. Blood submitted for taurine level sent to [B6] still pending 25 Oct 2018. Diagnosis: Dilated Cardiomyopathy.

**Date Problem Started:** 10/02/2018

**Concurrent Medical Problem:** No

**Outcome to Date:** Stable

**Product Information:**

**Product Name:** Nov 2015-Nov 2017: Nature's Variety Instinct Limited Ingredient Lamb Nov 2017-Aug 2018: Blue Buffalo Basics Grain Free Aug 2018-Oct 2018: American Journey Lamb and Sweet Potato

**Product Type:** Pet Food

**Lot Number:**

**Package Type:** BAG

**Package Size:** 14 Pound

**Possess Unopened Product:** No

**Possess Opened Product:** Yes

**Storage Conditions:** Room temperature in kitchen pantry

**Product Use Information:**

<b>Description:</b>	Oral administration
<b>Perceived Relatedness to Adverse Event:</b>	Probably related

**Manufacturer /Distributor Information:**

**Purchase Location Information:**

**Animal Information:**

**Name:** [B6]

**Type Of Species:** Dog

**Type Of Breed:** Mixed (Dog)

**Gender:** Female

**Reproductive Status:** Neutered

**Weight:** 15.9 Kilogram

**Age:** 4 Years

**Assessment of Prior Health:** Excellent

**Number of Animals Given the Product:** 1

	<b>Number of Animals Reacted:</b>	1		
	<b>Owner Information:</b>	<b>Owner Information provided:</b>	Yes	
		<b>Contact:</b>	<b>Name:</b>	B6
			<b>Phone:</b>	B6
<b>Email:</b>	B6			
	<b>Address:</b>	<div style="border: 1px dashed black; padding: 5px; text-align: center;"> <h1>B6</h1> </div> United States		
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	B6		
	<b>Contact:</b>	<b>Name:</b>	B6	
		<b>Phone:</b>	B6	
	<b>Type of Veterinarian:</b>	Primary/regular veterinarian		
<b>Permission to Release Records to FDA:</b>	Yes			
<b>Sender Information:</b>	<b>Name:</b>	B6		
	<b>Address:</b>	<div style="border: 1px dashed black; padding: 5px; text-align: center;"> <h1>B6</h1> </div> United States		
	<b>Contact:</b>	<b>Phone:</b>	B6	
		<b>Email:</b>	B6	
	<b>Reporter Wants to Remain Anonymous:</b>	No		
	<b>Permission To Contact Sender:</b>	Yes		
	<b>Preferred Method Of Contact:</b>	Email		
<b>Reported to Other Parties:</b>	None			
<b>Additional Documents:</b>	<b>Attachment:</b>	B6 10.21.2018.pdf		
	<b>Description:</b>	All medical records		
	<b>Type:</b>	Medical Records		

Fax: Admin  
Fax: Referral

**B4, B6** **B4, B6**

Small Animal **B6**  
Large Animal **B6**

Discharge Comments

<b>Client</b> <b>B6</b>	<b>Patient</b> <b>B6</b> MIXED BREED DOG FS BLACK & TAN CANINE	Case # <b>B6</b>  15.9kg	Attending DVM <b>B6</b> Student Discharging DVM <b>B6</b> Referring DVM <b>B6</b>
----------------------------	---	--------------------------------	--

Admission Date/Time: **B6** 08:41 AM Discharge Date/Time: **B6** 01:35 PM Discharge Status: UNDETERM NED

CASE SUMMARY

DIAGNOSIS:

1. Dilated cardiomyopathy (DCM): rule out diet induced vs hypothyroidism vs primary (idiopathic)

HISTORY:

**B6** is an approximately 4 year old female spayed mixed breed dog who was presented to **B6** Cardiology on **B6** for evaluation of a new heart murmur and suspected dilated cardiomyopathy.

**B6** was presented to **B6** on 10/2/18 for a wellness exam and annual bloodwork, and a new II/VI left apical systolic murmur was noted on physical exam. **B6** CBC showed mild thrombocytopenia (121k on automated count), and no abnormalities on serum chemistry. **B6** was then presented to **B6** on 10/13/18 for a reevaluation of her murmur. Chest radiographs revealed generalized moderate to severe cardiomegaly with normal pulmonary vasculature and lung fields. A limited ultrasound of the heart reportedly revealed dilation of all four heart chambers with poor myocardial contractility. **B6** was then referred to **B6** Cardiology for suspected grain-free diet related DCM. Her diet was switched to Purina ProPlan dry kibble and she was started on taurine (500 mg PO BID) and L-carnitine supplementation (1g PO BID). For the last 3 months, **B6** has had an occasional single dry, non-productive cough once weekly when playing with her puppy housemate. **B6** has not experienced any lethargy, decreased appetite, exercise intolerance, respiratory distress or fainting. **B6** resting respiratory rate has been between 13 to 24 breaths per minute since 10/13/18.

**B6** was adopted from a shelter in **B6** three years ago and was estimated to be one year old at that time. **B6** experienced diarrhea and vomiting in the first 2 months after adoption and was started on a grain-free, chicken-free diet. **B6** diarrhea and vomiting resolved after the diet switch. Her diet history is as follows: Nature's Variety Instinct Limited Ingredient Lamb (11/2015 - 11/2017); Blue Buffalo Turkey + Potato or Lamb + Potato (11/2017 - 8/2018); American Journey Lamb + Sweet Potato Limited Ingredient Grain-Free (8/2018 - 10/2018). **B6** has had no other significant medical history since adoption and is not on any prescription medications. She is eating, drinking, urinating and defecating normally and has had no episodes of vomiting. **B6** is on Heartgard and Nexgard parasite prevention and up to date on all vaccines.

Current Diet: Purina Pro Plan Adult Lamb and Rice - dry kibble

Current Medications: None

Current Supplements: Taurine 500mg q12hr (GMC brand tablets), L-carnitine 1000mg q12hr (GMC brand tablets)

PHYSICAL EXAM FINDINGS:

**B6**

RESULTS OF DIAGNOSTIC TESTS:

**B6**

**B6**

PENDING DIAGNOSTIC TESTS:

**B6**

ASSESSMENT:

Thank you for entrusting us with **B6** care today. Today, **B6** was diagnosed with dilated cardiomyopathy (DCM). DCM is a disease that affects the muscle of the heart and causes a decrease in the contractility (pumping ability) of the heart. Because the heart is unable to pump with enough force to move blood adequately forward into circulation, a volume overload occurs and the heart dilates to accommodate it. Subsequently, the chambers of the heart become enlarged and the mitral valve leaflets are pulled slightly apart, resulting in back-flow of blood (mitral regurgitation) and the heart murmur ausculted on **B6** physical exam. **B6** echocardiogram today showed mild to moderate dilation of her heart chambers, mild mitral valve regurgitation and mild to moderately diminished pumping ability of her heart.

While the exact mechanism of DCM is currently unknown, dietary deficiencies in the amino acids taurine and carnitine, genetics, infectious and inflammatory conditions, and toxins have all been linked to DCM. Since **B6** is an atypical breed to develop primary (hereditary) DCM and has been on a grain-free diet for the last 3 years, we are concerned for a possible diet associated DCM. This is a diagnosis of exclusion, so to rule out other causes, blood was drawn today for a troponin level and for thyroid testing. Troponin is a biomarker for damage to the muscle of the heart and is elevated in cases of myocarditis, which can be caused by many things including infectious or inflammatory disease. **B6** troponin level was normal, so an infectious or inflammatory cause of her DCM is unlikely. Thyroid testing was also submitted today, as hypothyroidism can be another cause of DCM.

There has been recent unpublished data suggesting a link between some grain-free diets and cardiomyopathy. Although some of these cases seem related to taurine/carnitine deficiency, others do not, and the reason for this link is not yet clear. Although the mechanism has not been confirmed, one hypothesis is that phytic acid, produced by legumes and lentils (common ingredients in grain-free diets) decreases the absorption of taurine and other essential nutrients from the intestines into the bloodstream. Some animals will show reversibility of their heart disease with supplementation of taurine and carnitine and initiation of a grain-containing diet.

**B6**

INSTRUCTIONS FOR CARE

**B6**

# B4, B6

Owner/Agent

**B4, B6**

**B6**

Clinicians:

Clinical Technicians:

Client Services:

**B4, B6**

**B4, B6**

**B4, B6**

Research Technician

**B4, B6**

In order to help expedite medication refills, please visit us online at [B4, B6](#) and select Pet Owners, Pharmacy Refills.

MIXED BREE

# B6

**B4, B6**

**B4, B6**

**B6**

CANINE

23, FS

**B6**

MIXED BREED DOG

MIXED BREE

**B6**

BLACK & TA

113791

**B6**

**B6**

**CARDIOLOGY SERVICE**  
**Patient Discharge Instructions**

Admission date: **Wednesday, October 17, 2018**

**Reason for visit:** Murmur evaluation, suspect dilated cardiomyopathy (DCM)

**Diagnosis/Problem:** Dilated cardiomyopathy, suspect diet related

**Treatments and diagnostic tests performed:** Troponin level (pending), taurine level (pending), T4/TSH (pending), platelet count, echocardiogram

**Medications:**

**B6**

**Instructions for care:** Continue to monitor **B6** for increased respiratory rate and effort, exercise intolerance, fainting, lethargy, decreased appetite, coughing, and abdominal distension. If you note any of these signs, **B6** should be evaluated by a veterinarian immediately. Continue to monitor **B6** resting respiratory rate by counting her number of breaths per minute while she is laying down or sleeping. A normal resting respiratory rate for a dog is less than 30-40 breaths per minute.

**Plan for next evaluation:** Please schedule an appointment with **B4, B6** Cardiology in 3 months by calling **B4, B6**

**B4, B6**

**B4, B6**

**B4, B6**

Thank you for allowing us to care for you and your pet. If you have any questions or concerns, please do not hesitate to call the **B4, B6** Cardiology Service at **B4, B6**. For prescription refills **B6**.

- Owner requests full report (Full Summary Automatically Sent To Primary DVM)
- This is the full report to be sent to the primary DVM

Faculty:

**B4, B6**

Residents:

**B4, B6**

Research Technician:

**B4, B6**

Clinical Technicians

**B4, B6**

Client Services

**B4, B6**



**B4, B6**

**B4, B6**

REPORT OF LABORATORY EXAMINATION

Client:

**B6**

Owner:

**B6**

Rcvd Date: 10/18/2018 4:31:00 PM  
Admitted By: Not Provided  
Ordered By: N/A  
Encounter: 02540503  
CR#: AP

Animal: **B6**  
Species: Canine  
Age: 3 years  
Tag/Reg ID:  
Other ID:

MRN: **B6**  
Breed: Dog Mixed Breed  
Gender: Female, Spayed

**Endocrinology**

**Endocrine Results**

Collected Date/Time (If Provided) 10/17/2018 16:39:00

Procedure	Ref Range	Units
<b>B6</b>	[11-60]	nmol/L
	10.8-2.1	nmol/L
	[9-39]	pmol/L
	[0-20]	%
	[0-10]	%
	[0.00-0.58]	ng/mL
	[0-35]	%
	Endocrinology Interpretation	See Below

**B6**

L = Low Result; H = High Result; @ = Critical Result; ^ = Corrected Result; \* = Interpretive Data; # = Result Footnote

**B4, B6**

**Cardiology Pet Diet History**

231020  
CANINE  
FS

**B6**

MIXED BREED DOG  
12/24/14 BLACK & TA  
113791

MIXED BREE

Date: 10/16/18

**B6**

**B6**

**Current diet:**

Brand American Journey Lamb & Sweet Potato

Variety Limited Ingredient Grain-Free

Is this diet Grain-free? Yes

How long has your pet eaten this food? 3 months (Aug 18 - Oct 18)

Are there other pets in your house eating this food? Yes, puppy version for 5 mo. Goldendoodle, **B6**

**Other diets eaten in the last 3 years and dates:**

(Nov 17 - Aug 18) Blue Buffalo - different versions of basic, lifesource & freedom (mostly basics) <sup>Turkey + Potato  
Lamb + Potato</sup>

(Nov 15 - Nov 17) Nature's Variety Instinct Limited Ingredient Lamb

- First 2 months after adoption tried 2 or 3 foods that caused major diarrhea & vomiting so claimed allergic to chicken and started on grain-free, chicken-free diet. No more D or V.

**Other food (treats, rawhides, table food):**

No rawhides. Not too many treats. Occasional table food (rare).

Have given Better Belly chews, dental chews (milk bone, Pentastix, Nylabone NutriDent)

**Supplements (e.g. fish oil, CoQ10, vitamins etc)**

↳ all very few and far between.

None -

B4, B6

B4, B6

10/17 @ 9:00

#123919

Cardiology-Consult

1 message

RADSINEMAIL

Sat, Oct 13, 2018 at 2:29 PM

B4, B6

Consult Request <

B6

To:

B4, B6

B4, B6

B4, B6

\*\*\*Automated message. Do not reply to sender, see below for clinic/client e-mail.\*\*\*

What is your preferred contact method?:

By Phone

Best hours to contact:

M T W F 8a-6p

Veterinarian to contact:

B6

Clinic/Hospital:

B6

Clinic Phone Number:

B6

Clinic Email:

B6

Name of the owner (First/Last):

B6

Owner Phone:

B6

Owner Email:

B6

Has this patient ever been seen by any service at NC State Veterinary Hospital?:

No

Patient/Pet Name:

B6

Species:

canine

Date of Birth or Age:

B6

Breed:

mixed breed

Weight:

35.7lbs

Color:

black/tan

Gender:

FS

Pertinent medical history:

Would like referral for echocardiogram at B6 ASAP- suspect grain-free diet related DCM. Client amenable to referral. On grain free diet past 3-4 years. New heart murmur first noted last week at a different veterinary office. Seen today by our hospital first time for second opinion. Grade 2-3/6 L systolic murmur, NSR. Respiratory: WNL, no crackles/wheezes. Eupnic. Does not appear to be in CHF. Not currently on any medications aside from Nexguard and Heartguard. Advised Taurine 500mg PO BID and L carnitine- 1gram PO BID and change to diet containing grains while awaiting echo. Discussed monitoring for signs of impending CHF and when to seek emergency care.

Questions you would like addressed:

Chest rads- Generalized moderate to severe cardiomegaly. Lungs appear WNL. Brief cardiac US (by me)- All 4 chambers appear subjectively enlarged/dilated. Myocardium appears subjectively thin with POOR contractility. No pericardial effusion detected. Suspect DCM.

Red slot 11/14

10/17 9AM ~~11PM~~

3 branches - of late. Am journey Salm + SwPot

16.2 kgf

Patient History Report **B6** 10/15/2018

Clinic:

**B6**

**B6**

Client:

**B6**

Home Phone: **B6**

Work Phone: **B6** kcell

ID: **B6** File # 386

Patient: **B6**

ID: **B6**

Tag:

Species: Canine, Mixed breed

Sex: female/spayed

Age: 4 yrs, DOB: **B6**

Weight: 35.7 Lbs

Color: Black/tan markings

Last visit: 10/13/2018

Referred By:

Tel / Fax:

Medical Record Entries:

10/15/2018

Referral - SW **B6** fit into redslot- 1 month

-save diet and bring it in to appointment. CHange diet to one with grain in it

Taurine- 40mg/kg 640mg/day (250 and 500ok too)

L-carnitine- ???

does O need to call ( **B6** )

10/15/2018

See Attachments - Blood Work Downtown **B6** Animal Hospital ( **B6** )

10/13/2018

Consultation with specialist - Sent to **B6** Cardiology:

Would like referral for echocardiogram at **B6** ASAP- suspect grain-free diet related DCM. Client amenable to referral. On grain free diet past 3-4 years. New heart murmur first noted last week at a different veterinary office. Seen today by our hospital first time for second opinion. Grade 2-3/6 L systolic murmur, NSR. Respiratory: WNL, no crackles/wheezes. Eupnic. Does not appear to be in CHF. Not currently on any medications aside from Nexguard and Heartguard. Advised Taurine 500mg PO BID and L carnitine- 1gram PO BID and change to diet containing grains while awaiting echo. Discussed monitoring for signs of impending CHF and when to seek emergency care.

Chest rads- Generalized moderate to severe cardiomegaly. Lungs appear WNL.

Brief cardiac US (by me)- All 4 chambers appear subjectively enlarged/dilated.

Myocardium appears subjectively thin with POOR contractility. No pericardial effusion detected. Suspect DCM.

Bloodwork performed recently by another vet hospital- WNL per owner (Copies unavailable today- Saturday).

- Earliest appointment client can be seen?

- Additional medications or changes in dosages of supplements to prevent CHF while awaiting referral?

-Rads and video of cardiac US will be sent by email on Monday (when support staff available).

**B6**

10/13/2018

Ultrasound Consult Fee - Cardiac US- All 4 chambers appear subjectively

enlarged/dilated. Myocardium appears subjectively thin with poor contractility. No pericardial effusion detected. Suspect DCM [B6]

10/13/2018

**Radiographs-Two Views** - 3 view thorax- Generalized moderate to severe cardiomegaly. Lungs appear WNL. Suspect DCM [B6]

10/13/2018

**Weight in lbs.** - (35.7) [B6]

10/13/2018

**Examination/Office Call** - [B6]

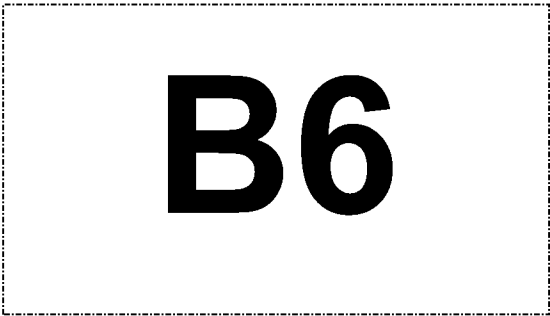
Chief Complaint: second opinion, heart murmur

History: 2nd opinion- heart murmur. Adopted approx. 3 years ago, think she was around 9 months at time of adoption. Pretty healthy past few months- had diarrhea occasionally in first year, improved once she eliminated chicken and grains from the diet. 1 week ago- diagnosed with a heart murmur for the first time at [B6] Prior to that, has been to multiple vets and they have never mentioned a heart murmur.

Occasionally coughs, mostly when excited (when pulling on the leash/collar, but also sometimes when playing off leash).

Diet- American Journey Salmon and sweet potato (grain free). Has always been on a grain-free diet.

On Heartguard and Nexguard, O gives every month, regularly.



MIXED BREED

From

Mon Oct 15 07:30:37 2018 MST

B4, B6

B4, B6

SCANNED

B6

B6

Acct Number:

Address:

B6

Phone:

Cell Phone:

ext: Outstanding Balance: \$ \$

Medical Alert:

Sex: FS

DOB: B6

Species: Canine

Weight: 35.6lbs

Breed: Lab Mix

<u>Problem (s)</u>	<u>Date</u>	<u>Diagnoses</u>	<u>Date</u>	<u>Vaccine Name</u>	<u>Date Due</u>
<p>B6</p>					

10/03/2018

Note

Records transferred to

B6

Provider:

B6

10/02/2018

Service

CET HEXtra Premium Chews Med. QTY: 1  
Dog 30-Ct

Provider: Hospital Personnel

10/02/2018

LINK

New Client Form

10/02/2018

Service

Junior Wellness - Comprehensive Profile QTY: 1

Provider:

B6

10/02/2018

Service

CBC (Complete Blood Count) QTY: 1

Provider:

B6

B6

MIXED BREE

B6

B6

10/02/2018

SOAP

Wellness Visit

Provider:

B6

S: Presenting Complaint: B6 is here for a wellness exam. Current on vaccines, no concerns, E/D ok, no V/D

Medications received: None

Preventatives received: Nexgard and Heartgard

Diet: American Journey

O: Weight- 35.6 lbs

PHYSICAL EXAM

B6

B6

MIXED BREED

DIAGNOSTICS  
CBC/Chem: NSF

A: healthy pet, murmur very mild and not a concern at this time

P: dental cleaning will be important for maintaining heart health

10/02/2018

Lab Value

Temperature: = 101.20

10/02/2018

Service

Exam - Pet Wellness

QTY: 1

Provider:

B6

Comprehensive Diagnostic

10/02/2018 02:51 PM

ALB  
ALP  
ALT  
AMY

B6

2.5-4.4 g/dL  
20-150 U/L  
10-118 U/L  
200-1200 U/L

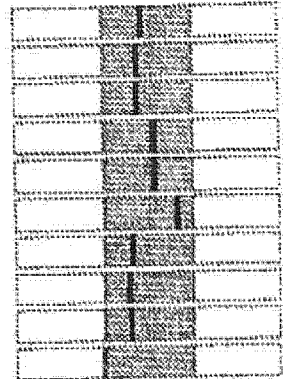

**B6**

**B6**

TBIL  
BUN  
CA  
PHOS  
CRE  
GLU  
NA+  
K+  
TP  
GLOB

**B6**

0.1-0.6 mg/dL  
7-26 mg/dL  
8.6-11.8 mg/dL  
2.9-6.6 mg/dL  
0.3-1.4 mg/dL  
60-110 mg/dL  
138-160 mmol/L  
3.7-5.8 mmol/L  
6.4-8.2 g/dL  
2.3-5.2 g/dL



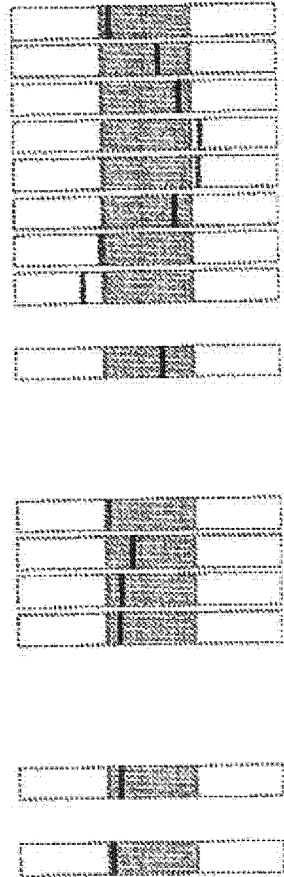
**Abaxis VetScan HM5**

10/02/2018 02:45 PM

WBC  
RBC  
HGB  
HCT  
MCV  
MCH  
MCHC  
PLT  
PCT  
MPV  
PDWs  
PDWc  
RDWs  
RDWc  
LYM  
MON  
NEU  
LY%  
MO%  
NE%  
EOS  
EO%  
BAS  
BA%

**B6**

6.00-17.00 10<sup>9</sup>/l  
5.50-8.50 10<sup>12</sup>/l  
12.0-18.0 g/dl  
37.00-55.00 %  
60- 77 fl  
19.5-24.5 pg  
31.0-39.0 g/dl  
165- 500 10<sup>9</sup>/l  
%  
3.9-11.1 fl  
fl  
%  
fl  
14.0-20.0 %  
1.00-4.80 10<sup>9</sup>/l  
0.20-1.50 10<sup>9</sup>/l  
3.00-12.00 10<sup>9</sup>/l  
%  
%  
%  
0.00-0.80 10<sup>9</sup>/l  
%  
0.00-0.40 10<sup>9</sup>/l  
%

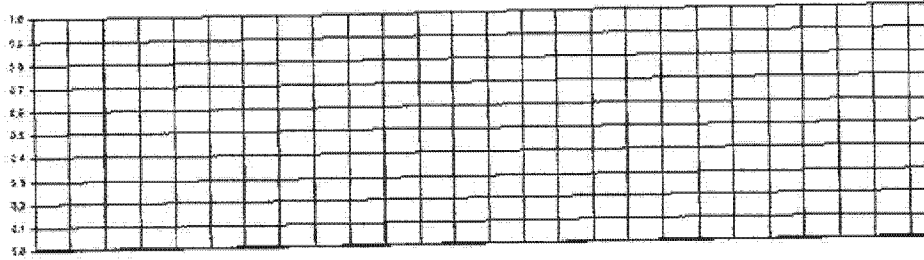




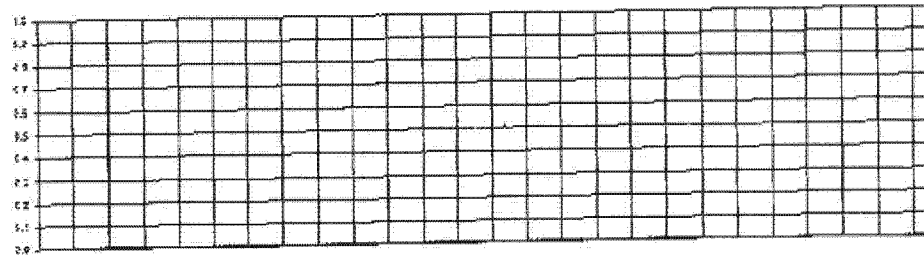
**B6**

**B6**

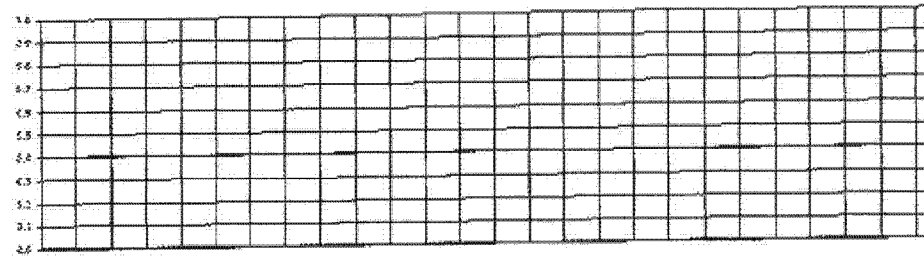
WBC Hist



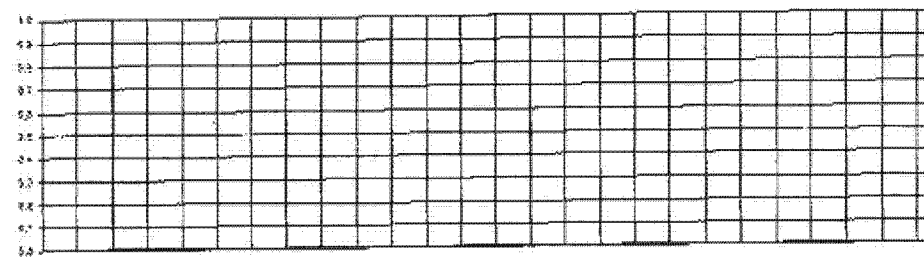
RBC Hist



EOS Hist



\*PLT Hist



09/25/2018 LINK Records Cont.

09/25/2018 LINK Records

B6 B6 MIXED BREED DOG  
 CANINE FS B6 BLACK & TA MIXED BREE

**B6**

**B6**

**B6**

For any questions on B6 health, please call B6

**B6**

MIXED BREE

B6

B6

B6

Acct Number:  
Address.....  
Phone.....  
Cell Phone.....

B6

( ) ext: Outstanding Balance: \$ \$

B6

Medical Alert:

Sex..... FS  
DOB..... B6  
Species... Canine

Weight: 35.6lbs.  
Breed...: Lab Mix

Problem (a)	Date	Diagnoses	Date	Vaccine Name	Date Due
	0.00				
<p>B6</p>					

10/02/2018 Service CET HEXtra Premium Chews Med. QTY: 1 Provider: Hospital Personnel  
Dog 30-Ct

10/02/2018 LINK New Client Form

10/02/2018 Service Junior Wellness - Comprehensive QTY: 1 Provider: B6  
Profile

10/02/2018 Service CBC (Complete Blood Count) QTY: 1 Provider: B6

SCANNED  
B6

10/4/18

B6  
CANINE  
ES

B6  
MIXED BREED DOG  
BLACK & TA

MIXED BREE

B6

B6

B6

10/02/2018

SOAP

Wellness Visit

Provider:

B6

S: Presenting Complaint: B6 is here for a wellness exam.  
Current on vaccines, no concerns, E/D ok, no V/D

Medications received: None

Preventatives received: Nexgard and Heartgard

Diet: American Journey

O: Weight- 35.6 lbs

PHYSICAL EXAM

B6

MIXED BRE

B6

DIAGNOSTICS

CBC/Chem: NSF

A: healthy pet, murmur very mild and not a concern at this time

P: dental cleaning will be important for maintaining heart health

10/02/2018

Lab Value

Temperature: = 101.20

10/02/2018

Service

Exam - Pet Wellness

QTY: 1

Provider:

B6

09/25/2018

LINK

Records Cont.

09/25/2018

LINK

Records

For any questions on B6 health, please call

B6

Instructions for Link a Message

### Patient History Report

Client: Phone: Address:	<b>B6</b>	Patient: <b>B6</b> Species: Canine Age: 3 Yrs. 8 Mos. Color: Black/Tan	Breed: Mixed Sex: Spayed Female
-------------------------------	-----------	---	------------------------------------

Date	Type	Staff	History
------	------	-------	---------

8/4/2018 I **B6**

8/4/2018 CK **B6**

8/4/2018 V **B6**

8/4/2018 L **B6**

# B6

8/4/2018 L **B6**

8/4/2018 B  
8/4/2018 B  
8/4/2018 B  
8/4/2018 B  
8/4/2018 B  
7/30/2018 P

**B6**

B: Billing, C: Med note, CB: Call back, CK: Check-in, CM: Communications, D: Diagnosis, DH: Declined to history, E: Exam, ED: Departing instr, L: Lab result, M: Image cases, P: Prescription, PA: PVL Acquired, PB: Problem, R: Correspondence, T: Images, TC: Tentative medl note, V: Vital signs

**B6**

**B6**  
CANINE

**B6**  
MIXED BREED DOG  
BLACK & TA

**B6**

**B6**

MIXED BREED

6:37 PM

# B6

### Patient History Report

<b>Client:</b> <b>Phone:</b> <b>Address:</b>	<b>B6</b>	<b>Patient:</b> B6	<b>Breed:</b> Mixed
		<b>Species:</b> Canine	<b>Sex:</b> Spayed Female
		<b>Age:</b> 3 Yrs. 8 Mos.	
		<b>Color:</b> Black/Tan	

Date	Type	Staff	History
------	------	-------	---------

7/30/2018 P B6

7/27/2018 P B6

7/27/2018 P B6

B6

7/23/2018 TC B6 Signed Consents - TENTATIVE

7/23/2018 TC B6 Signed Estimate/Drop Off - TENTATIVE

7/20/2018 TC B6 PDVM - TENTATIVE B6

**CANINE VACCINES & LAB- \*\* Please type below when vaccines or tests were actually Given at B6 - Not when they are due \*\***

**\*\*\* RECEPTION FULL NAME (NOT YOUR INITIALS) OF WHO PUT IN PDVM OF DATES VACCINES GIVEN : B6**

B: Billing, C: Med note, CB: Call back, CK: Check-in, CM: Communications, D: Diagnosis, DH: Declined to history, E: Examination, F: Filing, G: Grooming, H: Hospital, I: Departing instr, L: Lab result, M: Image cases, P: Prescription, PA: PVL Access, R: Correspondence, T: Images, TC: Tentative

B6	B6	MIXED BREED DOG	MIXED BRE
B6	B6	BLACK & TA	37 PM

B6

### Patient History Report

Client: Phone: Address:	<b>B6</b>	Patient: <b>B6</b> Species: Canine Age: 3 Yrs, 8 Mos. Color: Black/Tan	Breed: Mixed Sex: Spayed Female
-------------------------------	-----------	---	------------------------------------

Date	Type	Staff	History
------	------	-------	---------

<input checked="" type="checkbox"/> CANINE RABIES	Date Given: 09/09/16	-	Manufacturer:	1 or 3 year:	3
<input type="checkbox"/> CANINE RABIES	Date Given: ___	-	Manufacturer:	1 or 3 year:	
<input type="checkbox"/> CANINE RABIES	Date Given: ___	-	Manufacturer:	1 or 3 year:	
<input type="checkbox"/> CANINE RABIES	Date Given: ___	-	Manufacturer:	1 or 3 year:	

<input checked="" type="checkbox"/> DHPP	Date Given: 09/09/16	-	Manufacturer:	1 or 3 year:	3
<input type="checkbox"/> DHPP	Date Given: ___	-	Manufacturer:	1 or 3 year:	
<input type="checkbox"/> DHPP	Date Given: ___	-	Manufacturer:	1 or 3 year:	
<input type="checkbox"/> DHPP	Date Given: ___	-	Manufacturer:	1 or 3 year:	

<input type="checkbox"/> LEPTO	Date Given: ___
<input type="checkbox"/> LEPTO	Date Given: ___

<input checked="" type="checkbox"/> BORDETELLA	Date Given: 4/17/2017	-	<input checked="" type="checkbox"/> Intranasal	<input type="checkbox"/> Oral	<input type="checkbox"/> Injectable
<input type="checkbox"/> BORDETELLA	Date Given: ___	-	<input type="checkbox"/> Intranasal	<input type="checkbox"/> Oral	<input type="checkbox"/> Injectable

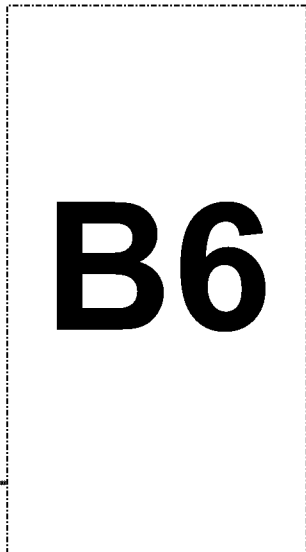
<input type="checkbox"/> CIV	Date Given: ___
<input type="checkbox"/> CIV	Date Given: ___
<input type="checkbox"/> CIV	Date Given: ___

<input checked="" type="checkbox"/> HEARTWORM TEST	Date Given: 09/08/17	-	<input checked="" type="checkbox"/> Negative	<input type="checkbox"/> Positive
<input type="checkbox"/> HEARTWORM TEST	Date Given: ___	-	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive

<input checked="" type="checkbox"/> FECAL	Date Given: 12/21/2017	-	<input checked="" type="checkbox"/> Negative	<input type="checkbox"/> Positive
<input type="checkbox"/> FECAL	Date Given: ___	-	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive
<input type="checkbox"/> FECAL	Date Given: ___	-	<input type="checkbox"/> Negative	<input type="checkbox"/> Positive

<input type="checkbox"/> DEWORMING	Date Given: ___	-	Type: ___
<input type="checkbox"/> DEWORMING	Date Given: ___	-	Type: ___
<input type="checkbox"/> DEWORMING	Date Given: ___	-	Type: ___

MIXED BRE



7/19/2018 C DZZ Canine/Feline Exam - CLOSED 08/02/2018

**B6** DVM

Wt: 35.2

Reason for visit: O lacerated L cranial flank fold while grooming

B: Billing, C: Med note, CB: Call back, CK: Check-in, CM: Communications, D: Diagnosis, DH: Declined to history, E: Examination, ES: Estimates, I: Departing Instr, L: Lab result, M: Image cases, P: Prescription, PA: PVL Accepted, PB: problems, PP: PVL Performed, PR: PVL Recommended, R: Correspondence, T: Images, TC: Tentative med note, V: Vital signs

**B6**

### Patient History Report

Client: Phone: Address:	<b>B6</b>	Patient: <b>B6</b> Species: Canine Age: 3 Yrs. 8 Mos. Color: Black/Tan	Breed: Mixed Sex: Spayed Female
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Date	Type	Staff	History
------	------	-------	---------

Temp/Pulse/Resp: 101.8 / 130 / 40

# B6

<b>B6</b> CANINE	<b>B6</b> MIXED BREED DOG	MIXED BRE
<div style="border: 1px dashed black; padding: 20px; display: inline-block;"> <h1>B6</h1> </div>		

7/19/2018 P	<b>B6</b>	<h1>B6</h1>
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B: Billing, C: Med note, CB: Call back, CK: Check-in, CM: Communications, D: Diagnosis, DH: Declined to history, E: Examination, ES: Estimates, I: Departing instr., LL: Lab result, M: Image cases, P: Prescription, PA: PVL Accepted, PB: problems, PP: PVL Performed, PR: PVL Recommended, R: Correspondence, T: Images, TC: Tentative med note, V: Vital signs



### Patient History Report

Client:  
Phone:  
Address:

**B6**

Patient: **B6**  
Species: Canine  
Age: 3 Yrs. 8 Mos.  
Color: Black/Tan

Breed: Mixed  
Sex: Spayed Female

Date	Type	Staff	History
------	------	-------	---------

7/19/2018 P

**B6**

7/19/2018 P

**B6**

7/19/2018 CK

**B6**

7/19/2018 V

**B6**

7/19/2018 B  
7/19/2018 B  
7/19/2018 B  
7/19/2018 B  
7/19/2018 B  
7/19/2018 B  
7/19/2018 B  
7/19/2018 B  
7/19/2018 B

**B6**

**B6**

8/4/2017 TC **B6** OVERDUE REMINDER CALL - TENTATIVE  
overdue reminder call LMOM for O to schedule apt

9/19/2016 TC **B6** Overdue reminder call - TENTATIVE  
LMOM about overdue reminders.

9/7/2016 TC **B6** faxed records - TENTATIVE  
Faxed records to **B6** 5:15p

**B6**

B: Billing, C: Med note, CB: Call back, CK: Check-in, CM: Communications, D: Diagnosis, DH: Declined to history, E: Examination, ES: Estimates, I: Departing instr, L: Lab result, M: Image cases, P: Prescription, PA: PVL Accepted, PB: problems, PP: PVL Performed, PR: PVL Recommended, R: Correspondence, T: Images, TC: Tentative medl note, V: Vitals signs

**B6**

### Patient History Report

Client: Phone: Address:	<b>B6</b>	Patient: B6 Species: Canine Age: 3 Yrs. 8 Mos. Color: Black/Tan	Breed: Mixed Sex: Spayed Female
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Date	Type	Staff	History
8/1/2016	C	B6	RR - FINAL 08/01/2016

7/30/2016 C B6 Canine Exam - CLOSED 08/29/2016

**Canine Exam**

Date: 7/30/2016

Patient Name: B6 B6 Mixed 37 pounds Spayed Female

B6 DVM Technician B6

#### To be completed by Technician

**Reason for visit: to establish relationship for Bravecto**

**History (Subjective):**

Is your pet having any problems?	All things are good. O wants Bravecto for P. O will do vx towards end of Sept 2016. Current on Tri-heart. Nature's Variety lamb/pea dry food.
----------------------------------	---

#### To be completed by DVM

**Exam (Objective):**

<b>Nose and Throat</b> <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Exam <input type="checkbox"/> Abnormal Remarks: ___	<b>Mouth/Teeth/Gum</b> <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Exam <input type="checkbox"/> Abnormal Remarks: ___
<b>Eyes and Ears</b> <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Exam <input type="checkbox"/> Abnormal Remarks: ___	<b>Coat and Skin</b> <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Exam <input type="checkbox"/> Abnormal Remarks: ___
<b>Lymph Nodes</b> <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Examine <input type="checkbox"/> Enlarged Remarks: ___ <input type="checkbox"/> Abnormal Remarks: ___	<b>Musculoskeletal</b> <input type="checkbox"/> Normal <input type="checkbox"/> Did Not Exam <input type="checkbox"/> Nail Trim <input type="checkbox"/> Abnormal Remarks: ___

B: Billing, C: Med note, CB: Call back, CK: Check-in, CM: Communications, D: Diagnosis, DH: Declined to history, E: Examination, ES: Estimates, L: Departing instr, LL: Lab result, M: Image cases, P: Prescription, PA: PVL Accepted, PB: problems, PP: PVL Performed, PR: PVL Recommended, R: Correspondence, T: Images, TC: Tentative medl note, V: Vital signs

B6



### Patient History Report

Client: Phone: Address:	<b>B6</b>	Patient: <b>B6</b> Species: Canine Age: 3 Yrs. 8 Mos. Color: Black/Tan	Breed: Mixed Sex: Spayed Female
-------------------------------	-----------	---	------------------------------------

Date	Type	Staff	History
------	------	-------	---------

7/30/2016 C B6 B6 FINAL 07/30/2016 - B6 Animal Care Shelter

NO VAX HX IN B6

#### CANINE VACCINES

DHPP Date Given: 09/24/2015 -  Booster  1 Year  3 Year  W/Lepto  
 DHPP Date Given: -  Booster  1 Year  3 Year  W/Lepto  
 DHPP Date Given: -  Booster  1 Year  3 Year  W/Lepto  
 DHPP Date Given: -  Booster  1 Year  3 Year  W/Lepto

CANINE RABIES Date Given: 09/24/2015 -  1 Year  3 Year

Mfr: Boehringer Ingelheim

CANINE RABIES Date Given: -  1 Year  3 Year

Mfr: \_\_\_\_\_

LEPTO Date Given: \_\_\_\_\_

LEPTO Date Given: \_\_\_\_\_

BORDETELLA Date Given: 09/24/2015 -  Intranasal  Oral  Injectable

BORDETELLA Date Given: -  Intranasal  Oral  Injectable

#### LAB/HYGIENE

DEWORMING Date Given: 09/24/2015 - Type: Pyrantel Pamoate

DEWORMING Date Given: - Type: \_\_\_\_\_

DEWORMING Date Given: - Type: \_\_\_\_\_

FECAL Date Given: -  Negative  Positive: \_\_\_\_\_

FECAL Date Given: -  Negative  Positive: \_\_\_\_\_

CANINE HEARTWORM TEST Date Given: 09/24/2015 -  Negative  Positive

CANINE HEARTWORM TEST Date Given: -  Negative  Positive

7/30/2016 CK B6

7/30/2016 V B6

7/30/2016 B B6

7/30/2016 B B6

# B6

B: Billing, C: Med note, CB: Call back, CK: Check-in, CW: Communications, D: Diagnosis, DH: Declined to history, E: Examination, ES: Estimates, I: Departing instr, L: Lab result, M: Image cases, P: Prescription, PA: PVL Accepted, PB: problems, PP: PVL Performed, PR: PVL Recommended, R: Correspondence, T: Images, TC: Tentative med note, V: Vital signs

B6

### Patient History Report

Client:	<b>B6</b>	Patient:	B6
Phone:		Species:	Canine
Address:		Age:	3 Yrs. 8 Mos.
		Breed:	Mixed
		Sex:	Spayed Female
		Color:	Black/Tan

Date	Type	Staff	History
7/30/2016	B	<b>B6</b>	<b>B6</b>
7/30/2016	B		
7/30/2016	B		
7/18/2016	V		

Weight 35.00 pounds

B:Bring, C:Med note, CB:Call back, CK:Check-in, CM:Communications, D:Diagnosis, DH:Declined to history, E:Examination, ES:Estimates, I:Departing Instr, L:Lab result, M:Image cases, P:Prescription, PA:PVL Accepted, PB:problems, PP:PVL Performed, PR:PVL Recommended, R:Correspondence, T:Images, TC:Tentative med note, V:Vital signs

**B6**

B6

B6

1 of 1

### Reminder Letter Report Sorted by Client ID

Client ID	Client Name	Patient ID	Patient Name	Item ID/Description	Type	Date
	B6					02/20/18
		B6				04/20/18
						04/20/18
						04/20/18
						04/20/18
						04/20/18

**B6**

B6

Page 1 of 1

Dem: 6/28/2018

**B4, B6**

**B4, B6**

Canine Echocardiography Report

Patient Name:	<b>B6</b>	Date of Exam:	<b>B6</b>
Medical Rec #:	231020	Breed:	Mixed breed
DOB:	<b>B6</b>	Weight:	16 kg
Age:	3 years	BSA:	0.64 m <sup>2</sup>
Sex:	Fs	HR:	
Sonographer:	<b>B4, B6</b> (CA), DACVECC	DVM, DACVIM	BP-sys:

Report Status: READ  
 Diagnosis: Suspect Grain Free Diet Associated DCM, Decreased left ventricular systolic function; Left ventricular dilation  
 Study Details: 2D Echo/Doppler/Color Doppler. The images were of adequate diagnostic quality. The patient was awake.

**Additional Comments:**  
 Dog presents for asymptomatic heart murmur.

2D	Diastole	Systole
IVS	<b>B6</b>	
LV		
LVPW		
2D		
LA d	<b>B6</b>	
Ao s		
LA/Ao		

M-mode	Diastole	Systole	<b>B6</b>
RV	<b>B6</b>		
IVS			
LV			
LVPW			
LV normalized			
LA			
Ao			
LA/Ao			

Normal Canine M-mode values (in cm) for 15 kg dogs.

**B6**

Tissue Doppler:	Medial	<b>B6</b>	<b>B6</b>
E'	<b>B6</b>		
A'			
E'/E'			
E'/A'			

MIXED BR

Final

**B6**

**B6**

**B6**

**Aortic Valve:**

VMax  
Pk Grad

AoV

**B6**

**B6**

CANINE  
FS

**B6**

MIXED BREED DOG  
**B6** BLACK & TA

MIXED BR

**Mitral Valve:**

Mn Grad  
P1/2T  
MV Area

**B6**

**B6**

**Tricuspid valve:**

TV E Max  
TV Mn Grad  
P 1/2 T  
TV VTI

**B6**

**Pulmonic valve:**

Vmax  
Pk Grad  
PV AT  
PV ET  
PV AT/ET

**B6**

**CLINICIAN INTERPRETATION:**

**B6**

**ECHO SUMMARY:**

**B6**

**CV Exam:**

Cardiac auscultation revealed a systolic murmur of grade II-III/VI intensity loudest at the left apex.

**Radiographs:**

RDVM radiographs. No evidence of pulmonary edema. Left sided cardiomegaly.

**Recommendations:** Cause of dog's murmur is Mitral valve insufficiency due to MV annular stretch. MV anatomy is normal.



B6

B6

B6

**B6**

Since [B6] is an atypical breed for DCM and has been on grain free diet for last 3 years, we are concerned for possible diet associated DCM. Other causes are possible such as idiopathic, infectious/inflammatory, ischemic or hypothyroidism. Cardiac troponin and thyroid testing are pending. Blood for infectious disease has been banked if troponin is markedly elevated. Taurine concentrations are also pending but dog has been on new diet and taurine for last 4-5 days.

Recommend continuing with taurine 40 mg/kg per day and carnitine. Suggest adding pimobendan 5 mg am, 2.5 mg pm and recheck echo in 3 months. If changes are reversible then diet associated DCM is likely cause

**B4, B6** DVM, DACVIM (CA), DACVECC  
Electronically signed on **B6** on 2:07:37 PM

**B6**

**B6** CANINE **B6** MIXED BREED DOG MIXED BR  
FS **B6** BLACK & TA

**B6**

Final

B6

B6

B6

**B6**

**B6**

MIXED BR

---

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 10/25/2018 5:16:28 PM  
**Subject:** taste of the wild grain free pacific stream-taste of the wild prey trout limited ingredients; [B6] EON-369346  
**Attachments:** 2057985-report.pdf; 2057985-attachments.zip

A PFR Report has been received and PFR Event [EON-369346] has been created in the EON System.

A "PDF" report by name "2057985-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 "2057985-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-369346

**ICSR #:** 2057985

**EON Title:** PFR Event created for taste of the wild grain free pacific stream taste of the wild prey trout limited ingredients; 2057985

<b>AE Date</b>	[B6]	<b>Number Fed/Exposed</b>	3
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Dogue de Bordeaux		
<b>Age</b>	8 Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2057985

**Product Group:** Pet Food

**Product Name:** taste of the wild grain free pacific stream taste of the wild prey trout limited ingredients

**Description:** [B4, B6] .Has been eating Taste of the wild grain free for about 5 years. [B6] had to be rushed to cardiologist and diagnosed with dcm dilated cardiomyopathy. Have full vet report and findings. He is still not recovered and we are unsure where this is going to end up

**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:** 3

**Number of Animals Reacted With Product:** 1

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
taste of the wild grain free pacific stream taste of the wild prey trout limited ingredients		

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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**Report Details - EON-369346**

ICSR:	2057985
Type Of Submission:	Initial
Report Version:	FPSR.FDA.PETF.V.V1
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)
Reporting Type:	Voluntary
Report Submission Date:	2018-10-25 13:10:59 EDT
Reporter is the Animal Owner:	Yes

<b>Reported Problem:</b>	<b>Problem Description:</b>	B6 .Has been eating Taste of the wild grain free for about 5 years. 10/24/18 had to be rushed to cardiologist and diagnosed with dcm dilated cardiomyopathy. Have full vet report and findings. He is still not recovered and we are unsure where this is going to end up
	<b>Date Problem Started:</b>	B6
	<b>Date of Recovery:</b>	10/24/2018
	<b>Concurrent Medical Problem:</b>	No
	<b>Outcome to Date:</b>	Stable

<b>Product Information:</b>	<b>Product Name:</b>	taste of the wild grain free pacific stream taste of the wild prey trout limited ingredients		
	<b>Product Type:</b>	Pet Food		
	<b>Lot Number:</b>			
	<b>Package Type:</b>	BAG		
	<b>Purchase Date:</b>	10/02/2018		
	<b>Number Purchased:</b>	1		
	<b>Possess Unopened Product:</b>	No		
	<b>Possess Opened Product:</b>	No		
	<b>Storage Conditions:</b>	Cool dry place		
	<b>Product Use Information:</b>	<b>Description:</b>	Recommended feeding for all three of our dogs	
		<b>First Exposure Date:</b>	10/03/2018	
		<b>Last Exposure Date:</b>	10/23/2018	
		<b>Time Interval between Product Use and Adverse Event:</b>	5 Years	
		<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes	
<b>Adverse Event Abate After Product Stop:</b>		Not Applicable		
<b>Product Use Started Again:</b>		No		
<b>Perceived Relatedness to Adverse Event:</b>		Probably related		
<b>Other Foods or Products Given to the Animal During This Time Period:</b>	Yes			

	<b>Manufacturer /Distributor Information:</b>	
	<b>Purchase Location Information:</b>	<b>Name:</b> B6 <b>Address:</b> United States
<b>Animal Information:</b>	<b>Name:</b>	B6
	<b>Type Of Species:</b>	Dog
	<b>Type Of Breed:</b>	Dogue de Bordeaux
	<b>Gender:</b>	Male
	<b>Reproductive Status:</b>	Neutered
	<b>Age:</b>	8 Years
	<b>Assessment of Prior Health:</b>	Excellent
	<b>Number of Animals Given the Product:</b>	3
	<b>Number of Animals Reacted:</b>	1
	<b>Owner Information:</b>	
	<b>Healthcare Professional Information:</b>	<b>Practice Name:</b> B6 <b>Contact:</b> <b>Name:</b> B6 <b>Phone:</b> B6 <b>Email:</b> B6 <b>Address:</b> B6 United States <b>Type of Veterinarian:</b> Referred veterinarian <b>Date First Seen:</b> 10/24/2018 <b>Permission to Release Records to FDA:</b> Yes
<b>Sender Information:</b>	<b>Name:</b>	B6
	<b>Address:</b>	B6 United States
	<b>Contact:</b>	<b>Phone:</b> B6 <b>Email:</b> B6
	<b>Reporter Wants to Remain Anonymous:</b>	No
	<b>Permission To Contact Sender:</b>	Yes
	<b>Preferred Method Of Contact:</b>	Email
<b>Additional Documents:</b>	<b>Attachment:</b>	B6 102418_5.pdf
	<b>Description:</b>	vet finding
	<b>Type:</b>	Article
	<b>Attachment:</b>	B6 102418_4.pdf
	<b>Description:</b>	vet findings
	<b>Type:</b>	Article

<b>Attachment:</b>	<b>B6</b> 102418_1.pdf
<b>Description:</b>	vet findings
<b>Type:</b>	Article

**B6**

Dear Doctor, above are the images and measurements.

---

Thanks for allowing me to consult on this case. Please feel free to contact me regarding this or any other case.

Respectfully, **B4, B6** DVM, MS, DACVIM-CA, DECVIM- **B4, B6**



**B4, B6**

# B4, B6

### ♥ Health Status

Date/Time	Weight (lb)	Heart Rate	Attitude
B6 2:44:01pm	B6		QAR

\*\*\* PLEASE DO NOT RUN OUT OF MEDICATIONS \*\*\*

Date/Time	Drug Name	Qty	Instructions	Prescribed By
B6			<h1>B6</h1>	B4, B6 DVM, MS, DACVIM, DECVIM
B6				B4, B6 DVM, MS, DACVIM, DECVIM
B6				B4, B6 DVM, MS, DACVIM, DECVIM

### ▲ Diagnostic Result

#### ECG - Electrocardiogram - 10 lead (Ref: US10393-DR6381)

Normal sinus rhythm  
No evidence of supra and ventricular arrhythmia  
Left ventricle enlargement pattern

#### Echocardiogram by cardiologist (Ref: US10393-DR6377)

Decreased systolic function, dilated Left Ventricle  
Mild to moderate Mitral Valve Regurgitation due to dilatation, with mild left atrial enlargement  
Mild tricuspid regurgitation with mild right atrial enlargement and no pulmonary hypertension  
No Pericardial effusion

Report Details - EON-369325			
ICSR:	2057945		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)		
Reporting Type:	Voluntary		
Report Submission Date:	2018-10-25 07:45:50 EDT		
Reported Problem:	<b>Problem Description:</b> DCM, CHF, atrial fibrillation WB taurine = 260 Dog's diet previously submitted to FDA Note: this may be a duplicate submission		
	<b>Date Problem Started:</b> 02/20/2018		
	<b>Concurrent Medical Problem:</b> No		
	<b>Outcome to Date:</b> Died Naturally		
	<b>Date of Death:</b> B6		
Product Information:	<b>Product Name:</b> Taste of the Wild High Prairie		
	<b>Product Type:</b> Pet Food		
	<b>Lot Number:</b>		
	<b>Package Type:</b> BAG		
	<b>Product Use Information:</b>		
	<b>Manufacturer /Distributor Information:</b>		
	<b>Purchase Location Information:</b>		
Animal Information:	<b>Name:</b> B6		
	<b>Type Of Species:</b> Dog		
	<b>Type Of Breed:</b> Great Dane		
	<b>Gender:</b> Male		
	<b>Reproductive Status:</b> Intact		
	<b>Weight:</b> 74 Kilogram		
	<b>Age:</b> 9 Years		
	<b>Assessment of Prior Health:</b> Excellent		
	<b>Number of Animals Given the Product:</b> 1		
	<b>Number of Animals Reacted:</b> 1		
	<b>Owner Information:</b>	<b>Owner Information provided:</b> Yes	
		<b>Contact:</b>	<b>Name:</b> B6
			<b>Phone:</b> B6
			<b>Email:</b> B6
		<b>Address:</b> B6 United States	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b> B4, B6		
	<b>Contact:</b>	<b>Name:</b> Lisa Freeman	
		<b>Phone:</b> (508) 887-4523	
	<b>Email:</b> lisa.freeman@tufts.edu		

		<b>Address:</b> 200 Westboro Rd North Grafton Massachusetts 01536 United States
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States
	<b>Contact:</b>	<b>Phone:</b> 5088874523 <b>Email:</b> lisa.freeman@tufts.edu
	<b>Permission To Contact Sender:</b>	Yes
	<b>Preferred Method Of Contact:</b>	Email
<b>Additional Documents:</b>	<b>Attachment:</b>	<b>B6</b> compiled records.pdf
	<b>Description:</b>	Records
	<b>Type:</b>	Medical Records

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; **B6**  
**Sent:** 10/25/2018 7:36:40 PM  
**Subject:** WELLNESS CORE GRAIN FREE; **B6** - EON-369373  
**Attachments:** 2057992-report.pdf

A PFR Report has been received and PFR Event [EON-369373] has been created in the EON System.

A "PDF" report by name "2057992-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-369373

**ICSR #:** 2057992

**EON Title:** PFR Event created for WELLNESS CORE GRAIN FREE, NULO GRAIN FREE, BLUE BUFFALO GRAIN FREE; 2057992

<b>AE Date</b>	10/22/2018	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Schnauzer - Miniature		
<b>Age</b>	10.5 Years		
<b>District Involved</b>	PFR <b>B6</b> DO		

**Product information**

**Individual Case Safety Report Number:** 2057992

**Product Group:** Pet Food

**Product Name:** WELLNESS CORE GRAIN FREE, NULO GRAIN FREE, BLUE BUFFALO GRAIN FREE

**Description:** CHEST RADIOGRAPHS REVEALED AN ENLARGED HEART

**Submission Type:** Initial

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

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

**Number of Animals Treated With Product:** 1

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
BLUE BUFFALO GRAIN FREE		
WELLNESS CORE GRAIN FREE		
NULO GRAIN FREE		

**Sender information**

**B6**

USA

**Owner information**

**B6**

USA

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

**B6**

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

**B6**

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**Report Details - EON-369373**

ICSR: 2057992  
 Type Of Submission: Initial  
 Report Version: FPSR.FDA.PETF.V.V1  
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)  
 Reporting Type: Voluntary  
 Report Submission Date: 2018-10-25 15:26:17 EDT

**Reported Problem:**  
**Problem Description:** CHEST RADIOGRAPHS REVEALED AN ENLARGED HEART  
**Date Problem Started:** 10/22/2018  
**Concurrent Medical Problem:** No  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** BLUE BUFFALO GRAIN FREE  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Possess Unopened Product:** Unknown  
**Possess Opened Product:** Unknown  
**Storage Conditions:** UNKNOWN  
**Product Use Information:**  
**Description:** ORALLY  
**Product Use Stopped After the Onset of the Adverse Event:** Unknown  
**Perceived Relatedness to Adverse Event:** Possibly related  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**  
**Product Name:** NULO GRAIN FREE  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Possess Unopened Product:** Unknown  
**Possess Opened Product:** Unknown  
**Storage Conditions:** UNKNOWN  
**Product Use Information:**  
**Description:** ORALLY  
**Product Use Stopped After the Onset of the Adverse Event:** Unknown  
**Perceived Relatedness to Adverse Event:** Possibly related  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

	<b>Product Name:</b>	WELLNESS CORE GRAIN FREE		
	<b>Product Type:</b>	Pet Food		
	<b>Lot Number:</b>			
	<b>Package Type:</b>	BAG		
	<b>Possess Unopened Product:</b>	Unknown		
	<b>Possess Opened Product:</b>	Unknown		
	<b>Storage Conditions:</b>	UNKNOWN		
	<b>Product Use Information:</b>	<b>Description:</b>	ORALLY	
		<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Unknown	
		<b>Perceived Relatedness to Adverse Event:</b>	Possibly related	
		<b>Other Foods or Products Given to the Animal During This Time Period:</b>	Unknown	
	<b>Manufacturer /Distributor Information:</b>			
	<b>Purchase Location Information:</b>			
<b>Animal Information:</b>	<b>Name:</b>	B6		
	<b>Type Of Species:</b>	Dog		
	<b>Type Of Breed:</b>	Schnauzer - Miniature		
	<b>Gender:</b>	Female		
	<b>Reproductive Status:</b>	Neutered		
	<b>Weight:</b>	16.3 Pound		
	<b>Age:</b>	10.5 Years		
	<b>Assessment of Prior Health:</b>	Good		
	<b>Number of Animals Given the Product:</b>	1		
	<b>Number of Animals Reacted:</b>	1		
	<b>Owner Information:</b>	<b>Owner Information provided:</b>	Yes	
		<b>Contact:</b>	<b>Name:</b>	B6
			<b>Phone:</b>	B6
	<b>Address:</b>	B6 United States		
<b>Healthcare Professional Information:</b>				
<b>Sender Information:</b>	<b>Name:</b>	B6		
	<b>Address:</b>	B6		



**B6**  
United States

**Contact:** **Phone:** **B6**  
**Other Phone:** **B6**  
**Email:** **B6**

**Reporter Wants to Remain Anonymous:** No

**Permission To Contact Sender:** Yes

**Preferred Method Of Contact:** Email

**Reported to Other Parties:** None

**Additional Documents:**

**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 12/6/2018 3:20:09 AM  
**Subject:** DCM cases 12/5/2018 2200  
**Attachments:** Acana dog food. Varying diet/formulas over the past [B6] years. [B6] EON-372923; Earthborn Meadow Feast dry: Lisa Freeman - EON-372804; Earthborn Meadow Feast dry: Lisa Freeman - EON-372828; Earthborn Meadow Feast dry: Lisa Freeman - EON-372831; Earthborn Meadow Feast dry: Lisa Freeman - EON-372834; Earthborn Meadow Feast dry: Lisa Freeman - EON-372842; Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs: [B6] EON-372864; Pure Vita Holistic Pet Foods Turkey and Sweet Potato Entree: [B6] EON-372846; The Honest Kitchen Grain Free Chicken Recipe [B6] [B6] EON-372839; Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish: [B6] [B6] EON-372851

David Rotstein, DVM, MPVM, Dipl. ACVP  
CVM Vet-LIRN Liaison  
CVM OSC/DC/CERT  
7519 Standish Place  
[B6] (BB)



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**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 12/5/2018 4:44:22 PM  
**Subject:** Acana dog food. Varying diet/formulas over the past [B6] years. [B6]  
EON-372923  
**Attachments:** 2059678-report.pdf

A PFR Report has been received and PFR Event [EON-372923] has been created in the EON System.

A "PDF" report by name "2059678-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-372923

**ICSR #:** 2059678

**EON Title:** PFR Event created for Acana dog food. Varying diet/formulas over the past [B6] years.; 2059678

<b>AE Date</b>	09/01/2018	<b>Number Fed/Exposed</b>	3
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Died Euthanized
<b>Breed</b>	Mastiff		
<b>Age</b>	[B6] Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2059678

**Product Group:** Pet Food

**Product Name:** Acana dog food. Varying diet/formulas over the past [B6] years.

**Description:** Since approximately Sept 2018, we noticed [B6] had an occasional cough/throat clearing noise.

We mentioned this during vet visits, but our vets didn't seem concerned. On [B6] we rushed [B6] to the emergency vet due to weakness and inability to stand and while there he had chest X-rays taken which showed "an extremely large heart?". The on duty vet performed an ultrasound and noted how hard his heart was working to pump blood. He inquired about the food we feed him and if it was grain free. After finding out it was, he alerted us to new findings regarding grain free diets and dilated cardiomyopathy. He suggested we contact the FDA to report the findings. Unfortunately, [B6] did not recover and passed away early [B6]

**B6**

**Submission Type:** Initial

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

**Outcome of reaction/event at the time of last observation:** Died Euthanized

**Number of Animals Treated With Product:** 3

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
Acana dog food. Varying diet/formulas over the past <b>B6</b> years.		

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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**Report Details - EON-372923**

ICSR: 2059678  
 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: 2018-12-05 11:36:30 EST  
 Reporter is the Animal Owner: Yes

**Reported Problem:**  
**Problem Description:** Since approximately Sept 2018, we noticed [B6] had an occasional cough /throat clearing noise. We mentioned this during vet visits, but our vets didnt seem concerned. On [B6] we rushed [B6] to the emergency vet due to weakness and inability to stand and while there he had chest X-rays taken which showed an extremely large heart. The on duty vet performed an ultrasound and noted how hard his heart was working to pump blood. He inquired about the food we feed him and if it was grain free. After finding out it was, he alerted us to new findings regarding grain free diets and dilated cardiomyopathy. He suggested we contact the FDA to report the findings. Unfortunately, [B6] did not recover and passed away early [B6].  
**Date Problem Started:** 09/01/2018  
**Concurrent Medical Problem:** Yes  
**Pre Existing Conditions:** Prednisone  
**Outcome to Date:** Died Euthanized  
**Date of Death:** [B6]

**Product Information:**  
**Product Name:** Acana dog food. Varying diet/formulas over the past [B6] years.  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Package Size:** 25 Pound  
**Storage Conditions:** Sealed container  
**Product Use Information:**  
**First Exposure Date:** 03/17/2014  
**Last Exposure Date:** [B6]  
**Perceived Relatedness to Adverse Event:** Probably related  
**Other Foods or Products Given to the Animal During This Time Period:** No  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** [B6]  
**Type Of Species:** Dog  
**Type Of Breed:** Mastiff  
**Gender:** Male  
**Reproductive Status:** Neutered  
**Weight:** 200 Pound  
**Age:** [B6] years  
**Assessment of Prior:** Good

	Health:											
	Number of Animals Given the Product:	3										
	Number of Animals Reacted:	1										
	Owner Information:											
	Healthcare Professional Information:	<table border="1"> <tr> <td>Practice Name:</td> <td>B6</td> </tr> <tr> <td>Contact:</td> <td> <table border="1"> <tr> <td>Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> </table> </td> </tr> <tr> <td>Permission to Release Records to FDA:</td> <td>Yes</td> </tr> </table>	Practice Name:	B6	Contact:	<table border="1"> <tr> <td>Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> </table>	Name:	B6	Phone:		Permission to Release Records to FDA:	Yes
Practice Name:	B6											
Contact:	<table border="1"> <tr> <td>Name:</td> <td>B6</td> </tr> <tr> <td>Phone:</td> <td></td> </tr> </table>	Name:	B6	Phone:								
Name:	B6											
Phone:												
Permission to Release Records to FDA:	Yes											
Sender Information:	Name:											
	Address:	B6										
		United States										
	Contact:	<table border="1"> <tr> <td>Phone:</td> <td></td> </tr> <tr> <td>Email:</td> <td>B6</td> </tr> </table>	Phone:		Email:	B6						
Phone:												
Email:	B6											
	Permission To Contact Sender:	Yes										
	Preferred Method Of Contact:	Phone										
	Reported to Other Parties:	None										
Additional Documents:												

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification B6  
**Sent:** 12/4/2018 10:17:32 PM  
**Subject:** Earthborn Meadow Feast dry: Lisa Freeman - EON-372804  
**Attachments:** 2059619-report.pdf; 2059619-attachments.zip

A PFR Report has been received and PFR Event [EON-372804] has been created in the EON System.

A "PDF" report by name "2059619-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 "2059619-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-372804

**ICSR #:** 2059619

**EON Title:** PFR Event created for Earthborn Meadow Feast dry; 2059619

<b>AE Date</b>	11/21/2018	<b>Number Fed/Exposed</b>	5
<b>Best By Date</b>		<b>Number Reacted</b>	4
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Boxer (German Boxer)		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2059619

**Product Group:** Pet Food

**Product Name:** Earthborn Meadow Feast dry

**Description:** Littermate diagnosed with reduced cardiac contractility Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months

**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: 5**

**Number of Animals Reacted With Product: 4**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn Meadow Feast dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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**Report Details - EON-372804**

**ICSR:** 2059619  
**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 17:08:36 EST

**Reported Problem:**

<b>Problem Description:</b>	Littermate diagnosed with reduced cardiac contractility Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months
<b>Date Problem Started:</b>	11/21/2018
<b>Concurrent Medical Problem:</b>	Yes
<b>Pre Existing Conditions:</b>	History of resection of jejunum and ileum due to intussusception as puppy
<b>Outcome to Date:</b>	Stable

**Product Information:**

<b>Product Name:</b>	Earthborn Meadow Feast dry
<b>Product Type:</b>	Pet Food
<b>Lot Number:</b>	
<b>Package Type:</b>	BAG
<b>Product Use Information:</b>	<b>Description:</b> See diet history <b>First Exposure Date:</b> 02/01/2018
<b>Manufacturer /Distributor Information:</b>	
<b>Purchase Location Information:</b>	

**Animal Information:**

<b>Name:</b>	<b>B6</b>
<b>Type Of Species:</b>	Dog
<b>Type Of Breed:</b>	Boxer (German Boxer)
<b>Gender:</b>	Female
<b>Reproductive Status:</b>	Intact
<b>Pregnancy Status:</b>	Not pregnant
<b>Lactation Status:</b>	Not lactating
<b>Weight:</b>	27.4 Kilogram
<b>Age:</b>	3 Years
<b>Assessment of Prior Health:</b>	Excellent
<b>Number of Animals Given the Product:</b>	5
<b>Number of Animals Reacted:</b>	4
<b>Owner Information:</b>	<b>Owner Information provided:</b> Yes
	<b>Contact:</b> <b>Name:</b> <b>B6</b>
	<b>Phone:</b>
	<b>Email:</b>
	<b>Address:</b> <b>B6</b>
	United States

<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine	
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman
		<b>Phone:</b>	(508) 887-4523
		<b>Email:</b>	lisa.freeman@tufts.edu
<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman	
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	<b>Contact:</b>	<b>Phone:</b>	5088874523
		<b>Email:</b>	lisa.freeman@tufts.edu
	<b>Permission To Contact Sender:</b>	Yes	
<b>Preferred Method Of Contact:</b>	Email		
<b>Additional Documents:</b>	<b>Attachment:</b>	compiled medical records	<b>B6</b> pdf
	<b>Description:</b>	Medical records	
	<b>Type:</b>	Medical Records	

B6

Client: B6  
Address: B6

All Medical Records

Patient: B6  
Breed: Boxer  
DOB: B6

Species: Canine  
Sex: Female

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

Referring Information

B6

Initial Complaint:

Scanned Record

SOAP Text Nov 20 2018 12:24PM - Clinician, Unassigned B6

Initial Complaint:

DCM study

SOAP Text Nov 20 2018 1:12PM - B6

Disposition/Recommendations

Client:  
Patient:

**B6**

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Client:  
Patient:

**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

Client: **B6**  
Veterinarian:  
Patient ID: 345628  
Visit ID:

Patient:	<b>B6</b>
Species:	Canine
Breed:	Boxer
Sex:	Female
Age:	<b>B6</b> years Old

**Lab Results Report**

11/20/2018 5:45:57 PM

Accession ID: **B6**

Test	Results	Reference Range	Units
Troponin I Research -	<b>B6</b>	0 - 0.08	mg/dl



3/12

**B6**

Printed Tuesday, December 04, 2018

Client: **B6**  
Patient:

**B4** BNP - 11/20/2018

**B4** Reference Laboratories

Client: **B6**

Client: **B6**  
Patient:  
Species: CANINE  
Breed: BOXER  
Gender: FEMALE  
Age: 3Y

Date: 11/20/2018  
Requisition #: 354678  
Accession #: **B6**  
Ordered by: **B6**

**B4** VetConnect 1-888-433-9967  
TUFTS UNIVERSITY  
200 WESTBORO RD  
NORTH GRAFTON, Massachusetts 01536  
508-839-5395  
Account #88933

CARDIOPET proBNP- CANINE

Test	Result	Reference Range	Low	Normal	High
CARDIOPET proBNP -CANINE	<b>B6</b>	0 - 900 pmol/L	HIGH	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Comments:

1. Cardiopet proBNP 901 - 1500 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.

Client:  
Patient:

**B6**

**Gastrointestinal Lab Texas A&M 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

<b>B6</b> Tufts University-Clinical Pathology Lab Attn: <b>B6</b> 200 Westboro Road North Grafton, MA 01536 USA	<b>Phone:</b> 508 887 4669 <b>Fax:</b> 9 508 839 7936 <b>Animal Name:</b> <b>Owner Name:</b> <b>Species:</b> Canine <b>Date Received:</b> Nov 27, 2018	<b>B6</b>
--	---	-----------

**Tufts University-Clinical Pathology Lab**  
**Tracking Number: 1811200085**

**GI Lab Accession: B6**

<u>Test</u>	<u>Result</u>	<u>Reference Interval</u>	<u>Assay Date</u>
<b>Ultra-Sensitive Troponin I Fasting</b>	<b>B6</b>	≤0.06	11/27/18

Interpretation: **B6**

**B6**

**Comments:**

**B6**  
345628 Canine  
11/20/2018 1:14 PM  
CARDIAC TROPONIN/TEXGI  
SST

**GI Lab Contact Information**

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

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

Client: **B6**  
Patient:

**Gastrointestinal Lab Texas A&M 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**



**Important  
Notices:**

**Ongoing studies**

**B4, B6**

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

**GI Lab Contact Information**

Email: [gilab@cvm.tamu.edu](mailto:gilab@cvm.tamu.edu)  
[vetmed.tamu.edu/gilab](mailto:vetmed.tamu.edu/gilab)



Client:  
Patient:

**B6**

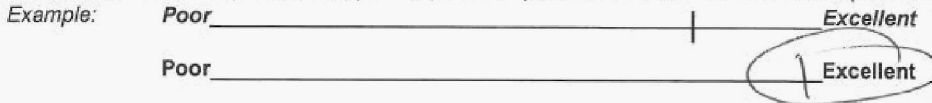
Diet hx

**CARDIOLOGY DIET HISTORY FORM**

Please answer the following questions about your pet

Pet's name: **B6** Owner's name: **B6** Today's date: 20 Nov 2018

1. How would you assess your pet's appetite? (mark the point on the line below that best represents your pet's appetite)



2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)  
 Eats about the same amount as usual     Eats less than usual     Eats more than usual  
 Seems to prefer different foods than usual     Other \_\_\_\_\_

3. Over the last few weeks, has your pet (check one)  
 Lost weight     Gained weight     Stayed about the same weight     Don't know

4. Please list below ALL pet foods, people food, treats, snack, dental chews, rawhides, and any other food item that your pet currently eats. Please include the brand, specific product, and flavor so we know exactly what your pet is eating.

Examples are shown in the table – please provide enough detail that we could go to the store and buy the exact same food.

Food (include specific product and flavor)	Form	Amount	How often?	Fed since
Nutro Grain Free Chicken, Lentil, & Sweet Potato Adult	dry	1 1/2 cup	2x/day	Jan 2018
85% lean hamburger	microwaved	3 oz	1x/week	Jan 2015
Pupperoni original beef flavor	treat	1/2	1x/day	Aug 2015
Rawhide	treat	6 inch twist	1x/week	Dec 2015
<b>EARTHBOEN - MEADOW FEAST</b>	<b>dry</b>	<b>~1 1/2 c.</b>	<b>2x/day</b>	<b>FEB 2016</b>

\*Any additional diet information can be listed on the back of this sheet

5. Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)?  Yes  No If yes, please list which ones and give brands and amounts:

	Brand/Concentration	Amount per day
Taurine <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Carnitine <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Antioxidants <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Multivitamin <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Fish oil <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Coenzyme Q10 <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other (please list): Example: Vitamin C	Nature's Bounty	500 mg tablets - 1 per day
<b>SUPPLEMENT</b>	<b>NUPRO - DOG SUPPLEMENT</b>	<b>1 scoop (~1 TBSP)</b> <b>1-2x/day</b>

6. How do you administer pills to your pet?

- I do not give any medications
- I put them directly in my pet's mouth without food
- I put them in my pet's dog/cat food
- I put them in a Pill Pocket or similar product
- I put them in foods (list foods): bacon or cheese

Client:  
Patient:

**B6**

---

Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**

11/20/2018 2:45:12 PM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**

Client:  
Patient:

**B6**

---

**ECG from Cardio**

---

**B6**

11/20/2018 2:45:12 PM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

---

**B6**

Client: **B6**  
Patient:

**Patient History**

09/27/2018 02:02 PM

11/14/2018 05:13 PM

11/19/2018 06:05 PM

11/20/2018 12:38 PM

11/20/2018 01:10 PM

11/20/2018 04:05 PM

11/20/2018 04:05 PM

11/20/2018 04:06 PM

11/20/2018 04:56 PM

11/20/2018 05:46 PM

11/20/2018 05:46 PM

11/21/2018 11:19 AM

11/26/2018 11:33 AM

**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

11/22/2018

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,

**B6**

DVM, DACVIM (Cardiology)

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; B6  
**Sent:** 12/4/2018 11:04:49 PM  
**Subject:** Earthborn Meadow Feast dry: Lisa Freeman - EON-372828  
**Attachments:** 2059621-report.pdf; 2059621-attachments.zip

A PFR Report has been received and PFR Event [EON-372828] has been created in the EON System.

A "PDF" report by name "2059621-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 "2059621-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-372828  
**ICSR #:** 2059621  
**EON Title:** PFR Event created for Earthborn Meadow Feast dry; 2059621

<b>AE Date</b>	11/20/2018	<b>Number Fed/Exposed</b>	5
<b>Best By Date</b>		<b>Number Reacted</b>	4
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Boxer (German Boxer)		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR; <span style="border: 1px dashed black; padding: 2px;">B6</span> ; DO		

**Product information**

**Individual Case Safety Report Number:** 2059621

**Product Group:** Pet Food

**Product Name:** Earthborn Meadow Feast dry

**Description:** Eating BEG diet (Earthborn) Echo had subjectively reduced contractility; elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months

**Submission Type:** Initial

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

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

**Number of Animals Treated With Product:** 5

**Number of Animals Reacted With Product: 4**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn Meadow Feast dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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**Report Details - EON-372828**

**ICSR:** 2059621  
**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 17:59:30 EST

**Reported Problem:**  
**Problem Description:** Eating BEG diet (Earthborn) Echo had subjectively reduced contractility, 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:** No  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Earthborn Meadow Feast dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:** **Description:** See diet history in records for more details  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** B6  
**Type Of Species:** Dog  
**Type Of Breed:** Boxer (German Boxer)  
**Gender:** Female  
**Reproductive Status:** Intact  
**Pregnancy Status:** Not pregnant  
**Lactation Status:** Not lactating  
**Weight:** 30.3 Kilogram  
**Age:** 3 Years  
**Assessment of Prior Health:** Excellent  
**Number of Animals Given the Product:** 5  
**Number of Animals Reacted:** 4  
**Owner Information:** **Owner Information provided:** Yes  
**Contact:** **Name:** B6  
**Phone:** B6  
**Email:** B6  
**Address:** B6  
United States  
**Healthcare Professional Information:** **Practice Name:** Tufts Cummings School of Veterinary Medicine  
**Contact:** **Name:** Lisa Freeman

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

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 12/4/2018 11:12:44 PM  
**Subject:** Earthborn Meadow Feast dry: Lisa Freeman - EON-372831  
**Attachments:** 2059622-report.pdf; 2059622-attachments.zip

A PFR Report has been received and PFR Event [EON-372831] has been created in the EON System.

A "PDF" report by name "2059622-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 "2059622-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-372831  
**ICSR #:** 2059622  
**EON Title:** PFR Event created for Earthborn Meadow Feast dry; 2059622

<b>AE Date</b>	11/15/2018	<b>Number Fed/Exposed</b>	5
<b>Best By Date</b>		<b>Number Reacted</b>	4
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Boxer (German Boxer)		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2059622

**Product Group:** Pet Food

**Product Name:** Earthborn Meadow Feast dry

**Description:** Daughter diagnosed with reduced cardiac contractility ([B6] is mother of [B6] and [B6] Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months

**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: 5**

**Number of Animals Reacted With Product: 4**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn Meadow Feast dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

---

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Report Details - EON-372831		
ICSR:	2059622	
Type Of Submission:	Initial	
Report Version:	FPSR.FDA.PETF.V.V1	
Type Of Report:	Adverse Event (a symptom, reaction or disease associated with the product)	
Reporting Type:	Voluntary	
Report Submission Date:	2018-12-04 18:08:14 EST	
Reported Problem:	<b>Problem Description:</b> Daughter diagnosed with reduced cardiac contractility ( <b>B6</b> is mother of <b>B6</b> Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months	
	<b>Date Problem Started:</b> 11/15/2018	
	<b>Concurrent Medical Problem:</b> No	
	<b>Outcome to Date:</b> Stable	
Product Information:	<b>Product Name:</b> Earthborn Meadow Feast dry	
	<b>Product Type:</b> Pet Food	
	<b>Lot Number:</b>	
	<b>Package Type:</b> BAG	
	<b>Product Use Information:</b> <b>Description:</b> See diet history in medical record for more info	
	<b>Manufacturer /Distributor Information:</b>	
	<b>Purchase Location Information:</b>	
Animal Information:	<b>Name:</b> <b>B6</b>	
	<b>Type Of Species:</b> Dog	
	<b>Type Of Breed:</b> Boxer (German Boxer)	
	<b>Gender:</b> Female	
	<b>Reproductive Status:</b> Intact	
	<b>Pregnancy Status:</b> Not pregnant	
	<b>Lactation Status:</b> Not lactating	
	<b>Weight:</b> 29.1 Kilogram	
	<b>Age:</b> 3 Years	
	<b>Assessment of Prior Health:</b> Excellent	
	<b>Number of Animals Given the Product:</b> 5	
	<b>Number of Animals Reacted:</b> 4	
	<b>Owner Information:</b>	<b>Owner Information provided:</b> Yes
		<b>Contact:</b> <b>Name:</b> <b>B6</b>
		<b>Phone:</b>
<b>Email:</b>		
<b>Address:</b>	<b>B6</b>	
	United States	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b> Tufts Cummings School of Veterinary Medicine	
	<b>Contact:</b> <b>Name:</b> Lisa Freeman	

			<b>Phone:</b> (508) 887-4523
			<b>Email:</b> lisa.freeman@tufts.edu
		<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman	
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	<b>Contact:</b>	<b>Phone:</b>	5088874523
		<b>Email:</b>	lisa.freeman@tufts.edu
	<b>Permission To Contact Sender:</b>	Yes	
<b>Preferred Method Of Contact:</b>	Email		
<b>Additional Documents:</b>	<b>Attachment:</b>	rpt_medical_record_preview	<b>B6</b> pdf
	<b>Description:</b>	Medical records	
	<b>Type:</b>	Medical Records	

Report Details - EON-372834			
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:	<b>Problem Description:</b> 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		
	<b>Date Problem Started:</b> 11/20/2018		
	<b>Concurrent Medical Problem:</b> No		
	<b>Outcome to Date:</b> Stable		
Product Information:	<b>Product Name:</b> Earthborn Meadow Feast dry		
	<b>Product Type:</b> Pet Food		
	<b>Lot Number:</b>		
	<b>Package Type:</b> BAG		
	<b>Product Use Information:</b> <b>Description:</b> See diet history in medical record for more info		
	<b>Manufacturer /Distributor Information:</b>		
	<b>Purchase Location Information:</b>		
Animal Information:	<b>Name:</b> B6		
	<b>Type Of Species:</b> Dog		
	<b>Type Of Breed:</b> Boxer (German Boxer)		
	<b>Gender:</b> Male		
	<b>Reproductive Status:</b> Neutered		
	<b>Weight:</b> 30.3 Kilogram		
	<b>Age:</b> 3 Years		
	<b>Assessment of Prior Health:</b> Excellent		
	<b>Number of Animals Given the Product:</b> 5		
	<b>Number of Animals Reacted:</b> 4		
	<b>Owner Information:</b>	<b>Owner Information provided:</b> Yes	
		<b>Contact:</b>	<b>Name:</b> B6
			<b>Phone:</b>
			<b>Email:</b>
<b>Address:</b> B6 United States			
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b> Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b> Lisa Freeman	
		<b>Phone:</b> (508) 887-4523	
		<b>Email:</b> lisa.freeman@tufts.edu	

		<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman	
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	<b>Contact:</b>	<b>Phone:</b>	5088874523
		<b>Email:</b>	lisa.freeman@tufts.edu
	<b>Permission To Contact Sender:</b>	Yes	
<b>Preferred Method Of Contact:</b>	Email		
<b>Additional Documents:</b>	<b>Attachment:</b>	<b>B6</b>	records.pdf
	<b>Description:</b>	Medical records	
	<b>Type:</b>	Medical Records	



B6

B6

All Medical Records

B6

Breed: Boxer

B6

Species: Canine  
Sex: Male  
(Neutered)

Referring Information

B6

Initial Complaint:

Scanned Record

SOAP Text Nov 20 2018 12:22PM - B6

Initial Complaint:

DCM Study

SOAP Text Nov 20 2018 1:10PM - B6

Disposition/Recommendations

**B6**

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**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

<b>B6</b>
Veterinarian:
<b>B6</b>
Visit ID:

<b>B6</b>	
Species:	Canine
Breed:	Boxer
Sex:	Male (Neutered)
Age:	<b>B6</b> Years Old

**Lab Results Report**

11/20/2018 5:45:23 PM		Accession ID: 448860	
Test	Results	Reference Range	Units
Troponin I Research - FHSA	<b>B6</b>	0 - 0.08	mg/dl

**B4**

3/13

**B6**

Printed Tuesday, December 04, 2018

**B6**

**B4**

11/20/2018

**B4**

Reference Laboratories

**B6**

**B4**

**B6**

Species: CANINE  
Breed: BOXER  
Gender: MALE NEUTERED  
Age: 3Y

Date: 11/20/2018

**B6**

Ordered by: NOT'S PECIFIED

TIFFS.UNIVERSITY

**B6**

CARDIOPET proBNP- CANINE

Test	Result	Reference Range	Low	Normal	High
CARDIOPET proBNP -CANINE	<b>B6</b>	0 - 900 pmol/L	HIGH		

Comments:

1. Cardiopet proBNP 901 - 1500 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.

**B6**

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

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

**B6**

Species: Canine  
Date Received: Nov 27, 2018

Tufts University-Clinical Pathology Lab  
Tracking Number: 1811200093

GI Lab Accession: **B6**

Test	Result	Reference Interval	Assay Date
Ultra-Sensitive Troponin I Fasting	<b>B6</b>	≤0.06	11/27/18

**B6**

Comments:

**B6**

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

GI Lab Contact Information

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

**B6**

**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**



**Important  
Notices:**

**B4, B6**

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

**GI Lab Contact Information**

Email: [gilab@cvm.tamu.edu](mailto:gilab@cvm.tamu.edu)  
[vetmed.tamu.edu/gilab](mailto:vetmed.tamu.edu/gilab)

**B6**

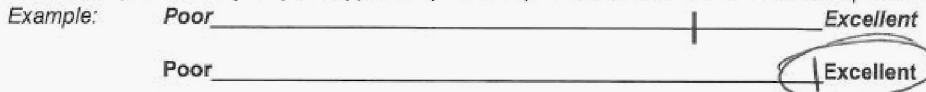
Diet hx

**CARDIOLOGY DIET HISTORY FORM**  
Please answer the following questions about your pet

**B6**

Today's date: 20 NOV 2018

1. How would you assess your pet's appetite? (mark the point on the line below that best represents your pet's appetite)



2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)

- Eats about the same amount as usual
- Eats less than usual
- Eats more than usual
- Seems to prefer different foods than usual
- Other \_\_\_\_\_

3. Over the last few weeks, has your pet (check one)

- Lost weight
- Gained weight
- Stayed about the same weight
- Don't know

4. Please list below ALL pet foods, people food, treats, snack, dental chews, rawhides, and any other food item that your pet currently eats. Please include the brand, specific product, and flavor so we know exactly what you pet is eating.

Examples are shown in the table – please provide enough detail that we could go to the store and buy the exact same food.

Food (include specific product and flavor)	Form	Amount	How often?	Fed since
Nutro Grain Free Chicken, Lentil, & Sweet Potato Adult	dry	1 1/2 cup	2x/day	Jan 2018
85% lean hamburger	microwaved	3 oz	1x/week	Jan 2015
Pupperoni original beef flavor	treat	1/2	1x/day	Aug 2015
Rawhide	treat	6 inch twist	1x/week	Dec 2015
EARTHBOEN - MEADOWFEAST	dry	~ 1 1/2c +	2x DAY	FEB 2016

\*Any additional diet information can be listed on the back of this sheet

5. Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)?  Yes  No If yes, please list which ones and give brands and amounts:

	Brand/Concentration	Amount per day
Taurine <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Carnitine <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Antioxidants <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Multivitamin <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Fish oil <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Coenzyme Q10 <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Other (please list): Example: Vitamin C	_____	_____
<u>SUPPLEMENT</u>	<u>NATURE'S BOUNTY</u> <u>NUPRO - DOG SUPPLEMENT</u>	<u>500 mg tablets - 1 per day</u> <u>1 SCOOP (~ 1 TBSP) 1-2x DAY</u>

6. How do you administer pills to your pet?

- I do not give any medications
- I put them directly in my pet's mouth without food
- I put them in my pet's dog/cat food
- I put them in a Pill Pocket or similar product
- I put them in foods (list foods): BOLOGNA or CHEESE

**B6**

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**B6**

ECG from Cardio

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**B6**

11/20/2018 3:27:51 PM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**

**B6**

ECG from Cardio

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**B6**

11/20/2018 3:28:15 PM

Page 1 of 2

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**

**B6**

ECG from Cardio

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**B6**

11/20/2018 3:28:15 PM

Page 2 of 2

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**

**B6**

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**Patient History**

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11/20/2018 11:45 AM

11/20/2018 12:23 PM

11/20/2018 01:11 PM

11/20/2018 04:04 PM

11/20/2018 04:04 PM

11/20/2018 04:04 PM

11/20/2018 04:55 PM

11/20/2018 05:45 PM

11/20/2018 05:46 PM

11/21/2018 11:25 AM

11/26/2018 11:33 AM

**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

**B6**, Male (Neutered)  
Canine Boxer Fawn  
433149

11/22/2018

**B6**

Thank you for referring **B6** with their **B6**

If you have any questions, or concerns, please contact us at **B6**

Thank you,

**B6**

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; B6  
**Sent:** 12/5/2018 12:00:38 AM  
**Subject:** Earthborn Meadow Feast dry: Lisa Freeman - EON-372842  
**Attachments:** 2059630-report.pdf; 2059630-attachments.zip

A PFR Report has been received and PFR Event [EON-372842] has been created in the EON System.

A "PDF" report by name "2059630-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 "2059630-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-372842

**ICSR #:** 2059630

**EON Title:** PFR Event created for Earthborn Meadow Feast dry; 2059630

<b>AE Date</b>	11/29/2018	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Mixed (Dog)		
<b>Age</b>	8 Years		
<b>District Involved</b>	PFR <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2059630

**Product Group:** Pet Food

**Product Name:** Earthborn Meadow Feast dry

**Description:** DCM and CHF (cough developed earlier but diagnosed 11/29/18) Eating BEG diet Taurine pending Owner changing diet and we will recheck Note: listed as B6 in medical record

**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**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn Meadow Feast 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:

**B6**

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

**B6**

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**Report Details - EON-372842**

**ICSR:** 2059630  
**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 18:53:33 EST

**Reported Problem:**  
**Problem Description:** DCM and CHF (cough developed earlier but diagnosed 11/29/18) Eating BEG diet Taurine pending Owner changing diet and we will recheck Note: listed as **B6** in medical record  
**Date Problem Started:** 11/29/2018  
**Concurrent Medical Problem:** Yes  
**Pre Existing Conditions:** Hypothyroidism  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Earthborn Meadow Feast dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:** **Description:** See diet history in medical record for more info I have bag of food if interested in sample  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** **B6**  
**Type Of Species:** Dog  
**Type Of Breed:** Mixed (Dog)  
**Gender:** Female  
**Reproductive Status:** Neutered  
**Weight:** 19.9 Kilogram  
**Age:** 8 Years  
**Assessment of Prior Health:** Excellent  
**Number of Animals Given the Product:** 1  
**Number of Animals Reacted:** 1  
**Owner Information:** **Owner Information provided:** Yes  
**Contact:** **Name:** **B6**  
**Phone:**  
**Email:**  
**Address:** **B6**  
United States  
**Healthcare Professional Information:** **Practice Name:** Tufts Cummings School of Veterinary Medicine  
**Contact:** **Name:** Lisa Freeman  
**Phone:** (508) 887-4523



			<b>Email:</b> lisa.freeman@tufts.edu	
		<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States	
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			
<b>Additional Documents:</b>	<b>Attachment:</b>	rpt_medical_record_preview.pdf		
	<b>Description:</b>	Medical records		
	<b>Type:</b>	Medical Records		

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 12/5/2018 1:37:23 AM  
**Subject:** Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs: [B6] - EON-372864  
**Attachments:** 2059643-report.pdf

A PFR Report has been received and PFR Event [EON-372864] has been created in the EON System.

A "PDF" report by name "2059643-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-372864

**ICSR #:** 2059643

**EON Title:** PFR Event created for Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs; 2059643

<b>AE Date</b>	09/01/2018	<b>Number Fed/Exposed</b>	2
<b>Best By Date</b>		<b>Number Reacted</b>	2
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Worse/Declining/Deteriorating
<b>Breed</b>	Poodle - Miniature		
<b>Age</b>	13 Years		
<b>District Involved</b>	PFR-[B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2059643

**Product Group:** Pet Food

**Product Name:** Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs

**Description:** [B6] started coughing and passing out. The vet found that he has an enlarged heart.

**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:** Worse/Declining/Deteriorating

**Number of Animals Treated With Product:** 2

**Number of Animals Reacted With Product:** 2

Product Name	Lot Number or ID	Best By Date
Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs		

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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**Report Details - EON-372864**

ICSR: 2059643  
 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 20:27:27 EST  
 Reporter is the Animal Owner: Yes

**Reported Problem:**  
**Problem Description:** B6 started coughing and passing out. The vet found that he has an enlarged heart.  
**Date Problem Started:** 09/01/2018  
**Concurrent Medical Problem:** No  
**Outcome to Date:** Worse/Declining/Deteriorating

**Product Information:**  
**Product Name:** Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Package Size:** 35 Pound  
**Purchase Date:** 06/01/2017  
**Number Purchased:** 1  
**Possess Unopened Product:** No  
**Possess Opened Product:** No  
**Storage Conditions:** In a cool garage in the bag in a plastic bin and in a metal covered container, in the house.  
**Product Use Information:**  
**Description:** Feed to the dogs, sometimes with a little water.  
**Last Exposure Date:** 12/03/2018  
**Product Use Stopped After the Onset of the Adverse Event:** No  
**Perceived Relatedness to Adverse Event:** Probably related  
**Other Foods or Products Given to the Animal During This Time Period:** No  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:** Name: Costco  
 Address: B6 United States

**Animal Information:**  
**Name:** B6  
**Type Of Species:** Dog  
**Type Of Breed:** Poodle - Miniature

	<b>Gender:</b> Male
	<b>Reproductive Status:</b> Neutered
	<b>Weight:</b> 10 Pound
	<b>Age:</b> 13 Years
	<b>Assessment of Prior Health:</b> Excellent
	<b>Number of Animals Given the Product:</b> 2
	<b>Number of Animals Reacted:</b> 2
	<b>Owner Information:</b>
	<b>Healthcare Professional Information:</b>
	<b>Practice Name:</b> B6
	<b>Contact:</b>
	<b>Name:</b> B6
	<b>Phone:</b> B6
	<b>Address:</b> B6
	United States
<b>Sender Information:</b>	<b>Name:</b> B6
	<b>Address:</b> B6
	United States
	<b>Contact:</b>
	<b>Phone:</b> B6
	<b>Email:</b> B6
	<b>Reporter Wants to Remain Anonymous:</b> No
	<b>Permission To Contact Sender:</b> Yes
	<b>Preferred Method Of Contact:</b> Email
	<b>Reported to Other Parties:</b> None
<b>Additional Documents:</b>	

---

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; B6  
**Sent:** 12/5/2018 12:16:14 AM  
**Subject:** Pure Vita Holistic Pet Foods Turkey and Sweet Potato Entree; EON-372846 B6  
**Attachments:** 2059634-report.pdf

A PFR Report has been received and PFR Event [EON-372846] has been created in the EON System.

A "PDF" report by name "2059634-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-372846

**ICSR #:** 2059634

**EON Title:** PFR Event created for Pure Vita Holistic Pet Foods Turkey and Sweet Potato Entree; 2059634

<b>AE Date</b>	05/05/2018	<b>Number Fed/Exposed</b>	2
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Retriever - Golden		
<b>Age</b>	6 Years		
<b>District Involved</b>			

**Product information**

**Individual Case Safety Report Number:** 2059634

**Product Group:** Pet Food

**Product Name:** Pure Vita Holistic Pet Foods Turkey and Sweet Potato Entree

**Description:** Sudden collapse witnessed in May 2018. Seen by veterinarian same day. Canine cardiologist diagnosed Dilated Cardiac Myopathy. Cardiologist strongly suspected grain free diet. Dog had been on grain free diet since 1 year of age. Prognosis 2 - 6 months.

**Submission Type:** Initial

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

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

**Number of Animals Treated With Product:** 2

**Number of Animals Reacted With Product: 1**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Pure Vita Holistic Pet Foods Turkey and Sweet Potato Entree		

**Sender information**

**B6**

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

**B6**

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

**B6**

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---

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification B6  
**Sent:** 12/4/2018 11:33:18 PM  
**Subject:** The Honest Kitchen Grain Free Chicken Recipe: B6  
EON-372839  
**Attachments:** 2059627-report.pdf

A PFR Report has been received and PFR Event [EON-372839] has been created in the EON System.

A "PDF" report by name "2059627-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-372839

**ICSR #:** 2059627

**EON Title:** PFR Event created for The Honest Kitchen Grain Free Chicken Recipe; 2059627

<b>AE Date</b>	06/01/2018	<b>Number Fed/Exposed</b>	
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Other Canine/dog		
<b>Age</b>	8 Years		
<b>District Involved</b>	PFR <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2059627

**Product Group:** Pet Food

**Product Name:** The Honest Kitchen Grain Free Chicken Recipe

**Description:** June 2018- Seen by vet (dehydration) Around September 2018 - Seen by vet for rabies and batella shot September 2018 - Seen by Vet multiple times for dehydration, coughing and weekends. This went on for a month. Heart murmur detected. October 2018 - Seen by vet for dehydration, coughing. X-ray taken. Heart murmur confirmed. Placed on two heart medicines. Told she must take for remainder of her life.

**Submission Type:** Initial

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

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



**Number of Animals Reacted With Product: 1**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
The Honest Kitchen Grain Free Chicken Recipe		

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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**Report Details - EON-372839**

<b>ICSR:</b>	2059627			
<b>Type Of Submission:</b>	Initial			
<b>Report Version:</b>	FPSR.FDA.PETF.V.V1			
<b>Type Of Report:</b>	Adverse Event (a symptom, reaction or disease associated with the product)			
<b>Reporting Type:</b>	Voluntary			
<b>Report Submission Date:</b>	2018-12-04 18:23:32 EST			
<b>Reporter is the Animal Owner:</b>	Yes			
<b>Reported Problem:</b>	<b>Problem Description:</b>	June 2018- Seen by vet (dehydration) Around September 2018 - Seen by vet for rabies and batella shot September 2018 - Seen by Vet multiple times for dehydration, coughing and weekends. This went on for a month. Heart murmur detected. October 2018 - Seen by vet for dehydration, coughing. X-ray taken. Heart murmur confirmed. Placed on two heart medicines. Told she must take for remainder of her life.		
	<b>Date Problem Started:</b>	06/01/2018		
	<b>Date of Recovery:</b>	11/01/2018		
	<b>Concurrent Medical Problem:</b>	No		
	<b>Outcome to Date:</b>	Stable		
<b>Product Information:</b>	<b>Product Name:</b>	The Honest Kitchen Grain Free Chicken Recipe		
	<b>Product Type:</b>	Pet Food		
	<b>Lot Number:</b>			
	<b>Package Type:</b>	BAG		
	<b>Purchase Date:</b>	09/01/2018		
	<b>Number Purchased:</b>	1		
	<b>Possess Unopened Product:</b>	No		
	<b>Possess Opened Product:</b>	No		
	<b>Storage Conditions:</b>	In bag in Kitchen		
	<b>Product Use Information:</b>	<b>Description:</b>	Feed to my dog	
		<b>Time Interval between Product Use and Adverse Event:</b>	3 Months	
		<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes	
		<b>Adverse Event Abate After Product Stop:</b>	Not Applicable	
		<b>Product Use Started Again:</b>	No	
<b>Perceived Relatedness to Adverse Event:</b>		Definitely related		
<b>Other Foods or Products Given to the Animal During This Time Period:</b>		No		
<b>Manufacturer /Distributor Information:</b>				
<b>Purchase Location</b>	<b>Name:</b>	<b>B6</b>		

	<b>Information:</b>	<b>Address:</b>	<b>B6</b>
			United States
<b>Animal Information:</b>	<b>Name:</b>	<b>B6</b>	
	<b>Type Of Species:</b>	Dog	
	<b>Type Of Breed:</b>	Other Canine/dog	
	<b>Gender:</b>	Female	
	<b>Reproductive Status:</b>	Intact	
	<b>Pregnancy Status:</b>	Not Pregnant	
	<b>Lactation Status:</b>	Not lactating	
	<b>Weight:</b>	8 Pound	
	<b>Age:</b>	8 Years	
	<b>Assessment of Prior Health:</b>	Excellent	
	<b>Number of Animals Reacted:</b>	1	
	<b>Owner Information:</b>		
	<b>Healthcare Professional Information:</b>		
<b>Sender Information:</b>	<b>Name:</b>	<b>B6</b>	
	<b>Address:</b>	<b>B6</b>	
			United States
	<b>Contact:</b>	<b>Phone:</b>	<b>B6</b>
		<b>Email:</b>	
	<b>Reporter Wants to Remain Anonymous:</b>	No	
	<b>Permission To Contact Sender:</b>	Yes	
	<b>Preferred Method Of Contact:</b>	Phone	
	<b>Reported to Other Parties:</b>	None	
<b>Additional Documents:</b>			

---

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; **B6**  
**Sent:** 12/5/2018 12:32:29 AM  
**Subject:** Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish **B6**  
**B6** EON-372851  
**Attachments:** 2059636-report.pdf

A PFR Report has been received and PFR Event [EON-372851] has been created in the EON System.

A "PDF" report by name "2059636-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-372851

**ICSR #:** 2059636

**EON Title:** PFR Event created for Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish Herring & Salmon; 2059636

<b>AE Date</b>	01/01/2016	<b>Number Fed/Exposed</b>	6
<b>Best By Date</b>		<b>Number Reacted</b>	2
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Worse/Declining/Deteriorating
<b>Breed</b>	Chihuahua		
<b>Age</b>	15 Years		
<b>District Involved</b>	PFR <b>B6</b> DO		

**Product information**

**Individual Case Safety Report Number:** 2059636

**Product Group:** Pet Food

**Product Name:** Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish, Herring & Salmon

**Description:** 2 years ago my dog was diagnosed with canine dilated cardiomyopathy. All of my pets had been on wellness grain free food because the vet said it was good for their skin.

**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:** Worse/Declining/Deteriorating

**Number of Animals Treated With Product:** 6

**Number of Animals Reacted With Product: 2**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish, Herring & Salmon		

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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Report Details - EON-372851		
ICSR:	2059636	
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 19:24:26 EST	
Reporter is the Animal Owner:	Yes	
Reported Problem:	<b>Problem Description:</b> 2 years ago my dog was diagnosed with canine dilated cardiomyopathy. All of my pets had been on wellness grain free food because the vet said it was good for their skin.	
	<b>Date Problem Started:</b> 01/01/2016	
	<b>Concurrent Medical Problem:</b> No	
	<b>Outcome to Date:</b> Worse/Declining/Deteriorating	
Product Information:	<b>Product Name:</b> Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish, Herring & Salmon	
	<b>Product Type:</b> Pet Food	
	<b>Lot Number:</b>	
	<b>Package Type:</b> BAG	
	<b>Package Size:</b> 26 Pound	
	<b>Purchase Date:</b> 01/01/2017	
	<b>Number Purchased:</b> 1	
	<b>Possess Unopened Product:</b> No	
	<b>Possess Opened Product:</b> No	
	<b>Storage Conditions:</b> Stored in dog food container	
	<b>Product Use Information:</b>	<b>Description:</b> Fed daily to pets
		<b>Perceived Relatedness to Adverse Event:</b> Definitely related
		<b>Other Foods or Products Given to the Animal During This Time Period:</b> No
<b>Manufacturer /Distributor Information:</b>		
<b>Purchase Location Information:</b>	<b>Name:</b> Chewy.com	
	<b>Address:</b> United States	
Animal Information:	<b>Name:</b> B6	
	<b>Type Of Species:</b> Dog	
	<b>Type Of Breed:</b> Chihuahua	
	<b>Gender:</b> Mixed Population of Female and Male	
	<b>Reproductive Status:</b> Neutered	
	<b>Weight:</b> 6 Pound	
	<b>Age:</b> 15 Years	
	<b>Assessment of Prior Health:</b> Good	
<b>Number of Animals Given the Product:</b> 6		

	<b>Number of Animals Reacted:</b>	2	
	<b>Owner Information:</b>		
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	B6	
	<b>Contact:</b>	<b>Name:</b>	
		<b>Phone:</b>	B6
	<b>Address:</b>	B6	
		United States	
	<b>Type of Veterinarian:</b>	Primary/regular veterinarian	
	<b>Date First Seen:</b>	11/29/2018	
	<b>Permission to Release Records to FDA:</b>	Yes	
<b>Sender Information:</b>	<b>Name:</b>	B6	
	<b>Address:</b>	B6	
		United States	
	<b>Contact:</b>	<b>Phone:</b>	B6
		<b>Email:</b>	
	<b>Permission To Contact Sender:</b>	Yes	
	<b>Preferred Method Of Contact:</b>	Email	
	<b>Reported to Other Parties:</b>	None	
<b>Additional Documents:</b>			

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**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 11/11/2018 1:55:59 AM  
**Subject:** DCM cases- Lisa Freeman and/or Tufts-related- 11/10/18  
**Attachments:** Earthborn grain free weight management dry: Lisa Freeman - EON-370708; Nutro Ultra adult dry dog food the superfood plate (chicken: Lisa Freeman - EON-370712; Pure Balance Salmon and Pea dry: Lisa Freeman - EON-370760; Rachel Ray peak open range recipe (beef: Lisa Freeman - EON-370720; Zignature trout & salmon dry: Lisa Freeman - EON-370715; Zignature Trout & Salmon Meal Limited Ingredient Formula Grain-Free Dry Dog Food: B6 EON-370762; Zignature trout and salmon dry: Lisa Freeman - EON-370713

David Rotstein, DVM, MPVM, Dipl. ACVP  
CVM Vet-LIRN Liaison  
CVM OSC/DC/CERT  
7519 Standish Place

B6



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**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 11/9/2018 10:08:47 PM  
**Subject:** Earthborn grain free weight management dry: Lisa Freeman - EON-370708  
**Attachments:** 2058678-report.pdf; 2058678-attachments.zip

A PFR Report has been received and PFR Event [EON-370708] has been created in the EON System.

A "PDF" report by name "2058678-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 "2058678-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-370708

**ICSR #:** 2058678

**EON Title:** PFR Event created for Earthborn grain free weight management dry; 2058678

<b>AE Date</b>	[B6]	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Doberman Pinscher		
<b>Age</b>	[B6] years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2058678

**Product Group:** Pet Food

**Product Name:** Earthborn grain free weight management dry

**Description:** Diagnosed with DCM, CHF, and atrial fibrillation [B6] Currently hospitalized. Taurine submitted to UC Davis. Unclear if related to diet, given breed but eating boutique, grain-free diet. Only prior history is traumatic injury in 2015.

**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**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn grain free weight management dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**B6**

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

**B6**

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

**B6**

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**Report Details - EON-370708**

ICSR: 2058678  
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: 2018-11-09 16:57:32 EST

**Reported Problem:**  
**Problem Description:** Diagnosed with DCM, CHF, and atrial fibrillation. **B6** Currently hospitalized. Taurine submitted to UC Davis. Unclear if related to diet, given breed but eating boutique, grain-free diet. Only prior history is traumatic injury in 2015.  
**Date Problem Started:** **B6**  
**Concurrent Medical Problem:** No  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Earthborn grain free weight management dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:**  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** **B6**  
**Type Of Species:** Dog  
**Type Of Breed:** Doberman Pinscher  
**Gender:** Male  
**Reproductive Status:** Neutered  
**Weight:** 45.2 Kilogram  
**Age:** **B6**  
**Assessment of Prior Health:** Excellent  
**Number of Animals Given the Product:** 1  
**Number of Animals Reacted:** 1  
**Owner Information:**  
**Owner Information provided:** Yes  
**Contact:** Name: **B6**  
Phone: **B6**  
Email: **B6**  
**Address:** **B6**  
**Healthcare Professional Information:**  
**Practice Name:** Tufts Cummings School of Veterinary Medicine  
**Contact:** Name: Lisa Freeman  
Phone: (508) 887-4523  
Email: lisa.freeman@tufts.edu

		<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman	
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	<b>Contact:</b>	<b>Phone:</b>	5088874523
		<b>Email:</b>	lisa.freeman@tufts.edu
	<b>Permission To Contact Sender:</b>	Yes	
<b>Preferred Method Of Contact:</b>	Email		
<b>Additional Documents:</b>	<b>Attachment:</b>	compiled medical record	<b>B6</b> .pdf
	<b>Description:</b>	Medical records	
	<b>Type:</b>	Medical Records	

B6

B6

Medical Record for B6

Patient: B6  
Breed: Doberman Pinscher  
DOB: B6

Species: Canine  
Sex: Male  
(Neutered)

Referring Information

B6

Initial Complaint:

Emergency

SOAP Text B6 6:41PM - Clinician, Unassigned FHSA

**Subjective**

NEW VISIT (ER)

B6

HISTORY:

Signalment: 8 yo NM Doberman

Current history:

Patient presented as referral from rDVM for CHF and suspected DCM. Yesterday, owner noted that when playing fetch, patient yelped while running back and immediately went inside to lay down. Patient was lethargic remainder of evening, but went on 30 minute walk and was willing to eat dinner. Owners noticed he was intermittently breathing

**B6**

heavier last night with a dry cough which owners mistook initially as him attempting to vomit. This morning, patient not willing to eat breakfast or go for walk. Maintains thirst.

Was evaluated by rDVM today, **B6** or clinical signs. Radiographs showed cardiomegaly and an arrhythmia was ausculted. ECG indicated atrial fibrillation. Patient was given 2 doses of furosemide (4mg/kg total) and referred here for cardiology workup.

Patient has no known history of heart disease, collapse, weakness, or respiratory changes. Patient diagnosed with idiopathic head shake 1 year ago.

Prior medical history: No known heart disease until today.

Current medications: Desaquin

Diet: earth borne grain free mixed with wellness diet wet food.

Vaccination status/flea & tick preventative use: HW and F&T preventatives.

Travel history: unknown

EXAM:

**B6**

ASSESSMENT:

A1: CHF secondary to DCM

PLAN:

**B6**

**B6**

**B6**

**Diagnostics completed:**

ECG on intake-- Atrial fibrillation

AFAST/TFAST-- no FF, enlargement of chambers, consistent with DCM

NOVA-- no significant findings

PCV/TS-- 65/7

**Diagnostics pending:**

**B6**

**Client communication:**

Confirmed history with owners. Discussed that on presentation arrhythmia is still present. Recommended hospitalization with bloodwork, monitoring, initiating medications, and echocardiogram. O ok with plan. Discussed resuscitation code, o hesitant but settled on red code. Discussed that new dr would take over in AM and that no updates between now and then is good news.

Introduced o to Dr. Freeman, o intersted in being enrolled in DCM study.

Deposit & estimate status: 2500

Resuscitation code (if admitting to ICU): Red

SOAP approved (DVM to sign): **B6** DVM

SOAP Text **B6** 7:16AM - Clinician, Unassigned FHSA

**Subjective**

**History**

**B6** is an 8yo MN Dobie presented as referral yesterday for CHF and suspected DCM. Owner took to rDVM after a day of lethargy, inappetance and possible coughing episode. Evaluated by rDVM **B6** at that time radiographs showed cardiomegaly and ECG indicated atrial fibrillation. Patient was given 2 doses of furosemide (4mg/kg total) and referred here. Patient has no known history of heart disease, collapse, weakness, or respiratory changes. Patient diagnosed with idiopathic head shake 1 year ago. Current diet: Earth borne grain-free mixed with wellness diet wet food. Medications include Dasequin, HW and F&T preventatives.

**B6**

**B6**

**B6**



**B6**

**B6**

**B6**

SOAP Text

**B6**

7:19AM - Clinician, Unassigned FHSA

Subjective

**B6**

**B6**

**B6**

**Disposition/Recommendations**

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**B6**

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**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

Veterinarian:

**B6**

Visit ID:

**B6**

Species:	Canine
Breed:	Doberman Pinscher
Sex:	Male (Neutered)
Age:	<b>B6</b> Years Old

**Lab Results Report**

<b>CBC, Comprehensive, Sm Animal</b>		<b>B6</b>	8:12:13 PM	<b>B6</b>
Test	Results	Reference Range	Units	
MPV (ADVIA)	<b>B6</b>	8.29 - 13.2	fL	
RETICS (ABS) ADVIA		14.7 - 113.7	K/uL	
HCT(ADVIA)		39 - 55	%	
WBC (ADVIA)		4.4 - 15.1	K/uL	
PLTCRT		0.129 - 0.403	%	
PLT(ADVIA)		173 - 486	K/uL	
MCV(ADVIA)		64.5 - 77.5	fL	
MCHC(ADVIA)		31.9 - 34.3	g/dL	
RDW (ADVIA)		11.9 - 15.2		
MCH(ADVIA)		21.3 - 25.9	pg	
RETIC(ADVIA)		0.2 - 1.6	%	
COMMENTS (HEMATOLOGY)		0 - 0		
HGB(ADVIA)		13.3 - 20.5	g/dL	
RBC(ADVIA)		5.8 - 8.5	M/uL	

<b>Chemistry Profile - Small Animal (Pa</b>		<b>B6</b>	8:12:13 PM	<b>B6</b>
Test	Results	Reference Range	Units	
TRIGLYCERIDES	<b>B6</b>	30 - 338	mg/dl	
CHOLESTEROL		82 - 355	mg/dL	

**B4**

8/49

**B6**

Printed Friday, November 09, 2018

**B6**

SODIUM		140 - 150	mEq/L
CALCIUM2		9.4 - 11.3	mg/dL
GLOBULINS		2.3 - 4.2	g/dL
POTASSIUM		3.7 - 5.4	mEq/L
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
PHOSPHORUS		2.6 - 7.2	mg/dL
T BILIRUBIN		0.1 - 0.3	mg/dL
MAGNESIUM 2+		1.8 - 3	mEq/L
ALBUMIN		2.8 - 4	g/dL
GLUCOSE		67 - 135	mg/dL
CK		22 - 422	U/L
CHLORIDE		106 - 116	mEq/L
T. PROTEIN		5.5 - 7.8	g/dL
GGT		0 - 10	U/L
ALT		14 - 86	U/L
tCO2 (BICARB)		14 - 28	mEq/L
AMYLASE		409 - 1250	U/L
D.BILIRUBIN		0 - 0.1	mg/dL
NA/K		29 - 40	
AGAP		8 - 19	
OSMOLALITY (CALCULATED)		291 - 315	mmol/L
AST		9 - 54	U/L
CREATININE		0.6 - 2	mg/dL
A/G RATIO		0.7 - 1.6	
UREA		8 - 30	mg/dL

**B6**

Microscopic Exam of Blood Smear (A)		<b>B6</b>	8:12:13 PM	<b>B6</b>
Test	Results	Reference Range	Units	
MONOS (ABS)ADVIA		0.1 - 1.5	K/uL	
L YMPHS%		7 - 47	%	
MONOS%		1 - 15	%	
SEGS%		43 - 86	%	
L YMPHS (ABS)ADVIA		1 - 4.8	K/uL	
WBC MORPHOLOGY		0 - 0		
No Morphologic Abnormalities				
SEGS (AB)ADVIA		2.8 - 11.5	K/ul	

**B6**

**B4**

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**B6**

Printed Friday, November 09, 2018

**B6**

POIKILOCYTOSIS

Occasional

0 - 0

**Nova Full Panel-ICU**

**B6**

8:12:13 PM

**B6**

Test	Results	Reference Range	Units
nMG	<b>B6</b>	0 - 0	mmol/L
CA (ionized)		1.17 - 1.38	mmol/L
BEecf		0 - 0	mmol/L
BEb		0 - 0	mmol/L
TCO2 (POC)		0 - 0	mmol/L
GLUCOSE (POC)		80 - 120	mg/dL
MG (POC)		0.1 - 0.4	mmol/L
HCT (POC)		38 - 48	%
CREAT (POC)		0.2 - 2.1	mg/dL
SO2%		94 - 100	%
K (POC)		3.6 - 4.8	mmol/L
FiO2		0 - 0	%
NOVA SAMPLE		0 - 0	
CAMG		0 - 0	mol/mol
BUN (POC)		12 - 28	mg/dL
NA (POC)		140 - 154	mmol/L
LACTATE		0 - 2	mmol/L
GAP		0 - 0	mmol/L
nCA		0 - 0	mmol/L
CL(POC)		109 - 120	mmol/L
HB (POC)		12.6 - 16	g/dL
A		0 - 0	mmHg
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
PH		7.337 - 7.467	
PCO2	36 - 44	mmHg	
PO2	80 - 100	mmHg	
HCO3	18 - 24	mmol/L	

**None**

**B6**

8:12:13 PM

**B6**

Test	Results	Reference Range	Units
TS (FHSA)	<b>B6</b>	0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%

**B4**

10/49

**B6**

Printed Friday, November 09, 2018

**B6**

TS (FHSA) 7 0 - 0 g/dl

**B6** 8:12:13 PM

**B6**

Test	Results	Reference Range	Units
Troponin I (i-STAT) Cardiology - FHSA	<b>B6</b>	0 - 0	ng/ml

**Chemistry 21 (Cobas)**

**B6** 8:12:13 PM

Accession ID: **B6**

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

**None**

**B6** 8:12:13 PM

**B6**

Test	Results	Reference Range	Units
TS (FHSA)	<b>B6</b>	0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%
TS (FHSA)	<b>B6</b>	0 - 0	g/dl

**B4**

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**B4**

Printed Friday, November 09, 2018

**B6**

**B4**

**B4**

**B6**

**B4**

**B6**

Species: CANINE  
Breed: DOBERMAN\_PINSCH  
Gender: MALE  
Age: 8Y

Date: **B6**  
Requisition #: 1A  
Ordered by: **B6**

TUFTS UNIVERSITY  
200 WESTBORO RD  
NORTH GRAFTON, Massachusetts 01536  
508-839-5395

Account #88933

CARDIOPET proBNP- CANINE

Test	Result	Reference Range	Low	Normal	High
CARDIOPET proBNP- CANINE	<b>B6</b>	0 - 900 pmol/L	HIGH	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Comments:

1. Cardiopet proBNP >1800pmol/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.



**B6**

**Vitals Results**

7:10:41 PM  
7:15:25 PM  
7:15:26 PM  
7:15:27 PM  
7:15:28 PM  
8:50:18 PM  
8:59:52 PM  
9:00:02 PM  
9:00:03 PM  
9:00:07 PM  
9:04:11 PM  
9:41:42 PM  
9:42:35 PM  
9:42:36 PM  
11:05:47 PM  
11:05:48 PM  
11:05:58 PM  
11:27:54 PM  
11:28:35 PM  
11:28:49 PM  
12:16:11 AM  
12:16:12 AM  
12:16:24 AM  
12:25:01 AM  
1:03:51 AM  
1:03:52 AM  
1:04:30 AM  
1:57:40 AM  
1:58:50 AM  
1:58:51 AM  
1:59:44 AM  
3:04:07 AM  
3:04:08 AM  
3:06:27 AM  
3:32:24 AM  
3:34:43 AM  
4:06:30 AM  
4:06:31 AM  
4:06:49 AM  
5:00:14 AM

**B6**

**B6**

**B6**

**B6**

**Vitals Results**

5:24:57 AM  
5:24:58 AM  
5:25:15 AM  
5:46:22 AM  
5:46:49 AM  
5:46:50 AM  
6:31:20 AM  
6:31:21 AM  
6:31:40 AM  
7:12:38 AM  
7:12:54 AM  
7:13:08 AM  
7:13:09 AM  
7:13:51 AM  
7:13:59 AM  
7:16:21 AM  
7:16:22 AM  
7:16:23 AM  
9:19:06 AM  
9:36:24 AM  
9:36:25 AM  
9:58:09 AM  
9:58:10 AM  
10:06:41 AM  
10:07:04 AM  
10:15:59 AM  
10:16:39 AM  
11:31:33 AM  
11:31:34 AM  
11:33:55 AM  
11:37:52 AM  
12:02:52 PM  
12:02:53 PM  
12:03:56 PM  
1:11:16 PM  
1:13:44 PM  
1:13:45 PM  
1:16:08 PM  
1:38:13 PM  
1:51:30 PM  
1:51:31 PM

**B6**

**B6**

**B6**

**Vitals Results**

3:03:10 PM  
3:10:58 PM  
3:10:59 PM  
3:36:48 PM  
3:37:03 PM  
4:33:09 PM  
4:33:31 PM  
4:33:32 PM  
5:08:41 PM  
5:08:42 PM  
5:18:43 PM  
6:31:11 PM  
6:31:46 PM  
6:31:47 PM  
6:31:55 PM  
6:32:03 PM  
9:01:47 PM  
9:02:04 PM  
9:02:15 PM  
9:32:43 PM  
9:32:57 PM  
9:33:11 PM  
9:33:12 PM  
9:45:07 PM  
11:17:03 PM  
11:18:05 PM  
11:18:06 PM  
11:58:17 PM  
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11:59:06 PM  
12:45:06 AM  
12:45:29 AM  
12:45:30 AM  
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1:54:15 AM  
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2:49:28 AM  
2:50:03 AM  
3:26:42 AM

**B6**

**B6**

**B6**

**Vitals Results**

4:00:38 AM  
4:00:39 AM  
4:01:06 AM  
5:12:19 AM  
5:12:20 AM  
5:12:33 AM  
5:19:34 AM  
5:21:05 AM  
5:34:53 AM  
5:35:01 AM  
5:54:55 AM  
5:55:09 AM  
5:55:10 AM  
6:27:18 AM  
6:27:19 AM  
6:27:52 AM  
7:18:19 AM  
7:18:32 AM  
7:18:33 AM  
7:19:29 AM  
7:19:30 AM  
7:19:31 AM  
7:19:32 AM  
7:42:35 AM  
8:47:36 AM  
8:47:37 AM  
8:47:47 AM  
8:50:11 AM  
9:09:21 AM  
11:08:26 AM  
11:08:27 AM  
11:20:51 AM  
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1:04:22 PM  
1:20:21 PM

**B6**

**B6**

**B6**

**Vitals Results**

**B6**

1:20:22 PM  
1:20:59 PM  
1:21:06 PM  
3:15:43 PM  
3:15:44 PM  
3:16:26 PM  
3:48:16 PM  
3:48:26 PM  
3:48:27 PM  
3:48:41 PM  
5:47:11 PM

**B6**

**B6**

ECG from Cardio

**B6**

**B6**

11:06:07 AM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

12 Lead: Standard Placement

**B6**

**B6**

ECG from Cardio

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**B6**

**B6**

1:06:48 AM

Page 1 of 2

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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12 Lead: Standard Placement

**B6**

**B6**

ECG from Cardio

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**B6**

**B6**

11:06:48 AM

Page 2 of 2

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**



**B6**

ECG from Cardio

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**B6**

**B6**

11:07:04 AM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

---

12 Lead: Standard Placement

**B6**

**B6**

ECG from Cardio

---

**B6**

**B6**

11:07:15 AM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

---

12 Lead: Standard Placement

**B6**

**B6**

**Patient History**

07:05 PM  
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**B6**

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**B6**

**Patient History**

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**Patient History**

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**Patient History**

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**B6**

11:03 AM

11:25 AM

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12:02 PM

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**B6**

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**Patient History**

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**B6**

**Patient History**

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**B6**

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**Patient History**

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**B6**

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**Patient History**

03:15 PM  
03:15 PM  
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**B6** 03:48 PM  
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**B6**

**Appears this way on original**

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B6

Radiology Request & Report

B6

Species: Canine  
Black/Tan Male (Neutered)  
Doberman Pinscher  
Birthdate: B6

B6

B6

Date of request: B6

B6

Student:

Date of exam: B6

Patient Location: Ward/Cage:

Weight (kg) 45.20

- Inpatient
- Outpatient Time:
- Waiting
- Emergency

Sedation

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

Examination Desired: 1 view thoracic radiograph (lateral) - to be done standing in large animal, please.

Presenting Complaint and Clinical Questions you wish to answer:

Emergency

Pertinent History: B6 is an 8yo MN Dober presented as referral yesterday for CHF and suspected DCM. Evaluated by rDVM B6 at that time radiographs showed cardiomegaly, pulmonary edema and ECG indicated atrial fibrillation. Patient was given 2 doses of furosemide (4mg/kg total) and referred here. 1 dose of Furosemide overnight.

Findings:

B6

**Conclusions:**

- Resolving pulmonary edema and unchanged cardiomegaly consistent with diagnosed DCML. A complete thoracic series may be considered for full evaluation.

**B6**

**Dates**

Reported: **B6**  
Finalized:



B6

Discharge Instructions

B6

Species: Canine  
Black/Tan Male (Neutered) Doberman  
Pinscher  
Birthdate: B6

B6

B6

B6

Admit Date: B6 6:19:57 PM

Discharge Date: B6

Diagnoses:

1. Dilated cardiomyopathy (DCM) with congestive heart failure
2. Atrial fibrillation with ventricular beats
3. Mild degenerative mitral valve disease

Case summary:

Thank you for bringing B6 into Tufts! He is a lovely boy!

On presentation, Bode was quiet but alert. His heart rate was elevated and irregular, and an EKG confirmed atrial fibrillation as well. He was on telemetry (continuous EKG) and received supportive care in the ICU and was started on cardiac medications in order to help decrease his heart rate and pump better.

B6

B6 has been diagnosed with a primary heart muscle disease called dilated cardiomyopathy (DCM). This disease is

more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Doberman pinschers are predisposed to developing this disease. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. The heart enlargement has now progressed to the point of congestive heart failure, meaning that fluid is backing up into the lungs or belly. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

**Monitoring at home:**

**B6**

**Recommended Medications:**

**B6**

**B6**

**B6**

B6

**Discharge Instructions**

**B6**

**Alivacor/Kardia Handout**

**B4, B6**

**B4, B6**

# Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY  
Cardiology Liaison: 508-887-4696

**B6**

B6 Canine  
B6 Years Old Male (Neutered)  
Doberman Pinscher  
Black/Tan BW: Weight (kg) 45.20

## Cardiology Inpatient

Date: B6  
Weight: Weight (kg) 45.20

**B6**

**\*STOP - remainder of form to be filled out by Cardiology\***

### Physical Examination

**B6**

#### Muscle condition:

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

#### Cardiovascular Physical Exam

##### Murmur Grade:

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

Murmur location/description: left apical systolic

**Jugular vein:**

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

- Top 2/3 of the neck
- 1/2 way up the neck

**Arterial pulses:**

- Weak
- Fair
- Good
- Strong

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

**Arrhythmia:**

- None
- Sinus arrhythmia
- Premature beats

- Bradycardia
- Tachycardia - atrial fibrillation

**Gallop:**

- Yes
- No
- Intermittent

- Pronounced
- Other:

**Pulmonary assessments:**

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

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

**Abdominal exam:**

- Normal
- Hepatomegaly

- Abdominal distension
- Mild ascites

**Echocardiogram Findings:**

**B6**

**Doppler findings:**

**Mitral inflow:**

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

**Blood Pressure (mmHg):**

Cuff size:

Limb:

**ECG findings:**

Heart rate: B6



**B6**

B1  
 B2

D

**B6**

**Notice of Patient Admit**

Date: **B6** 6:19:57 PM

Case No: 329174

**B6**

**B6**

Your patient presented to our Emergency service. Please make note of the following information to facilitate communication with our team.

**B6**

The reason for admission to the FHSA is: DCM, Afib

If you have any questions regarding this particular case, please call **B6** to reach the Cardiology Service. Information is updated daily, by noon.

Thank you for your referral to our Emergency Service.

**B6**

**B6**

B6 Male (Neutered)  
Canine Doberman Pinscher  
Black/Tan  
329174

**Daily Update From the Cardiology Service**

Today's date: B6

Dear B4, B6

Thank you for referring patients to B6 at the Cummings School of Tufts University.

Your patient B6 was admitted and is being cared for by the Cardiology Service.

Today B6

- is in stable condition
- is still in the oxygen cage
- is critically ill
- discharged from the hospital B6

**Today's treatments include:**

- bloodwork planned/pending
- echocardiography
- cardiac catheter procedure planned
- treatment for CHF secondary to DCM
- ongoing treatment for thrombosis
- ongoing treatment for arrhythmia (atrial fibrillation)

**Additional plans:**

Please allow 3-5 business days for reports to be finalized upon patient discharge.

Please call (508) 887-4696 before 5pm or email us at [cardiovet@tufts.edu](mailto:cardiovet@tufts.edu) if you have any questions.  
Thank you!

Attending Clinician: B6  
Faculty Clinician:  
Senior student:

**Appears this way on original**

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**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; **B6**  
**Sent:** 11/9/2018 10:28:41 PM  
**Subject:** Nutro Ultra adult dry dog food the superfood plate (chicken: Lisa Freeman - EON-370712  
**Attachments:** 2058680-report.pdf; 2058680-attachments.zip

A PFR Report has been received and PFR Event [EON-370712] has been created in the EON System.

A "PDF" report by name "2058680-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 "2058680-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-370712

**ICSR #:** 2058680

**EON Title:** PFR Event created for Nutro Ultra adult dry dog food the superfood plate (chicken lamb salmon); 2058680

<b>AE Date</b>	09/17/2018	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Setter - Irish Red		
<b>Age</b>	11 Years		
<b>District Involved</b>	PFR <b>B6</b> DO		

**Product information**

**Individual Case Safety Report Number:** 2058680

**Product Group:** Pet Food

**Product Name:** Nutro Ultra adult dry dog food the superfood plate (chicken, lamb, salmon)

**Description:** DCM and CHF diagnosed 9/17/18. Unclear if this is a diet-associated DCM because this is not boutique company or grain free but some properties of diet could be suspicious (lamb, rice bran, etc). Owner has fed this same food since dog was a puppy. Has since changed to Pro plan adult sensitive skin and stomach dry plus Science beef/barley canned. Plasma taurine **B6** WB **B6**

**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

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Nutro Ultra adult dry dog food the superfood plate (chicken, lamb, salmon)		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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**Report Details - EON-370712**

**ICSR:** 2058680  
**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:** 2018-11-09 17:18:34 EST

**Reported Problem:**

<b>Problem Description:</b>	DCM and CHF diagnosed 9/17/18. Unclear if this is a diet-associated DCM because this is not boutique company or grain free but some properties of diet could be suspicious (lamb, rice bran, etc). Owner has fed this same food since dog was a puppy. Has since changed to Pro plan adult sensitive skin and stomach dry plus Science beef/barley canned. Plasma taurine: B6 WB: B6
<b>Date Problem Started:</b>	09/17/2018
<b>Concurrent Medical Problem:</b>	No
<b>Outcome to Date:</b>	Stable

**Product Information:**

<b>Product Name:</b>	Nutro Ultra adult dry dog food the superfood plate (chicken, lamb, salmon)
<b>Product Type:</b>	Pet Food
<b>Lot Number:</b>	
<b>Package Type:</b>	BAG
<b>Product Use Information:</b>	<b>Description:</b> 2 scoops twice daily (scoop is ~1.5 cups)
<b>Manufacturer /Distributor Information:</b>	
<b>Purchase Location Information:</b>	

**Animal Information:**

<b>Name:</b>	B6												
<b>Type Of Species:</b>	Dog												
<b>Type Of Breed:</b>	Setter - Irish Red												
<b>Gender:</b>	Male												
<b>Reproductive Status:</b>	Neutered												
<b>Weight:</b>	28.8 Kilogram												
<b>Age:</b>	11 Years												
<b>Assessment of Prior Health:</b>	Excellent												
<b>Number of Animals Given the Product:</b>	1												
<b>Number of Animals Reacted:</b>	1												
<b>Owner Information:</b>	<table border="1"><tr><td><b>Owner Information provided:</b></td><td>Yes</td></tr><tr><td><b>Contact:</b></td><td><table border="1"><tr><td><b>Name:</b></td><td>B6</td></tr><tr><td><b>Phone:</b></td><td></td></tr><tr><td><b>Email:</b></td><td></td></tr></table></td></tr><tr><td><b>Address:</b></td><td>B6</td></tr></table>	<b>Owner Information provided:</b>	Yes	<b>Contact:</b>	<table border="1"><tr><td><b>Name:</b></td><td>B6</td></tr><tr><td><b>Phone:</b></td><td></td></tr><tr><td><b>Email:</b></td><td></td></tr></table>	<b>Name:</b>	B6	<b>Phone:</b>		<b>Email:</b>		<b>Address:</b>	B6
<b>Owner Information provided:</b>	Yes												
<b>Contact:</b>	<table border="1"><tr><td><b>Name:</b></td><td>B6</td></tr><tr><td><b>Phone:</b></td><td></td></tr><tr><td><b>Email:</b></td><td></td></tr></table>	<b>Name:</b>	B6	<b>Phone:</b>		<b>Email:</b>							
<b>Name:</b>	B6												
<b>Phone:</b>													
<b>Email:</b>													
<b>Address:</b>	B6												
<b>Healthcare Professional Information:</b>	<table border="1"><tr><td><b>Practice Name:</b></td><td>Tufts Cummings School of Veterinary Medicine</td></tr><tr><td><b>Contact:</b></td><td><table border="1"><tr><td><b>Name:</b></td><td>Lisa Freeman</td></tr><tr><td><b>Phone:</b></td><td>(508) 887-4523</td></tr></table></td></tr></table>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine	<b>Contact:</b>	<table border="1"><tr><td><b>Name:</b></td><td>Lisa Freeman</td></tr><tr><td><b>Phone:</b></td><td>(508) 887-4523</td></tr></table>	<b>Name:</b>	Lisa Freeman	<b>Phone:</b>	(508) 887-4523				
<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine												
<b>Contact:</b>	<table border="1"><tr><td><b>Name:</b></td><td>Lisa Freeman</td></tr><tr><td><b>Phone:</b></td><td>(508) 887-4523</td></tr></table>	<b>Name:</b>	Lisa Freeman	<b>Phone:</b>	(508) 887-4523								
<b>Name:</b>	Lisa Freeman												
<b>Phone:</b>	(508) 887-4523												

		<b>Email:</b> lisa.freeman@tufts.edu
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States

<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			

<b>Additional Documents:</b>	<b>Attachment:</b>	taurine.pdf		
	<b>Description:</b>	Taurine		
	<b>Type:</b>	Laboratory Report		
	<b>Attachment:</b>	compiled records:	<b>B6</b>	pdf
	<b>Description:</b>	Records		
	<b>Type:</b>	Medical Records		

**B6**

**B6**

**All Medical Records**

**B6**

Breed: Irish Setter

**B6**

Species: Canine  
Sex: Male  
(Neutered)

**Referring Information**

**B6**

**Initial Complaint:**

Emergency

SOAP Text **B6** 9:46AM - Clinician, Unassigned FHSA

**Subjective**

NEW VISIT (ER)

**B6**

Presenting complaint: Biventricular effusion, respiratory distress

Referral visit? Yes

Diagnostics completed prior to visit

TFAST - Pleural fluid seen

AFAST - Abdominal fluid seen, sample taken

CXR - markedly enlarged R heart

HISTORY:

**B6**

Signalment: **B6** yo MC Irish Setter

Current history: 1 month ago started to have decreased appetite. Increased respiratory rate and effort, possibly positional. Intermittent liquidy brown diarrhea. Decreased energy level/exercise intolerance, increased thirst, collapsed after climbing a staircase this morning and that is when O went to rDVM. Normal urination, no c/s/v.

Ate a chipmunk recently.

Prior medical history: Recurrent facial cyst, removed surgically. Hx of Lyme.

Current medications: None

Diet: Ate Nutra-Ultra whole life, waning appetite past month

Vaccination status/flea & tick preventative use: UTD, monthly flea/tick/hw

Travel history: No

EXAM:

**B6**

BCS(1-9): 3

MCS(normal,mild,moderate,severe): mild

**B6**

ASSESSMENT:

**B6**

PLAN:

**B6**

**B6**

**B6**

Diagnostics/procedures:

**B6**

Cardiology Consult: Active biventricular heart failure likely 2o to severe DCM.

**B6**

**B6**

Client communication: Discussed with o that **B6** was in active biventricular heart failure and that this carried a poor long term prognosis. O was very upset but want to do all necessary to get **B6** out of heart failure now to management at home. Outlined treatment with lasix and pimo. O called for update and told him that P is still doing well. Breathing more easily after removing some of the fluid.

Deposit & estimate status:

**B6**

Resuscitation code (if admitting to ICU): yellow

**B6**

ADDENDUM:

- Due to error prescribed out pimobendan 5 mg tablets #12 rather than 10 mg #6. Changed orders to reflect this.

**B6**

SOAP Text **B6** 8:44AM - Clinician, Unassigned FHSA

**B6** Daily SOAP

**Subjective**

**B6** is an 11yo CM Irish Setter who presented **B6** to Tufts ER for dyspnea and was diagnosed with bicavitary effusion due to biventricular CHF. 3L abdominal effusion removed. Started on lasix and pimobendan yesterday. Hx of reported intermittent liquidy brown diarrhea and increased thirst (normal urination).

Did well O/N with RR between 16 and 32; low appetite.

Exam, cardiology

**B6**

**B6**

Overall impression since arrival or since last exam: Improved since admittance, no respiratory effort noted

Appetite: Eating 50% of food offered

**B6**

Diagnostics completed:

**B6**

Cardio consult: Active biventricular heart failure likely 2o to severe DCM.

**B6**

**B6**

Assessments

**B6**

Plan

**B6**

**B6**

Initial Complaint:

Recheck -

**B6**

SOAP Text

**B6**

12:05PM -

**B6**

**B6**

**Initial Complaint:**

Emergency

SOAP Text

**B6**

10:22AM

**B6**

**Subjective**

NEW VISIT (ER)

**B6**

Presenting complaint: dyspnea

Referral visit? No

Diagnostics completed prior to visit

**B6**

Cardiology Consult: Active biventricular heart failure likely 2o to severe DCM.

**B6**

**HISTORY:**

Signalment: 11YO MN red Irish Setter

Current history:

O reports **B6** has been coughing more oer the last few days. RR at night 40/min, drops to 20/min during the day. Concerned that his abdomen has got bigger in the last 24hrs and he didn't want to eat all his bfast this morning.

He was recently diagnosed here with DCM + CHF.

**B6**

**EXAM:**

**B6**

**B6**

**B6**

**B6**

Client communication:

**B6**

Deposit & estimate status:

**B6**

Resuscitation code (if admitting to ICU): yellow

SOAP approved (DVM to sign):

**B6**

BVSc

SOAP Text

**B6**

:03AM - Clinician, Unassigned FHSA

**History:**

**B6** is an 11yo CM Irish Setter who presented **B6** to Tufts ER then again **B6** for dyspnea. Previously diagnosed with DCM and biventricular failure.

**Subjective:**

T: Not taken



**B6**

**B6**

**Objective:**

**B6**

**ER Diagnostics:**

**B6**

**Assessments**

**B6**

**Plan**

**B6**

**B6**

**Initial Complaint:**

PAGE ANTOON -

SOAP Text Oct 5 2018 4:07PM -

**B6**

**B6**

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**Initial Complaint:**

Recheck: **B6**

SOAP Text Oct 12 2018 2:16PM **B6**

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**Initial Complaint:**

Recheck - **B6**

SOAP Text Oct 19 2018 3:10PM - **B6**

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**Initial Complaint:**

**B6** tech - chem 21

SOAP Text Oct 31 2018 4:12PM **B6**

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**Disposition/Recommendations**

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**B6**

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**B6**

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

Veterinarian:

**B6**

Visit ID:

**B6**

Species:	Canine
Breed:	Irish Setter
Sex:	Male (Neutered)
Age:	<b>B6</b> Years Old

**Lab Results Report**

**Nova Full Panel-ICU**      **B6** 9:58:25 AM      **B6**

Test	Results	Reference Range	Units
SO2%	<b>B6</b>	94 - 100	%
HCT (POC)		38 - 48	%
HB (POC)		12.6 - 16	g/dL
NA (POC)		140 - 154	mmol/L
K (POC)		3.6 - 4.8	mmol/L
CL(POC)		109 - 120	mmol/L
CA (ionized)		1.17 - 1.38	mmol/L
MG (POC)		0.1 - 0.4	mmol/L
GLUCOSE (POC)		80 - 120	mg/dL
LACTATE		0 - 2	mmol/L
BUN (POC)		12 - 28	mg/dL
CREAT (POC)		0.2 - 2.1	mg/dL
TCO2 (POC)		0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG		0 - 0	mmol/L
GAP		0 - 0	mmol/L
CA/MG		0 - 0	mol/mol
BEeef		0 - 0	mmol/L
BEb		0 - 0	mmol/L
A		0 - 0	mmHg
NOVA SAMPLE	0 - 0		

**B4**

10/97

**B6**

Printed Friday, November 09, 2018

**B6**

FiO2		0 - 0	%
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
PH		7.337 - 7.467	
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
HCO3		18 - 24	mmol/L

**B6**

**Nova Full Panel-ICU**      **B6**      10:45:25 AM      **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%
TS (FHSA)		0 - 0	g/dl

**Nova Full Panel-ICU**      **B6**      :00:12 PM      **B6**

Test	Results	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)		31.9 - 34.3	g/dL
RDW (ADVIA)		11.9 - 15.2	
PLT(ADVIA)		173 - 486	K/uL
MPV (ADVIA)		8.29 - 13.2	fl
PLTCRT		0.129 - 0.403	%
RETIC(ADVIA)		0.2 - 1.6	%
RETICS (ABS) ADVIA		14.7 - 113.7	K/uL

**B6**

**Nova Full Panel-ICU**      **B6**      3:00:27 PM      **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
MAGNESIUM 2+		1.8 - 3	mEq/L
T. PROTEIN		5.5 - 7.8	g/dL
ALBUMIN		2.8 - 4	g/dL
GLOBULINS		2.3 - 4.2	g/dL
Λ/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L

**B6**

**B4**

11/97

**B6**

Printed Friday, November 09, 2018

**B6**

CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
iCO2 (BICARB)		14 - 28	mEq/L
AGAP		8 - 19	
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
GGT		0 - 10	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CK		22 - 422	U/L
CHOLESTEROL		82 - 355	mg/dL
TRIGLYCERIDES		30 - 338	mg/dl
AMYLASE		409 - 1250	U/L
OSMOLALITY (CALCULATED)		291 - 315	mmol/L

**B6**

<b>Nova Full Panel-ICU</b>	<b>B6</b>	<b>3:00:09 PM</b>	<b>B6</b>
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Test	Results	Reference Range	Units
SEGS%		43 - 86	%
L YMPHS%		7 - 47	%
MONOS%		1 - 15	%
EOS%		0 - 16	%
SEGS (AB)ADVIA		2.8 - 11.5	K/uL
L YMPHS (ABS)ADVIA		1 - 4.8	K/uL
MONOS (ABS)ADVIA		0.1 - 1.5	K/uL
EOS (ABS)ADVIA		0 - 1.4	K/uL
WBC MORPHOLOGY		0 - 0	
No Morphologic Abnormalities			
RBC MORPHOLOGY		0 - 0	
No morphologic abnormalities			

**B6**

<b>Nova Full Panel-ICU</b>	<b>B6</b>	<b>10:48:21 AM</b>	<b>B6</b>
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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

**B6**

**B4**

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**B6**

Printed Friday, November 09, 2018

**B6**

GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L
COMMENTS (CHEMISTRY)		0 - 0	

**B6**

<b>Nova Full Panel-ICU</b>		<b>B6</b>	11:10:56 AM	<b>B6</b>
Test	Results	Reference Range	Units	
TS (FHSA)	8	0 - 0	g/dl	
PCV **	48	0 - 0	%	
TS (FHSA)	8	0 - 0	g/dl	

<b>Nova Full Panel-ICU</b>		<b>B6</b>	3:44:13 PM	<b>B6</b>
Test	Results	Reference Range	Units	
U COLLECT		0 - 0		
U COLOR		0 - 0		
U TURBIDITY		0 - 0		
U SG		0 - 0		
U PH		0 - 0		
U PROTEIN		0 - 0		
U GLUCOSE		0 - 0		
U KETONES		0 - 0		
U BILIRUBIN		0 - 0		

**B6**

**B6**

U HEME PROTEIN		0 - 0		
U WBC		0 - 0	/hpf	
U RBC		0 - 0	/hpf	
U BACTERIA		0 - 0	/hpf	
U CRYSTALS		0 - 0	/hpf	

**B6**

<b>Nova Full Panel-ICU</b>		9/21/2018 12:44:20 PM	<b>B6</b>
Test	Results	Reference Range	Units

**B4**

13/97

**B6**

Printed Friday, November 09, 2018

**B6**

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		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L

**B6**

<b>Nova Full Panel-ICU</b>	<b>9/21/2018 12:47:01 PM</b>	<b>B6</b>
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Test	Results	Reference Range	Units
TAURINE P	<b>B6</b>	60 - 120	nmol/mL
TAURINE WB		200 - 350	nmol/mL

<b>Nova Full Panel-ICU</b>	<b>9/21/2018 12:48:52 PM</b>	<b>B6</b>
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Test	Results	Reference Range	Units
TS (FHSA)	<b>B6</b>	0 - 0	g/dl
PCV **		0 - 0	%
TS (FHSA)		0 - 0	g/dl

<b>Nova Full Panel-ICU</b>	<b>9/30/2018 12:27:25 PM</b>	<b>B6</b>
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Test	Results	Reference Range	Units
SO2%		94 - 100	%
HCT (POC)		38 - 48	%
HB (POC)		12.6 - 16	g/dL
NA (POC)	<b>B6</b>	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

**B4**

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**B6**

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**B6**

GLUCOSE (POC)		80 - 120	mg/dL
LACTATE		0 - 2	mmol/L
BUN (POC)		12 - 28	mg/dL
CREAT (POC)		0.2 - 2.1	mg/dL
TCO2 (POC)		0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG		0 - 0	mmol/L
GAP		0 - 0	mmol/L
CA/MG		0 - 0	mol/mol
BEecf		0 - 0	mmol/L
BEb		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		18 - 24	mmol/L

**B6**

**Nova Full Panel-ICU**      **B6**      12:47:03 PM      **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%
TS (FHSA)		0 - 0	g/dl

**Nova Full Panel-ICU**      **B6**      12:03:20 PM      **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		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	

**B6**

**B4**

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**B6**

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**B6**

T BILIRUBIN	<b>B6</b>	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

**Nova Full Panel-ICU**      **10/5/2018 4:08:20 PM**      **B6**

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

**Nova Full Panel-ICU**      **10/12/2018 2:16:21 PM**      **B6**

Test	Results	Reference Range	Units
GLUCOSE	<b>B6</b>	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

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GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L
COMMENTS (CHEMISTRY)		0 - 0	
Slight hemolysis,Slight lipemia			

**B6**

<b>Nova Full Panel-ICU</b>	<b>10/19/2018 4:04:21 PM</b>	<b>B6</b>
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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		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L
COMMENTS (CHEMISTRY)		0 - 0	

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Nova Full Panel-ICU

10/31/2018 4:12:21 PM

**B6**

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

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Printed Friday, November 09, 2018

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med hx 8/31/18 - 9/17/18

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B6 med hx 8/31/18 - 9/17/18

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med hx 8/31/18 - 9/17/18

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Multi lead EKG 9/30/18

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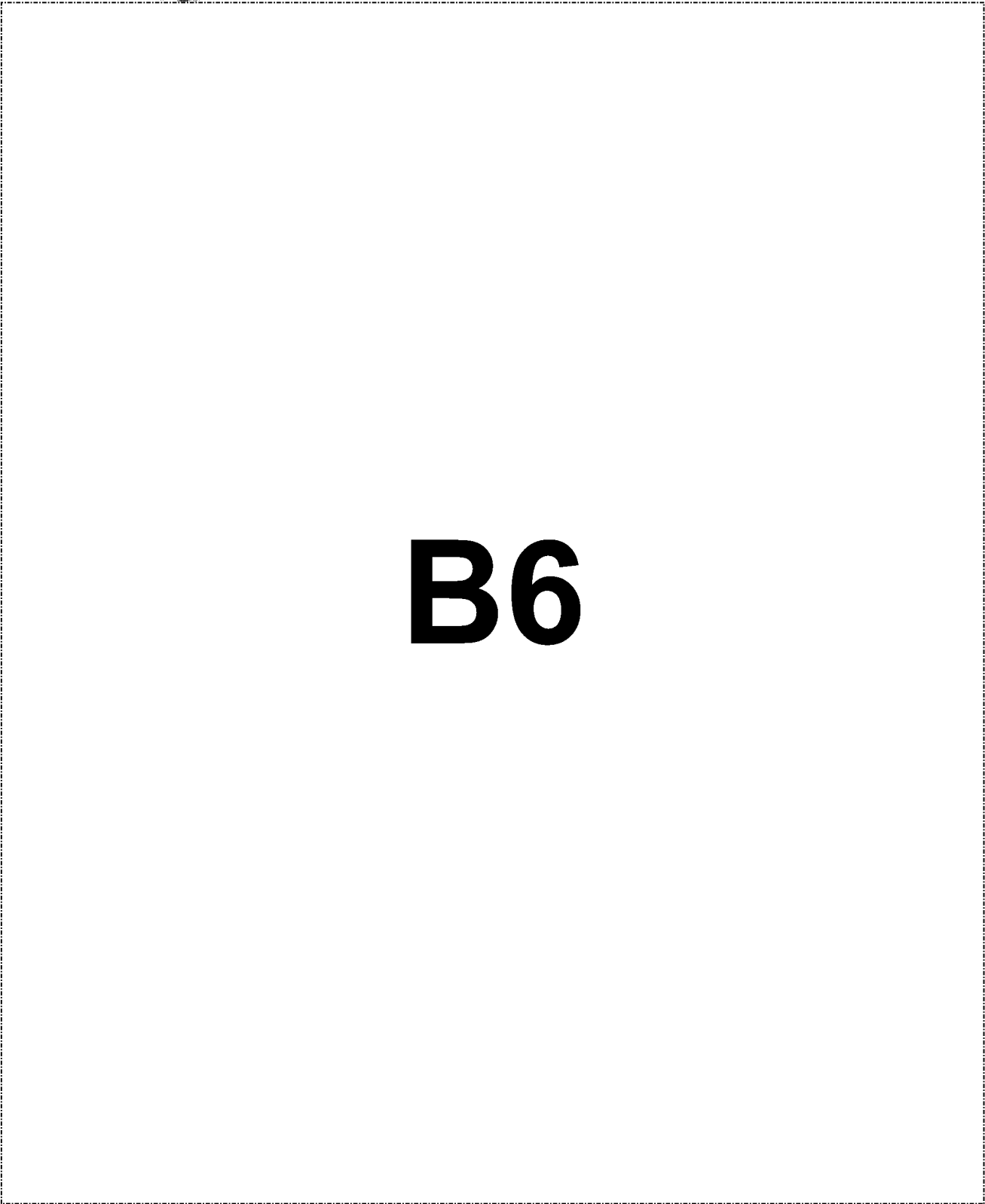
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Lab Image Taurine Panel 9/21/18



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Taurine Panel 9/21/18

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**Vitals Results**

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9/17/2018 5:00:05 PM  
9/17/2018 5:02:59 PM  
9/17/2018 6:05:47 PM  
9/17/2018 6:07:09 PM  
9/17/2018 6:40:49 PM  
9/17/2018 6:56:57 PM  
9/17/2018 7:15:44 PM  
9/17/2018 7:15:54 PM  
9/17/2018 7:16:05 PM  
9/17/2018 7:16:28 PM  
9/17/2018 8:22:31 PM  
9/17/2018 8:26:28 PM  
9/17/2018 8:43:22 PM  
9/17/2018 9:59:02 PM  
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9/18/2018 12:16:47 AM  
9/18/2018 12:17:26 AM  
9/18/2018 12:21:36 AM  
9/18/2018 12:39:28 AM  
9/18/2018 12:42:19 AM  
9/18/2018 12:58:12 AM  
9/18/2018 1:53:56 AM  
9/18/2018 2:36:04 AM  
9/18/2018 4:18:53 AM  
9/18/2018 4:19:05 AM  
9/18/2018 4:19:28 AM  
9/18/2018 4:19:42 AM  
9/18/2018 4:41:19 AM  
9/18/2018 5:22:13 AM  
9/18/2018 5:22:38 AM  
9/18/2018 5:35:05 AM  
9/18/2018 5:37:04 AM  
9/18/2018 8:04:28 AM  
9/18/2018 8:04:39 AM  
9/18/2018 8:04:57 AM  
9/18/2018 8:05:03 AM  
9/18/2018 8:05:14 AM

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**Vitals Results**

9/18/2018 8:05:29 AM  
9/18/2018 8:06:21 AM  
9/18/2018 8:06:40 AM  
9/18/2018 9:14:59 AM  
9/18/2018 9:16:02 AM  
9/18/2018 9:36:13 AM  
9/18/2018 10:45:55 AM  
9/18/2018 11:19:24 AM  
9/18/2018 11:19:30 AM  
9/18/2018 11:41:02 AM  
9/18/2018 1:21:23 PM  
9/18/2018 1:34:19 PM  
9/18/2018 1:34:33 PM  
9/18/2018 4:12:54 PM  
9/18/2018 4:13:10 PM  
9/18/2018 5:08:43 PM  
9/18/2018 6:00:51 PM  
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9/30/2018 1:38:08 PM  
9/30/2018 1:38:28 PM  
  
9/30/2018 2:40:28 PM  
9/30/2018 3:09:45 PM  
9/30/2018 3:17:27 PM  
9/30/2018 3:17:42 PM  
9/30/2018 3:27:07 PM  
9/30/2018 3:27:08 PM  
9/30/2018 4:12:59 PM  
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9/30/2018 4:13:23 PM  
9/30/2018 4:18:00 PM  
9/30/2018 5:01:41 PM  
9/30/2018 5:01:42 PM  
9/30/2018 5:02:02 PM  
9/30/2018 5:07:29 PM  
9/30/2018 5:07:51 PM  
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9/30/2018 5:07:53 PM  
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9/30/2018 5:35:24 PM

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**Vitals Results**

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9/30/2018 5:58:39 PM  
9/30/2018 5:58:40 PM  
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9/30/2018 6:57:24 PM  
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9/30/2018 7:09:01 PM  
9/30/2018 7:23:22 PM  
9/30/2018 7:49:52 PM  
9/30/2018 7:50:51 PM  
9/30/2018 7:51:05 PM

9/30/2018 7:51:06 PM  
9/30/2018 7:59:51 PM  
9/30/2018 8:02:31 PM  
9/30/2018 9:15:56 PM  
9/30/2018 9:16:06 PM  
9/30/2018 9:16:07 PM  
9/30/2018 9:18:39 PM  
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9/30/2018 11:52:45 PM  
9/30/2018 11:52:46 PM  
9/30/2018 11:53:01 PM  
9/30/2018 11:53:13 PM  
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10/1/2018 12:46:37 AM  
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10/1/2018 1:10:41 AM  
10/1/2018 1:10:52 AM  
10/1/2018 1:11:02 AM

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**Vitals Results**

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10/1/2018 1:51:40 AM  
10/1/2018 1:52:22 AM  
10/1/2018 1:52:23 AM  
10/1/2018 1:52:41 AM  
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10/1/2018 1:54:29 AM  
10/1/2018 2:50:29 AM  
10/1/2018 2:50:30 AM  
10/1/2018 2:50:55 AM  
10/1/2018 2:52:53 AM  
10/1/2018 4:06:37 AM  
10/1/2018 4:06:38 AM  
10/1/2018 4:06:51 AM  
10/1/2018 4:07:01 AM  
10/1/2018 4:08:40 AM  
10/1/2018 4:54:42 AM  
10/1/2018 4:54:57 AM  
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10/1/2018 8:24:12 AM  
10/1/2018 8:24:13 AM  
10/1/2018 8:24:35 AM  
10/1/2018 8:36:21 AM  
10/1/2018 8:36:34 AM  
10/1/2018 9:13:05 AM  
10/1/2018 9:13:06 AM  
10/1/2018 9:13:23 AM  
10/1/2018 9:13:33 AM  
10/1/2018 9:17:38 AM

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**Vitals Results**

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10/1/2018 10:20:18 AM  
10/1/2018 10:20:19 AM  
10/1/2018 10:20:34 AM  
10/1/2018 10:22:08 AM  
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10/1/2018 11:13:05 AM  
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10/1/2018 2:06:03 PM  
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10/1/2018 4:48:46 PM  
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10/1/2018 5:10:55 PM  
10/1/2018 5:28:46 PM  
  
10/1/2018 6:02:40 PM  
10/1/2018 6:21:56 PM  
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**Vitals Results**

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10/12/2018 1:49:20 PM  
10/19/2018 3:24:04 PM  
10/31/2018 4:13:56 PM

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**B6**

ECG from cardio

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ECG from cardio

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**Rads 9/17/18**

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**B6**

ECG from Cardio

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**B6**

**B6**

ECG from Cardio

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**B6**

**B6**

ECG from Cardio

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**B6**

**Patient History**

09/17/2018 09:33 AM  
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09/17/2018 10:43 AM  
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09/17/2018 10:45 AM  
09/17/2018 10:49 AM

09/17/2018 10:51 AM  
09/17/2018 11:49 AM

09/17/2018 11:50 AM  
09/17/2018 12:00 PM  
09/17/2018 12:09 PM

09/17/2018 12:48 PM

09/17/2018 01:03 PM  
09/17/2018 01:29 PM  
09/17/2018 01:30 PM  
09/17/2018 02:09 PM  
09/17/2018 02:09 PM  
09/17/2018 02:10 PM  
09/17/2018 02:10 PM  
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09/17/2018 07:15 PM  
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**Patient History**

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09/18/2018 12:03 AM

09/18/2018 12:03 AM  
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09/18/2018 02:20 AM

09/18/2018 02:36 AM  
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**Patient History**

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**Patient History**

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09/18/2018 06:01 PM

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**B6**

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**Patient History**

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09/30/2018 07:08 PM  
09/30/2018 07:09 PM

09/30/2018 07:09 PM  
09/30/2018 07:23 PM  
09/30/2018 07:49 PM  
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09/30/2018 07:51 PM  
09/30/2018 07:59 PM  
09/30/2018 07:59 PM  
09/30/2018 08:02 PM  
09/30/2018 08:02 PM  
09/30/2018 09:15 PM

**B6**

**B6**

**Patient History**

09/30/2018 09:15 PM  
09/30/2018 09:16 PM

09/30/2018 09:16 PM  
09/30/2018 09:16 PM  
09/30/2018 09:18 PM  
09/30/2018 09:18 PM  
09/30/2018 09:55 PM

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09/30/2018 09:56 PM

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09/30/2018 10:57 PM  
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09/30/2018 10:57 PM

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09/30/2018 11:08 PM

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09/30/2018 11:51 PM

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09/30/2018 11:52 PM  
09/30/2018 11:53 PM  
09/30/2018 11:53 PM  
09/30/2018 11:53 PM

09/30/2018 11:53 PM  
09/30/2018 11:53 PM  
10/01/2018 12:32 AM  
10/01/2018 12:46 AM

10/01/2018 12:46 AM  
10/01/2018 01:10 AM

10/01/2018 01:10 AM  
10/01/2018 01:10 AM  
10/01/2018 01:10 AM

10/01/2018 01:10 AM  
10/01/2018 01:11 AM

**B6**

**B6**

**Patient History**

10/01/2018 01:11 AM  
10/01/2018 01:51 AM  
10/01/2018 01:51 AM  
10/01/2018 01:51 AM  
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10/01/2018 01:52 AM  
10/01/2018 01:52 AM

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10/01/2018 01:52 AM  
10/01/2018 01:54 AM

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10/01/2018 02:13 AM  
10/01/2018 02:50 AM

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10/01/2018 02:50 AM  
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10/01/2018 02:52 AM  
10/01/2018 02:52 AM  
10/01/2018 04:06 AM

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10/01/2018 04:07 AM  
10/01/2018 04:07 AM  
10/01/2018 04:08 AM  
10/01/2018 04:08 AM  
10/01/2018 04:54 AM

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10/01/2018 04:55 AM  
10/01/2018 04:55 AM  
10/01/2018 05:36 AM

**B6**

**B6**

**Patient History**

10/01/2018 05:36 AM  
10/01/2018 05:57 AM  
10/01/2018 05:57 AM  
10/01/2018 05:58 AM  
  
10/01/2018 05:58 AM  
10/01/2018 06:00 AM  
  
10/01/2018 06:00 AM  
10/01/2018 06:00 AM  
10/01/2018 06:48 AM  
  
10/01/2018 06:48 AM  
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10/01/2018 07:55 AM  
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10/01/2018 09:13 AM  
  
10/01/2018 09:13 AM  
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10/01/2018 09:13 AM  
10/01/2018 09:13 AM  
10/01/2018 09:13 AM  
10/01/2018 09:17 AM

**B6**



**B6**

**Patient History**

10/01/2018 09:21 AM

10/01/2018 09:22 AM

10/01/2018 09:22 AM

10/01/2018 09:22 AM

10/01/2018 09:27 AM

10/01/2018 09:30 AM

10/01/2018 10:20 AM

10/01/2018 10:20 AM

10/01/2018 10:20 AM

10/01/2018 10:20 AM

10/01/2018 10:20 AM

10/01/2018 10:22 AM

10/01/2018 10:22 AM

10/01/2018 10:46 AM

10/01/2018 11:07 AM

10/01/2018 11:07 AM

10/01/2018 11:07 AM

10/01/2018 11:13 AM

10/01/2018 11:13 AM

10/01/2018 11:54 AM

10/01/2018 12:04 PM

10/01/2018 12:04 PM

10/01/2018 12:05 PM

10/01/2018 12:06 PM

10/01/2018 12:06 PM

10/01/2018 12:13 PM

10/01/2018 12:43 PM

10/01/2018 12:53 PM

10/01/2018 12:53 PM

10/01/2018 01:24 PM

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10/01/2018 01:24 PM

10/01/2018 01:25 PM

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10/01/2018 01:26 PM

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10/01/2018 01:26 PM

10/01/2018 02:00 PM

**B6**

**B6**

**Patient History**

10/01/2018 02:00 PM  
10/01/2018 02:02 PM

10/01/2018 02:02 PM  
10/01/2018 02:02 PM  
10/01/2018 02:03 PM  
10/01/2018 02:03 PM  
10/01/2018 02:05 PM

10/01/2018 02:06 PM  
10/01/2018 02:15 PM  
10/01/2018 02:15 PM  
10/01/2018 03:11 PM

10/01/2018 03:39 PM  
10/01/2018 03:46 PM  
10/01/2018 03:46 PM  
10/01/2018 03:54 PM

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10/01/2018 03:54 PM  
10/01/2018 03:54 PM  
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10/01/2018 04:12 PM  
10/01/2018 04:12 PM  
10/01/2018 04:48 PM  
10/01/2018 04:48 PM  
10/01/2018 04:53 PM

10/01/2018 04:53 PM  
10/01/2018 04:53 PM  
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10/01/2018 05:10 PM  
10/01/2018 05:10 PM  
10/01/2018 05:10 PM

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10/01/2018 05:28 PM

10/01/2018 05:45 PM

10/01/2018 06:02 PM  
10/01/2018 06:02 PM  
10/01/2018 06:21 PM

10/01/2018 06:21 PM  
10/01/2018 06:21 PM  
10/01/2018 06:28 PM  
10/01/2018 06:33 PM

**B6**

**B6**

**Patient History**

10/01/2018 06:35 PM  
10/01/2018 06:50 PM  
10/04/2018 10:27 AM

10/05/2018 04:07 PM  
10/05/2018 04:07 PM  
10/05/2018 04:07 PM  
10/05/2018 04:34 PM  
10/05/2018 04:34 PM  
10/05/2018 04:35 PM  
10/05/2018 04:36 PM  
10/05/2018 04:38 PM

10/05/2018 04:38 PM

10/05/2018 04:42 PM  
10/05/2018 05:22 PM  
10/11/2018 01:31 PM

10/11/2018 04:02 PM

10/12/2018 01:25 PM  
10/12/2018 01:42 PM  
10/12/2018 01:44 PM  
10/12/2018 01:49 PM  
10/12/2018 01:58 PM

10/12/2018 02:16 PM  
10/16/2018 09:58 AM

10/19/2018 03:12 PM  
10/19/2018 03:23 PM  
10/19/2018 03:24 PM  
10/19/2018 03:46 PM

10/19/2018 04:03 PM  
10/19/2018 04:06 PM  
10/26/2018 12:48 PM

10/26/2018 12:51 PM

10/26/2018 12:52 PM

10/26/2018 12:55 PM

10/26/2018 12:55 PM

**B6**

**B6**

**Patient History**

10/26/2018 01:03 PM

10/31/2018 04:12 PM

10/31/2018 04:13 PM

10/31/2018 04:14 PM

10/31/2018 04:34 PM

10/31/2018 04:36 PM

10/31/2018 04:37 PM

10/31/2018 04:37 PM

11/01/2018 10:25 AM

11/01/2018 10:26 AM

11/01/2018 10:26 AM

**B6**

**Appears this way on Original**

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**B6**

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**B6**

Notice of Patient Admit

**B6**

**B6**

**B6**

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

B6

B6

Daily Update From the Cardiology Service

Today's date:

B6

B6

Thank you for referring patients to  
University.

B6

at the Cummings School of Tufts

Your patient

B6

Conti was admitted and is being cared for by the Cardiology Service.

Today:

B6

- is in stable condition
- is still in the oxygen cage
- is critically ill
- might be discharged from the hospital today

Today's treatments include:

- bloodwork planned/pending
- echocardiography
- cardiac catheter procedure planned
- ongoing treatment for CHF
- ongoing treatment for thrombosis
- ongoing treatment for arrhythmia

Additional plans:

B6

Service student:

**Appears this way on Original**

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

B6

B6

B6

Thank you for referring **B6** with their pet **B6**

If you have any questions, or concerns, please contact us at **B6**

Thank you.

B6

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

**B6**

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Thank you.

**B6**



Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

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**B6**

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

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Thank you.

**B6**

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

B6

Thank you for referring B6 with their pet B6

If you have any questions, or concerns, please contact us at B6

Thank you.

B6

22205 PL  
22206 WB

Sample Submission Form

UC CUSTOMERS ONLY:  
Non-federal funds ID/Account Number  
to bill: \_\_\_\_\_

**B6**

**B6**

**B6**

Email: clinpath@tufts.edu; cardiovet@tufts.edu

Tel: 508-887-4669

Fax: 508-839-7936

**B6**

Species: Canine

**B6**

Sample Type:  Plasma  Whole Blood  Urine  Food  Other: \_\_\_\_\_

Test Items:  Taurine  Complete Amino Acid  Other: \_\_\_\_\_

Taurine Results (nmol/ml)

Plasma: **B6** Whole Blood: **B6** Urine: \_\_\_\_\_ Food: \_\_\_\_\_

Reference Ranges (nmol/ml)

	Plasma		Whole Blood	
	Normal Range	No Known Risk for Taurine Deficiency	Normal Range	No Known Risk for Taurine Deficiency
Cat	80-120	>40	300-600	>200
Dog	60-120	>40	200-350	>150

22207 PL  
22208 WB

Sample Submission Form

UC CUSTOMERS ONLY:  
Non-federal funds ID/Account Number  
to bill: \_\_\_\_\_

**B6**

**B6**

**B6**

Email: clinpath@tufts.edu; cardiovet@tufts.edu

Tel: 508-887-4669

Fax: 508-839-7936

**B6**

Species: canine

**B6**

Sample Type:  Plasma  Whole Blood  Urine  Food  Other: \_\_\_\_\_

Test Items:  Taurine  Complete Amino Acid  Other: \_\_\_\_\_

Taurine Results (nmol/ml)

Plasma: **B6** Whole Blood: **B6** Urine: \_\_\_\_\_ Food: \_\_\_\_\_

Reference Ranges (nmol/ml)

	Plasma		Whole Blood	
	Normal Range	No Known Risk for Taurine Deficiency	Normal Range	No Known Risk for Taurine Deficiency
Cat	80-120	>40	300-600	>200
Dog	60-120	>40	200-350	>150

22209 PL  
22210 WB

Sample Submission Form

UC CUSTOMERS ONLY:  
Non-federal funds ID/Account Number  
to bill: \_\_\_\_\_

**B6**

**B6**

**B6**

Email: clinpath@tufts.edu; cardiovvet@tufts.edu

Tel: 508-887-4669

Fax: 508-839-7936

**B6**

Species: canine

**B6**

Sample Type:  Plasma  Whole Blood  Urine  Food  Other: \_\_\_\_\_

Test Items:  Taurine  Complete Amino Acid  Other: \_\_\_\_\_

Taurine Results (nmol/ml)

Plasma: **B6** Whole Blood: **B6** Urine: \_\_\_\_\_ Food: \_\_\_\_\_

Reference Ranges (nmol/ml)

	Plasma		Whole Blood	
	Normal Range	No Known Risk for Taurine Deficiency	Normal Range	No Known Risk for Taurine Deficiency
Cat	80-120	>40	300-600	>200
Dog	60-120	>40	200-350	>150

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification [B6]  
**Sent:** 11/10/2018 8:40:39 PM  
**Subject:** Pure Balance Salmon and Pea dry: Lisa Freeman - EON-370760  
**Attachments:** 2058697-report.pdf; 2058697-attachments.zip

A PFR Report has been received and PFR Event [EON-370760] has been created in the EON System.

A "PDF" report by name "2058697-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 "2058697-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-370760

**ICSR #:** 2058697

**EON Title:** PFR Event created for Pure Balance Salmon and Pea dry, Taste of the Wild High Prairie dry; 2058697

<b>AE Date</b>	10/31/2018	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Retriever - Golden		
<b>Age</b>	6.8 Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2058697

**Product Group:** Pet Food

**Product Name:** Pure Balance Salmon and Pea dry, Taste of the Wild High Prairie dry

**Description:** DCM and CHF diagnosed 10/31/18. On BEG diet. Taurine pending

**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**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Taste of the Wild High Prairie dry		
Pure Balance Salmon and Pea dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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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](mailto:FDAREportableFoods@fda.hhs.gov) immediately.



**Report Details - EON-370760**

ICSR: 2058697  
 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: 2018-11-10 15:28:40 EST

**Reported Problem:**  
**Problem Description:** DCM and CHF diagnosed 10/31/18. On BEG diet. Taurine pending  
**Date Problem Started:** 10/31/2018  
**Concurrent Medical Problem:** Yes  
**Pre Existing Conditions:** Dermatitis  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Taste of the Wild High Prairie dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:** **Description:** Fed for last 3 months until 2 weeks ago when changed to Beneful Salmon dry  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**  
**Product Name:** Pure Balance Salmon and Pea dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:** **Description:** Fed for past 6 years until about 3 months ago  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** B6  
**Type Of Species:** Dog  
**Type Of Breed:** Retriever - Golden  
**Gender:** Female  
**Reproductive Status:** Neutered  
**Weight:** 25.5 Kilogram  
**Age:** B6  
**Assessment of Prior Health:** Good  
**Number of Animals Given the Product:** 1  
**Number of Animals Reacted:** 1  
**Owner Information:** **Owner Information provided:** Yes  
**Contact:** **Name:** B6  
**Phone:**  
**Email:**

		<b>Address:</b>	<b>B6</b>	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman	
		<b>Phone:</b>	(508) 887-4523	
<b>Email:</b>		lisa.freeman@tufts.edu		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			
<b>Additional Documents:</b>	<b>Attachment:</b>	compiled medical records	<b>B6</b> .pdf	
	<b>Description:</b>	Records		
	<b>Type:</b>	Medical Records		

**B6**

**B6**

**All Medical Records**

**B6**

Breed: Golden Retriever

**B6**

Species: Canine  
Sex: Female  
(Spayed)

**Referring Information**

**B6**

**Initial Complaint:**

Emergency

SOAP Text **B6** 8:41AM - Clinician, Unassigned FHSA

**Subjective**

NEW VISIT (ER)

**B6**

Presenting complaint: Hot spots

Referral visit? No

Diagnostics completed prior to visit: None

**HISTORY:**

Signalment: 6 yo FS Golden retriever

Current history: Over the last week or so (starting caudal ventral abdomen) she has been getting worse areas of alopecia and erythema. No V/D/S, her appetite has been lowered for the last couple of days, no lethargy. The last few days the hot spots have been spreading to her hind limbs. Over the last few days she has developed a cough over the last week or so, sporadic. O has been treating the hot spots with a topical spray (antiseptic, antiitch) and has been shaving the areas. She licked at it a lot last night and it was significantly worse this morning. No other pets in the house.

Prior medical history: None except for a history of hot spots, usually treated with a topical spray, owner generally can stay on top of it without medical intervention.

Current medications: This morning she got 25mg of benadryl, none other

**B6**

Diet: Call of the wild dry food

Vaccination status/flea & tick preventative use: Up to date

Travel history: None

EXAM:

**B6**

ASSESSMENT:

**B6**

Diagnostics completed:

None

Diagnostics pending:

None

Client communication:

**B6**

SOAP approved (DVM to sign)

**B6**

DVM

**Initial Complaint:**

Emergency

**B6**

SOAP Text

**B6**

4:27PM

**B6**

**Subjective**NEW VISIT (ER)

**B6**

Presenting complaint: Coughing, weight loss

Referral visit? Y

Diagnostics completed prior to visit:

**B6**

**HISTORY:**

Signalment: 6yo FS Golden retriever

Current history:

Presented to Tufts for a hot spot 5-6 weeks ago, cough started back then, has continued to get worse, saw RDVM in spencer and was treated for kennel cough, seemed to improve but never resolved, followed up with rDVM and had radiographs, started on furosemide which helped but did nto resolve, radiographs repeated and tracheal compression suspected. Was the runt of the litter. Has been drinking normally, eating on and off, u/d normal, no c/v/d, eating around 2/3 of her normal diet. Decreased activity level.

Prior medical history:

Chronic hot spots, otherwise healthy

Current medications:

**B6**

**EXAM:**

**B6**

**B6**

**B6**

ASSESSMENT:

**B6**

PLAN:

**B6**

Diagnostics completed:

**B6**

Cardio consult:

- DCM with marked LA enlargement and suspected active CHF

**B6**

Diagnostics pending: none

Client communication:

Discussed finding of DCM on cardiology consult, recommended hospitalization overnight to titrate medications and provide supplemental oxygen if necessary versus discharge tonight and starting medications and monitoring at home; O elected to take P home tonight. Discussed enrollment in cardiology's grain-free diet/DCM study - the study covers the cost of blood work and echo today and potentially will cover echo and bloodwork at 3-month and 6-month recheck appointments; ER fee and hospitalization would still be paid for by O, as well as recheck appointment fees (including echo and bloodwork if indicated) in 10-14 days. O understood and agreed to enroll P in the study. Recheck scheduled with cardio on **B6**

Deposit & estimate status: none

**B6**

---

Resuscitation code (if admitting to ICU): n/a

SOAP approved (DVM to sign): **B6**

**Initial Complaint:**

Recheck **B6** - DCM study - ECC consult

SOAP Text **B6** 3:45PM **B6**

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**Disposition/Recommendations**

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**B6**

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**Appears this way on Original**



**B6**

Cummings  
Veterinary Medical Center  
AT TEXAS UNIVERSITY

**B6**

<b>B6</b>
Veterinarian:
<b>B6</b>
Visit ID:

<b>B6</b>	
Species:	Canine
Breed:	Golden Retriever
Sex:	Female (Spayed)
Age:	<b>B6</b> Years Old

**Lab Results Report**

10/31/2018 7:11:55 PM **B6**

Test	Results	Reference Range	Units
Troponin I Research - FHSA	<b>B6</b>	0 - 0.08	mg/dl

11/9/2018 3:46:15 PM **B6**

Test	Results	Reference Range	Units
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U COLLECT 0 - 0

Urine - Cystocentesis

U COLOR 0 - 0

U TURBIDITY 0 - 0

U SG 0 - 0

U PH 0 - 0

U PROTEIN 0 - 0

U GLUCOSE 0 - 0

U KETONES 0 - 0

U BILIRUBIN 0 - 0

Negative

**B6**

U HEME PROTEIN 0 - 0

U WBC 0 - 0 /hpf

U RBC 0 - 0 /hpf

U BACTERIA 0 - 0 /hpf

U CRYSTALS 0 - 0 /hpf

U FAT 0 - 0 /hpf

**B6**

**B6**

**B4**

7/32

**B6**

Printed Saturday

**B6**

**B6**

---

COMMENTS (URINALYSIS)

0 - 0

Less than 1 ml urine submitted

---

**B4**

8/32

**B6**

Printed Saturday,

**B6**

**B4, B6**

10/29/18

**B4, B6**

**B4, B6**

**Best Available Copy**

10/29/18

**B4, B6**

**B4, B6**

10/2918

**B6**

**B4, B6**

**Best Available Copy**

10/2918

**B4, B6**

**B4, B6**

10/2918

**B4, B6**

**B4, B6**

10/2918

**B4, B6**



**B4, B6**

**B6**

DUPLICATE

**B6**

B6

Research CBC/Chem

B6

DUPLICATE

B6

**B6**

**B4**

CARDIOPET 11/1/18

**B6**

**B6**

Diet history 10/31/18

**B6**

CARDIOLOGY DIET HISTORY FORM  
Please answer the following questions about your pet

**B6**

**B6**

---

**Vitals Results**

---

9/2/2018 10:08:25 AM  
10/31/2018 5:41:28 PM  
  
10/31/2018 7:52:51 PM  
10/31/2018 7:52:52 PM  
10/31/2018 7:52:53 PM  
10/31/2018 7:52:54 PM  
11/9/2018 2:52:06 PM

**B6**

**B6**

**B6**

rad 10/29/18

**B6**

**B6**

**B6**

ECG from Cardio

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**B6**



**B6**

ECG from Cardio

---

**B6**

**B6**

ECG from Cardio

---

**B6**

**B6**

ECG from Cardio

---

**B6**

**B6**

10/29/18

**B6**

**B6**

10/29/18

**B6**

**Patient History**

09/02/2018 08:04 AM  
09/02/2018 08:05 AM  
09/02/2018 10:00 AM  
09/02/2018 10:08 AM  
09/02/2018 10:11 AM  
09/02/2018 10:11 AM  
09/02/2018 10:15 AM  
09/02/2018 10:17 AM  
09/02/2018 10:18 AM  
09/02/2018 10:19 AM  
10/31/2018 05:24 PM  
10/31/2018 05:25 PM  
  
10/31/2018 05:41 PM  
  
10/31/2018 05:59 PM  
10/31/2018 06:03 PM  
  
10/31/2018 06:12 PM  
  
10/31/2018 07:04 PM  
10/31/2018 07:04 PM  
10/31/2018 07:06 PM  
10/31/2018 07:08 PM  
10/31/2018 07:09 PM  
10/31/2018 07:09 PM  
10/31/2018 07:09 PM  
10/31/2018 07:17 PM  
10/31/2018 07:52 PM  
10/31/2018 07:52 PM  
10/31/2018 07:52 PM  
10/31/2018 07:52 PM  
11/01/2018 11:57 AM  
11/09/2018 02:35 PM  
11/09/2018 02:52 PM  
11/09/2018 03:11 PM  
11/09/2018 03:45 PM  
11/09/2018 03:46 PM  
11/09/2018 03:46 PM  
11/09/2018 04:07 PM  
  
11/09/2018 04:30 PM  
  
11/09/2018 04:33 PM  
11/10/2018 12:09 PM

**B6**

**Appears this way on Original**

**Appears this way on Original**



Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

**B6**

**B6**

Thank you.

**B6**

**B6**

Tom Robert  
460 Stafford St  
Charlton, MA 01507  
(508) 344-4445

**B6**

**B6**

**B6**

Thank you.

**B6**

(Emergency & Critical Care)

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; **B6**  
**Sent:** 11/9/2018 11:12:45 PM  
**Subject:** Rachel Ray peak open range recipe (beef: Lisa Freeman - EON-370720  
**Attachments:** 2058685-report.pdf; 2058685-attachments.zip

A PFR Report has been received and PFR Event [EON-370720] has been created in the EON System.

A "PDF" report by name "2058685-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 "2058685-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-370720

**ICSR #:** 2058685

**EON Title:** PFR Event created for Rachel Ray peak open range recipe (beef venison lamb); 2058685

<b>AE Date</b>	10/06/2018	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Boxer (German Boxer)		
<b>Age</b>	<b>B6</b> Years		
<b>District Involved</b>	PFR <b>B6</b> DO		

**Product information**

**Individual Case Safety Report Number:** 2058685

**Product Group:** Pet Food

**Product Name:** Rachel Ray peak open range recipe (beef, venison, lamb)

**Description:** DCM and arrhythmias diagnosed at time of GDV surgery so unclear if sepsis/post-op or true DCM. Had recheck echo 10/31/18 and still has DCM. Taurine pending. Owner has changed diet to Royal Canin Boxer

**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**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Rachel Ray peak open range recipe (beef, venison, lamb)		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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**Report Details - EON-370720**

ICSR: 2058685  
 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: 2018-11-09 18:09:56 EST

**Reported Problem:**

**Problem Description:** DCM and arrhythmias diagnosed at time of GDV surgery so unclear if sepsis/post-op or true DCM. Had recheck echo 10/31/18 and still has DCM. Taurine pending. Owner has changed diet to Royal Canin Boxer

**Date Problem Started:** 10/06/2018

**Concurrent Medical Problem:** Yes

**Pre Existing Conditions:** GDV 10/6/18

**Outcome to Date:** Stable

**Product Information:**

**Product Name:** Rachel Ray peak open range recipe (beef, venison, lamb)

**Product Type:** Pet Food

**Lot Number:**

**Package Type:** BAG

**Product Use Information:**

**Description:** Rachael Ray's since about 2017- prior to that it has been Purina One chicken and rice. The Rachael Ray that I fed him was "PEAK- open range receipt some with chicken some with lamb or beef. The dry was served with one half a can of newman's organic chicken and brown rice. I also cooked chicken breasts and rice as well as hamburger and rice every other week and used cup of this instead of the canned food. Mixed it in with the dry food. I have as of last Thursday switched him to Royal Canin dry food for Boxers with 1/2 can of science diet healthy cusine-roasted chicken, carrots and spinach stew mixed with about two cups of this dry food.

**Manufacturer /Distributor Information:**

**Purchase Location Information:**

**Animal Information:**

**Name:** B6

**Type Of Species:** Dog

**Type Of Breed:** Boxer (German Boxer)

**Gender:** Male

**Reproductive Status:** Intact

**Weight:** 34.8 Kilogram

**Age:** B6 years

**Assessment of Prior Health:** Good

**Number of Animals Given the Product:** 1

**Number of Animals Reacted:** 1

**Owner Information:**

**Owner Information provided:** Yes

**Contact:**

**Name:** B6

**Phone:**

**Email:**

		<b>Address:</b>	<b>B6</b>	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman	
		<b>Phone:</b>	(508) 887-4523	
<b>Email:</b>		lisa.freeman@tufts.edu		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			
<b>Additional Documents:</b>	<b>Attachment:</b>	compiled medical record.pdf		
	<b>Description:</b>	Records		
	<b>Type:</b>	Medical Records		

B6

B6

All Medical Records

B6

Breed: Golden Retriever

B6

Species: Canine  
Sex: Male  
(Neutered)

Referring Information

B6

Initial Complaint:

Scanned Record

Initial Complaint:

New B6 DCM study

SOAP Text B6 12:08PM B6

Disposition/Recommendations

**B6**

---

---



**B6**

Cummings  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**

Veterinarian:

**B6**

Visit ID:

**B6**

Species:	Canine
Breed:	Golden Retriever
Sex:	Male (Neutered)
Age:	<b>B6</b> Years Old

**Lab Results Report**

**B6**

1:29:30 PM

**B6**

Test	Results	Reference Range	Units
Troponin I Research - FHSA	<b>B6</b>	0 - 0.08	mg/dl

**B4, B6**

3/22

**B6**

Printed Friday

**B6**

**B6**

**Best Available Copy**

records



**B6**

**B6**

**B6**

records

**B6**

**B6**

records

**B6**

**B6**

**Best Available Copy**

records

**B6**

**B6**

**Best Available Copy**

records

**B6**

Page 8 of 8

**B6**

records

**B6**

**B6**

records

**B6**



**B6**

**Best Available Copy**

records

FECAL ANALYSIS: (in House)

**B6**

**B6**

records

FECAL ANALYSIS: (In House)

**B6**

**B6**

records

**B6**

Page 13 of 19

**B6**

records

FECAL ANALYSIS: (In House)

**B6**

**B6**

**Best Available Copy**

**B4, B6**

11/8/2018

**B6**

**B6**

**Best Available Copy**

CBC/Chem **B6**



Tufts Cummings School Of Veterinary Medicine  
100 Woburn Road  
North Grafton, MA 01133

DUPLICATE

**B6**

**B6**



Tufts Cummings School Of Veterinary Medicine  
100 Waverston Road  
North Grafton, MA 01133

DUPLICATE

**B6**

**B6**

---

**Vitals Results**

---

**B6**

11:32:13 AM

**B6**



**B6**

ECG from cardio

---

**B6**

**B6**

ECG from cardio

---

**B6**

**B6**

ECG from cardio

---

**B6**

**B6**

**Patient History**

**B6**

10:46 AM

12:36 PM

10:07 AM

10:48 AM

10:53 AM

11:32 AM

12:08 PM

12:18 PM

01:29 PM

01:30 PM

01:30 PM

01:30 PM

**B6**

**B6**

<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman	
		<b>Phone:</b>	(508) 887-4523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States			

<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			

<b>Additional Documents:</b>	<b>Attachment:</b>	compiled medical record.pdf	
	<b>Description:</b>	Records	
	<b>Type:</b>	Medical Records	

B6

Client:

Address:

B6

**All Medical Records**

Patient: B6

Breed: Golden Retriever

DOB: B6

Species: Canine

Sex: Male  
(Neutered)

**Referring Information**

B6

**Initial Complaint:**

Scanned Record

---

**Initial Complaint:**

New - B6 DCM study

SOAP Text

B6

12:08PM -

B6

---

**Disposition/Recommendations**

Client:  
Patient:

**B6**

---

---

Client:  
Patient: **B6**

Cummings  
Veterinary Medical Center  
AT TEXAS UNIVERSITY

**B6**

Client:  
Veterinarian:  
Patient ID:  
Visit ID:

**B6**

Patient:	<b>B6</b>
Species:	Canine
Breed:	Golden Retriever
Sex:	Male (Neutered)
Age:	<b>B6</b> Years Old

**Lab Results Report**

**B6** 1:29:30 PM Accession ID: **B6**

Test	Results	Reference Range	Units
Troponin I Research - FHSA	<b>B6</b>	0 - 0.08	mg/dl



**B6**

Printed Friday, November 09, 2018



Client:  
Patient:

**B6**

**Best Available Copy**

**B4, B6**

H records

**B4, B6**

**B6**

Client:  
Patient:

**B6**

**B4, B6**

records

**B4, B6**

**B6**

Client:  
Patient:

**B6**

**B4, B6**

records

**B4, B6**

**B6**

Client:  
Patient:

**B6**

**Best Available Copy**

**B4, B6**

records

**B4, B6**

**B6**

Client:  
Patient:

**B6**

**Best Available Copy**

**B4, B6**

**B6**

Page 8 of 8

Client:  
Patient:

**B6**

**B4, B6**

**B6**

Page 1 of 9

Client:  
Patient:

**B6**

**B4, B6**

**B6**

Client:  
Patient:

**B6**

**B4, B6**

FECAL ANALYSIS: (In House)

**B6**



Client:  
Patient:

**B6**

**B4, B6**

records

FECAL ANALYSIS: (In House)

**B6**

Client:  
Patient:

**B6**

**Best Available Copy**

**B4, B6**

**B6**

Page 13 of 19

Client: **B6**  
Patient:

**B4, B6** records

FECAL ANALYSIS: (In House)

**B6**

Client:  
Patient:

**B6**

**B4, B6**

**B6**

Client: **B6**  
Patient:

CBC/Chem: **B6**



Tufts Cummings School Of Veterinary Medicine  
300 Waverton Road  
North Grafton, MA 01133

DUPLICATE

**B6**

Client: **B6**  
Patient:

CBC/Chem **B6**



Tufts Cummings School Of Veterinary Medicine  
300 Woburn Road  
North Grafton, MA 01133

DUPLICATE

**B6**

**B6**

Client:  
Patient:

**B6**

---

**Vitals Results**

---

**B6**

11:32:13 AM

**B6**

Client:  
Patient:

**B6**

**ECG from cardio**

---

**B6**



Client:  
Patient:

**B6**

---

**ECG from cardio**

---

**B6**

Client:  
Patient:

**B6**

**ECG from cardio**

---

**B6**

Client: **B6**  
Patient:

**Patient History**

<b>B6</b>	10:46 AM	<b>B6</b>
	12:36 PM	
	10:07 AM	
	10:48 AM	
	10:53 AM	
	11:32 AM	
	12:08 PM	
	12:18 PM	
	01:29 PM	
	01:30 PM	
	01:30 PM	
	01:30 PM	
	01:30 PM	
	01:30 PM	

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; **B6**  
**Sent:** 11/10/2018 10:52:28 PM  
**Subject:** Zignature Trout & Salmon Meal Limited Ingredient Formula Grain-Free Dry Dog Food; **B6**; EON-370762  
**Attachments:** 2058699-report.pdf; 2058699-attachments.zip

A PFR Report has been received and PFR Event [EON-370762] has been created in the EON System.

A "PDF" report by name "2058699-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 "2058699-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-370762

**ICSR #:** 2058699

**EON Title:** PFR Event created for Zignature Trout & Salmon Meal Limited Ingredient Formula Grain-Free Dry Dog Food; 2058699

<b>AE Date</b>	04/24/2017	<b>Number Fed/Exposed</b>	2
<b>Best By Date</b>		<b>Number Reacted</b>	2
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Better/Improved/Recovering
<b>Breed</b>	Retriever - Golden		
<b>Age</b>	8 Years		
<b>District Involved</b>	PFR; <b>B6</b> ; DO		

**Product information**

**Individual Case Safety Report Number:** 2058699

**Product Group:** Pet Food

**Product Name:** Zignature Trout & Salmon Meal Limited Ingredient Formula Grain-Free Dry Dog Food

**Description:** **B6** has been eating Zignature Trout & Salmon kibble (1c. 2x/day) for over three years, since approximately August 2014. **B6** was diagnosed with a heart murmur in April 2017. Our regular vet said that it was not of concern if **B6** was not experiencing concerning symptoms, like being short of breath. In September 2018, **B6** started refusing to eat. She was also coughing and vomiting. On **B6** she collapsed and was

unconscious and not breathing for several minutes. She was resuscitated with CPR. She was brought to a veterinary emergency hospital, where her blood was collected for taurine testing at University of California-Davis, and an echocardiogram diagnosed a severe case of Dilated Cardiomyopathy. She has since been enrolled in a study program for diet-related Dilated Cardiomyopathy in dogs at [B6] Our younger dog, [B6] was diagnosed with DCM on [B6] and I will be making a separate report regarding him.

**Submission Type:** Initial

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

**Outcome of reaction/event at the time of last observation:** Better/Improved/Recovering

**Number of Animals Treated With Product:** 2

**Number of Animals Reacted With Product:** 2

Product Name	Lot Number or ID	Best By Date
Zignature Trout & Salmon Meal Limited Ingredient Formula Grain-Free Dry Dog Food		

**Sender information**

[B6]

USA

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

[B6]

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

[B6]

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**Report Details - EON-370762**

ICSR:	2058699
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:	2018-11-10 17:44:49 EST
Reporter is the Animal Owner:	Yes

<b>Reported Problem:</b>	<b>Problem Description:</b>	<b>B6</b> has been eating Zignature Trout & Salmon kibble (1c. 2x/day) for over three years, since approximately August 2014. <b>B6</b> was diagnosed with a heart murmur in April 2017. Our regular vet said that it was not of concern if <b>B6</b> was not experiencing concerning symptoms, like being short of breath. In <b>B6</b> <b>B6</b> started refusing to eat. She was also coughing and vomiting. On <b>B6</b> <b>B6</b> she collapsed and was unconscious and not breathing for several minutes. She was resuscitated with CPR. She was brought to a veterinary emergency hospital, where her blood was collected for taurine testing at University of California-Davis, and an echocardiogram diagnosed a severe case of Dilated Cardiomyopathy. She has since been enrolled in a study program for diet-related Dilated Cardiomyopathy in dogs at <b>B6</b> . Our younger dog, <b>B6</b> , was diagnosed with DCM on <b>B6</b> and I will be making a separate report regarding him.
	<b>Date Problem Started:</b>	04/24/2017
	<b>Concurrent Medical Problem:</b>	No
	<b>Outcome to Date:</b>	Better/Improved/Recovering

<b>Product Information:</b>	<b>Product Name:</b>	Zignature Trout & Salmon Meal Limited Ingredient Formula Grain-Free Dry Dog Food		
	<b>Product Type:</b>	Pet Food		
	<b>Lot Number:</b>			
	<b>Package Type:</b>	BAG		
	<b>Package Size:</b>	27 Pound		
	<b>Purchase Date:</b>	08/01/2014		
	<b>Number Purchased:</b>	1		
	<b>Possess Unopened Product:</b>	No		
	<b>Possess Opened Product:</b>	No		
	<b>Storage Conditions:</b>	The food was stored in an airtight plastic container after the bag was opened.		
	<b>Product Use Information:</b>	<b>Description:</b>	I fed my two dogs exactly 1 cup each of this food twice per day.	
		<b>First Exposure Date:</b>	08/02/2014	
		<b>Last Exposure Date:</b>	<b>B6</b>	
<b>Time Interval between Product Use and Adverse Event:</b>		27 Months		
<b>Product Use Stopped After the Onset of the Adverse Event:</b>		Yes		
<b>Adverse Event Abate After Product Stop:</b>		Yes		
<b>Product Use</b>		No		

		<b>Started Again:</b> <b>Perceived Relatedness to Adverse Event:</b> Definitely related <b>Other Foods or Products Given to the Animal During This Time Period:</b> Yes						
	<b>Manufacturer /Distributor Information:</b>							
	<b>Purchase Location Information:</b>	<b>Name:</b> B6 <b>Address:</b> B6 United States						
<b>Animal Information:</b>	<b>Name:</b>	B6						
	<b>Type Of Species:</b>	Dog						
	<b>Type Of Breed:</b>	Retriever - Golden						
	<b>Gender:</b>	Female						
	<b>Reproductive Status:</b>	Neutered						
	<b>Weight:</b>	57 Pound						
	<b>Age:</b>	8 Years						
	<b>Assessment of Prior Health:</b>	Good						
	<b>Number of Animals Given the Product:</b>	2						
	<b>Number of Animals Reacted:</b>	2						
	<b>Owner Information:</b>							
	<b>Healthcare Professional Information:</b>	<b>Practice Name:</b> B6 <b>Contact:</b> <table border="1"> <tr> <td><b>Name:</b></td> <td>B6</td> </tr> <tr> <td><b>Phone:</b></td> <td>B6</td> </tr> <tr> <td><b>Email:</b></td> <td></td> </tr> </table> <b>Address:</b> B6 <b>Type of Veterinarian:</b> Referred veterinarian <b>Date First Seen:</b> 10/08/2018 <b>Permission to Release Records to FDA:</b> Yes	<b>Name:</b>	B6	<b>Phone:</b>	B6	<b>Email:</b>	
<b>Name:</b>	B6							
<b>Phone:</b>	B6							
<b>Email:</b>								
	<b>Practice Name:</b>	B6						
	<b>Contact:</b>	<table border="1"> <tr> <td><b>Name:</b></td> <td>B6</td> </tr> <tr> <td><b>Phone:</b></td> <td>B6</td> </tr> <tr> <td><b>Email:</b></td> <td></td> </tr> </table>	<b>Name:</b>	B6	<b>Phone:</b>	B6	<b>Email:</b>	
<b>Name:</b>	B6							
<b>Phone:</b>	B6							
<b>Email:</b>								
	<b>Address:</b>	B6						
	<b>Type of</b>	Primary/regular veterinarian						



	Veterinarian:		
	Date First Seen:	04/27/2018	
	Permission to Release Records to FDA:	Yes	
	Practice Name:	B6	
	Contact:	Name:	B6
		Phone:	
		Email:	
	Address:	B6	
Type of Veterinarian:	Referred veterinarian		
Date First Seen:	B6		
Permission to Release Records to FDA:	Yes		

Sender Information:	Name:	B6	
	Address:	B6	
	Contact:	Phone:	B6
		Email:	
	Permission To Contact Sender:	Yes	
	Preferred Method Of Contact:	Email	
Reported to Other Parties:	None		

Additional Documents:	Attachment:	4800_001.pdf
	Description:	Records from B6 & taurine testing results
	Type:	Echocardiogram

B6

Discharge Instructions

B6

Species: Canine  
Blonde Female (Spayed) Golden  
Retriever

Birthdate: B6

B6

B6

B6

Admit Date: B6 8:30:52 PM

Discharge Date: B6

**Diagnoses:** Dilated cardiomyopathy (DCM) with congestive heart failure

**Case summary:**

Thank you for bringing Jesse in to B6 for evaluation of her inappetence, lethargy and vomiting. B6 was diagnosed with dilated cardiomyopathy by your family veterinarian who started several cardiac medications (Furosemide, Enalapril, Pimobendan). She had been stable until two days ago when her appetite decreased, she appeared lethargic and she vomited.

On echocardiogram (ultrasound of the heart), we confirmed a diagnosis of dilated cardiomyopathy (DCM). This disease is more common in large and giant breed dogs and is characterized by thinning of the walls of the heart, reduced cardiac pump function, and enlargement of the upper chambers of the heart. Many dogs with DCM will also have significant arrhythmias which can be life-threatening and also require medical management. At this time B6 has very infrequent, isolated arrhythmic heart beats. It is unclear whether arrhythmia was the cause of her collapse. Unfortunately this is a progressive disease and we cannot reverse the changes to the heart muscle, however we can use cardiac medications and some changes to the diet to make your dog comfortable and have him breathing easier.

It is difficult to determine if B6 more recent signs are related to her heart disease, a medication side effect or to changing her diet. We also recommend starting a daily taurine supplement, as we wait the results of B6 Taurine level bloodwork. Some dogs with DCM respond well to taurine supplementation and can have a decrease in heart size.

**Monitoring at home:**

# B6

## Recommended Medications:

# B6

## Diet suggestions:

At this time, we would like you to start **B6** on a heart healthy diet such as Royal Canin Early Cardiac diet, Royal Canin Boxer, or ProPlan Adult Weight Management. If she prefers wet food you can try an option like Hill's Science Diet Adult Beef & Barely entree. Please contact us if you need more options.

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

## Exercise Recommendations:

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:

We would like you schedule a **recheck appointment in 1 week** so that we can recheck **B6** bloodwork values and assess whether or not we should start a different ACEi. We also would like to schedule a **recheck echocardiogram in 4 months** for

**B6**

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

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

---

**Prescription Refill Disclaimer:**

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

**Ordering Food:**

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

**Clinical Trials:**

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

---

**B6**

Discharge Instructions

# Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY  
Cardiology Liaison: 508-887-4696

**B6**

**B6**

**B6** Canine

**B6** Years Old Female (Spayed) Golden  
Retriever

Blonde BW: Weight (kg) 27.70

## Cardiology Inpatient

Date: **B6**

Weight: Weight (kg) **B6**

**B6**

### Thoracic radiographs available for review?

- Yes - in SS  
 Yes - in PACS  
 No

### Presenting complaint and important concurrent diseases:

**B6** is a 8yo SF Golden Retriever who was diagnosed through the ER on **B6** with DCM after a collapsing episode. She was started on Enalapril 15mg PO q12, Pimobendan 7.5mg PO q12, and Furosemide 60mg PO q12. She was scheduled for a cardiology appointment on 10/17/18. She was stable until **B6** when she began to lose her appetite and became lethargic, owners were concerned about her sudden change so they brought her into Tufts ER on **B6**. Prior to arriving at the ER she vomited once (liquid/brown/grass) and was retching. She has a test pending for taurine levels. She had previously been on a grain free diet, but was switched to Nature's variety instinct raw beef and barely.

On presentation to the ER on **B6** initial diagnostics included NOVA (PCV 40, TS 6.5, Lactate 2.3 [H], BUN 48 [H], Crea 1.3), CBC/Chem/UA-pending, chest radiographs (Cardiomegaly, possible perihilar interstitial pattern, report pending) and AFAST/TFAST (no FF, LV dilation w/ poor contractility). She was hospitalized overnight with telemetry and scheduled for a cardio consult today **B6**

\*STOP - remainder of form to be filled out by Cardiology\*

### Physical Examination

**B6**

### Muscle condition:

- Normal  
 Mild muscle loss  
 Moderate cachexia  
 Marked cachexia

**Cardiovascular Physical Exam**

Murmur Grade:

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

Murmur location/description: systolix left apical

Jugular vein:

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

Arterial pulses:

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

Arrhythmia:

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

Gallop:

- Yes
- No
- Intermittent
- Pronounced
- Other:

Pulmonary assessments:

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

Abdominal exam:

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites

**Echocardiogram Findings:**

**B6**

**Doppler findings:**

**B6**

**B6**

**Mitral inflow:**

- Summated
- Normal
- Delayed relaxation

- Pseudonormal
- Restrictive

**Blood Pressure (mmHg):** 100mmHg

**B6**

**ECG findings:**

**B6**

**Radiographic findings:**

**B6**

**Assessment and recommendations:** Findings revealed advanced LV dilation and systolic dysfunction consistent with DCM

**B6**

**B6**

**Treatment plan:**

**B6**

**Final Diagnosis:**

- Advanced dilated cardiomyopathy with suspected mild LCHF (r/o primary vs. diet induced)

**Heart Failure Classification Score:**

ISACHC Classification:

- Ia
- Ib
- II
- IIIa
- IIIb

ACVIM CHF Classification:

- A
- B1
- B2
- C
- D

M-Mode

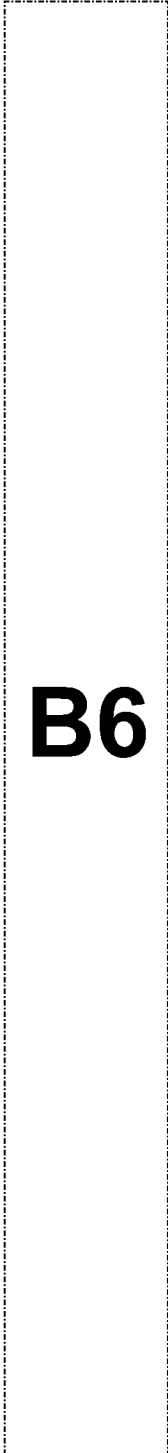
IVSd	cm
LVIDd	cm
LVPWd	cm
IVSs	cm
LVIDs	cm
LVPWs	cm
%FS	%
Max LA	cm
Time	ms
HR	BPM
CO(Teich)	l/min
CI(Teich)	l/minm
EPSS	cm

M-Mode Normalized

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)

2D

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





LVAd LAX  
LVEDV A-L LAX  
LVEDV MOD LAX  
LVLS LAX  
LVAs LAX  
LVESV A-L LAX  
LVESV MOD LAX  
HR  
EF A-L LAX  
LVEF MOD LAX  
SV A-L LAX  
SV MOD LAX  
CO A-L LAX  
CO MOD LAX

Doppler

MV E Vel  
MV DecT  
MV A Vel  
MV E/A Ratio  
E'  
A'  
E/E'  
S'  
MR Vmax  
MR Vmean  
MR maxPG  
MR meanPG  
MR VTI  
PV Vmax  
PV maxPG  
AV Vmax  
AV maxPG  
IVRT  
TR Vmax  
TR maxPG

**B6**

cm  
ml  
ml  
cm  
cm  
ml  
ml  
ml  
BPM  
%  
%  
ml  
ml  
l/min  
l/min

m/s  
ms  
m/s

m/s  
m/s

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

**B6**

**B6**

Sex: SF

**B6**

Age: 8

Draw Location: GRAFSAH

Room Num:

Sample ID: 1810080088

Requisition #:

Phlebotomist: N/A

Phone:

**B6**

Collection Date: **B6** 10:23 PM

Approval Date: **B6** 11:54 AM

Fasting: No

**CBC, Comprehensive, Sm Animal**

Approved By: **B6** 10:48 AM

Test	Results	Abnormal	Units	Range
WBC (ADVIA)	<b>B6</b>		K/uL	4.40-15.10
RBC (Advia)			M/uL	5.80-8.50
Hemoglobin (ADVIA)			g/dL	13.3-20.5
Hematocrit (Advia)			%	39-55
MCV (ADVIA)			fL	64.5-77.5
MCH (ADVIA)			pg	21.3-25.9
MCHC (ADVIA)			g/dL	31.9-34.3
RDW (ADVIA)				11.9-15.2
Platelet Count (Advia)			K/uL	173-486

**B6** 10:47 AM

**B6**

Mean Platelet Volume (Advia)

**B6**

fL 8.29-13.20

**B6** 8:18 AM

**B6**

Platelet Crit

**B6**

% 0.129-0.403

**B6** 8:18 AM

**B6**

Reticulocyte Count (Advia)

**B6**

% 0.20-1.60

Absolute Reticulocyte Count (Advia)

K/uL 14.7-113.7

**Microscopic Exam of Blood Smear (Advia)**

Approved By: **B6** 10/09/2018 10:48 AM

Test	Results	Abnormal	Units	Range
Seg Neuts (%)	<b>B6</b>		%	43-86
Lymphocytes (%)			%	7-47
Monocytes (%)			%	1-15
Eosinophils (%)			%	0-16
Seg Neutrophils (Abs) Advia			K/uL	2.800-11.500
Lymphs (Abs) Advia			K/uL	1.000-4.800
Mono (Abs) Advia			K/uL	0.100-1.500
Eosinophils (Abs) Advia			K/uL	0.000-1.400
WBC Morphology				
Acanthocytes				
Poikilocytosis				

**Chem Prof - Small Animal (Cobas)**

Approved By: **B6** 9:39 AM

Test	Results	Abnormal	Units	Range
Glucose			mg/dL	67-135
Urea			mg/dL	8-30
Creatinine			mg/dL	0.6-2.0
Phosphorus			mg/dL	2.6-7.2
Calcium 2			mg/dL	9.4-11.3
Magnesium 2+			mEq/L	1.8-3.0
Total Protein			g/dL	5.5-7.8
Albumin			g/dL	2.8-4.0
Globulins			g/dL	2.3-4.2
A/G Ratio				0.7-1.6
Sodium			mEq/L	140-150
Chloride			mEq/L	106-116
Potassium			mEq/L	3.7-5.4
tCO2(Bicarb)			mEq/L	14-28
AGAP				8.0-19.0
NA/K				29-40
Total Bilirubin			mg/dL	0.10-0.30
Direct Bilirubin			mg/dL	0.00-0.10
Indirect Bilirubin			mg/dL	0.00-0.20
Alkaline Phosphatase			U/L	12-127
GGT			U/L	0-10
ALT			U/L	14-86
AST			U/L	9-54
Creatine Kinase			U/L	22-422
Cholesterol			mg/dL	82-355
Triglycerides			mg/dl	30-338
Amylase			U/L	409-1250
Osmolality (calculated)			mmol/L	291-315

**B6**

**Urinalysis**

**B6** 1:54 AM

Test	Results	Abnormal	Units	Range
Urine Collection				
Urine Color				
Urine Turbidity				
Urine Specific Gravity				
Urine pH				
Urine Protein				
Urine Glucose				
Urine Ketones				
Urine Bilirubin				

**B6**

**B6**

**B6** 11:54 AM

**B6**

Urine Heme Protein				
Urine WBC			/hpf	
Urine RBC			/hpf	
Urine Bacteria			/hpf	
Urine Crystals			/hpf	
Urine Fat Urine Droplets			/hpf	

**B6**

**B6**

SID: 1810080088; **B6**

END OF REPORT (Final)

Reviewed by: \_\_\_\_\_

**B6**

**B6**

Sex: SF

**B6**

Age: 8

Draw Location: GRAFSAH

Room Num:

Sample ID: 1810080089

Requisition #:

Phone:

Phlebotomist: N/A

Collection Date:

**B6**

10:28 PM

**B6**

Approval Date:

1:33 AM

Fasting: No

**Nova Full Panel-ICU**

**B6**

1:33 AM

**Test**

**Results**

**Abnormal**

**Units**

**Range**

pH

7.337-7.467

pCO2

mmHg

36.0-44.0

pO2

mmHg

80.0-100.0

SO2%

%

94.0-100.0

Hct (POC)

%

38-48

Hb (POC)

g/dL

12.6-16.0

Sodium (POC)

mmol/L

140.0-154.0

K (POC)

mmol/L

3.6-4.8

Cl (POC)

mmol/L

109-120

Ca (ionized)

mmol/L

1.17-1.38

Mg, (ionized) (POC)

mmol/L

0.1-0.4

Glucose (POC)

mg/dL

80-120

Lactate

mmol/L

0.0-2.0

BUN (POC)

mg/dL

12.0-28.0

Creat (POC)

mg/dL

0.2-2.1

TCO2 (POC)

mmol/L

nCa

mmol/L

nMg

mmol/L

Gap

mmol/L

Ca/Mg

mol/mol

BEecf

mmol/L

BEb

mmol/L

HCO3

mmol/L

18.0-24.0

A

mmHg

NOVA Sample Source

FiO2

%

**B6**

SID: 1810080089

**B6**

END OF REPORT (Final)

Reviewed by: \_\_\_\_\_

**B6**

**B6**

**B6**

Requisition #:

Phone:

Collection Date:

Approval Date:

**B6**

10:19 AM

1:06 PM

Sex: SF

Age: 8

Room Num:

Draw Location: GRAFSAH

Sample ID: 1810090060

Phlebotomist: N/A

**B6**

Fasting: No

**Chemistry 21 (Cobas)**

**B6**

1:06 PM

**Test**

**Results**

**Abnormal**

**Units**

**Range**

Glucose

mg/dL

67-135

Urea

mg/dL

8-30

Creatinine

mg/dL

0.6-2.0

Phosphorus

mg/dL

2.6-7.2

Calcium 2

mg/dL

9.4-11.3

Total Protein

g/dL

5.5-7.8

Albumin

g/dL

2.8-4.0

Globulins

g/dL

2.3-4.2

A/G Ratio

0.7-1.6

Sodium

mEq/L

140-150

Chloride

mEq/L

106-116

Potassium

mEq/L

3.7-5.4

NA/K

29-40

Total Bilirubin

mg/dL

0.10-0.30

Direct Bilirubin

mg/dL

0.00-0.10

Indirect Bilirubin

mg/dL

0.00-0.20

Alkaline Phosphatase

U/L

12-127

ALT

U/L

14-86

AST

U/L

9-54

Cholesterol

mg/dL

82-355

Osmolality (calculated)

mmol/L

291-315

Comments (Chemistry)

**B6**

SID: 1810090060

**B6**

END OF REPORT (Final)

Reviewed by: \_\_\_\_\_

# B6

Current Diet : Signature trout & salmon

Sample type: Plasma Whole Blood Urine Food Other \_\_\_\_\_

Test: Taurine Complete Amino Acids Other: \_\_\_\_\_

Taurine Results (lab use only)

Plasma: \_\_\_\_\_ Whole Blood: **B6** Urine: \_\_\_\_\_ Food: \_\_\_\_\_

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

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

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** [Redacted] **B6**  
**Sent:** 11/9/2018 10:36:55 PM  
**Subject:** Zignature trout and salmon dry: Lisa Freeman - EON-370713  
**Attachments:** 2058681-report.pdf; 2058681-attachments.zip

A PFR Report has been received and PFR Event [EON-370713] has been created in the EON System.

A "PDF" report by name "2058681-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 "2058681-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-370713

**ICSR #:** 2058681

**EON Title:** PFR Event created for Zignature trout and salmon dry; 2058681

<b>AE Date</b>	10/08/2018	<b>Number Fed/Exposed</b>	3
<b>Best By Date</b>		<b>Number Reacted</b>	2
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Retriever - Golden		
<b>Age</b>	8 Years		
<b>District Involved</b>	PFR [Redacted] <b>B6</b> DO		

**Product information**

**Individual Case Safety Report Number:** 2058681

**Product Group:** Pet Food

**Product Name:** Zignature trout and salmon dry

**Description:** DCM and CHF. From late-2014 through 09/30/18, [Redacted] **B6** ate about 1 cup of Zignature trout & salmon dry food twice per day. Then, from 10/01-10/14/18, she ate Nature's Variety Instinct Raw beef & barley dry food (1.5c. 2x/day). The primary cookies she ate was Earthborn Holistic Grain-Free, all varieties, and she might have had 3-4 cookies per day. The only other cookies she would have eaten were misc. varieties brought by misc. delivery people (propane, UPS, etc.) and not regularly. If we ever had to give her medication, we always used the Greenies Pill Pockets. Taurine for [Redacted] **B6** - 327 whole blood Owners' other Golden, [Redacted] **B6** is four and

was born on 08/03/15. He ate Zignature trout & salmon from 09/30/15-10/01/18 (see separate report). We also have a Golden puppy **B6** who was born on **B6** and ate the same Zignature from 07/23-10/01/18.

**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:** 3

**Number of Animals Reacted With Product:** 2

Product Name	Lot Number or ID	Best By Date
Zignature trout and salmon dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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

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through your local district FDA office.

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**Report Details - EON-370713**

ICSR: 2058681  
 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: 2018-11-09 17:31:06 EST

**Reported Problem:**

**Problem Description:** DCM and CHF. From late-2014 through 09/30/18, [B6] ate about 1 cup of Zignature trout & salmon dry food twice per day. Then, from 10/01-10/14/18, she ate Natures Variety Instinct Raw beef & barley dryg food (1.5c. 2x/day). The primary cookies she ate was Earthborn Holistic Grain-Free, all varieties, and she might have had 3-4 cookies per day. The only other cookies she would have eaten were misc. varieties brought by misc. delivery people (propane, UPS, etc.) and not regularly. If we ever had to give her medication, we always used the Greenies Pill Pockets. Taurine for [B6] - 327 whole blood Owners' other Golden, [B6] is four and was born on [B6]. He ate Zignature trout & salmon from 09/30/15-10/01/18 (see separate report). We also have a Golden puppy, [B6] who was born on [B6] and ate the same Zignature from 07/23-10/01/18.

**Date Problem Started:** 10/08/2018

**Concurrent Medical Problem:** No

**Outcome to Date:** Stable

**Product Information:**

**Product Name:** Zignature trout and salmon dry

**Product Type:** Pet Food

**Lot Number:**

**Package Type:** BAG

**Product Use Information:** **Description:** From late-2014 through 09/30/18, [B6] ate about 1 cup of Zignature trout & salmon dry food twice per day. Then, from 10/01-10/14/18, she ate Natures Variety Instinct Raw beef & barley dryg food (1.5c. 2x/day). The primary cookies she ate was Earthborn Holistic Grain-Free, all varieties, and she might have had 3-4 cookies per day. The only other cookies she would have eaten were misc. varieties brought by misc. delivery people (propane, UPS, etc.) and not regularly. If we ever had to give her medication, we always used the Greenies Pill Pockets.

**Manufacturer /Distributor Information:**

**Purchase Location Information:**

**Animal Information:**

**Name:** [B6] (will report other dog separately)

**Type Of Species:** Dog

**Type Of Breed:** Retriever - Golden

**Gender:** Female

**Reproductive Status:** Neutered

**Weight:** 27.7 Kilogram

**Age:** 8 Years

**Assessment of Prior Health:** Excellent

**Number of Animals Given the Product:** 3

**Number of Animals Reacted:** 2

**Owner Information:** **Owner Information provided:** Yes

		<b>Contact:</b>	<b>Name:</b>	<b>B6</b>
			<b>Phone:</b>	
			<b>Email:</b>	
		<b>Address:</b>	<b>B6</b>	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman	
		<b>Phone:</b>	(508) 887-4523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
	<b>Preferred Method Of Contact:</b>	Email		
<b>Additional Documents:</b>	<b>Attachment:</b>	compiled records.pdf		
	<b>Description:</b>	Medical records		
	<b>Type:</b>	Medical Records		

**B6**

**B6**

**All Medical Records**

**B6**

Breed: Golden Retriever

**B6**

Species: Canine  
Sex: Female  
(Spayed)

**Referring Information**

**B6**

**Initial Complaint:**

DCM

SOAP Text

**B6**

9:04PM

**B6**

**Subjective**

NEW VISIT (ER)

**B6**

Presenting complaint: anorexia, vomiting, lethargy

Referral visit? no

Diagnostics completed prior to visit: none

**HISTORY:**

Signalment: 8 YO, FS, golden

Current history: Presenting to ER for history of collapse last Sunday. She was taken to an ER clinic at that time and diagnosed with DCM. She was put on pimobendan, furosemide and enalapril. She had been doing well up until yesterday. She lost her appetite (didn't eat any dinner or treats) and became lethargic and spacey. Has been drinking more since starting the new medications. Has an appointment with a cardiologist on the 17th, but worried about her sudden change today. Has a test pending for taurine levels. She vomited today before arriving, observed retching and the vomitus was brown and liquid with grass. No diarrhea. No C/S. O would like to see if we can fit her into cardio apt tomorrow rather than waiting for their planned appt.

Prior medical history: DCM diagnosed **B6** chronic ear infections

**B6**

Current medications:

**B6**

EXAM:

**B6**

ASSESSMENT:

**B6**

PLAN:

**B6**

Diagnostics completed:

**B6**

**B6**

**B6**

Diagnostics pending:

**B6**

Client communication: **B6**

**B6**

Deposit & estimate status: **B6**

Resuscitation code (if admitting to ICU): YELLOW

SOAP approved (DVM to sign): **B6** DVM

SOAP Text **B6** 6:47AM - Clinician, Unassigned FHSA

Daily Exam, Cardiology **B6**

**B6** is a 8yo SF Golden Retriever who was diagnosed through the ER on **B6** with DCM after a collapsing episode. She was started on Enalapril 15mg PO q12, Pimobendan 7.5mg PO q12, and Furosemide 60mg PO q12. She was scheduled for a cardiology appointment on **B6**. She was stable until **B6** when she began to lose her appetite and became lethargic, owners were concerned about her sudden change so they brought her into Tufts ER on **B6**. Prior to arriving at the ER she vomited once (liquid/brown/grass) and was retching. She has a test pending for taurine levels. She had previously been on a grain free diet, but was switched to Nature's variety instinct raw beef and barely.

On presentation to the ER on **B6** initial diagnostics included NOVA (PCV 40, TS 6.5, Lactate 2.3 [H], BUN 48 [H], Crea 1.3), CBC/Chem/UA-pending, chest radiographs (Cardiomegaly, possible perihilar interstitial pattern, report pending) and AFAST/TFAST (no FF, LV dilation w/ poor contractility). She was hospitalized overnight with telemetry and scheduled for a cardio consult today **B6**.

**Subjective**

**B6**

Overnight update: **B6** picked at her food overnight and ate well this morning, she did not have any eliminations. HR remained between 65 to 119bpm. Cardiac rhythm was normal majority of the time (SA or NSR) with occasional isolated VPCs. Respiratory rates were in normal parameters (high 20s- low 30s).

**Objective**

**B6**

**B6**

**B6**

**Assessments**

**B6**

**Plan**

**B6**

SOAP completed by: **B6**

SOAP reviewed by:

**Disposition/Recommendations**

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**B6**

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**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B6**

**B6**  
Veterinarian:  
**B6**  
Visit ID:

**B6**  
Species: Canine  
Breed: Golden Retriever  
Sex: Female (Spayed)  
Age: **B6** Years Old

**Lab Results Report**

**CBC, Comprehensive, Sm Animal**      **B6**      12 PM      **B6**

Test	Results	Reference Range	Units
WBC (ADVIA)	<b>B6</b>	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)		31.9 - 34.3	g/dL
RDW (ADVIA)		11.9 - 15.2	
PLT(ADVIA)		173 - 486	K/uL
MPV (ADVIA)		8.29 - 13.2	fl
PLTCRT		0.129 - 0.403	%
RETIC(ADVIA)		0.2 - 1.6	%
RETICS (ABS) ADVIA		14.7 - 113.7	K/uL

**CBC, Comprehensive, Sm Animal**      **B6**      9:23:27 PM      **B6**

Test	Results	Reference Range	Units
GLUCOSE	<b>B6</b>	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
MAGNESIUM 2+		1.8 - 3	mEq/L

**B4**

6/38

**B6**

Printed Friday,

**B6**

**B6**

T. PROTEIN		5.5 - 7.8	g/dL
ALBUMIN		2.8 - 4	g/dL
GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
tCO2 (BICARB)		14 - 28	mEq/L
AGAP		8 - 19	
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
GGT		0 - 10	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CK		22 - 422	U/L
CHOLESTEROL		82 - 355	mg/dL
TRIGLYCERIDES		30 - 338	mg/dl
AMYLASE		409 - 1250	U/L
1816 Result(s) verified			
OSMOLALITY (CALCULATED)		291 - 315	mmol/L

**B6**

<b>CBC, Comprehensive, Sm Animal</b>	<b>B6</b>	<b>10:23:10 PM</b>	<b>B6</b>
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Test	Results	Reference Range	Units
SEGS%		43 - 86	%
LYMPIIS%		7 - 47	%
MONOS%		1 - 15	%
EOS%		0 - 16	%
SEGS (AB)ADVIA		2.8 - 11.5	K/uI
LYMPHS (ABS)ADVIA		1 - 4.8	K/uL
MONOS (ABS)ADVIA		0.1 - 1.5	K/uL
EOS (ABS)ADVIA		0 - 1.4	K/uL
WBC MORPHOLOGY		0 - 0	
No Morphologic Abnormalities			
ACANTHOCYTES		0 - 0	
POIKILOCYTOSIS		0 - 0	

**B6**

<b>CBC, Comprehensive, Sm Animal</b>	<b>B6</b>	<b>23:14 PM</b>	<b>B6</b>
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Test	Results	Reference Range	Units
U COLLECT	Not Indicated	0 - 0	

**B4**

7/38

**B4**

Printed Friday

**B6**

**B6**

U COLOR	0 - 0
U TURBIDITY	0 - 0
U SG	0 - 0
U PH	0 - 0
U PROTEIN	0 - 0
U GLUCOSE	0 - 0
U KETONES	0 - 0
U BILIRUBIN	0 - 0

**B6**

**B6**

U HEME PROTEIN	0 - 0	
U WBC	0 - 0	/hpf
U RBC	0 - 0	/hpf
U BACTERIA	0 - 0	/hpf
U CRYSTALS	0 - 0	/hpf
U FAT	0 - 0	/hpf

**B6**

**CBC, Comprehensive, Sm Animal**      **B6**      10:28:25 PM      **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		0 - 2	mmol/L
BUN (POC)		12 - 28	mg/dL
CREAT (POC)		0.2 - 2.1	mg/dL
TCO2 (POC)		0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG		0 - 0	mmol/L
GAP		0 - 0	mmol/L
CA/MG		0 - 0	mol/mol
BEecf		0 - 0	mmol/L
BEb		0 - 0	mmol/L
A		0 - 0	mmHg
NOVA SAMPLE		0 - 0	
FiO2		0 - 0	%
PCO2		36 - 44	mmHg

**B6**

**B4**

8/38

**B6**

Printed Friday

**B6**

**B6**

PO2		80 - 100	mmHg
PH		7.337 - 7.467	
PCO2	<b>B6</b>	36 - 44	mmHg
PO2		80 - 100	mmHg
HCO3		18 - 24	mmol/L

**CBC, Comprehensive, Sm Animal**      **B6**      0:37:16 PM      **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%
TS (FHSA)		0 - 0	g/dl

**CBC, Comprehensive, Sm Animal**      **B6**      0:19:21 AM      **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		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K		29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
D.BILIRUBIN		0 - 0.1	mg/dL
I BILIRUBIN		0 - 0.2	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L
COMMENTS (CHEMISTRY)		0 - 0	

**CBC, Comprehensive, Sm Animal**      **B6**      0:48:18 AM      **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%
TS (FHSA)		0 - 0	g/dl

**B4**

9/38

**B6**

Printed Friday,

**B6**

**B6**

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**B6**

**B4, B6**

**B6**

WAS FEEDING SIGNATURE  
TROUT + SALMON, NOW  
FEEDING NATURE'S ~~...~~

**B6**

VARIETY  
DISTINCT RAW  
BEEF + BARLEY

**B6**

**B6**

Sex: FS Breed: Golden Retriever Color: Gold Weight: **B6**

**B6**

REGULAR VET IS

**B6**

Take Home Instructions:

Discharge Date: **B6**  
Admission Date: **B6**

Chief complaint:  
Collapse

Pertinent History:

**B6** (8y FS golden) was seen on emergency for collapse while outside prior to presentation. She seemed dead but came to shortly after owner was rubbing on chest. She has a history of heart murmur - never worked up. She is otherwise healthy with history of mushroom ingestions.

appt. w/  
Cardiologist Dr.  
**B6**  
10/17

Diagnostics:

**B4, B6**

MEDS LAST  
GIVEN  
7:30 AM  
**B6**

**B4, B6**

Diagnosis:  
DCM - suspected  
inappropriate urine concentration

**B6**

**B6**

**B4, B6**

**B6**

**Take Home Instructions:**

**B6**

**Medications:**

**B6**

**B6**

**B6**

**B4, B6**

**B6**

**B6**

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**B6**

**Fax**

**B6**

**B6**

**B6**

Date:

**B6**

Re:

Pages:

*2 w/ cover*

Urgent

For Review

Please Comment

Please Reply

•Comments:

**B6**

*chem 10*



**B4, B6**

**B6**

**B4, B6**

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Page 1 of 1

Catalyst Dx  
Date Performed: **B6** 03:50 PM

**B6**

Species: Canine  
Breed: Golden Retriever  
Birthdate: **B6**  
Sex: FS

**B4, B6**

Provider: 0

GLU

CREA

BUN

Patient Name  
BUN/CREA

Name

Owner

Provider

ALB

GLOB

ALB/GLOB

Patient Name  
ALT/CKP

Name

Owner

Provider

ALP

GGT

ALP

Patient Name  
ALT/CKP

Name

Owner

Provider

ALP

CKP

ALP

Patient Name  
BUN/CREA

Name

Owner

Provider

**B6**

file:///C:/Program%20Files%20(x86)/Infinity/def.htm

**B6**

**B6**

UCDavis Taurine Level

**B6**

**B6**

**B6**

Species: canine

Breed: Golden retriever

**B6**

Current Diet: Signature trout + salmon

Sample type: Plasma  Whole Blood  Urine  Food  Other

Test:  Taurine  Complete Amino Acids  Other: \_\_\_\_\_

Taurine Results (lab use only)

Plasma: \_\_\_\_\_ Whole Blood: **B6** Urine: \_\_\_\_\_ Food: \_\_\_\_\_

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

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

UNIVERSITY OF CALIFORNIA, DAVIS

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SANTA BARBARA • SANTA CRUZ

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

### FREQUENTLY REQUESTED INFORMATION REGARDING TAURINE & DILATED CARDIOMYOPATHY IN GOLDEN RETRIEVERS

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

1. Golden Retrievers with marginal taurine levels (defined below) have been diagnosed with dilated cardiomyopathy and have documented disease reversal after taurine supplementation and diet change.
2. Previously published work documents taurine sensitivity in Golden Retrievers.
3. The most recently published reference on normal blood taurine values shows higher levels than previously reported.

- o Normal whole blood taurine: >250nmol/ml.
- o Normal plasma taurine: >70nmol/ml.
  
- o Marginal whole blood taurine: 200-250nmol/ml.
- o Marginal plasma taurine: 60-70nmol/ml.
  
- o Low whole Blood taurine: <200nmol/ml.
- o Low plasma taurine: <60nmol/ml.

#### References:

- o Kramer EA, Kittleson MD, Fox PR, Lewis J, Pion PD. Plasma taurine concentrations with normal dogs and in dogs with heart disease. *J Vet Intern Med* 1995;9:253-258.
- o Belanger MC, Ouellet M, Queney G, Moreau M. Taurine deficient dilated cardiomyopathy in a family of golden retrievers. *J Am Anim Hosp Assoc* 2005;41:284-291.
- o Kittleson MD, Keene B, Pion PD, Loyer CC, MUST Study Investigators. Results of the multicenter spaniel trial (MUST): taurine- and carnitine-responsive dilated cardiomyopathy in American Cocker Spaniels with decreased plasma taurine concentration. *J Vet Intern Med* 1197;12:204-211.
- o Barkas RC, Choon G, Pion PD, Good KL, Rogers QR, Fascetti AJ. Taurine deficiency in Newfoundlands fed commercially available complete and balanced diets. *J Am Vet Med Assoc* 2003;273:1130-1136.
- o Fascetti AJ, Reed JR, Rogers QR, Barkas RC. Taurine deficiency in dogs with dilated cardiomyopathy: 12 cases (1997-2001). *J Am Vet Med Assoc* 2003;223:1137-1141.
- o Freeman LM, Michel KE, Brown DJ, Kaplan PM, Stamouhis MF, Rosenthal SL, Keene BW, Rush JE. Idiopathic dilated cardiomyopathy in Dalaians: nine cases (1990-1995). *J Am Vet Med Assoc* 1996;209:1592-1596.
- o Delaney SL, Katz PH, Rogers QR, Fascetti AJ. Plasma and whole blood taurine in normal dogs of varying size fed commercially prepared food. *J Anim Physiol Anim Nutr* 2003;87:236-244.

#### Plasma vs. whole blood taurine testing:

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

Page 1 of 3

**Clinical Recommendations for Golden Retrievers based on taurine levels:**If taurine levels test <200nmol/mL in whole blood or <60nmol/mL in plasma

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

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

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

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

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

**Diets of Concern & Choosing a diet**

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

**Points to consider when making a diet change:**

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

**Choosing a taurine or l-carnitine supplement:**

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

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

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

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

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

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

**Reporting to the FDA:**

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

<https://www.fda.gov/animalveterinary/safetyhealth/reportaproblem/ucm182403.htm>

Additional questions or comments:

[sterngenetics@ucdavis.edu](mailto:sterngenetics@ucdavis.edu)

This document last updated: Aug. 20, 2019

Page 3 of 3

**B6**

**Diet History Form**

**CARDIOLOGY DIET HISTORY FORM**  
Please answer the following questions about your pet

**B6** Today's date: 10/26/18

- How would you assess your pet's appetite? On a scale of 1-10 with 1 being poor and 10 being excellent: 10 (currently)
- Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)  
 Eats about the same amount as usual     Eats less than usual     Eats more than usual  
 Seems to prefer different foods than usual     Other She is eating fine now that her DCM is diagnosed and she's on meds.
- Over the last few weeks, has your pet (check one)  
 Lost weight     Gained weight     Stayed about the same weight     Don't know
- Please list below ALL pet foods, people food, treats, snack, dental chews, rawhides, and any other food item that your pet currently eats. Please include the brand, specific product, and flavor so we know exactly what your pet is eating.

**Food (include specific product and flavor)    Form    Amount    How often?    Fed since**  
Examples are shown in the table – please provide enough detail that we could go to the store and buy the exact same food.

Food (include specific product and flavor)	Form	Amount	How often?	Fed since
Nutro Grain Free Chicken, Lentil, & Sweet Potato Adult	dry	1 1/2 cup	2x/day	Jan 2018
85% lean hamburger	microwaved	3 oz	1x/week	Jan 2015
Pupperoni original beef flavor	treat	1/2	1x/day	Aug 2015
Rawhide	treat	6 inch twist	1x/week	Dec 2015
Royal Canin Early Cardiac	dry	1.5c	2x/day	10/14/18
Greenies Pill Pockets cheese flavor	treat w/ meds	1	2x/day	10/01/18

*\*Any additional diet information can be listed at the bottom of this sheet*

- Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)?  Yes  No If yes, please list which ones and give brands and amounts:  

	Brand/Concentration	Amount per day
Taurine	<input checked="" type="radio"/> Yes <input type="radio"/> No Mega taurine caps by Twinlab	1000mg 2x/day
Camitine	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Antioxidants	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Multivitamin	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Fish oil	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Coenzyme Q10	<input type="radio"/> Yes <input checked="" type="radio"/> No	
Other (please list):		
Example: Vitamin C	Nature's Bounty	500 mg tablets – 1 per day

- How do you administer pills to your pet?  
 I do not give any medications     I put them directly in my pet's mouth without food  
 I put them in my pet's dog/cat food     I put them in a Pill Pocket or similar product  
 I put them in foods (list foods): \_\_\_\_\_

**Additional diet or supplement information:** \_\_\_\_\_  
B6 has a couple cookies every day, but the brands really depend on what's on hand or what the UPS driver has in his pocket. We are going to stop this practice and narrow her treats down to a brand/variety that is in compliance with medical recommendations.  
\_\_\_\_\_  
\_\_\_\_\_

**Information below to be completed by the veterinarian:**  
Current body weight: \_\_\_\_\_ kg    Current body condition score (1-9): \_\_\_\_/9  
Muscle Condition Score:    normal muscle     mild muscle loss     moderate muscle loss     severe muscle loss

**B6**

Prescription Vetmedin 5.0 mg 10/29/18



Fax to: 1-800-600-8285 Or Call: 1-888-738-6331

**Prescription Authorization Request**

1. Please Approve by signing this form or Deny by checking "Denied"
  2. Make any necessary changes to script below.
  3. Fax this form back or call (both toll-free).
- Or visit [www.1800petmeds.com/vetlogin](http://www.1800petmeds.com/vetlogin) to electronically approve or deny.

*Called in  
by baby*

**B6**

Dear Doctor,

Thank you for taking the time today to help process this client's order!  
Please authorize within 24 hours.

**B6**



Your client placed an order on: **OCTOBER 29 2018**

**B6**

By signing this prescription authorization request, I confirm that I have conducted a physical examination of this pet and have a valid veterinarian-client-patient relationship as defined by federal law.

We're Pharmacy accredited by the NABP. All products are FDA/EPA approved for sale in the U.S.

**Our Pharmacists:**



- Ensure the accuracy of prescriptions
- Ensure products have ample expiration dates
- Ensure proper storage of all medications
- Offer generics

PetMed Express, Inc.

**B6**

Prescription Furosemide 40mg 10/29/18



Fax to: 1-800-600-8285 Or Call: 1-888-738-6331

**Prescription Authorization Request**

1. Please Approve by signing this form or Deny by checking "Denied"
  2. Make any necessary changes to script below.
  3. Fax this form back or call (both toll-free).
- Or visit [www.1800petmeds.com/vetlogin](http://www.1800petmeds.com/vetlogin) to electronically approve or deny.

*Cardio*

*Called in verbally*

**B6**

Dear Doctor,

Thank you for taking the time today to help process this client's order!  
Please authorize within 24 hours.

**B6**



Your client placed an order on: OCTOBER 29 2018

**B6**

By signing this prescription authorization request, I confirm that I have conducted a physical examination of this pet and have a valid veterinarian-client-patient relationship as defined by federal law.

We're Pharmacy accredited by the NABP. All products are FDA/EPA approved for sale in the U.S.

**Our Pharmacists:**



- Ensure the accuracy of prescriptions
- Ensure products have ample expiration dates
- Ensure proper storage of all medications
- Offer generics

PetMed Express, Inc.



**B6**

**Vitals Results**

9:38:50 PM  
9:38:51 PM  
9:38:52 PM  
9:38:53 PM  
10:37:46 PM  
11:20:02 PM  
11:20:12 PM  
11:20:21 PM  
11:20:38 PM  
11:31:50 PM  
11:31:59 PM  
11:32:13 PM  
11:32:19 PM  
11:32:27 PM  
11:32:28 PM  
12:32:16 AM  
12:32:17 AM  
1:01:33 AM  
1:37:51 AM  
1:37:52 AM  
2:26:31 AM  
2:26:32 AM  
3:23:02 AM  
3:25:54 AM  
3:26:06 AM  
3:26:07 AM  
4:33:20 AM  
4:33:21 AM  
4:33:37 AM  
4:54:37 AM  
4:55:56 AM  
5:23:32 AM  
5:23:33 AM  
6:35:59 AM  
6:36:00 AM  
7:36:37 AM  
  
7:36:54 AM  
7:37:11 AM  
7:37:39 AM

**B6**

**B6**

**B6**

**Vitals Results**

7:55:45 AM  
7:55:46 AM  
8:56:24 AM  
8:56:35 AM  
9:56:19 AM  
9:56:20 AM  
10:11:00 AM  
10:17:43 AM  
10:48:49 AM  
11:01:04 AM  
11:18:13 AM  
11:18:14 AM  
11:19:09 AM  
11:30:31 AM  
  
11:48:52 AM  
11:49:05 AM  
11:49:06 AM  
1:09:11 PM  
1:09:12 PM  
1:11:03 PM  
1:31:12 PM  
1:31:23 PM  
1:56:24 PM  
1:56:25 PM  
1:56:35 PM  
2:11:54 PM  
2:12:20 PM  
2:51:14 PM  
2:51:15 PM  
2:51:25 PM  
4:01:27 PM  
4:01:28 PM  
4:02:21 PM  
4:54:43 PM  
4:54:44 PM  
4:54:54 PM  
5:31:51 PM  
5:37:43 PM  
5:58:52 PM  
5:59:01 PM

**B6**

**B6**

**B6**

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**Vitals Results**

---

**B6**

5:59:18 PM  
5:59:19 PM  
5:55:15 PM  
7:48:07 PM

**B6**

**B6**

ECG from Cardio

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**B6**

**B6**

10:36:45 AM

**B6**

---

**B6**

**B6**

ECG from Cardio

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**B6**

**B6**

18 10:39:03 AM

Page 1 of 2

**B6**

**B6**

**B6**

ECG from Cardio

---

**B6**

**B6**

10:39:03 AM

Page 2 of 2

**B6**

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**B6**

**B6**

**Patient History**

08:31 PM  
09:24 PM  
09:25 PM  
09:38 PM  
09:38 PM  
09:38 PM  
09:38 PM  
09:43 PM  
  
09:46 PM  
  
10:03 PM  
10:03 PM  
10:23 PM  
10:28 PM  
10:34 PM  
10:34 PM  
10:37 PM  
10:37 PM  
10:40 PM  
11:20 PM  
11:20 PM  
11:20 PM  
**B6** 11:20 PM  
11:20 PM  
11:20 PM  
11:20 PM  
11:20 PM  
11:20 PM  
11:20 PM  
11:20 PM  
11:23 PM  
11:23 PM  
  
11:31 PM  
  
11:31 PM  
11:31 PM  
11:32 PM  
11:32 PM  
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11:32 PM  
11:32 PM  
11:32 PM  
11:32 PM  
11:32 PM  
  
11:32 PM  
11:32 PM  
11:32 PM  
11:32 PM

**B6**

**B6**

**Patient History**

2:32 AM  
2:32 AM  
2:32 AM  
1:01 AM  
1:01 AM  
1:37 AM  
1:37 AM  
1:37 AM  
2:26 AM  
2:26 AM  
2:26 AM  
3:23 AM  
3:23 AM  
3:23 AM  
3:25 AM  
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6:35 AM  
6:35 AM  
6:35 AM  
7:31 AM  
7:36 AM  
7:36 AM  
7:36 AM  
7:36 AM  
7:36 AM  
7:36 AM  
7:37 AM  
7:37 AM

**B6**

**B6**



**B6**

**Patient History**

07:37 AM  
07:44 AM  
07:55 AM  
  
07:55 AM  
07:55 AM  
08:19 AM  
08:20 AM  
08:22 AM  
08:56 AM  
  
08:56 AM  
08:56 AM  
09:20 AM  
09:21 AM  
  
09:56 AM  
  
09:56 AM  
09:56 AM  
10:01 AM  
10:08 AM  
10:10 AM  
  
10:11 AM  
10:11 AM  
10:17 AM  
10:19 AM  
10:21 AM  
10:48 AM  
10:48 AM  
10:51 AM  
11:01 AM  
11:01 AM  
11:18 AM  
  
11:18 AM  
11:18 AM  
11:19 AM  
11:19 AM  
11:20 AM  
11:28 AM  
  
11:30 AM  
11:30 AM  
  
11:48 AM  
11:48 AM  
11:49 AM

**B6**

**B6**

**B6**

**Patient History**

11:49 AM  
11:49 AM  
01:09 PM  
  
01:09 PM  
01:09 PM  
01:11 PM  
01:11 PM  
01:31 PM  
01:31 PM  
01:31 PM  
01:31 PM  
01:31 PM  
01:31 PM  
01:56 PM  
  
01:56 PM  
01:56 PM  
01:56 PM  
01:56 PM  
02:11 PM  
02:12 PM  
02:51 PM  
  
02:51 PM  
02:51 PM  
02:51 PM  
02:51 PM  
04:01 PM  
  
04:01 PM  
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04:02 PM  
04:54 PM  
  
04:54 PM  
04:54 PM  
04:54 PM  
04:54 PM  
05:31 PM  
05:31 PM  
  
05:31 PM  
05:37 PM  
05:37 PM  
05:58 PM  
05:58 PM  
05:59 PM  
05:59 PM  
05:59 PM

**B6**

**B6**

**B6**

**Patient History**

**B6**

05:59 PM  
05:59 PM  
06:55 PM  
06:55 PM  
07:11 PM  
07:35 PM  
07:48 PM  
07:48 PM  
05:42 PM  
  
01:12 PM  
  
10:46 AM

**B6**

**Appears this way on Original**

**Appears this way on Original**

**B6**

**Notice of Patient Admit**

Date: **B6** 8:30:52 PM

Case No: 429859

**B6**

**B6**

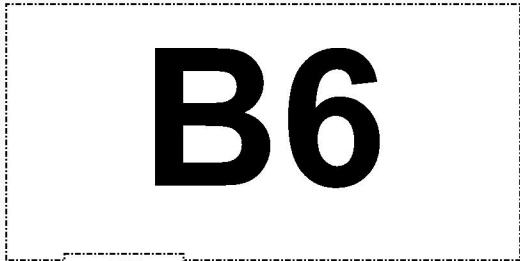
Your patient presented to our Emergency service. Please make note of the following information to facilitate communication with our team.

**B6**

The reason for admission to the FHSA is: DCM, arrhythmia

If you have any questions regarding this particular case, please call 508-887-4988 to reach the Cardiology Service. Information is updated daily, by noon.

Thank you for your referral to our Emergency Service.



B6

B6 Female (Spayed)  
Canine Golden Retriever Blonde  
429859

**Daily Update From the Cardiology Service**

Today's date: **B6**  
B6

Thank you for referring patients to the Foster Hospital for Small Animals at the Cummings School of Tufts University.

Your patient **B6** was admitted and is being cared for by the Cardiology Service.

B6

- is in stable condition
- is still in the oxygen cage
- is critically ill
- discharged from the hospital today

Today's treatments include:

- bloodwork planned/pending
- echocardiography
- cardiac catheter procedure planned
- treatment for CHF from DCM
- ongoing treatment for thrombosis
- ongoing treatment for arrhythmia

Additional plans:

Please allow 3-5 business days for reports to be finalized upon patient discharge.

Please call (508) 887-4696 before 5pm or email us at [cardiovet@tufts.edu](mailto:cardiovet@tufts.edu) if you have any questions.  
Thank you!

B6

Senior student:

**Appears this way on Original**



**Cummings**  
**Veterinary Medical Center**  
AT TUFTS UNIVERSITY

**B6**

**B6**

**B6 Female (Spayed)**  
**Canine Golden Retriever Blonde**  
**429859**

**10/11/2018**

**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,**

**B6**

---

**From:** Palmer, Lee Anne </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=CF7C8BD53B6C45A39318A596ACEA7C53-LPALMER>  
**To:** Carey, Lauren; Rotstein, David; Jones, Jennifer L; Peloquin, Sarah; Reimschuessel, Renate; Hartogensis, Martine; Norris, Anne; Burkholder, William  
**Sent:** 2/19/2019 2:04:57 PM  
**Subject:** DCM paper - Darcy Adin, 2019 Vet Cardiology  
**Attachments:** Adin 2019.pdf

Hi – please forgive me if we have this already, but I think this just came out.

I haven't read it yet.

Thanks, lee Anne

**Lee Anne M. Palmer, VMD, MPH**  
*Team Leader HFV-242, Supervisory VMO*

**Center for Veterinary Medicine**  
**OSC, Division of Veterinary Product Safety**  
**U.S. Food and Drug Administration**  
Tel: 240-402-5767  
[Leeanne.palmer@fda.hhs.gov](mailto:Leeanne.palmer@fda.hhs.gov)



**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 3/20/2019 10:26:46 AM  
**Subject:** DCM reports 3/20/19; 0630  
**Attachments:** Fromm's Four Star Grain Free Salmon and Tunalini: **B6** EON-382722; Natural Balance LID High Protein Grain-free Lamb or Beef flavors: Lisa Freeman, EON-382772; Redford Limited Ingredient Grain-Free Lamb and Sweet Potato: **B6** EON-382721

David Rotstein, DVM, MPVM, Dipl. ACVP  
CVM Vet-LIRN Liaison  
CVM OSC/DC/CERT  
7519 Standish Place

**B6**



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**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 3/19/2019 1:48:37 PM  
**Subject:** Fromm's Four Star Grain Free Salmon and Tunalini; [B6] EON-382722  
**Attachments:** 2064246-report.pdf; 2064246-attachments.zip

A PFR Report has been received and PFR Event [EON-382722] has been created in the EON System.

A "PDF" report by name "2064246-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 "2064246-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-382722

**ICSR #:** 2064246

**EON Title:** PFR Event created for Fromm's Four Star Grain Free Salmon and Tunalini; 2064246

<b>AE Date</b>	03/06/2019	<b>Number Fed/Exposed</b>	3
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Mixed (Dog)		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR- [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2064246

**Product Group:** Pet Food

**Product Name:** Fromm's Four Star Grain Free Salmon and Tunalini

**Description:** [B6] was seemingly healthy and given an echocardiogram to collect "normal" values for training purposes. Echo results were not normal, but revealed he had early stages of Dilated Cardiomyopathy. He was adopted in March 2016 at age 12 weeks and was started on Fromm Gold Puppy Dry kibble until age 1, when he was transitioned to Fromm Four Star Grain Free Salmon and Tunalini kibble diet. He ate that food until July 2018 when FDA warning was released. He was then transitioned to Purina ProPlan Sensitive Skin and Stomach Salmon and Rice.

**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:** 3

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
Fromm's Four Star Grain Free Salmon and Tunalini		

**Sender information**

**B6**

USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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

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

you received this email in error, please send an email to [FDAREportableFoods@fda.hhs.gov](mailto:FDAREportableFoods@fda.hhs.gov) immediately.

**Report Details - EON-382722**

ICSR: 2064246  
 Type Of Submission: Initial  
 Report Version: FPSR.FDA.PETF.V.V1  
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)  
 Reporting Type: Voluntary  
 Report Submission Date: 2019-03-19 09:41:10 EDT

**Reported Problem:**

**Problem Description:** B6 was seemingly healthy and given an echocardiogram to collect "normal" values for training purposes. Echo results were not normal, but revealed he had early stages of Dilated Cardiomyopathy. He was adopted in B6 at age 12 weeks and was started on Fromm Gold Puppy Dry kibble until age 1, when he was transitioned to Fromm Four Star Grain Free Salmon and Tunalini kibble diet. He ate that food until July 2018 when FDA warning was released. He was then transitioned to Purina ProPlan Sensitive Skin and Stomach Salmon and Rice.

**Date Problem Started:** 03/06/2019

**Concurrent Medical Problem:** No

**Outcome to Date:** Stable

**Product Information:**

**Product Name:** Fromm's Four Star Grain Free Salmon and Tunalini

**Product Type:** Pet Food

**Lot Number:**

**Package Type:** BAG

**Package Size:** 26 Pound

**Purchase Date:** 06/01/2018

**Number Purchased:** 1

**Possess Unopened Product:** No

**Possess Opened Product:** No

**Storage Conditions:** Stored in bag

**Product Use Information:**

<b>Description:</b>	Feed in a bowl
<b>Last Exposure Date:</b>	07/15/2018
<b>Time Interval between Product Use and Adverse Event:</b>	2 Years
<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes
<b>Adverse Event Abate After Product Stop:</b>	No
<b>Product Use Started Again:</b>	No
<b>Perceived Relatedness to Adverse Event:</b>	Possibly related
<b>Other Foods or Products Given to the Animal During This Time Period:</b>	No

**Manufacturer /Distributor Information:**

	Purchase Location Information:	Name:	B6	
		Address:	B6	
Animal Information:	Name:	B6		
	Type Of Species:	Dog		
	Type Of Breed:	Mixed (Dog)		
	Gender:	Male		
	Reproductive Status:	Neutered		
	Weight:	40 Pound		
	Age:	3 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:	B6
			Phone:	
	Email:			
	Address:	B6		
United States				
Healthcare Professional Information:	Practice Name:	B6		
	Contact:	Name:	B6	
		Phone:		
		Other Phone:		
		Email:		
	Address:	B6		
		United States		
	Practice Name:	B6		
	Contact:	Name:	B6	
		Phone:		
Other Phone:				
Email:				
Address:	B6			
	United States			
Type of Veterinarian:	Referred veterinarian			
Date First Seen:	03/06/2018			
Permission to Release Records to FDA:	Yes			



<b>Sender Information:</b>	<b>Name:</b>		
	<b>Address:</b>	<div style="border: 1px dashed black; padding: 5px; display: inline-block; font-size: 2em; font-weight: bold;">B6</div>	
		United States	
	<b>Contact:</b>	<b>Phone:</b>	
		<b>Other Phone:</b>	<div style="border: 1px dashed black; padding: 5px; display: inline-block; font-size: 2em; font-weight: bold;">B6</div>
		<b>Email:</b>	
<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email		
<b>Reported to Other Parties:</b>	None		

<b>Additional Documents:</b>	<b>Attachment:</b>	<div style="border: 1px dashed black; padding: 2px; display: inline-block; font-weight: bold;">B6</div> echoreport.pdf
	<b>Description:</b>	Echo Report
	<b>Type:</b>	Echocardiogram

---

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; B6  
**Sent:** 3/19/2019 8:56:56 PM  
**Subject:** Natural Balance LID High Protein Grain-free Lamb or Beef flavors: Lisa Freeman - EON-382772  
**Attachments:** 2064292-report.pdf; 2064292-attachments.zip

A PFR Report has been received and PFR Event [EON-382772] has been created in the EON System.

A "PDF" report by name "2064292-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 "2064292-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-382772

**ICSR #:** 2064292

**EON Title:** PFR Event created for Natural Balance LID High Protein Grain-free Lamb or Beef flavors; 2064292

<b>AE Date</b>	03/17/2019	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Mixed (Dog)		
<b>Age</b>	9 Years		
<b>District Involved</b>	PFR- <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2064292

**Product Group:** Pet Food

**Product Name:** Natural Balance LID High Protein Grain-free Lamb or Beef flavors

**Description:** DCM and CHF diagnosed 3/17/19 Eating BEG diet Owners have given permission to report and are willing to answer questions Changing to new diet and will recheck in 3 months Taurine and troponin pending

**Submission Type:** Initial

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

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

**Number of Animals Treated With Product: 1**

**Number of Animals Reacted With Product: 1**

Product Name	Lot Number or ID	Best By Date
Natural Balance LID High Protein Grain-free Lamb or Beef flavors		

**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:

**B6**

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

**B6**

---

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**Report Details - EON-382772**

ICSR: 2064292  
 Type Of Submission: Initial  
 Report Version: FPSR.FDA.PETF.V.V1  
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)  
 Reporting Type: Voluntary  
 Report Submission Date: 2019-03-19 16:49:38 EDT

**Reported Problem:**  
**Problem Description:** DCM and CHF diagnosed 3/17/19 Eating BEG diet Owners have given permission to report and are willing to answer questions Changing to new diet and will recheck in 3 months Taurine and troponin pending  
**Date Problem Started:** 03/17/2019  
**Concurrent Medical Problem:** Yes  
**Pre Existing Conditions:** Chronic dermatologic issues - likely environmental (improved significantly when owners moved to the city) Hypothyroid - on thyroxine Elevated liver enzymes  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Natural Balance LID High Protein Grain-free Lamb or Beef flavors  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Possess Unopened Product:** No  
**Possess Opened Product:** No  
**Product Use Information:**  
**Description:** This diet (either lamb or beef flavors) has been fed to B6 for last 1 year. Before that, feeding Natural Balance LID fish, chicken, beef, or lamb flavors since 1 year of age. See diet history form for further details Owner does not have current product bag but I have sample of diet  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** B6  
**Type Of Species:** Dog  
**Type Of Breed:** Mixed (Dog)  
**Gender:** Female  
**Reproductive Status:** Neutered  
**Weight:** 28.5 Kilogram  
**Age:** 9 Years  
**Assessment of Prior Health:** Excellent  
**Number of Animals Given the Product:** 1  
**Number of Animals Reacted:** 1  
**Owner Information:**  
**Owner Information provided:** Yes  
**Contact:**  
**Name:** B6  
**Phone:**  
**Other Phone:**  
**Email:**

		<b>Address:</b>	<b>B6</b> United States	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman	
		<b>Phone:</b>	(508) 887-4523	
<b>Email:</b>		lisa.freeman@tufts.edu		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			
<b>Additional Documents:</b>	<b>Attachment:</b>	<b>B6</b>	pt_medical_record_preview.pdf	
	<b>Description:</b>	Compiled medical records		
	<b>Type:</b>	Medical Records		

**B4, B6**

**B6**

**All Medical Records**

**B6**

Breed: Labrador Retriever Cross

**B6**

Species: Canine  
Sex: Female  
(Spayed)

**Referring Information**

**B6**

**Initial Complaint:**

Emergency

SOAP Text **B6** 12:28PM **B6**

**Subjective**

NEW VISIT (ER)

**B6**

Presenting complaint: Cardiac enlargement, dyspnea

Referral visit? Yes

Diagnostics completed prior to visit: CXR, CBC/Chem from 3/14/19

**B6**

**HISTORY:**

Signalment: 9yo SF Lab cross

Current history: Presenting today for cardiac enlargement and dyspnea. **B6** visited her rDVM earlier this week (3/14) for repeat bloodwork for monitoring of ELE. Additionally, they wanted her to be evaluated because earlier this week, they noticed that **B6** breathing pattern did not seem quite right - particularly at night. Also, **B6** vomited up bile a few times this week. **B6** breathing continued to get worse throughout the week. She visited her regular veterinarian for thoracic radiographs yesterday, which revealed generalized cardiac enlargement - O was instructed to make an appointment/consult with a veterinary cardiologist. The owners were planning to do this, but they report that **B6** respiratory rate and effort have increased significantly today, to the point that they became very concerned and

**B6**

brought her here **B6** appetite has been waxing and waning over the last week and a half. No reported episodes of collapse.

Prior medical history:

**B6**

Current medications: **B6**

Diet: Natural Balance LID High protein, grain free diet

Vaccination status/flea & tick preventative use: UTD

Travel history: N/A

EXAM:

**B6**

ASSESSMENT:

**B6**

**B6**

**B6**

Diagnostics completed:

**B6**

Client communication:

The cardiac changes that **B6** has are permanent - we cannot fix those. But what we can do is try to get **B6** out of failure and help her heart to contract. Her heart has likely been enlarged for a while, but the progression to CHF was most likely rapid. There are correlations between DCM and grain-free diets, but that's not to say that her previous grain free diet is definitely the cause of **B6** DCM. The first 24-48 hours of **B6** hospitalization will say a lot - some dogs respond very well to cardiac medications, others do not. Time will tell. Typically the prognosis for DCM overall is somewhere around 6 months - 1 year depending on how well they respond to the medications. If we can get her comfortable, though, it is usually a good quality of life during this time.

Deposit & estimate status: **B6**

Resuscitation code (if admitting to ICU): RED

**B6**

/19

SOAP approved (DVM to sign): **B6** DVM

SOAP Text **B6** 7:48AM - Clinician, Unassigned FHSA

**History:**

**B6** a 9 yo SF Lab x, presented to the ER yesterday for worsening increased RR and RE.

Has a history of increased LEs and had radiographs done at the rDVM that revealed generalized cardiomegaly. A cardiology consultation was done yesterday and revealed DCM with active LCHF. The patient is on a grain free diet and was enrolled in the DCM-Study.

**Subjective**

**B6**

Overall impression since arrival or since last exam: Improved compared to yesterday. **B6** is not longer in the oxygen cage this morning and her RR and RE are much improved compared to previously. It has been less than 40 most of the night.



**B6**

Appetite: good appetite, ate at 8am today

**Objective:**

**B6**

**Diagnostic Results:**

**B6**

**B6**

**Assessments**

**B6**

**Plan**

**B6**

**B6**

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SOAP completed by

**B6**

SOAP reviewed by:

DVM

**Disposition/Recommendations**

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**B6**

---

---

**B6**

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B4, B6**

**B6**  
Veterinarian:  
**B6**  
Visit ID:

**B6**  
Species: Canine  
Breed: Labrador Retriever Cross  
Sex: Female (Spayed)  
Age: **B6** Years Old

**Lab Results Report**

**Nova Full Panel-ICU**      **B6** 12:35:25 PM      Accession ID: **B6**

Test	Results	Reference Range	Units
SO2%	<b>B6</b>	94 - 100	%
HCT (POC)		38 - 48	%
HB (POC)		12.6 - 16	g/dL
NA (POC)		140 - 154	mmol/L
K (POC)		3.6 - 4.8	mmol/L
CL(POC)		109 - 120	mmol/L
CA (ionized)		1.17 - 1.38	mmol/L
MG (POC)		0.1 - 0.4	mmol/L
GLUCOSE (POC)		80 - 120	mg/dL
LACTATE		0 - 2	mmol/L
BUN (POC)		12 - 28	mg/dL
CREAT (POC)		0.2 - 2.1	mg/dL
TCO2 (POC)		0 - 0	mmol/L
nCA		0 - 0	mmol/L
nMG		0 - 0	mmol/L
GAP		0 - 0	mmol/L
CA/MG		0 - 0	mol/mol
BEeef		0 - 0	mmol/L
BEb		0 - 0	mmol/L
A		0 - 0	mmHg
NOVA SAMPLE	0 - 0		

**B4**

7/67

**B6**

Printed Tuesday, **B6**

**B6**

FiO2		0 - 0	%
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
PH		7.337 - 7.467	
PCO2		36 - 44	mmHg
PO2		80 - 100	mmHg
HCO3		18 - 24	mmol/L

**B6**

**Nova Full Panel-ICU**      **B6**      12:42:59 PM      Accession ID: **B6**

Test	Results	Reference Range	Units
TS (FHSA)		0 - 0	g/dl
PCV **	<b>B6</b>	0 - 0	%
TS (FHSA)		0 - 0	g/dl

**Nova Full Panel-ICU**      **B6**      3:16:16 AM      Accession ID: **B6**

Test	Results	Reference Range	Units
U COLLECT		0 - 0	
U COLOR		0 - 0	
U TURBIDITY		0 - 0	
U SG		0 - 0	
U PH		0 - 0	
U PROTEIN		0 - 0	
U GLUCOSE		0 - 0	
U KETONES		0 - 0	
U BILIRUBIN		0 - 0	

**B6**

**B6**

U HEME PROTEIN		0 - 0	
U WBC		0 - 0	/hpf
U RBC		0 - 0	/hpf
U BACTERIA		0 - 0	/hpf
U CRYSTALS		0 - 0	/hpf
U TRANSITIONAL		0 - 0	/hpf
U SQUAMOUS CELLS		0 - 0	/hpf
U FAT		0 - 0	/hpf

**B6**

**Nova Full Panel-ICU**      **B6**      9:44:19 AM      Accession ID: **B6**

Test	Results	Reference Range	Units
GLUCOSE		67 - 135	mg/dL
URFA		8 - 30	mg/dL
CREATININE	<b>B6</b>	0.6 - 2	mg/dL
PHOSPHORUS		2.6 - 7.2	mg/dL
CALCIUM2		9.4 - 11.3	mg/dL

**B4**

8/67

**B6**

Printed Tuesday

**B6**

**B6**

T. PROTEIN		5.5 - 7.8	g/dL
ALBUMIN		2.8 - 4	g/dL
GLOBULINS		2.3 - 4.2	g/dL
A/G RATIO		0.7 - 1.6	
SODIUM		140 - 150	mEq/L
CHLORIDE		106 - 116	mEq/L
POTASSIUM		3.7 - 5.4	mEq/L
NA/K	<b>B6</b>	29 - 40	
T BILIRUBIN		0.1 - 0.3	mg/dL
ALK PHOS		12 - 127	U/L
ALT		14 - 86	U/L
AST		9 - 54	U/L
CHOLESTEROL		82 - 355	mg/dL
OSMOLALITY (CALCULATED)		291 - 315	mmol/L
COMMENTS (CHEMISTRY)		0 - 0	
Moderate hemolysis Moderate lipemia			

**B4**

9/67

**B6**

Printed Tuesday

**B6**

B6

Diet Hx 3/17/19

AVIAN POULTRY  
FISH

CARDIOLOGY DIET HISTORY FORM  
Please answer the following questions about your pet

B6

Today's date: B6

1. How would you assess your pet's appetite? (mark the point on the line below that best represents your pet's appetite)

Example: Poor \_\_\_\_\_ | \_\_\_\_\_ Excellent  
Poor \_\_\_\_\_ Excellent

SKIN ISSUES  
MOSTLY TO  
PROVIDENCE  
LAST 1.5 YRS  
+ DONE WELL

2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)

Eats about the same amount as usual  Eats less than usual  Eats more than usual  
 Seems to prefer different foods than usual  Other \_\_\_\_\_

3. Over the last few weeks, has your pet (check one)

Lost weight  Gained weight  Stayed about the same weight  Don't know

CREALINE  
PHYSIOLOGIST

1. Please list below ALL pet foods, people food, treats, snack, dental chews, rawhides, and any other food item that your pet currently eats and that you have fed in the last 2 years.

Please provide enough detail that we could go to the store and buy the exact same food - examples are shown in the table

Food (include specific product and flavor)	Form	Amount	How often?	Dates fed
Nutro Grain Free Chicken, Lentil, & Sweet Potato Adult	dry	1 1/2 cup	2x/day	Jan 2016-present
85% lean hamburger	microwaved	3 oz	1x/week	June -Aug 2016
Pepperoni original beef flavor	treat	1/2	1x/day	Sept 2016-present
Rawhide	treat	6 inch twist	1x/week	Dec 2018-present
NATURAL BALANCE LID HIGH PROTEIN BEEF OR LAMB	dry	2 CUPS/DAY	1x/d	~ 1 YR
NATURAL BALANCE LID FISH, CHICKEN, BEEF, LAMB	dry			SINCE 1 YR OLD
* SAVOR ADULT ENRICHED BLOOD BEEF + RICE				
CHANGED TO PRO PLAN 2 DAY AGO				

\*Any additional diet information can be listed on the back of this sheet

2. Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)?  Yes  No If yes, please list which ones and give brands and amounts:

	Brand/Concentration	Amount per day
Taurine <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
Carnitine <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
Antioxidants <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
Multivitamin <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
Fish oil <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
Coenzyme Q10 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	_____	_____
Other (please list): Example: Vitamin C	Nature's Bounty	500 mg tablets - 1 per day
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. How do you administer pills to your pet?

- I do not give any medications
- I put them directly in my pet's mouth without food
- I put them in my pet's dog/cat food
- I put them in a Pill Pocket or similar product
- I put them in foods (list foods): \_\_\_\_\_

**B6**

CBC/Chem **B6**



**Tufts Cummings School Of Veterinary Medicine**

200 Westboro Road  
North Grafton, MA 01536

DUPLICATE

**B6**

Phone number:

Collection Date:

Approval date:

**B6**

39 PM  
36 AM

Sex: SF

Age: 9

Species: Canine

Breed: Labrador Retriever Cross

Provider: Dr. Lisa Freeman

Order Location: V320559: Investigation into

Sample ID: 1903170047

**CBC, Comprehensive, Sm Animal (Research)**

**B6**

**Microscopic Exam of Blood Smear (Advia)**

**B6**



**B6**

CBC/Chem

**B6**



**Tufts Cummings School Of Veterinary Medicine**

200 Westboro Road  
North Grafton, MA 01536

DUPLICATE

**B6**

Phone number:

Collection Date:

Approval date:

**B6**

6:39 PM

9:36 AM

Sex: SF

Age: 9

Species: Canine

Breed: Labrador Retriever Cross

Provider: Dr. Lisa Freeman

Order Location: V320559: Investigation into

Sample ID: 1903170047

**Microscopic Exam of Blood Smear (Advia) (cont'd)**

**B6**

**Research Chemistry Profile - Small Animal (Cobas)**

ABLASOTTO  
 Glucose  
 Urea  
 Creatinine  
 Phosphorus  
 Calcium 2  
 Magnesium 2+  
 Total Protein  
 Albumin  
 Globulins  
 A/G Ratio  
 Sodium  
 Chloride  
 Potassium  
 tCO2(Bi carb)  
 AGAP  
 NA/K  
 Total Bilirubin  
 Alkaline Phosphatase  
 GGT  
 ALT  
 AST  
 Creatine Kinase  
 Cholesterol  
 Triglycerides  
 Amylase  
 Osmolality (calculated)

**B6**

Ref. Range/Females  
 67-135 mg/dL  
 8-30 mg/dL  
 0.6-2.0 mg/dL  
 2.6-7.2 mg/dL  
 9.4-11.3 mg/dL  
 1.8-3.0 mEq/L  
 5.5-7.8 g/dL  
 2.8-4.0 g/dL  
 2.3-4.2 g/dL  
 0.7-1.6  
 140-150 mEq/L  
 106-116 mEq/L  
 3.7-5.4 mEq/L  
 14-28 mEq/L  
 8.0-19.0  
 29-40  
 0.10-0.30 mg/dL  
 12-127 U/L  
 0-10 U/L  
 14-86 U/L  
 9-54 U/L  
 22-422 U/L  
 82-355 mg/dL  
 30-338 mg/dL  
 409-1250 U/L  
 291-315 mmol/L

Sample ID: 1903170047/2

REPRINT: Orig. printing of **B6** (Final)

Reviewed by: \_\_\_\_\_

Page 2

**B6**

Chem 3/18/19



**Tufts Cummings School Of Veterinary Medicine**

200 Westboro Road  
North Grafton, MA 01536

DUPLICATE

<b>B6</b>	Sex: SF	<b>B6</b>
Phone number:	Age: 9	Sample ID: 1903180043
Collection Date: <b>B6</b>	Species: Canine	
Approval date: 9:44 AM	Breed: Labrador Retriever Cross	
11:58 AM		

**Chemistry 21 (Cobas)**

ABLASOTTO  
 Glucose  
 Urea  
 Creatinine  
 Phosphorus  
 Calcium 2  
 Total Protein  
 Albumin  
 Globulins  
 A/G Ratio  
 Sodium  
 Chloride  
 Potassium  
 NA/K  
 Total Bilirubin  
 Alkaline Phosphatase  
 ALT  
 AST  
 Cholesterol  
 Osmolality (calculated)  
 Comments (Chemistry)

**B6**

Ref. Range/Females

67-135 mg/dL
8-30 mg/dL
0.6-2.0 mg/dL
2.6-7.2 mg/dL
9.4-11.3 mg/dL
5.5-7.8 g/dL
2.8-4.0 g/dL
2.3-4.2 g/dL
0.7-1.6
140-150 mEq/L
106-116 mEq/L
3.7-5.4 mEq/L
29-40
0.10-0.30 mg/dL
12-127 U/L
14-86 U/L
9-54 U/L
82-355 mg/dL
291-315 mmol/L

Sample ID: 1903180043/1  
REPRINT: Orig printing on

**B6** (Final)

Reviewed by: \_\_\_\_\_

**B6**

Urinalysis 3/18/19



**Tufts Cummings School Of Veterinary Medicine**

200 Westboro Road  
North Grafton, MA 01536

DUPLICATE

<b>B6</b>	Sex: SF	<b>B6</b>
Phone number:	Age: 9	Sample ID: 1903180023
Collection Date: <b>B6</b>	8:16 AM	Species: Canine
Approval date: <b>B6</b>	9:12 AM	Breed: Labrador Retriever Cross

**Urinalysis**

- EUNDERWOOD
- Urine Collection
- Urine Color
- Urine Turbidity
- Urine Specific Gravity
- Urine pH
- Urine Protein
- Urine Glucose
- Urine Ketones
- Urine Bilirubin
- Urine Heme Protein
- Urine WBC
- Urine RBC
- Urine Bacteria
- Urine Crystals
- Urine Transitional Cells
- Urine Squamous Cells
- Urine Fat Urine Droplets

**B6**

Ref. Range/Females

**B6**

**B6**

Sample ID: 1903180023/1  
REPRINT: Orig. printing on

**B6** (Final)

Reviewed by: \_\_\_\_\_

**B6**

NT-proBNP 3/17/19

**B4**

**B6**

**B4**

**B6**

Species: CANINE  
Breed: MIXED\_BREED\_CAN  
Gender: FEMALE SPAYED  
Age: 9Y

Date: **B6**

Requisition #: 1A

**B6**

**B6**

TUFTS UNIVERSITY  
200 WESTBORO RD  
NORTH GRAFTON, Massachusetts 01536  
508-839-5395

Account #88933

CARDIOPET proBNP - CANINE

Test	Result	Reference Range	Low	Normal	High
CARDIOPET proBNP - CANINE	5031 1	<b>B6</b>	HIGH		

Comments:

1. Cardiopet proBNP >1800pmol/L

**B6**

**B6**

**Vitals Results**

12:04:05 PM  
12:04:37 PM  
12:04:38 PM  
12:04:39 PM  
12:17:42 PM  
12:29:38 PM  
3:00:04 PM  
3:07:39 PM  
3:08:41 PM  
4:44:14 PM  
5:16:54 PM  
5:34:29 PM  
  
6:04:49 PM  
6:04:51 PM  
7:11:06 PM  
7:26:12 PM  
7:45:50 PM  
7:45:58 PM  
7:46:04 PM  
8:02:30 PM  
8:58:07 PM  
9:21:47 PM  
9:21:55 PM  
9:46:12 PM  
11:06:30 PM  
11:07:24 PM  
11:41:43 PM  
11:42:03 PM  
11:42:14 PM  
12:34:47 AM  
1:09:36 AM  
2:04:31 AM  
3:10:04 AM  
3:10:21 AM  
3:10:38 AM  
3:18:36 AM  
3:18:59 AM  
3:38:33 AM  
4:01:33 AM

**B6**

**B6**

**B6**

**Vitals Results**

4:51:52 AM  
4:53:21 AM  
4:59:31 AM  
6:00:13 AM  
7:59:03 AM  
7:59:19 AM  
8:08:55 AM  
8:09:16 AM  
8:09:28 AM  
8:09:35 AM  
9:16:05 AM  
9:17:02 AM  
10:00:15 AM  
10:00:51 AM  
11:03:49 AM  
12:03:01 PM  
1:13:43 PM  
1:44:01 PM  
1:44:16 PM  
  
1:44:30 PM  
3:03:59 PM  
3:51:02 PM  
3:56:05 PM

**B6**

**B6**

**B6**

ECG from Cardio

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**B6**

**B6**

4:53:55 PM

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**

**B6**

ECG from Cardio

---

**B6**

**B6**

4:54:24 PM

Page 1 of 2

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**



**B6**

ECG from Cardio

---

**B6**

**B6**

4:54:24 PM

Page 2 of 2

Tufts University  
Tufts Cummings School of Vet Med  
Cardiology

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**B6**

**B6**

**Patient History**

12:04 PM  
12:04 PM  
12:04 PM  
12:04 PM  
12:07 PM  
12:17 PM  
12:17 PM  
12:17 PM  
12:28 PM  
12:28 PM  
12:28 PM  
12:28 PM  
12:29 PM  
12:29 PM  
12:35 PM  
12:38 PM  
12:45 PM  
12:53 PM  
12:54 PM

12:59 PM  
01:11 PM

**B6**

03:00 PM  
03:00 PM  
03:00 PM  
03:01 PM  
03:01 PM  
03:07 PM

03:07 PM  
03:08 PM  
03:08 PM  
03:44 PM

04:30 PM  
04:44 PM  
04:44 PM  
04:55 PM

05:16 PM  
05:16 PM  
05:34 PM

05:34 PM

05:41 PM

**B6**

**B6**

**Patient History**

06:04 PM  
06:04 PM  
06:04 PM  
06:04 PM  
06:43 PM  
  
07:11 PM  
07:11 PM  
07:25 PM  
07:26 PM  
  
07:26 PM  
07:35 PM  
07:41 PM  
  
07:45 PM  
07:45 PM  
07:45 PM  
07:45 PM  
07:46 PM  
07:46 PM  
08:02 PM  
08:02 PM  
08:58 PM  
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09:21 PM  
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11:07 PM  
  
11:07 PM  
11:41 PM  
11:41 PM  
11:42 PM  
11:42 PM  
11:42 PM  
12:34 AM  
  
12:34 AM  
01:09 AM  
01:09 AM  
02:04 AM

**B6**

**B6**

**B6**

**Patient History**

02:04 AM  
03:10 AM  
03:10 AM  
03:10 AM  
03:10 AM  
03:10 AM  
  
03:10 AM  
03:10 AM  
03:10 AM  
03:18 AM  
03:18 AM  
03:18 AM  
03:21 AM  
03:38 AM  
03:38 AM  
04:01 AM  
  
04:01 AM  
04:51 AM  
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04:53 AM  
  
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04:59 AM  
  
04:59 AM  
06:00 AM  
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07:20 AM  
07:20 AM  
07:59 AM  
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08:00 AM  
08:08 AM  
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08:24 AM  
09:16 AM  
09:16 AM  
09:17 AM  
09:17 AM  
09:17 AM

**B6**

**B6**

**B6**

**Patient History**

**B6**  
09:44 AM  
10:00 AM  
10:00 AM  
10:00 AM  
10:00 AM  
10:00 AM  
10:00 AM  
10:41 AM  
  
10:42 AM  
10:42 AM  
11:03 AM  
11:03 AM  
11:16 AM  
12:03 PM  
12:03 PM  
01:13 PM  
01:13 PM  
01:34 PM  
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03:51 PM  
03:51 PM  
03:56 PM  
  
03:56 PM  
  
04:55 PM  
  
04:56 PM  
04:56 PM  
05:23 PM

**B6**

<b>Patient Account History</b>	<b>Description</b>	<b>Qty</b>	<b>price</b>	<b>Extended</b>	<b>Disc</b>	<b>Pmt</b>
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**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
Sunday, <b>B6</b> <b>B6</b> 12:17	Appointment: Emergency Room Visit					<b>B6</b>

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday **B6**

**B6** 2:17

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday, 2019 12:35

**B6**

**B6**



**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday,  
2019 12:45

**B6**

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday,  
**B6** 2:53

**B6**

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday, **B6**  
**B6** 5:01

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday,

**B6**

**B6**

**B6** 5.01

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday  
**B6**

**B6**

6.30

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday

**B6**

**B6** 6:55

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday **B6**

**B6** 19:25

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Sunday  
**B6** 9:34

**B6**

**B6**



**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday

**B6**

**B6**

**B6** 3:10

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
Monday, <b>B6</b>	<b>B6</b>					
<b>B6</b> 03:21						

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday  
**B6** 7.20

**B6**

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday

**B6**

8.24

**B6**

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday, **B6**  
**B6** 09:44

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday  
**B6** 1:16

**B6**

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday

**B6**

**B6**

**B6** 5:12

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday  
**B6** 5:12

**B6**

**B6**



**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday

**B6**

**B6** 6:55

**B6**

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday

**B6**

**B6**

**B6** 16:56

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
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Monday	<b>B6</b>	<b>B6</b>				
<b>B6</b>	56					

**B6**

Patient Account History	Description	Qty	price	Extended	Disc	Pmt
-------------------------	-------------	-----	-------	----------	------	-----

Monday

**B6**

**B6**

**B6** 7.23

**Appears this way on Original**

**Appears this way on Original**

**B6**

B6 Female (Spayed)  
Canine Labrador Retriever Cross Black  
B6

**STANDARD CONSENT FORM**

**B4, B6**

**B4, B6**

B6

Date:

B6

B6

**B6**

**B6**

Date

**B4, B6**



# Treatment Plan

**B4, B6**

Estimated Charges

**B6**

**B6**

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

<b>B6</b>	Description	Low Qty	Low Extended	High Qty	High Extended
	<b>B6</b>				

**B6**

**B6**

I understand that no guarantee of successful treatment is made. I certify that I have read and fully understand the authorization for medical and/or surgical treatment, the reason for why such medical and/or surgical treatment is considered necessary, as well as its advantages and possible complications, if any. I also assume financial responsibility for all charges incurred to this patient(s). I agree to pay 75% of the estimated cost at the time of admission. Additional deposits will be required if additional care or procedures are required. I further agree to pay the balance of the charges when this patient(s) is released.

Procedural billing is inclusive up to and including the estimated duration of hospitalization. There will be additional expenses if hospitalization extends beyond the specified duration.

I have read, understand, and agree to accept the conditions of this treatment plan.

Thank you for entrusting us with your pet's care.

High Total
Low Total
75% Deposit

**B6**

**B6**

# Cummings Veterinary Medical Center

AT TUFTS UNIVERSITY  
Cardiology Liaison: 508-887-4696

**B6**

B6 Canine  
B6 years Old Female (Spayed) Labrador  
Retriever Cross  
Black BW: Weight (kg) 28.40

## Cardiology Inpatient ENROLLED IN DCM STUDY

Date: **B6**

Weight: Weight (kg) 28.40

**B6**

### Thoracic radiographs available for review?

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

Patient location: ER

**Presenting complaint and important concurrent diseases:** Presented to ER today on a referral basis for generalized cardiac enlargement and dyspnea. O reports that rDVM radiographs were taken (we do not have access to them at this point) and revealed an enlarged heart.

- Hx of elevated liver enzymes
- Hypothyroidism

### Current medications and doses:

**B6**

**At-home diet:** (name, form, amount, frequency)

Grain free Natural balance

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

-suspect DCM

**Questions to be answered:** DCM? CHF?

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

- Yes (explain):

No

**\*STOP - remainder of form to be filled out by Cardiology\***

**Physical Examination**

**B6**

**B6**

**Muscle condition:**

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

**Cardiovascular Physical Exam**

**Murmur Grade:**

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

**Murmur location/description:** left apical, systolic

**Jugular vein:**

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

**Arterial pulses:**

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

**Arrhythmia:**

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

**Gallop:**

- Yes
- No
- Intermittent
- Pronounced
- Other:

**Pulmonary assessments:**

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

**Abdominal exam:**

- Normal
- Hepatomegaly
- Abdominal distension
- Mild ascites

**Echocardiogram Findings:**

**B6**

**Doppler findings:**

**B6**

**Mitral inflow:**

- Summated
- Normal
- Delayed relaxation
- Pseudonormal
- Restrictive

**ECG findings:**

Normal sinus rhythm during echocardiogram.

**Radiographic findings:**

**B6**

**Assessment and recommendations:**

The decreased contractile function with LA enlargement and LCHF may be secondary to DCM (genetic vs. diet-related) vs. advanced MMVD since there is significant MR today on exam. B6

**B6**

**Final Diagnosis:**

Decreased contractile function with moderate to marked LAE r/o genetic vs. diet induced vs. advanced MMVD

**Heart Failure Classification Score:**

**ISACHC Classification:**

- Ia
- Ib
- II
- IIIa
- IIIb

**ACVIM CHF Classification:**

- A
- B1
- B2

- C
- D

M-Mode

IVSd	cm
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)	l/min
CI(Teich)	l/min/m
Ao Diam	cm
LA Diam	cm
LA/Ao	
EPSS	cm
TAPSE1	cm

**B6**

M-Mode Normalized

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} !

2D

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

SV(Teich)  
LV Major  
LV Minor  
Sphericity Index  
LVld LAX  
LVAd LAX  
LVEDV A-L LAX  
LVEDV MOD LAX  
LVls LAX  
LVA<sub>s</sub> LAX  
LVESV A-L LAX  
LVESV MOD LAX  
HR  
EF A-L LAX  
LVEF MOD LAX  
SV A-L LAX  
SV MOD LAX  
CO A-L LAX  
CO MOD LAX

Doppler

MR Vmax  
MR maxPG  
S'  
IVRT  
MR Vmax  
MR Vmean  
MR maxPG  
MR meanPG  
MR VTI  
AV Vmax  
AV maxPG  
PV Vmax  
PV maxPG  
TR Vmax  
TR maxPG

B6

ml  
cm  
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BPM  
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l/min  
l/min

B6

m/s  
mmHg  
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mmHg  
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mmHg

B4, B6

Radiology Request & Report

B6

Species: Canine  
Black Female (Spayed) Labrador  
Retriever Cross  
Birthdate: B6

B6

B6

Date of request: B6

B6

Date of exam: B6

Patient Location: Ward/Cage:

Weight (kg) B4, B6

- Inpatient
- Outpatient Time:
- Waiting
- Emergency

Sedation

- BAG
- OBAG
- 1/2 dose OBAG
- DexDomitor/Butorphanol
- Anesth sedate/anesthetize

\*Page Dr. B6 f needed\*

Examination Desired: Met Check

Presenting Complaint and Clinical Questions you wish to answer:  
Referred for generalized cardiomegaly, dyspnea. Suspect DCM

Pertinent History: P has a history of elevated liver enzymes, hypothyroidism (thyroxine 0.5 mg PO BID). O reports that appetite started to wax and wane around 1.5 weeks ago, and P has been having difficulty breathing and getting comfortable at night. Visited rDVM this week for this issue as well as bloodwork to monitor ELE - rDVM performed CXR, revealed generalized cardiomegaly. O's were instructed to make cardiology appt., but P's breathing got worse this morning so they came in through the ER today.

Findings:

THORAX, LEFT LATERAL VIEW: Limited study

B4, B6

# B4, B6

## Conclusions:

- Moderate generalized cardiomegaly. Overall normal size of the pulmonary vasculature may be secondary to diuretic therapy (if applicable); however as the veins appear larger than the arteries, congestion should be considered. Interstitial pulmonary pattern may be overestimated by expiratory technique and age-related changes, however cardiogenic pulmonary edema cannot be completely ruled out. Repeat thoracic radiographs may be considered to monitor response to treatment.

B6

Reviewing:

Dates

Reported: B6

Finalized:



B4, B6

Discharge Instructions

B6

Species: Canine  
Black Female (Spayed) Labrador  
Retriever Cross  
Birthdate: B6

B6

B6

B6

Admit Date: B6 12:06:18 PM

Discharge Date: B6

Diagnoses: Dilated cardiomyopathy (DCM) with congestive heart failure

Case summary:

Thank you for bringing B6 to Tufts University for investigation of her increased respiratory rate and effort.

Upon presentation to the ER, B6 was noticed to have increased respiratory rate and effort. She was also noted to have a small heart murmur and an abnormal sound called a gallop. An echocardiogram (ultrasound of the heart) was performed yesterday and revealed that Hazel has a type of heart disease called dilated cardiomyopathy.

Due to her breathing pattern, she was admitted to the hospital for further management and monitoring. She was started on cardiac medications while in the hospital and we are happy to report that she responded very positively to the cardiac medications. Her respiratory rate and effort went down overnight and she appears much more comfortable this morning.

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

**B6**

has been enrolled in a cardiac study because of her current diet and the changes visualized on the ultrasound of the heart.

**Monitoring at home:**

**B6**

**Recommended Medications:**

**B6**

# B6

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:

# B6

#### Recheck Visits:

A recheck visit is recommended in 1-2 weeks after any medication adjustments are made. At this visit, we will recheck B6 kidney values in order to make sure that she is tolerating her cardiac medications.

A recheck echocardiogram is recommended in 3-4 months.

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

Sincerely,

B6

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

Prescription Refill Disclaimer:

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

**Ordering Food:**

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

**Clinical Trials:**

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

---

B6

Discharge Instructions

**B4, B6**

**Notice of Patient Admit**

Date: **B6** 12:06:18 PM

Case No: 411599

**B6**

**B6**

Your patient presented to our Emergency service. Please make note of the following information to facilitate communication with our team.

**B6**

The reason for admission to the FHSA is: DCM, CHF

If you have any questions regarding this particular case, please call 508-887-4988 to reach the Cardiology Service. Information is updated daily, by noon.

Thank you for your referral to our Emergency Service.

**B4, B6**

**B6**

B6  
B6 female (Spayed)  
Canine Labrador Retriever Cross  
Black  
441599

**Daily Update From the Cardiology Service**

Today's date: B6

B6

Thank you for referring patients to the Foster Hospital for Small Animals at the Cummings School of Tufts University.

Your patient B6 was admitted and is being cared for by the Cardiology Service.

Today, B6

- is in stable condition
- is still in the oxygen cage
- is critically ill
- might be discharged from the hospital today

Today's treatments include:

- bloodwork planned/pending
- echocardiography -  
Advanced DCM - r/o primary vs. diet induced DCM;  
Degenerative mitral valve disease;  
Active left-sided CHF.
- cardiac catheter procedure planned
- ongoing treatment for CHF
- ongoing treatment for thrombosis
- ongoing treatment for arrhythmia

Additional plans:

Please allow 3-5 business days for reports to be finalized upon patient discharge.

Please call (508) 887-4696 before 5pm or email us at [cardiovet@tufts.edu](mailto:cardiovet@tufts.edu) if you have any questions.  
Thank you!

**B6**

Senior student:

**Cummings**  
Veterinary Medical Center  
AT TUFTS UNIVERSITY

**B4, B6**

**B6**

**B6**

Female (Spayed)

Canine Labrador Retriever Cross  
Black  
441599

**B6**

**B6**

Thank you for referring

**B6**

with their p

**B6**

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

Thank you,

**B6**



**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** [REDACTED] **B6**  
**Sent:** 3/19/2019 1:32:35 PM  
**Subject:** Redford Limited Ingredient Grain-Free Lamb and Sweet Potato; [REDACTED] **B6**  
- EON-382721  
**Attachments:** 2064242-report.pdf

A PFR Report has been received and PFR Event [EON-382721] has been created in the EON System.

A "PDF" report by name "2064242-report.pdf" is attached to this email notification for your reference.

Below is the summary of the report:

**EON Key:** EON-382721

**ICSR #:** 2064242

**EON Title:** PFR Event created for Redford Limited Ingredient Grain-Free Lamb and Sweet Potato; 2064242

<b>AE Date</b>	03/12/2019	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>		<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Better/Improved/Recovering
<b>Breed</b>	Weimaraner		
<b>Age</b>	8 Years		
<b>District Involved</b>	PFR; [REDACTED] <b>B6</b> DO		

**Product information**

**Individual Case Safety Report Number:** 2064242

**Product Group:** Pet Food

**Product Name:** Redford Limited Ingredient Grain-Free Lamb and Sweet Potato

**Description:** Diagnosed upon echocardiogram 3/18/19 with dilated cardiomyopathy

**Submission Type:** Initial

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

**Outcome of reaction/event at the time of last observation:** Better/Improved/Recovering

**Number of Animals Treated With Product:** 1

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
Redford Limited Ingredient Grain-Free Lamb and Sweet Potato		

**Sender information**

**B6**

USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 6/10/2019 8:11:44 PM  
**Subject:** DCM Taste of the Wild EON-390065  
**Attachments:** Taste of the Wild (various flavors) since Nov 2013: Lisa Freeman - EON-390087; Taste of the Wild PREY: [REDACTED] EON-390065; Taste of the Wild PREY: [REDACTED] - EON-390066

Everyone,

I know that we aren't forwarding all of these, but since they've added a lot of information, I felt like it's worthwhile to share it with everyone.

**Report Details - EON-390087**

ICSR:	2068031
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 15:56:37 EDT
Initial Report Date:	10/09/2018
Parent ICSR:	2055822
Follow-up Report to FDA Request:	Yes

Reported Problem:	<b>Problem Description:</b>	Asymptomatic but is housemate of [B6] who was diagnosed with DCM recently (FDA ICSR ID 2055229). Eating same diet until mid-September when switched to Pro Plan Weight Management dry. Note: [B6] does not have clear DCM but has reduced contractility. Will recheck in 6 months. Taurine pending - will submit when available.
	<b>Date Problem Started:</b>	10/02/2018
	<b>Concurrent Medical Problem:</b>	No
	<b>Outcome to Date:</b>	Better/Improved/Recovering

Product Information:	<b>Product Name:</b>	Taste of the Wild (various flavors) since Nov 2013
	<b>Product Type:</b>	Pet Food
	<b>Lot Number:</b>	
	<b>Package Type:</b>	BAG
	<b>Product Use Information:</b>	
	<b>Manufacturer /Distributor Information:</b>	
	<b>Purchase Location Information:</b>	

Animal Information:	<b>Name:</b>	[B6]	
	<b>Type Of Species:</b>	Dog	
	<b>Type Of Breed:</b>	Doberman Pinscher	
	<b>Gender:</b>	Female	
	<b>Reproductive Status:</b>	Neutered	
	<b>Weight:</b>	33.4 Kilogram	
	<b>Age:</b>	[B6] ears	
	<b>Assessment of Prior Health:</b>	Excellent	
	<b>Number of Animals Given the Product:</b>	2	
	<b>Number of Animals Reacted:</b>	2	
	<b>Owner Information:</b>	<b>Owner Information provided:</b>	Yes
		<b>Contact:</b>	<b>Name:</b>
<b>Phone:</b>			[B6]
<b>Email:</b>			[B6]
<b>Address:</b>	[B6]		

			<b>B6</b> United States	
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	Tufts Cummings School of Veterinary Medicine		
	<b>Contact:</b>	<b>Name:</b>	Lisa Freeman	
		<b>Phone:</b>	(508) 887-4523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States			
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman		
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States		
	<b>Contact:</b>	<b>Phone:</b>	5088874523	
		<b>Email:</b>	lisa.freeman@tufts.edu	
	<b>Permission To Contact Sender:</b>	Yes		
<b>Preferred Method Of Contact:</b>	Email			
<b>Additional Documents:</b>	<b>Attachment:</b>	Diet Hx 4-24-19.pdf		
	<b>Description:</b>	Diet history form		
	<b>Type:</b>	Medical Records		
	<b>Attachment:</b>	echo report 4-24-2019.pdf		
	<b>Description:</b>	Echo report		
	<b>Type:</b>	Echocardiogram		
	<b>Attachment:</b>	<b>B4, B6</b>		
	<b>Description:</b>	Lab work		
	<b>Type:</b>	Laboratory Report		
	<b>Attachment:</b>	Doberman DCM Combo Results Form.pdf		
	<b>Description:</b>	Genetic testing		
	<b>Type:</b>	Laboratory Report		
	<b>Attachment:</b>	troponin 5-30-2019.pdf		
	<b>Description:</b>	Lab work		
	<b>Type:</b>	Laboratory Report		

# 314074

CARDIOLOGY DIET HISTORY FORM

Please answer the following questions about your pet

B6

Today's date: 4/24/19

1. How would you assess your pet's appetite? (mark the point on the line below that best represents your pet's appetite)
Example: Poor \_\_\_\_\_ Excellent

Poor \_\_\_\_\_ Excellent

2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)
Eats about the same amount as usual Eats less than usual Eats more than usual
Seems to prefer different foods than usual Other

3. Over the last few weeks, has your pet (check one)
Lost weight Gained weight Stayed about the same weight Don't know

1. Please list below ALL pet foods, people food, treats, snack, dental chews, rawhides, and any other food item that your pet currently eats and that you have fed in the last 2 years.

Please provide enough detail that we could go to the store and buy the exact same food - examples are shown in the table

Table with 5 columns: Food (include specific product and flavor), Form, Amount, How often?, Dates fed. Contains handwritten entries for various pet foods like Nutro Grain Free Chicken, Hills Ideal Balance, etc.

\*Any additional diet information can be listed on the back of this sheet

2. Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)? Yes No If yes, please list which ones and give brands and amounts:

Table for dietary supplements with columns: Brand/Concentration, Amount per day. Includes handwritten entries for Taurine, Carnitine, and Vitamin C.

3. How do you administer pills to your pet?
I do not give any medications
I put them directly in my pet's mouth without food
I put them in my pet's dog/cat food
I put them in a Pill Pocket or similar product
I put them in foods (list foods):

# B6

## Veterinary Cardiac Genetics Laboratory

# B6



To request swab collection kits, please visit:

# B6

### Doberman Pinscher Dilated Cardiomyopathy (DCM) Genetic Testing

Dilated cardiomyopathy mutation (DCM) is a form of heart disease in the Doberman pinscher dog. It is an inherited disease, and our laboratory has identified two mutations responsible for the development of DCM. Dogs that are positive for both mutations are at the highest risk of developing DCM

Owner Name:

# B6

NCSU Doberman DCM1 (PDK4) Result: **Negative**

Dog's Name:

NCSU Doberman DCM2 Result: **Positive Heterozygous**

ID #:

Below is an explanation for each possible test result so you can better understand all the possible results and make informed breeding decisions:

<b>Negative Result for both DCM1 and DCM2:</b>	The absence of both mutations in a Doberman indicates that the risk of developing DCM is low. It is still possible for a dog to develop heart disease. However, a negative result for both DCM1 and DCM2 indicates that a dog does not have either mutation known to cause DCM.
<b>Positive result for NCSU DCM1 only :</b>	<b>About 40% of dogs with this mutation will develop DCM.</b> Dogs that are positive for only DCM1 will not necessarily develop significant heart disease.
<b>Breeding recommendations:</b>	Dogs are positive for DCM1 should NEVER be bred to a dog that is positive for NCSU DCM 2 since this will lead to dogs that are highest risk of developing DCM. Dogs that are positive homozygous for DCM1 should ideally not be bred.
<b>Positive Result for NCSU DCM2 only :</b>	<b>About 50% of dogs with this mutation will develop DCM.</b> Dogs that are positive for only DCM2 will not necessarily develop significant heart disease.
<b>Breeding recommendations:</b>	Dogs are positive for DCM2 should NEVER be bred to a dog that is positive for NCSU DCM1 (PDK4) since this will lead to dogs that are highest risk of developing DCM. Dogs that are positive homozygous for DCM2 should ideally not be bred.
<b>Positive result for both NCSU DCM1 and NCSU DCM2 :</b>	<b>Dogs that positive for BOTH DCM1 &amp; DCM2 are at a very HIGH risk of developing DCM</b> and should be carefully monitored by your veterinarian for signs of disease. Annual evaluation by a cardiologist with an echocardiogram and Holter monitor after 3 years of age is recommended.
<b>Breeding recommendations:</b>	Dogs that are positive for both DCM1 & DCM2 are at the HIGHEST risk of developing DCM and should ideally not be bred since they can pass both traits on. They should never be bred to a dog that is positive for either test.



As always, breeding decisions should be made carefully. Removal of a significant number of dogs from the breeding population could be very bad for the Doberman Pinscher breed. Remember that dogs that carry this mutation may also carry other important good genes that we do not want to lose from the breed.



B4

B6

B6

B4

Date: 04/24/2019

B6

B6

Species: CANINE  
Breed: DOBERMAN\_PINSCH  
Gender: FEMALE SPAYED  
Age: 6Y

Account #88933

**CARDIOPET proBNP - CANINE**

Test	Result	Reference Range	Low	Normal	High
CARDIOPET proBNP - CANINE	604 <sup>1</sup>	B6			

**Comments:**

B6



# B4, B6

GI Lab Assigned Clinic ID: 23523

## B6

## B6

Species: Canine

Date Received: May 30, 2019

## B6

GI Lab Accession: **B6**

<u>Test</u>	<u>Result</u>	<u>Reference Interval</u>	<u>Assay Date</u>
<b>Ultra-Sensitive Troponin I Fasting</b>	<b>B6</b>	≤0.06	05/31/19

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

Comments:

# B4, B6

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; [B6]  
**Sent:** 6/10/2019 6:08:32 PM  
**Subject:** Taste of the Wild PREY; [B6] EON-390065  
**Attachments:** 2068021-report.pdf; 2068021-attachments.zip

A PFR Report has been received and PFR Event [EON-390065] has been created in the EON System.

A "PDF" report by name "2068021-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 "2068021-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-390065

**ICSR #:** 2068021

**EON Title:** PFR Event created for Taste of the Wild PREY; 2068021

<b>AE Date</b>	[B6]	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>	03/12/2020	<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Died Naturally
<b>Breed</b>	Mixed (Dog)		
<b>Age</b>	[B6] Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2068021

**Product Group:** Pet Food

**Product Name:** Taste of the Wild PREY

**Description:** On [B6] night, [B6] [B6] couldn't make it back from his nightly walk, had labored breathing, and no appetite. His hind legs were shaking. On [B6] morning [B6] was brought in to the [B6] [B6] where he underwent general sedation for a hip/knee X-Ray. The thought process was that he had injured a hind leg. Under sedation early on, [B6] experienced abnormal heart rate and blood pressure readings as well as gum/ tongue color while being monitored. The vet staff pulled him from sedation, ran a general blood panel (which was unremarkable and otherwise normal - general parameters). The

vet then decided to do a chest x-ray and found his heart to be 3x the normal size. That same day, I took him to [B6] for a cardiologist follow up as part of their [B6] extension. [B6] was diagnosed with dilated cardiomyopathy and right ventricular congestive heart failure from an echo cardiogram performed by [B6]. He was prescribed pimobendan and lasix and 1,000 mg of taurine 3x a day. It was the opinion of [B6] that [B6] had diet-related DCM. The following week [B6] appetite declined severely to the point of syringe feeding. On [B6] we brought him back to [B6] [B6] on the recommendation of the [B6] extension Cardiology department for a kidney panel before his second cardiologist follow up with another cardiologist, [B6] on the same day. Unfortunately, [B6] died of a fatal arrhythmia at the cardiologist's office 8 days after his initial diagnosis of suspected diet-related DCM and right ventricular CHF. The reason [B6] was suspected to have diet related DCM was due to his diet. He was on Taste of the Wild PREY, which is a limited ingredient dry food for the last [B6] years. Before that, he was on Merrick grain-free dog food. After reading information on diet related - DCM, I checked the ingredients on [B6] food and lentils was the second ingredient listed. [B6] was grain-free his whole life and on a grain-free diet high in lentils for [B6] years of his life. His last 2 bags of Taste of the Wild PREY: Bag 1 (consumed up to the time of death): UPC 0-74198-61368-7 Best by 12/Mar/2020 Possible Lot Numbers: 9072080 PDR0301-19 MSH 17:27 Bag 2 (consumed 1.5 months before time of death): UPC 0-74198-61366-3 Best by 08/Mar/2020 Possible Lot Numbers: 9068080 PDB0301-19 JDM 08:09 On a personal note: When I had taken [B6] into his initial cardiologist appointment and the vet came back in with the results, my reaction was "you have to have the wrong dog, he's only [B6] years old!". His response immediately was, "what are you feeding him?" As soon as I said grain-free, he said he had a very belief [B6] case was diet-related because he was a mixed breed. We had reached out to Taste of the Wild to ask them if they knew about this and had heard. Their answer was yes. It's a long shot, but please do contact me to follow up bc I want to know if the FDA has plans to more closely monitor dog food companies in the coming future. I believe that this is necessary. These dog food companies have a huge responsibility to do due-diligence on nutrition profiles. The animal space is highly desirable because it's a channel where savvy marketing pays big dividends and it is completely unregulated by a government agency. I don't want to live in a country where basic items like food are subject to the belief that marketing means more than testing. Please call with any additional questions you have. I'm happy to share [B6] story and provide as much details as I can to help make a difference. I also want to know how many cases have been reported.

**Submission Type:** Initial

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

**Outcome of reaction/event at the time of last observation:** Died Naturally

**Number of Animals Treated With Product:** 1

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
Taste of the Wild PREY	9072080 PDR0301-19 MSH 17:27	03/12/2020

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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

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**Report Details - EON-390065**

ICSR:	2068021
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:	2019-06-10 14:02:21 EDT
Reporter is the Animal Owner:	Yes

**Reported Problem:** **Problem Description:** On **B6** night, **B6** **B6** couldn't make it back from his nightly walk, had labored breathing, and no appetite. His hind legs were shaking. On **B6** morning, **B6** was brought in to the **B6** where he underwent general sedation for a hip/knee X-Ray. The thought process was that he had injured a hind leg. Under sedation early on, **B6** experienced abnormal heart rate and blood pressure readings as well as gum/ tongue color while being monitored. The vet staff pulled him from sedation, ran a general blood panel (which was unremarkable and otherwise normal - general parameters). The vet then decided to do a chest x-ray and found his heart to be 3x the normal size. That same day, I took him to **B6** for a cardiologist follow up as part of their **B6** extension. **B6** was diagnosed with dilated cardiomyopathy and right ventricular congestive heart failure from an echo cardiogram performed by **B6**. He was prescribed pimobendan and lasix and 1,000 mg of taurine 3x a day. It was the opinion of **B6** that **B6** had diet-related DCM. The following week, **B6** appetite declined severely to the point of syringe feeding. On **B6** we brought him back to **B6** on the recommendation of the **B6** **B6** extension Cardiology department for a kidney panel before his second cardiologist follow up with another cardiologist, **B6** on the same day. Unfortunately, **B6** died of a fatal arrhythmia at the cardiologist's office 8 days after his initial diagnosis of suspected diet-related DCM and right ventricular CHF. The reason **B6** was suspected to have diet related DCM was due to his diet. He was on Taste of the Wild PREY, which is a limited ingredient dry food for the last **B6** years. Before that, he was on Merrick grain-free dog food. After reading information on diet related - DCM, I checked the ingredients on **B6** food and lentils was the second ingredient listed. **B6** was grain-free his whole life and on a grain-free diet high in lentils for **B6** years at his life. His last 2 bags of Taste of the Wild PREY: Bag 1 (consumed up to the time of death): UPC 0-74198-61368-7 Best by 12/Mar/2020 Possible Lot Numbers: 9072080 PDR0301-19 MSH 17:27 Bag 2 (consumed 1.5 months before time of death): UPC 0-74198-61366-3 Best by 08/Mar/2020 Possible Lot Numbers: 9068080 PDB0301-19 JDM 08:09 On a personal note: When I had taken **B6** into his initial cardiologist appointment and the vet came back in with the results, my reaction was "you have to have the wrong dog, he's only 4.5 years old!". His response immediately was, "what are you feeding him?" As soon as I said grain-free, he said he had a very belief: **B6** case was diet-related because he was a mixed breed. We had reached out to Taste of the Wild to ask them if they knew about this and had heard. Their answer was yes. It's a long shot, but please do contact me to follow up bc I want to know if the FDA has plans to more closely monitor dog food companies in the coming future. I believe that this is necessary. These dog food companies have a huge responsibility to do due-diligence on nutrition profiles. The animal space is highly desirable because it's a channel where savvy marketing pays big dividends and it is completely unregulated by a government agency. I don't want to live in a country where basic items like food are subject to the belief that marketing means more than testing. Please call with any additional questions you have. I'm happy to share **B6** story and provide as much details as I can to help make a difference. I also want to know how many cases have been reported.

<b>Date Problem Started:</b>	<b>B6</b>
<b>Concurrent Medical Problem:</b>	No
<b>Outcome to Date:</b>	Died Naturally
<b>Date of Death:</b>	<b>B6</b>

<b>Product Information:</b>	<b>Product Name:</b>	Taste of the Wild PREY
	<b>Product Type:</b>	Pet Food

<b>Lot Number:</b>	<b>Lot Number:</b>	9072080 PDR0301-19 MSH 17.27
	<b>Expiration Date:</b>	03/12/2020
<b>UPC:</b>	074198613687	
<b>Package Type:</b>	BAG	
<b>Package Size:</b>	25 Pound	
<b>Purchase Date:</b>	04/01/2019	
<b>Number Purchased:</b>	2	
<b>Possess Unopened Product:</b>	No	
<b>Possess Opened Product:</b>	No	
<b>Storage Conditions:</b>	Stored in an air-tight pet food container that was BPA-free	
<b>Product Use Information:</b>	<b>Description:</b>	1.75 cups fed 2x a day to total a little over 3.75 cups a day. This was taken from the back of the package for a dog in between 60 and 80 lbs.
	<b>First Exposure Date:</b>	04/01/2019
	<b>Last Exposure Date:</b>	<b>B6</b>
	<b>Time Interval between Product Use and Adverse Event:</b>	6 Weeks
	<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes
	<b>Adverse Event Abate After Product Stop:</b>	No
	<b>Product Use Started Again:</b>	No
	<b>Perceived Relatedness to Adverse Event:</b>	Definitely related
	<b>Other Foods or Products Given to the Animal During This Time Period:</b>	No
	<b>Manufacturer /Distributor Information:</b>	<b>Name:</b>
<b>Type(s):</b>		Manufacturer
<b>Address:</b>		United States
<b>Contact:</b>		
<b>Possess One or More Labels from This Product:</b>		Yes
<b>Purchase Location Information:</b>	<b>Name:</b>	<b>B6</b>
	<b>Address:</b>	United States
<b>Animal Information:</b>	<b>Name:</b>	<b>B6</b>
	<b>Type Of Species:</b>	Dog
	<b>Type Of Breed:</b>	Mixed (Dog)

	<b>Gender:</b> Male
	<b>Reproductive Status:</b> Neutered
	<b>Weight:</b> 29.8 Kilogram
	<b>Age:</b> B6 Years
	<b>Assessment of Prior Health:</b> Excellent
	<b>Number of Animals Given the Product:</b> 1
	<b>Number of Animals Reacted:</b> 1
	<b>Owner Information:</b>
<b>Healthcare Professional Information:</b>	<b>Practice Name:</b> B6
	<b>Contact:</b> Name: B6
	Phone: B6
	<b>Address:</b> B6
	United States
	<b>Type of Veterinarian:</b> Primary/regular veterinarian
	<b>Date First Seen:</b> B6
	<b>Permission to Release Records to FDA:</b> Yes
	<b>Practice Name:</b> B6
	<b>Contact:</b> Name: B6
	Phone: B6
	<b>Address:</b> B6
	United States
	<b>Type of Veterinarian:</b> Referred veterinarian
<b>Date First Seen:</b> B6	
<b>Permission to Release Records to FDA:</b> Yes	
<b>Sender Information:</b>	<b>Name:</b>
	<b>Address:</b> B6
	<b>Contact:</b> Phone: B6
	Email: B6
	<b>Permission To Contact Sender:</b> Yes
	<b>Preferred Method Of Contact:</b> Phone
	<b>Reported to Other Parties:</b> Manufacturer Store/Place of Purchase
<b>Additional Documents:</b>	

<b>Attachment:</b>	B6 Report B6 pdf
<b>Description:</b>	B6 B6 cardiology recheck and death event. Please note that in the header B6 discharge status is listed as "Alive", however in the notes, you can see that he had actually died. B6 is not a pure lab, he was a mixed breed.
<b>Type:</b>	Medical Records
<b>Attachment:</b>	B6 B6 pdf
<b>Description:</b>	B6 B6 initial diagnosis from B6 ion suspected diet-related dilated cardiomyopathy and right ventricular congestive heart failure. B6 is not a pure lab, he was a mixed breed.
<b>Type:</b>	Medical Records



**B6**

**B6** at 10:33am.

Visit Summary

Admission:  
Discharge:

**B6**

Small Animal Inpatient  
Alive

**B6**

Status: Final

Client #:  
Client:  
Address:  
City, St:

**B6**

Clinician:  
Patient #:  
Patient:  
Species: K9

**B6**

Sex: MC

Breed: LABRADOR RETRI..

Weight: 29.8KG

Pertinent History

**B6** presented for an evaluation of lethargy, weakness, fatigue and cardiomegaly. For the past 6 months he has been getting slower on walks, fatiguing easier and less energetic. Has gotten significantly worse in the past week and last night had to be carried home after a few blocks. He has been gagging/coughing occasionally. **B6** went to **B6** today, had muffled heart sounds, was sedated with 100mcg of dexmedetomidine, 4mg butorphanol and radiographs revealed marked cardiomegaly. Was given atipamezole and referred to VSH.

Physical Examination

**B6**

Clinical Diagnoses

- 1) Suspect diet-associated dilated cardiomyopathy (nutritional cardiomyopathy)
- 2) Severe mitral regurgitation
- 3) Mild to moderate tricuspid regurgitation
- 4) Biventricular failure

Discharge Summary

**B6**

**B6**

\_\_\_\_\_  
Clinician Signature / Date

**B6**

**B6** at 4:57pm.

Visit Summary

Admission: **B6** Small Animal Outpatient  
Discharge: Alive

**B6**  
Status: Final

Client #:  
Client:  
Address:  
City, St:

**B6**

Clinician:  
Patient #:  
Patient:  
Species: K9  
Breed: LABRADOR RETRIEVER

**B6**

Sex: MC

Pertinent History

**B6** presented for a recheck examination to discuss medication changes based on recent blood work revealing elevated values, including elevated kidney values. **B6** has been anorexic for a week. He is currently being force fed. His breathing rate improved for a few days (40rpm) but was elevated yesterday and today (60rpm). His abdomen appears to be more distended. He was hospitalized at **B6** and was treated with fluids and antibiotics. He is currently receiving pimobendan 7.5mg PO BID, furosemide 60mg PO BID, taurine 1000mg TID, cerenia 160mg PO SID, mirtazapine 15mg PO SID and CoQ10 100mg PO SID. Bob arrested upon presentation.

Medical/Surgical Procedures (Billing)

**B6** 5068 - Misc. Procedure-Card

Clinical Diagnoses

- 1) Suspect diet-associated dilated cardiomyopathy (nutritional cardiomyopathy). Severe mitral regurgitation. Mild to moderate tricuspid regurgitation. Biventricular failure, Death.

Discharge Instructions

**B6**

\_\_\_\_\_  
Clinician Signature

\_\_\_\_\_  
Date

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**From:** Related PFR Event <pfrsignificantactivitycreation@fda.hhs.gov>  
**To:** [B6] Cleary, Michael \*; HQ Pet Food Report Notification;  
[B6]  
**Sent:** 6/10/2019 6:20:41 PM  
**Subject:** Taste of the Wild PREY: [B6] EON-390066  
**Attachments:** 2068022-report.pdf; 2068022-attachments.zip

A PFR Report has been received and Related PFR Event [EON-390066] has been created in the EON System.

A "PDF" report by name "2068022-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 "2068022-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-390066

**ICSR #:** 2068022

**EON Title:** Related PFR Event created for Taste of the Wild PREY; 2068022

<b>AE Date</b>	[B6]	<b>Number Fed/Exposed</b>	1
<b>Best By Date</b>	03/12/2020	<b>Number Reacted</b>	1
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Died Naturally
<b>Breed</b>	Mixed (Dog)		
<b>Age</b>	[B6] Years		
<b>District Involved</b>	PFR [B6] DO		

**Product information**

**Individual Case Safety Report Number:** 2068022

**Product Group:** Pet Food

**Product Name:** Taste of the Wild PREY

**Description:** On [B6] night, [B6] [B6] couldn't make it back from his nightly walk, had labored breathing, and no appetite. His hind legs were shaking. On [B6] morning, [B6] was brought in to [B6] [B6] where he underwent general sedation for a hip/knee X-Ray. The thought process was that he had injured a hind leg. Under sedation early on, [B6] experienced abnormal heart rate and blood pressure readings as well as gum/ tongue color while being monitored. The vet staff pulled him from

sedation, ran a general blood panel (which was unremarkable and otherwise normal - general parameters). The vet then decided to do a chest x-ray and found his heart to be 3x the normal size. That same day, I took him to [B6] for a cardiologist follow up as part of their [B6] extension. [B6] was diagnosed with dilated cardiomyopathy and right ventricular congestive heart failure from an echo cardiogram performed by [B6]. He was prescribed pimobendan and lasix and 1,000 mg of taurine 3x a day. It was the opinion of [B6] that [B6] had diet-related DCM. The following week, [B6] appetite declined severely to the point of syringe feeding. On [B6] we brought him back to [B6] [B6] on the recommendation of the [B6] extension Cardiology department for a kidney panel before his second cardiologist follow up with another cardiologist, [B6] on the same day. Unfortunately, [B6] died of a fatal arrhythmia at the cardiologist's office 8 days after his initial diagnosis of suspected diet-related DCM and right ventricular CHF. The reason [B6] was suspected to have diet related DCM was due to his diet. He was on Taste of the Wild PREY, which is a limited ingredient dry food for the last [B6] years. Before that, he was on Merrick grain-free dog food. After reading information on diet related - DCM, I checked the ingredients on [B6] food and lentils was the second ingredient listed. [B6] was grain-free his whole life and on a grain-free diet high in lentils for [B6] years of his life. His last 2 bags of Taste of the Wild PREY: Bag 1 (consumed up to the time of death): UPC 0-74198-61368-7 Best by 12/Mar/2020 Possible Lot Numbers: 9072080 PDR0301-19 MSH 17:27 Bag 2 (consumed 1.5 months before time of death): UPC 0-74198-61366-3 Best by 08/Mar/2020 Possible Lot Numbers: 9068080 PDB0301-19 JDM 08:09 On a personal note: When I had taken [B6] into his initial cardiologist appointment and the vet came back in with the results, my reaction was "you have to have the wrong dog, he's only [B6] years old!". His response immediately was, "what are you feeding him?" As soon as I said grain-free, he said he had a very belief [B6] case was diet-related because he was a mixed breed. We had reached out to Taste of the Wild to ask them if they knew about this and had heard. Their answer was yes. It's a long shot, but please do contact me to follow up bc I want to know if the FDA has plans to more closely monitor dog food companies in the coming future. I believe that this is necessary. These dog food companies have a huge responsibility to do due-diligence on nutrition profiles. The animal space is highly desirable because it's a channel where savvy marketing pays big dividends and it is completely unregulated by a government agency. I don't want to live in a country where basic items like food are subject to the belief that marketing means more than testing. Please call with any additional questions you have. I'm happy to share [B6] story and provide as much details as I can to help make a difference. I also want to know how many cases have been reported.

**Submission Type:** Followup

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

**Outcome of reaction/event at the time of last observation:** Died Naturally

**Number of Animals Treated With Product:** 1

**Number of Animals Reacted With Product:** 1

Product Name	Lot Number or ID	Best By Date
Taste of the Wild PREY	9072080 PDR0301-19 MSH 17:27	03/12/2020

This report is linked to:

**Initial EON Event Key:** EON-390065

**Initial ICSR:** 2068021

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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**Report Details - EON-390066**

ICSR:	2068022
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 14:11:22 EDT
Initial Report Date:	06/10/2019
Reporter is the Animal Owner:	Yes
Parent ICSR:	2068021
Follow-up Report to FDA Request:	Yes

Reported Problem:	<p><b>Problem Description:</b> On [B6] night, [B6] [B6] couldn't make it back from his nightly walk, had labored breathing, and no appetite. His hind legs were shaking. On [B6] morning, [B6] was brought in to the [B6] where he underwent general sedation for a hip/knee X-Ray. The thought process was that he had injured a hind leg. Under sedation early on, [B6] experienced abnormal heart rate and blood pressure readings as well as gum/ tongue color while being monitored. The vet staff pulled him from sedation, ran a general blood panel (which was unremarkable and otherwise normal - general parameters). The vet then decided to do a chest x-ray and found his heart to be 3x the normal size. That same day, I took him to [B6] for a cardiologist follow up as part of their [B6] extension. [B6] was diagnosed with dilated cardiomyopathy and right ventricular congestive heart failure from an echo cardiogram preformed by [B6]. He was prescribed pimobendan and lasix and 1,000 mg of taurine 3x a day. It was the opinion of [B6] that [B6] had diet-related DCM. The following week, [B6] appetite declined severely to the point of syringe feeding. On [B6] we brought him back to [B6] on the recommendation of the [B6] [B6] extension Cardiology department for a kidney panel before his second cardiologist follow up with another cardiologist, [B6] on the same day. Unfortunately, [B6] died of a fatal arrhythmia at the cardiologist's office 8 days after his initial diagnosis of suspected diet-related DCM and right ventricular CHF. The reason [B6] was suspected to have diet related DCM was due to his diet. He was on Taste of the Wild PREY, which is a limited ingredient dry food for the last 3.5 years. Before that, he was on Merrick grain-free dog food. After reading information on diet related - DCM, I checked the ingredients on [B6] food and lentils was the second ingredient listed. [B6] was grain-free his whole life and on a grain-free diet high in lentils for 3.5/4.5 years of his life. His last 2 bags of Taste of the Wild PREY: Bag 1 (consumed up to the time of death): UPC 0-74198-61368-7 Best by 12/Mar/2020 Possible Lot Numbers: 9072080 PDR0301-19 MSH 17:27 Bag 2 (consumed 1.5 months before time of death): UPC 0-74198-61366-3 Best by 08/Mar/2020 Possible Lot Numbers: 9068080 PDB0301-19 JDM 08:09 On a personal note: When I had taken [B6] into his initial cardiologist appointment and the vet came back in with the results, my reaction was "you have to have the wrong dog, he's only [B6] years old!". His response immediately was, "what are you feeding him?" As soon as I said grain-free, he said he had a very belief [B6] case was diet-related because he was a mixed breed. We had reached out to Taste of the Wild to ask them if they knew about this and had heard. Their answer was yes. It's a long shot, but please do contact me to follow up bc I want to know if the FDA has plans to more closely monitor dog food companies in the coming future. I believe that this is necessary. These dog food companies have a huge responsibility to do due-diligence on nutrition profiles. The animal space is highly desirable because it's a channel where savvy marketing pays big dividends and it is completely unregulated by a government agency. I don't want to live in a country where basic items like food are subject to the belief that marketing means more than testing. Please call with any additional questions you have. I'm happy to share [B6] story and provide as much details as I can to help make a difference. I also want to know how many cases have been reported.</p>
Date Problem Started:	[B6]
Concurrent Medical Problem:	No

	<b>Outcome to Date:</b>	Died Naturally		
	<b>Date of Death:</b>	B6		
<b>Product Information:</b>	<b>Product Name:</b>	Taste of the Wild PREY		
	<b>Product Type:</b>	Pet Food		
	<b>Lot Number:</b>	<b>Lot Number:</b>	9072080 PDR0301-19 MSH 17 27	
		<b>Expiration Date:</b>	03/12/2020	
	<b>UPC:</b>	074198613687		
	<b>Package Type:</b>	BAG		
	<b>Package Size:</b>	25 Pound		
	<b>Purchase Date:</b>	04/01/2019		
	<b>Number Purchased:</b>	2		
	<b>Possess Unopened Product:</b>	No		
	<b>Possess Opened Product:</b>	No		
	<b>Storage Conditions:</b>	Stored in an air-tight pet food container that was BPA-free		
	<b>Product Use Information:</b>	<b>Description:</b>	1.75 cups fed 2x a day to total a little over 3.75 cups a day. This was taken from the back of the package for a dog in between 60 and 80 lbs.	
		<b>First Exposure Date:</b>	04/01/2019	
		<b>Last Exposure Date:</b>	B6	
		<b>Time Interval between Product Use and Adverse Event:</b>	6 Weeks	
		<b>Product Use Stopped After the Onset of the Adverse Event:</b>	Yes	
		<b>Adverse Event Abate After Product Stop:</b>	No	
		<b>Product Use Started Again:</b>	No	
		<b>Perceived Relatedness to Adverse Event:</b>	Definitely related	
<b>Other Foods or Products Given to the Animal During This Time Period:</b>		No		
<b>Manufacturer /Distributor Information:</b>		<b>Name:</b>	Diamond Pet Food Companies - Taste of the Wild	
	<b>Type(s):</b>	Manufacturer		
	<b>Address:</b>	United States		
	<b>Contact:</b>			
	<b>Possess One or More Labels from This Product:</b>	Yes		
<b>Purchase Location Information:</b>	<b>Name:</b>	B6		
	<b>Address:</b>			



Animal Information:

Name: **B6**

Type Of Species: Dog

Type Of Breed: Mixed (Dog)

Gender: Male

Reproductive Status: Neutered

Weight: 29.8 Kilogram

Age: **B6** years

Assessment of Prior Health: Excellent

Number of Animals Given the Product: 1

Number of Animals Reacted: 1

Owner Information:

Healthcare Professional Information:

Practice Name: **B6**

Contact: Name: **B6**  
Phone: **B6**

Address: **B6**  
United States

Type of Veterinarian: Primary/regular veterinarian

Date First Seen: **B6**

Permission to Release Records to FDA: Yes

Practice Name: **B6**

Contact: Name: **B6**  
Phone: **B6**

Address: **B6**  
United States

Type of Veterinarian: Referred veterinarian

Date First Seen: **B6**

Permission to Release Records to FDA: Yes

Practice Name: **B6**

Contact: Name: **B6**  
Phone: **B6**

Address: **B6**

Type of Veterinarian: Referred veterinarian

		Date First Seen: <b>B6</b>
		Permission to Release Records to FDA: Yes
Sender Information:	Name:	<b>B6</b>
	Address:	<b>B6</b> United States
	Contact:	Phone: <b>B6</b>
		Email: <b>B6</b>
	Permission To Contact Sender:	Yes
	Preferred Method Of Contact:	Phone
Reported to Other Parties:	Manufacturer Store/Place of Purchase	
Additional Documents:	Attachment:	TOTW_1.jpg
	Description:	Taste of the Wile PREY Fed to <b>B6</b> at the even of his death
	Type:	Product Label
	Attachment:	TOTW_2.jpg
	Description:	Taste of the Wild PREY Fed to <b>B6</b> 6-8 weeks leading up to his death on <b>B6</b>
	Type:	Product Label
Attachment:	<b>B6</b> 19039110_ Taurine Level ( <b>B6</b> Amino Acid Lab).pdf	
Description:	<b>B6</b> Taurine levels. Echo-cardiogram can be submitted once recieved.	
	Type:	Medical Records

# B6

# B6

Rcvd: 15-May-2019 12:28 am

Account #: 788

Rptd: 29-May-2019 10:55 am

**B6**

Fax:

**B6****B6****Final**Age: **B6** 1 Sex: M Neutered: Y Species: Canine

Breed: Labrador Retriever

Tests Ordered: Taurine Level (**B6** Amino Acid Lab)

Pending Tests:

Test	Result	Reference Range	Units
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Send Out

Taurine Level (**B6** Amino Acid Lab)

Sample type

Plasma

Taurine Level

**B6**

Plasma normal range: No known risk for Taurine Deficiency

Cat 80 - 120 nmol/ml

**B6**

Dog 60 - 120 nmol/ml

Whole blood normal range: No risk for Taurine deficiency

Cat 300 - 600 nmol/ml

**B6**

Dog 200 - 350 nmol/ml

Testing performed at the Amino Acids Laboratory; **B6****B6**

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**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 1/28/2019 1:38:48 PM  
**Subject:** DCM-Lisa Freeman  
**Attachments:** 4Health grain=free beef and potato: Lisa Freeman - EON-375111; 4Health whitefish and potato dry: Lisa Freeman - EON-376448; Acana Free Run Poultry dry: Lisa Freeman - EON-374786; Annamaet chicken and rice dry + Honest kitchen beef: Lisa Freeman - EON-376360; Homecooked diet - see diet history in medical record: Lisa Freeman - EON-374789; Orijen Adult Original dry (until Aug 2018): Lisa Freeman - EON-375110; Orijen grain free original dry: Lisa Freeman - EON-375114; Orijen Original dry: Lisa Freeman - EON-374783; Taste of the Wild Sierra Mountain dry: Lisa Freeman - EON-376361; Zignature - various flavors (venison): Lisa Freeman - EON-376446; Zignature kangaroo dry: Lisa Freeman - EON-376363

Here is the Freeman Collection

David Rotstein, DVM, MPVM, Dipl. ACVP  
CVM Vet-LIRN Liaison  
CVM OSC/DC/CERT  
7519 Standish Place

**B6**

**(BB)**



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**From:** PFR Event <pfpreventcreation@fda.hhs.gov>

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

**Sent:** 1/23/2019 11:40:21 PM

**Subject:** Wellness Core Ocean Grain Free Protein-Rich Nutrition; B6  
EON-377321

**Attachments:** 2061666-report.pdf; 2061666-attachments.zip

A PFR Report has been received and PFR Event [EON-377321] has been created in the EON System.

A "PDF" report by name "2061666-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 "2061666-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-377321

**ICSR #:** 2061666

**EON Title:** PFR Event created for Wellness Core Ocean Grain Free Protein-Rich Nutrition; 2061666

<b>AE Date</b>	02/15/2015	<b>Number Fed/Exposed</b>	2
<b>Best By Date</b>	10/24/2019	<b>Number Reacted</b>	2
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Better/Improved/Recovering
<b>Breed</b>	Retriever - Golden		
<b>Age</b>	7 Years		
<b>District Involved</b>	PFR <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2061666

**Product Group:** Pet Food

**Product Name:** Wellness Core Ocean Grain Free Protein-Rich Nutrition

**Description:** Began feeding Wellness CORE Ocean Dry Kibble Feb. 2015 as main source of nutrition, fed 1 cup 2x per day. Submitted Whole Blood sample to UC Davis Amino Acid Lab for Taurine Testing 6/26/2018. Lab Result 240 Whole Blood Taurine Results which per Dr. Joshua Stern UC Davis DVM Cardiologist is BELOW the 250 minimum range for a Golden Retriever Dog. Per Dr. Stern's order continue feeding this food and supplement each daily meal with taurine rich foods for 3 months then ReTest. Supplemented kibble with 1/2cup

pan fried Ground Sirloin, 1 Hardboiled Eggs and 3 Greek 2% Yogurt for 3months. ReTested Whole Blood Taurine Level October 24, 2018 sent to UC Davis Amino Acid Lab. 10/24/2018 Lab Result Whole Blood Taurine Results 297. Improvement of 57, putting him within the "normal" range Dr. Stern has identified for Golden Retriever Dogs.

**Submission Type:** Initial

**Report Type:** Both

**Outcome of reaction/event at the time of last observation:** Better/Improved/Recovering

**Number of Animals Treated With Product:** 2

**Number of Animals Reacted With Product:** 2

Product Name	Lot Number or ID	Best By Date
Wellness Core Ocean Grain Free Protein-Rich Nutrition	1228J22	10/24/2019

**Sender information**

**B6**

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

**B6**

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**B6**

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Report Details - EON-377321		
ICSR:	2061666	
Type Of Submission:	Initial	
Report Version:	FPSR.FDA.PETF.V.V1	
Type Of Report:	Both	
Reporting Type:	Voluntary	
Report Submission Date:	2019-01-23 18:29:48 EST	
Reporter is the Animal Owner:	Yes	
Reported Problem:	<b>Problem Description:</b> Began feeding Wellness CORE Ocean Dry Kibble Feb. 2015 as main source of nutrition, fed 1 cup 2x per day. Submitted Whole Blood sample to UC Davis Amino Acid Lab for Taurine Testing 6/26/2018. Lab Result 240 Whole Blood Taurine Results which per Dr. Joshua Stern UC Davis DVM Cardiologist is BELOW the 250 minimum range for a Golden Retriever Dog. Per Dr. Stern's order continue feeding this food and supplement each daily meal with taurine rich foods for 3 months then ReTest. Supplemented kibble with 1/2cup pan fried Ground Sirloin, 1 Hardboiled Eggs and 3 Greek 2% Yogurt for 3months. ReTested Whole Blood Taurine Level October 24, 2018 sent to UC Davis Amino Acid Lab. 10/24/2018 Lab Result Whole Blood Taurine Results 297. Improvement of 57, putting him within the "normal" range Dr. Stern has identified for Golden Retriever Dogs.	
	<b>Date Problem Started:</b> 02/15/2015	
	<b>Date of Recovery:</b> 10/24/2018	
	<b>Outcome to Date:</b> Better/Improved/Recovering	
Product Information:	<b>Product Name:</b> Wellness Core Ocean Grain Free Protein-Rich Nutrition	
	<b>Product Type:</b> Pet Food	
	<b>Lot Number:</b> Lot Number: 1228J22 <b>Expiration Date:</b> 10/24/2019	
	<b>UPC:</b> 076344884132	
	<b>Package Type:</b> BAG	
	<b>Package Size:</b> 12 Pound	
	<b>Purchase Date:</b> 01/04/2019	
	<b>Number Purchased:</b> 1	
	<b>Possess Unopened Product:</b> No	
	<b>Possess Opened Product:</b> Yes	
	<b>Storage Conditions:</b> Bag has a ziplock freshness seal which was opened and resealed after each use.	
	<b>Product Use Information:</b>	<b>Description:</b> Fed 1 cup kibble soaked in warm water 2x per day to Snickers.
		<b>Last Exposure Date:</b> 01/04/2019
		<b>Time Interval between Product Use and Adverse Event:</b> 3 Years
<b>Product Use Stopped After the Onset of the Adverse Event:</b> Yes		
<b>Adverse Event Abate After Product Stop:</b> Yes		
<b>Product Use Started Again:</b> No		
<b>Perceived:</b> Definitely related		



		Relatedness to Adverse Event:	
		Other Foods or Products Given to the Animal During This Time Period:	Yes
	Manufacturer /Distributor Information:		
	Purchase Location Information:	Name:	Petco
		Address:	<b>B6</b> United States
Animal Information:	Name:	<b>B6</b>	
	Type Of Species:	Dog	
	Type Of Breed:	Retriever - Golden	
	Gender:	Male	
	Reproductive Status:	Neutered	
	Weight:	73 Pound	
	Age:	7 Years	
	Assessment of Prior Health:	Good	
	Number of Animals Given the Product:	2	
	Number of Animals Reacted:	2	
	Owner Information:		
	Healthcare Professional Information:	Practice Name:	<b>B6</b>
		Contact: Name:	<b>B6</b>
		Phone:	<b>B6</b>
		Email:	<b>B6</b>
		Address:	<b>B6</b> United States
		Type of Veterinarian:	Primary/regular veterinarian
		Date First Seen:	06/26/2018
		Permission to Release Records to FDA:	Yes
Sender Information:	Name:		
	Address:	<b>B6</b> United States	
	Contact: Phone:	<b>B6</b>	
	Email:	<b>B6</b>	
	Reporter Wants to Remain Anonymous:	No	
	Permission To Contact	Yes	

	<b>Sender:</b>	
	<b>Preferred Method Of Contact:</b>	Email
	<b>Reported to Other Parties:</b>	Other Store/Place of Purchase

<b>Additional Documents:</b>	<b>Attachment:</b>	<b>B6</b> Oct20182ndTaurineResults_23928.jpg.pdf
	<b>Description:</b>	Taurine Retest Lab Report after 3 months of adding Taurine Rich Foods to existing kibble which was causing the problem.
	<b>Type:</b>	Laboratory Report
	<b>Attachment:</b>	<b>B6</b> June2620181stTaurineResultsT_19251.pdf
	<b>Description:</b>	First Taurine Results, Per Dr. Stern: "Those taurine levels are ok. I would prefer to see over 250. My recommendation would be either diet change and retest after 3 months or add in taurine rich ingredients and retest in 3 months. "
	<b>Type:</b>	Laboratory Report
	<b>Attachment:</b>	DrStern Lab Taurine RecommendationsAug2018.pdf
	<b>Description:</b>	Aug 2018 Letter from Dr. Joshua Stern DVM Cardiologist explaining the Taurine Deficeincy results specifically to Golden Retriever owners with the correct range that Golden Retriever dogs are to be in.
	<b>Type:</b>	Letter



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

## FREQUENTLY REQUESTED INFORMATION REGARDING TAURINE & DILATED CARDIOMYOPATHY IN GOLDEN RETRIEVERS

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

1. Golden Retrievers with marginal taurine levels (defined below) have been diagnosed with dilated cardiomyopathy and have documented disease reversal after taurine supplementation and diet change.
2. Previously published work documents taurine sensitivity in Golden Retrievers.
3. The most recently published reference on normal blood taurine values shows higher levels than previously reported.

- Normal whole blood taurine: >250nmol/mL
- Normal plasma taurine: >70nmol/mL
  
- Marginal whole blood taurine: 200-250nmol/mL
- Marginal plasma taurine: 60-70nmol/mL
  
- Low whole Blood taurine: <200nmol/mL
- Low plasma taurine: <60nmol/mL

### References:

- Kramer GA, Kittleson MD, Fox PR, Lewis J, Pion PD. Plasma taurine concentrations with normal dogs and in dogs with heart disease. *J Vet Intern Med* 1995;9:253-258.
- Belanger MC, Ouellet M, Queney G, Moreau M. Taurine-deficient dilated cardiomyopathy in a family of golden retrievers. *J Am Anim Hosp Assoc* 2005;41:284-291.
- Kittleson MD, Keene B, Pion PD, Loyer CG, MUST Study Investigators. Results of the multicenter spaniel trial (MUST): taurine- and carnitine-responsive dilated cardiomyopathy in American Cocker Spaniels with decreased plasma taurine concentration. *J Vet Intern Med* 1197;11:204-211.
- Backus RC, Choen G, Pion PD, Good KL, Rogers QR, Fascetti AJ. Taurine deficiency in Newfoundlands fed commercially available complete and balanced diets. *J Am Vet Med Assoc* 2003;223:1130-1136.
- Fascetti AJ, Reed JR, Rogers QR, Backus RC. Taurine deficiency in dogs with dilated cardiomyopathy: 12 cases (1997-2001). *J Am Vet Med Assoc* 2003;223:1137-1141.
- Freeman LM, Michel KE, Brown DJ, Kaplan PM, Stamoulis ME, Rosenthal SL, Keene BW, Rush JE. Idiopathic dilated cardiomyopathy in Dalmatians: nine cases (1990-1995). *J Am Vet Med Assoc* 1996;209:1592-1596.
- Delaney SJ, Kass PH, Rogers QR, Fascetti AJ. Plasma and whole blood taurine in normal dogs of varying size fed commercially prepared food. *J Anim Physiol a Anim Nutr* 2003;87:236-244.

### Plasma vs. whole blood taurine testing:

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

## **Clinical Recommendations for Golden Retrievers based on taurine levels:**

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

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

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

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

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

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

## **Diets of Concern & Choosing a diet**

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

Points to consider when making a diet change:

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

## **Choosing a taurine or l-carnitine supplement:**

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

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

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

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

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

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

## **Reporting to the FDA:**

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

<https://www.fda.gov/animalveterinary/safetyhealth/reportaproblem/ucm182403.htm>

Additional questions or comments:

[sterngenetics@ucdavis.edu](mailto:sterngenetics@ucdavis.edu)

This document last updated: Aug. 20, 2018

Page 3 of 3

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>

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

**Sent:** 1/24/2019 12:08:21 AM

**Subject:** Wellness Core Ocean Grain Free Protein-Rich Nutrition; B6  
EON-377324

**Attachments:** 2061667-report.pdf; 2061667-attachments.zip

A PFR Report has been received and PFR Event [EON-377324] has been created in the EON System.

A "PDF" report by name "2061667-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 "2061667-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-377324

**ICSR #:** 2061667

**EON Title:** PFR Event created for Wellness Core Ocean Grain Free Protein-Rich Nutrition; 2061667

<b>AE Date</b>	01/02/2017	<b>Number Fed/Exposed</b>	2
<b>Best By Date</b>	10/24/2019	<b>Number Reacted</b>	2
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Better/Improved/Recovering
<b>Breed</b>	Retriever - Golden		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR- <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2061667

**Product Group:** Pet Food

**Product Name:** Wellness Core Ocean Grain Free Protein-Rich Nutrition

**Description:** Began feeding Wellness CORE Ocean Dry Kibble Jan. 2017 as main source of nutrition, fed 1.5 cup 2x per day. Submitted Whole Blood sample to UC Davis Amino Acid Lab for Taurine Testing 6/26/2018. Lab Result 256 Whole Blood Taurine Results which per Dr. Joshua Stern UC Davis DVM Cardiologist is barely above the 250 minimum range for a Golden Retriever Dog. Per Dr. Stern's order continue feeding this food and supplement each daily meal with taurine rich foods for 3 months then ReTest. Supplemented kibble with 1/2cup

pan fried Ground Sirloin, 1 Hardboiled Eggs and 3 Greek 2% Yogurt for 3months. ReTested Whole Blood Taurine Level October 24, 2018 sent to UC Davis Amino Acid Lab. 10/24/2018 Lab Result Whole Blood Taurine Results 348. Improvement of 57, putting him within the "normal" range Dr. Stern has identified for Golden Retriever Dogs.

**Submission Type:** Initial

**Report Type:** Both

**Outcome of reaction/event at the time of last observation:** Better/Improved/Recovering

**Number of Animals Treated With Product:** 2

**Number of Animals Reacted With Product:** 2

Product Name	Lot Number or ID	Best By Date
Wellness Core Ocean Grain Free Protein-Rich Nutrition	1228J22	10/24/2019

**Sender information**

**B6**

USA

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

**B6**

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

**B6**

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Report Details - EON-377324			
ICSR:	2061667		
Type Of Submission:	Initial		
Report Version:	FPSR.FDA.PETF.V.V1		
Type Of Report:	Both		
Reporting Type:	Voluntary		
Report Submission Date:	2019-01-23 18:59:19 EST		
Reporter is the Animal Owner:	Yes		
Reported Problem:	<b>Problem Description:</b>	Began feeding Wellness CORE Ocean Dry Kibble Jan. 2017 as main source of nutrition, fed 1.5 cup 2x per day. Submitted Whole Blood sample to UC Davis Amino Acid Lab for Taurine Testing 6/26/2018. Lab Result 256 Whole Blood Taurine Results which per Dr. Joshua Stern UC Davis DVM Cardiologist is barely above the 250 minimum range for a Golden Retriever Dog. Per Dr. Stern's order continue feeding this food and supplement each daily meal with taurine rich foods for 3 months then ReTest. Supplemented kibble with 1/2cup pan fried Ground Sirloin, 1 Hardboiled Eggs and 3 Greek 2% Yogurt for 3months. ReTested Whole Blood Taurine Level October 24, 2018 sent to UC Davis Amino Acid Lab. 10/24 /2018 Lab Result Whole Blood Taurine Results 348. Improvement of 57, putting him within the "normal" range Dr. Stern has identified for Golden Retriever Dogs.	
	<b>Date Problem Started:</b>	01/02/2017	
	<b>Date of Recovery:</b>	10/24/2018	
	<b>Concurrent Medical Problem:</b>	No	
	<b>Outcome to Date:</b>	Better/Improved/Recovering	
Product Information:	<b>Product Name:</b>	Wellness Core Ocean Grain Free Protein-Rich Nutrition	
	<b>Product Type:</b>	Pet Food	
	<b>Lot Number:</b>	<b>Lot Number:</b>	1228J22
		<b>Expiration Date:</b>	10/24/2019
	<b>UPC:</b>	076344884132	
	<b>Package Type:</b>	BAG	
	<b>Package Size:</b>	12 Pound	
	<b>Purchase Date:</b>	12/04/2018	
	<b>Number Purchased:</b>	1	
	<b>Possess Unopened Product:</b>	No	
	<b>Possess Opened Product:</b>	Yes	
	<b>Storage Conditions:</b>	Bag has a ziplock freshness seal which was opened and resealed after each use.	
	<b>Product Use Information:</b>	<b>Description:</b>	Fed 1.5 cups kibble soaked in warm water 2x per day to Oly.
		<b>Last Exposure Date:</b>	01/04/2019
<b>Time Interval between Product Use and Adverse Event:</b>		2 Years	
<b>Product Use Stopped After the Onset of the Adverse Event:</b>		Yes	
<b>Adverse Event Abate After Product Stop:</b>		Yes	
<b>Product Use Started Again:</b>		No	
	<b>Perceived</b>	Definitely related	

		<b>Relatedness to Adverse Event:</b>		
		<b>Other Foods or Products Given to the Animal During This Time Period:</b>	Yes	
<b>Manufacturer /Distributor Information:</b>	<b>Name:</b>	WellPet		
	<b>Type(s):</b>	Manufacturer		
	<b>Address:</b>	200 Ames Pond Drive Tewksbury Massachusetts 01876 United States		
	<b>Contact:</b>	<b>Phone:</b>	1-800-225-0904	
		<b>Web Address:</b>	<a href="http://wellnesspetfood.com/contact-us">http://wellnesspetfood.com/contact-us</a>	
	<b>Possess One or More Labels from This Product:</b>	Yes		
<b>Purchase Location Information:</b>	<b>Name:</b>	Petco		
	<b>Address:</b>	<div style="border: 1px dashed black; padding: 5px; display: inline-block;"> <b>B6</b> </div> United States		
<b>Animal Information:</b>	<b>Name:</b>	<div style="border: 1px dashed black; padding: 2px;">B6</div>		
	<b>Type Of Species:</b>	Dog		
	<b>Type Of Breed:</b>	Retriever - Golden		
	<b>Gender:</b>	Male		
	<b>Reproductive Status:</b>	Neutered		
	<b>Weight:</b>	65 Pound		
	<b>Age:</b>	3 Years		
	<b>Assessment of Prior Health:</b>	Excellent		
	<b>Number of Animals Given the Product:</b>	2		
	<b>Number of Animals Reacted:</b>	2		
	<b>Owner Information:</b>			
	<b>Healthcare Professional Information:</b>	<b>Practice Name:</b>	<div style="border: 1px dashed black; padding: 2px;">B6</div>	
		<b>Contact:</b>	<b>Name:</b>	<div style="border: 1px dashed black; padding: 2px;">B6</div>
<b>Phone:</b>			<div style="border: 1px dashed black; padding: 2px;">B6</div>	
<b>Email:</b>			<div style="border: 1px dashed black; padding: 2px;">B6</div>	
<b>Address:</b>		<div style="border: 1px dashed black; padding: 5px; display: inline-block;"> <b>B6</b> </div> United States		
<b>Type of Veterinarian:</b>		Primary/regular veterinarian		
<b>Date First Seen:</b>		06/26/2018		
<b>Permission to Release Records to FDA:</b>	Yes			

<b>Sender Information:</b>	<b>Name:</b>	B6	
	<b>Address:</b>	B6 United States	
	<b>Contact:</b>	<b>Phone:</b>	
		<b>Email:</b>	B6
	<b>Reporter Wants to Remain Anonymous:</b>	No	
	<b>Permission To Contact Sender:</b>	Yes	
	<b>Preferred Method Of Contact:</b>	Email	
<b>Reported to Other Parties:</b>	Store/Place of Purchase Other		

<b>Additional Documents:</b>	<b>Attachment:</b>	B6 June20181stTaurineResults_19250.jpg.pdf
	<b>Description:</b>	First Taurine Results Lab Report June 2018
	<b>Type:</b>	Laboratory Report
	<b>Attachment:</b>	B6 Oct20182ndTaurineResults_23928.jpg.pdf
	<b>Description:</b>	2nd Lab Results for Taurine from UC Davis Vet Amimno Acid Lab
	<b>Type:</b>	Laboratory Report
	<b>Attachment:</b>	DrStern Lab Taurine RecommendationsAug2018.pdf
	<b>Description:</b>	Per email from Dr. Stern:"Those taurine levels are just ok. I would prefer to see it higher than 256. My recommendation would be either diet change & retest after 3 months or add in taurine rich ingredients & retest in 3 months."
	<b>Type:</b>	Letter

**B6**

Patient ID#: 7040-5

Owner: **B6** (Last name) **B6** (First name) **B6**

Spouse/Other: \_\_\_\_\_ (Last name) \_\_\_\_\_ (First name)

Address: **B6**  
(Street) (City/Town) (State) (Zip code)

Contact Info: Primary Ph # **B6** Other Ph# ( )  
Other Ph # ( ) Email: **B6**

Pet: **B6** Gender: M Spay/Neuter: 1/13/17 CP/SAM

Species: Canine Breed: boxer

DOB: **B6** Color: brindle

**B6**

Significant History/Comments: \_\_\_\_\_ CAUTION: \_\_\_\_\_

2/16 bronchopneumonia **B6**

6/16 AAFC Cardiology Cx (Yn summer) \* see report

1/17  Home Again 6/17 severe DCM - poss. 2° to Taurine Def.

985 112 008 500 045



B6

PAGE: 8

PATIENT NAME: B6  
B6 boyer M  
OWNER'S NAME: B6

MO.	DATE DAY	YR.	PROB. NO.	SOAP
8	27	16		JW
10	12	16		(T)
				<del>VST</del> <del>(P)</del>
11	22	16		CA J = 6/17
				<del>VST</del> <del>(P)</del>
11	24	16		(T)

MEDICAL RECORD

B6

B6

PAGE:

9

PATIENT NAME	B6	B6	boxer M	OWNER'S NAME	B6
--------------	----	----	---------	--------------	----

MO.	DATE DAY	YR.	PROB. NO.	SOAP
1	5	17		Tech wt 66.5
1	7	17		
1	11	17		
1	<del>13</del>	17		CP
1	12	17		<del>CP</del> NMB Tech wt
1	13	17		CP wt 66.9

MEDICAL RECORD

B6









[B6]

[B6]

Pet: [B6]  
DOB: [B6]  
Breed: Boxer  
Sex: M  
Color: brindle

[B6]

Visit Date: June 19, 2017

Dear Dr. [B6]

I was pleased to see that [B6] taurine level came back low, indicating there is a chance we can reverse the changes I saw on echo. I called and left a message for [B6] and am copying below an email I sent her about his diet:

Hi [B6]

You probably already received my message with the news that [B6] taurine level came back as low. This is good news because it means there is a chance the heart enlargement and weakened heart muscle appearance may be reversible. Even prior to receiving the bloodwork results I was consulting with a nutritionist who shared my concerns that he could have low taurine related to his diet. She expressed concern not just about the salmon based diet, but about the current diet as well based on the manufacturer/brand. So in addition to the taurine supplement, I recommend we switch [B6] to a diet we are sure is complete and balanced according to AAFCO feeding trials or by analysis of the actual diet (not a prediction based on recipe) to ensure it meets AAFCO nutrient profiles (AAFCO is the Association of American Feed Control Officials, a non-profit organization that sets standards for both animal feeds and pet food in the US). That may sounds daunting, but there are a lot of great pet food manufacturers out there who meet these stringent requirements.

There are a lot of diet misconceptions and marketing information that makes diet selection very confusing for pet owners. I highly recommend the website set up by the Tufts veterinary school nutrition team at [www.petfoodology.org](http://www.petfoodology.org). There are so many wonderful articles on there (I just spent a half hour surfing around because it is such wealth of great info!). I want to draw your

attention to the great article on the risks of raw diets (<http://vetnutrition.tufts.edu/2016/01/raw-diets-a-healthy-choice-or-a-raw-deal/>) and the one about the hype around grain-free diets (a pet peeve of mine) (<http://vetnutrition.tufts.edu/2016/06/grain-free-diets-big-on-marketing-small-on-truth/>). In short, since there is concern that [B6] may have some food sensitivities, I encourage you to work with one of the nutritionists at either Tufts or [B6] to find a diet that will work for him, or at least that we switch him to a diet by a company who has done the research and due diligence to ensure a complete and balanced diet.

Meanwhile, you should continue the taurine and L-carnitine supplements, and the pimobendan as prescribed. It would be great to see [B6] back sooner than the 3 month recheck however- to take a quick peek at his heart to see if (hopefully) things are changing for the better, and to recheck a taurine level. I think around 6 weeks from now makes sense, so let me know if you are interested in scheduling this, or if you have any questions.

Best,  
Dr. [B6]

Thank you for the referral and your continued support of [B6]. Please contact me if you need any more information regarding [B6].

Sincerely,

**B6**

B6

SOAP - Cardiology

Jun 19, 2017

B6

Patient: B6  
Species: Canine  
Breed: Boxer  
Color: brindle  
Doctor: B6

DOB: B6  
Age: B6 Old  
Sex: M  
Tag:  
Weight: 69.225 lbs. (31.4 kgs.)

Acc. No: 223669

Phone: Home B6

Weight: 31.4 kgs.

Prior Medical History

As of 6/30/16

-Mildly elevated left and right ventricular outflow tract velocities: suspect normal variant +/- very mild aortic stenosis.  
-Impression of mild left atrial enlargement: n/o age-related, other variant of undetermined cause

Presenting Complaint

Routine recheck

Current Medical History

General Complaints: O states that B6 has had 2 episodes since last visit. First episode was awhile ago (o not sure how long) in Vermont. He was running around with daughter and then acting totally out of it, staring at the ground, weak but did not lose consciousness for around 30 min. Brought to ER in B6 but he was acting normal by the time they got there and they did not find any abnormalities on PE. Thursday am this happened when B6 was running with B6 in the back yard, and side swiped a bush, then stood up and seemed drunk/out of it (moving front legs in uncoordinated/crossing over fashion), lasted 5 min. then went back to normal. O did notice that on Thursday Gums were very pink during episode (not pale). No BM/urination/hypersalivation during episodes. Yesterday was doing "a ton" of reverse sneezing according to O. Great energy level otherwise. Does now have a good appetite. O has seen a kinesthesiologist due to low appetite. B6 had been on strictly salmon based diet for past year, but they recommended changing/rotating protein sources (now beef and venison)- changed a few weeks ago and he is eating better.

Coughing?: No  
Sneezing?: Yes  
Vomiting: No  
Polyuria: No  
Polydipsia: No  
Diarrhea?: No

Diet?: Was on Go Fresh limited ingredient salmon diet for about a year. A few weeks ago switched to Go Fresh venison and Fresh Now beef, with a raw patty at lunchtime (o unsure brand- something with two people's names)

Appetite: Normal  
Any collapses or seizures?: Yes

**Current Medications**

Do you need any refills today?: No  
First Cardiac Evaluation?: Yes  
Referral Radiographs?: No

---

**Physical Exam**

**B6**

---

**Echocardiogram**

**B6**

**B6**

**ECHOCARDIOGRAPHIC DIAGNOSIS:**

**ECHOCARDIOGRAPHIC DIAGNOSIS:**

- Dilated cardiomyopathy (severe), r/o idiopathic, secondary to taurine-deficiency, myocarditis, other
- Borderline pulmonary hypertension
- Mildly elevated left ventricular outflow tract velocity (dx 6/2016)

**Comparison to previous studies:**

There has been significant increase in left atrial size (from 3.86 cm on 2D one year ago), in left ventricular size (from 4.38 cm one year ago) and decrease in %FS (from 30.8% one year ago). MR and TR are new (suspect secondary to annular stretch). The right atrium and ventricle subjectively appear somewhat enlarged as well.

---

**Electrocardiogram**

**B6**

**Blood Pressure**

**B6**

**Final Assessment**

**Final Diagnosis:**

- Dilated cardiomyopathy (severe), r/o idiopathic, secondary to taurine-deficiency, myocarditis, other
- Borderline pulmonary hypertension
- Mildly elevated left ventricular outflow tract velocity (dx 6/2016)
- Normal sinus arrhythmia with no ventricular ectopy

**Diagnostic Recommendations:**

**B6**

**Therapeutic Recommendations:**

**B6**

Follow-Up:  
Recheck 3 months with echocardiogram +/- thoracic radiographs (scheduled for September 11 at 9:30 am)  
Consulting Cardiologist: [B6] DVM: DACVIM (cardiology)



**B6**

Client Name: [B6]  
Animal Name: [B6]  
Client Phone: [B6]  
MRN: 1373024  
Species: Canine  
Breed: Boxer  
DOB: [B6] Sex: M

Doctor: [B6]  
Clinic: [B6]  
Phone: [B6]  
Fax: [B6]

Accession: [B6]  
Collected: 6/19/2017  
Received: 6/19/2017  
Approval Date: 6/22/2017 9:16 AM

**Taurine Level (plasma)**

**Final Report**

Ref. Range/Males

6/19/2017  
10:29 AM

SENDOUT

See attached link

Accession number: [B6]  
This report continues... (Final)

[B6]

Client name: [B6]  
MRN: 1373024

Accession: [B6]

Report Print Date  
Jun-22-2017 8:11:49 am

WISCONSIN VETERINARY DIAGNOSTIC LAB  
WVDL-MADISON  
UNIVERSITY OF WISCONSIN  
445 EASTERDAY LANE  
MADISON, WI 53706  
Phone: (800) 608-8387 Fax: (847) 574-8085

Owner: [B6]

Accession Number: [B6]  
Reference Number:  
Case Coordinator:

To: [B6]

Received: 06/20/2017  
Sampled:  
Finalized: 06/22/2017

Phone: [B6]  
Fax:

Final Report

TOXICOLOGY RESULTS

TAURINE

ANIMAL ID [B6]  
SPECIMEN ID  
SPECIMEN DESC PLASMA  
TAURINE 47 nmol/mL

COMMENTS1  
Canine taurine ranges: normal plasma 60-120 nmol/mL critical level <40 nmol/mL; whole blood normal 200-350 nmol/mL  
critical level <150 nmol/mL

[B6]

[B6]

[B6]

Pet: [B6]  
DOB: [B6]  
Breed: Boxer  
Sex: M  
Color: brindle

[B6]

Visit Date: June 19, 2017

Dear Dr. [B6]

Please see the accompanying cardiology report for our mutual patient, [B6]. I was so sad to see that [B6]'s heart has changed quite a bit in the last year, and he now appears to have severe dilated cardiomyopathy. He had been on a limited ingredient salmon diet, only recently switched to beef and venison based diet, so I hold some hope that this may be a taurine deficiency manifestation (would be much better prognosis for him- so fingers crossed!). We have a taurine level pending, but of course this may not reflect historic deficiency due to his recent diet change. Meanwhile, I have prescribed pimobendan and recommended taurine and L-carnitine supplementation. He has had two episodes of seeming woozy/disoriented and "out of it" after exertion, but they do not sound classic for arrhythmia-related (one episode lasted 30 minutes) and his ECG today was normal. We will continue to monitor for now (perhaps they were related to low output from systolic dysfunction and pimobendan will help). If they recur, we will check a 24 hour holter monitor (with [B6] bad luck I wouldn't put it past him to also have a neurologic condition!). Thank you for the referral and your continued support of [B6]. Please contact me if you need any more information regarding [B6].

Sincerely,

[B6]

**B6**

B6

SOAP - Cardiology

Jun 19, 2017

B6

Patient: B6
Species: Canine
Breed: Boxer
Color: brindle
Doctor: B6

DOB: B6
Age: B6
Sex: M
Tag:
Weight: 69.225 lbs. (31.4 kgs.)

Acc. No: 223669
Phone: Home - B6

Weight: 31.4 kgs.

Prior Medical History

As of 6/30/16
-Mildly elevated left and right ventricular outflow tract velocities: suspect normal variant +/- very mild aortic stenosis.
-Impression of mild left atrial enlargement: r/o age-related, other variant of undetermined cause

Presenting Complaint

Routine recheck

Current Medical History

General Complaints: O states that B6 has had 2 episodes since last visit. First episode was awhile ago (o not sure how long) in B6. He was running around with daughter and then acting totally out of it, staring at the ground, weak but did not lose consciousness for around 30 min. Brought to ER in B6, but he was acting normal by the time they got there and they did not find any abnormalities on PE. Thursday am this happened when B6 was running with B6 in the back yard, and side swiped a bush, then stood up and seemed drunk/out of it (moving front legs in uncoordinated/crossing over fashion), lasted 5 min, then went back to normal. O did notice that on Thursday Gums were very pink during episode (not pale). No BM/urination/hypersalivation during episodes. Yesterday was doing "a ton" of reverse sneezing according to O. Great energy level otherwise. Does now have a good appetite, O has seen a kinesthesiologist due to low appetite. B6 had been on strictly salmon based diet for past year, but they recommended changing/rotating protein sources (now beef and venison)- changed a few weeks ago and he is eating better.

Coughing?: No
Sneezing?: Yes
Vomiting: No
Polyuria: No
Polydipsia: No
Diarrhea?: No
Diet?: Was on Go Fresh limited ingredient salmon diet for about a year. A few weeks ago switched to Go Fresh venison and Fresh Now beef, with a raw patty at lunchtime (o unsure brand- something with two people's names)

Appetite: Normal
Any collapses or seizures?: Yes

**Current Medications**

Do you need any refills today?: No  
First Cardiac Evaluation?: Yes  
Referral Radiographs?: No

---

**Physical Exam**

**B6**

---

**Echocardiogram**

**B6**

**B6**

**ECHOCARDIOGRAPHIC DIAGNOSIS:**

**ECHOCARDIOGRAPHIC DIAGNOSIS:**

- Dilated cardiomyopathy (severe), r/o idiopathic, secondary to taurine-deficiency, myocarditis, other
- Borderline pulmonary hypertension
- Mildly elevated left ventricular outflow tract velocity (dx 6/2016)

**Comparison to previous studies:**

There has been significant increase in left atrial size (from 3.86 cm on 2D one year ago), in left ventricular size (from 4.38 cm one year ago) and decrease in %FS (from 30.8% one year ago). MR and TR are new (suspect secondary to annular stretch). The right atrium and ventricle subjectively appear somewhat enlarged as well.

---

**Electrocardiogram**

**B6**

---

**Blood Pressure**

**B6**

---

**Final Assessment**

**Final Diagnosis:**

- Dilated cardiomyopathy (severe), r/o idiopathic, secondary to taurine-deficiency, myocarditis, other
- Borderline pulmonary hypertension
- Mildly elevated left ventricular outflow tract velocity (dx 6/2016)
- Normal sinus arrhythmia with no ventricular ectopy

**Diagnostic Recommendations:**

**B6**

**Therapeutic Recommendations:**

**B6**

Follow-Up:

Recheck 3 months with echocardiogram +/- thoracic radiographs (scheduled for September 11 at 9:30 am)

Consulting Cardiologist: **B6** DVM; DACVIM (cardiology)



06/07/17 01:49:49 888-433-9

-> 0

B6

Page 001

B6

B6

Account: 80406

Owner: B6  
Patient: B6  
Species: CANINE  
Breed: BOXER  
Age: 1Y7M  
Gender: MN

Requisition #: 105080834  
Accession #: B6  
Order rec'd: 06/06/2017  
Ordered by: B6 DVM,  
Reported: 06/07/2017

OVA AND PARASITES 3 OR MORE
OVA & PARASITES
NO OVA OR PARASITES SEEN CYNICLOMYCES GUTTULATUS ALSO KNOWN AS SACCHAROMYCOPSIS GUTTULATA (NON-PATHOGENIC YEAST) PRESENT
In cases of acute or chronic diarrhea in addition to a fecal floatation and antigen testing for ova and parasites consider testing for viral, bacterial and protozoal infectious agents using RealPCR (canine diarrhea panel: test code 2625; feline diarrhea panel: test code 2627).

B6

06/07/2017

FINAL REPORT

PAGE 1 OF 1

© 14/01/2017 8:27 PM

[B6]

→ AD80406

D 1

**B6**

**B6**

Account: 80406

Owner:  
Patient:  
Species:  
Breed:  
Age:  
Gender:

[B6]  
CANINE  
BOXER  
[B6]  
M

Requisition #: 103179571  
Accession #: [B6]  
Order recvd: 01/12/2017  
Ordered by: [B6]  
Reported: 01/14/2017

URINE CULT & SUSCEPTIBILITY

Test	Result
SOURCE:	<b>B6</b>
STATUS:	
COMPLETED CULTURE RESULTS	

URINALYSIS & C+S (MIC) | URINALYSIS

Test	Result	Reference Range	Flag	Bar Graph
------	--------	-----------------	------	-----------

[B6]  
01/14/2017

FINAL REPORT

PAGE 1 OF 1

**B6**

DISCHARGE SUMMARY  
Friday [B6]

**B6**

CANINE, BOXER

**B6**

\*\* Your pet had a procedure that may make them groggy for 24-48 hours. If you have any questions or concerns please feel free to call the office.

**Anesthesia Monitoring**

Date: <b>B6</b>	Client Name: <b>B6</b>	Pet Name: <b>B6</b>
Procedure: <u>Neuter</u>	Breed: <u>Boxer</u>	Age: <u>10/15</u> Sex: <u>M</u> Wt: <u>66.9#</u>

Dr: <u>CD</u>	Tech: <b>B6</b>	IV Fluid Type: <u>LRS</u>	Fluid Rate: <u>300 ml/hr</u>	Fluid Total: <u>182cc</u>
---------------	-----------------	---------------------------	------------------------------	---------------------------

Pre op meds: Torb - 0.5cc Ace - 0.1cc IM @ 8<sup>15</sup> AM

Induction: Propoflo Reg 28 3cc IV

Anest Start: 9<sup>05</sup> SX Start: 9<sup>30</sup> SX Finish: 9<sup>45</sup> Anesth Finish: 9<sup>45</sup> Extubate @ 10<sup>00</sup>

Pre Op T: ET Tube Size: 9.0 BP Cuff Size: M IV Catheter site: @ cephalic

Time	<b>B6</b>																		
Iso %																			
O2																			
Heart Rate																			
Resp Rate																			
BP																			
MAP																			
CRT																			
MM Color																			
Temp																			
Breath																			

Rimadyl 2 ml SQ given @ 9<sup>10</sup> AM  
 Buprenex 0.8 ml SQ/IV/IM given @ 9<sup>25</sup> AM  
 Additional Injections: \_\_\_\_\_

Nail Trim  <sup>short all round</sup> (slight burr) Microchip  Yes / No / already has

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

[B6]

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[B6]

Page 001

**B6**

**B6**

Account: 80406

Owner: [B6]  
 Patient: [B6]  
 Species: CANINE  
 Breed: BOXER  
 Age: [B6]  
 Gender: M

Requisition #: 103179571  
 Accession #: [B6]  
 Order rec'd: 01/12/2017  
 Ordered by: [B6] DVM,  
 Reported: 01/12/2017

NOTE FROM [B6]

NOTE

Your microbiology sample has been received.  
 Results to follow upon completion.

UA COMPLETION

Test	Result
COLLECTION METHOD	<b>B6</b>
COLOR	
CLARITY	
SPECIFIC GRAVITY	
GLUCOSE	
BILIRUBIN	
KETONES	
BLOOD	
PH	
PROTEIN	
Protein test is performed a test.	
WBC	
RBC	
BACTERIA	
EPI CELL	
MUCUS	
CASTS	
CRYSTALS	
OTHER	
SPERM PRESENT	
UROBILINOGEN	

[B6]

FINAL REPORT

PAGE 1 OF 1

B6 → B6 I Page 001

B6

B6

Owner: B6  
 Patient: CANINE  
 Species: BOXER  
 Breed: 1Y2M  
 Age: MI  
 Gender: MI

Requisition #: 103110800  
 Accession #: B6  
 Order rec'd: 01/06/2017  
 Ordered by: B6 DVM  
 Reported: 01/06/2017

Account: 80406

YOUNG ADULT PROFILE	CHEM 11 W/ SDMA
Test	Result
ALP	B6
ALT	
ALBUMIN	
TOTAL PROTEIN	
GLOBULIN	
TOTAL BILIRUBIN	
BUN	
CREATININE	
GLUCOSE	
ALB/GLOB RATIO	
BUN/CREATININE RATIO	
HEMOLYSIS INDEX	
Index of N, 1+, 2+ exhibits	
LIPEMIA INDEX	
Index of N, 1+, 2+ exhibits	
SDMA	
<p>BOTH SDMA AND CREATININE ARE WITHIN THE REFERENCE INTERVAL which indicates kidney function is likely good. If SDMA and/or creatinine is at the upper end of the reference interval, early kidney disease cannot be ruled out. Evaluate a complete urinalysis to confirm there is no other evidence of kidney disease.</p>	

YOUNG ADULT PROFILE	CBC COMPREHENSIVE
Test	Result
WBC	B6
RBC	
HGB	
HCT	
MCV	
MCH	

B6

B6

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B6

Page 002

MCHC	<b>B6</b>
% RETICULOCYTE	
RETICULOCYTE	
RETICULOCYTE COMMENT	

**B6**

% NEUTROPHIL	<b>B6</b>
% LYMPHOCYTE	
% MONOCYTE	
% EOSINOPHIL	
% BASOPHIL	
PLATELET	
REMARKS	

SLIDE REVIEWED MICROSCOPICALLY.  
NO PARASITES SEEN

NEUTROPHIL	<b>B6</b>
LYMPHOCYTE	
MONOCYTE	
EOSINOPHIL	
BASOPHIL	

HEARTWORM AG ELISA **B6**

HEARTWORM ANTIGEN **B6** **B6**

The American Heartworm Society recommends that a confirmatory test be run on all positive antigen test results prior to therapy, especially when a positive test result is unexpected. For a positive result on a Heartworm Antigen by **B6** we recommend submission of a new sample for a second Heartworm Antigen by (test code 723) as a confirmatory test.

**B6**

FINAL REPORT

PAGE 2 OF 2

**B6**

**B6**

Pet: [B6]  
DOB: [B6]  
Breed: Boxer  
Sex: M  
Color: brindle

**B6**

Visit Date: June 30, 2016

Dear Dr. [B6]

Please see the accompanying cardiology report for our mutual patient, [B6]. Thank you for the referral and your continued support of [B6]. Please contact me if you need any more information regarding [B6].

Sincerely,

**B6**



## SOAP - Cardiology

**Jun 30, 2016**

**B6**

Patient: [B6]

DOB: [B6]

Species: Canine

Age: [B6]

United States Breed: Boxer

Sex: M

Color: brindle

Tag:

Acc. No: 223669

Doctor: [B6]

Weight: 55.2 lbs. (25.038 kgs.)

Phone: Home - [B6]

Weight: 55.2 lbs.

### Prior Medical History

**B6**

Presenting Complaint

New patient B6 needs neuter clearance

Current Medical History

General Complaints: Doing well. Good energy, good appetite.

Coughing?: No

Sneezing?: No

Vomiting: No

Polyuria: No

Polydipsia: No

Diarrhea?: No

Diet?: Now Fresh kibble

Appetite: Normal

Any collapses or seizures?: No

Physical Exam

**B6**

Echocardiogram

**B6**

**B6**

**Doppler Findings**

**B6**

**ECHOCARDIOGRAPHIC DIAGNOSIS:**

**ECHOCARDIOGRAPHIC DIAGNOSIS:**

- Mildly elevated left and right ventricular outflow tract velocities: suspect normal variant +/- very mild aortic stenosis.
- Impression of mild left atrial enlargement: r/o age-related, other variant of undetermined cause

Final Assessment

Final Diagnosis:

- Mildly elevated left and right ventricular outflow tract velocities: suspect normal variant +/- very mild aortic stenosis.
- Impression of mild left atrial enlargement: r/o age-related, other variant of undetermined cause

Diagnostic Recommendations:

No further cardiac testing currently recommended.

Therapeutic Recommendations:

No cardiac medications currently recommended. B6 appears to be a good anesthetic candidate for future neutering. Out of an abundance of caution (regarding possible mild aortic stenosis), recommend perioperative antibiotics, and avoid agents which would promote tachycardia (ie. use anti-cholinergics only if needed for intraop bradycardia).

Follow-Up:

Recheck echocardiogram 1 year.

Consulting Cardiologist: B6 DVM; DACVIM (cardiology)

**B6**

**B6**

TIME ADMITTED: \_\_\_\_\_

OWNER \_\_\_\_\_

PATIENT \_\_\_\_\_

**B6**

ADMIT DATE 6/10/16

	Date										Total	
<b>1. Office</b>	<input checked="" type="checkbox"/>	Office Visit	<i>Wright</i>									
	<input type="checkbox"/>	After Hours										
	<input type="checkbox"/>	Forms Completion										
<b>2. Intensive Care</b>	<input type="checkbox"/>											
<b>3. Vaccinations</b>	<input type="checkbox"/>	D, DH, DHLP, R, P, Bord										
	<input type="checkbox"/>	FD, FVRC, P, R, FELV										
<b>4. General Procedures</b>	<input type="checkbox"/>	Anal Sacs										
	<input type="checkbox"/>	Nail Trim										
	<input checked="" type="checkbox"/>	Injections	<i>Oramith</i>									
	<input type="checkbox"/>	Sedation										
	<input type="checkbox"/>	Fluid Therapy										
	<input type="checkbox"/>	IV Cath.										
	<input type="checkbox"/>	EKG										
	<input type="checkbox"/>	Transfusion										
	<input type="checkbox"/>	Catheterization (Urinary)										
	<input type="checkbox"/>	Bandaging/Splints										
	<input type="checkbox"/>	Ear Treatment										
	<input type="checkbox"/>	Special Procedure										
<b>5. Pharmacy</b>	<input type="checkbox"/>	Medication										
	<input type="checkbox"/>											
	<input type="checkbox"/>											
	<input type="checkbox"/>	Mass. Sales Tax										
<b>6. Anesthesia</b>	<input type="checkbox"/>	Local										
	<input type="checkbox"/>	General										
<b>7. Radiology</b>	<input type="checkbox"/>	Radiograph										
	<input type="checkbox"/>	Procedure, Ultrasound										
<b>8. Dentistry</b>	<input type="checkbox"/>	Hand Scaling										
	<input type="checkbox"/>	Ultrasonic Scaling										
	<input type="checkbox"/>	Extractions										
<b>9. Surgery</b>	<input type="checkbox"/>											
<b>10. Hospitalization</b>	<input checked="" type="checkbox"/>	Ward Fee	<i>Friday 15</i>									
	<input type="checkbox"/>	Prof. Daily Care										
	<input type="checkbox"/>	Other										
<b>11. Laboratory</b>	<input type="checkbox"/>	Azostix										
	<input type="checkbox"/>	Fecal Flot./Dig.										
	<input type="checkbox"/>	Blood, HW, FELV test										
	<input type="checkbox"/>	Profile										
	<input type="checkbox"/>	CBC Hematology										
	<input type="checkbox"/>	HT, Wbc, Bun, Glucose, etc.										
	<input type="checkbox"/>	ACTH stim.										
	<input type="checkbox"/>	Urine screen										
	<input type="checkbox"/>	Urinalysis										
	<input type="checkbox"/>	Skin scraping										
	<input type="checkbox"/>	Culture - Sensitivity										
	<input type="checkbox"/>	Biopsy - Cytology										
	<input type="checkbox"/>	Collection Fee										
	<input type="checkbox"/>	Other										
<b>12. Miscellaneous</b>	<input type="checkbox"/>	Euthanasia/cremation										
	<input type="checkbox"/>	Bath										
	<input type="checkbox"/>											
	<input type="checkbox"/>											
<b>Total</b>												

**B6**

**B6**

Pet: **B6**  
DOB:  
Breed: Boxer  
Sex: M  
Color: brindle

**B6**

Visit Date: March 29, 2016

Dear Colleague,

[B6] presented to our [B6] emergency service this morning after he possibly ingested 250 mg of mexiletine around 6:45 am. On presentation [B6] was bright and alert, well hydrated and otherwise stable. Physical exam was within normal limits. [B6] was induced (0.6 mg apomorphine IV) and [B6] vomited his breakfast but no obvious evidence of mexiletine. Animal Poison Control was contacted, and hospitalization through the day was recommended to monitor for bradycardia and hypotension. [B6] was fairly certain that [B6] did not ingest the capsule, and elected to monitor [B6] closely at home through the day. If [B6] develops any abnormal signs, she will have him reevaluated immediately. [B6] received maropitant (18 mg SQ) prior to discharge.

Thank you for the referral and your continued support of [B6]. Please contact me if you need any more information regarding [B6].

Sincerely,

**B6**

**B6**

**SOAP - Text**

**Mar 29, 2016**

**B6**

Patient: [B6]  
Species: Canine  
Breed: Boxer

DOB: [B6]  
Age: [B6] Old  
Sex: M

Color: brindle

Tag:

Acc. No: 223669

Doctor: **B6**

Weight: 28.881 lbs. (13.1 kgs.)

Phone: Home - [B6]

Panting: No

Is this patient presenting for trauma?: No

Patient Result - Text: History: 5-6 months old; o has had since puppy. UTD on vaccines. On HW preventative, not yet on flea/tick preventative. No travel history, from [B6]. Here previously for pneumonia; also hx of murmur which appears to have resolved at last vet visit. Diet: Fresh now large breed puppy food. Current/chronic meds/supplements: none

About an hour ago o gave other dog two 250 mg mexiletine tablets with treats; o daughter said she saw [B6] eating something that may have been the tablet but o not sure (80% he didn't).

T: 102.0 F P: 128 R: 24  
Weight: 18.6 kg

S: BAR, adeq hydration. Normothermic. No overt nausea or discomfort.

O:

EENT: Eyes clear, ears clean AU. No ocular/nasal d/c. Minimal tartar; oral exam wnl.

PLN: NAF

B6

A:

B6

P:

B6

Contact B6 (see below)

B6 B6 case # B6

B6

B6

B6 DVM

---

## Assessment

### Problem List

#### Patient Problem List:

No problems found for period.



**Diagnosis**

**Patient Diagnosis:**

No diagnosis found for period.

**B6**

Client Name: B6  
Animal Name: B6  
Client Phone: B6  
MRN: 1373024  
Species: Canine  
Breed: Boxer  
DOB: B6 Sex: M

Doctor: B6  
Clinic: B6  
Phone: B6  
Fax: B6

Accession: B6  
Collected: B6  
Received: B6  
Approval Date: B6 12:27 PM

**W Nova Basic Panel**

	Ref. Range/Males
N NA	142.0-150.0 mmol/L
N K	3.62-4.60 mmol/L
N Cl	112.7-118.3 mmol/L
N CA	1.15-1.34 mmol/L
N GLU	75-116 mg/dl
N LACT	0.70-2.80 mmol/L
N BUN	8-30 mg/dl
N TCO2	mmol/L
N CREAT	0.6-1.6 mg/dl
N BUN/CREAT	calc
N OSMO	mOsm/kg

2/12/2016  
11:09 AM

**B6**

Accession number: B6  
END OF REPORT (Final)

**B6**

**B6**

Pet: **B6**  
DOB:  
Breed: Boxer  
Sex: M  
Color: brindle

Admission Date: <CheckedIn

Discharge Date: **B6**

Attending Doctor: **B6**, DVM

Presenting Problem(s): Cough, difficulty breathing, diarrhea

Diagnosis/Rule-outs: Bronchopneumonia - suspected "kennel cough"; diarrhea of unknown etiology (dietary indiscretion vs. parasitism vs. other)

**Discharge Instructions:**

[B6] was presented to the [B6] service the morning of [B6] for continued diarrhea and coughing at home. He was admitted to our hospital for supportive care and monitoring. [B6] has done very well with us and is now ready for discharge!

**Instructions:**

**B6**

**Medication:**

**B6**

**B6**

Sincerely,

**B6**

[B6]

[B6]

Pet: [B6]  
DOB: [B6]  
Breed: Boxer  
Sex: M  
Color: brindle

[B6]

Visit Date: [B6]

I just wanted to let you know that [B6] was discharged today! He looks much brighter and is no longer coughing or having diarrhea. His medications are listed below. And, today's AM SOAP is sent along as well.

Medications:

[B6]

Thank you for the referral and your continued support of A [B6]. Please contact me if you need any more information regarding [B6].

[B6]

**B6**

**SOAP - Text**

**B6**

**B6**

Patient: B6  
Species: Canine  
Breed: Boxer  
Color: brindle  
DOB: B6  
Age: B6 old  
Sex: M  
Tag:  
Doctor: B6  
Weight: 28.881 lbs. (13.1 kgs.)

Acc. No: 223669

Phone: Home B6

Weight: 13.1 kgs.  
Temperature: 101.6  
Pulse: 140  
Respiration: 28  
Panting: No  
Is this patient presenting for trauma?: No

Patient Result - Text: Day 2 hospitalization, admitted at noon on B6  
B6 was admitted for concerns secondary to increased respiratory effort and cough. CXR consistent with left lung consolidation secondary to presumed bacterial pneumonia. Overnight, he has done very well and is no longer coughing. He has not had diarrhea (or a bowel movement) since admission. He is receiving medications orally without challenge.

S: BAR, very nice pup, MM pink and moist, CRT < 2 seconds, BCS 5/9

O:  
EENT: Eyes clear OU, moderate amount of bilateral mucoid discharge, no aural discharge, normal facial symmetry, underbite which is pronounced, dentition consistent

with age  
PLN: No peripheral lymphadenopathy  
CV: I/VI systolic murmur, NSR, f-PSS  
Resp: Normal bronchovesicular sounds all fields, possibly slightly decreased sounds on the left caudal field, no cough noted  
ABD: Soft, nonpainful, no organomegaly  
UG: Externally normal male, testicles descended bilaterally  
Integ: Normal hair coat

- A:
1. Bronchopneumonia, tracheobronchitis
  2. Diarrhea - r/o parasitic vs. dietary indiscretion vs. IBS vs. other
  3. I/VI systolic murmur - innocent vs. pathologic

Current therapy:

B6

- Plan:
1. Discharge today with oral medications

B6 DVM

---

## Assessment

### Problem List

#### Patient Problem List:

Bronchopneumonia - B6  
Diarrhea - B6

**Diagnosis**

**Patient Diagnosis:**

No diagnosis found for period.



**B6**

**B6**

Pet: [B6]  
DOB: [B6]  
Breed: Boxer  
Sex: M  
Color: brindle

**B6**

Visit Date: [B6]

Dear Colleagues,

[B6] is currently being hospitalized for bronchopneumonia suspected to be secondary to bordetella infection. He was hospitalized in oxygen (mildly dyspnea noted when awake) and started on a high rate of IV fluids, oral doxycycline, IV metronidazole, and IV cerenia. We will keep you update on his progress. I've attached my SOAP for your records.

[B6] DVM

Weight: 12.9 lbs.

**Presenting Complaint**

Presenting Complaint: Seen early this morning, concern for continued diarrhea, lethargy and anorexia in the car ride home.

When the owner tried to bring him home, he had absolutely no interest in food, then had a little bit of slightly formed stool in the house, ran outside and had profuse amounts of watery/liquid diarrhea. At the end of the episode was straining as well.

Historically has been a picky eater since they adopted him. A few days ago he began to get progressively more picky-would only finish a bit of his food and leave the rest. However yesterday he had a full appetite and ate everything offered to him.

He started developing a hacking cough around midnight last night - it progressed and became more frequent and the owner got up with him at 3AM today. He had progressed to coughing every few minutes and producing white foamy spittle. No vomiting at all that the owner had noted.

He is a dog that will eat things - he ate a carrot off of a snowman the other day as well as chewed on the twigs that made the arms, He had one vomitus after this (a few days ago) which contained pieces of the carrot and stick but has eaten well since then and had no further upper GI symptoms

Physical Exam/Objective

**B6**

Assessment

Problem List

Patient Problem List:

Bronchopneumonia - Feb 12, 2016  
Diarrhea - Feb 12, 2016

Diagnosis

Patient Diagnosis:

Bronchopneumonia

Diarrhea

Plan

**B6**

**B6**

Spoke with owner - due to [B6] current state, his lethargy and continued symptoms I recommended hospitalization with supportive care (IV fluids, metronidazole, doxycycline). Discussed possible pneumonia, need for isolation with kennel cough-like symptoms, and oxygen due to mild dyspnea. It is possible that he will not need to be in oxygen shortly, however it is difficult for me to tell at this time. Warned owner that he could get worse before he gets better. A large component of when he can go home will be when he starts to show signs that he eating/drinking/better hydrated. Owner OK with plan.

Plan:

**B6**

**B6**

[B6] DVM

[B6]

[B6]

Pet: [B6]  
DOB: [B6]  
Breed: Boxer  
Sex: M  
Color: brindle

[B6]

Visit Date: [B6]

Dear doctors,

[B6]

[B6] DVM

[B6]

**B6**

Client Name: B6  
Animal Name: B6  
Client Phone: B6  
MRN: 1373024  
Species: Canine  
Breed: Boxer  
DOB: B6 Sex: M

Doctor: B6  
Clinic: B6  
Phone: B6  
Fax: B6

Accession: B6  
Collected: B6  
Received: B6  
Approval Date: B6 10:49 AM

**CBC (Complete Blood Count)**

	Ref. Range/Males	
WBC	6.0-14.3 K/uL	<b>B6</b>
RBC	5.8-8.9 M/uL	
HGB	14.3-21.1 g/dL	
HCT	41.7-58.1 %	
MCV	63.2-76.8 fL	
MCH	22.9-26.6 pg	
MCHC	32.4-38.4 g/dL	
CH	22.2-26.0 pg	
CHCM	31.6-38.9 g/dl	
RDW	10.8-14.9 %	
Platelet Count	161-513 K/uL	
<b>B6</b>	10:48 AM Large	

PCT	0.129-0.403 %	<b>B6</b>
MPV	7.5-15.7 fL	
PDW	51.0-73.0 %	
NEU #	3.3-10.1 K/uL	
LYM #	1.0-3.9 K/uL	
MON #	0.1-0.9 K/uL	
EOS #	0.0-1.2 K/uL	
BASO #	0.0-0.1 K/uL	
RBC MORPHOLOGY:		
ANISOCYTOSIS		
<b>Reticulocytes</b>		
RETIC Percent	%	
RETIC ABSOLUTE	x 10 <sup>9</sup> /L	
Count		
RETIC CORRECTED C	%	

**B6**

Accession number: B6  
END OF REPORT (Final)

**From:** Rotstein, David </O=EXCHANGELABS/OU=EXCHANGE ADMINISTRATIVE GROUP (FYDIBOHF23SPDLT)/CN=RECIPIENTS/CN=0A3B17EBFCF14A6CB8E94F322906BADD-DROTSTEI>  
**To:** Carey, Lauren; Ceric, Olgica; Glover, Mark; Jones, Jennifer L; Nemser, Sarah; Palmer, Lee Anne; Peloquin, Sarah; Queen, Jackie L; Rotstein, David  
**Sent:** 12/6/2018 3:20:09 AM  
**Subject:** DCM cases 12/5/2018 2200  
**Attachments:** Acana dog food. Varying diet/formulas over the past 3.5 years. [B6] EON-372923; Earthborn Meadow Feast dry: Lisa Freeman - EON-372804; Earthborn Meadow Feast dry: Lisa Freeman - EON-372828; Earthborn Meadow Feast dry: Lisa Freeman - EON-372831; Earthborn Meadow Feast dry: Lisa Freeman - EON-372834; Earthborn Meadow Feast dry: Lisa Freeman - EON-372842; Kirkland Signature Nature's Domain Salmon Meal & Sweet Potato Formula for Dogs; [B6] EON-372864; Pure Vita Holistic Pet Foods Turkey and Sweet Potato Entree; [B6] EON-372846; The Honest Kitchen Grain Free Chicken Recipe; [B6] [B6] EON-372839; Wellness Core Natural Grain Free Dry Dog Food Ocean Whitefish; [B6] [B6] EON-372851

David Rotstein, DVM, MPVM, Dipl. ACVP  
CVM Vet-LIRN Liaison  
CVM OSC/DC/CERT  
7519 Standish Place  
[B6] (BB)



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**Report Details - EON-372804**

**ICSR:** 2059619  
**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 17:08:36 EST

**Reported Problem:**

<b>Problem Description:</b>	Littermate diagnosed with reduced cardiac contractility Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months
<b>Date Problem Started:</b>	11/21/2018
<b>Concurrent Medical Problem:</b>	Yes
<b>Pre Existing Conditions:</b>	History of resection of jejunum and ileum due to intussusception as puppy
<b>Outcome to Date:</b>	Stable

**Product Information:**

<b>Product Name:</b>	Earthborn Meadow Feast dry
<b>Product Type:</b>	Pet Food
<b>Lot Number:</b>	
<b>Package Type:</b>	BAG
<b>Product Use Information:</b>	<b>Description:</b> See diet history
	<b>First Exposure Date:</b> 02/01/2018
<b>Manufacturer /Distributor Information:</b>	
<b>Purchase Location Information:</b>	

**Animal Information:**

<b>Name:</b>	<b>B6</b>						
<b>Type Of Species:</b>	Dog						
<b>Type Of Breed:</b>	Boxer (German Boxer)						
<b>Gender:</b>	Female						
<b>Reproductive Status:</b>	Intact						
<b>Pregnancy Status:</b>	Not pregnant						
<b>Lactation Status:</b>	Not lactating						
<b>Weight:</b>	27.4 Kilogram						
<b>Age:</b>	3 Years						
<b>Assessment of Prior Health:</b>	Excellent						
<b>Number of Animals Given the Product:</b>	5						
<b>Number of Animals Reacted:</b>	4						
<b>Owner Information:</b>	<b>Owner Information provided:</b> Yes						
	<b>Contact:</b> <table border="1"><tr><td><b>Name:</b></td><td><b>B6</b></td></tr><tr><td><b>Phone:</b></td><td></td></tr><tr><td><b>Email:</b></td><td></td></tr></table>	<b>Name:</b>	<b>B6</b>	<b>Phone:</b>		<b>Email:</b>	
	<b>Name:</b>	<b>B6</b>					
	<b>Phone:</b>						
<b>Email:</b>							
<b>Address:</b> <table border="1"><tr><td><b>B6</b></td></tr><tr><td>United States</td></tr></table>	<b>B6</b>	United States					
<b>B6</b>							
United States							

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; B4  
**Sent:** 12/4/2018 11:04:49 PM  
**Subject:** Earthborn Meadow Feast dry: Lisa Freeman - EON-372828  
**Attachments:** 2059621-report.pdf; 2059621-attachments.zip

A PFR Report has been received and PFR Event [EON-372828] has been created in the EON System.

A "PDF" report by name "2059621-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 "2059621-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-372828  
**ICSR #:** 2059621  
**EON Title:** PFR Event created for Earthborn Meadow Feast dry; 2059621

<b>AE Date</b>	11/20/2018	<b>Number Fed/Exposed</b>	5
<b>Best By Date</b>		<b>Number Reacted</b>	4
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Boxer (German Boxer)		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2059621

**Product Group:** Pet Food

**Product Name:** Earthborn Meadow Feast dry

**Description:** Eating BEG diet (Earthborn) Echo had subjectively reduced contractility; elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months

**Submission Type:** Initial

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

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

**Number of Animals Treated With Product:** 5



**Number of Animals Reacted With Product: 4**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn Meadow Feast dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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

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

**Report Details - EON-372828**

**ICSR:** 2059621  
**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 17:59:30 EST

**Reported Problem:**  
**Problem Description:** Eating BEG diet (Earthborn) Echo had subjectively reduced contractility, 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:** No  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Earthborn Meadow Feast dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:** **Description:** See diet history in records for more details  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** B6  
**Type Of Species:** Dog  
**Type Of Breed:** Boxer (German Boxer)  
**Gender:** Female  
**Reproductive Status:** Intact  
**Pregnancy Status:** Not pregnant  
**Lactation Status:** Not lactating  
**Weight:** 30.3 Kilogram  
**Age:** 3 Years  
**Assessment of Prior Health:** Excellent  
**Number of Animals Given the Product:** 5  
**Number of Animals Reacted:** 4  
**Owner Information:** **Owner Information provided:** Yes  
**Contact:** **Name:** B6  
**Phone:** B6  
**Email:** B6  
**Address:** B6  
United States  
**Healthcare Professional Information:** **Practice Name:** Tufts Cummings School of Veterinary Medicine  
**Contact:** **Name:** Lisa Freeman

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

**B6**

Client:

Address:

**B6**

**All Medical Records**

Patient: **B6**

Breed: Boxer

DOB: **B6**

Species: Canine

Sex: Female

**B6**

**Referring Information**

**B6**

**Initial Complaint:**

Scanned Record

**Initial Complaint:**

New, boxer 2-3 murmur. ok per Dr

**B6**

**Initial Complaint:**

**B6**

Client: **B6**  
Patient:

---

**Initial Complaint:**

**B6** to oversee

---

SOAP Text Jun 7 2017 4:07PM **B6**

---

6/7/2017 4:30:12 PM

**B6**

**Initial Complaint:**

**B6**

---

SOAP Text Nov 29 2017 11:20AM **B6**

---

**Initial Complaint:**

Recheck **B6**

---

**Initial Complaint:**

Recheck **B6**

---

SOAP Text Nov 15 2018 2:01PM **B6**

---

**Disposition/Recommendations**

---

Client:  
Patient:

**B6**

---

---

Client:  
Patient:

**B6**

Cummings  
Veterinary Medical Center  
AT TEXAS UNIVERSITY

**B6**

Client: **B6**  
Veterinarian:  
Patient ID: 334373  
Visit ID:

Patient:	<b>B6</b>
Species:	Canine
Breed:	Boxer
Sex:	Female
Age:	<b>B6</b> Years Old

**Lab Results Report**

11/15/2018 3:35:43 PM

Accession ID: **B6**

Test	Results	Reference Range	Units
Troponin I Research - FHSA	<b>B6</b>	0 - 0.08	mg/dl



4/111

**B6**

Printed Tuesday, December 04, 2018

Client:  
Patient:

**B6**

Referral and records

**B6**

Animal Medical Center

**B6**



Client  
Patient

**B6**

Referral and records-Dr.

**B6**

**B6**

Client:  
Patient:

**B6**

Referral and records

**B6**

**B6**

Client:  
Patient:

**B6**

Referral and records-D

**B6**

**B6**

Client:  
Patient:

**B6**

Referral and record:

**B6**

**B6**



Client:  
Patient:

**B6**

**Signed consent**

**B6**

Client:  
Patient:

**B6**

Signed consent

**B6**

Client:  
Patient:

**B6**

rDVM Dr.

**B6**

**B6**



Client:  
Patient:

**B6**

rDVM Dr.

**B6**

**B6**

Client:  
Patient:

**B6**

rDVM Dr:

**B6**

**B6**

Client:  
Patient:

**B6**

rDVM:

**B6**

**B4, B6**

Client:  
Patient:

**B6**

rDVM

**B6**

**B6**

Client:  
Patient:

**B6**

rDVM

**B6**

**B6**

**B6**

Client:  
Patient:

**B6**

Holter Monitor report 5/31/17

**CANINE HOLTER MONITORING REPORT**

**HOLTER MONITOR REPORT**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 5/31/17**

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**B6**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 5/31/17**

**B6**



Client:  
Patient:

**B6**

**Holter Monitor report 5/31/17**

**B6**

Client:  
Patient:

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Holter Monitor report 5/31/17

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Client:  
Patient:

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**Holter Monitor report 5/31/17**

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Client:  
Patient:

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**Holter Monitor report 5/31/17**

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Client:  
Patient:

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**Holter Monitor report 5/31/17**

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Client:  
Patient:

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**Holter Monitor report 5/31/17**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 5/31/17**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 5/31/17**

**B6**





Client:  
Patient:

**B6**

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Client:  
Patient:

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Client:  
Patient:

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Client:  
Patient:

**B6**

**B6**

**B6**

Client: **B6**  
Patient:

Holter Monitor Report 11/16/17

**CANINE HOLTER MONITORING REPORT**

**HOLTER MONITOR REPORT**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**



Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**

Client: **B6**  
Patient:

**Holter Monitor Report 11/16/17**

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**B6**



Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

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**B6**

Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**



Client:  
Patient:

**B6**

**Holter Monitor Report 11/16/17**

**B6**

Client:  
Patient:

**B6**

**RDVM**

**B6**

**B6**



Client:  
Patient:

**B6**

**RDVM**

**B6**

**B6**

Client:  
Patient:

**B6**

RDVM -

**B6**

**B6**

Client:  
Patient:

**B6**

RDVM -

**B6**

**B6**

Client:  
Patient:

**B6**

**RDVM**

**B6**

**B6**

Client:  
Patient:

**B6**

Holter report 3/30/18

**CANINE HOLTER MONITORING REPORT**

**HOLTER MONITOR REPORT**

**B6**

Client: **B6**  
Patient:

Holter report 3/30/18

**B6**



Client:  
Patient:

**B6**

Holter report 3/30/18

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**B6**

Client:  
Patient:

**B6**

**Holter report 3/30/18**

**B6**



Client:  
Patient:

**B6**

**Holter report 3/30/18**

**B6**

Client:  
Patient:

**B6**

**Holter report 3/30/18**

**B6**

Client:  
Patient:

**B6**

**Holter report 3/30/18**

**B6**

Client:  
Patient:

**B6**

**Holter report 3/30/18**

**B6**

Client:  
Patient:

**B6**

**Holter report 3/30/18**

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**B6**

**Holter report 3/30/18**

**B6**

Client:  
Patient:

**B6**

Holter Monitor report 11/7/19

**CANINE HOLTER MONITORING REPORT**

**HOLTER MONITOR REPORT**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**



Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**

Client: **B6**  
Patient: **B6**

Holter Monitor report 11/7/19

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**

Client: **B6**  
Patient:

**Holter Monitor report 11/7/19**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**

Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**



Client:  
Patient:

**B6**

**Holter Monitor report 11/7/19**

**B6**

Client:  
Patient:

**B6**

**Lab Results**

**B4, B6**

**B6**

Client:  
Patient:

**B6**

Cardiac Troponin

**B6**

**B4, B6**

Client:  
Patient:

**B6**

Cardiac Troponin/

**B6**

**B4, B6**

Client:  
Patient:

**B6**

**TAURINE Panel 11/15/18**

**B6**

Client:  
Patient:

**B6**

**TAURINE Panel 11/15/18**

**B6**

Client:  
Patient:

**B6**

**Best Available Copy**

Diet hx

**CARDIOLOGY DIET HISTORY FORM**

Please answer the following questions about your pet.

**B6**

days since: 11/15/2018

1. How would you assess your pet's appetite? (Mark the point on the line below that best describes your pet's appetite)



2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)  
 Eats about the same amount as usual     Eats less than usual     Eats more than usual  
 Seems to prefer different foods than usual     Other \_\_\_\_\_

3. Over the last few weeks, has your pet (check only)  
 Lost weight     Gained weight     Moved about the same weight     Don't know

4. Please list below ALL pet foods, people food, treats, snacks, dental chews, rawhides, and any other food item that your pet currently eats. Please include the brand, specific product, and flavor so we know exactly what your pet is eating.

Distinctions are shown in the table - please provide enough detail that we could go to the store and buy the exact same food

Food (include specific product and flavor)	Form	Amount	How often?	Fed since
Arjo Green Free Chicken, Lamb, & Sweet Potato Adult	dry	1 1/2 cups	daily	Jan 2018
100% lean hamburgers	microwaved	2 oz	1x/week	Jan 2018
Applegate organic beef bawls	meat	N	1x/day	Aug 2015
Rawhide	meat	1 inch beef	1x/week	Dec 2014
Raw-Meat - Mountain Fresh Turkey	dry	1 1/2 oz	2x/week	Jan 2018
Raw-Meat - Backyard Chicken	meat	1 cup	3x/week	Jan 2018
Raw-Meat - Chicken (Backyard Chicken)	meat	1/2 cup	1-2x/week	Jan 2018
Raw-Meat - Beef (Backyard Chicken)	meat	1/2 cup	1-2x/week	Jan 2018
Raw-Meat - Chicken (Backyard Chicken)	meat	1/2 cup	1-2x/week	Jan 2018
Raw-Meat - Chicken (Backyard Chicken)	meat	1/2 cup	1-2x/week	Jan 2018

(NO "HOLY GRAHNS, DO ANIMAL")  
\*Any additional diet information can be listed on the back of this sheet

5. Do you give any dietary supplements to your pet (for example, vitamins, glucosamine, fatty acids, or any other supplements)?  Yes  No. If yes, please list which ones and give brands and amounts.

	Brand/Concentration	Amount per day
Taurine	_____	_____
CoQ10	_____	_____
Anticoagulants	_____	_____
Multivitamins	_____	_____
Fish oil	_____	_____
Coenzyme Q10	_____	_____
Other (please list)	_____	_____
Example: Vitamin C	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. How do you administer pills to your pet?

- I do not give any medications
- I put them directly in my pet's mouth without food
- I put them in my pet's dog/cat food
- I put them in a Pill Pocket or similar product
- I put them in food (pet food) - small pieces of (canned) kibble

Client:  
Patient:

**B6**

---

**Vitals Results**

---

3/14/2016 3:29:53 PM	Weight (kg)
10/20/2016 2:23:42 PM	Weight (kg)
11/29/2017 10:41:26 AM	Weight (kg)
4/5/2018 2:45:48 PM	Weight (kg)
11/15/2018 2:01:47 PM	Weight (kg)

**B6**



Client:  
Patient:

**B6**

---

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

---

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

---

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**

Client: **B6**  
Patient:

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

---

**ECG from Cardio**

---

**B6**



Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

**CANINE HOLTER MONITORING REPORT**

**HOLTER MONITOR REPORT**

**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

**B6**



Client:  
Patient:

**B6**

**Alba Hotler**

**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

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**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

**B6**



Client:  
Patient:

**B6**

**Alba Hotler**

**B6**

Client:  
Patient:

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**Alba Hotler**

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Client:  
Patient:

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**Alba Hotler**

**B6**

Client:  
Patient:

**B6**

**Alba Hotler**

**B6**



Client:  
Patient:

**B6**

**ECG from Cardio**

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**B6**

Client:  
Patient:

**B6**

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**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

**ECG from Cardio**

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**B6**

Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**



Client:  
Patient:

**B6**

**ECG from Cardio**

---

**B6**

Client:  
Patient:

**B6**

**Patient History**

**B6**

Client  
Patient

**B6**

**Patient History**

**B6**

Client:  
Patient:

**B6**

**Patient History**

**B6**

**B4, B6**

**B4, B6**

**B4, B6**

**B4, B6**



**B4, B6**

**B4, B6**

**From:** PFR Event <pfpreventcreation@fda.hhs.gov>  
**To:** Cleary, Michael \*; HQ Pet Food Report Notification; B6  
**Sent:** 12/4/2018 11:12:44 PM  
**Subject:** Earthborn Meadow Feast dry: Lisa Freeman - EON-372831  
**Attachments:** 2059622-report.pdf; 2059622-attachments.zip

A PFR Report has been received and PFR Event [EON-372831] has been created in the EON System.

A "PDF" report by name "2059622-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 "2059622-attachments.zip" and is attached to this email notification.

Below is the summary of the report:

**EON Key:** EON-372831

**ICSR #:** 2059622

**EON Title:** PFR Event created for Earthborn Meadow Feast dry; 2059622

<b>AE Date</b>	11/15/2018	<b>Number Fed/Exposed</b>	5
<b>Best By Date</b>		<b>Number Reacted</b>	4
<b>Animal Species</b>	Dog	<b>Outcome to Date</b>	Stable
<b>Breed</b>	Boxer (German Boxer)		
<b>Age</b>	3 Years		
<b>District Involved</b>	PFR <span style="border: 1px dashed black; padding: 2px;">B6</span> DO		

**Product information**

**Individual Case Safety Report Number:** 2059622

**Product Group:** Pet Food

**Product Name:** Earthborn Meadow Feast dry

**Description:** Daughter diagnosed with reduced cardiac contractility B6 and

B6 Eating BEG diet (Earthborn) so screened all housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months

**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: 5**

**Number of Animals Reacted With Product: 4**

<b>Product Name</b>	<b>Lot Number or ID</b>	<b>Best By Date</b>
Earthborn Meadow Feast dry		

**Sender information**

Lisa Freeman  
200 Westboro Rd  
North Grafton, MA 01536  
USA

**Owner information**

**B6**

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

**B6**

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

**B6**

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

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

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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](mailto:FDAREportableFoods@fda.hhs.gov) immediately.

**Report Details - EON-372831**

ICSR: 2059622  
 Type Of Submission: Initial  
 Report Version: FPSR.FDA.PETF.V.V1  
 Type Of Report: Adverse Event (a symptom, reaction or disease associated with the product)  
 Reporting Type: Voluntary  
 Report Submission Date: 2018-12-04 18:08:14 EST

**Reported Problem:**  
**Problem Description:** Daughter diagnosed with reduced cardiac contractility ( **B6** ) Eating BEG diet (Earthborn) so screened an **B6** housemates Echo within normal limits but elevated NT-proBNP and cardiac troponin I Taurine pending Owner changing diet and will recheck in 3 months  
**Date Problem Started:** 11/15/2018  
**Concurrent Medical Problem:** No  
**Outcome to Date:** Stable

**Product Information:**  
**Product Name:** Earthborn Meadow Feast dry  
**Product Type:** Pet Food  
**Lot Number:**  
**Package Type:** BAG  
**Product Use Information:** **Description:** See diet history in medical record for more info  
**Manufacturer /Distributor Information:**  
**Purchase Location Information:**

**Animal Information:**  
**Name:** **B6**  
**Type Of Species:** Dog  
**Type Of Breed:** Boxer (German Boxer)  
**Gender:** Female  
**Reproductive Status:** Intact  
**Pregnancy Status:** Not pregnant  
**Lactation Status:** Not lactating  
**Weight:** 29.1 Kilogram  
**Age:** 3 Years  
**Assessment of Prior Health:** Excellent  
**Number of Animals Given the Product:** 5  
**Number of Animals Reacted:** 4  
**Owner Information:** **Owner Information provided:** Yes  
**Contact:** **Name:** **B6**  
**Phone:**  
**Email:**  
**Address:** **B6**  
 United States  
**Healthcare Professional Information:** **Practice Name:** Tufts Cummings School of Veterinary Medicine  
**Contact:** **Name:** Lisa Freeman

			<b>Phone:</b> (508) 887-4523
			<b>Email:</b> lisa.freeman@tufts.edu
		<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States
<b>Sender Information:</b>	<b>Name:</b>	Lisa Freeman	
	<b>Address:</b>	200 Westboro Rd North Grafton Massachusetts 01536 United States	
	<b>Contact:</b>	<b>Phone:</b>	5088874523
		<b>Email:</b>	lisa.freeman@tufts.edu
	<b>Permission To Contact Sender:</b>	Yes	
<b>Preferred Method Of Contact:</b>	Email		
<b>Additional Documents:</b>	<b>Attachment:</b>	rpt_medical_record_preview	<b>B6</b> pdf
	<b>Description:</b>	Medical records	
	<b>Type:</b>	Medical Records	

B6

Client:

Address:

B6

**All Medical Records**

Patient: B6

Breed: Boxer

DOB: B6

Species: Canine

Sex: Male  
(Neutered)

**Referring Information**

B6

Client:

Patient:

B6

**Initial Complaint:**

Scanned Record

SOAP Text Nov 20 2018 12:22PM

B6

**Initial Complaint:**

DCM Study

SOAP Text Nov 20 2018 1:10PM

B6

**Disposition/Recommendations**

Client:  
Patient:

**B6**

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Client:  
Patient:

**B6**

**B6**

Client: **B6**  
Veterinarian:  
Patient ID: 433149  
Visit ID:

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

**Lab Results Report**

11/20/2018 5:45:23 PM      Accession ID: **B6**

Test	Results	Reference Range	Units
Troponin I Research - FHSA	<b>B6</b>	0 - 0.08	mg/dl



**B6**

Client:  
Patient:

**B6**

**B6**

Client:  
Patient:

**B6**

CARDIAC TROPONIN

**B6**

**B6**

Client:  
Patient:

**B6**

CARDIAC TROPONIN

**B6**

**B6**

Client:  
Patient:

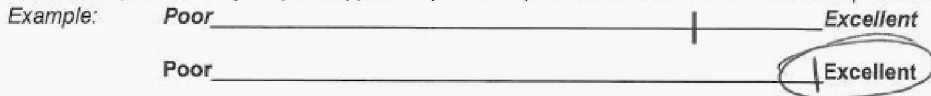
**B6**

**Diet hx**

**CARDIOLOGY DIET HISTORY FORM**  
Please answer the following questions about your pet

Pet's name: **B6** Today's date: 20 NOV 2018

1. How would you assess your pet's appetite? (mark the point on the line below that best represents your pet's appetite)



2. Have you noticed a change in your pet's appetite over the last 1-2 weeks? (check all that apply)  
 Eats about the same amount as usual     Eats less than usual     Eats more than usual  
 Seems to prefer different foods than usual     Other \_\_\_\_\_

3. Over the last few weeks, has your pet (check one)  
 Lost weight     Gained weight     Stayed about the same weight     Don't know

4. Please list below ALL pet foods, people food, treats, snack, dental chews, rawhides, and any other food item that your pet currently eats. Please include the brand, specific product, and flavor so we know exactly what you pet is eating.

Examples are shown in the table – please provide enough detail that we could go to the store and buy the exact same food.

Food (include specific product and flavor)	Form	Amount	How often?	Fed since
Nutro Grain Free Chicken, Lentil, & Sweet Potato Adult	dry	1 1/2 cup	2x/day	Jan 2018
85% lean hamburger	microwaved	3 oz	1x/week	Jan 2015
Pupperoni original beef flavor	treat	1/2	1x/day	Aug 2015
Rawhide	treat	6 inch twist	1x/week	Dec 2015
<b>EARTHBOEN - MEADOWFEAST</b>	<b>dry</b>	<b>~ 1 1/2c +</b>	<b>2x DAY</b>	<b>FEB 2016</b>

\*Any additional diet information can be listed on the back of this sheet

5. Do you give any dietary supplements to your pet (for example: vitamins, glucosamine, fatty acids, or any other supplements)?  Yes  No If yes, please list which ones and give brands and amounts:

	Brand/Concentration	Amount per day
Taurine	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____
Carnitine	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____
Antioxidants	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____
Multivitamin	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____
Fish oil	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____
Coenzyme Q10	<input type="checkbox"/> Yes <input type="checkbox"/> No _____	_____
Other (please list): Example: Vitamin C	_____	_____
<b>SUPPLEMENT</b>	<b>Nature's Bounty NUPRO - DOG SUPPLEMENT</b>	<b>500 mg tablets - 1 per day 1 SCOOP (~ 1 TBSP) 1-2x DAY</b>

6. How do you administer pills to your pet?  
 I do not give any medications  
 I put them directly in my pet's mouth without food  
 I put them in my pet's dog/cat food  
 I put them in a Pill Pocket or similar product  
 I put them in foods (list foods): Bologna or CHEESE

Client:  
Patient:

**B6**

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Client:  
Patient:

**B6**

**ECG from Cardio**

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**B6**

**B6**

Client:  
Patient:

**B6**

**ECG from Cardio**

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**B6**

**B6**



Client:  
Patient:

**B6**

**ECG from Cardio**

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**B6**

Client:  
Patient:

**B6**

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**Patient History**

**B6**

**B4, B6**