

| | | | | |
|--------------|--------------|--------------------------------|----------------------|-------------------|
| PET OWNER: | SMITH | ABC VETERINARY HOSPITAL | LAB ID #: | 23706000060 |
| PATIENT ID: | | 123 MAIN STREET | ORDER ID #: | |
| SPECIES: | EQUINE | MARKHAM, ONTARIO L3R 5V2 | COLLECTION DATE: | 02/06/2019 |
| BREED: | | 555-555-5555 | DATE OF RECEIPT: | 02/06/2019 |
| GENDER: | | ACCOUNT #: 9999 | DATE OF REPORT: | 02/08/2019 |
| AGE: | | ATTENDING VET: WOODS | *** FINAL REPORT *** | |
| MICROCHIP #: | | | | |

IDEXX SERVICES: **EEPE**

IMMUNOLOGY

| TEST | RESULTS | INTERPRETIVE SCORE | | |
|--|------------|--------------------|-----|--|
| Cat Dander | 85 | | Neg | Cultivated (21) 66 |
| Dust Mite- D. farinae (B51) | 144 | | Neg | Orchard Grass (20) 125 |
| H Dust Mite- D. pteronyssinus | 166 | | + | H Perennial Rye (24) 166 |
| Grain Mill Dust Mix | 39 | | Neg | H Quack Grass (11) 156 |
| Flea | 12 | | Neg | H Red Top (22) 150 |
| Storage Mite - Acarus Siro | 127 | | Neg | Sweet Vernal (27) 112 |
| H Storage Mite - Tyrophagus putrescentiae | 308 | | +++ | H Timothy (28) 191 |
| Alternaria (M1) | 39 | | Neg | Alder, Red (217) 54 |
| Aspergillus (M3) | 72 | | Neg | Ash Mix (P30) 38 |
| Candida albicans (M15) | 40 | | Neg | Bayberry / Wax 51 |
| Cephalosporium (M6) | 59 | | Neg | Myrtle (173) |
| Cladosporium (M9) | 49 | | Neg | Beech (76) 114 |
| Curvularia / Dreshlaria (M45) | 35 | | Neg | Birch Mix (P31) 72 |
| Grain Smut Mix (SO2) | 46 | | Neg | H Cedar, Red / Juniper (84) 156 |
| Mucor Mix (MO11) | 27 | | Neg | Cottonwood (87) 120 |
| Penicillium (M19) | 57 | | Neg | Elm Mix (P32) 85 |
| Pullularia / Aureobasidium (M21) | 55 | | Neg | Hazelnut (99) 56 |
| Rhodotorula mucilaginosa (M49) | 37 | | Neg | Hickory / Pecan (P34) 75 |
| Stemphylium (M33) | 24 | | Neg | Maple / Box Elder Mix (P36) 54 |
| Alfalfa (145) | 56 | | Neg | Mulberry, Red (112) 95 |
| H Bermuda (2) 269 | | | + | Oak Mix (P38) 80 |
| Brome Grass, Smooth (8) | 82 | | Neg | Pine Mix (P37) 44 |
| Clover, Red (146) | 12 | | Neg | Sycamore (138) 61 |
| H Corn Pollen (149) 159 | | | + | Walnut, Black (140) 52 |
| H Johnson (15) 180 | | | + | Willow, Black (142) 23 |
| Kentucky Blue / June (16) | 140 | | Neg | Cocklebur (33) 53 |
| H Meadow Fescue (14) 156 | | | + | Dandelion (159) 48 |
| Oats, Common / | 66 | | Neg | Dock / Sorrel Mix (PO216) 47 |
| | | | | English Plantain (54) 89 |
| | | | | Goldenrod (37) 43 |
| | | | | Lamb's Quarters (43) 57 |
| | | | | Pigweed Mix (P5) 64 |
| | | | | Ragweed Mix (P1) 49 |
| | | | | H American Cockroach (B26) 155 |
| | | | | Biting Midge / Culicoides (B69) 118 |
| | | | | H Black Ant (B31) 150 |
| | | | | H Caddisfly (B28) 164 |



PET OWNER:

SMITH

DATE OF REPORT:

02/08/2019

LAB ID #:

23706000060

IDEXX SERVICES: **EEPE**

IMMUNOLOGY

| TEST | RESULTS | INTERPRETIVE SCORE |
|--|------------|--------------------|
| H Deer Fly (B39) | 158 | + |
| H Fire Ant (B47) | 182 | + |
| H German Cockroach (B46) | 261 | + |
| Horse Fly (B43) | 66 | Neg |
| H House Fly (B8) | 153 | + |
| H Lepidoglyphus destructor / Storage Mite (B71) | 159 | + |
| H Mayfly (B12) | 189 | + |
| Mosquito (B55) | 100 | Neg |
| H Rye, Cultivated (23) | 154 | + |
| Total positive: ^a | 15 | |

NOTES

IMMUNOLOGY

- a ALLERGY SERUM IGE INTERPRETATION: >or = 300 EAU - Scores in this range are considered significant. Immunotherapy for these allergens should be considered if they are found in the pet's environment and they relate to the clinical history. 150 - 299 EAU - Scores in this range are considered significant if the allergens are found in the pet's environment and they relate to the clinical history. 0 - 149 EAU - Scores in this range indicate that no circulating allergen specific IgE was detected for the allergens tested.



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| MICROCHIP #: | | | | |

IDEXX SERVICES: **EEPE**

STEP 1: CHOOSE ROUTE OF ADMINISTRATION & FORMULATION

The highest EAU from immunotherapy mixes will be included based on prescription set chosen below unless you customize your prescription

Subcutaneous

10,000 PNU/mL, 1,000 PNU/mL and 100 PNU/mL
FOR MITE ONLY: 1:200 w/v, 1:2,000 w/v, and 1:20,000 w/v

- 1 Prescription Set** Include up to 12 positive allergens
- 2 Prescription Sets** Include up to 24 positive allergens
- Customized Prescription** Up to 24 positive allergens; if greater than 12 allergens, 2 prescription sets will be required.

If you wish to select a stronger prescription check box below*:

- 20,000 PNU/mL, 2,000 PNU/mL and 200 PNU/mL

*Stronger prescriptions are not recommended, especially if the pet is small, historically sensitive to medications, or where immunotherapy provides multiple fungals and insects. Not available for mite only.

Sublingual

20,000 PNU or strongest available per vial
FOR MITE ONLY - 1:200 w/v
Available for canine and feline ONLY.

- 1 Prescription Set** Include up to 12 positive allergens
- Customized Prescription** Include up to 12 positive allergens

Limited to 12 allergens only.

Allergens with the highest EAU from immunotherapy mixes will be included unless specific allergens are selected or provided in the alternative allergens spaces.

FOR CUSTOMIZED PRESCRIPTIONS ONLY SELECT SPECIFIC ALLERGENS

You may want to consider selecting allergens that the pet has specific reactions to, cannot be avoided and are known to be relevant to the pet's environment.
Inclusion of flea allergens in immunotherapy is not recommended.

IMMUNOTHERAPY MIX 1

| Item | EAU |
|--|-----|
| <input type="checkbox"/> GGBER (2) | 269 |
| <input type="checkbox"/> GGJOHN (15) | 180 |
| <input type="checkbox"/> EEPTER (B58) | 166 |
| <input type="checkbox"/> TTCED (84) | 156 |
| <input type="checkbox"/> IIBANT (B31) | 150 |
| <input type="checkbox"/> IIDEER (B39) | 158 |
| <input type="checkbox"/> IIFIRE (B47) | 182 |
| <input type="checkbox"/> IIGCOCK (B46) | 261 |

IMMUNOTHERAPY MIX 2

| Item | EAU |
|--|-----|
| <input type="checkbox"/> GGTIM (28) | 191 |
| <input type="checkbox"/> EEPUTR (B73) | 308 |
| <input type="checkbox"/> GGRYE (23) | 154 |
| <input type="checkbox"/> IIHOU (B8) | 153 |
| <input type="checkbox"/> IIMAY (B12) | 189 |
| <input type="checkbox"/> IICADFL (B28) | 164 |
| <input type="checkbox"/> IILEP (B71) | 159 |

Additional/Alternative Allergens

STEP 2: CONFIRM PRESCRIPTION ORDER

Please sign and date the completed form and E-MAIL to allergycanada@idexx.com or FAX to 1-855-627-6571 (Allergy Fax #)

Veterinarian's Signature

Veterinarian's Name (Please Print)

Date

If you have any questions, please contact Customer Support at 1-800-667-3411; option 1; option 1.

For a Dermatology consultation, please call 1-800-667-3411; option 1; option 3; option 7.

For additional information and resources related to allergy testing or immunotherapy, please visit us at www.idexx.ca/allergy.