

Patient History Report: Hook - 5/14/2021

Clinic:

Animal Cancer Care Clinic (FLL)
1122 NE 4th Ave
Ft. Lauderdale, FL 33304

954-527-3111

Client:

Ms. Samantha Rubinstein

ID: 30011526, File #:
30011526

Medical Record Entries:

5/14/2021

Patient: Hook

ID: 30012798
Tag:
Species: Canine, Labrador Mix
Sex: male/neutered
Age: 7 yrs & 4 mo, DOB: 1/1/2014
Weight: 67.3 Lbs
Color: Yellow & White
Last visit: 5/14/2021

Referred By:

Dr. Stuart Sobol
Sobol Veterinary Hospital
Tel: 954-680-5777 / Fax: 954-680-0456

Blood Results - IDEXX - Blood Results - IDEXX

Assay Name Value Ref. Range Units

GLU 104 74-143 mg/dL
CREA 1.50 1.0-1.8 mg/dL
BUN 21 7-27 mg/dL
BUN/CREA 14 -
TP 6.65 5.2-8.2 g/dL
ALB 3.52 3.0-4.0 g/dL
GLOB 3.22 2.5-4.5 g/dL
ALB/GLOB 1.1 -
ALT 48 10-125 U/L
ALKP 42 23-212 U/L

5/14/2021 **Denamarin 425mg** - Give 1 tablet orally once daily on an empty stomach. (Ricardo Fernandez, DVM)

5/14/2021 **Lomustine 10mg** - (3) (Ricardo Fernandez, DVM)

5/14/2021 **Chemo Admin & SetUp** - (Ricardo Fernandez, DVM)

5/14/2021 **Lomustine 40mg** - (Ricardo Fernandez, DVM)

5/14/2021 **Limited Profile** - (Ricardo Fernandez, DVM)

5/14/2021 **Blood Results - IDEXX - Blood Results - IDEXX**

Assay Name Value Ref. Range Units

RBC 6.62 5.65-8.87 M/ μ L
HCT 44.2 37.3-61.7 %
HGB 15.7 13.1-20.5 g/dL
MCV 66.8 61.6-73.5 fL
MCH 23.7 21.2-25.9 pg
MCHC 35.5 32.0-37.9 g/dL
RDW 15.4 13.6-21.7 %
%RETIC 0.9 - %

RETIC 56.3 10.0-110.0 K/ μ L
RETIC-HGB 25.0 22.3-29.6pg
WBC 11.10 5.05-16.76 K/ μ L
%NEU 55.9 - %
%LYM 19.2 - %
%MONO 11.2 - %
%EOS 13.5 - %
%BASO 0.2 - %
NEU6.21 2.95-11.64 K/ μ L
LYM2.13 1.05-5.10 K/ μ L
MONO 1.24 0.16-1.12 K/ μ L
EOS1.50 0.06-1.23 K/ μ L
BASO 0.02 0.00-0.10 K/ μ L
PLT 227148-484 K/ μ L
MPV12.5 8.7-13.2fL
PDW12.4 9.1-19.4fL
PCT0.28 0.14-0.46 %

5/14/2021

CBC/Differential - (Ricardo Fernandez, DVM)

5/14/2021

Remission Progress Examination - SUBJECTIVE: BAR

TEMP: 101.8

EENT: Clear

ORO-NASAL: pink, no masses

Heart: 120

LUNGS:clear

ABDOMEN:soft, no masses

MUSCULOSKELETAL: good body condition

INTEGUMENTARY: normal

LYMPH NODES: prominent

Right/Left Mandibular: prominent

Right/Left Prescapular: prominent

Right/Left Axillary: normal

Right/Left Inguinal: normal

Right/Left Popliteal: prominent (Ricardo Fernandez, DVM)

5/14/2021

Plan - Hook was a good patient today for his visit. His lymph nodes were noted to be larger on examination today which means that his lymphoma is coming out of remission clinically. We discussed different rescue treatment options and have decided to start lomustine. This is an oral chemotherapy given once every 3 weeks for a total of 5 treatments depending on his response. This is usually well tolerated though possible side effects include bone marrow suppression and gastrointestinal symptoms such as nausea, decreased appetite, vomiting or diarrhea. Cerenia or ondansetron can be used as needed for decreased appetite, nausea and/or vomiting. Metronidazole can be used as needed for diarrhea. This chemotherapy is started along with Denamarin (liver supplement) as lomustine can affect the liver in a minority of cases. He will also start prednisone today.

He is due for a physical examination and CBC in 1 week (you can do this with your primary care veterinarian; this is to check for any evidence of bone marrow suppression as a side effect from the chemotherapy). He is then due for a physical examination, CBC, limited profile and lomustine #2 in 3 weeks from now. Please let us know if you have any questions or concerns in the interim.

Hook received treatment with lomustine today. He may experience some transient gastrointestinal upset like mild vomiting, diarrhea, or loss of appetite over the next 1-5 days. Please use the medications provided for chemotherapy related side effects if they are needed. These side effects may never occur, but if he vomits more than two times in 24 hours or misses two meals in a row, please call our office for further direction.

If a chemotherapy injection was administered today a bandage has been placed over the injection site. Please remove the bandage after approximately 20 minutes. When you remove the bandage, if your pet excessively licks at the area or the area appears red or bruised please call the hospital for further direction.

In addition to the transient gastrointestinal side effects of chemotherapy, there is also the risk of bone marrow suppression. If your pet becomes excessively lethargic approximately 6-10 days after chemotherapy treatment, the cell counts may be low. Please call our office for further direction.

For 72 hours (3 days) after your pet's chemotherapy treatment small amounts of chemotherapy metabolites will be present in the urine and/or feces. If your pet has an accident in the house, gloves should be worn and the area should be cleaned with soap and water. Waste products should be double-bagged and placed in the trash. Young children, those who are immunosuppressed, and women who are nursing or actively trying to conceive should not handle your pet's waste products. Fur does not contain chemotherapy metabolites and is not hazardous. (Ricardo Fernandez, DVM)

5/14/2021 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20, relapse documented on 14MAY21, started lomustine (Ricardo Fernandez, DVM)

5/14/2021 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well. (Ricardo Fernandez, DVM)

4/23/2021 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC7.08 5.65-8.87 M/ μ L
HCT46.7 37.3-61.7 %
HGB16.5 13.1-20.5 g/dL
MCV66.0 61.6-73.5fL
MCH23.3 21.2-25.9pg
MCHC 35.3 32.0-37.9 g/dL
RDW17.3 13.6-21.7 %
%RETIC 1.3 - %
RETIC 94.2 10.0-110.0 K/ μ L
RETIC-HGB 25.8 22.3-29.6pg
WBC 11.70 5.05-16.76 K/ μ L
%NEU 49.6 - %
%LYM 22.6 - %
%MONO 12.0 - %
%EOS 14.9 - %
%BASO 0.9 - %
NEU5.82 2.95-11.64 K/ μ L
LYM2.64 1.05-5.10 K/ μ L
MONO 1.40 0.16-1.12 K/ μ L
EOS1.74 0.06-1.23 K/ μ L
BASO 0.10 0.00-0.10 K/ μ L
PLT 321148-484 K/ μ L
MPV12.5 8.7-13.2fL
PDW11.6 9.1-19.4fL
PCT0.40 0.14-0.46 %

4/23/2021 **CBC/Differential** - (Ricardo Fernandez, DVM)

4/23/2021 **Remission Progress Examination** - SUBJECTIVE: BAR
TEMP: 101

EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: normal
LYMPH NODES: prominent
 Right/Left Mandibular: prominent
 Right/Left Prescapular: prominent
 Right/Left Axillary: normal
 Right/Left Inguinal: normal
 Right/Left Popliteal: prominent (Ricardo Fernandez, DVM)

4/23/2021

Plan - Hook looked great on examination and his peripheral lymph nodes continue to be prominent to mildly enlarged but not much different compared to his previous visit. I do think he is starting to come out of clinical remission now. We discussed possible treatment options for relapsed lymphoma as he may in fact be starting to develop progressive disease. These treatments include a modified CHOP protocol or single agent Tanovea. We are planning to see him back in 3 weeks. If his lymphoma is clearly progressive then we can start therapy again. Otherwise, we will continue monitoring. If you notice the lymph nodes getting larger in the meantime, we can see him sooner.

He is due for a physical examination and CBC in 3 weeks. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)

4/23/2021

Assessment - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 (Ricardo Fernandez, DVM)

4/23/2021

History - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well. (Ricardo Fernandez, DVM)

4/9/2021

Remission Progress Examination - SUBJECTIVE: BAR

TEMP: 100
EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: normal
LYMPH NODES: prominent
 Right/Left Mandibular: prominent
 Right/Left Prescapular:normal
 Right/Left Axillary: normal
 Right/Left Inguinal: normal
 Right/Left Popliteal: prominent (Ricardo Fernandez, DVM)

4/9/2021

Plan - Hook looked great on examination and his peripheral lymph nodes are just mildly prominent but not enlarged. He has not progressed much in the last 2 months. I do think he is starting to come out of clinical remission now. We discussed possible treatment options for relapsed lymphoma as he may in fact be starting to develop progressive disease. These treatments include a modified CHOP protocol or single agent Tanovea. We are planning to see him back in 2 weeks. if his lymphoma is clearly progressive then we can start therapy again. Otherwise, we will continue monitoring. If you notice the lymph nodes getting larger in the meantime, we can see him sooner.

He is due for a physical examination and CBC in 2 weeks. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)

4/9/2021 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 (Ricardo Fernandez, DVM)

4/9/2021 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well. (Ricardo Fernandez, DVM)

3/5/2021 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.75 5.65-8.87 M/ μ L
HCT43.6 37.3-61.7 %
HGB15.7 13.1-20.5 g/dL
MCV64.6 61.6-73.5fL
MCH23.3 21.2-25.9pg
MCHC 36.0 32.0-37.9 g/dL
RDW15.1 13.6-21.7 %
%RETIC 0.6 - %
RETIC 41.2 10.0-110.0 K/ μ L
RETIC-HGB 25.9 22.3-29.6pg
WBC 11.62 5.05-16.76 K/ μ L
%NEU 52.3 - %
%LYM 20.8 - %
%MONO 10.8 - %
%EOS 15.8 - %
%BASO 0.3 - %
NEU6.06 2.95-11.64 K/ μ L
LYM2.42 1.05-5.10 K/ μ L
MONO 1.26 0.16-1.12 K/ μ L
EOS1.84 0.06-1.23 K/ μ L
BASO 0.04 0.00-0.10 K/ μ L
PLT 255148-484 K/ μ L
MPV12.8 8.7-13.2fL
PDW13.4 9.1-19.4fL
PCT0.33 0.14-0.46 %

3/5/2021 **Remission Progress Examination** - SUBJECTIVE: BAR
TEMP: 101
EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: normal
LYMPH NODES: normal
Right/Left Mandibular: prominent
Right/Left Prescapular:normal
Right/Left Axillary: normal
Right/Left Inguinal: normal
Right/Left Popliteal: prominent (Ricardo Fernandez, DVM)

3/5/2021 **CBC/Differential** - (Ricardo Fernandez, DVM)

- 3/5/2021 **Plan** - Hook looked great on examination and his peripheral lymph nodes palpate normally overall. We discussed possible treatment options for relapsed lymphoma as he may in fact be starting to develop progressive disease. These treatments include a modified CHOP protocol or single agent Tanovea. We are planning to see him back in 2 weeks. if his lymphoma is clearly progressive then we can start therapy again. Otherwise, we will continue monitoring. If you notice the lymph nodes getting larger in the meantime, we can see him sooner.
- He is due for a physical examination and CBC in 2 weeks. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)
- 3/5/2021 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)
- 3/5/2021 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well. (Ricardo Fernandez, DVM)
- 2/19/2021 **Remission Progress Examination** - SUBJECTIVE: BAR
 TEMP: 101
 EENT: Clear
 ORO-NASAL: pink, no masses
 Heart: 120
 LUNGS:clear
 ABDOMEN:soft, no masses
 MUSCULOSKELETAL: good body condition
 INTEGUMENTARY: normal
 LYMPH NODES:normal
 Right/Left Mandibular: normal
 Right/Left Prescapular:normal
 Right/Left Axillary: normal
 Right/Left Inguinal: normal
 Right/Left Popliteal: normal (Ricardo Fernandez, DVM)
- 2/19/2021 **Plan** - Hook looked great on examination and his peripheral lymph nodes palpate normally overall. We discussed today that technically, he does not meet criteria for progressive lymphoma. Even though the lymph node cytology was consistent with lymphoma, if the patient does not meet criteria for progression of disease, we do not sample the lymph nodes as sometimes it is unclear if evidence of lymphoma cells actually represents relapse of the lymphoma vs. the fact that he has not been in a complete remission (though still with lymph nodes that are normal in size). We discussed possible treatment options for relapsed lymphoma as he may in fact be starting to develop progressive disease. These treatments include a modified CHOP protocol or single agent Tanovea. We are planning to see him back in 2 weeks. if his lymphoma is clearly progressive then we can start therapy again. Otherwise, we will continue monitoring. If you notice the lymph nodes getting larger in the meantime, we can see him sooner.
- He is due for a physical examination and CBC in 2 weeks. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)
- 2/19/2021 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)
- 2/19/2021 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well though was recently noted to possibly be out of remission. (Ricardo Fernandez, DVM)
- 10/9/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.72 5.65-8.87 M/ μ L
HCT44.3 37.3-61.7 %
HGB15.3 13.1-20.5 g/dL
MCV65.9 61.6-73.5fL
MCH22.8 21.2-25.9pg
MCHC 34.5 32.0-37.9 g/dL
RDW15.7 13.6-21.7 %
%RETIC 1.0 - %
RETIC 66.5 10.0-110.0 K/ μ L
RETIC-HGB 25.1 22.3-29.6pg
WBC 12.66 5.05-16.76 K/ μ L
%NEU 56.6 - %
%LYM 22.4 - %
%MONO 6.3 - %
%EOS 14.1 - %
%BASO 0.6 - %
NEU7.17 2.95-11.64 K/ μ L
LYM2.83 1.05-5.10 K/ μ L
MONO 0.80 0.16-1.12 K/ μ L
EOS1.79 0.06-1.23 K/ μ L
BASO 0.07 0.00-0.10 K/ μ L
PLT 240148-484 K/ μ L
MPV13.4 8.7-13.2fL
PDW13.4 9.1-19.4fL
PCT0.32 0.14-0.46 %

10/9/2020

CBC/Differential - (Ricardo Fernandez, DVM)

10/9/2020

Remission Progress Examination - SUBJECTIVE: BAR

TEMP: 100

EENT: Clear

ORO-NASAL: pink, no masses

Heart: 120

LUNGS:clear

ABDOMEN:soft, no masses

MUSCULOSKELETAL: good body condition

INTEGUMENTARY: normal

LYMPH NODES:normal

Right/Left Mandibular: normal

Right/Left Prescapular:normal

Right/Left Axillary: normal

Right/Left Inguinal: normal

Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

10/9/2020

Plan - Hook looked great on examination and his peripheral lymph nodes are all normal. His bloodwork did not reveal any significant abnormalities. This means that he continues to be in a clinical remission of his lymphoma. We are pleased with his progress so far!

He is due for a physical examination and CBC in 4 weeks. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)

10/9/2020

Assessment - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)

10/9/2020

History - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well. (Ricardo Fernandez, DVM)

8/21/2020

Blood Results - IDEXX - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.85 5.65-8.87 M/ μ L
HCT43.3 37.3-61.7 %
HGB15.3 13.1-20.5 g/dL
MCV63.2 61.6-73.5fL
MCH22.3 21.2-25.9pg
MCHC 35.3 32.0-37.9 g/dL
RDW19.6 13.6-21.7 %
%RETIC 0.6 - %
RETIC 43.8 10.0-110.0 K/ μ L
RETIC-HGB 24.3 22.3-29.6pg
WBC 14.60 5.05-16.76 K/ μ L
%NEU 59.8 - %
%LYM 21.4 - %
%MONO 7.2 - %
%EOS 10.8 - %
%BASO 0.8 - %
NEU8.74 2.95-11.64 K/ μ L
LYM3.12 1.05-5.10 K/ μ L
MONO 1.05 0.16-1.12 K/ μ L
EOS1.57 0.06-1.23 K/ μ L
BASO 0.12 0.00-0.10 K/ μ L
PLT 291148-484 K/ μ L
MPV13.5 8.7-13.2fL
PDW13.9 9.1-19.4fL
PCT0.39 0.14-0.46 %

8/21/2020

CBC/Differential - (Ricardo Fernandez, DVM)

8/21/2020

Remission Progress Examination - SUBJECTIVE: BAR

TEMP: 100

EENT: Clear

ORO-NASAL: pink, no masses

Heart: 120

LUNGS:clear

ABDOMEN:soft, no masses

MUSCULOSKELETAL: good body condition

INTEGUMENTARY: normal

LYMPH NODES:normal

Right/Left Mandibular: normal

Right/Left Prescapular:normal

Right/Left Axillary: normal

Right/Left Inguinal: normal

Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

8/21/2020

Plan - Hook looked great on examination and his peripheral lymph nodes are all normal. His bloodwork did not reveal any significant abnormalities. This means that he continues to be in a clinical remission of his lymphoma. We are pleased with his progress so far!

He is due for a physical examination and CBC in 6 weeks. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)

8/21/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)

8/21/2020 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well. (Ricardo Fernandez, DVM)

7/17/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC7.33 5.65-8.87 M/ μ L
HCT46.5 37.3-61.7 %
HGB16.2 13.1-20.5 g/dL
MCV63.4 61.6-73.5fL
MCH22.1 21.2-25.9pg
MCHC 34.8 32.0-37.9 g/dL
RDW19.6 13.6-21.7 %
%RETIC 0.5 - %
RETIC 38.8 10.0-110.0 K/ μ L
RETIC-HGB 25.6 22.3-29.6pg
WBC 10.40 5.05-16.76 K/ μ L
%NEU 61.9 - %
%LYM 22.5 - %
%MONO 8.0 - %
%EOS7.3 - %
%BASO 0.3 - %
NEU6.44 2.95-11.64 K/ μ L
LYM2.34 1.05-5.10 K/ μ L
MONO 0.83 0.16-1.12 K/ μ L
EOS0.76 0.06-1.23 K/ μ L
BASO 0.03 0.00-0.10 K/ μ L
PLT 248148-484 K/ μ L
MPV13.9 8.7-13.2fL
PDW13.6 9.1-19.4fL
PCT0.34 0.14-0.46 %

7/17/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)

7/17/2020 **Remission Progress Examination** - SUBJECTIVE: BAR
TEMP: 101
EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: generalized hair thinning
LYMPH NODES:normal
Right/Left Mandibular: normal
Right/Left Prescapular:normal
Right/Left Axillary: normal
Right/Left Inguinal: normal
Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

7/17/2020 **Plan** - Hook looked great on examination and his peripheral lymph nodes are all normal. His bloodwork did not reveal any significant abnormalities. This means that he continues to be in a clinical remission of his lymphoma. We are pleased with his progress so far! His recent vomiting is not likely to be related to his previous lymphoma or chemotherapy. This

may be due to gastroenteritis or dietary indiscretion, among other possibilities. His recent limping is also likely due to something unrelated to his previous history of cancer and could be arthritis for example. I recommend checking in with your primary care veterinarian to further work-up these issues.

He is due for a physical examination and CBC in 1 month. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)

7/17/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)

7/17/2020 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has developed vomiting recently and has been noted to limp on right hindlimb when getting up after sleeping. He is otherwise doing well. (Ricardo Fernandez, DVM)

6/26/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC7.35 5.65-8.87 M/ μ L
HCT47.2 37.3-61.7 %
HGB16.4 13.1-20.5 g/dL
MCV64.2 61.6-73.5fL
MCH22.3 21.2-25.9pg
MCHC 34.7 32.0-37.9 g/dL
RDW19.3 13.6-21.7 %
%RETIC 0.8 - %
RETIC 59.5 10.0-110.0 K/ μ L
RETIC-HGB 25.0 22.3-29.6pg
WBC 11.37 5.05-16.76 K/ μ L
%NEU 59.8 - %
%LYM 20.0 - %
%MONO 10.0 - %
%EOS9.6 - %
%BASO 0.6 - %
NEU6.80 2.95-11.64 K/ μ L
LYM2.27 1.05-5.10 K/ μ L
MONO 1.14 0.16-1.12 K/ μ L
EOS1.09 0.06-1.23 K/ μ L
BASO 0.07 0.00-0.10 K/ μ L
PLT 310148-484 K/ μ L
MPV14.3 8.7-13.2fL
PDW15.4 9.1-19.4fL
PCT0.44 0.14-0.46 %

6/26/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)

6/26/2020 **Remission Progress Examination** - SUBJECTIVE: BAR
TEMP: 101
EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: generalized hair thinning
LYMPH NODES:normal
Right/Left Mandibular: normal

Right/Left Prescapular:normal
Right/Left Axillary: normal
Right/Left Inguinal: normal
Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

- 6/26/2020 **Plan** - Hook looked great on examination and his peripheral lymph nodes are all normal. His bloodwork did not reveal any significant abnormalities. This means that he continues to be in a clinical remission of his lymphoma. We are pleased with his progress so far!
- He is due for a physical examination and CBC in 1 month. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)
- 6/26/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)
- 6/26/2020 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well at home. (Ricardo Fernandez, DVM)
- 5/29/2020 **Benadryl (diphenhydramine)(50mg/ml Sol)/ml** - (1.3). Given IM. (Ricardo Fernandez, DVM)
- 5/29/2020 **Chemo Medical Waste Disposal** - (Ricardo Fernandez, DVM)
- 5/29/2020 **Catheter-IV** - (Ricardo Fernandez, DVM)
- 5/29/2020 **Phaseal Level 2 Chemo Prep & Administration** - (Ricardo Fernandez, DVM)
- 5/29/2020 **Adriamycin(doxorubicin) (2mg/ml Sol)/mg** - (30). Given at 29mg/m2 IV as before (total of 30mg). (Ricardo Fernandez, DVM)
- 5/29/2020 **Limited Profile** - (Ricardo Fernandez, DVM)
- 5/29/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)
- 5/29/2020 **Remission Progress Examination** - SUBJECTIVE: BAR
TEMP: 101
EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: generalized hair thinning
LYMPH NODES:normal
Right/Left Mandibular: normal
Right/Left Prescapular:normal
Right/Left Axillary: normal
Right/Left Inguinal: normal
Right/Left Popliteal: normal (Ricardo Fernandez, DVM)
- 5/29/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

GLU 102 74-143 mg/dL
CREA1.40.5-1.8 mg/dL
BUN 12 7-27 mg/dL
BUN/CREA 9 -

TP 7.25-8.2 g/dL
ALB 3.42-4.0 g/dL
GLOB 3.82-4.5 g/dL
ALB/GLOB 0.9 -
ALT 18 10-125 U/L
ALKP 88 23-212 U/L

5/29/2020

Blood Results - IDEXX - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.83 5.65-8.87 M/ μ L
HCT45.4 37.3-61.7 %
HGB15.7 13.1-20.5 g/dL
MCV66.5 61.6-73.5fL
MCH23.0 21.2-25.9pg
MCHC 34.6 32.0-37.9 g/dL
RDW18.4 13.6-21.7 %
%RETIC 1.5 - %
RETIC 99.7 10.0-110.0 K/ μ L
RETIC-HGB 23.2 22.3-29.6pg
WBC 11.68 5.05-16.76 K/ μ L
%NEU 66.1 - %
%LYM 16.9 - %
%MONO 9.0 - %
%EOS7.4 - %
%BASO 0.6 - %
NEU7.72 2.95-11.64 K/ μ L
LYM1.97 1.05-5.10 K/ μ L
MONO 1.05 0.16-1.12 K/ μ L
EOS0.87 0.06-1.23 K/ μ L
BASO 0.07 0.00-0.10 K/ μ L
PLT 291148-484 K/ μ L
MPV14.0 8.7-13.2fL
PDW14.7 9.1-19.4fL
PCT0.41 0.14-0.46 %

5/29/2020

Plan - Hook looked great on examination and his peripheral lymph nodes are all normal. He is responding to chemotherapy very well so far. His bloodwork today did not reveal any significant abnormalities so he received the final planned dose of Adriamycin chemotherapy. He now enters the monitoring part of the protocol which entails a physical examination and CBC once a month. I am pleased with his progress and happy that he has finished his treatment protocol.

He is due for a physical examination and CBC in 1 month. Please let us know if you have any questions or concerns in the interim.

Hook received treatment with Adriamycin (doxorubicin) today. He may experience some transient gastrointestinal upset like mild vomiting, diarrhea, or loss of appetite over the next 1-5 days. Please use the medications provided for chemotherapy related side effects if they are needed. These side effects may never occur, but if he vomits more than two times in 24 hours or misses two meals in a row, please call our office for further direction. If a chemotherapy injection was administered today a bandage has been placed over the injection site. Please remove the bandage after approximately 20 minutes.

In addition to the transient gastrointestinal side effects of chemotherapy, there is also the risk of bone marrow suppression. If your pet becomes excessively lethargic approximately 6-10 days after chemotherapy treatment, the cell counts may be low. Please call our office for further direction.

For 72 hours (3 days) after your pet's chemotherapy treatment small amounts of chemotherapy metabolites will be present in the urine and/or feces. If your pet has an accident in the house, gloves should be worn and the area should be cleaned with soap and water. Waste products should be double-bagged and placed in the trash. Young children, those who are immunosuppressed, and women who are nursing or actively trying to conceive should not handle your pet's waste products. Fur does not contain chemotherapy metabolites and is not hazardous. (Ricardo Fernandez, DVM)

5/29/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 and finished on 29MAY20 - in a clinical remission today (Ricardo Fernandez, DVM)

5/29/2020 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well at home though he developed inappetence a few weeks ago after eating a bone. He is back to normal now. (Ricardo Fernandez, DVM)

5/8/2020 **Chemo Medical Waste Disposal** - (Ricardo Fernandez, DVM)

5/8/2020 **Catheter-IV** - (Ricardo Fernandez, DVM)

5/8/2020 **Phaseal Level 2 Chemo Prep & Administration** - (Ricardo Fernandez, DVM)

5/8/2020 **Adriamycin(doxorubicin) (2mg/ml Sol)/mg** - (31). Given at 29mg/m2 IV as before (total of 31mg). (Ricardo Fernandez, DVM)

5/8/2020 **Benadryl (diphenhydramine)(50mg/ml Sol)/ml** - (1.5). Given IM. (Ricardo Fernandez, DVM)

5/8/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)

5/8/2020 **Remission Progress Examination** - SUBJECTIVE: BAR
 TEMP: 100.7
 EENT: Clear
 ORO-NASAL: pink, no masses
 Heart: 120
 LUNGS:clear
 ABDOMEN:soft, no masses
 MUSCULOSKELETAL: good body condition
 INTEGUMENTARY: generalized hair thinning
 LYMPH NODES:normal
 Right/Left Mandibular: normal
 Right/Left Prescapular:normal
 Right/Left Axillary: normal
 Right/Left Inguinal: normal
 Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

5/8/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

 RBC6.17 5.65-8.87 M/ μ L
 HCT41.2 37.3-61.7 %
 HGB14.5 13.1-20.5 g/dL
 MCV66.8 61.6-73.5fL
 MCH23.5 21.2-25.9pg
 MCHC 35.2 32.0-37.9 g/dL
 RDW15.7 13.6-21.7 %
 %RETIC 1.5 - %

RETIC 95.0 10.0-110.0 K/ μ L
RETIC-HGB 23.4 22.3-29.6pg
WBC 13.89 5.05-16.76 K/ μ L
%NEU 67.4 - %
%LYM 13.5 - %
%MONO 11.4 - %
%EOS7.1 - %
%BASO 0.6 - %
NEU9.37 2.95-11.64 K/ μ L
LYM1.87 1.05-5.10 K/ μ L
MONO 1.58 0.16-1.12 K/ μ L
EOS0.98 0.06-1.23 K/ μ L
BASO 0.09 0.00-0.10 K/ μ L
PLT 383148-484 K/ μ L
MPV14.3 8.7-13.2fL
PDW16.4 9.1-19.4fL
PCT0.55 0.14-0.46 %

5/8/2020

Plan - Hook looked great on examination and his peripheral lymph nodes are all normal. He is responding to chemotherapy very well so far. His bloodwork today did not reveal any significant abnormalities so he received Adriamycin #4. His hair loss could be due to allergies so if you notice that he is itchy, I recommend you consider reaching out to your primary care veterinarian for recommendations for allergies. Otherwise, it could be a side effect of the chemotherapy and if that is the case the hair is expected to grow back after finishing chemotherapy. He is due for a physical examination, CBC, limited profile and Adriamycin #5 (last planned dose of chemotherapy) in 3 weeks. Please let us know if you have any questions or concerns in the interim.

Hook received treatment with Adriamycin (doxorubicin) today. He may experience some transient gastrointestinal upset like mild vomiting, diarrhea, or loss of appetite over the next 1-5 days. Please use the medications provided for chemotherapy related side effects if they are needed. These side effects may never occur, but if he vomits more than two times in 24 hours or misses two meals in a row, please call our office for further direction. If a chemotherapy injection was administered today a bandage has been placed over the injection site. Please remove the bandage after approximately 20 minutes.

In addition to the transient gastrointestinal side effects of chemotherapy, there is also the risk of bone marrow suppression. If your pet becomes excessively lethargic approximately 6-10 days after chemotherapy treatment, the cell counts may be low. Please call our office for further direction.

For 72 hours (3 days) after your pet's chemotherapy treatment small amounts of chemotherapy metabolites will be present in the urine and/or feces. If your pet has an accident in the house, gloves should be worn and the area should be cleaned with soap and water. Waste products should be double-bagged and placed in the trash. Young children, those who are immunosuppressed, and women who are nursing or actively trying to conceive should not handle your pet's waste products. Fur does not contain chemotherapy metabolites and is not hazardous. (Ricardo Fernandez, DVM)

5/8/2020

Assessment - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 - in a clinical remission (Ricardo Fernandez, DVM)

5/8/2020

History - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well at home though he is showing some hair loss. He has also been licking at his paws. (Ricardo Fernandez, DVM)

4/17/2020

Benadryl (diphenhydramine)(50mg/ml Sol)/ml - (1.5). Given IM. (Ricardo Fernandez, DVM)

4/17/2020 **Chemo Medical Waste Disposal** - (Ricardo Fernandez, DVM)

4/17/2020 **Catheter-IV** - (Ricardo Fernandez, DVM)

4/17/2020 **Phaseal Level 2 Chemo Prep & Administration** - (Ricardo Fernandez, DVM)

4/17/2020 **Adriamycin(doxorubicin) (2mg/ml Sol)/mg** - (30). Given at 29mg/m² IV (total of 30mg). (Ricardo Fernandez, DVM)

4/17/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)

4/17/2020 **Remission Progress Examination** - SUBJECTIVE: BAR
 TEMP: 100
 EENT: Clear
 ORO-NASAL: pink, no masses
 Heart: 120
 LUNGS:clear
 ABDOMEN:soft, no masses
 MUSCULOSKELETAL: good body condition
 INTEGUMENTARY: normal
 LYMPH NODES:normal
 Right/Left Mandibular: normal
 Right/Left Prescapular:normal
 Right/Left Axillary: normal
 Right/Left Inguinal: normal
 Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

4/17/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.30	5.65-8.87	M/μL
HCT42.9	37.3-61.7	%
HGB15.8	13.1-20.5	g/dL
MCV68.1	61.6-73.5	fL
MCH25.1	21.2-25.9	pg
MCHC 36.8	32.0-37.9	g/dL
RDW16.1	13.6-21.7	%
%RETIC	1.4	- %
RETIC 86.3	10.0-110.0	K/μL
RETIC-HGB	26.2	22.3-29.6pg
WBC 14.46	5.05-16.76	K/μL
%NEU	71.8	- %
%LYM	14.4	- %
%MONO	12.2	- %
%EOS1.5		- %
%BASO	0.1	- %
NEU 10.37	2.95-11.64	K/μL
LYM2.08	1.05-5.10	K/μL
MONO 1.77	0.16-1.12	K/μL
EOS0.22	0.06-1.23	K/μL
BASO 0.02	0.00-0.10	K/μL
PLT 309148-484		K/μL
MPV12.4	8.7-13.2	fL
PDW12.5	9.1-19.4	fL
PCT0.38	0.14-0.46	%

4/17/2020 **Plan** - Hook looked great on examination and his peripheral lymph nodes are all normal. He is responding to chemotherapy very well so far. His bloodwork today did not reveal

any significant abnormalities so he received Adriamycin #3. He is due for a physical examination, CBC and Adriamycin #4 in 3 weeks. Please continue prednisone at 10mg by mouth once every other day for 1 week and stop. Please let us know if you have any questions or concerns in the interim.

Hook received treatment with Adriamycin (doxorubicin) today. He may experience some transient gastrointestinal upset like mild vomiting, diarrhea, or loss of appetite over the next 1-5 days. Please use the medications provided for chemotherapy related side effects if they are needed. These side effects may never occur, but if he vomits more than two times in 24 hours or misses two meals in a row, please call our office for further direction. If a chemotherapy injection was administered today a bandage has been placed over the injection site. Please remove the bandage after approximately 20 minutes.

In addition to the transient gastrointestinal side effects of chemotherapy, there is also the risk of bone marrow suppression. If your pet becomes excessively lethargic approximately 6-10 days after chemotherapy treatment, the cell counts may be low. Please call our office for further direction.

For 72 hours (3 days) after your pet's chemotherapy treatment small amounts of chemotherapy metabolites will be present in the urine and/or feces. If your pet has an accident in the house, gloves should be worn and the area should be cleaned with soap and water. Waste products should be double-bagged and placed in the trash. Young children, those who are immunosuppressed, and women who are nursing or actively trying to conceive should not handle your pet's waste products. Fur does not contain chemotherapy metabolites and is not hazardous. (Ricardo Fernandez, DVM)

- 4/17/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 - in a clinical remission (Ricardo Fernandez, DVM)
- 4/17/2020 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well at home. He is on prednisone 10mg once daily. (Ricardo Fernandez, DVM)
- 3/27/2020 **Benadryl (diphenhydramine)(50mg/ml Sol)/ml - (1.2)**. Given IM (Ricardo Fernandez, DVM)
- 3/27/2020 **Chemo Medical Waste Disposal** - (Ricardo Fernandez, DVM)
- 3/27/2020 **Catheter-IV** - (Ricardo Fernandez, DVM)
- 3/27/2020 **Phaseal Level 2 Chemo Prep & Administration** - (Ricardo Fernandez, DVM)
- 3/27/2020 **Adriamycin(doxorubicin) (2mg/ml Sol)/mg - (28)**. Given at 28mg/m² IV (total of 28mg). (Ricardo Fernandez, DVM)
- 3/27/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)
- 3/27/2020 **Remission Progress Examination** - SUBJECTIVE: BAR
TEMP: 100.4
EENT: Clear
ORO-NASAL: pink, no masses
Heart: 120
LUNGS:clear
ABDOMEN:soft, no masses
MUSCULOSKELETAL: good body condition
INTEGUMENTARY: normal
LYMPH NODES:normal
Right/Left Mandibular: normal
Right/Left Prescapular:normal

Right/Left Axillary: normal
Right/Left Inguinal: normal
Right/Left Popliteal: normal (Ricardo Fernandez, DVM)

3/27/2020

Blood Results - IDEXX - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.24 5.65-8.87 M/ μ L
HCT42.1 37.3-61.7 %
HGB15.4 13.1-20.5 g/dL
MCV67.5 61.6-73.5fL
MCH24.7 21.2-25.9pg
MCHC 36.6 32.0-37.9 g/dL
RDW15.2 13.6-21.7 %
%RETIC 0.9 - %
RETIC 58.7 10.0-110.0 K/ μ L
RETIC-HGB 27.5 22.3-29.6pg
WBC 16.83 5.05-16.76 K/ μ L
%NEU 78.2 - %
%LYM 11.4 - %
%MONO 9.7 - %
%EOS0.4 - %
%BASO 0.3 - %
NEU 13.15 2.95-11.64 K/ μ L
LYM1.92 1.05-5.10 K/ μ L
MONO 1.64 0.16-1.12 K/ μ L
EOS0.07 0.06-1.23 K/ μ L
BASO 0.05 0.00-0.10 K/ μ L
PLT 330148-484 K/ μ L
MPV12.2 8.7-13.2fL
PDW11.1 9.1-19.4fL
PCT0.40 0.14-0.46 %

3/27/2020

Plan - Hook looked great on examination and his peripheral lymph nodes are all normal. He is responding to chemotherapy very well so far. His bloodwork today did not reveal any significant abnormalities so he received Adriamycin #2. He is due for a physical examination, CBC and Adriamycin #3 in 3 weeks. Please let us know if you have any questions or concerns in the interim.

Hook received treatment with Adriamycin (doxorubicin) today. He may experience some transient gastrointestinal upset like mild vomiting, diarrhea, or loss of appetite over the next 1-5 days. Please use the medications provided for chemotherapy related side effects if they are needed. These side effects may never occur, but if he vomits more than two times in 24 hours or misses two meals in a row, please call our office for further direction. If a chemotherapy injection was administered today a bandage has been placed over the injection site. Please remove the bandage after approximately 20 minutes.

In addition to the transient gastrointestinal side effects of chemotherapy, there is also the risk of bone marrow suppression. If your pet becomes excessively lethargic approximately 6-10 days after chemotherapy treatment, the cell counts may be low. Please call our office for further direction.

For 72 hours (3 days) after your pet's chemotherapy treatment small amounts of chemotherapy metabolites will be present in the urine and/or feces. If your pet has an accident in the house, gloves should be worn and the area should be cleaned with soap and water. Waste products should be double-bagged and placed in the trash. Young children, those who are immunosuppressed, and women who are nursing or actively trying to

conceive should not handle your pet's waste products. Fur does not contain chemotherapy metabolites and is not hazardous. (Ricardo Fernandez, DVM)

3/27/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 - in a clinical remission (Ricardo Fernandez, DVM)

3/27/2020 **History** - Hook presented today for continued treatment for multicentric lymphoma. He has been doing well at home. He is on prednisone 20mg once daily. (Ricardo Fernandez, DVM)

3/6/2020 **Blood Results - IDEXX** - Blood Results - IDEXX

Assay Name Value Ref. Range Units

RBC6.32 5.65-8.87 M/ μ L
HCT42.3 37.3-61.7 %
HGB15.4 13.1-20.5 g/dL
MCV66.9 61.6-73.5fL
MCH24.4 21.2-25.9pg
MCHC 36.4 32.0-37.9 g/dL
RDW13.4 13.6-21.7 %
%RETIC 0.2 - %
RETIC 10.1 10.0-110.0 K/ μ L
RETIC-HGB 26.2 22.3-29.6pg
WBC 11.70 5.05-16.76 K/ μ L
%NEU * 65.9 - %
%LYM * 16.4 - %
%MONO * 15.9 - %
%EOS1.5 - %
%BASO 0.3 - %
NEU * 7.71 2.95-11.64 K/ μ L
BAND * Suspected -
LYM * 1.92 1.05-5.10 K/ μ L
MONO * 1.86 0.16-1.12 K/ μ L
EOS0.17 0.06-1.23 K/ μ L
BASO 0.04 0.00-0.10 K/ μ L
PLT 270148-484 K/ μ L
MPV11.7 8.7-13.2fL
PDW11.2 9.1-19.4fL
PCT0.32 0.14-0.46 %

3/6/2020 **Benadryl (diphenhydramine)(50mg/ml Sol)/ml** - (1.2). Given IM. (Ricardo Fernandez, DVM)

3/6/2020 **Chemo Medical Waste Disposal** - (Ricardo Fernandez, DVM)

3/6/2020 **Catheter-IV** - (Ricardo Fernandez, DVM)

3/6/2020 **Phaseal Level 2 Chemo Prep & Administration** - (Ricardo Fernandez, DVM)

3/6/2020 **Adriamycin(doxorubicin) (2mg/ml Sol)/mg** - (26). Given at 27mg/m² IV (total of 26mg). Will increase the dose going forward if he tolerates this dose well. (Ricardo Fernandez, DVM)

3/6/2020 **Metronidazole 250mg** - (40)
Give 1 and 1/2 tablets by mouth every 12 hours as needed for diarrhea. (Ricardo Fernandez, DVM)











- 3/6/2020 **Cerenia 60mg** - Give 1 tablet orally once daily as needed for nausea, vomiting or poor appetite. (Ricardo Fernandez, DVM)
- 3/6/2020 **CBC/Differential** - (Ricardo Fernandez, DVM)
- 3/6/2020 **Oncology New Patient Consultation** - SUBJECTIVE: BAR
 TEMP: 101.5
 EENT: Clear
 ORO-NASAL: pink, no masses
 Heart: 120
 LUNGS:clear
 ABDOMEN:soft, no masses
 MUSCULOSKELETAL: good body condition
 INTEGUMENTARY: normal
 LYMPH NODES:normal
 Right/Left Mandibular: prominent
 Right/Left Prescapular:normal
 Right/Left Axillary: normal
 Right/Left Inguinal: normal
 Right/Left Popliteal: prominent
 Rectal: no abnormalities. (Ricardo Fernandez, DVM)
- 3/6/2020 **Plan** - Hook has been diagnosed with multicentric lymphoma. He has already received a dose of l-asparaginase last week (at the University of Florida) and his disease has responded very well and he is likely already in a clinical remission. To help us better characterize Hook's lymphoma, we normally recommended completing immune-phenotyping (flow cytometry) to determine the underlying lymphoma subtype (B vs T cell), and to assess for unique cellular markers which would allow us to provide prognostic information for this disease. Flow cytometry cannot be performed at this time as he has already been treated and his disease is likely already in a clinical remission.
- The recommended course of treatment for multicentric lymphoma is a multi-agent CHOP based chemotherapy protocol, which affords a greater than 90% positive response rate and median remission duration of 10-12 months for B-cell lymphoma (6-7 months for T cell lymphoma). This protocol consists of weekly intravenous injections of alternating chemotherapy agents for 19 weeks with off treatment weeks. The use of a single agent chemotherapy protocol may be considered as a less intense and more cost-conscious treatment option, however remission rates and survival times are correspondingly lower (50-80% response, with disease control for 6 to 9 months again depending on the type of lymphoma). Corticosteroid therapy alone can provide a short-term clinical benefit in 50% of patients, ranging from 1 to 2 months.
- You have elected to proceed with a single agent Adriamycin protocol. This is an intravenous chemotherapy administered every 3 weeks for a total of 5 doses. I have started him at a lower dose and will consider increasing it to a full dose if he tolerates it well. His bloodwork (CBC) today did not reveal any significant abnormalities so he received Adriamycin #1. He is due for a physical examination and CBC in 1 week (this is to check for any evidence of bone marrow suppression as a side effect to the chemotherapy; you may do this with your primary care veterinarian if more convenient). He is then due for a physical examination, CBC and Adriamycin #2 in 3 weeks from now. Please let us know if you have any questions or concerns in the interim. (Ricardo Fernandez, DVM)
- 3/6/2020 **Assessment** - Multicentric lymphoma, received l-asparaginase on 27FEB20, started Adriamycin single agent on 06MAR20 (Ricardo Fernandez, DVM)
- 3/6/2020 **History** - Hook presented today for a consultation for multicentric lymphoma. He received l-asparaginase last week and has been doing well at home except for soft/watery stools. He is on prednisone 20mg once daily. (Ricardo Fernandez, DVM)

3/6/2020









Previous History - Hook is a 6 year old male neutered mixed breed presenting today for an oncology consultation for lymphoma. Owners noticed that Hooks lymph nodes were enlarged 2/25/20, a cytology performed by his primary veterinarian showed lymphoma. 2/27/20 Hook was seen at the University of Florida for an oncology consultation. A CBC/Chemistry was performed and was within normal limits, and L-aspirginaese injection was given as well. Currently Hook is on Prednisone 20mg SID at a tapering doage, he is having soft stools. (Ricardo Fernandez, DVM)

Lab Results:

5/14/2021

Assay Name	Value	Ref. Range	Units	
GLU	104	74-143	mg/dL	
CREA	1.5	0.5-1.8	mg/dL	
BUN	21	7-27	mg/dL	
BUN/CREA	14	-		
TP	6.6	5.2-8.2	g/dL	
ALB	3.5	2.3-4.0	g/dL	
GLOB	3.2	2.5-4.5	g/dL	
ALB/GLOB	1.1	-		
ALT	48	10-125	U/L	
ALKP	42	23-212	U/L	

5/14/2021

Assay Name	Value	Ref. Range	Units	
RBC	6.62	5.65-8.87	M/ μ L	
HCT	44.2	37.3-61.7	%	
HGB	15.7	13.1-20.5	g/dL	
MCV	66.8	61.6-73.5	fL	
MCH	23.7	21.2-25.9	pg	
MCHC	35.5	32.0-37.9	g/dL	
RDW	15.4	13.6-21.7	%	
%RETIC	0.9	-	%	

RETIC	56.3	10.0-110.0	K/ μ L	
RETIC-HGB	25.0	22.3-29.6	pg	
WBC	11.10	5.05-16.76	K/ μ L	
%NEU	55.9	-	%	
%LYM	19.2	-	%	
%MONO	11.2	-	%	
%EOS	13.5	-	%	
%BASO	0.2	-	%	
NEU	6.21	2.95-11.64	K/ μ L	
LYM	2.13	1.05-5.10	K/ μ L	
MONO	1.24	0.16-1.12	K/ μ L	
EOS	1.50	0.06-1.23	K/ μ L	
BASO	0.02	0.00-0.10	K/ μ L	
PLT	227	148-484	K/ μ L	
MPV	12.5	8.7-13.2	fL	
PDW	12.4	9.1-19.4	fL	
PCT	0.28	0.14-0.46	%	

4/23/2021

Assay Name	Value	Ref. Range	Units	
RBC	7.08	5.65-8.87	M/ μ L	
HCT	46.7	37.3-61.7	%	
HGB	16.5	13.1-20.5	g/dL	
MCV	66.0	61.6-73.5	fL	
MCH	23.3	21.2-25.9	pg	
MCHC	35.3	32.0-37.9	g/dL	
RDW	17.3	13.6-21.7	%	

%RETIC	1.3	-	%	
RETIC	94.2	10.0-110.0	K/ μ L	
RETIC-HGB	25.8	22.3-29.6	pg	
WBC	11.70	5.05-16.76	K/ μ L	
%NEU	49.6	-	%	
%LYM	22.6	-	%	
%MONO	12.0	-	%	
%EOS	14.9	-	%	
%BASO	0.9	-	%	
NEU	5.82	2.95-11.64	K/ μ L	
LYM	2.64	1.05-5.10	K/ μ L	
MONO	1.40	0.16-1.12	K/ μ L	
EOS	1.74	0.06-1.23	K/ μ L	
BASO	0.10	0.00-0.10	K/ μ L	
PLT	321	148-484	K/ μ L	
MPV	12.5	8.7-13.2	fL	
PDW	11.6	9.1-19.4	fL	
PCT	0.40	0.14-0.46	%	

3/5/2021

Assay Name	Value	Ref. Range	Units	
RBC	6.75	5.65-8.87	M/ μ L	

HCT	43.6	37.3-61.7	%	
HGB	15.7	13.1-20.5	g/dL	
MCV	64.6	61.6-73.5	fL	
MCH	23.3	21.2-25.9	pg	
MCHC	36.0	32.0-37.9	g/dL	
RDW	15.1	13.6-21.7	%	
%RETIC	0.6	-	%	
RETIC	41.2	10.0-110.0	K/μL	
RETIC-HGB	25.9	22.3-29.6	pg	
WBC	11.62	5.05-16.76	K/μL	
%NEU	52.3	-	%	
%LYM	20.8	-	%	
%MONO	10.8	-	%	
%EOS	15.8	-	%	
%BASO	0.3	-	%	
NEU	6.06	2.95-11.64	K/μL	
LYM	2.42	1.05-5.10	K/μL	
MONO	1.26	0.16-1.12	K/μL	
EOS	1.84	0.06-1.23	K/μL	
BASO	0.04	0.00-0.10	K/μL	
PLT	255	148-484	K/μL	
MPV	12.8	8.7-13.2	fL	
PDW	13.4	9.1-19.4	fL	
PCT	0.33	0.14-0.46	%	

10/9/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.72	5.65-8.87	M/ μ L	
HCT	44.3	37.3-61.7	%	
HGB	15.3	13.1-20.5	g/dL	
MCV	65.9	61.6-73.5	fL	
MCH	22.8	21.2-25.9	pg	
MCHC	34.5	32.0-37.9	g/dL	
RDW	15.7	13.6-21.7	%	
%RETIC	1.0	-	%	
RETIC	66.5	10.0-110.0	K/ μ L	
RETIC-HGB	25.1	22.3-29.6	pg	
WBC	12.66	5.05-16.76	K/ μ L	
%NEU	56.6	-	%	
%LYM	22.4	-	%	
%MONO	6.3	-	%	
%EOS	14.1	-	%	
%BASO	0.6	-	%	
NEU	7.17	2.95-11.64	K/ μ L	
LYM	2.83	1.05-5.10	K/ μ L	
MONO	0.80	0.16-1.12	K/ μ L	
EOS	1.79	0.06-1.23	K/ μ L	
BASO	0.07	0.00-0.10	K/ μ L	
PLT	240	148-484	K/ μ L	
MPV	13.4	8.7-13.2	fL	
PDW	13.4	9.1-19.4	fL	
PCT	0.32	0.14-0.46	%	

8/21/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.85	5.65-8.87	M/ μ L	
HCT	43.3	37.3-61.7	%	
HGB	15.3	13.1-20.5	g/dL	
MCV	63.2	61.6-73.5	fL	
MCH	22.3	21.2-25.9	pg	
MCHC	35.3	32.0-37.9	g/dL	
RDW	19.6	13.6-21.7	%	
%RETIC	0.6	-	%	
RETIC	43.8	10.0-110.0	K/ μ L	
RETIC-HGB	24.3	22.3-29.6	pg	
WBC	14.60	5.05-16.76	K/ μ L	
%NEU	59.8	-	%	
%LYM	21.4	-	%	
%MONO	7.2	-	%	
%EOS	10.8	-	%	
%BASO	0.8	-	%	
NEU	8.74	2.95-11.64	K/ μ L	
LYM	3.12	1.05-5.10	K/ μ L	
MONO	1.05	0.16-1.12	K/ μ L	
EOS	1.57	0.06-1.23	K/ μ L	
BASO	0.12	0.00-0.10	K/ μ L	
PLT	291	148-484	K/ μ L	
MPV	13.5	8.7-13.2	fL	
PDW	13.9	9.1-19.4	fL	
PCT	0.39	0.14-0.46	%	











7/17/2020

Assay Name	Value	Ref. Range	Units	
RBC	7.33	5.65-8.87	M/ μ L	
HCT	46.5	37.3-61.7	%	
HGB	16.2	13.1-20.5	g/dL	
MCV	63.4	61.6-73.5	fL	
MCH	22.1	21.2-25.9	pg	
MCHC	34.8	32.0-37.9	g/dL	
RDW	19.6	13.6-21.7	%	
%RETIC	0.5	-	%	
RETIC	38.8	10.0-110.0	K/ μ L	
RETIC-HGB	25.6	22.3-29.6	pg	
WBC	10.40	5.05-16.76	K/ μ L	
%NEU	61.9	-	%	
%LYM	22.5	-	%	
%MONO	8.0	-	%	
%EOS	7.3	-	%	
%BASO	0.3	-	%	
NEU	6.44	2.95-11.64	K/ μ L	
LYM	2.34	1.05-5.10	K/ μ L	
MONO	0.83	0.16-1.12	K/ μ L	
EOS	0.76	0.06-1.23	K/ μ L	
BASO	0.03	0.00-0.10	K/ μ L	
PLT	248	148-484	K/ μ L	
MPV	13.9	8.7-13.2	fL	
PDW	13.6	9.1-19.4	fL	
PCT	0.34	0.14-0.46	%	


6/26/2020

Assay Name	Value	Ref. Range	Units	
RBC	7.35	5.65-8.87	M/ μ L	
HCT	47.2	37.3-61.7	%	
HGB	16.4	13.1-20.5	g/dL	
MCV	64.2	61.6-73.5	fL	
MCH	22.3	21.2-25.9	pg	
MCHC	34.7	32.0-37.9	g/dL	
RDW	19.3	13.6-21.7	%	
%RETIC	0.8	-	%	
RETIC	59.5	10.0-110.0	K/ μ L	
RETIC-HGB	25.0	22.3-29.6	pg	
WBC	11.37	5.05-16.76	K/ μ L	
%NEU	59.8	-	%	
%LYM	20.0	-	%	
%MONO	10.0	-	%	
%EOS	9.6	-	%	
%BASO	0.6	-	%	
NEU	6.80	2.95-11.64	K/ μ L	
LYM	2.27	1.05-5.10	K/ μ L	
MONO	1.14	0.16-1.12	K/ μ L	
EOS	1.09	0.06-1.23	K/ μ L	
BASO	0.07	0.00-0.10	K/ μ L	
PLT	310	148-484	K/ μ L	
MPV	14.3	8.7-13.2	fL	
PDW	15.4	9.1-19.4	fL	
PCT	0.44	0.14-0.46	%	

5/29/2020

Assay Name	Value	Ref. Range	Units	
GLU	102	74-143	mg/dL	
CREA	1.4	0.5-1.8	mg/dL	
BUN	12	7-27	mg/dL	
BUN/CREA	9	-		
TP	7.2	5.2-8.2	g/dL	
ALB	3.4	2.3-4.0	g/dL	
GLOB	3.8	2.5-4.5	g/dL	
ALB/GLOB	0.9	-		
ALT	18	10-125	U/L	
ALKP	88	23-212	U/L	

5/29/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.83	5.65-8.87	M/ μ L	

HCT	45.4	37.3-61.7	%	
HGB	15.7	13.1-20.5	g/dL	
MCV	66.5	61.6-73.5	fL	
MCH	23.0	21.2-25.9	pg	
MCHC	34.6	32.0-37.9	g/dL	
RDW	18.4	13.6-21.7	%	
%RETIC	1.5	-	%	
RETIC	99.7	10.0-110.0	K/ μ L	
RETIC-HGB	23.2	22.3-29.6	pg	
WBC	11.68	5.05-16.76	K/ μ L	
%NEU	66.1	-	%	
%LYM	16.9	-	%	
%MONO	9.0	-	%	
%EOS	7.4	-	%	
%BASO	0.6	-	%	
NEU	7.72	2.95-11.64	K/ μ L	
LYM	1.97	1.05-5.10	K/ μ L	
MONO	1.05	0.16-1.12	K/ μ L	
EOS	0.87	0.06-1.23	K/ μ L	
BASO	0.07	0.00-0.10	K/ μ L	
PLT	291	148-484	K/ μ L	
MPV	14.0	8.7-13.2	fL	
PDW	14.7	9.1-19.4	fL	
PCT	0.41	0.14-0.46	%	

5/8/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.17	5.65-8.87	M/ μ L	
HCT	41.2	37.3-61.7	%	
HGB	14.5	13.1-20.5	g/dL	
MCV	66.8	61.6-73.5	fL	
MCH	23.5	21.2-25.9	pg	
MCHC	35.2	32.0-37.9	g/dL	
RDW	15.7	13.6-21.7	%	
%RETIC	1.5	-	%	
RETIC	95.0	10.0-110.0	K/ μ L	
RETIC-HGB	23.4	22.3-29.6	pg	
WBC	13.89	5.05-16.76	K/ μ L	
%NEU	67.4	-	%	
%LYM	13.5	-	%	
%MONO	11.4	-	%	
%EOS	7.1	-	%	
%BASO	0.6	-	%	
NEU	9.37	2.95-11.64	K/ μ L	
LYM	1.87	1.05-5.10	K/ μ L	
MONO	1.58	0.16-1.12	K/ μ L	
EOS	0.98	0.06-1.23	K/ μ L	
BASO	0.09	0.00-0.10	K/ μ L	
PLT	383	148-484	K/ μ L	
MPV	14.3	8.7-13.2	fL	
PDW	16.4	9.1-19.4	fL	
PCT	0.55	0.14-0.46	%	

4/17/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.30	5.65-8.87	M/ μ L	
HCT	42.9	37.3-61.7	%	
HGB	15.8	13.1-20.5	g/dL	
MCV	68.1	61.6-73.5	fL	
MCH	25.1	21.2-25.9	pg	
MCHC	36.8	32.0-37.9	g/dL	
RDW	16.1	13.6-21.7	%	
%RETIC	1.4	-	%	
RETIC	86.3	10.0-110.0	K/ μ L	
RETIC-HGB	26.2	22.3-29.6	pg	
WBC	14.46	5.05-16.76	K/ μ L	
%NEU	71.8	-	%	
%LYM	14.4	-	%	
%MONO	12.2	-	%	
%EOS	1.5	-	%	
%BASO	0.1	-	%	
NEU	10.37	2.95-11.64	K/ μ L	
LYM	2.08	1.05-5.10	K/ μ L	
MONO	1.77	0.16-1.12	K/ μ L	
EOS	0.22	0.06-1.23	K/ μ L	
BASO	0.02	0.00-0.10	K/ μ L	
PLT	309	148-484	K/ μ L	

MPV	12.4	8.7-13.2	fL	
PDW	12.5	9.1-19.4	fL	
PCT	0.38	0.14-0.46	%	






3/27/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.24	5.65-8.87	M/ μ L	
HCT	42.1	37.3-61.7	%	
HGB	15.4	13.1-20.5	g/dL	
MCV	67.5	61.6-73.5	fL	
MCH	24.7	21.2-25.9	pg	
MCHC	36.6	32.0-37.9	g/dL	
RDW	15.2	13.6-21.7	%	
%RETIC	0.9	-	%	
RETIC	58.7	10.0-110.0	K/ μ L	
RETIC-HGB	27.5	22.3-29.6	pg	
WBC	16.83	5.05-16.76	K/ μ L	
%NEU	78.2	-	%	
%LYM	11.4	-	%	
%MONO	9.7	-	%	
%EOS	0.4	-	%	

%BASO	0.3	-	%	
NEU	13.15	2.95-11.64	K/ μ L	
LYM	1.92	1.05-5.10	K/ μ L	
MONO	1.64	0.16-1.12	K/ μ L	
EOS	0.07	0.06-1.23	K/ μ L	
BASO	0.05	0.00-0.10	K/ μ L	
PLT	330	148-484	K/ μ L	
MPV	12.2	8.7-13.2	fL	
PDW	11.1	9.1-19.4	fL	
PCT	0.40	0.14-0.46	%	

3/6/2020

Assay Name	Value	Ref. Range	Units	
RBC	6.32	5.65-8.87	M/ μ L	
HCT	42.3	37.3-61.7	%	
HGB	15.4	13.1-20.5	g/dL	
MCV	66.9	61.6-73.5	fL	
MCH	24.4	21.2-25.9	pg	
MCHC	36.4	32.0-37.9	g/dL	
RDW	13.4	13.6-21.7	%	
%RETIC	0.2	-	%	
RETIC	10.1	10.0-110.0	K/ μ L	
RETIC-HGB	26.2	22.3-29.6	pg	
WBC	11.70	5.05-16.76	K/ μ L	
%NEU	* 65.9	-	%	
%LYM	* 16.4	-	%	
%MONO	* 15.9	-	%	
%EOS	1.5	-	%	
%BASO	0.3	-	%	

NEU	* 7.71	2.95-11.64	K/ μ L	
BAND	* Suspected	-		
LYM	* 1.92	1.05-5.10	K/ μ L	
MONO	* 1.86	0.16-1.12	K/ μ L	
EOS	0.17	0.06-1.23	K/ μ L	
BASO	0.04	0.00-0.10	K/ μ L	
PLT	270	148-484	K/ μ L	
MPV	11.7	8.7-13.2	fL	
PDW	11.2	9.1-19.4	fL	
PCT	0.32	0.14-0.46	%	