

**United States Food and Drug Administration  
Consumer Complaint / Injury Report**

This is an accurate reproduction of the original electronic record as of 05/23/2012

**COMPLAINT** # 126468

<b>Complaint Date</b>	<b>Receiving Organization</b>	<b>Accomplishing District</b>	<b>How Received</b>	<b>Complaint Source</b>	<b>Complaint Received By</b>	<b>Complaint Status</b>
05/23/2012	ATL-DO	ATL-DO	Telephone	Consumer	Harris,Georgette P	Closed

**Complainant Identification**

**Name** **Address**

(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)

<b>Phone (W)</b>	<b>Phone (H)</b>	<b>Source POC Name</b>	<b>Source Phone</b>
	(b) (6)(b) (6)		

**Complaint/Injury**

**Complaint Description**

<b>Complaint Description</b>	<b>Adverse Event Result</b>	<b>Adverse Event Date</b>	<b>Injury / Illness</b>
Consumer reports death of dog due to consumption of dog food. Dog, 14 yro, female, Chihuahua, weighing 5 lbs with a pre-existing heart murmur, consumed a combination of Natural Balance, Taste of the Wild and Canidae dog foods. On a normal basis, 1.5 cups of food was consumed daily. Complainant operates a animal rescue service therefore dog food was received from various locations including local donations from varying sources. Dog displayed symptoms of loss of appetite, lethargy and diarrhea.	Death	5/4/2012	

<b>Notify DEIO/EMOPS?</b>	<b>Notification Date</b>	<b>Attended Health Professional?</b>	<b>Required Hospitalization?</b>	<b>Emergency Room / Outpatient Visit?</b>	<b>Reported Complaint To?</b>	<b>Need addnl. FDA Contact?</b>
Yes	05/23/2012	Yes		Yes		

**Remarks**

**Complaint Symptoms**

<b>Symptom</b>	<b>System Affected</b>	<b>Onset Time</b>	<b>Duration</b>	<b>Remarks</b>
Change in appetite	GASTROINTESTINAL	1 Months		
Change in activity level (hyperactivity/lethargy)	NERVOUS	1 Months		
Diarrhea	GASTROINTESTINAL	1 Months		

**Health Care Professional**

<b>Provider Name</b>	<b>Address</b>	<b>Phone</b>	<b>Occupation</b>
(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)			Veterinarian

**Hospital Information**

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>Dates of Stay</b>

Date: 05/23/2012

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Emergency Room/Outpatient Visit

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>ER Date</b>
(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)			4/8-9/2012

Product and Labeling

<b>Brand Name</b>	<b>Product Name</b>	<b>Product Code</b>	<b>Product Description</b>	<b>PAC</b>	<b>UPC Code</b>
Natural Balance	Lamb Bison Venison	72BFH05	Comb Prod Pet Dog Food;Paper,Ntrl/Artfel Dried	71R801	ukn

<b>Qty / Unit / Package</b>	<b>Lot/ Serial #</b>	<b>Exp/Use by Date</b>	<b>Purchase Date</b>	<b>Product Used</b>	<b>Amount Consumed/Used</b>
	ukn	ukn		Yes	1.5 cup daily

<b>Date Used</b>	<b>Date Discontinued</b>	<b>Amount Remained</b>	<b>Imported Product?</b>	<b>Country of Origin</b>	<b>Label Remarks</b>
Mar 2012	Apr 2012	none	No		

Retail

<b>Name</b>	<b>Address</b>
ukn	

Problem Ingredient GroupManufacturer/Distributor

<b>FEI</b>	<b>Name &amp; Address</b>	<b>Home District</b>	<b>Firm Type</b>
3004348077	Diamond Pet Food Processors of SC, LLC Hwy 321 & Wood Trail Drive Gaston South Carolina United States 29053	ATL-DO	Manufacturer

Initial Evaluation/Initial Disposition

<b>Problem Keyword</b>	<b>Problem Keyword Details</b>
Death	
Reaction	lethargy, loss of appetite, diarrhea

<b>Initial Evaluation</b>	<b>Initial Disposition</b>	<b>Disposition Made By</b>	<b>Disposition Date</b>
Violation, Action in Process	Closed without further Investigation	Harris,Georgette P	05/23/2012

Initial Disposition Remarks

No product remaining, no additional product information available.

Referrals

<b>Org Name</b>	<b>HHS Mail Code</b>

There are no Cosmetics details for this Complaint.

There are no Adverse Event details for this Complaint.

**COMPLAINTS FOLLOW - UP****Grouped Follow - Up Operations**

Operation Id	Operation Code	Assignment Number	Accomplishing Organization	Performing Organization	Sample Number	PAF	Status	Status Date
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There are no Follow Up Operations related to this complaint.

**Disposition Summary**

Is Consumer Responsible?	Responsible FEI	Address	Name	Firm Type
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Follow-Up Disposition	Disposition Made By	Disposition Date
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**Disposition Remarks****Follow-Up Sent To**

Organization Name	HHS Mail Code
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# United States Food and Drug Administration

## Consumer Complaint / Injury Report

This is an accurate reproduction of the original electronic record as of 05/23/2012

COMPLAINT # 126246

Complaint Date	Receiving Organization	Accomplishing District	How Received	Complaint Source	Complaint Received By	Complaint Status
05/09/2012	ATL-DO	ATL-DO	Telephone		Harris,Georgette P	Closed

### Complainant Identification

Name	Address
(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)	(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)

Phone (W)	Phone (H)	Source POC Name	Source Phone
	(b) (6)(b) (6)		

### Complaint/Injury

#### Complaint Description

Consumer reports 1 death and 1 illness of dogs due to consumption of dog food product. Dog #1, 5 mo, male, not nurtured, weighing 18-20 lbs, is an Australian Border Collie. Within 2 days of consuming product, he began to experience loss of appetite and bloody diarrhea. Symptoms persisted until death on Apr 6, 2012. Dog was "free-feed" and ate about 4-5 times a day. Dog #2, a Lab mix, spayed female, weighing 80 lbs, age ukn has begun to experience same symptoms as dog #1. She consumed Kirkland Lamb Rice and Vegetable dog food, Lot #KLV0201A2XMS, UPC #096619253500, EXP DT: Mar 26, 2013 from a 40 lb bag. Ate 3 cups of product daily. Symptoms, bloody diarrhea and loss of appetite started on 5/5/2012. Neither dog was seen by a vet. Both products purchased from the (b) (4) on the same day.

Adverse Event  
Result  
Death

Adverse Event Date  
Apr 6, 2012

Injury / Illness

*1 illness*

Notify DEIO/EMOPS?	Notification Date	Attended Health Professional?	Required Hospitalization?	Emergency Room / Outpatient Visit?	Reported Complaint To?	Need addnl. FDA Contact?
Yes	05/09/2012	No	No	No		

#### Remarks

### Complaint Symptoms

Symptom	System Affected	Onset Time	Duration	Remarks
Change in appetite	GASTROINTESTINAL	2 Days		until death
Diarrhea	GASTROINTESTINAL	2 Days		bloody

### Health Care Professional

Provider Name	Address	Phone	Occupation

### Hospital Information

Hospital Name	Address	Phone	Dates of Stay

Emergency Room/Outpatient Visit

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>ER Date</b>
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Product and Labeling

<b>Brand Name</b>	<b>Product Name</b>	<b>Product Code</b>	<b>Product Description</b>	<b>PAC</b>	<b>UPC Code</b>
Kirklands	Puppy Chicken and Rice	72BFH05	Comb Prod Pet Dog Food;Paper;Ntrl/Artfel Dried	71R801	096619130313

<b>Qty / Unit / Package</b>	<b>Lot/ Serial #</b>	<b>Exp/Use by Date</b>	<b>Purchase Date</b>	<b>Product Used</b>	<b>Amount Consumed/Used</b>
20 Pounds Paper Bag	KCP0204D32 XRN	Feb 28, 2013	Mar 26, 2012	Yes	some

<b>Date Used</b>	<b>Date Discontinued</b>	<b>Amount Remained</b>	<b>Imported Product?</b>	<b>Country of Origin</b>	<b>Label Remarks</b>
Mar 27, 2012	Apr 6, 2012	some	No		

RetailProblem Ingredient Group

<b>Name</b>	<b>Address</b>
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(b) (4)	(b) (4)
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Manufacturer/Distributor

<b>FEI</b>	<b>Name &amp; Address</b>	<b>Home District</b>	<b>Firm Type</b>
3004348077	Diamond Pet Food Processors of SC, LLC Hwy 321 & Wood Trail Drive Gaston South Carolina United States 29053	ATL-DO	Manufacturer

Initial Evaluation/Initial Disposition

<b>Problem Keyword</b>	<b>Problem Keyword Details</b>
Reaction	bloody diarrhea, loss of appetite

<b>Initial Evaluation</b>	<b>Initial Disposition</b>	<b>Disposition Made By</b>	<b>Disposition Date</b>
Violation, Action in Process	Closed without further Investigation	Harris,Georgette P	05/09/2012

Initial Disposition Remarksrecalled productReferrals

<b>Org Name</b>	<b>HHS Mail Code</b>
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There are no Cosmetics details for this Complaint.

There are no Adverse Event details for this Complaint.

**COMPLAINTS FOLLOW - UP****Grouped Follow - Up Operations**

Operation Id	Operation Code	Assignment Number	Accomplishing Organization	Performing Organization	Sample Number	PAF	Status	Status Date
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There are no Follow Up Operations related to this complaint.

**Disposition Summary**

Is Consumer Responsible?	Responsible FEI	Address	Name	Firm Type
No	3004348077	Hwy 321 & Wood Trail Drive Gaston South Carolina United States 29053	Diamond Pet Food Processors of SC, LLC	Manufacturer

Follow-Up Disposition	Disposition Made By	Disposition Date
Recall	Harris,Georgette P	05/09/2012

**Disposition Remarks****Follow-Up Sent To**

Organization Name	HHS Mail Code
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# United States Food and Drug Administration

## Consumer Complaint / Injury Report

This is an accurate reproduction of the original electronic record as of 05/23/2012

**COMPLAINT** # 126212

Complaint Date	Receiving Organization	Accomplishing District	How Received	Complaint Source	Complaint Received By	Complaint Status
05/08/2012	ATL-DO	ATL-DO	Telephone	Consumer	Harris,Georgette P	Closed

### Complainant Identification

Name Address

(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)

Phone (W) Phone (H) Source POC Name Source Phone  
(b) (6)

### Complaint/Injury

Complaint Description	Adverse Event Result	Adverse Event Date	Injury / Illness
Consumer reports the death of her dog and cat from what she believes is the consumption of a dog food product. Both consumed the same product. Within a week of consuming product both dog and cat displayed the same symptoms, lethargy, loss of appetite and increased water intake. Dog, 11 yro Weimareriner weighing 50 lbs died on 4/8/2012. Cat, who also occasionally consumed cat food was a 12 yro mixed Siamese, died on 4/27/2012. Neither received medical attention.	Death		

Notify DEIO/EMOPS?	Notification Date	Attended Health Professional?	Required Hospitalization?	Emergency Room / Outpatient Visit?	Reported Complaint To?	Need addnl. FDA Contact?
Yes	05/08/2012	No	No	No		No

### Remarks

### Complaint Symptoms

Symptom	System Affected	Onset Time	Duration	Remarks
Change in appetite	GASTROINTESTINAL	1 Weeks		until death
Change in activity level (hyperactivity/lethargy)	NERVOUS	1 Weeks		until death
Change in thirst or water intake	METABOLIC	1 Weeks		until death

### Health Care Professional

Provider Name	Address	Phone	Occupation
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### Hospital Information

Hospital Name	Address	Phone	Dates of Stay
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### Emergency Room/Outpatient Visit

Hospital Name	Address	Phone	ER Date
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**Product and Labeling**

Brand Name	Product Name	Product Code	Product Description	PAC	UPC Code
Diamond	Maintenance Adult Dog Food	72BFH05	Comb Prod Pet Dog Food;Paper,Ntrl/Artfel Dried	71R801	ukn

Qty / Unit / Package	Lot/ Serial #	Exp/Use by Date	Purchase Date	Product Used	Amount Consumed/Used
40 Pounds Paper Bag	DMD0104C21 XAG 1806	02/22/2013	ukn	Yes	most

Date Used	Date Discontinued	Amount Remained	Imported Product?	Country of Origin	Label Remarks
04/02/2012	04/08/2012	little	No		

**Retail****Problem Ingredient Group**

Name	Address
(b) (4)(b) (4)	(b) (4)

**Manufacturer/Distributor**

FEI	Name & Address	Home District	Firm Type
3004348077	Diamond Pet Food Processors of SC, LLC Hwy 321 & Wood Trail Drive Gaston South Carolina United States 29053	ATL-DO	Manufacturer

**Initial Evaluation/Initial Disposition**

Problem Keyword	Problem Keyword Details
Reaction	decreased appetite, lethargy,excessive thirst

Initial Evaluation	Initial Disposition	Disposition Made By	Disposition Date
Violation, Action in Process	Closed without further Investigation	Harris,Georgette P	05/08/2012

**Initial Disposition Remarks**

no UPC provided

**Referrals**

Org Name	HHS Mail Code

There are no Cosmetics details for this Complaint.

There are no Adverse Event details for this Complaint.

**COMPLAINTS FOLLOW - UP****Grouped Follow - Up Operations**

Operation Id	Operation Code	Assignment Number	Accomplishing Organization	Performing Organization	Sample Number	PAF	Status	Status Date
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There are no Follow Up Operations related to this complaint.

**Disposition Summary**

Is Consumer Responsible?	Responsible FEI	Address	Name	Firm Type
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Follow-Up Disposition	Disposition Made By	Disposition Date
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**Disposition Remarks****Follow-Up Sent To**

Organization Name	HHS Mail Code
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# United States Food and Drug Administration

## Consumer Complaint / Injury Report

This is an accurate reproduction of the original electronic record as of 05/17/2012

<b>COMPLAINT</b>	<b># 125899</b>
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<b>Complaint Date</b>	<b>Receiving Organization</b>	<b>Accomplishing District</b>	<b>How Received</b>	<b>Complaint Source</b>	<b>Complaint Received By</b>	<b>Complaint Status</b>
04/18/2012	ATL-DO	ATL-DO	Telephone	Consumer	Harris,Georgette P	Follow Up Requested

### Complainant Identification

**Name** **Address**

(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)

**Phone (W)** **Phone (H)** **Source POC Name** **Source Phone**

(b) (6)

### Complaint/Injury

<b>Complaint Description</b>	<b>Adverse Event Result</b>	<b>Adverse Event Date</b>	<b>Injury / Illness</b>
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Complainant reports death of dog due to consumption of dog food product. Dog, Alaskan Husky, female, 9 yro, weighing 40 lbs had no pre-existing health concerns. Within 2 days of consuming food she experienced diarrhea, vomiting, lethargy, fever (106) and increased water intake. All symptoms persisted until death on Apr 8, 2012. Also consumed occasional table scraps. No necropsy performed.

Death

Apr 8, 2012

<b>Notify DEIO/EMOPS?</b>	<b>Notification Date</b>	<b>Attended Health Professional?</b>	<b>Required Hospitalization?</b>	<b>Emergency Room / Outpatient Visit?</b>	<b>Reported Complaint To?</b>	<b>Need addnl. FDA Contact?</b>
Yes	04/18/2012	Yes				

### Remarks

### Complaint Symptoms

<b>Symptom</b>	<b>System Affected</b>	<b>Onset Time</b>	<b>Duration</b>	<b>Remarks</b>
Change in activity level (hyperactivity/lethargy)	NERVOUS	2		lethargy
Change in thirst or water intake	METABOLIC	2		
Vomiting	GASTROINTESTINAL	2		
Change in body temperature	CARDIOVASCULAR	2		106

### Health Care Professional

<b>Provider Name</b>	<b>Address</b>	<b>Phone</b>	<b>Occupation</b>
(b) (4)(b) (4)(b) (4)	(b) (4)(b) (4)		Veterinarian

### Hospital Information

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>Dates of Stay</b>
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Emergency Room/Outpatient Visit

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>ER Date</b>
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Product and Labeling

<b>Brand Name</b>	<b>Product Name</b>	<b>Product Code</b>	<b>Product Description</b>	<b>PAC</b>	<b>UPC Code</b>
Diamond	Lamb & Rice Formula	72BFB99	Pet Dog Food N.E.C.;Paper;Heat/Pastor/Retort	71R801	0741986081 77

<b>Qty / Unit / Package</b>	<b>Lot/ Serial #</b>	<b>Exp/Use by Date</b>	<b>Purchase Date</b>	<b>Product Used</b>	<b>Amount Consumed/Used</b>
40 Pounds Paper Bag	DLR0102A31 XAN	1/10/2013	Mar 2012	Yes	10 lbs

<b>Date Used</b>	<b>Date Discontinued</b>	<b>Amount Remained</b>	<b>Imported Product?</b>	<b>Country of Origin</b>	<b>Label Remarks</b>
~Apr 4, 2012	~Apr 6, 2012	30 lbs	No		

RetailProblem Ingredient Group

<b>Name</b>	<b>Address</b>
(b) (4)(b) (4)	(b) (4)

Manufacturer/Distributor

<b>FEI</b>	<b>Name &amp; Address</b>	<b>Home District</b>	<b>Firm Type</b>
3004348077	Diamond Pet Food Processors of SC, LLC Hwy 321 & Wood Trail Drive Gaston South Carolina United States 29053	ATL-DO	Manufacturer

Initial Evaluation/Initial Disposition

<b>Problem Keyword</b>	<b>Problem Keyword Details</b>
Death	Apr 8, 2012

<b>Initial Evaluation</b>	<b>Initial Disposition</b>	<b>Disposition Made By</b>	<b>Disposition Date</b>
FDA Action Indicated	Immediate Follow-Up	Harris,Georgette P	04/23/2012

Initial Disposition RemarksReferrals

<b>Org Name</b>	<b>HHS Mail Code</b>
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There are no Cosmetics details for this Complaint.

There are no Adverse Event details for this Complaint.

**COMPLAINTS FOLLOW - UP****Grouped Follow - Up Operations**

Operation Id	Operation Code	Assignment Number	Accomplishing Organization	Performing Organization	Sample Number	PAF	Status	Status Date
6098855	31	1401780	ATL-DO	ATL-IB-PH	749114		Completed	05/11/2012
6098855	31	1401780	ATL-DO	ATL-IB-PH	749114		Completed	05/11/2012
6098855	31	1401780	ATL-DO	ATL-IB-PH	749114		Completed	05/11/2012
6133161	13	1407979	ATL-DO	ATL-IB-PH			Completed	05/15/2012

**Disposition Summary**

Is Consumer Responsible?	Responsible FEI	Address	Name	Firm Type
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Follow-Up Disposition	Disposition Made By	Disposition Date
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**Disposition Remarks****Follow-Up Sent To**

Organization Name	HHS Mail Code
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# United States Food and Drug Administration

## Consumer Complaint / Injury Report

This is an accurate reproduction of the original electronic record as of 05/23/2012

**COMPLAINT** # 126326

Complaint Date	Receiving Organization	Accomplishing District	How Received	Complaint Source	Complaint Received By	Complaint Status
05/14/2012	FLA-DO	ATL-DO	Telephone	Consumer	Milan,Stephanie C	Assigned

### Complainant Identification

Name Address

(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)

Phone (W)	Phone (H)	Source POC Name	Source Phone
	(b) (6)(b) (6)(b) (6)(b) (6)(b) (6)		727-492-5352

### Complaint/Injury

#### Complaint Description

In Mid march the owner's dog a (1/2 German Shepard & 1/2 Golden Retriever) was introduced to "Kirkland Signature Adult Dog Food" for an approximate two week time span. The owner noticed that his dog had started having diarrhea and acting lethargic.

#### Adverse Event Result

Death

#### Adverse Event Date

04/13/2012

#### Injury / Illness

Gastrointestinal distress

The dog owner went on vacation to GA and took the dog with him; however, the owner left the "Kirkland Signature Adult Dog Food" at home. During the vacation the dog ate an unknown brand of dog food and the dog's health greatly improved. While in GA the owner had his niece, a veterinarian run test on the dog and the dog was given a clean bill of health, (the owner can provide medical records).

Upon returning home the dog was reintroduced to "Kirkland Signature Adult Dog Food". Within a week and a half the dog became ill, lethargic, had diarrhea, had lost of bowels, went into convulsions, and died at (b) (4)(b) (4)(b) (4)(b) (4)

The owner stated he had not made a connection between the dog's food and the dog's death, until this weekend when he received a recall notification from Costco on the "Kirkland Signature Adult Dog Food". The notification informed him that he may have purchased a recalled lot of "Kirkland Signature Adult Dog Food". He checked the bag of "Kirkland Signature Adult Dog Food" and has a recalled lot.

Notify DEIO/EMOPS?	Notification Date	Attended Health Professional?	Required Hospitalization?	Emergency Room / Outpatient Visit?	Reported Complaint To?	Need addnl. FDA Contact?
Yes	05/14/2012	Yes	No	No	Not Report to Other Source	

### Remarks

The owner and his wife experienced some diarrhea during the time span that they were feed the dog the "Kirkland Signature

Date: 05/23/2012

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Adult Dog Food". However, they are not sure if it was just normal everyday incidents or linked to the dog food. Prior to the dog's death, the dog became lethargic, had diarrhea, lost of bowels, convulsions. No medical test were conducted to link the dog's death to salmonella infantis.

### Complaint Symptoms

Sympton	System Affected	Onset Time	Duration	Remarks
Diarrhea	GASTROINTESTINAL			The dog did not have a history of gastrointestinal illness. Dog was on a very strict diet, and no human food. The dog was not allowed outside without supervision.
Death	CARDIOVASCULAR			The dog was rushed to the veterinarian to seek medical treatment; no medical test could be conducted, since the dog died to quickly after arrival at the veterinarian. A necropsy was not conducted.
Change in appetite	GASTROINTESTINAL			The dog stopped eating approximately 3 day's before his death.
Abdominal swelling	BLOOD OR LYMPHATIC			The owner stated that when he picked up the dog, to carry the dog to the car and into the veterinarian he noticed that the dogs abdomen appeared to be swollen.
Seizures/convulsions	NERVOUS			On 04/13/2012, the owner came home from work and found the dog on the floor appearing to be having a seizure or in convulsions.
Involuntary Bowel Movement	GASTROINTESTINAL			On 04/13/2012, when the owner lifted the dog to place the dog into the car the dog lost bowl function.
Change in activity level (hyperactivity/lethargy)	NERVOUS			Please see "Complaint Description" for details

### Health Care Professional

Provider Name	Address	Phone	Occupation
(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)			Veterinarian

**Hospital Information**

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>Dates of Stay</b>
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**Emergency Room/Outpatient Visit**

<b>Hospital Name</b>	<b>Address</b>	<b>Phone</b>	<b>ER Date</b>
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**Product and Labeling**

<b>Brand Name</b>	<b>Product Name</b>	<b>Product Code</b>	<b>Product Description</b>	<b>PAC</b>	<b>UPC Code</b>
Kirkland Signature	Adult Dog Food	72BFH05	Comb Prod Pet Dog Food;Paper,Ntrl/Artfel Dried	71R801	

<b>Qty / Unit / Package</b>	<b>Lot/ Serial #</b>	<b>Exp/Use by Date</b>	<b>Purchase Date</b>	<b>Product Used</b>	<b>Amount Consumed/Used</b>
50 Pounds Paper Bag			March 2012	Yes	1/4 of the 50lb bag

<b>Date Used</b>	<b>Date Discontinued</b>	<b>Amount Remained</b>	<b>Imported Product?</b>	<b>Country of Origin</b>	<b>Label Remarks</b>
	04/13/2012	3/4 bag	No		Lableing expected from consyumer by 05/15/2012

**Retail****Problem Ingredient Group**

<b>Name</b>	<b>Address</b>
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(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)(b) (4)
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**Manufacturer/Distributor**

<b>FEI</b>	<b>Name &amp; Address</b>	<b>Home District</b>	<b>Firm Type</b>
3004348077	Diamond Pet Food Processors of SC, LLC Hwy 321 & Wood Trail Drive Gaston South Carolina United States 29053	ATL-DO	Manufacturer

**Initial Evaluation/Initial Disposition**

<b>Problem Keyword</b>	<b>Problem Keyword Details</b>
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Death

<b>Initial Evaluation</b>	<b>Initial Disposition</b>	<b>Disposition Made By</b>	<b>Disposition Date</b>
FDA Action Indicated	Referred to Other FDA District	Milan,Stephanie C	05/15/2012

**Initial Disposition Remarks**

Potential dog death associated with Salmonella infantis, Diamond Dog Food recalled product.

**Referrals**

<b>Org Name</b>	<b>HHS Mail Code</b>
ATL-IB	HFR-SE150

There are no Cosmetics details for this Complaint.

Complaint #

**ADVERSE EVENT DETAILS****Product Name** Adult Dog Food**Product Code** 72BFH05

<b>Birth Date</b>	<b>Age</b>	<b>Gender</b>	<b>Race</b>	<b>Previous Adv Effects of Product?</b>
	10	Male		Yes

<b>Consumption Site</b>	<b>Recommended Dosage/Serving Size</b>	<b>Label Indications for Use</b>
Home	Unknown	Photos of label coming

<b>Recommended Duration of Use</b>	<b>Product Label Available?</b>	<b>Sample Available?</b>
Oral- dog food	Yes	Yes

**Product Ingredients**

<b>Duration of Product Used</b>	<b>Frequency of Product Used</b>	<b>How was Product Taken?</b>
Other	Other	Dog food oral consumption

**Remarks**

The dog was introduced to "Kirkland Signature Adult Dog Food" for approximate two week, the dog was removed from "Kirkland Signature Adult Dog Food" for two weeks, and then The "Kirkland Signature Adult Dog Food" was reintroduced. During the time spans when the dog was consuming the "Kirkland Signature Adult Dog Food" the dog became ill and eventually died.

**Symptoms Occurrence**

<b>Did event abate after stopping use of product?</b>	<b>Did symptoms recur after product reintroduction?</b>	<b>Did symptoms recur after using products with same ingredients?</b>
Yes	Yes	No

<b>Did adverse event result in Congenital Anomaly?</b>	<b>Did adverse event require intervention to prevent permanent impairment / damage?</b>
No	Yes

**Medications / Other Products Used****Medical Test Performed****Results****Medical History**

<b>Preexisting Conditions</b>	<b>Treatment</b>	<b>Remarks</b>
Arthritis	Owner will provide	
Other, identify	Owner will provide	Hip Dysplasia

**Medical Diagnosis**

Death

**Medical Treatment**

The dog was rushed to the vet to seek medical treatment; no medical test could be conducted, since the dog died to quickly after arrival at the vet. A necropsy was not conducted.

**COMPLAINTS FOLLOW - UP****Grouped Follow - Up Operations**

Operation Id	Operation Code	Assignment Number	Accomplishing Organization	Performing Organization	Sample Number	PAF	Status	Status Date
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There are no Follow Up Operations related to this complaint.

**Disposition Summary**

Is Consumer Responsible?	Responsible FEI	Address	Name	Firm Type
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Follow-Up Disposition	Disposition Made By	Disposition Date
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Disposition Remarks

**Follow-Up Sent To**

Organization Name	HHS Mail Code
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