Biochemistry test report

Patient:	Ground	Species:	Canine	Patient ID:	2504113
Client:	Mae Ann Alamillo	Gender:	Male	Sample No.:	0000004
Doctor:		Age stage:	Adult	Time of analysis:	2025/04/11 11:52

	Item		Current result		Ref. Ranges	
Protein	**TP**		**7.58**	g/dL	5.31-7.92	
Protein	**ALB**		**2.61**	g/dL	2.34-4.00	
Protein	**GLOB**	↑	**4.97**	g/dL	2.54-4.40	
Protein	**A/G**		**0.5**			
Liver and gallbladder	**ALT**		**48.3**	U/L	10.1-100.3	
Liver and gallbladder	**AST**		**21.5**	U/L	21.0-51.7	
Liver and gallbladder	**AST/ALT**		**0.44**			
Liver and gallbladder	**ALP**	↓	**7.6**	U/L	15.5-125.0	
Liver and gallbladder	**GGT**		**2.9**	U/L	0.0-15.9	
Liver and gallbladder	**TBIL**		**<0.10**	mg/dL	0.00-0.88	
Pancreas	**AMY**	↑	**>4000.0**	U/L	397.7-1285.1	
Kidneys	**BUN**	↑	**>182.65**	mg/dL	7.02-27.45	
Kidneys	**CREA**	↑	**1.76**	mg/dL	0.38-1.40	
Kidneys	**BUN/CREA**		****			
Cardiovasc./Muscle	**CK**		**80.1**	U/L	66.4-257.5	
Cardiovasc./Muscle	**LDH**		**58.2**	U/L	36.4-143.6	
Energy metabolism	**GLU**		**85.1**	mg/dL	68.5-113.3	
Energy metabolism	**TC**	↑	**376.9**	mg/dL	103.2-324.1	
Minerals	**Ca**	↓	**<4.00**	mg/dL	9.20-11.88	
Minerals	**PHOS**		**4.51**	mg/dL	3.10-6.81	
Minerals	**CaxP**		****	mmol/L^2		
Electrolytes	**tCO2**		**<5.00**	mmol/L	13.14-25.13	
Electrolytes	**Na+**	↑	**>170.0**	mmol/L	141.6-160.0	
Electrolytes	**K+**	↑	**>8.5**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		****			
Electrolytes	**Cl-**	↑	**>135.0**	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel **QC QC Fail**

HEM(Hemolysis degree):	0	LIP(Lipemia degree):	0	ICT(Jaundice degree):	0

The results only applies to this test sample. Test Instrument:Mindray vetXpert C5 Time of Printing:2025-04-11 13:01:48

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Report Explan.

GLOB	↑	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
ALP	↓	Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, etc.
AMY	↑	Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, etc.
BUN	↑	Increase is commonly associated with high protein diet, gastrointestinal bleeding, nephropathy, and urinary obstruction, etc. Reduction is commonly associated with insufficient protein intake and liver failure, etc.
CREA	↑	Increase is commonly associated with nephropathy, etc. Reduction is commonly associated with malnutrition and muscular atrophy, etc.
TC	↑	Increase is commonly associated with biliary obstruction, hypothyroidism, hypercorticalismus, nephropathy, diabetes, etc. Reduction is commonly associated with protein loss enteropathy, pancreatic exocrine insufficiency, and hypoadrenocorticism,etc.
Ca	↓	Increase is commonly associated with hypoadrenocorticism, lymphoma, and nephropathy, etc. Reduction is commonly associated with low calcium diet, hypoalbuminemia, nephropathy, and vitamin D deficiency, etc.
Na+	↑	Increase is commonly associated with salt intoxication, hypertonic NaCl solution rehydration, hyperaldosteronism, and severe dehydration, etc. Reduction is commonly associated with hypoadrenocorticism, diuretic therapy, etc.
K+	↑	Increase is commonly associated with high potassium fluid replacement, diabetes, adrenocortical hypofunction, and acute kidney injury, etc. Reduction is commonly associated with low potassium or potassium-free fluid replacement, vomiting, diarrhea, and hypercorticalismus, etc.
Cl-	↑	Increase is commonly associated with salt intoxication, hypertonic NaCl solution rehydration, small intestinal diarrhea, etc. Reduction is commonly associated with vomiting, diuretic therapy, etc.

Note: Due to the complexity and individuality of disease diagnosis, the report interpretation is only for your reference. Please consult your doctors for clinical diagnosis results.

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