Biochemistry test report



Patient:AmberSpecies:CaninePatient ID:2506042Client:Marjorie De LeonGender:FemaleSample No.:0000002

Doctor: Age: 4Y Time of analysis: 2025/06/04 12:58

| | Item | | Current result | | Ref. Ranges | |
|-----------------------|----------|----------|----------------|----------|--------------|---------------------------------------|
| | | | | | | |
| Protein | TP | | 7.16 | g/dL | 5.31-7.92 | |
| Protein | ALB | | 2.48 | g/dL | 2.34-4.00 | |
| Protein | GLOB | | 4.69 | g/dL | 2.54-5.20 | |
| Protein | A/G | | 0.5 | | | |
| Liver and gallbladder | ALT | | 97.8 | U/L | 10.1-100.3 | |
| Liver and gallbladder | AST | | 38.1 | U/L | 0.0-51.7 | |
| Liver and gallbladder | AST/ALT | | 0.39 | | | |
| Liver and gallbladder | ALP | | 94.3 | U/L | 15.5-212.0 | |
| Liver and gallbladder | GGT | | 2.6 | U/L | 0.0-15.9 | |
| Liver and gallbladder | TBIL | | <0.10 | mg/dL | 0.00-0.88 | <u> </u> |
| Liver and gallbladder | ТВА | | <1.0 | μmol/L | 0.0-30.0 | <u> </u> |
| Pancreas | AMY | 1 | >4000.0 | U/L | 397.7-1285.1 | . |
| Kidneys | BUN | ↑ | >182.65 | mg/dL | 7.02-27.45 | © |
| Kidneys | CREA | 1 | 9.27 | mg/dL | 0.23-1.40 | . |
| Kidneys | BUN/CREA | | *** | | | |
| Cardiovasc./Muscle | СК | 1 | 588.8 | U/L | 66.4-257.5 | (|
| Cardiovasc./Muscle | LDH | 1 | 189.7 | U/L | 0.0-143.6 | |
| Energy metabolism | GLU | ↑ | 199.7 | mg/dL | 68.5-135.2 | |
| Energy metabolism | тс | 1 | 470.9 | mg/dL | 103.2-324.1 | |
| Energy metabolism | TG | ↑ | 125.3 | mg/dL | 8.9-115.1 | |
| Minerals | Ca | \ | 7.20 | mg/dL | 8.40-11.88 | |
| Minerals | PHOS | 1 | >20.13 | mg/dL | 2.48-6.81 | . |
| Minerals | CaxP | | *** | mmol/L^2 | | |
| Minerals | Mg | 1 | 4.59 | mg/dL | 1.48-2.58 | · · · · · · · · · · · · · · · · · · · |
| Electrolytes | Na+ | | 150.3 | mmol/L | 138.0-160.0 | |
| Electrolytes | K+ | | 4.2 | mmol/L | 3.5-5.9 | |
| Electrolytes | Na/K | | 35.6 | | | |
| Electrolytes | CI- | 1 | >135.0 | mmol/L | 102.7-125.0 | · · · · · · · · · · · · · · · · · · · |

Operator:

Comprehensive Diagnosis Panel

QC QC OK

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:2025-06-04 13:02:44











Patient: Amber Species: Canine Patient ID: 2506042 Marjorie De Leon Gender: Female Sample No.: 0000002 Client: 4Y Time of analysis: 2025/06/04 12:58 Doctor: Age:

| | Report Explan. | |
|------|----------------|--|
| AMY | <u></u> | 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 | 1 | Increase is commonly associated with nephropathy, etc. Reduction is commonly associated with malnutrition and muscular atrophy, etc. |
| СК | 1 | Increase is commonly associated with trauma, increased muscle activity (such as tetanus and convulsion), myocarditis, and myocardial infarction, etc. |
| LDH | 1 | Increase is commonly associated with hemolysis (especially in canine), post-exercise, liver injury, exertional rhabdomyolysis, white muscle disease, myocardial injury, tumors, etc. |
| GLU | 1 | Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc. |
| тс | ↑ | 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. |
| TG | 1 | Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalismus, etc. |
| Са | ↓ | 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. |
| PHOS | 1 | Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc. |
| Mg | ↑ | Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, etc. |
| CI- | ↑ | 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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