Biochemistry test report



Patient:Princess DidiSpecies:CaninePatient ID:2506062Client:Sherrain DominguezGender:FemaleSample No.:0000002

Doctor: Age: 9Y Time of analysis: 2025/06/06 10:18

	ltem		Current result		Ref. Ranges	
Protein	TP	<u></u>	8.15	g/dL	5.31-7.92	<u> </u>
Protein	ALB	<u> </u>	2.19	g/dL	2.34-4.00	
Protein	GLOB	1	5.97	g/dL	2.54-5.20	(
Protein	A/G		0.4			
Liver and gallbladder	ALT		70.9	U/L	10.1-100.3	
Liver and gallbladder	AST		25.3	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT		0.36			
Liver and gallbladder	ALP		58.2	U/L	15.5-212.0	
Liver and gallbladder	GGT		12.0	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	2713.2	U/L	397.7-1285.1	
Kidneys	BUN	1	62.15	mg/dL	7.02-27.45	.
Kidneys	CREA	1	1.52	mg/dL	0.23-1.40	<u> </u>
Kidneys	BUN/CREA		40.7			
Cardiovasc./Muscle	СК		96.7	U/L	66.4-257.5	
Cardiovasc./Muscle	LDH		107.4	U/L	0.0-143.6	<u> </u>
Energy metabolism	GLU	\downarrow	68.0	mg/dL	68.5-135.2	
Energy metabolism	тс		238.7	mg/dL	103.2-324.1	<u> </u>
Energy metabolism	TG		68.6	mg/dL	8.9-115.1	
Minerals	Ca		10.08	mg/dL	8.40-11.88	
Minerals	PHOS		6.30	mg/dL	2.48-6.81	
Minerals	CaxP		5.13	mmol/L^2		
Minerals	Mg		2.48	mg/dL	1.48-2.58	<u> </u>
Electrolytes	Na+		150.3	mmol/L	138.0-160.0	
Electrolytes	K+		5.0	mmol/L	3.5-5.9	
Electrolytes	Na/K		29.9			
Electrolytes	CI-	↑	>135.0	mmol/L	102.7-125.0	<u> </u>

Operator:

Comprehensive Diagnosis Panel

PEM(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:2025-06-06 13:37:55









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Client:	Sherrain Dominguez	Gender:	Female	Sample No.:	0000002
Doctor:		Age:	9Y	Time of analysis:	2025/06/06 10:18

	Report Explan.	
ТР	↑	Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.
ALB	↓	Increase is commonly associated with dehydration and corticosteroid administration, etc. Reduction is commonly associated with excessive infusion, malnutrition, hepatic insufficiency or failure, nephropathy, and protein-losing enteropathy.
GLOB	↑	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
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.
GLU	\	Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, 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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