Biochemistry test report



Patient:RosieSpecies:CaninePatient ID:2506084Client:Kristine GomezGender:FemaleSample No.:0000001

Doctor: Age: 7Y Time of analysis: 2025/06/09 17:41

	Item		Current result		Ref. Ranges	
Protein	TP		7.77	g/dL	5.31-7.92	<u> </u>
Protein	ALB	<u></u>	1.82	g/dL	2.34-4.00	
Protein	GLOB	1	5.94	g/dL	2.54-5.20	· · · · · · · · · · · · · · · · · · ·
Protein	A/G		0.3			
Liver and gallbladder	ALT		14.0	U/L	10.1-100.3	
Liver and gallbladder	AST		10.7	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT		0.76			
Liver and gallbladder	ALP		67.2	U/L	15.5-212.0	
Liver and gallbladder	GGT		<2.0	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		443.8	U/L	397.7-1285.1	
Kidneys	BUN		15.68	mg/dL	7.02-27.45	
Kidneys	CREA		0.74	mg/dL	0.23-1.40	
Kidneys	BUN/CREA		21.0			
Cardiovasc./Muscle	CK		70.5	U/L	66.4-257.5	<u> </u>
Cardiovasc./Muscle	LDH		65.4	U/L	0.0-143.6	
Energy metabolism	GLU		106.2	mg/dL	68.5-135.2	
Energy metabolism	TC		222.8	mg/dL	103.2-324.1	
Energy metabolism	TG		62.1	mg/dL	8.9-115.1	
Minerals	Ca	\downarrow	7.77	mg/dL	8.40-11.88	
Minerals	PHOS		2.46	mg/dL	2.48-6.81	
Minerals	CaxP		1.54	mmol/L^2		
Minerals	Mg		1.72	mg/dL	1.48-2.58	
Electrolytes	Na+	ļ	136.6	mmol/L	138.0-160.0	
Electrolytes	K+		4.4	mmol/L	3.5-5.9	
Electrolytes	Na/K		31.1			
Electrolytes	CI-		114.7	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel

QC QC OK

HEM(Hemolysis degree): 0 LIP(Lipemia degree): 1+ ICT(Jaundice degree): 0

The results only applies to this test sample.

Test Instrument:Mindray vetXpert C5

Time of Printing:2025-06-09 18:01:32









Patient:	Rosie	Species:	Canine	Patient ID:	2506084
Client:	Kristine Gomez	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	7Y	Time of analysis:	2025/06/09 17:41

	Report Explan.	
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.
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	↓	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, 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.

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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