

# Biochemistry test report



Patient:	Boi	Species:	Canine	Patient ID:	2503083
Client:	Madonna Bravante	Gender:	Male	Sample No.:	0000002
Doctor:		Age:	Adult 5Y	Time of analysis:	2025/06/16 10:18

Item		Current result		Ref. Ranges		2025/05/16
Protein	TP	H-	7.62	g/dL	5.31-7.92	9.21
Protein	ALB		2.49	g/dL	2.34-4.00	2.17
Protein	GLOB		5.14	g/dL	2.54-5.20	7.04
Protein	A/G		0.5			0.3
Liver and gallbladder	ALT		65.6	U/L	10.1-100.3	45.1
Liver and gallbladder	AST	H+	36.3	U/L	0.0-51.7	33.6
Liver and gallbladder	AST/ALT		0.55			0.74
Liver and gallbladder	ALP		67.8	U/L	15.5-212.0	179.4
Liver and gallbladder	GGT		<2.0	U/L	0.0-15.9	3.7
Liver and gallbladder	TBIL	H-	<0.10	mg/dL	0.00-0.88	<0.10
Liver and gallbladder	TBA	↑	47.1	μmol/L	0.0-30.0	9.6
Pancreas	AMY	↑	1494.8	U/L	397.7-1285.1	1878.1
Kidneys	BUN		27.38	mg/dL	7.02-27.45	18.77
Kidneys	CREA		0.34	mg/dL	0.23-1.40	0.53
Kidneys	BUN/CREA		81.2			35.0
Cardiovasc./Muscle	CK	H+	254.2	U/L	66.4-257.5	82.6
Cardiovasc./Muscle	LDH	H+	110.1	U/L	0.0-143.6	100.4
Energy metabolism	GLU		97.6	mg/dL	68.5-135.2	40.1
Energy metabolism	TC	H+	244.3	mg/dL	103.2-324.1	194.9
Energy metabolism	TG		59.4	mg/dL	8.9-115.1	49.4
Minerals	Ca		8.84	mg/dL	8.40-11.88	9.74
Minerals	PHOS		4.28	mg/dL	2.48-6.81	3.77
Minerals	CaxP		3.05	mmol/L^2		2.96
Minerals	Mg		1.48	mg/dL	1.48-2.58	1.83
Electrolytes	Na+	↓	132.6	mmol/L	138.0-160.0	147.0
Electrolytes	K+	H-	4.0	mmol/L	3.5-5.9	4.7
Electrolytes	Na/K		33.3			31.3
Electrolytes	Cl-		112.1	mmol/L	102.7-125.0	>135.0

Operator:

## Comprehensive Diagnosis Panel

QC QC OK

HEM(Hemolysis degree): 2+      LIP(Lipemia degree): 0      ICT(Jaundice degree): 0

The results only applies to this test sample.

Test Instrument:Mindray vetXpert C5

Time of Printing:2025-06-16 10:26:01



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## Report Explan.

**TBA**



Increase is commonly associated with hepatic insufficiency or failure, portal vein shunt, and cholestasis, etc. Reduction is commonly associated with long-term fasting and intestinal malabsorption, etc.

**AMY**



Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic 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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