

Biochemistry test report



Patient:	Brandy	Species:	Canine	Patient ID:	2505031
Client:	Adoree Jabanés	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	Adult	Time of analysis:	2025/09/08 10:21

Item		Current result		Ref. Ranges		2025/05/03
Protein	TP	↑	8.09	g/dL	5.31-7.92	8.12
Protein	ALB		3.08	g/dL	2.34-4.00	3.14
Protein	GLOB		5.01	g/dL	2.54-5.20	4.98
Protein	A/G		0.6			0.6
Liver and gallbladder	ALT	↑	146.9	U/L	10.1-100.3	54.3
Liver and gallbladder	AST		30.2	U/L	0.0-51.7	21.3
Liver and gallbladder	AST/ALT		0.21			0.39
Liver and gallbladder	ALP	↑	318.2	U/L	15.5-212.0	127.4
Liver and gallbladder	GGT		4.5	U/L	0.0-15.9	5.0
Liver and gallbladder	TBIL		0.12	mg/dL	0.00-0.88	0.15
Liver and gallbladder	TBA		<1.0	μmol/L	0.0-30.0	11.7
Pancreas	AMY		611.2	U/L	397.7-1285.1	750.6
Kidneys	BUN		10.83	mg/dL	7.02-27.45	12.15
Kidneys	CREA		0.54	mg/dL	0.23-1.40	0.55
Kidneys	BUN/CREA		19.8			22.0
Cardiovasc./Muscle	CK		117.2	U/L	66.4-257.5	89.8
Cardiovasc./Muscle	LDH		87.7	U/L	0.0-143.6	45.0
Energy metabolism	GLU	↑	272.8	mg/dL	68.5-135.2	500.1
Energy metabolism	TC	↑	402.2	mg/dL	103.2-324.1	>541.4
Energy metabolism	TG		79.3	mg/dL	8.9-115.1	309.5
Minerals	Ca		10.75	mg/dL	8.40-11.88	10.00
Minerals	PHOS		2.90	mg/dL	2.48-6.81	4.23
Minerals	CaxP		2.52	mmol/L^2		3.42
Minerals	Mg		1.82	mg/dL	1.29-2.58	1.84
Electrolytes	Na+		141.5	mmol/L	138.0-160.0	144.0
Electrolytes	K+		4.7	mmol/L	3.5-5.9	4.2
Electrolytes	Na/K		29.8			34.1
Electrolytes	Cl-		111.4	mmol/L	102.7-125.0	113.7

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:2025-09-08 10:23:27



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Report Explan.

TP



Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.

ALT



Increase is commonly associated with liver injury and muscle injury, etc.

ALP



Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, etc.

GLU



Increase is commonly associated with diabetes and hypercorticism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.

TC



Increase is commonly associated with biliary obstruction, hypothyroidism, hypercorticism, nephropathy, diabetes, etc. Reduction is commonly associated with protein loss enteropathy, pancreatic exocrine insufficiency, and hypoadrenocorticism, 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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