

Biochemistry test report



Patient:	Boi	Species:	Canine	Patient ID:	2503083
Client:	Madonna Bravante	Gender:	Male	Sample No.:	0000001
Doctor:		Age:	Adult 5Y	Time of analysis:	2025/09/22 08:28

Item		Current result		Ref. Ranges		2025/06/16
Protein	TP	↑	8.60	g/dL	5.31-7.92	7.62
Protein	ALB		2.68	g/dL	2.34-4.00	2.49
Protein	GLOB	↑	5.92	g/dL	2.54-5.20	5.14
Protein	A/G		0.5			0.5
Liver and gallbladder	ALT		35.5	U/L	10.1-100.3	65.6
Liver and gallbladder	AST		16.5	U/L	0.0-51.7	36.3
Liver and gallbladder	AST/ALT		0.46			0.55
Liver and gallbladder	ALP		108.0	U/L	15.5-212.0	67.8
Liver and gallbladder	GGT		<2.0	U/L	0.0-15.9	<2.0
Liver and gallbladder	TBIL		<0.10	mg/dL	0.00-0.88	<0.10
Liver and gallbladder	TBA		9.0	μmol/L	0.0-30.0	47.1
Pancreas	AMY	↑	1996.3	U/L	397.7-1285.1	1494.8
Kidneys	BUN	↑	28.81	mg/dL	7.02-27.45	27.38
Kidneys	CREA		0.56	mg/dL	0.23-1.40	0.34
Kidneys	BUN/CREA		51.4			81.2
Cardiovasc./Muscle	CK		161.1	U/L	66.4-257.5	254.2
Cardiovasc./Muscle	LDH		74.6	U/L	0.0-143.6	110.1
Energy metabolism	GLU	↑	141.3	mg/dL	68.5-135.2	97.6
Energy metabolism	TC		187.5	mg/dL	103.2-324.1	244.3
Energy metabolism	TG		38.5	mg/dL	8.9-115.1	59.4
Minerals	Ca		9.31	mg/dL	8.40-11.88	8.84
Minerals	PHOS		2.64	mg/dL	2.48-6.81	4.28
Minerals	CaxP		1.98	mmol/L^2		3.05
Minerals	Mg		1.50	mg/dL	1.29-2.58	1.48
Electrolytes	Na+		145.1	mmol/L	138.0-160.0	132.6
Electrolytes	K+	↓	3.1	mmol/L	3.5-5.9	4.0
Electrolytes	Na/K		47.2			33.3
Electrolytes	Cl-		106.9	mmol/L	102.7-125.0	112.1

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:2025-09-22 10:37:03



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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.

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.

GLU



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

K+



Increase is commonly associated with high potassium fluid replacement, diabetes, adrenocortical hypofunction, and acute kidney injury, etc. Reduction is commonly associated with low potassium or potassium-free fluid replacement, vomiting, diarrhea, and hypercorticism, 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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