

# Biochemistry test report



|          |             |          |        |                   |                  |
|----------|-------------|----------|--------|-------------------|------------------|
| Patient: | Coco        | Species: | Canine | Patient ID:       | 2510101          |
| Client:  | Paul Yousef | Gender:  | Male   | Sample No.:       | 0000001          |
| Doctor:  |             | Age:     | 4Y     | Time of analysis: | 2025/10/24 10:12 |

| Item                  |                 | Current result |                  | Ref. Ranges |              | 2025/10/10      |
|-----------------------|-----------------|----------------|------------------|-------------|--------------|-----------------|
| Protein               | <b>TP</b>       | ↓              | <b>3.50</b>      | g/dL        | 5.31-7.92    | <b>6.14</b>     |
| Protein               | <b>ALB</b>      | ↓              | <b>1.79</b>      | g/dL        | 2.34-4.00    | <b>3.34</b>     |
| Protein               | <b>GLOB</b>     | ↓              | <b>1.71</b>      | g/dL        | 2.54-5.20    | <b>2.80</b>     |
| Protein               | <b>A/G</b>      |                | <b>1.0</b>       |             |              | <b>1.2</b>      |
| Liver and gallbladder | <b>ALT</b>      |                | <b>71.3</b>      | U/L         | 10.1-100.3   | <b>116.1</b>    |
| Liver and gallbladder | <b>AST</b>      |                | <b>17.3</b>      | U/L         | 0.0-51.7     | <b>32.3</b>     |
| Liver and gallbladder | <b>AST/ALT</b>  |                | <b>0.24</b>      |             |              | <b>0.28</b>     |
| Liver and gallbladder | <b>ALP</b>      | ↓              | <b>14.8</b>      | U/L         | 15.5-212.0   | <b>45.0</b>     |
| Liver and gallbladder | <b>GGT</b>      |                | <b>11.3</b>      | U/L         | 0.0-15.9     | <b>17.0</b>     |
| Liver and gallbladder | <b>TBIL</b>     |                | <b>&lt;0.10</b>  | mg/dL       | 0.00-0.88    | <b>&lt;0.10</b> |
| Liver and gallbladder | <b>TBA</b>      |                | <b>5.0</b>       | μmol/L      | 0.0-30.0     | <b>21.3</b>     |
| Pancreas              | <b>AMY</b>      | ↓              | <b>303.6</b>     | U/L         | 397.7-1285.1 | <b>470.7</b>    |
| Kidneys               | <b>BUN</b>      |                | <b>11.25</b>     | mg/dL       | 7.02-27.45   | <b>20.36</b>    |
| Kidneys               | <b>CREA</b>     |                | <b>0.46</b>      | mg/dL       | 0.23-1.40    | <b>0.67</b>     |
| Kidneys               | <b>BUN/CREA</b> |                | <b>24.3</b>      |             |              | <b>30.2</b>     |
| Cardiovasc./Muscle    | <b>CK</b>       |                | <b>98.5</b>      | U/L         | 66.4-257.5   | <b>139.5</b>    |
| Cardiovasc./Muscle    | <b>LDH</b>      |                | <b>58.5</b>      | U/L         | 0.0-143.6    | <b>49.8</b>     |
| Energy metabolism     | <b>GLU</b>      | ↓              | <b>49.2</b>      | mg/dL       | 68.5-135.2   | <b>115.9</b>    |
| Energy metabolism     | <b>TC</b>       | ↓              | <b>96.8</b>      | mg/dL       | 103.2-324.1  | <b>171.0</b>    |
| Energy metabolism     | <b>TG</b>       |                | <b>40.7</b>      | mg/dL       | 8.9-115.1    | <b>87.6</b>     |
| Minerals              | <b>Ca</b>       | ↓              | <b>5.07</b>      | mg/dL       | 8.40-11.88   | <b>10.02</b>    |
| Minerals              | <b>PHOS</b>     | ↓              | <b>1.79</b>      | mg/dL       | 2.48-6.81    | <b>2.80</b>     |
| Minerals              | <b>CaxP</b>     |                | <b>0.73</b>      | mmol/L^2    |              | <b>2.27</b>     |
| Minerals              | <b>Mg</b>       | ↓              | <b>0.21</b>      | mg/dL       | 1.29-2.58    | <b>1.64</b>     |
| Electrolytes          | <b>Na+</b>      | ↓              | <b>&lt;110.0</b> | mmol/L      | 138.0-160.0  | <b>143.8</b>    |
| Electrolytes          | <b>K+</b>       | ↓              | <b>&lt;1.0</b>   | mmol/L      | 3.5-5.9      | <b>4.4</b>      |
| Electrolytes          | <b>Na/K</b>     |                | <b>****</b>      |             |              | <b>32.4</b>     |
| Electrolytes          | <b>Cl-</b>      | ↓              | <b>&lt;70.0</b>  | mmol/L      | 102.7-125.0  | <b>110.8</b>    |

Operator:

| Comprehensive Diagnosis Panel |   | QC QC Fail            |   |
|-------------------------------|---|-----------------------|---|
| 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:2025-10-24 16:44:25



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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.

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.

ALP



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

AMY



Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, etc.

GLU



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

TC



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

Ca



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.

Mg



Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, 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.

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 hypercortisolism, etc.

Cl-



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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