

Biochemistry test report



Patient:	Tam Tam	Species:	Canine	Patient ID:	260106004
Client:	Marinella Palaganas	Gender:	Female	Sample No.:	0000004
Doctor:		Age:	11Y	Time of analysis:	2026/01/06 18:03

Item		Current result		Ref. Ranges	
Protein	TP	H-	7.32	g/dL	5.31-7.92
Protein	ALB		2.41	g/dL	2.34-4.00
Protein	GLOB		4.90	g/dL	2.54-5.20
Protein	A/G		0.5		
Liver and gallbladder	ALT		10.4	U/L	10.1-100.3
Liver and gallbladder	AST	H+	19.5	U/L	0.0-51.7
Liver and gallbladder	AST/ALT		1.88		
Liver and gallbladder	ALP		77.3	U/L	15.5-212.0
Liver and gallbladder	GGT		5.5	U/L	0.0-15.9
Liver and gallbladder	TBIL		<0.10	mg/dL	0.00-0.88
Liver and gallbladder	TBA		1.8	μmol/L	0.0-30.0
Pancreas	AMY		588.8	U/L	397.7-1285.1
Kidneys	BUN		12.38	mg/dL	7.02-27.45
Kidneys	CREA		0.34	mg/dL	0.23-1.40
Kidneys	BUN/CREA		36.1		
Cardiovasc./Muscle	CK		91.9	U/L	66.4-257.5
Cardiovasc./Muscle	LDH	H+	112.6	U/L	0.0-143.6
Energy metabolism	GLU		119.5	mg/dL	68.5-135.2
Energy metabolism	TC		172.3	mg/dL	103.2-324.1
Energy metabolism	TG		51.3	mg/dL	8.9-115.1
Minerals	Ca	↓	8.17	mg/dL	8.40-11.88
Minerals	PHOS		3.41	mg/dL	2.48-6.81
Minerals	CaxP		2.25	mmol/L^2	
Minerals	Mg		1.54	mg/dL	1.29-2.58
Electrolytes	Na+	↓	136.9	mmol/L	138.0-160.0
Electrolytes	K+	↓	2.9	mmol/L	3.5-5.9
Electrolytes	Na/K		47.5		
Electrolytes	Cl-		105.2	mmol/L	102.7-125.0

Operator:

Comprehensive Diagnosis Panel

QC QC Fail

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

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.

The results only applies to this test sample.

Test Instrument: Mindray vetXpert C5

Time of Printing: 2026-01-06 18:07:39



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Report Explan.

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 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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