Biochemistry test report

Patient:	Prince	Species:	Canine	Patient ID:	260211001
Client:	King Marvin Malicdem	Gender:	Male	Sample No.:	0000001
Doctor:		Age:	8Y	Time of analysis:	2026/02/11 11:45

	Item		Current result		Ref. Ranges	
Protein	**TP**		**6.98**	g/dL	5.31-7.92	
Protein	**ALB**	↓	**1.79**	g/dL	2.34-4.00	
Protein	**GLOB**		**5.19**	g/dL	2.54-5.20	
Protein	**A/G**		**0.3**			
Liver and gallbladder	**ALT**		**23.2**	U/L	10.1-100.3	
Liver and gallbladder	**AST**	↑	**75.3**	U/L	0.0-51.7	
Liver and gallbladder	**AST/ALT**		**3.24**			
Liver and gallbladder	**ALP**		**157.8**	U/L	15.5-212.0	
Liver and gallbladder	**GGT**		**9.2**	U/L	0.0-15.9	
Liver and gallbladder	**TBIL**	↑	**1.03**	mg/dL	0.00-0.88	
Liver and gallbladder	**TBA**		**4.7**	μmol/L	0.0-30.0	
Pancreas	**AMY**		**1250.4**	U/L	397.7-1285.1	
Kidneys	**BUN**	↑	**169.56**	mg/dL	7.02-27.45	
Kidneys	**CREA**	↑	**14.85**	mg/dL	0.23-1.40	
Kidneys	**BUN/CREA**		**11.4**			
Cardiovasc./Muscle	**CK**		**77.9**	U/L	66.4-257.5	
Cardiovasc./Muscle	**LDH**		**137.5**	U/L	0.0-143.6	
Energy metabolism	**GLU**		**105.6**	mg/dL	68.5-135.2	
Energy metabolism	**TC**		**148.3**	mg/dL	103.2-324.1	
Energy metabolism	**TG**		**59.6**	mg/dL	8.9-115.1	
Minerals	**Ca**	↓	**7.42**	mg/dL	8.40-11.88	
Minerals	**PHOS**	↑	**13.52**	mg/dL	2.48-6.81	
Minerals	**CaxP**		**8.10**	mmol/L^2		
Minerals	**Mg**	↑	**3.55**	mg/dL	1.29-2.58	
Electrolytes	**Na+**	↓	**133.4**	mmol/L	138.0-160.0	
Electrolytes	**K+**		**4.5**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		**29.5**			
Electrolytes	**Cl-**		**104.4**	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel **QC QC OK**

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

Report Explan.

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.

The results only applies to this test sample. Test Instrument:Mindray vetXpert C5 Time of Printing:2026-02-11 11:47:32

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Report Explan.

AST	↑	Increase is commonly associated with liver injury and muscle injury, etc.
TBIL	↑	Increase is commonly associated with hemolysis and hepatobiliary dysfunction. Reduction is commonly associated with decreased erythropoiesis, 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.
CREA	↑	Increase is commonly associated with nephropathy, etc. Reduction is commonly associated with malnutrition and muscular atrophy, 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.

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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