

Negrita Test report



Patient:	Negrita	Species:	Feline	Patient ID:	260321002
Client:	Marinella Palaganas	Gender:	Spayed	Age:	7Y

AI Aided Diag. Explan.

It is recommended to add symmetric dimethylarginine (SDMA), urinary protein to creatinine ratio (UPC), urinary specific gravity (SG), and imaging examinations to identify the cause and grading of renal dysfunction, based on clinical manifestations and medical history.

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.
The results only applies to this test sample.

Time of Printing:2026-03-22 18:16:40



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Immunoassay test report



Patient:	Negrita	Species:	Feline	Patient ID:	260321002
Client:	Marinella Palaganas	Gender:	Spayed	Sample No.:	0000002
Doctor:		Age:	7Y	Time of analysis:	2026/03/21 18:09

Lab item	Current result	Ref. Ranges
fSDMA	↑ 59.7	µg/dL 0.0-14.0

Operator:

Report Explan.

fSDMA

Result indications:

<14.0 ug/dL Normal

14.0-20.0 ug/dL Suspected

>20.0 ug/dL Abnormal

Clinical significance:

fSDMA is an early biomarker of progressive kidney injury, and an increase may indicate impaired renal function.

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Test Instrument: Mindray vetXpert I3

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Biochemistry test report



Patient: Negrita Species: Feline Patient ID: 260321002
 Client: Marinella Palaganas Gender: Spayed Sample No.: 0000002
 Doctor: Age: 7Y Time of analysis: 2026/03/21 18:09

Item	Current result	Ref. Ranges
Protein TP ↑ 10.43 g/dL	5.65-8.85	
Protein ALB 3.05 g/dL	2.20-4.00	
Protein GLOB ↑ 7.37 g/dL	2.82-5.13	
Protein A/G 0.4		
Liver and gallbladder ALT 27.5 U/L	12.0-149.2	
Liver and gallbladder AST 38.0 U/L	0.0-60.0	
Liver and gallbladder AST/ALT 1.38		
Liver and gallbladder ALP ↓ — <5.0 U/L	8.7-110.9	
Liver and gallbladder GGT <2.0 U/L	0.0-8.2	
Liver and gallbladder TBIL ↑ 6.64 mg/dL	0.00-0.88	
Liver and gallbladder TBA ↑ 33.5 μmol/L	0.0-20.0	
Pancreas AMY 1842.8 U/L	555.6-1940.0	
Kidneys BUN ↑ 122.74 mg/dL	12.79-32.06	
Kidneys CREA ↑ 6.84 mg/dL	0.32-2.03	
Kidneys BUN/CREA 17.9		
Cardiovasc./Muscle CK ↑ 686.0 U/L	66.1-530.9	
Cardiovasc./Muscle LDH 324.0 U/L	0.0-334.2	
Energy metabolism GLU 122.6 mg/dL	61.1-151.2	
Energy metabolism TC 92.3 mg/dL	72.3-225.8	
Energy metabolism TG ↑ 244.2 mg/dL	8.9-115.1	
Minerals Ca 8.80 mg/dL	8.40-11.16	
Minerals PHOS 6.93 mg/dL	2.48-8.42	
Minerals CaxP 4.92 mmol/L^2		
Minerals Mg ↑ 4.10 mg/dL	1.60-2.96	
Electrolytes Na+ 155.0 mmol/L	141.0-166.0	
Electrolytes K+ 3.7 mmol/L	3.5-5.9	
Electrolytes Na/K 41.9		
Electrolytes Cl- 112.9 mmol/L	104.4-129.0	

Operator:

Comprehensive Diagnosis Panel

QC QC OK

HEM(Hemolysis degree): 0 LIP(Lipemia degree): 0 ICT(Jaundice degree): 2+



Report Explain.

TP ↑

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

The results only applies to this test sample.

Test Instrument: Mindray vetXpert C5

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Biochemistry test report



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Client:	Marinella Palaganas	Gender:	Spayed	Sample No.:	0000002
Doctor:		Age:	7Y	Time of analysis:	2026/03/21 18:09



Report Explan.

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.
TBIL	↑	Increase is commonly associated with hemolysis and hepatobiliary dysfunction. Reduction is commonly associated with decreased erythropoiesis, etc.
TBA	↑	Increase is commonly associated with hepatic insufficiency or failure, portal vein shunt, and cholestasis, etc. Reduction is commonly associated with long-term fasting and intestinal malabsorption, 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.
CK	↑	Increase is commonly associated with trauma, increased muscle activity (such as tetanus and convulsion), myocarditis, and myocardial infarction, etc.
TG	↑	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticism, 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.

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