Biochemistry test report

Patient:	Tobi	Species:	Canine	Patient ID:	260303004
Client:	Leah Fernandez	Gender:	Male	Sample No.:	0000004
Doctor:		Age:	10Y	Time of analysis:	2026/03/03 18:16

	Item		Current result		Ref. Ranges
Protein	**TP**		**5.61**	g/dL	5.31-7.92
Protein	**ALB**	↓	**2.17**	g/dL	2.34-4.00
Protein	**GLOB**		**3.45**	g/dL	2.54-5.20
Protein	**A/G**		**0.6**		
Liver and gallbladder	**ALT**		**34.7**	U/L	10.1-100.3
Liver and gallbladder	**AST**		**17.1**	U/L	0.0-51.7
Liver and gallbladder	**AST/ALT**		**0.49**		
Liver and gallbladder	**ALP**		**88.1**	U/L	15.5-212.0
Liver and gallbladder	**GGT**		**11.1**	U/L	0.0-15.9
Liver and gallbladder	**TBIL**		**<0.10**	mg/dL	0.00-0.88
Liver and gallbladder	**TBA**		**1.1**	μmol/L	0.0-30.0
Pancreas	**AMY**		**698.0**	U/L	397.7-1285.1
Kidneys	**BUN**		**18.48**	mg/dL	7.02-27.45
Kidneys	**CREA**		**0.54**	mg/dL	0.23-1.40
Kidneys	**BUN/CREA**		**34.0**		
Cardiovasc./Muscle	**CK**		**111.3**	U/L	66.4-257.5
Cardiovasc./Muscle	**LDH**		**105.0**	U/L	0.0-143.6
Energy metabolism	**GLU**	↓	**65.4**	mg/dL	68.5-135.2
Energy metabolism	**TC**		**149.0**	mg/dL	103.2-324.1
Energy metabolism	**TG**		**100.5**	mg/dL	8.9-115.1
Minerals	**Ca**	↓	**7.38**	mg/dL	8.40-11.88
Minerals	**PHOS**		**2.75**	mg/dL	2.48-6.81
Minerals	**CaxP**		**1.64**	mmol/L^2	
Minerals	**Mg**		**1.48**	mg/dL	1.29-2.58
Electrolytes	**Na+**	↓	**125.1**	mmol/L	138.0-160.0
Electrolytes	**K+**	↓	**3.3**	mmol/L	3.5-5.9
Electrolytes	**Na/K**		**37.9**		
Electrolytes	**Cl-**	↓	**85.3**	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:2026-03-03 18:36:45

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Report Explan.

GLU	↓	Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, 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.
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 hypercorticalismus, 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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