Biochemistry test report



Patient: Sabac	hka		Specie	s: Canine		Patient ID:	2503303
Client: Roche	elle Castro		Gende	r: Female		Sample No.:	0000005
Ooctor:			Age sta	age: Adult		Time of analysis:	2025/03/30 14:40
	ltem		Current result		Ref. Ranges	;	
Protein	ТР	Ţ	9.83	g/dL	5.31-7.92	(
Protein	ALB	\downarrow	2.23	g/dL	2.34-4.00		
Protein	GLOB	1	7.61	g/dL	2.54-4.40	(()
Protein	A/G		0.3				
Liver and gallbladde	er ALT	\downarrow	7.4	U/L	10.1-100.3		
Liver and gallbladde	er AST		45.3	U/L	21.0-51.7	(〕
Liver and gallbladde	er AST/ALT		6.16				
Liver and gallbladde	er ALP	1	170.8	U/L	15.5-125.0	(
Liver and gallbladde	er GGT		6.2	U/L	0.0-15.9		
Liver and gallbladde	er TBIL		<0.10	mg/dL	0.00-0.88		
Pancreas	AMY		759.1	U/L	397.7-1285.1		
Kidneys	BUN		24.31	mg/dL	7.02-27.45		〕
Kidneys	CREA		0.64	mg/dL	0.38-1.40		
Kidneys	BUN/CREA		37.6				
Cardiovasc./Muscle	СК		237.8	U/L	66.4-257.5		;
Cardiovasc./Muscle	LDH	1	436.0	U/L	36.4-143.6		
Energy metabolism	GLU		69.4	mg/dL	68.5-113.3		
Energy metabolism	тс		301.8	mg/dL	103.2-324.1		`
Minerals	Ca	\downarrow	<4.00	mg/dL	9.20-11.88		
Minerals	PHOS		6.35	mg/dL	3.10-6.81		0
Minerals	CaxP		****	mmol/L^2			
Electrolytes	tCO2		14.76	mmol/L	13.14-25.13		
Electrolytes	Na+	\downarrow	136.5	mmol/L	141.6-160.0		
Electrolytes	K+	1	>8.5	mmol/L	3.5-5.9		
Electrolytes	Na/K		****				
Electrolytes	CI-	\downarrow	92.0	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

The results only applies to this test sample.

Test Instrument:Mindray vetXpert C5

Time of Printing:2025-03-30 18:36:15



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Biochemistry test report

Patient:	Sabachka	Species:	Canine	Patient ID:	2503303
Client:	Rochelle Castro	Gender:	Female	Sample No.:	0000005
Doctor:		Age stage:	Adult	Time of analysis:	2025/03/30 14:40

	Report Explan.	
ТР	↑	Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.
ALB	Ļ	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.
ALT	\downarrow	Increase is commonly associated with liver injury and muscle injury, etc.
ALP	↑	Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, etc.
LDH	1	Increase is commonly associated with hemolysis (especially in canine), post-exercise, liver injury, exertional rhabdomyolysis, white muscle disease, myocardial injury, tumors, etc.
Ca	Ļ	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+	Ļ	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.
CI-	Ļ	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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