

Biochemistry test report



Patient: Crumble Species: Canine Patient ID: 2503311
Client: Lea Fajardo Gender: Female Sample No.: 0000001
Doctor: Age stage: Time of analysis: 2025/03/31 12:01

Item		Current result		Ref. Ranges	
Protein	TP	6.59	g/dL	5.31-7.92	
Protein	ALB	2.56	g/dL	2.34-4.00	
Protein	GLOB	4.04	g/dL	2.54-4.40	
Protein	A/G	0.6			
Liver and gallbladder	ALT	35.1	U/L	10.1-100.3	
Liver and gallbladder	AST	42.9	U/L	21.0-51.7	
Liver and gallbladder	AST/ALT	1.22			
Liver and gallbladder	ALP	29.4	U/L	15.5-125.0	
Liver and gallbladder	GGT	<2.0	U/L	0.0-15.9	
Liver and gallbladder	TBIL	<0.10	mg/dL	0.00-0.88	
Pancreas	AMY	675.0	U/L	397.7-1285.1	
Kidneys	BUN	13.23	mg/dL	7.02-27.45	
Kidneys	CREA	0.56	mg/dL	0.38-1.40	
Kidneys	BUN/CREA	23.4			
Cardiovasc./Muscle	CK	147.3	U/L	66.4-257.5	
Cardiovasc./Muscle	LDH	169.9	U/L	36.4-143.6	
Energy metabolism	GLU	84.7	mg/dL	68.5-113.3	
Energy metabolism	TC	138.4	mg/dL	103.2-324.1	
Minerals	Ca	<4.00	mg/dL	9.20-11.88	
Minerals	PHOS	1.31	mg/dL	3.10-6.81	
Minerals	CaxP	****	mmol/L^2		
Electrolytes	tCO2	20.22	mmol/L	13.14-25.13	
Electrolytes	Na+	145.5	mmol/L	141.6-160.0	
Electrolytes	K+	>8.5	mmol/L	3.5-5.9	
Electrolytes	Na/K	****			
Electrolytes	Cl-	98.8	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel

QC QC OK

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

The results only applies to this test sample.

Test Instrument:Mindray vetXpert C5

Time of Printing:2025-03-31 12:03:05



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Report Explan.

LDH



Increase is commonly associated with hemolysis (especially in canine), post-exercise, liver injury, exertional rhabdomyolysis, white muscle disease, myocardial injury, tumors, 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.

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.

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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