## Biochemistry test report



Patient:MimiSpecies:CaninePatient ID:2504192Client:Kristine GomezGender:FemaleSample No.:0000002

Doctor: Age stage: Adult Time of analysis: 2025/04/19 11:03

	ltem		Current result		Ref. Ranges	
Protein	TP	1	7.98	g/dL	5.31-7.92	<u> </u>
Protein	ALB		2.53	g/dL	2.34-4.00	
Protein	GLOB	1	5.45	g/dL	2.54-4.40	<u> </u>
Protein	A/G		0.5			
Liver and gallbladder	ALT		26.7	U/L	10.1-100.3	
Liver and gallbladder	AST		30.9	U/L	21.0-51.7	
Liver and gallbladder	AST/ALT		1.16			
Liver and gallbladder	ALP		38.6	U/L	15.5-125.0	
Liver and gallbladder	GGT		3.4	U/L	0.0-15.9	
Liver and gallbladder	TBIL		<0.10	mg/dL	0.00-0.88	
Liver and gallbladder	ТВА		<1.0	μmol/L	0.0-10.0	
Pancreas	AMY		452.2	U/L	397.7-1285.1	
Kidneys	BUN	1	35.35	mg/dL	7.02-27.45	
Kidneys	CREA		0.73	mg/dL	0.38-1.40	
Kidneys	BUN/CREA		48.0			
Cardiovasc./Muscle	СК		245.6	U/L	66.4-257.5	<u> </u>
Cardiovasc./Muscle	LDH		121.4	U/L	36.4-143.6	
Energy metabolism	GLU		84.9	mg/dL	68.5-113.3	
Energy metabolism	TC		128.3	mg/dL	103.2-324.1	<u> </u>
Energy metabolism	TG		63.4	mg/dL	8.9-115.1	
Minerals	Ca	<b>\</b>	<4.00	mg/dL	9.20-11.88	
Minerals	PHOS	↓	1.92	mg/dL	3.10-6.81	
Minerals	CaxP		***	mmol/L^2		
Minerals	Mg	<b></b>	<0.10	mg/dL	1.73-2.58	( <del>-</del>
Electrolytes	Na+		149.7	mmol/L	141.6-160.0	
Electrolytes	K+	<b>↑</b>	8.5	mmol/L	3.5-5.9	
Electrolytes	Na/K		****			
Electrolytes	CI-		105.6	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:2025-04-19 11:07:13









Patient:	Mimi	Species:	Canine	Patient ID:	2504192
Client:	Kristine Gomez	Gender:	Female	Sample No.:	0000002
Doctor:		Age stage:	Adult	Time of analysis:	2025/04/19 11:03

	Report Explan.	
ТР	<b>↑</b>	Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.
GLOB	<b>↑</b>	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
BUN	<b>↑</b>	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.
Ca	<b>↓</b>	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	<b>↓</b>	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc.
Mg	<b>↓</b>	Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, etc.
K+	<b>↑</b>	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.

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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