

Biochemistry test report



Patient:	Taylor	Species:	Canine	Patient ID:	2512021
Client:	Maricel Sunga	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	6Y	Time of analysis:	2025/12/02 09:50

Item		Current result		Ref. Ranges	
Protein	TP	7.27	g/dL	5.31-7.92	
Protein	ALB	2.65	g/dL	2.34-4.00	
Protein	GLOB	4.62	g/dL	2.54-5.20	
Protein	A/G	0.6			
Liver and gallbladder	ALT	↑ 104.1	U/L	10.1-100.3	
Liver and gallbladder	AST	↑ 63.2	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT	0.61			
Liver and gallbladder	ALP	173.9	U/L	15.5-212.0	
Liver and gallbladder	GGT	4.3	U/L	0.0-15.9	
Liver and gallbladder	TBIL	<0.10	mg/dL	0.00-0.88	
Liver and gallbladder	TBA	12.3	μmol/L	0.0-30.0	
Pancreas	AMY	961.2	U/L	397.7-1285.1	
Kidneys	BUN	13.28	mg/dL	7.02-27.45	
Kidneys	CREA	0.78	mg/dL	0.23-1.40	
Kidneys	BUN/CREA	17.0			
Cardiovasc./Muscle	CK	↑ 525.4	U/L	66.4-257.5	
Cardiovasc./Muscle	LDH	99.3	U/L	0.0-143.6	
Energy metabolism	GLU	↑ 170.9	mg/dL	68.5-135.2	
Energy metabolism	TC	252.9	mg/dL	103.2-324.1	
Energy metabolism	TG	↑ 511.1	mg/dL	8.9-115.1	
Minerals	Ca	8.72	mg/dL	8.40-11.88	
Minerals	PHOS	2.72	mg/dL	2.48-6.81	
Minerals	CaxP	1.92	mmol/L^2		
Minerals	Mg	1.65	mg/dL	1.29-2.58	
Electrolytes	Na+	140.7	mmol/L	138.0-160.0	
Electrolytes	K+	↓ 3.4	mmol/L	3.5-5.9	
Electrolytes	Na/K	41.4			
Electrolytes	Cl-	113.1	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel

QC QC Fail

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



Report Explan.

- ALT** ↑ Increase is commonly associated with liver injury and muscle injury, etc.
- AST** ↑ Increase is commonly associated with liver injury and muscle injury, etc.

The results only applies to this test sample. Test Instrument: Mindray vetXpert C5 Time of Printing: 2025-12-02 19:16:05



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Report Explan.

CK



Increase is commonly associated with trauma, increased muscle activity (such as tetanus and convulsion), myocarditis, and myocardial infarction, etc.

GLU



Increase is commonly associated with diabetes and hypercorticism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.

TG



Increase is commonly associated with postprandial, obesity, diabetes and hypercorticism, 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.

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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