

Biochemistry test report



Patient:	DUKE	Species:	Canine	Patient ID:	115223
Client:	ELDRED COLE	Gender:	Male	Sample No.:	03
Doctor:		Age stage:	Adult	Time of analysis:	2025/04/29 12:04

Item		Current result		Ref. Ranges		2025/04/22
Protein	TP	6.04	g/dL	5.31-7.92		6.85
Protein	ALB	2.69	g/dL	2.34-4.00		3.17
Protein	GLOB	3.35	g/dL	2.54-5.20		3.68
Protein	A/G	0.8				0.9
Liver and gallbladder	ALT	↑ 190.1	U/L	10.1-100.3		147.3
Liver and gallbladder	AST	21.2	U/L	0.0-51.7		
Liver and gallbladder	AST/ALT	0.11				
Liver and gallbladder	ALP	45.5	U/L	15.5-212.0		26.8
Liver and gallbladder	GGT	<2.0	U/L	0.0-15.9		<2.0
Liver and gallbladder	TBIL	0.32	mg/dL	0.00-0.88		<0.10
Liver and gallbladder	TBA	<1.0	μmol/L	0.0-30.0		
Pancreas	AMY	1179.9	U/L	397.7-1285.1		1604.1
Kidneys	BUN	↑ 27.53	mg/dL	7.02-27.45		49.66
Kidneys	CREA	0.74	mg/dL	0.23-1.40		0.55
Kidneys	BUN/CREA	37.1				89.1
Cardiovasc./Muscle	CK	113.5	U/L	66.4-257.5		435.9
Cardiovasc./Muscle	LDH	25.6	U/L	0.0-143.6		
Energy metabolism	GLU	108.9	mg/dL	68.5-135.2		116.7
Energy metabolism	TC	203.2	mg/dL	103.2-324.1		212.7
Energy metabolism	TG	↑ 126.7	mg/dL	8.9-115.1		54.8
Minerals	Ca	8.79	mg/dL	8.40-11.88		10.13
Minerals	PHOS	2.62	mg/dL	2.48-6.81		3.32
Minerals	CaxP	1.86	mmol/L^2			2.72
Minerals	Mg	↓ 1.46	mg/dL	1.48-2.58		
Electrolytes	Na+	146.2	mmol/L	138.0-160.0		
Electrolytes	K+	4.9	mmol/L	3.5-5.9		
Electrolytes	Na/K	29.9				
Electrolytes	Cl-	↑ 130.6	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:2025-04-29 12:10:47



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Report Explan.

ALT



Increase is commonly associated with liver injury and muscle injury, etc.

BUN



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.

TG



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

Mg



Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, 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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