## Biochemistry test report



Patient:DUKESpecies:CaninePatient ID:115223Client:ELDRED COLEGender:MaleSample 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	<b>↑</b>	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	<b>↑</b>	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	СК		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	<b>↑</b>	126.7	mg/dL	8.9-115.1		54.8
Minerals	Ca		8.79	mg/dL	8.40-11.88	<u> </u>	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	$\downarrow$	1.46	mg/dL	1.48-2.58	<u> </u>	
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-	1	130.6	mmol/L	102.7-125.0	<u> </u>	

Operator:

Comprehensive Diagnosis Panel

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

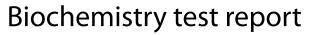
The results only applies to this test sample.

Test Instrument:Mindray vetXpert C5

Time of Printing:2025-04-29 12:10:47









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

	Report Explan.	
ALT	<b>↑</b>	Increase is commonly associated with liver injury and muscle injury, etc.
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.
TG	$\uparrow$	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalismus, 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.
CI-	<b>↑</b>	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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