Biochemistry test report



Patient:JAZZYSpecies:CaninePatient ID:110380Client:MELLY ANN QUIBLATGender:FemaleSample No.:01

Doctor: Age: 6Y Time of analysis: 2025/05/31 12:31

	Item		Current result		Ref. Ranges	
Protein	TP		7.86	g/dL	5.31-7.92	
Protein	ALB		2.94	g/dL	2.34-4.00	
Protein	GLOB		4.93	g/dL	2.54-5.20	
Protein	A/G		0.6			
Liver and gallbladder	ALT		97.4	U/L	10.1-100.3	
Liver and gallbladder	AST		17.9	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT		0.18			
Liver and gallbladder	ALP	1	449.6	U/L	15.5-212.0	
Liver and gallbladder	GGT		<2.0	U/L	0.0-15.9	<u> </u>
Liver and gallbladder	TBIL		<0.10	mg/dL	0.00-0.88	<u> </u>
Liver and gallbladder	ТВА		1.7	μmol/L	0.0-30.0	<u> </u>
Pancreas	AMY		756.4	U/L	397.7-1285.1	
Kidneys	BUN	↑	39.17	mg/dL	7.03-27.45	
Kidneys	CREA		1.02	mg/dL	0.23-1.40	<u> </u>
Kidneys	BUN/CREA		38.1			
Cardiovasc./Muscle	СК	\downarrow	40.9	U/L	66.4-257.5	
Cardiovasc./Muscle	LDH		70.2	U/L	0.0-143.6	
Energy metabolism	GLU	1	137.5	mg/dL	68.5-135.2	
Energy metabolism	тс	1	417.2	mg/dL	103.2-324.1	
Energy metabolism	TG	1	217.0	mg/dL	8.9-115.1	
Minerals	Ca		9.72	mg/dL	8.40-11.88	
Minerals	PHOS	\downarrow	2.42	mg/dL	2.48-6.81	
Minerals	CaxP		1.91	mmol/L^2		
Minerals	Mg		2.11	mg/dL	1.48-2.58	
Electrolytes	Na+		146.8	mmol/L	138.0-160.0	
Electrolytes	K+		3.9	mmol/L	3.5-5.9	
Electrolytes	Na/K		37.3			
Electrolytes	CI-		115.8	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:2025-05-31 12:36:15









Patient: JAZZY Species: Canine Patient ID: 110380 MELLY ANN QUIBLAT Gender: Sample No.: 01 Client: Female Doctor: Age: 6Y Time of analysis: 2025/05/31 12:31

	Report Explan.	
ALP	↑	Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, 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.
СК	↓	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 hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.
тс	↑	Increase is commonly associated with biliary obstruction, hypothyroidism, hypercorticalismus, nephropathy, diabetes, etc. Reduction is commonly associated with protein loss enteropathy, pancreatic exocrine insufficiency, and hypoadrenocorticism, etc.
TG	↑	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalismus, etc.
PHOS	↓	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, 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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