Biochemistry test report



Patient:SHAKEYSpecies:CaninePatient ID:118912Client:PANCINO EDUAVEGender:FemaleSample No.:04

Doctor: Age: 2M Time of analysis: 2025/07/03 12:43

_	Item		Current result		Ref. Ranges	
Protein	TP	<u></u>	5.27	g/dL	5.31-7.92	· ·
Protein	ALB	\	2.29	g/dL	2.34-4.00	
Protein	GLOB		2.98	g/dL	2.54-5.20	
Protein	A/G		0.8			
Liver and gallbladder	ALT		16.8	U/L	10.1-100.3	
Liver and gallbladder	AST		20.5	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT		1.22			
Liver and gallbladder	ALP		189.9	U/L	15.5-212.0	
Liver and gallbladder	GGT		4.9	U/L	0.0-15.9	
Liver and gallbladder	TBIL		<0.10	mg/dL	0.00-0.88	<u> </u>
Liver and gallbladder	ТВА		<1.0	μmol/L	0.0-30.0	
Pancreas	AMY	↓	352.6	U/L	397.7-1285.1	
Kidneys	BUN		8.85	mg/dL	7.03-27.45	
Kidneys	CREA		0.36	mg/dL	0.23-1.40	<u> </u>
Kidneys	BUN/CREA		24.3			
Cardiovasc./Muscle	СК	1	341.0	U/L	66.4-257.5	
Cardiovasc./Muscle	LDH		32.3	U/L	0.0-143.6	
Energy metabolism	GLU		119.5	mg/dL	68.5-135.2	<u> </u>
Energy metabolism	TC		228.2	mg/dL	103.2-324.1	
Energy metabolism	TG		108.1	mg/dL	8.9-115.1	<u> </u>
Minerals	Ca		9.56	mg/dL	8.40-11.88	
Minerals	PHOS	1	8.24	mg/dL	2.48-6.81	<u> </u>
Minerals	CaxP		6.37	mmol/L^2		
Minerals	Mg		1.92	mg/dL	1.48-2.58	
Electrolytes	Na+	\downarrow	137.6	mmol/L	138.0-160.0	
Electrolytes	K+		2.8	mmol/L	3.5-5.9	
Electrolytes	Na/K		49.2			
Electrolytes	CI-		97.4	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel

QC QC OK

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

The results only applies to this test sample.

Test Instrument:Mindray vetXpert C5

Time of Printing:2025-07-03 15:26:52









Patient: SHAKEY Species: Canine Patient ID: 118912 PANCINO EDUAVE Gender: Sample No.: 04 Client: Female Age: 2025/07/03 12:43 Doctor: 2M Time of analysis:

	Report Explan.	
ТР	↓	Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.
ALB	↓	Increase is commonly associated with dehydration and corticosteroid administration, etc. Reduction is commonly associated with excessive infusion, malnutrition, hepatic insufficiency or failure, nephropathy, and protein-losing enteropathy.
AMY	↓	Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, etc.
СК	↑	Increase is commonly associated with trauma, increased muscle activity (such as tetanus and convulsion), myocarditis, and myocardial infarction, etc.
PHOS	↑	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc.
Na+	↓	Increase is commonly associated with salt intoxication, hypertonic NaCl solution rehydration, hyperaldosteronism, and severe dehydration, etc. Reduction is commonly associated with hypoadrenocorticism, diuretic therapy, 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 hypercorticalismus, etc.
CI-	↓ 	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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