## Biochemistry test report



Patient:DUKESpecies:CaninePatient ID:111660Client:MARY MADERALGender:MaleSample No.:06

Doctor: Age: 8Y Time of analysis: 2025/07/28 12:32

	Item		Current result		Ref. Ranges	
Protein	TP		7.49	g/dL	5.31-7.92	
Protein	ALB		3.05	g/dL	2.34-4.00	
Protein	GLOB		4.44	g/dL	2.54-5.20	
Protein	A/G		0.7			
Liver and gallbladder	ALT		33.3	U/L	10.1-100.3	
Liver and gallbladder	AST		43.7	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT		1.31			
Liver and gallbladder	ALP		92.8	U/L	15.5-212.0	
Liver and gallbladder	GGT		<2.0	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	<u> </u>
Pancreas	AMY		1245.2	U/L	397.7-1285.1	
Kidneys	BUN		13.80	mg/dL	7.03-27.45	<u> </u>
Kidneys	CREA		1.28	mg/dL	0.23-1.40	
Kidneys	BUN/CREA		10.7			
Cardiovasc./Muscle	СК		212.9	U/L	66.4-257.5	<u> </u>
Cardiovasc./Muscle	LDH		138.7	U/L	0.0-143.6	<u> </u>
Energy metabolism	GLU		123.3	mg/dL	68.5-135.2	
Energy metabolism	TC		128.0	mg/dL	103.2-324.1	<u> </u>
Energy metabolism	TG	1	124.9	mg/dL	8.9-115.1	<u> </u>
Minerals	Ca		10.04	mg/dL	8.40-11.88	
Minerals	PHOS	$\downarrow$	1.33	mg/dL	2.48-6.81	
Minerals	CaxP		1.07	mmol/L^2		
Minerals	Mg	<b>↓</b>	1.31	mg/dL	1.48-2.58	
Electrolytes	Na+		152.1	mmol/L	138.0-160.0	<u> </u>
Electrolytes	K+		4.4	mmol/L	3.5-5.9	
Electrolytes	Na/K		34.7			
Electrolytes	CI-		113.3	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:2025-07-28 12:40:03









Patient: DUKE Species: Canine Patient ID: 111660 MARY MADERAL Gender: Male Sample No.: 06 Client: Age: 8Y 2025/07/28 12:32 Doctor: Time of analysis:

	Report Explan.	
TG	<b>↑</b>	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalismus, etc.
PHOS	<b>↓</b>	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, 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.

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. The results only applies to this test sample.

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