

Biochemistry test report



Patient:	SISSY	Species:	Canine	Patient ID:	107691
Client:	PERCY SALAZAR	Gender:	Female	Sample No.:	01
Doctor:		Age:	10Y	Time of analysis:	2025/09/13 09:38

Item		Current result		Ref. Ranges	
Protein	TP	6.37	g/dL	5.31-7.92	
Protein	ALB	↓ 1.97	g/dL	2.34-4.00	
Protein	GLOB	4.41	g/dL	2.54-5.20	
Protein	A/G	0.4			
Liver and gallbladder	ALT	↓ 9.6	U/L	10.1-100.3	
Liver and gallbladder	ALP	160.2	U/L	15.5-212.0	
Liver and gallbladder	GGT	4.5	U/L	0.0-15.9	
Liver and gallbladder	TBIL	0.14	mg/dL	0.00-0.88	
Pancreas	AMY	693.9	U/L	397.7-1285.1	
Kidneys	BUN	↑ 27.57	mg/dL	7.03-27.45	
Kidneys	CREA	0.66	mg/dL	0.23-1.40	
Kidneys	BUN/CREA	41.6			
Cardiovasc./Muscle	CK	180.1	U/L	66.4-257.5	
Energy metabolism	GLU	↑ 162.4	mg/dL	68.5-135.2	
Energy metabolism	TC	190.3	mg/dL	103.2-324.1	
Energy metabolism	TG	↑ 122.2	mg/dL	8.9-115.1	
Minerals	Ca	8.44	mg/dL	8.40-11.88	
Minerals	PHOS	3.50	mg/dL	2.48-6.81	
Minerals	CaxP	2.37	mmol/L^2		

Operator:

Diagnosis/Health Checking Panel				QC QC OK	
HEM(Hemolysis degree):	0	LIP(Lipemia degree):	0	ICT(Jaundice degree):	0



Report Explan.

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.

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.

GLU



Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.

The results only applies to this test sample.

Test Instrument: Mindray vetXpert C5

Time of Printing: 2025-09-13 09:39:40



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Report Explan.

TG



Increase is commonly associated with postprandial, obesity, diabetes and hypercorticismus, 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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