

# Biochemistry test report



Patient: JOY JOY Species: Canine Patient ID: 113625  
 Client: NERI Gender: Female Sample No.: 02  
 Doctor: Age stage: Time of analysis: 2025/03/02 18:33

Item	Current result	Ref. Ranges
Protein <b>TP</b> ↑ <b>8.04</b> g/dL	5.31-7.92	
Protein <b>ALB</b> ↓ <b>2.32</b> g/dL	2.34-4.00	
Protein <b>GLOB</b> ↑ <b>5.72</b> g/dL	2.54-4.40	
Protein <b>A/G</b> <b>0.4</b>		
Liver and gallbladder <b>ALT</b> <b>48.0</b> U/L	10.1-100.3	
Liver and gallbladder <b>AST</b> <b>34.6</b> U/L	21.0-51.7	
Liver and gallbladder <b>AST/ALT</b> <b>0.72</b>		
Liver and gallbladder <b>ALP</b> <b>49.0</b> U/L	15.5-125.0	
Liver and gallbladder <b>GGT</b> <b>&lt;2.0</b> U/L	0.0-15.9	
Liver and gallbladder <b>TBIL</b> <b>&lt;0.10</b> mg/dL	0.00-0.88	
Pancreas <b>AMY</b> ↑ <b>&gt;4000.0</b> U/L	397.7-1285.1	
Kidneys <b>BUN</b> ↑ <b>&gt;182.65</b> mg/dL	7.02-27.45	
Kidneys <b>CREA</b> ↑ <b>9.48</b> mg/dL	0.38-1.40	
Kidneys <b>BUN/CREA</b> <b>****</b>		
Cardiovasc./Muscle <b>CK</b> <b>214.8</b> U/L	66.4-257.5	
Cardiovasc./Muscle <b>LDH</b> <b>82.2</b> U/L	36.4-143.6	
Energy metabolism <b>GLU</b> ↑ <b>186.0</b> mg/dL	68.5-113.3	
Energy metabolism <b>TC</b> <b>264.5</b> mg/dL	103.2-324.1	
Minerals <b>Ca</b> ↓ <b>7.29</b> mg/dL	9.20-11.88	
Minerals <b>PHOS</b> ↑ <b>&gt;20.13</b> mg/dL	3.10-6.81	
Minerals <b>CaxP</b> <b>****</b> mmol/L^2		
Electrolytes <b>tCO2</b> ↓ <b>6.82</b> mmol/L	13.14-25.13	
Electrolytes <b>Na+</b> ↑ <b>165.0</b> mmol/L	141.6-160.0	
Electrolytes <b>K+</b> <b>3.9</b> mmol/L	3.5-5.9	
Electrolytes <b>Na/K</b> <b>41.9</b>		
Electrolytes <b>Cl-</b> ↑ <b>&gt;135.0</b> 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: 2025-03-02 18:35:32



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# Biochemistry test report



Patient:	JOY JOY	Species:	Canine	Patient ID:	113625
Client:	NERI	Gender:	Female	Sample No.:	02
Doctor:		Age stage:		Time of analysis:	2025/03/02 18:33



## Report Explan.

<b>TP</b>	↑	Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.
<b>ALB</b>	↓	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.
<b>GLOB</b>	↑	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
<b>AMY</b>	↑	Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, etc.
<b>BUN</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.
<b>CREA</b>	↑	Increase is commonly associated with nephropathy, etc. Reduction is commonly associated with malnutrition and muscular atrophy, etc.
<b>GLU</b>	↑	Increase is commonly associated with diabetes and hypercorticism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.
<b>Ca</b>	↓	Increase is commonly associated with hypoadrenocorticism, lymphoma, and nephropathy, etc. Reduction is commonly associated with low calcium diet, hypoalbuminemia, nephropathy, and vitamin D deficiency, etc.
<b>PHOS</b>	↑	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc.
<b>tCO2</b>	↓	Increase is commonly associated with metabolic alkalosis and respiratory acidosis; Reduction is commonly associated with metabolic acidosis, respiratory alkalosis
<b>Na+</b>	↑	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.
<b>Cl-</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. The results only applies to this test sample.

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