

# Hematology Analysis Report



|          |                 |          |        |                   |                  |
|----------|-----------------|----------|--------|-------------------|------------------|
| Patient: | BOSSIE          | Species: | Canine | Patient ID:       | 053025           |
| Client:  | VICKY JAQUILMAC | Gender:  | Male   | Sample No.:       | 06               |
| Doctor:  |                 | Age:     | 3Years | Time of analysis: | 2025/05/30 15:26 |

| Para.     |        | Current result |                     | Ref. Ranges |  |
|-----------|--------|----------------|---------------------|-------------|--|
| WBC Para. | WBC    | 13.60          | 10 <sup>3</sup> /uL | 5.32-16.92  |  |
|           | Neu#   | 9.34           | 10 <sup>3</sup> /uL | 3.05-12.10  |  |
|           | Lym#   | 2.11           | 10 <sup>3</sup> /uL | 0.70-4.95   |  |
|           | Mon#   | H 1.52         | 10 <sup>3</sup> /uL | 0.20-1.38   |  |
|           | Eos#   | 0.61           | 10 <sup>3</sup> /uL | 0.04-1.28   |  |
|           | Bas#   | 0.01           | 10 <sup>3</sup> /uL | 0.00-0.13   |  |
|           | Neu%   | 68.7           | %                   | 42.0-84.0   |  |
|           | Lym%   | 15.5           | %                   | 6.0-40.0    |  |
|           | Mon%   | 11.2           | %                   | 2.5-12.0    |  |
|           | Eos%   | 4.5            | %                   | 0.3-11.0    |  |
|           | Bas%   | 0.1            | %                   | 0.0-1.0     |  |
| RBC Para. | RBC    | L 2.53         | 10 <sup>6</sup> /uL | 5.20-8.69   |  |
|           | HGB    | L 6.1          | g/dL                | 11.5-20.1   |  |
|           | HCT    | L 20.9         | %                   | 35.0-60.0   |  |
|           | MCV    | H 82.8         | fL                  | 60.0-77.5   |  |
|           | MCH    | 24.3           | pg                  | 20.0-27.0   |  |
|           | MCHC   | L 29.2         | g/dL                | 30.0-38.0   |  |
|           | RDW-CV | H 19.9         | %                   | 11.3-18.9   |  |
|           | RDW-SD | H 63.2         | fL                  | 29.1-55.1   |  |
| PLT Para. | PLT    | L 34           | 10 <sup>3</sup> /uL | 140-520     |  |
|           | MPV    | 11.8           | fL                  | 7.6-16.1    |  |
|           | PDW    | 16.7           |                     | 13.8-17.9   |  |
|           | PCT    | L 0.039        | %                   | 0.120-0.700 |  |
|           | P-LCC  | L 15           | 10 <sup>3</sup> /uL | 25-180      |  |
|           | P-LCR  | 42.8           | %                   | 10.0-57.0   |  |
|           | IPF    | 11.3           | %                   | 0.4-17.1    |  |
| RET Para. | RET#   | 83.00          | 10 <sup>3</sup> /uL | 9.00-115.00 |  |
|           | RET%   | H 3.28         | %                   | 0.16-1.95   |  |
|           | IRF    | 37.6           | %                   | 0.0-45.1    |  |
|           | LFR    | 62.4           | %                   | 56.0-100.0  |  |
|           | MFR    | H 27.7         | %                   | 0.0-26.0    |  |
|           | HFR    | 9.9            | %                   | 0.0-22.0    |  |
|           | RHE    | 22.6           | pg                  | 20.0-28.3   |  |

The results only applies to this test sample. Test Instrument: Mindray BC-60R Vet Time of Printing: 2025-05-30 15:38:38



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| Client:  | VICKY JAQUILMAC | Gender:  | Male   | Sample No.:       | 06               |
| Doctor:  |                 | Age:     | 3Years | Time of analysis: | 2025/05/30 15:26 |

Operator:



## Diagnosis implications:

**Anemia**

**Thrombocytopenia**

### Report Explan.

#### **Anemia**

It occurs in anemia caused by various reasons, such as insufficient hematopoietic materials, hematopoietic dysfunction, excessive destruction of RBC, or blood loss

#### **Thrombocytopenia**

It occurs in pseudo-reduction caused by PLT clump, infection, hemorrhage, disseminated intravascular coagulation, immune-mediated diseases, drug treatment, and tuberculosis of bone marrow

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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