

BATINGA AMC Test Report of Hematology Analysis

Hospital Address:SM CITY CDO UPTOWN

Contact number:09061211260

Report No.:2606110001

Medical No.:

Test Time:2026.06.11 11:54:54

Pet Name:DODONG

Pet type:Canine

Gender:Male

Age: Year

Sample Type:Whole blood

Owner:

Parameters	Result	Reference range	Low	Normal	High
01. WBC (White blood cell count)	17.77 10 ³ /uL↑	5.05-16.76			
NEU# (Neutrophil count)	15.90 10 ³ /uL↑	2.95-11.64			
NST# (Band neutrophil count)	0.11 10 ³ /uL	0.00-0.80			
NSG# (Segmented neutrophil count)	15.01 10 ³ /uL↑	2.50-11.30			
NSH# (Hypersegmented neutrophil count)	0.79 10 ³ /uL↑	0.00-0.40			
LYM# (Lymphocyte count)	0.76 10 ³ /uL↓	1.05-5.10			
SLYM# (Small lymphocyte count)	0.76 10 ³ /uL↓	1.05-5.10			
LLYM# (Large lymphocyte count)	0.00 10 ³ /uL	0.00-0.00			
MON# (Monocyte count)	0.99 10 ³ /uL	0.16-1.12			
EOS# (Eosinophil count)	0.11 10 ³ /uL	0.06-1.23			
BAS# (Basophil count)	0.00 10 ³ /uL	0.00-0.10			
NEU% (Neutrophil ratio)	89.52 %↑	52.00-78.00			
NST/WBC% (Band neutrophil ratio)	0.61 %	0.00-10.00			
NST/NEU% (Band neutrophil ratio)	0.68 %	0.00-20.00			
NSG% (Segmented neutrophil ratio)	84.48 %↑	50.00-75.00			
NSH/WBC% (Hypersegmented neutrophil ratio)	4.42 %	0.00-5.00			
NSH/NEU% (Hypersegmented neutrophil ratio)	4.94 %	0.00-7.00			
LYM% (Lymphocyte ratio)	4.29 %↓	16.00-41.50			
MON% (Monocyte ratio)	5.58 %	1.00-13.00			
EOS% (Eosinophil ratio)	0.61 %	0.50-11.85			
BAS% (Basophil ratio)	0.00 %	0.00-0.90			
02. RBC (Red blood cell count)	7.70 10 ⁶ /uL	5.65-8.87			
HGB (Hemoglobin concentration)	18.10 g/dL	13.10-20.50			
HCT (Hematocrit)	55.63 %	37.30-61.70			
MCV (Mean red cell volume)	72.26 fL	61.60-73.50			
MCH (Mean Hb per RBC)	23.52 pg	21.20-25.90			
MCHC (Mean Hb conc in RBC)	32.54 g/dL	32.00-37.90			
RDW-CV (RBC dist width-CV)	11.91 %	11.20-17.10			
RDW-SD (RBC dist width-SD)	28.33 fL	25.60-41.60			
HDW-CV (Hb dist width-CV)	16.25 %	7.00-20.00			
HDW-SD (Hb dist width-SD)	0.38 g/dL	0.20-0.80			
RET# (Reticulocyte count)	20.56 10 ³ /uL	3.00-110.00			
RET% (Reticulocyte ratio)	0.27 %	0.00-1.50			
ETG# (Shadow red cell count)	0.00 10 ¹² /L	0.00-0.05			
ETG% (Shadow red cell ratio)	0.00 %	0.00-1.65			
SPH# (Spherocyte count)	0.00 10 ⁹ /L	0.00-130.10			
SPH% (Spherocyte ratio)	0.00 %	0.00-1.54			
ACA# (Acanthocyte count)	0.00 10 ³ /uL	0.00-0.00			
NRBC# (Nucleated red cell count)	0.00 10 ³ /uL	0.00-0.00			
NRBC/WBC% (Nucleated red cell ratio)	0.00 %	0.00-0.00			
AGG# (Agglutinated red cell count)	0.00 10 ³ /uL	0.00-0.15			
03. PLT (Platelet count)	223.76 10 ³ /uL	148.00-484.00			
MPV (Mean platelet volume)	9.96 fL	8.70-13.20			
PDW (Platelet distribution width)	16.88 fL	9.10-19.40			
PCT (Plateletcrit)	0.22 %	0.14-0.46			
APLT# (Aggregated platelet count)	0.00 10 ³ /uL	0.00-0.15			
P-LCC (Large platelet count)	13.43 10 ³ /uL	0.00-66.00			
P-LCR (Large platelet ratio)	6.00 %	0.00-25.00			

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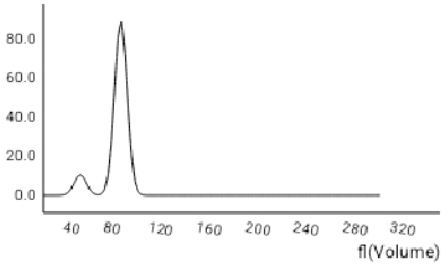
Contact number: 09061211260

Report No.: 2606110001

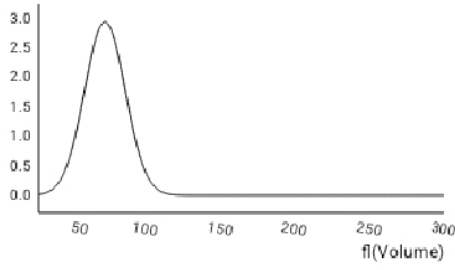
Pet Name: DODONG

Pet type: Canine

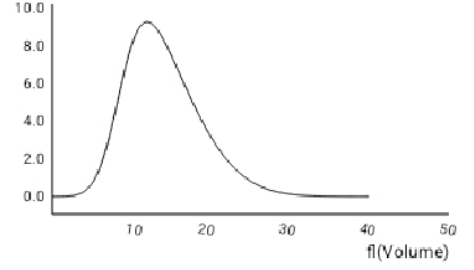
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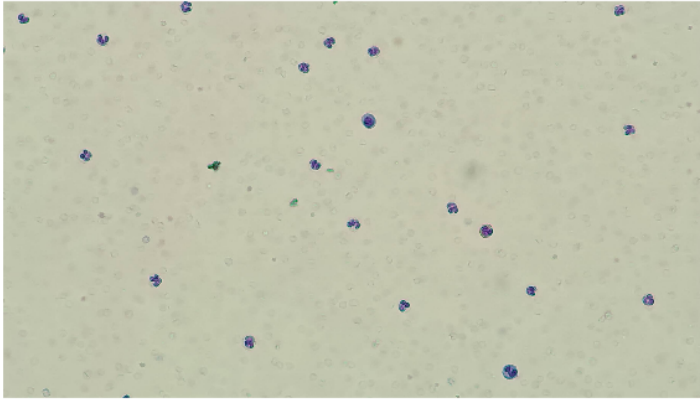
RBC



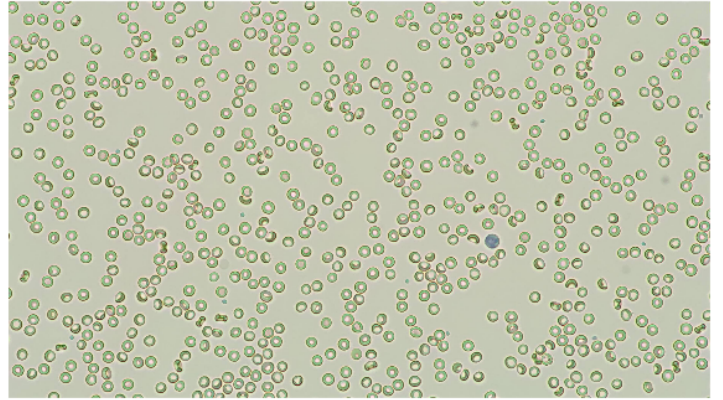
PLT



WBC images



RBC&PLT images



NST# 0.11 $10^3/uL$



STD image Number: 13 sheets/143 images/754 images

NSG# 15.01 $10^3/uL$



STD image Number: 1573 sheets/143 images/754 images

NSH# 0.79 $10^3/uL$



STD image Number: 82 sheets/143 images/754 images

SLYM# 0.76 $10^3/uL$



STD image Number: 79 sheets/143 images/754 images

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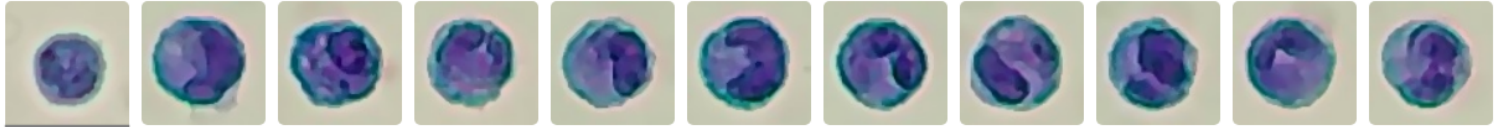
Contact number: 09061211260

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Pet Name: DODONG

Pet type: Canine

MON# 0.99 $10^3/uL$



STD image Number: 95 sheets/143 images/754 images

EOS# 0.11 $10^3/uL$



STD image Number: 12 sheets/143 images/754 images

RET# 20.56 $10^3/uL$



STD image Number: 210 sheets/143 images/754 images

P-LCC 13.43 $10^3/uL$



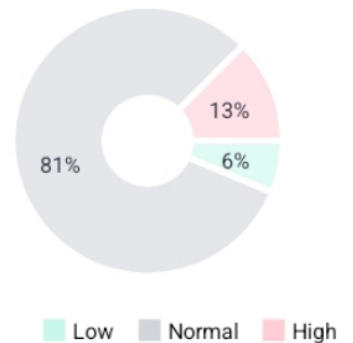
STD image Number: 703 sheets/575 images/754 images

1. Acute inflammatory response

Basis for judgment: Significant elevation of neutrophils and segmented neutrophils, accompanied by lymphopenia, suggests the presence of acute inflammation or bacterial infection. Commonly seen in sepsis or severe local infection.

2. No significant hematological abnormalities

Basis for judgment: All blood cell parameters are Within Normal Range, with no signs of anemia, infection, or inflammation, suggesting the body's blood system is basically Within Normal Range.



WBC 17.77 $10^3/uL$ ↑ (5.05-16.76)

-Clinical indication: Presence of acute inflammation or infection (bacterial infection is most typical), tissue damage/necrosis, drug/hormone effects, stress response, or myeloproliferative disorders.

-Basis for judgment: Bacterial infection stimulates the bone marrow to accelerate the release of White Blood Cells to fight pathogens; inflammatory responses triggered by trauma, surgery, burns, pancreatitis, etc.; use of drugs such as glucocorticoids and colony-stimulating factors can induce elevated White Blood Cell counts; physiological or pathological stress leads to redistribution of White Blood Cells, resulting in transient elevation; abnormal proliferation of hematopoietic stem cells leads to persistent and significant elevation of White Blood Cells (mostly malignant lesions).

NEU# 15.90 $10^3/uL$ ↑ (2.95-11.64)

-Clinical indication: Suggests acute inflammation or infection (local or systemic bacterial infection), tissue necrosis, tumors, stress/cortisol effects, hemorrhage or Hemolysis, granulocytic leukemia, etc.

-Basis for judgment: Neutrophilia is a typical manifestation of acute inflammation (surgery, trauma, infarction, tumor necrosis, thermal injury) or bacterial infection (such as pneumonia, pyelonephritis, cellulitis, pyometra); tumors can secrete granulocyte colony-stimulating factors, etc., stimulating excessive bone marrow production; Chronic Myeloid Leukemia, Myelodysplastic Syndrome (MDS), etc., involve uncontrolled proliferation within the bone marrow itself; exogenous corticosteroids are the most common drugs leading to iatrogenic neutrophilia.

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NSG# 15.01 $10^3/uL$ ↑ (2.50-11.30)

-Clinical indication:Commonly seen in acute bacterial infection, acute inflammation/tissue damage, stress response or myeloproliferative lesions, drugs/hormones, poisoning, etc.

-Basis for judgment:Essentially, the bone marrow accelerates the release of mature neutrophils or the retention time of peripheral blood neutrophils is prolonged. Infectious factors (bronchitis, periodontitis, bacterial pneumonia, pyometra, bacterial enteritis, severe sepsis, bacterial peritonitis); non-infectious inflammation/tissue damage (trauma, surgery, burns, acute pancreatitis); transport fright, pain stimulation, surgical stress, history of glucocorticoid medication; Chronic Myeloid Leukemia, Polycythemia Vera, myelofibrosis (malignant, rare but high risk).

NSH# 0.79 $10^3/uL$ ↑ (0.00-0.40)

-Clinical indication:Right shift of neutrophil nucleus, commonly seen in Vitamin B 12 or folic acid deficiency, use of anti-metabolites, long-term use of hormones causing metabolic issues, chronic inflammation, etc. Right shift is a sign of declining bone marrow hematopoietic function, and in severe cases, it is often caused by high exhaustion of the body.

-Basis for judgment:Vitamin B 12 or folic acid deficiency affects all rapidly dividing cells, leading to DNA synthesis disorder → delayed nuclear development resulting in a right shift. During the recovery phase of inflammation, a transient right shift of neutrophils often occurs. Severe right shift suggests bone marrow function decline; if the condition is serious, bone marrow hematopoietic function is exhausted, the body's disease resistance is reduced, and the prognosis is poor.

LYM# 0.76 $10^3/uL$ ↓ (1.05-5.10)

-Clinical indication:Lymphopenia suggests stress, severe infection, consumption after viral infection, drugs (glucocorticoid effect), lymphoma, or immunosuppressive states.

-Basis for judgment:Lymphopenia is commonly seen in various diseases accompanied by neutrophilia, where lymphoid tissue is damaged, stress, severe infection, viral infections (such as canine distemper, feline panleukopenia), excess adrenocortical hormones, or immunosuppressive diseases.

Possible diseases and basis for inference

Bacterial sepsis **High**

Significant elevation of WBC, NEU, NSG#, NSH#, accompanied by decreased LYM, consistent with characteristics of severe bacterial infection.

Acute purulent infection **Medium**

Significant neutrophilia and increased segmented ratio suggest local acute purulent inflammation.

Stress-induced leukocytosis **Low**

If there is no clear source of infection, stress can lead to similar hematological changes, but usually not accompanied by significant lymphopenia.

[1]Boden,E. Andrews,A. (2015). The Black Veterinary Dictionary (22nd Edition). London: Bloomsbury Press.

[2]Latimer,K.S. (2011). Duncan & Plath Veterinary Laboratory Medicine: Clinical Pathology (5th Edition). Ames, Iowa: Willy Blackwell Publishing House.

[3]Merck Veterinary Manual (2025). Clinical Hematology - Clinical Pathology and Operating Procedures.[4]Weiss,D.J. and Wardrop,K.J. (2010). Schalm Veterinary Hematology (6th Edition). Ames, Iowa: Willy Blackwell Publishing House.