PUMBA Test report



Patient: PUMBA Species: Canine Patient ID: 2508091
Client: SAJULGA Gender: Female Age: 6Y

Al Aided Diag. Explan.

It is recommended to add symmetric dimethylarginine (SDMA), urinary protein to creatinine ratio (UPC), urinary specific gravity (SG), and imaging examinations to identify the cause and grading of renal dysfunction, based on clinical manifestations and medical history.

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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Biochemistry test report



Patient:PUMBASpecies:CaninePatient ID:2508091Client:SAJULGAGender:FemaleSample No.:01

Doctor: Age: 6Y Time of analysis: 2025/08/11 10:17

	ltem		Current result		Ref. Ranges	
Protein	TP		70.7	g/L	53.1-79.2	<u> </u>
Protein	ALB		23.8	g/L	23.4-40.0	
Protein	GLOB		46.9	g/L	25.4-52.0	<u> </u>
Protein	A/G		0.5			
Liver and gallbladder	ALT		34.2	U/L	10.1-100.3	
Liver and gallbladder	AST		18.3	U/L	0.0-51.7	
Liver and gallbladder	AST/ALT		0.53			
Liver and gallbladder	ALP		73.7	U/L	15.5-212.0	
Liver and gallbladder	GGT		<2.0	U/L	0.0-15.9	
Liver and gallbladder	TBIL		3.21	μmol/L	0.00-15.00	
Liver and gallbladder	ТВА		<1.0	μmol/L	0.0-30.0	· · · · · · · · · · · · · · · · · · ·
Pancreas	AMY	1	1811.8	U/L	397.7-1285.1	
Kidneys	BUN	1	>65.00	mmol/L	2.50-9.77	©
Kidneys	CREA	1	842.30	μmol/L	20.00-123.70	©
Kidneys	BUN/CREA		***			
Cardiovasc./Muscle	СК		107.9	U/L	66.4-257.5	
Cardiovasc./Muscle	LDH		24.5	U/L	0.0-143.6	<u> </u>
Energy metabolism	GLU	1	8.88	mmol/L	3.80-7.50	
Energy metabolism	тс	1	9.13	mmol/L	2.67-8.38	
Energy metabolism	TG		1.26	mmol/L	0.10-1.30	<u> </u>
Minerals	Ca	\downarrow	1.42	mmol/L	2.10-2.97	
Minerals	PHOS	↑	>6.50	mmol/L	0.80-2.20	· · · · · · · · · · · · · · · · · · ·
Minerals	CaxP		***	mmol/L^2		
Minerals	Mg	1	1.50	mmol/L	0.61-1.06	
Electrolytes	Na+		151.7	mmol/L	138.0-160.0	
Electrolytes	K+		4.9	mmol/L	3.5-5.9	
Electrolytes	Na/K		30.9			
Electrolytes	CI-		114.9	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:2025-08-11 11:19:57









Patient: **PUMBA** Species: Canine Patient ID: 2508091 SAJULGA Gender: Female Sample No.: 01 Client: 2025/08/11 10:17 Doctor: Age: 6Y Time of analysis:

	Report Explan.	
AMY	↑	Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, 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.
CREA	↑	Increase is commonly associated with nephropathy, etc. Reduction is commonly associated with malnutrition and muscular atrophy, etc.
GLU	↑	Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.
тс	↑	Increase is commonly associated with biliary obstruction, hypothyroidism, hypercorticalismus, nephropathy, diabetes, etc. Reduction is commonly associated with protein loss enteropathy, pancreatic exocrine insufficiency, and hypoadrenocorticism, etc.
Са	↓	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.
PHOS	<u> </u>	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc.
Mg	↑	Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, etc.

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