

BLACKBEAN Test report



Patient:	BLACKBEAN	Species:	Canine	Patient ID:	2509043
Client:	MAAGAD	Gender:	Female	Age:	5Y

AI Aided Diag. Explan.

Please evaluate the severity of anemia based on clinical manifestations and medical history. It is recommended to add an RET test and a blood smear test to assess white blood cell and red blood cell morphology. At the same time, tests of liver and kidney panels, electrolytes, and protein level should be added to assess overall health status and potential metabolic abnormalities. If necessary, screening for infectious diseases such as feline leukemia virus, feline immunodeficiency virus, canine distemper virus, babesiosis, etc. should be carried out based on clinical symptoms and regional characteristics.

It is recommended to add a blood smear test to evaluate platelet and other cell morphology, as well as coagulation (such as cD-dimer) to assess whether coagulation function is normal, 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.

Time of Printing:2025-09-11 16:26:30



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Biochemistry test report



Patient:	BLACKBEAN	Species:	Canine	Patient ID:	2509043
Client:	MAAGAD	Gender:	Female	Sample No.:	4
Doctor:		Age:	5Y	Time of analysis:	2025/09/04 13:46

Item		Current result		Ref. Ranges	
Protein	TP	↑	98.0	g/L	53.1-79.2
Protein	ALB	↓	19.3	g/L	23.4-40.0
Protein	GLOB	↑	78.7	g/L	25.4-52.0
Protein	A/G		0.2		
Liver and gallbladder	ALT		21.6	U/L	10.1-100.3
Liver and gallbladder	AST		31.7	U/L	0.0-51.7
Liver and gallbladder	AST/ALT		1.47		
Liver and gallbladder	ALP		112.5	U/L	15.5-212.0
Liver and gallbladder	GGT		5.6	U/L	0.0-15.9
Liver and gallbladder	TBIL		<1.70	μmol/L	0.00-15.00
Liver and gallbladder	TBA		<1.0	μmol/L	0.0-30.0
Pancreas	AMY	↑	1319.9	U/L	397.7-1285.1
Kidneys	BUN		6.48	mmol/L	2.50-9.77
Kidneys	CREA		93.40	μmol/L	20.00-123.70
Kidneys	BUN/CREA		17.2		
Cardiovasc./Muscle	CK	L-	141.4	U/L	66.4-257.5
Cardiovasc./Muscle	LDH		70.9	U/L	0.0-143.6
Energy metabolism	GLU		5.19	mmol/L	3.80-7.50
Energy metabolism	TC		3.15	mmol/L	2.67-8.38
Energy metabolism	TG		0.54	mmol/L	0.10-1.30
Minerals	Ca		2.31	mmol/L	2.10-2.97
Minerals	PHOS		1.56	mmol/L	0.80-2.20
Minerals	CaxP		3.61	mmol/L ²	
Minerals	Mg		0.81	mmol/L	0.53-1.06
Electrolytes	Na+	L-	143.6	mmol/L	138.0-160.0
Electrolytes	K+		4.6	mmol/L	3.5-5.9
Electrolytes	Na/K		31.4		
Electrolytes	Cl-	↑	125.4	mmol/L	102.7-125.0

Operator:

Comprehensive Diagnosis Panel

QC QC OK

HEM(Hemolysis degree): 0 LIP(Lipemia degree): 2+ ICT(Jaundice degree): 0

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Report Explan.

TP



Increase is commonly associated with dehydration and increased globulin. Reduction is commonly associated with blood loss, protein-losing enteropathy, and decreased albumin.

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.

GLOB



Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.

AMY



Increase is commonly associated with gastroenteritis, pancreatitis, pancreatic tumor, etc.

Cl-



Increase is commonly associated with salt intoxication, hypertonic NaCl solution rehydration, small intestinal diarrhea, etc. Reduction is commonly associated with vomiting, diuretic therapy, etc.

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Hematology Analysis Report



Patient:	BLACKBEAN	Species:	Canine	Patient ID:	2509043
Client:	MAAGAD	Gender:	Female	Sample No.:	3
Doctor:	DR. LOVELY TAN	Age:	5Years	Time of analysis:	2025/09/04 13:23

Para.		Current result		Ref. Ranges	
WBC Para.	WBC	15.48	10 ⁹ /L	6.00-17.00	
	Neu#	11.39	10 ⁹ /L	3.20-12.30	
	Lym#	1.87	10 ⁹ /L	0.80-5.30	
	Mon#	H 1.55	10 ⁹ /L	0.00-1.50	
	Eos#	0.67	10 ⁹ /L	0.00-1.50	
	Neu%	0.736		0.430-0.850	
	Lym%	0.121		0.090-0.400	
	Mon%	0.100		0.000-0.100	
	Eos%	0.043		0.000-0.100	
RBC Para.	RBC	L 2.53	10 ¹² /L	5.10-8.50	
	HGB	L 59	g/L	110-195	
	HCT	L 0.175		0.325-0.580	
	MCV	69.0	fL	60.0-76.0	
	MCH	23.4	pg	20.0-27.0	
	MCHC	340	g/L	300-380	
	RDW-CV	H 0.198		0.108-0.172	
	RDW-SD	H 55.6	fL	29.1-46.3	
PLT Para.	PLT	L 63	10 ⁹ /L	117-490	
	MPV	10.6	fL	7.6-14.1	
	PDW	15.6		12.0-17.5	
	PCT	L 0.67	mL/L	0.90-5.20	
	P-LCC	L 23	10 ⁹ /L	25-148	
	P-LCR	0.359		0.115-0.550	

Operator:

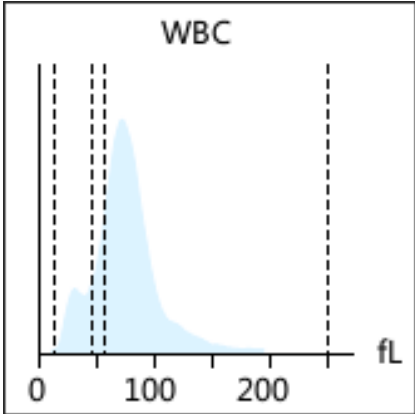
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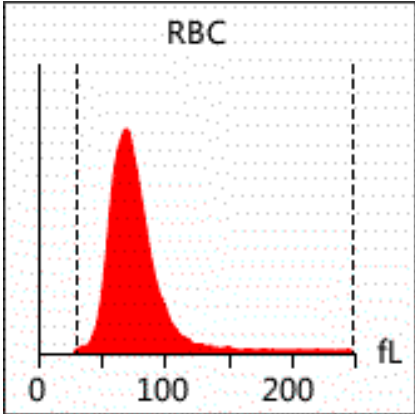
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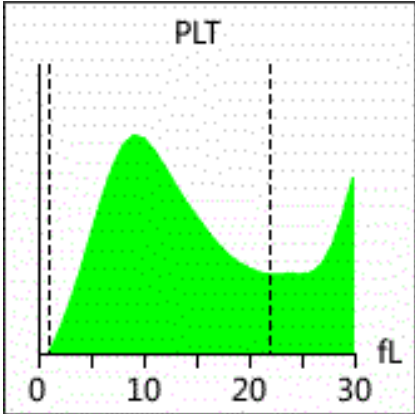
WBC Histogram



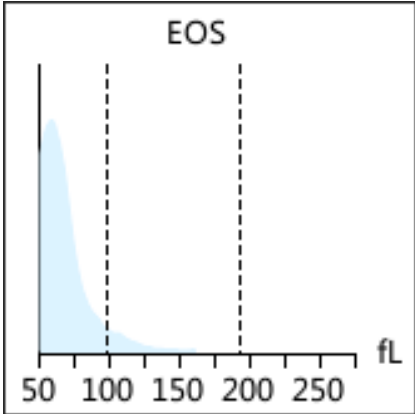
RBC Histogram



PLT Histogram



EOS Histogram



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

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