

# Biochemistry test report



|          |           |          |        |                   |                  |
|----------|-----------|----------|--------|-------------------|------------------|
| Patient: | LOGAN     | Species: | Canine | Patient ID:       | 2511281          |
| Client:  | CAMPECIÑO | Gender:  | Male   | Sample No.:       | 01               |
| Doctor:  |           | Age:     | 4Y     | Time of analysis: | 2025/11/28 09:55 |

| Item                  |          | Current result |       | Ref. Ranges |              |
|-----------------------|----------|----------------|-------|-------------|--------------|
| Protein               | TP       | ↓              | 40.7  | g/L         | 53.1-79.2    |
| Protein               | ALB      | ↓              | 18.5  | g/L         | 23.4-40.0    |
| Protein               | GLOB     | ↓              | 22.3  | g/L         | 25.4-52.0    |
| Protein               | A/G      |                | 0.8   |             |              |
| Liver and gallbladder | ALT      |                | 32.9  | U/L         | 10.1-100.3   |
| Liver and gallbladder | AST      |                | 22.6  | U/L         | 0.0-51.7     |
| Liver and gallbladder | AST/ALT  |                | 0.69  |             |              |
| Liver and gallbladder | ALP      |                | 38.3  | U/L         | 15.5-212.0   |
| Liver and gallbladder | GGT      |                | 4.8   | U/L         | 0.0-15.9     |
| Liver and gallbladder | TBIL     |                | 3.46  | μmol/L      | 0.00-15.00   |
| Liver and gallbladder | TBA      |                | 5.8   | μmol/L      | 0.0-30.0     |
| Pancreas              | AMY      |                | 690.1 | U/L         | 397.7-1285.1 |
| Kidneys               | BUN      |                | 7.23  | mmol/L      | 2.50-9.77    |
| Kidneys               | CREA     |                | 37.50 | μmol/L      | 20.00-123.70 |
| Kidneys               | BUN/CREA |                | 47.7  |             |              |
| Cardiovasc./Muscle    | CK       |                | 144.8 | U/L         | 66.4-257.5   |
| Cardiovasc./Muscle    | LDH      |                | 42.0  | U/L         | 0.0-143.6    |
| Energy metabolism     | GLU      | ↑              | 10.83 | mmol/L      | 3.80-7.50    |
| Energy metabolism     | TC       | ↓              | 2.60  | mmol/L      | 2.67-8.38    |
| Energy metabolism     | TG       |                | 0.66  | mmol/L      | 0.10-1.30    |
| Minerals              | Ca       | ↓              | 1.97  | mmol/L      | 2.10-2.97    |
| Minerals              | PHOS     |                | 1.48  | mmol/L      | 0.80-2.20    |
| Minerals              | CaxP     |                | 2.93  | mmol/L^2    |              |
| Minerals              | Mg       |                | 0.76  | mmol/L      | 0.53-1.06    |
| Electrolytes          | Na+      | ↓              | 136.6 | mmol/L      | 138.0-160.0  |
| Electrolytes          | K+       |                | 5.2   | mmol/L      | 3.5-5.9      |
| Electrolytes          | Na/K     |                | 26.2  |             |              |
| Electrolytes          | Cl-      | ↓              | 95.6  | 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 |

## Report Expln.

TP



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

The results only applies to this test sample. Test Instrument:Mindray vetXpert C5 Time of Printing:2025-11-28 09:56:16



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## Report Explan.

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.

GLU



Increase is commonly associated with diabetes and hypercorticism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.

TC



Increase is commonly associated with biliary obstruction, hypothyroidism, hypercorticism, nephropathy, diabetes, etc. Reduction is commonly associated with protein loss enteropathy, pancreatic exocrine insufficiency, and hypoadrenocorticism, etc.

Ca



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.

Na+



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.

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.

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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