

# Biochemistry test report



Patient:	Nala	Species:	Canine	Patient ID:	251218012
Client:	Cagas	Gender:	Female	Sample No.:	12
Doctor:		Age:	5Y	Time of analysis:	2025/12/18 21:11

Item		Current result		Ref. Ranges	
Protein	TP	I-	75.8	g/L	53.1-79.2
Protein	ALB		34.9	g/L	23.4-40.0
Protein	GLOB		40.9	g/L	25.4-52.0
Protein	A/G		0.9		
Liver and gallbladder	ALT	↑	111.2	U/L	10.1-100.3
Liver and gallbladder	AST		38.1	U/L	0.0-51.7
Liver and gallbladder	AST/ALT		0.34		
Liver and gallbladder	ALP	↑ I-	982.9	U/L	15.5-212.0
Liver and gallbladder	GGT	↑	27.1	U/L	0.0-15.9
Liver and gallbladder	TBIL	↑	242.75	μmol/L	0.00-15.00
Liver and gallbladder	TBA	↑	>110.0	μmol/L	0.0-30.0
Pancreas	AMY		802.4	U/L	397.7-1285.1
Kidneys	BUN	↑	41.95	mmol/L	2.50-9.77
Kidneys	CREA	↑	256.10	μmol/L	20.00-123.70
Kidneys	BUN/CREA		40.5		
Cardiovasc./Muscle	CK		171.4	U/L	66.4-257.5
Cardiovasc./Muscle	LDH		51.5	U/L	0.0-143.6
Energy metabolism	GLU	↑	8.17	mmol/L	3.80-7.50
Energy metabolism	TC	I-	3.93	mmol/L	2.67-8.38
Energy metabolism	TG		0.93	mmol/L	0.10-1.30
Minerals	Ca		2.89	mmol/L	2.10-2.97
Minerals	PHOS	↑	3.39	mmol/L	0.80-2.20
Minerals	CaxP		9.81	mmol/L^2	
Minerals	Mg		0.83	mmol/L	0.53-1.06
Electrolytes	Na+	↓	131.0	mmol/L	138.0-160.0
Electrolytes	K+	↓	3.2	mmol/L	3.5-5.9
Electrolytes	Na/K		40.5		
Electrolytes	Cl-	↓	95.1	mmol/L	102.7-125.0

Operator:

## Comprehensive Diagnosis Panel

QC QC OK

HEM(Hemolysis degree):	0	LIP(Lipemia degree):	0	ICT(Jaundice degree):	3+
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## Report Explen.

**ALT** ↑ Increase is commonly associated with liver injury and muscle injury, etc.

**ALP** ↑ Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, etc.

The results only applies to this test sample.

Test Instrument: Mindray vetXpert C5

Time of Printing: 2025-12-18 21:17:57



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## Report Explan.

**GGT**

↑

Elevated is commonly associated with bile duct injury or cholestasis, etc.

**TBIL**

↑

Increase is commonly associated with hemolysis and hepatobiliary dysfunction. Reduction is commonly associated with decreased erythropoiesis, etc.

**TBA**

↑

Increase is commonly associated with hepatic insufficiency or failure, portal vein shunt, and cholestasis, etc. Reduction is commonly associated with long-term fasting and intestinal malabsorption, 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 hypercorticism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.

**PHOS**

↑

Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, 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.

**K+**

↓

Increase is commonly associated with high potassium fluid replacement, diabetes, adrenocortical hypofunction, and acute kidney injury, etc. Reduction is commonly associated with low potassium or potassium-free fluid replacement, vomiting, diarrhea, and hypercorticism, 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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