

COCO Test report



Patient:	COCO	Species:	Feline	Patient ID:	260411001
Client:	MIGUEL	Gender:	Male	Age:	11M

AI 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.

It is recommended to add liver and kidney panel tests, electrolytes, myocardial enzyme spectrum (N-terminal pro-brain natriuretic peptide, cardiac troponin I), electrocardiogram, and ultrasound-related examinations to evaluate the animal's overall muscle health status, based on clinical manifestations and medical history.

It is recommended to add a blood smear test to evaluate white blood cell morphology, as well as tests of liver and kidney panels, electrolytes, protein level, and inflammatory markers (such as cCRP and fSAA) to assess overall health status or inflammation level, 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:	COCO	Species:	Feline	Patient ID:	260411001
Client:	MIGUEL	Gender:	Male	Sample No.:	01
Doctor:		Age:	11M	Time of analysis:	2026/02/11 12:20

Item		Current result	Ref. Ranges
Protein	TP	65.9 g/L	56.5-88.5
Protein	ALB	29.7 g/L	22.0-40.0
Protein	GLOB	36.2 g/L	28.2-51.3
Protein	A/G	0.8	
Liver and gallbladder	ALT	97.3 U/L	12.0-149.2
Liver and gallbladder	AST	↑ 95.8 U/L	0.0-60.0
Liver and gallbladder	AST/ALT	0.98	
Liver and gallbladder	ALP	28.1 U/L	8.7-110.9
Liver and gallbladder	GGT	<2.0 U/L	0.0-8.2
Liver and gallbladder	TBIL	4.24 μmol/L	0.00-15.00
Liver and gallbladder	TBA	1.1 μmol/L	0.0-20.0
Pancreas	AMY	829.1 U/L	555.6-1940.0
Kidneys	BUN	↑ 33.81 mmol/L	4.55-11.41
Kidneys	CREA	↑ 667.60 μmol/L	28.00-180.00
Kidneys	BUN/CREA	12.5	
Cardiovasc./Muscle	CK	↑ >2500.0 U/L	66.1-530.9
Cardiovasc./Muscle	LDH	↑ 386.7 U/L	0.0-334.2
Energy metabolism	GLU	↑ 10.12 mmol/L	3.39-8.39
Energy metabolism	TC	4.01 mmol/L	1.87-5.84
Energy metabolism	TG	1.09 mmol/L	0.10-1.30
Minerals	Ca	↓ 2.07 mmol/L	2.10-2.79
Minerals	PHOS	↑ 3.01 mmol/L	0.80-2.72
Minerals	CaxP	6.23 mmol/L ²	
Minerals	Mg	0.69 mmol/L	0.66-1.22
Electrolytes	Na+	144.9 mmol/L	141.0-166.0
Electrolytes	K+	5.0 mmol/L	3.5-5.9
Electrolytes	Na/K	29.1	
Electrolytes	Cl-	114.3 mmol/L	104.4-129.0

Operator:

Comprehensive Diagnosis Panel

QC QC OK

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



Report Explan.

AST



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

The results only applies to this test sample.

Test Instrument: Mindray vetXpert C5

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Biochemistry test report



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Doctor:		Age:	11M	Time of analysis:	2026/02/11 12:20



Report Explan.

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.
CK	↑	Increase is commonly associated with trauma, increased muscle activity (such as tetanus and convulsion), myocarditis, and myocardial infarction, etc.
LDH	↑	Increase is commonly associated with hemolysis (especially in canine), post-exercise, liver injury, exertional rhabdomyolysis, white muscle disease, myocardial injury, tumors, etc.
GLU	↑	Increase is commonly associated with diabetes and hypercorticism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, 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.
PHOS	↑	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc.

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Hematology Analysis Report

Patient: COCO Species: Feline Patient ID: 260411001
 Client: MIGUEL Gender: Male Sample No.: 13
 Doctor: Age: 11Months Time of analysis: 2026/02/11 11:55

Para.	Current result	Ref. Ranges
WBC H	36.92 10 ⁹ /L	3.46-17.50
Neu# H	35.66 10 ⁹ /L	1.95-11.50
Lym#	0.74 10 ⁹ /L	0.73-7.40
Mon#	0.44 10 ⁹ /L	0.06-0.98
Eos# L	0.00 10 ⁹ /L	0.04-1.48
Bas#	0.07 10 ⁹ /L	0.00-0.25
Neu% H	0.966	0.300-0.835
Lym% L	0.020	0.070-0.600
Mon%	0.012	0.008-0.080
Eos% L	0.000	0.005-0.115
Bas%	0.002	0.000-0.023
RBC	11.04 10 ¹² /L	6.30-11.82
HGB H	161 g/L	90-160
HCT	0.447	0.260-0.502
MCV	40.5 fL	34.0-55.0
MCH	14.6 pg	11.0-18.0
MCHC	360 g/L	285-384
RDW-CV	0.164	0.142-0.266
RDW-SD	24.5 fL	22.0-39.6
PLT	191 10 ⁹ /L	140-595
MPV	13.5 fL	8.6-18.4
PDW	13.2	12.0-17.5
PCT	2.59 mL/L	1.50-9.00
IPF	4.1 %	0.7-28.0
RET#	13.2 10 ⁹ /L	4.0-52.0
RET%	0.12 %	0.05-0.90
IRF	5.2 %	0.0-33.0
LFR	94.8 %	66.0-100.0
MFR	5.2 %	0.0-25.8
HFR	0.0 %	0.0-8.5
RHE	15.6 pg	14.2-21.5

Operator:User

The results only applies to this test sample. Test Instrument: Mindray BC-60R Vet Time of Printing: 2026-02-13 11:28:47



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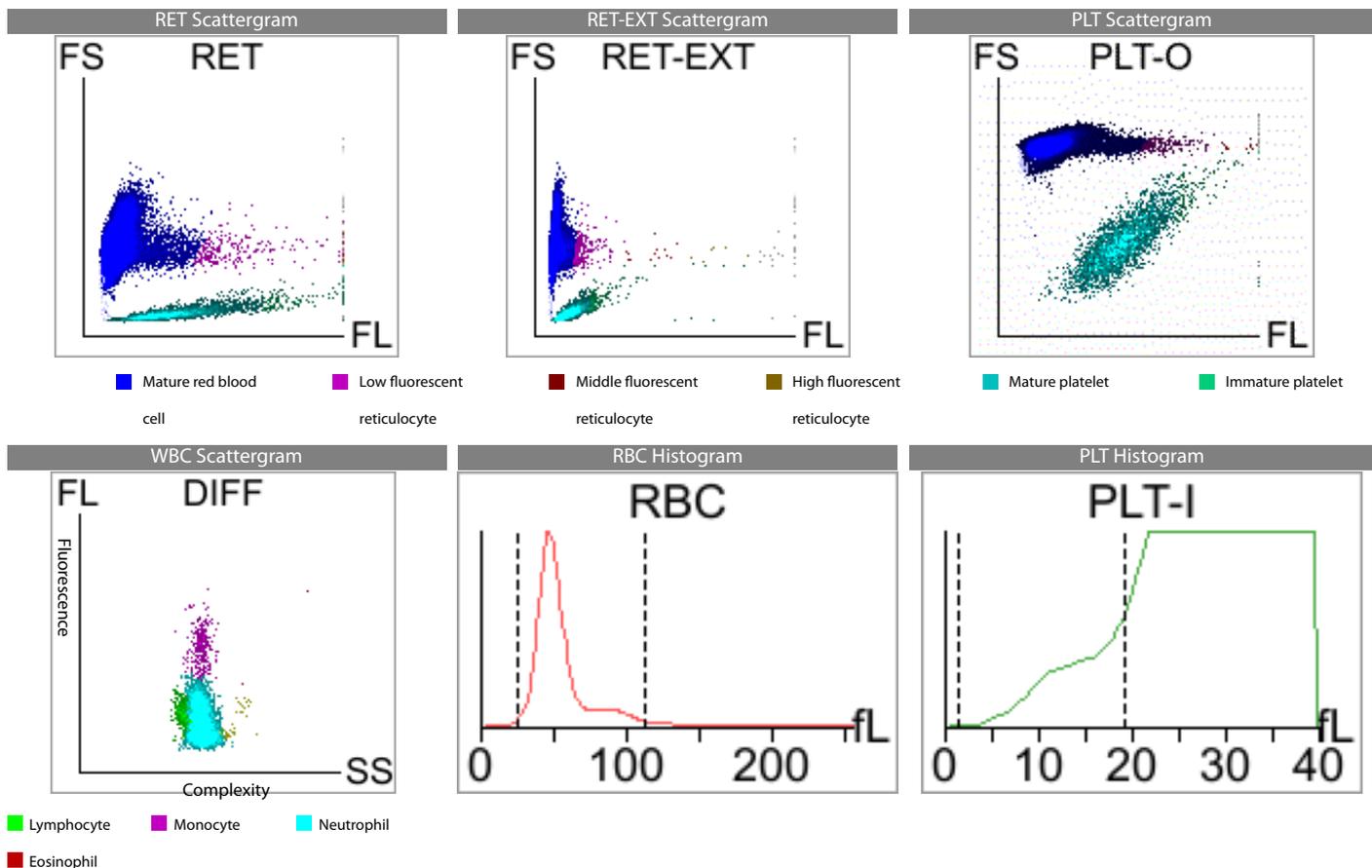
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 Doctor: Age: 11Months Time of analysis: 2026/02/11 11:55



Diagnosis implications:

Leucocytosis
PLT Clump

Neutrophilia

Band cell suspected

Report Explan.

Leucocytosis

It occurs in bacterial infection, burn, post-operation, malignant tumor, leukemia, etc

Neutrophilia

It occurs in stress response or corticosteroid response, inflammation, granulocytic leukemia

Band cell suspected

Possible presence of band cells and/or toxic neutrophils, and it occurs in infection and inflammation

PLT Clump

Possible presence of PLT clump, and it occurs in difficult blood collection, anticoagulant-dependent thrombocytopenia

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