Biochemistry test report

Patient:	SNOW	Species:	Canine	Patient ID:	260402001
Client:	CABUDOY	Gender:	Female	Sample No.:	01
Doctor:		Age:	2Y	Time of analysis:	2026/04/02 09:42

	Item		Current result		Ref. Ranges	
Protein	**TP**		**65.9**	g/L	53.1-79.2	
Protein	**ALB**		**28.6**	g/L	23.4-40.0	
Protein	**GLOB**		**37.3**	g/L	25.4-52.0	
Protein	**A/G**		**0.8**			
Liver and gallbladder	**ALT**		**33.0**	U/L	10.1-100.3	
Liver and gallbladder	**AST**		**50.2**	U/L	0.0-51.7	
Liver and gallbladder	**AST/ALT**		**1.52**			
Liver and gallbladder	**ALP**		**143.0**	U/L	15.5-212.0	
Liver and gallbladder	**GGT**		**5.6**	U/L	0.0-15.9	
Liver and gallbladder	**TBIL**		**3.89**	μmol/L	0.00-15.00	
Liver and gallbladder	**TBA**		**1.5**	μmol/L	0.0-30.0	
Pancreas	**AMY**		**672.2**	U/L	397.7-1285.1	
Kidneys	**BUN**		**7.79**	mmol/L	2.50-9.77	
Kidneys	**CREA**		**32.00**	μmol/L	20.00-123.70	
Kidneys	**BUN/CREA**		**60.3**			
Cardiovasc./Muscle	**CK**	↑	**332.2**	U/L	66.4-257.5	
Cardiovasc./Muscle	**LDH**		**81.5**	U/L	0.0-143.6	
Energy metabolism	**GLU**		**6.71**	mmol/L	3.80-7.50	
Energy metabolism	**TC**	↓	**2.62**	mmol/L	2.67-8.38	
Energy metabolism	**TG**		**0.45**	mmol/L	0.10-1.30	
Minerals	**Ca**	↓	**<1.00**	mmol/L	2.10-2.97	
Minerals	**PHOS**		**0.92**	mmol/L	0.80-2.20	
Minerals	**CaxP**		****	mmol/L^2		
Minerals	**Mg**		**0.67**	mmol/L	0.53-1.06	
Electrolytes	**Na+**		**140.1**	mmol/L	138.0-160.0	
Electrolytes	**K+**	↑	**6.0**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		**23.2**			
Electrolytes	**Cl-**		**105.8**	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 Explan.

CK ↑

Increase is commonly associated with trauma, increased muscle activity (such as tetanus and convulsion), myocarditis, and myocardial infarction, etc.

The results only applies to this test sample. Test Instrument:Mindray vetXpert C5 Time of Printing:2026-04-02 09:53:27

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Report Explan.

TC	↓	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.
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.
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 hypercorticalismus, 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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