

Biochemistry test report



Patient:	LALA	Species:	Canine	Patient ID:	260512004
Client:	HANDUMON	Gender:	Female	Sample No.:	04
Doctor:		Age:	12Y	Time of analysis:	2026/05/12 16:44

Item		Current result		Ref. Ranges	
Protein	TP	↑	89.3	g/L	52.0-82.0
Protein	ALB	↓	19.0	g/L	21.0-40.0
Protein	GLOB	↑	70.2	g/L	25.4-52.0
Protein	A/G		0.3		
Liver and gallbladder	ALT		84.2	U/L	10.1-100.3
Liver and gallbladder	AST	↑	54.4	U/L	0.0-51.7
Liver and gallbladder	AST/ALT		0.65		
Liver and gallbladder	ALP		20.8	U/L	15.5-212.0
Liver and gallbladder	GGT		2.4	U/L	0.0-15.9
Liver and gallbladder	TBIL		<1.70	μmol/L	0.00-15.00
Liver and gallbladder	TBA		8.9	μmol/L	0.0-30.0
Pancreas	AMY	↑	1694.0	U/L	397.7-1285.1
Kidneys	BUN		6.18	mmol/L	2.50-9.77
Kidneys	CREA		58.70	μmol/L	20.00-123.70
Kidneys	BUN/CREA		26.0		
Cardiovasc./Muscle	CK	L-	195.7	U/L	66.4-257.5
Cardiovasc./Muscle	LDH		68.2	U/L	0.0-143.6
Energy metabolism	GLU	↓	2.02	mmol/L	3.80-7.50
Energy metabolism	TC	↓	1.93	mmol/L	2.67-8.38
Energy metabolism	TG		0.37	mmol/L	0.10-1.30
Minerals	Ca	↓	1.92	mmol/L	2.10-2.97
Minerals	PHOS	↓	0.29	mmol/L	0.70-2.20
Minerals	CaxP		0.55	(mmol/L) ²	
Minerals	Mg		0.80	mmol/L	0.53-1.06
Electrolytes	Na+	↓ L-	136.0	mmol/L	138.0-160.0
Electrolytes	K+		4.9	mmol/L	3.5-5.9
Electrolytes	Na/K		27.8		
Electrolytes	Cl-	↓	96.4	mmol/L	100.7-125.0

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.

The results only applies to this test sample.

Test Instrument: Mindray vetXpert C5

Time of Printing: 2026-05-12 16:44:58



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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.

AST



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

AMY



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

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.

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.

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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