Biochemistry test report



Patient:	HERO	Species:	Canine	Patient ID:	260925002
Client:	EBONIA	Gender:	Male	Sample No.:	02
Doctor:		Age:	4M	Time of analysis:	2026/09/25 11:24

	Item		Current result		Ref. Ranges	
Protein	**TP**	↓	**46.6**	g/L	52.0-82.0	
Protein	**ALB**	↓	**13.6**	g/L	21.0-40.0	
Protein	**GLOB**		**33.1**	g/L	25.4-52.0	
Protein	**A/G**		**0.4**			
Liver and gallbladder	**ALT**	↑	**225.5**	U/L	10.1-100.3	
Liver and gallbladder	**AST**	↑	**69.8**	U/L	0.0-51.7	
Liver and gallbladder	**AST/ALT**		**0.31**			
Liver and gallbladder	**ALP**	↑	**670.9**	U/L	15.5-212.0	
Liver and gallbladder	**GGT**		**2.8**	U/L	0.0-15.9	
Liver and gallbladder	**TBIL**		**<1.70**	μmol/L	0.00-15.00	
Liver and gallbladder	**TBA**		**7.0**	μmol/L	0.0-30.0	
Pancreas	**AMY**		**509.3**	U/L	200.0-1285.1	
Pancreas	**LIPA-D**		**19.2**	U/L	0.0-125.0	
Kidneys	**BUN**		**4.83**	mmol/L	2.50-9.77	
Kidneys	**CREA**		**24.40**	μmol/L	20.00-123.70	
Kidneys	**BUN/CREA**		**49.0**			
Cardiovasc./Muscle	**CK**	↑	**1043.6**	U/L	30.0-257.5	
Cardiovasc./Muscle	**LDH**	↑	**185.7**	U/L	0.0-143.6	
Energy metabolism	**GLU**		**4.20**	mmol/L	3.80-7.50	
Energy metabolism	**TC**		**6.72**	mmol/L	2.67-8.38	
Energy metabolism	**TG**		**1.09**	mmol/L	0.10-1.30	
Minerals	**Ca**		**2.12**	mmol/L	1.95-2.97	
Minerals	**PHOS**		**1.42**	mmol/L	0.70-2.20	
Minerals	**CaxP**		**3.02**	$(mmol/L)^2$		
Minerals	**Mg**		**0.60**	mmol/L	0.53-1.06	
Electrolytes	**Na+**		**138.0**	mmol/L	138.0-160.0	
Electrolytes	**K+**		**3.5**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		**38.9**			
Electrolytes	**Cl-**		**109.3**	mmol/L	100.7-125.0	

LIPA-D: 0.0-125.0 U/L Negative 125.0-250.0 U/L Suspected >250.0 U/L Positive

Operator:

Comprehensive Diagnosis Panel **QC QC OK**

HEM(Hemolysis degree):	0	LIP(Lipemia degree):	1+	ICT(Jaundice degree):	0

The results only applies to this test sample. Test Instrument:Mindray vetXpert C5 Time of Printing:2026-09-25 11:25:46

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

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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