Biochemistry test report



Patient:	CHICO	Species:	Feline	Patient ID:	261009002
Client:	ODCHIGUE	Gender:	Male	Sample No.:	02
Doctor:		Age:	3Y	Time of analysis:	2026/10/09 10:19

	Item		Current result		Ref. Ranges
Protein	**TP**		**81.9**	g/L	56.5-88.5
Protein	**ALB**		**31.6**	g/L	22.0-40.0
Protein	**GLOB**		**50.3**	g/L	28.2-55.8
Protein	**A/G**		**0.6**		
Liver and gallbladder	**ALT**		**29.9**	U/L	12.0-149.2
Liver and gallbladder	**AST**		**27.8**	U/L	0.0-60.0
Liver and gallbladder	**AST/ALT**		**0.93**		
Liver and gallbladder	**ALP**		**12.5**	U/L	8.7-110.9
Liver and gallbladder	**GGT**		**<2.0**	U/L	0.0-8.2
Liver and gallbladder	**TBIL**		**10.82**	μmol/L	0.00-15.00
Liver and gallbladder	**TBA**		**<1.0**	μmol/L	0.0-20.0
Pancreas	**AMY**		**845.5**	U/L	555.6-1940.0
Pancreas	**LIPA-D**		**18.4**	U/L	0.0-20.0
Kidneys	**BUN**	↑	**>65.00**	mmol/L	4.55-13.00
Kidneys	**CREA**	↑	**>2000.00**	μmol/L	28.00-180.00
Kidneys	**BUN/CREA**		****		
Cardiovasc./Muscle	**CK**	↑	**649.9**	U/L	40.0-530.9
Cardiovasc./Muscle	**LDH**		**293.6**	U/L	0.0-334.2
Energy metabolism	**GLU**		**6.53**	mmol/L	3.39-8.39
Energy metabolism	**TC**		**5.33**	mmol/L	1.87-5.84
Energy metabolism	**TG**	↑	**3.87**	mmol/L	0.10-1.30
Minerals	**Ca**	↓	**1.80**	mmol/L	1.95-2.79
Minerals	**PHOS**	↑	**>6.50**	mmol/L	0.80-2.72
Minerals	**CaxP**		****	$(mmol/L)^2$	
Minerals	**Mg**	↑	**1.89**	mmol/L	0.66-1.22
Electrolytes	**Na+**		**149.4**	mmol/L	141.0-166.0
Electrolytes	**K+**	↑	**>8.5**	mmol/L	3.5-5.9
Electrolytes	**Na/K**		****		
Electrolytes	**Cl-**	↓	**86.1**	mmol/L	102.4-129.0

LIPA-D: 0.0-20.0 U/L Negative 20.0-30.0 U/L Suspected >30.0 U/L Positive

Operator:

Comprehensive Diagnosis Panel **QC QC OK**

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

The results only applies to this test sample. Test Instrument:Mindray vetXpert C5 Time of Printing:2026-10-09 10:46:34

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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.
TG	↑	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalismus, 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.
Mg	↑	Increase is commonly associated with nephropathy, hypoadrenocorticism, hypocalcemia, and muscle injury, etc. Reduction is commonly associated with gastrointestinal malabsorption, nephropathy, and hyperthyroidism, 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.
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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