Biochemistry test report



Patient:	POCHE	Species:	Feline	Patient ID:	261026001
Client:	BALABA	Gender:	Male	Sample No.:	01
Doctor:		Age:	7Y	Time of analysis:	2026/10/26 11:20

	Item		Current result		Ref. Ranges
Protein	**TP**		**87.5**	g/L	56.5-88.5
Protein	**ALB**		**26.6**	g/L	22.0-40.0
Protein	**GLOB**	↑	**60.9**	g/L	28.2-55.8
Protein	**A/G**		**0.4**		
Liver and gallbladder	**ALT**		**31.3**	U/L	12.0-149.2
Liver and gallbladder	**AST**		**27.9**	U/L	0.0-60.0
Liver and gallbladder	**AST/ALT**		**0.89**		
Liver and gallbladder	**ALP**		**27.9**	U/L	8.7-110.9
Liver and gallbladder	**GGT**		**<2.0**	U/L	0.0-8.2
Liver and gallbladder	**TBIL**		**11.99**	μmol/L	0.00-15.00
Liver and gallbladder	**TBA**		**2.9**	μmol/L	0.0-20.0
Pancreas	**AMY**		**1250.4**	U/L	555.6-1940.0
Pancreas	**LIPA-D**	↑	**20.7**	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**		**342.6**	U/L	40.0-530.9
Cardiovasc./Muscle	**LDH**	↑	**423.6**	U/L	0.0-334.2
Energy metabolism	**GLU**	↑	**14.26**	mmol/L	3.39-8.39
Energy metabolism	**TC**		**3.68**	mmol/L	1.87-5.84
Energy metabolism	**TG**	↑	**5.32**	mmol/L	0.10-1.30
Minerals	**Ca**	↓	**1.72**	mmol/L	1.95-2.79
Minerals	**PHOS**	↑	**4.97**	mmol/L	0.80-2.72
Minerals	**CaxP**		**8.55**	$(mmol/L)^2$	
Minerals	**Mg**	↑	**1.77**	mmol/L	0.66-1.22
Electrolytes	**Na+**		**156.5**	mmol/L	141.0-166.0
Electrolytes	**K+**	↑	**>8.5**	mmol/L	3.5-5.9
Electrolytes	**Na/K**		****		
Electrolytes	**Cl-**		**120.0**	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:2026-10-26 14:00:02

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Report Explan.

GLOB	↑	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
LIPA-D	↑	Increase is commonly associated with pancreatitis, pancreatic tumor, etc.
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.
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 hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, 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.

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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