

Biochemistry test report



Patient: Roast Species: Canine Patient ID: 260526001
 Client: Josephine De Leon Gender: Female Sample No.: 0000001
 Doctor: Age: 3Y Time of analysis: 2026/05/26 09:19

Item	Current result	Ref. Ranges
Protein TP ↑ 10.30 g/dL	5.20-8.20	
Protein ALB 3.21 g/dL	2.10-4.00	
Protein GLOB ↑ 7.09 g/dL	2.54-5.20	
Protein A/G 0.5		
Liver and gallbladder ALT 23.5 U/L	10.1-100.3	
Liver and gallbladder AST 40.8 U/L	0.0-51.7	
Liver and gallbladder AST/ALT 1.74		
Liver and gallbladder ALP 58.9 U/L	15.5-212.0	
Liver and gallbladder GGT <2.0 U/L	0.0-15.9	
Liver and gallbladder TBIL <0.10 mg/dL	0.00-0.88	
Liver and gallbladder TBA 1.9 μmol/L	0.0-30.0	
Pancreas AMY ↑ 1381.0 U/L	397.7-1285.1	
Pancreas LIPA-D 45.0 U/L	0.0-100.0	
Kidneys BUN ↑ 108.47 mg/dL	7.02-27.45	
Kidneys CREA ↑ 3.90 mg/dL	0.23-1.40	
Kidneys BUN/CREA 27.7		
Cardiovasc./Muscle CK ↑ 596.6 U/L	66.4-257.5	
Cardiovasc./Muscle LDH ↑ 616.7 U/L	0.0-143.6	
Energy metabolism GLU ↑ 163.9 mg/dL	68.5-135.2	
Energy metabolism TC ↑ 373.6 mg/dL	103.2-324.1	
Energy metabolism TG ↑ 117.4 mg/dL	8.9-115.1	
Minerals Ca 8.49 mg/dL	8.40-11.88	
Minerals PHOS ↑ 10.19 mg/dL	2.17-6.81	
Minerals CaxP 6.98 (mmol/L) ²		
Minerals Mg ↑ 3.60 mg/dL	1.29-2.58	
Electrolytes Na+ ↓ 128.1 mmol/L	138.0-160.0	
Electrolytes K+ ↑ 7.6 mmol/L	3.5-5.9	
Electrolytes Na/K 16.9		
Electrolytes Cl- 100.9 mmol/L	100.7-125.0	

LIPA-D: 0.0-100.0 U/L Negative 100.0-200.0 U/L Suspected >200.0 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: 2026-05-26 12:43:13



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Biochemistry test report



Patient:	Roast	Species:	Canine	Patient ID:	260526001
Client:	Josephine De Leon	Gender:	Female	Sample No.:	0000001
Doctor:		Age:	3Y	Time of analysis:	2026/05/26 09:19



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.
GLOB	↑	Increase is commonly associated with chronic inflammation and infection, and hyperimmunity, etc. Reduction is commonly associated with insufficient protein intake, anemia, and immunodeficiency.
AMY	↑	Increase is commonly associated with gastroenteritis, 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.
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.
GLU	↑	Increase is commonly associated with diabetes and hypercorticalism, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.
TC	↑	Increase is commonly associated with biliary obstruction, hypothyroidism, hypercorticalism, nephropathy, diabetes, etc. Reduction is commonly associated with protein loss enteropathy, pancreatic exocrine insufficiency, and hypoadrenocorticism, etc.
TG	↑	Increase is commonly associated with postprandial, obesity, diabetes and hypercorticalism, 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.
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.
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 hypercorticalism, 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. The results only applies to this test sample.

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