# KET QUA SINH HOA MAU

| Patient: | MEN | Species: | Canine | Patient ID: | |
|---|---|---|---|---|---|
| Client: | ANH MINH | Gender: | Male | Sample No.: | 27 |
| Doctor: | | Age: | Adult | Time of analysis: | 2025/05/30 18:37 |

| | Item | | Current result | | Ref. Ranges | |
|---|---|---|---|---|---|---|
| Protein | TP | | 70.5 | g/L | 53.1-79.2 | |
| Protein | ALB | | 27.8 | g/L | 23.4-40.0 | |
| Protein | GLOB | | 42.7 | g/L | 25.4-44.0 | |
| Protein | A/G | | 0.7 | | | |
| Liver and gallbladder | ALT | | 55.9 | U/L | 10.1-100.3 | |
| Liver and gallbladder | AST | ↑ | 136.2 | U/L | 21.0-51.7 | |
| Liver and gallbladder | AST/ALT | | 2.44 | | | |
| Liver and gallbladder | ALP | | 117.8 | U/L | 15.5-125.0 | |
| Liver and gallbladder | GGT | | 4.1 | U/L | 0.0-15.9 | |
| Liver and gallbladder | TBIL | | <1.70 | µmol/L | 0.00-15.00 | |
| Pancreas | AMY | | 835.8 | U/L | 397.7-1285.1 | |
| Kidneys | BUN | | 4.57 | mmol/L | 2.50-9.77 | |
| Kidneys | CREA | | 49.20 | µmol/L | 33.80-123.70 | |
| Kidneys | BUN/CREA | | 23.0 | | | |
| Cardiovasc./Muscle | CK | ↑ | 2068.8 | U/L | 66.4-257.5 | |
| Cardiovasc./Muscle | LDH | ↑ | 181.1 | U/L | 36.4-143.6 | |
| Energy metabolism | GLU | ↑ | 6.72 | mmol/L | 3.80-6.29 | |
| Energy metabolism | TC | | 3.45 | mmol/L | 2.67-8.38 | |
| Minerals | Ca | | 2.30 | mmol/L | 2.30-2.97 | |
| Minerals | PHOS | | 1.23 | mmol/L | 1.00-2.20 | |
| Minerals | CaxP | | 2.82 | mmol/L^2 | | |
| Electrolytes | tCO2 | | 13.95 | mmol/L | 13.14-25.13 | |
| Electrolytes | Na+ | | 147.0 | mmol/L | 141.6-160.0 | |
| Electrolytes | K+ | | 3.8 | mmol/L | 3.5-5.9 | |
| Electrolytes | Na/K | | 39.0 | | | |
| Electrolytes | Cl- | | 124.9 | mmol/L | 102.7-125.0 | |

Operator:

**Comprehensive Diagnosis Panel**                                    **QC QC OK**

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

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## 📄 Report Explan.

| AST | ↑ | Increase is commonly associated with liver injury and muscle injury, 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 hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, 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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