KET QUA SINH HOA MAU

Patient:	Mactin	Species:	Canine	Patient ID:	
Client:		Gender:	Male	Sample No.:	67
Doctor:		Age:	Adult	Time of analysis:	2025/12/16 08:48

	Item		Current result		Ref. Ranges
Protein	**TP**		**62.9**	g/L	53.1-79.2
Protein	**ALB**		**28.1**	g/L	23.4-40.0
Protein	**GLOB**		**34.8**	g/L	25.4-52.0
Protein	**A/G**		**0.8**		
Liver and gallbladder	**ALT**		**73.9**	U/L	10.1-100.3
Liver and gallbladder	**AST**		**44.1**	U/L	0.0-51.7
Liver and gallbladder	**AST/ALT**		**0.60**		
Liver and gallbladder	**ALP**	↑	**802.0**	U/L	15.5-212.0
Liver and gallbladder	**GGT**		**14.3**	U/L	0.0-15.9
Liver and gallbladder	**TBIL**		**<1.70**	μmol/L	0.00-15.00
Liver and gallbladder	**TBA**		**6.4**	μmol/L	0.0-30.0
Pancreas	**AMY**		**847.1**	U/L	397.7-1285.1
Kidneys	**BUN**	↑	**12.43**	mmol/L	2.50-9.77
Kidneys	**CREA**		**75.20**	μmol/L	20.00-123.70
Kidneys	**BUN/CREA**		**40.9**		
Cardiovasc./Muscle	**CK**		**216.1**	U/L	66.4-257.5
Cardiovasc./Muscle	**LDH**		**128.4**	U/L	0.0-143.6
Energy metabolism	**GLU**	↑	**10.49**	mmol/L	3.80-7.50
Energy metabolism	**TC**		**5.56**	mmol/L	2.67-8.38
Energy metabolism	**TG**		**1.04**	mmol/L	0.10-1.30
Minerals	**Ca**		**2.26**	mmol/L	2.10-2.97
Minerals	**PHOS**	↓	**0.74**	mmol/L	0.80-2.20
Minerals	**CaxP**		**1.68**	mmol/L^2	
Minerals	**Mg**		**0.68**	mmol/L	0.53-1.06
Electrolytes	**Na+**		**147.7**	mmol/L	138.0-160.0
Electrolytes	**K+**		**4.1**	mmol/L	3.5-5.9
Electrolytes	**Na/K**		**35.7**		
Electrolytes	**Cl-**	↑	**126.1**	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

Report Explan.

ALP	↑	Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, etc.

The results only applies to this test sample. Time of Printing:2025-12-15 18:51:51

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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.
GLU	↑	Increase is commonly associated with diabetes and hypercorticalismus, etc. Reduction is commonly associated with insulin administration, malnutrition, and insulinoma, etc.
PHOS	↓	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, 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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