KET QUA SINH HOA MAU

Patient:	GAU	Species:	Canine	Patient ID:	
Client:	THANH BUI	Gender:		Sample No.:	47
Doctor:		Age:	Adult	Time of analysis:	2025/09/21 09:20

	Item		Current result		Ref. Ranges	
Protein	**TP**		**62.1**	g/L	53.1-79.2	
Protein	**ALB**		**30.3**	g/L	23.4-40.0	
Protein	**GLOB**		**31.9**	g/L	25.4-44.0	
Protein	**A/G**		**0.9**			
Liver and gallbladder	**ALT**	↑	**135.5**	U/L	10.1-100.3	
Liver and gallbladder	**AST**	↑	**67.6**	U/L	21.0-51.7	
Liver and gallbladder	**AST/ALT**		**0.50**			
Liver and gallbladder	**ALP**	↑	**301.1**	U/L	15.5-125.0	
Liver and gallbladder	**GGT**		**<2.0**	U/L	0.0-15.9	
Liver and gallbladder	**TBIL**		**<1.70**	μmol/L	0.00-15.00	
Pancreas	**AMY**		**1024.9**	U/L	397.7-1285.1	
Kidneys	**BUN**		**3.26**	mmol/L	2.50-9.77	
Kidneys	**CREA**	↓	**28.40**	μmol/L	33.80-123.70	
Kidneys	**BUN/CREA**		**28.4**			
Cardiovasc./Muscle	**CK**		**122.1**	U/L	66.4-257.5	
Cardiovasc./Muscle	**LDH**	↑	**176.4**	U/L	36.4-143.6	
Energy metabolism	**GLU**		**4.83**	mmol/L	3.80-6.29	
Energy metabolism	**TC**		**3.79**	mmol/L	2.67-8.38	
Minerals	**Ca**		**2.54**	mmol/L	2.30-2.97	
Minerals	**PHOS**	↓	**0.79**	mmol/L	1.00-2.20	
Minerals	**CaxP**		**2.02**	mmol/L^2		
Electrolytes	**tCO2**		**25.07**	mmol/L	13.14-25.13	
Electrolytes	**Na+**	↓	**139.9**	mmol/L	141.6-160.0	
Electrolytes	**K+**		**3.8**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		**36.5**			
Electrolytes	**Cl-**		**113.7**	mmol/L	102.7-125.0	

Operator:

Comprehensive Diagnosis Panel **QC QC OK**

HEM(Hemolysis degree):	1+	LIP(Lipemia degree):	2+	ICT(Jaundice degree):	0

The results only applies to this test sample.

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Report Explan.

ALT	↑	Increase is commonly associated with liver injury and muscle injury, etc.
AST	↑	Increase is commonly associated with liver injury and muscle injury, etc.
ALP	↑	Increase is commonly associated with fracture healing period, hepatobiliary diseases, hyperthyroidism, and osteosarcoma, 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.
PHOS	↓	Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, 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.

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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