# KET QUA SINH HOA MAU

| | | | | | |
|---|---|---|---|---|---|
| Patient: | RO | Species: | Feline | Patient ID: | E1P1594 |
| Client: | | Gender: | Male | Sample No.: | 29 |
| Doctor: | | Age: | Adult | Time of analysis: | 2025/06/06 12:40 |

| | Item | | Current result | | Ref. Ranges | |
|---|---|---|---|---|---|---|
| Protein | **TP** | | **69.4** | g/L | 56.5-88.5 | |
| Protein | **ALB** | | **26.7** | g/L | 22.0-40.0 | |
| Protein | **GLOB** | | **42.7** | g/L | 28.2-51.3 | |
| Protein | **A/G** | | **0.6** | | | |
| Liver and gallbladder | **ALT** | | **66.1** | U/L | 25.8-149.2 | |
| Liver and gallbladder | **AST** | | **39.4** | U/L | 16.5-60.0 | |
| Liver and gallbladder | **AST/ALT** | | **0.60** | | | |
| Liver and gallbladder | **ALP** | | **30.8** | U/L | 8.7-110.9 | |
| Liver and gallbladder | **GGT** | | **<2.0** | U/L | 0.0-8.2 | |
| Liver and gallbladder | **TBIL** | | **<1.70** | μmol/L | 0.00-15.00 | |
| Pancreas | **AMY** | | **1194.0** | U/L | 555.6-1940.0 | |
| Kidneys | **BUN** | | **8.74** | mmol/L | 4.55-11.41 | |
| Kidneys | **CREA** | | **45.20** | μmol/L | 44.80-180.00 | |
| Kidneys | **BUN/CREA** | | **47.9** | | | |
| Cardiovasc./Muscle | **CK** | ↓ | **63.1** | U/L | 66.1-530.9 | |
| Cardiovasc./Muscle | **LDH** | ↑ | **>1400.0** | U/L | 60.9-334.2 | |
| Energy metabolism | **GLU** | ↑ | **13.53** | mmol/L | 3.39-8.39 | |
| Energy metabolism | **TC** | | **2.47** | mmol/L | 1.87-5.84 | |
| Minerals | **Ca** | | **2.12** | mmol/L | 2.10-2.79 | |
| Minerals | **PHOS** | ↓ | **0.68** | mmol/L | 1.02-2.72 | |
| Minerals | **CaxP** | | **1.43** | mmol/L^2 | | |
| Electrolytes | **tCO2** | ↓ | **8.13** | mmol/L | 11.10-21.17 | |
| Electrolytes | **Na+** | | **144.4** | mmol/L | 143.0-166.0 | |
| Electrolytes | **K+** | | **4.4** | mmol/L | 3.5-5.9 | |
| Electrolytes | **Na/K** | | **33.2** | | | |
| Electrolytes | **Cl-** | ↑ | **130.0** | mmol/L | 104.4-129.0 | |

Operator:

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

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

The results only applies to this test sample.

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| Patient: | RO | Species: | Feline | Patient ID: | E1P1594 |
| Client: | | Gender: | Male | Sample No.: | 29 |
| Doctor: | | Age: | Adult | Time of analysis: | 2025/06/06 12:40 |

## Report Explan.

| | | |
|---|---|---|
| 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. |
| PHOS | ↓ | Increase is commonly associated with nephropathy, bone healing period, and hyperthyroidism. Decreased in hyperparathyroidism, tumor, etc. |
| tCO2 | ↓ | Increase is commonly associated with metabolic alkalosis and respiratory acidosis; Reduction is commonly associated with metabolic acidosis, respiratory alkalosis |
| 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.

The results only applies to this test sample.

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