KET QUA SINH HOA MAU

Patient:		Species:	Feline	Patient ID:	
Client:	NHAT QUYNH	Gender:	Female	Sample No.:	59
Doctor:		Age:	Adult	Time of analysis:	2025/11/02 10:34

	Item		Current result		Ref. Ranges	
Protein	**TP**	↑	**96.2**	g/L	56.5-88.5	
Protein	**ALB**		**29.0**	g/L	22.0-40.0	
Protein	**GLOB**	↑	**67.2**	g/L	28.2-51.3	
Protein	**A/G**		**0.4**			
Liver and gallbladder	**ALT**		**65.1**	U/L	25.8-149.2	
Liver and gallbladder	**AST**	↑	**163.4**	U/L	16.5-60.0	
Liver and gallbladder	**AST/ALT**		**2.51**			
Liver and gallbladder	**ALP**		**21.9**	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**		**1142.3**	U/L	555.6-1940.0	
Kidneys	**BUN**		**6.25**	mmol/L	4.55-11.41	
Kidneys	**CREA**		**83.10**	µmol/L	44.80-180.00	
Kidneys	**BUN/CREA**		**18.6**			
Cardiovasc./Muscle	**CK**	↑	**>2500.0**	U/L	66.1-530.9	
Cardiovasc./Muscle	**LDH**	↑	**755.5**	U/L	60.9-334.2	
Energy metabolism	**GLU**		**6.44**	mmol/L	3.39-8.39	
Energy metabolism	**TC**		**2.50**	mmol/L	1.87-5.84	
Minerals	**Ca**		**2.34**	mmol/L	2.10-2.79	
Minerals	**PHOS**		**1.65**	mmol/L	1.02-2.72	
Minerals	**CaxP**		**3.86**	mmol/L^2		
Electrolytes	**tCO2**		**15.20**	mmol/L	11.10-21.17	
Electrolytes	**Na+**	↓	**140.8**	mmol/L	143.0-166.0	
Electrolytes	**K+**		**4.6**	mmol/L	3.5-5.9	
Electrolytes	**Na/K**		**30.9**			
Electrolytes	**Cl-**		**110.7**	mmol/L	104.4-129.0	

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.

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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.
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.
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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