

## Blood Test

تاریخ : 1394/09/01	صاحب حیوان : مانا فراهانی	شماره پرونده : 9403713
دامپزشک : دکتر سید جاوید آل داو	نوع حیوان : گربه	نام حیوان : بیش فعال
مسئول آزمایشگاه : دکتر وحید فتحی پور		

1394/09/09

BIOCHEMISTRY					
Urea	54.0	21.4-64.2 mg/dl	Cholesterol		71-156 mg/dl
BUN	25.2	20.30 mg/dl	HDL		
Scr	0.8	0.8-1.8 mg/dl	LDL		
Uric Acid	1.0	0-1 mg/dl	Glucose	164	60-120 mg/dl
CK		7.2-28.2 u/l	HbA1c		<4%
AST/GOT	64	7-38 IU/L	Ca	9.8	8.7-11.7 g/dl
ALT/GPT	149	25-97 IU/L	P	6.4	4-8.1 mg/dl
ALP	19	25-93 U/L	Mg		1.7-2.6 mg/dl
GGT	4	0-5 IU/L	Fe		68-215 mg/dl
Bilirubin Total	1.6	0.15-0.50 mg/dl	TIBC		156-359 mg/dl
Bilirubin Direct	0.85	0-0.1 mg/dl	Fibrinogen	0.6	0.5-3.0 g/L
Bilirubin Indirect	0.75	0-0.1	PT		7.1-10.9 s
Amylase		550-1450 IU/L	PTT		11.5-19.9 s
Lipase		0-76 IU/L	Na	161	147-156 mmol/L
Total Protein	9.8	5.8-8.5 g/dl	K	3.4	4.0-4.5 mmol/L
Albumin	3.3	2.8-3.9 g/dl	Cl	116	117-123 mmol/L
Globulin	6.5	2.4-4.4 g/dl			
A/G ratio		0.8-1.1			
Triglycerides		35-160 mg/dl			

CBC			HEMATOLOGY		
WBC	10.1	5.50-19.5 , 10 <sup>3</sup> /μl	RBC	6.96	5-10 10 <sup>6</sup> /μl
Lym	5	20-56%	Hb	14.9	8.0-15.0 g/dl
Mono	4	1-4	MCV	47.1	39-55 fl
Eos	1	2-12%(0-1500 10 <sup>3</sup> /μl)	MCH	21.5	12.5-17.5 pg
Seg	90	35.0-80.0%(2500-12500 10 <sup>3</sup> /μl)	MCHC	41.6	31-37.5 g/dl
Band	0	0-3% (0-300 10 <sup>3</sup> /μl)	RDW	15.3	13.5-18.5%
Baso	0	0.0 Rare	NRBC	0	
HCT	32.8	24-45%	PLT	85	15-600 10 <sup>3</sup> /μl

**Note :** Mycoplasma hemofelis is negative

**Report :** Lymphopenia/ Toxic change 2+/ Increase of ALT,AST in serum activity/  
Hyperbilirubinemia/ Hyperproteinemia/ Hyperglobulinemia/ Hyperglycemia/  
Hypernatremia/ Hypokalemia/ Hypochloremia

**Interpretation :** This leukogram is demonstrative for a chronic inflammation. According to this biochemical profile, this case is suspected to chronic liver disease. Hyperglycemia is usually associated with stress in cats, although, MD and postprandial effects can cause hyperglycemia in cats. Hypernatremia, hypokalemia with hypochloremia may be associated with Vomiting, Diarrhea, High water loss through urine (as seen with diabetes), Intravenous fluid therapy containing NaCl, over water intake, High oral sodium intake (rare) and ect.

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