















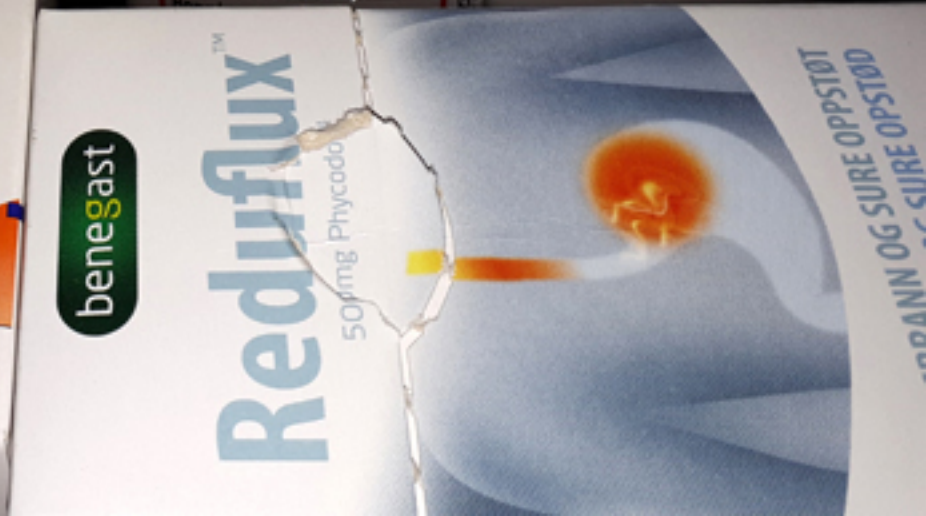


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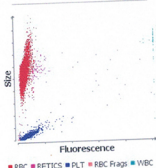


Patient Name: Gogstadhaugens
 Madonna
 Species: Canine
 Breed:

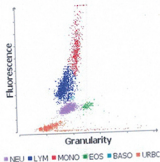
Weight:
 Age: 3 Years
 Doctor: Elisabeth Bjørnstad

Test	Results	Reference Interval	LOW	NORMAL	HIGH
ProCyte Dx (April 28, 2021 2:18 PM)					
RBC	5.41 x10 ¹² /L	5.65 - 8.87	LOW		
HCT	33.4 %	37.3 - 61.7	LOW		
HGB	12.8 g/dL	13.1 - 20.5	LOW		
MCV	61.7 fL	61.6 - 73.5			
MCH	23.7 pg	21.2 - 25.9			
MCHC	38.3 g/dL	32.0 - 37.9	HIGH		
RDW	15.2 %	13.6 - 21.7			
%RETIC	0.4 %				
RETIC	19.5 K/ μ L	10.0 - 110.0			
RETIC-HGB	23.5 pg	22.3 - 29.6			
WBC	6.28 x10 ⁹ /L	5.05 - 16.76			
%LYM	23.7 %				
%MONO	8.8 %				
%EOS	1.3 %				
%BASO	0.2 %				
NEU	4.15 x10 ⁹ /L	2.95 - 11.64			
LYM	1.49 x10 ⁹ /L	1.05 - 5.10			
MONO	0.55 x10 ⁹ /L	0.16 - 1.12			
EOS	0.08 x10 ⁹ /L	0.06 - 1.23			
BASO	0.01 x10 ⁹ /L	0.00 - 0.10			
PLT	190 K/ μ L	148 - 484			
MPV	13.7 fL	8.7 - 13.2	HIGH		
PDW	14.3 fL	9.1 - 19.4			
PCT	0.26 %	0.14 - 0.46			

RBC Run



WBC Run



1. Anemia without reticulocytosis - Likely non-regenerative anemia; consider one-regenerative anemia.

Patient Name: Gogstadhaugens
 Madonna
 Species: Canine
 Breed:

Weight:
 Age: 3 Years
 Doctor: Elisabeth Bjørnstad

Test	Results	Reference Interval	LOW	NORMAL	HIGH
Catalyst Dx (April 28, 2021 2:30 PM)					
GLU	4.59 mmol/L	4.11 - 7.95			
CREA	103 µmol/L	44 - 159			
UREA	6.9 mmol/L	2.5 - 9.6			
BUN/CREA	16				
PHOS	1.08 mmol/L	0.81 - 2.20			
CA	2.62 mmol/L	1.98 - 3.00			
TP	62 g/L	52 - 82			
ALB	34 g/L	23 - 40			
GLOB	28 g/L	25 - 45			
ALB/GLOB	1.2				
ALT	12 U/L	10 - 125			
ALKP	49 U/L	23 - 212			
GGT	0 U/L	0 - 11			
TBIL	3 µmol/L	0 - 15			
CHOL	5.39 mmol/L	2.84 - 8.26			
AMYL	529 U/L	500 - 1500			
LIPA	2074 U/L	200 - 1800			HIGH
Na	159 mmol/L	144 - 160			
K	4.0 mmol/L	3.5 - 5.8			
Na/K	40				
Cl	116 mmol/L	109 - 122			

Progesterone 19.2 nmol/L

Progesterone (nmol/L):

- 3.2-6.3 Pre-LH surge
- 6.4-9.5 Associated with LH surge, about 24-48 hours prior to the ovulation wave
- 9.6-15.8 Post-LH surge, pre-ovulation

Physiologic variation in progesterone occurs prior to ovulation. We recommend confirming a continuing rise in progesterone (every 24-48 hours until ovulation is confirmed) when evaluating for timing of breeding.

post signs of estrus, a progesterone > 6.4 nmol/L is consistent with the presence of a functioning corpus luteum and the presence of ovarian tissue. In addition to progesterone concentrations, anti-mullerian hormone, LH concentrations, vaginal cytology, clinical signs, abdominal ultrasound and estrogen concentrations can be used to further evaluate neuter status and for ovarian remnants.