## RUBY CHAN

| | | | | | |
|---|---|---|---|---|---|
| PET OWNER: | **CHAN** | **SAGE VETERINARY CENTER** | | LAB ID: | 2320171475 |
| SPECIES: | Feline | 170 Erie St | | ORDER ID: | 349162051 |
| BREED: | Feline, Mixed Breed | Jersey City, NJ 07302 | | COLLECTION DATE: | **11/3/26** |
| GENDER: | Female Spayed | 201-499-1101 | | DATE OF RECEIPT: | **11/4/26** |
| AGE: | 16 Years | ACCOUNT #: | 98864 | DATE OF RESULT: | **11/5/26** |
| PATIENT ID: | 450741110 | ATTENDING VET: | Dr. Bianca Benfante | | |

IDEXX Services: **Urinalysis with IDEXX Cystatin B Test and Reflex UPC (if Indicated)—Canine/Feline, Urine Culture***

## Chemistry

**11/4/26** (Order Received)
**11/5/26 5:10 PM** (Last Updated)

| TEST | | RESULT | REFERENCE VALUE |
|---|---|---|---|
| IDEXX Cystatin B (Urine) | a | <50 | 0 - 99 ng/mL |
| Urine Protein: Creatinine Ratio If Indicated | | A urine protein: creatinine ratio (UPC) is not indicated due either to a negative urine protein and/or an active urine sediment (gross hematuria, >5 WBC/HPF, >100 RBC/HPF and/or presence of bacteria). | |

a In a patient that presented unwell, a result that is <100 ng/mL suggests that active kidney injury is not present.
If an insult that may have caused kidney injury is suspected, rechecking functional kidney markers and cystatin B in 24-48 hours is recommended.
Additional diagnostics such as imaging, urine protein: creatinine ratio and urine culture with susceptibility may be helpful.
Note: Dehydration, subclinical illness and certain medications (e.g., NSAIDS) may contribute to kidney injury. Consider the risk/benefit of such medications in the overall management of the patient.
For more information on Cystatin B, visit idexx.com/cystatinb.

## Urinalysis

**11/4/26** (Order Received)
**11/5/26 5:10 PM** (Last Updated)

| TEST | | RESULT | REFERENCE VALUE | |
|---|---|---|---|---|
| *Collection Method | | CYSTOCENTESIS | | |
| Color | | Yellow | | |
| Clarity | | CLEAR | | |
| **Specific Gravity** | a | **1.017** | **1.035 - 1.098** | L |
| **pH** | | **8.0** | **6.0 - 7.5** | H |
| Urine Protein | | NEGATIVE | | |
| Glucose | | NEGATIVE | | |

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## Urinalysis (continued)

| TEST | RESULT | REFERENCE VALUE |
|---|---|---|
| Ketones | NEGATIVE | |
| Blood / Hemoglobin | NEGATIVE | |
| Bilirubin | NEGATIVE | |
| Urobilinogen | NORMAL | |
| White Blood Cells | 0-2 | HPF |
| Red Blood Cells | 0-2 | HPF |
| Bacteria | NONE SEEN | |
| Epithelial Cells | RARE (0-1) | |
| Mucus | NONE SEEN | |
| Casts | NONE SEEN | |
| Crystals | NONE SEEN | |

a Potentially inappropriate concentration. Consider hydration status and, if persistent and inappropriate, renal disease, endocrinopathies, and medications.

## Microbiology

**11/4/26** (Order Received)
**11/5/26 5:10 PM** (Last Updated)

*Clinical History: .

*Source: URINE

Culture Results:

Status: FINAL

No Growth

**INTERPRETATION KEY for Antibiotic Susceptibility Results (when performed) **

For all sources and sites, susceptibilities are reported based on MIC breakpoints where available. These standards have been established by the Clinical and Laboratory Standards Institute (CLSI). It is important to check local regulations prior to selecting an antibiotic.

S, S* = Susceptible. Organism is inhibited by the usual recommended dose.

I = Intermediate. Organism is inhibited only by the maximum recommended dose.


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## Microbiology (continued)

R, R*= Resistant. Organism is resistant to the maximum recommended dose.

SDD= Susceptible, Dose Dependent. Organism is inhibited by a specific dose. Only applies to canines. Identify the MIC value listed in the lab report and refer to the corresponding row in the table below to identify the antimicrobial dose expected to inhibit the organism

TF = To Follow. Susceptibility testing for this antibiotic is performed by Kirby-Bauer and results will follow shortly.

N/R (not reported) will appear and/or MIC data may be left blank if susceptibility testing is not feasible or clinically appropriate.

Enrofloxacin Dosing Guidelines (Dog Only):

*If the MIC is <= 0.06 µg/mL, the interpretation is Susceptible (S) and the recommended dose is 5 mg/kg orally every 24 hours, or 2.5 mg/kg orally every 12 hours.

*If the MIC is 0.12 µg/mL, the interpretation is Susceptible Dose-Dependent (SDD) and the recommended dose is 10 mg/kg orally every 24 hours.

*If the MIC is 0.25 µg/mL, the interpretation is Susceptible Dose-Dependent (SDD) and the recommended dose is 20 mg/kg orally every 24 hours.

Marbofloxacin Dosing Guidelines (Dog Only):

*If the MIC is <= 0.12 µg/mL, the interpretation is Susceptible (S) and the Recommended dose is 2.75 mg/kg orally every 24 hours.

*If the MIC is 0.25 µg/mL, the interpretation is Susceptible Dose-Dependent (SDD) and the recommended dose is 5.5 mg/kg orally every 24 hours.

*The SDD category only appears for canine results with growth of Enterobacterales, Pseudomonas aeruginosa, and Staphylococcus spp.

For more information, please see the "Microbiology Guide to Interpreting Antimicrobial Susceptibility Testing (AST)" at www.idexx.com/MIC.


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