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Blood Test Sample

Date: 10/10/2002

Next Test Due: 10/3/2007

LabAssist™ Blood Test Report

Practitioner

Printed on Wednesday, August 15, 2007 for:

Dr. Donna Adams

101 Broad Street

Suite 4

Anytown, US 55555

555-555-5554

(fax)

If there is a problem with this report, please contact us as soon as possible at: (775) 851-3337 or Fax (775) 851-3363

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Basic Status High/Low

Blood Test Sample

Male / Age: 60
Client ID: (10721)

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)
555-555-5554

The % Status is the weighted deviation of the laboratory result.

Low Results

-80	-60	-40	-20	0		% Status	Result	Low	High	
						-53.17	L	2.27	2.30	3.30
						-48.25	L	40.00	30.00	600.00
						-40.00	L	0.80	0.00	8.00
						-36.48	L	1165.00	800.00	3500.00
						-35.92	L	5.00	4.00	11.10
						-35.26	L	44.00	30.00	125.00
						-34.00	L	20.00	0.00	125.00
						-31.82	L	100.00	98.00	109.00
						-30.00	L	0.40	0.00	2.00
						-30.00	L	6.60	6.20	8.20
						-28.67	L	27.20	24.00	39.00
						-26.92	L	16.00	7.00	46.00
						-25.59	L	23.30	15.00	49.00

-25%

High Results

-100	-50	0	50	100		% Status	Result	Low	High	
						92.00	H	4.76	0.50	3.50
						68.75	H	285.00	0.00	240.00
						67.65	H	142.00	62.00	130.00
						50.00	H	32.00	21.00	32.00
						40.37	H	179.00	10.00	197.00
						37.10	H	47.00	33.50	49.00
						34.91	H	15.90	11.40	16.70
						33.33	H	6.20	2.20	7.00
						32.35	H	5.00	3.60	5.30
						30.83	H	147.00	50.00	170.00
						30.00	H	4.10	2.50	4.50

-25%

25%

Basic Status Alphanumeric

Blood Test Sample

Male / Age: 60

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

The % Status is the weighted deviation of the laboratory result relative to the range.

-100	-50	0	50	100	% Status	Result	Low	High	
						A/G Ratio	1.44	0.90	1.90
						Albumin	3.90	3.50	4.70
						Alkaline Phosphatase	-35.26 L	44.00	30.00 125.00
						Anion Gap	13.00	8.00	20.00
						B.U.N.	16.00	9.00	32.00
						B.U.N./Creatinine Ratio	2.63	6.00	25.00
						Basophil Count	-34.00 L	20.00	0.00 125.00
						Basophils	-30.00 L	0.40	0.00 2.00
						Bilirubin, Total	0.62	0.20	1.50
						Calcium	9.30	8.50	10.20
						Calcium/Phosphorus Ratio	-53.17 L	2.27	2.30 3.30
						Chloride	-31.82 L	100.00	98.00 109.00
						Cholesterol	206.00	140.00	240.00
						CO2	50.00 H	32.00	21.00 32.00
						Creatinine	1.00	0.50	1.50
						Eosinophil Count	-48.25 L	40.00	30.00 600.00
						Eosinophils	-40.00 L	0.80	0.00 8.00
						Free T4 Index (T7)	7.30	4.00	12.00
						GGT	28.00	7.00	40.00
						Globulin	2.70	2.10	3.80
						Glucose	82.00	65.00	125.00
						HDL-Cholesterol	45.00	31.00	74.00
						Hematocrit	37.10 H	47.00	33.50 49.00
						Hemoglobin	34.91 H	15.90	11.40 16.70
						Iron, Total	30.83 H	147.00	50.00 170.00
						LDH	68.75 H	285.00	0.00 240.00
						LDL	67.65 H	142.00	62.00 130.00
						Lymphocyte Count	-36.48 L	1165.00	800.00 3500.00
						Lymphocytes	-25.59 L	23.30	15.00 49.00
						MCH	32.12	27.40	35.00
						MCHC	33.83	32.00	36.00
						MCV	94.95	81.00	100.00
						Monocyte Count	480.00	40.00	950.00
						Monocytes	9.60	0.00	13.00
						Neutrophil Count	3295.00	1650.00	8000.00
						Neutrophils	65.90	38.00	80.00
						Phosphorus	30.00 H	4.10	2.50 4.50
						Potassium	32.35 H	5.00	3.60 5.30
						Protein, Total	-30.00 L	6.60	6.20 8.20
						Protein/Globulin Ratio	2.44	2.10	3.10
						R.B.C.	4.95	3.60	5.50
						sGOT	23.00	12.00	45.00
						sGPT	-26.92 L	16.00	7.00 46.00
						Sodium	140.00	136.00	145.00
						T-3 Uptake	-28.67 L	27.20	24.00 39.00
						Thyroxine (T4)	9.30	4.00	12.00
						Triglycerides	40.37 H	179.00	10.00 197.00
						Ultra-Sensitive TSH	92.00 H	4.76	0.50 3.50
						Uric Acid	33.33 H	6.20	2.20 7.00
						W.B.C.	-35.92 L	5.00	4.00 11.10
						Total Status Deviation	26.51		
						Total Status Skew	-0.35		

Client Summary Review

Blood Test Sample

Male / Age: 60

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Nutritional Support

The following supplements may help to balance your biochemistry. Consult your practitioner.

- | | |
|---|---|
| <input type="checkbox"/> 1-Cardiovascular Health Protocol
See Nutrition Detail | <input type="checkbox"/> 1-Increase Fluid Intake
6-8 glasses daily |
| <input type="checkbox"/> 1-Oral Electrolyte - Standard Formula
2x daily | <input type="checkbox"/> 1-Tyrosine
2x daily 500 mg |
| <input type="checkbox"/> 2-Vitamin C
1x daily 1000 mg | <input type="checkbox"/> 2-Zinc Citrate/Sulfate
2x daily 25 mg |
| <input type="checkbox"/> H - Garlic
1 - 3 times daily | <input type="checkbox"/> H - Ginseng (Panax)
1 - 3 times daily |
| <input type="checkbox"/> H - Licorice
1 - 3 times daily | |

Nutritional Supplements to AVOID

The following supplements may aggravate already out-of-balance biochemistry.

Copper

Iron Supplements

Molybdenum

Phosphorus

Food Recommendations

The following foods may help to balance or strengthen your biochemistry.

Eggplant

Elderberries

Foods to AVOID

The following foods may aggravate already out-of-balance biochemistry.

Artichoke	Avocado	Beer	Beets
Black Beans	Black Pepper	Brussel Sprouts	Carbonated Beverages
Carrot	Cider	Coffee	Garbonzo Beans
Green Beans	Hydrogenated Fats	Lima Beans	Liver (2)
Loganberries	Lychee	Macadamia Nuts	Mahi Mahi
Mango	Milk, Nonfat Dry	Mustard Greens	Navy Beans
Poultry Giblets	Prunes	Pumpkin Seeds	Rice Bran
Squash	Sunflower Seeds	Yams	

Out-Of-Balance Panel Values

The following panels have a PSD of greater than 25% indicating need for further review. PSD is the Panel Status Deviation, or the average imbalance of that subset of results. The PSS is the Panel Status Skew, or the direction, negative (deficiency) or positive (excess), of that subset of results.

Panel Name	PSD	PSS
Thyroid	36.42%	17.71%
Inflammatory Process	35.72%	16.06%
Lipid	35.37%	26.64%
Cardiac Marker	33.85%	26.27%
Gastrointest. Function	30.66%	20.50%
Cellular Distortions	29.88%	7.16%
Differential Count	28.89%	-28.89%
Adrenal Function	28.43%	-9.09%
Allergy	28.01%	-18.47%
Differential	27.17%	-11.06%
Pulmonary Function	26.37%	16.80%
Electrolyte	25.44%	12.01%

Lab Reported out-of-range Values

The following results are out-of-range (as reported by the lab), and should be carefully reviewed.

Ultra-Sensitive TSH (92.00%)

TSH, produced by the anterior pituitary gland, causes the release and distribution of stored thyroid hormones. When T4 and T3 are too high, TSH secretion decreases. When T4 and T3 are low, TSH secretion increases. Increased TSH levels are seen in primary hypothyroidism, thyrotropin producing tumors, and thyrotoxicosis.

Drugs which may have an adverse affect:

Lithium Carbonate, Rifampin, Valproic Acid

LDH (68.75%)

Lactic acid dehydrogenase is an intracellular enzyme found primarily in the kidney, heart, skeletal muscle, brain, liver, and lungs. Increases are usually found in cellular death and/or leakage from the cell. In some cases it can be useful in confirming myocardial or pulmonary infarction (only in relation to other tests).

Drugs which may have an adverse affect:

Aspirin, Chlorpromazine, Clindamycin, Clofibrate, Codeine, Fluorides, Fluphenazine, Furosemide, Ibuprofen, Imipramine, Itraconazole, Levodopa, Methotrexate, Methyldopa, Morphine, Nitrofurantoin, Phenylbutazone, Procainamide, Sulfamethoxazole, Sulfasalazine, Sulfisoxazole, Tetracycline, Valproic Acid, Vasopressin

Foods which may have an adverse affect:

Black Pepper

LDL (67.65%)

LDL is the cholesterol rich remnants of the lipid transport vehicle VLDL (very-low density lipoproteins). There have been many studies showing correlations between high levels of LDL and arterial atherosclerosis. Due to the expense of direct LDL measurement, a calculation known as the Friedewald formula is used (Total Cholesterol - HDL Cholesterol - Triglycerides/5). When Triglyceride levels are greater than 400, this method is not accurate. Increased levels are seen in high cholesterol diets, nephrotic syndromes, multiple myeloma, hepatic obstruction or disease, anorexia nervosa, diabetes, chronic renal failure, and premature coronary heart disease.

Drugs which may have an adverse affect:

Clofibrate

Calcium/Phosphorus Ratio (-53.17%)

Fibromyalgia, excessive intake of phosphorus, inadequate intake of calcium.

CO2 (50.00%)

Primary metabolic alkalosis, as from vomiting, gastric suction, diuretic therapy, hypokalemia. Primary respiratory acidosis, as from chronic pulmonary disease, airway obstruction, respiratory center depression, pulmonary emphysema.

Drugs which may have an adverse affect:

Aspirin, Furosemide, Gentamicin, Hydrocortisone, Polythiazide, Tromethamine, Viomycin

Foods which may have an adverse affect:

Carbonated Beverages

Additional Tests

The following additional lab tests may help in diagnosis.

Consider ordering TRH stimulation test if clinically indicated

Rationale: % Status of Ultra-Sensitive TSH is > 50%

Consider ordering prostate specific antigen (PSA)

Rationale: Age is \geq 40

Sex is Male

Review patient's Zinc status

Rationale: % Status of Alkaline Phosphatase is < -25%

Nutrition - Detail

Blood Test Sample

Male / Age: 60

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Nutritional and herbal information contained in this report is based upon research related to imbalances in your chemistry. The recommendations are based upon the information provided, without interpretation. This must be done with the help of a qualified health care professional.

1-Cardiovascular Health Protocol See Nutrition Detail

CARDIOVASCULAR RISK PROTOCOL

This pattern indicates suboptimal operation of fat metabolism, interfering with efficient cellular energy production. Various pathways being over- or under- utilized can be nutritionally supported with digestive enzymes, B-Complex, Lipoic acid, and CoEnzyme Q10 supplementation.

Recommended nutrients include:

B-Complex (2x daily)

Lipoic Acid (2x daily)

CoEnzyme Q10 (2x 50 mg daily)

Digestive Enzymes (1-2 with each meal)

Wallace, DC, Mitochondrial genetics: a paradigm for aging and degenerative diseases?, Science, 256:628-632 (1992).
Corral-Debrinski, Shffner JM, Lott MY, Wallace DC, Association of mitochondrial DNA damage with aging and coronary arteriosclerotic heart disease. Mutat Res, 275:169-180 (1992).

1-Increase Fluid Intake 6-8 glasses daily

INCREASE FLUID INTAKE

When the concentration of Hemoglobin, Hematocrit and Red Blood Cells are increased, it is a good indicator of the need to increase fluid intake. Fluid intake should include a well rounded group of fluids including, but not limited to water.

1-Oral Electrolyte - Standard Formula 2x daily

ORAL ELECTROLYTE

The main electrolytes in the human body are sodium, potassium, phosphorus, calcium, chloride, magnesium and bicarbonate. During illness, the equilibrium present in healthy individuals, is disturbed. A well balanced formula is helpful in restoring and/or solidifying a state of equilibrium.

1-Tyrosine 2x daily 500 mg

TYROSINE

An amino acid which is essential to the synthesis of protein, catecholamines, melanin, and thyroid hormones. Vitamin C and folic acid are essential to its metabolism. The formation of thyroid hormone is dependent upon the absorption and sequestering of iodine which then attaches to tyrosine to form thyroxine.

2-Vitamin C 1x daily 1000 mg

VITAMIN C

Water-soluble vitamin essential for the synthesis and maintenance of collagen as well as body tissue cells, cartilage, bones, teeth, skin and tendons. Increases protection mechanism of the immune system. Also improves iron and calcium absorption as well as trace mineral utilization.

2-Zinc Citrate/Sulfate 2x daily 25 mg

ZINC (Zn)

Active in the structure and function of biomembranes. Involved in more than 200 key enzymes including carbohydrate metabolism, connective tissue metabolism, T-cell function and prostaglandin secretion.

Rationale

Decreased

Normal

Increased

Cholesterol
HDL-Cholesterol

LDL
Uric Acid

Decreased

Normal

Increased

R.B.C.

Hematocrit
Hemoglobin

Decreased

Normal

Increased

Sodium

Potassium
CO2

Decreased

Normal

Increased

Ultra-Sensitive TSH

Decreased

Normal

Increased

W.B.C.
Alkaline Phosphatase

LDL
LDH
Triglycerides

Decreased

Normal

Increased

Alkaline Phosphatase

Nutrition - Detail

Blood Test Sample

Male / Age: 60

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Nutritional and herbal information contained in this report is based upon research related to imbalances in your chemistry. The recommendations are based upon the information provided, without interpretation. This must be done with the help of a qualified health care professional.

H - Garlic 1 - 3 times daily

GARLIC

Garlic's use has been reported to be beneficial in lowering blood lipid (fat) levels. May cause unwanted bodily odors. As with any herb, caution should be taken with its use.

Decreased

Rationale

Normal

Cholesterol

Increased

LDL

H - Ginseng (Panax) 1 - 3 times daily

GINSENG

Also known as Korean Ginseng (Panax ginseng), this herb has shown benefits to those suffering from fatigue, stress, compromised immune systems and diabetes. As with any herb, caution should be taken with its use. Women who experience breast tenderness should discontinue its use.

Decreased

Normal

Lymphocytes
Lymphocyte Count

Increased

H - Licorice 1 - 3 times daily

LICORICE

The herb licorice (Glycyrrhiza glabra) has been shown to be beneficial in cases of viral infection (AIDS, viral hepatitis and the common cold). As with any herb, caution should be taken with its use. Licorice should be avoided in patients with low potassium, hypertension, renal failure or using digitalis.

Decreased

Normal

Lymphocytes
W.B.C.

Increased

Potassium

AVOID THE FOLLOWING SUPPLEMENTS

AVOID Copper

EXCESSIVE COPPER (Cu)

Primarily involved in oxidation - component of various proteins and enzymes. Regulates cholesterol metabolism/heme/immune function/myelin/catecholamine/temperature/bone mineralization and cross linking of collagen and elastin.

Decreased

Normal

Increased

Iron, Total

Avoid copper in amounts over 2 mg daily unless taken as part of a multi-vitamin. If Total Iron level is greater than 50% over the mean, avoid all sources of copper unless otherwise tested.

AVOID Iron Supplements

IRON (Fe)

Vital component in synthesis of hemoglobin, myoglobin and catecholamines. Involved in cell respiration, peroxide scavenging, electron transfer and systemic hormone action.

Decreased

Normal

Increased

Iron, Total

AVOID Molybdenum

MOLYBDENUM (Mo)

Vital constituent of xanthine oxidase (uric acid production), aldehyde and sulfate oxidase. Functions in transfer of electrons for redox process and completion of sulfur amino acid catabolism. It is also involved in hemoglobin synthesis. Molybdenum also inhibits absorption Cu and Fe.

Decreased

Normal

Increased

Uric Acid

AVOID Phosphorus

PHOSPHORUS (P)

Decreased

Normal

Increased

Phosphorus

Drug Interactions

Blood Test Sample

Male / Age: 60

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Drugs listed below tend to further aggravate elements of blood chemistry that are out of range (H or L). The (#) after each drug denotes the number of times that drug is flagged as being potentially harmful.

Acetaminophen(2)	Acetazolamide	Allopurinol	Amantadine
Amitriptyline	Ampicillin(2)	Antacids	Aspirin(6)
Busulfan(2)	Carbamazepine(3)	Chlorothiazide	Chlorpromazine(2)
Clindamycin(2)	Clofibrate(4)	Codeine	Colchicine
Corticosteroids(2)	Cortisone(2)	Desipramine(2)	Diazepam
Dilantin	Epinephrine(2)	Erythromycin	Fluorides(5)
Fluphenazine(2)	Furosemide(5)	Gentamicin(2)	Griseofulvin
Haloperidol	Hydralazine	Hydrocortisone(4)	Hydroxyurea(3)
Ibuprofen(4)	Imipramine(2)	Indomethacin(4)	Itraconazole(2)
Kanamycin	Ketocanazole	Levodopa(3)	Levothyroxine
Lincomycin	Lithium Carbonate(3)	Lovastatin	MAO Inhibitors
Mannitol(2)	Mercaptopurine(2)	Methimazole(2)	Methotrexate(4)
Methyldopa(4)	Miconazole(2)	Morphine	Neomycin
Nifedipine(2)	Nitrofurantoin(2)	Paramethadione	Penicillamine
Penicillin(2)	Phenelzine(2)	Phenobarbital	Phenylbutazone(3)
Phenytoin	Piroxicam(2)	Polythiazide(4)	Pravastatin
Prednisone(5)	Procainamide(4)	Procarbazine	Progesterone
Propranolol(3)	Protriptyline	Ramipril	Rifampin(4)
Salicylates	Streptomycin	Sulfamethizole	Sulfamethoxazole(4)
Sulfasalazine(2)	Sulfisoxazole(2)	Tamoxifen(3)	Tetracycline(4)
Triameterene(3)	Trimethadione(2)	Tromethamine(2)	Valproic Acid(3)
Vancomycin	Vasopressin	Viomycin	

Panel/Subset Report

Blood Test Sample

Male / Age: 60

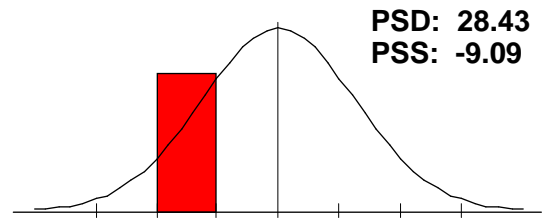
Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Adrenal Function

Cholesterol, Eosinophils[L], Eosinophil Count[L], Potassium[H], Sodium.

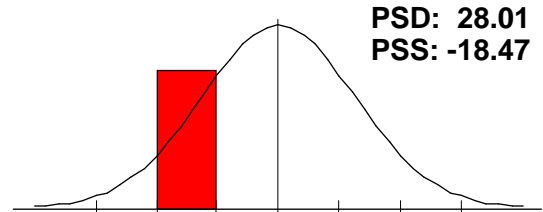
This profile may be indicative of adrenal insufficiency. Stress, poor nutrient intake and certain medications may be the cause of this imbalance or a clinical sign related to this imbalance.



Allergy

Eosinophils[L], Globulin, Lymphocytes[L], Monocytes, W.B.C.[L].

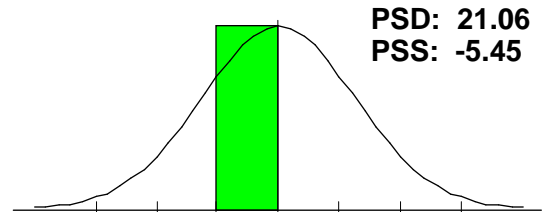
This panel profile may be due to a general mineral deficiency. Correlate this with the Differential and Differential Count Panels for additional information. If the Differential Count Panel Skew is low and the Differential is abnormal (>25% off), then suspect a general nutrient deficiency also.



Anti Oxidant Status

Anion Gap, Bilirubin, Total, Chloride[L], Cholesterol, Glucose, Iron, Total[H].

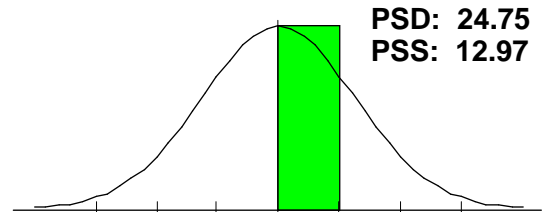
The elements in this panel help represent the antioxidant status of the individual. Excesses or deficiencies in this panel may indicate the need for additional antioxidants. The deviation was below 25% so no abnormalities were found.



Athletic Potential

B.U.N./Creatinine Ratio, Cholesterol, CO2[H], Creatinine, LDH[H], Potassium[H], Protein, Total[L], Sodium, HDL-Cholesterol.

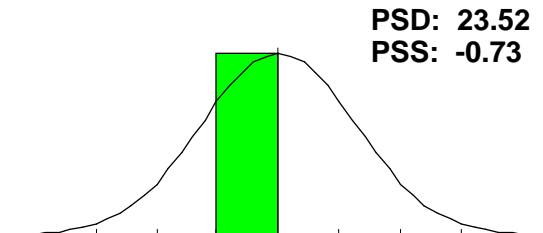
This panel is used to help assess athletic potential. Keeping this panel in a normal range may be helpful in improving athletic performance and reducing the risk of injury. The deviation was below 25% so no abnormalities were found.



Bone/Joint

Albumin, Alkaline Phosphatase[L], Calcium, Neutrophils, Phosphorus[H], Protein, Total[L], Uric Acid[H].

This panel may be helpful in assessing bone and joint health. Keeping the elements of this panel in a normal range may be helpful in reducing the risk of osteoporosis and other bone and joint disorders. The deviation was below 25% so no abnormalities were found.

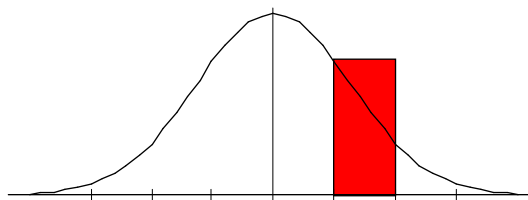


Cardiac Marker

Cholesterol, GGT, Iron, Total[H], LDH[H], sGOT, Triglycerides[H], Uric Acid[H], HDL-Cholesterol, LDL[H].

PSD: 33.85
PSS: 26.27

The profile shown here indicates that this individual may be at a greater risk for coronary heart disease than the general population. A review of dietary, environmental and personal habits should be done and appropriate lifestyle changes made. If both triglycerides and cholesterol are elevated, a regime of exercise and dietary changes are more likely to exhibit benefits.

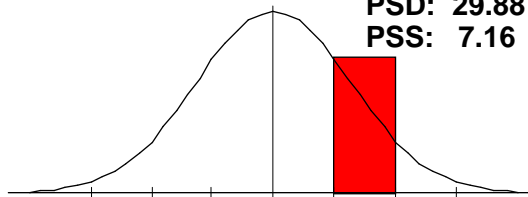


Cellular Distortions

Alkaline Phosphatase[L], Anion Gap, GGT, Iron, Total[H], LDH[H], Neutrophils, W.B.C.[L].

PSD: 29.88
PSS: 7.16

The positive Panel Status Skew may necessitate a review of the potential for serious cellular distortions.

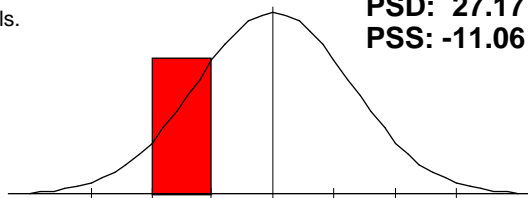


Differential

Basophils[L], Eosinophils[L], Lymphocytes[L], Monocytes, Neutrophils.

PSD: 27.17
PSS: -11.06

This panel profile may be indicative of an immune system response. A careful review of the individual components of this panel is recommended.

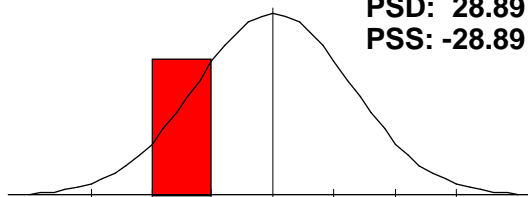


Differential Count

Basophil Count[L], Eosinophil Count[L], Lymphocyte Count[L], Monocyte Count, Neutrophil Count.

PSD: 28.89
PSS: -28.89

The negative Panel Status Skew may be due to the immune system being at rest if the Differential Panels Deviation is less than 25%, if it is higher than 25% than suspect a weakened or compromised immune system.

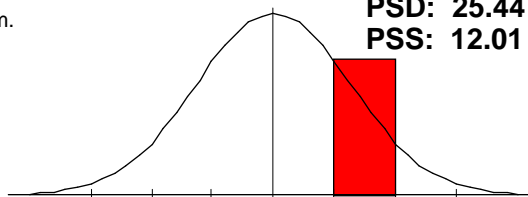


Electrolyte

Calcium, Chloride[L], CO2[H], Phosphorus[H], Potassium[H], Sodium.

PSD: 25.44
PSS: 12.01

A profile such as this indicates the need to review kidney function and the level of fluid intake habits of the patient. It is likely that the patient is not drinking enough fluids, especially if the Albumin, Hematocrit, Hemoglobin and/or Red Blood Cell Count is elevated.



Panel/Subset Report

Blood Test Sample

Male / Age: 60

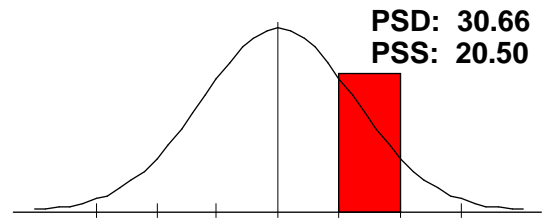
Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Gastrointest. Function

Anion Gap, Chloride[L], Cholesterol, CO2[H], Monocytes,
Potassium[H], Sodium, Triglycerides[H], LDL[H].

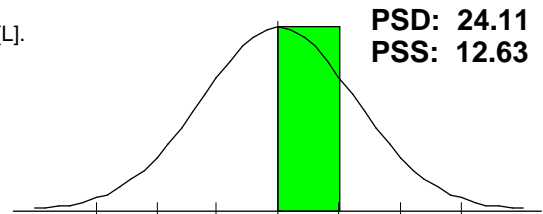
This panel profile indicates the need for further evaluation of gastrointestinal integrity, digestion and absorption. Check for dysbiosis, food allergies or "leaky gut" syndrome.



Hematology

Hematocrit[H], Hemoglobin[H], MCH, MCHC, MCV, R.B.C., W.B.C.[L].

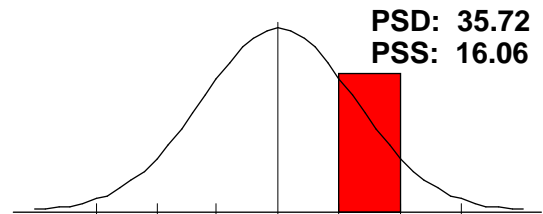
The hematology panel assesses the production of red blood cells and their function. The deviation was below 25% so no abnormalities were found.



Inflammatory Process

Eosinophils[L], Globulin, LDH[H], Neutrophils, Potassium[H], sGOT,
sGPT[L], Triglycerides[H], Uric Acid[H], LDL[H].

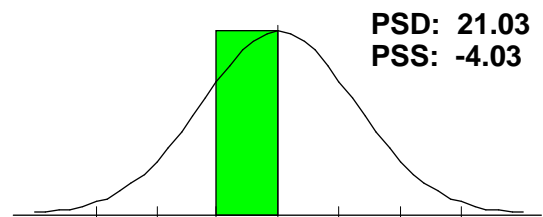
This panel profile may indicate the presence of an ongoing inflammatory process. Consider increasing B-complex vitamins and having the patient avoid saturated and trans fats as well.



Kidney Function

Albumin, B.U.N., B.U.N./Creatinine Ratio, Chloride[L], CO2[H],
Creatinine, Glucose, Potassium[H], Protein, Total[L], Sodium.

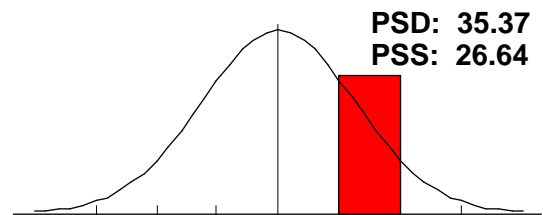
This panel may be helpful in assessing kidney function. It is important to keep the elements of this subset in balance to help the body eliminate waste material. The deviation was below 25% so no abnormalities were found.



Lipid

Cholesterol, Triglycerides[H], HDL-Cholesterol, LDL[H].

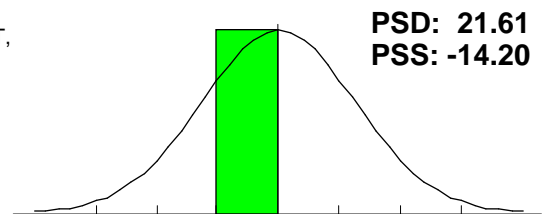
The panel profile seen here suggests that the patient may be at a greater risk for coronary heart disease than the general population. A dietary evaluation should be undertaken as well to educate the patient about saturated and trans fats.



Liver Function

Albumin, Alkaline Phosphatase[L], Bilirubin, Total, Cholesterol, GGT,
Protein, Total[L], sGOT, sGPT[L].

Assessing liver function is important in determining the individual's ability to detoxify itself as well as processing amino acids and other important biological processes. The deviation was below 25% so no abnormalities were found.



Panel/Subset Report

Blood Test Sample

Male / Age: 60

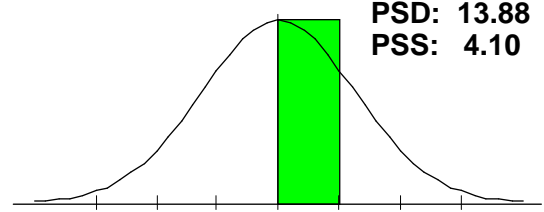
Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

Nitrogen

B.U.N., B.U.N./Creatinine Ratio, Creatinine, Uric Acid[H].

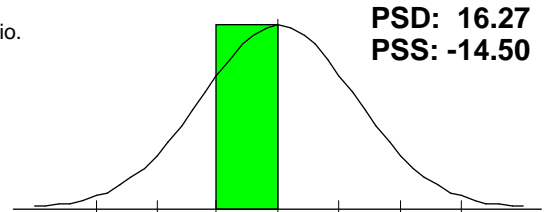
Nitrogen is an important element in achieving optimal wellness. The elements in this panel are important in determining nitrogen competency. The deviation was below 25% so no abnormalities were found.



Protein

A/G Ratio, Albumin, Globulin, Protein, Total[L], Protein/Globulin Ratio.

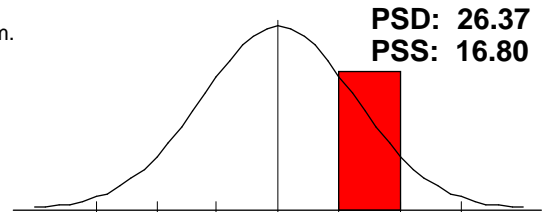
Proteins are the basic building blocks of hormones, muscle, neurotransmitters, immune systems responses and more. Assessing their competency is crucial in achieving optimal wellness. The deviation was below 25% so no abnormalities were found.



Pulmonary Function

Anion Gap, Calcium, CO2[H], LDH[H], Potassium[H], sGOT, Sodium.

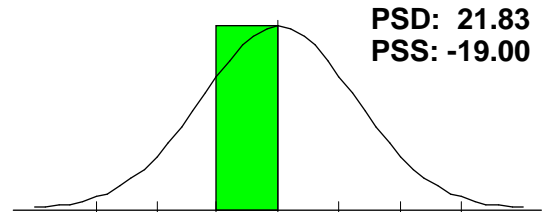
This panel profile should make one suspect abnormal pulmonary respiration, lung diseases, and toxic or viral infections.



Ratios

A/G Ratio, B.U.N./Creatinine Ratio, Calcium/Phosphorus Ratio[L], Sodium/Potassium Ratio[L], Protein/Globulin Ratio.

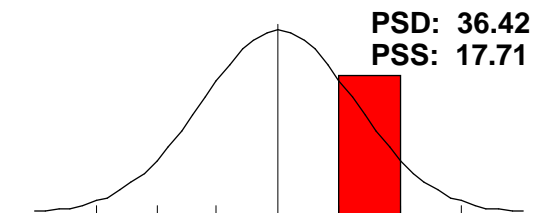
This panel may be helpful in determining the general balance of the overall chemistry of the individual. The deviation was below 25% so no abnormalities were found.



Thyroid

Thyroxine (T4), T-3 Uptake[L], Free T4 Index (T7), Ultra-Sensitive TSH[H].

This panel may indicate the need for a careful review of the individual markers in order to determine causative factors.



Clinical Correlation

Blood Test Sample

Male / Age: 60

Blood Test Date: 10/10/2002

Dr. Donna Adams (5)

This report "MATCHES" clinical observations with the lab test. Elements shown, normal and abnormal, tend to characterize the observation. Highlighted elements are those reported to "MATCH" the characteristics of the clinical observation. Others are NOT matches but are elements in the observation.

Euthyroid Sick Syndrome ()

66.67% (2 of 3)

Decreased

n/a Triiodothyronine

Normal

16.25 Thyroxine (T4)

Increased

92.00 Ultra-Sensitive TSH

Review Cardiovascular Risk Factors ()

66.67% (4 of 6)

Decreased

Normal

-17.44 HDL-Cholesterol

Increased

16.00 Cholesterol

-21.67 Glucose

40.37 Triglycerides

33.33 Uric Acid

67.65 LDL

Review family history or personal history of cardiovascular risk factors such as smoking, excessive alcohol intake, high fat diet, and/or sedentary lifestyle.