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**Deficient Mineralization**

Date: 10/10/2002

Next test is overdue.

## **LabAssist™ Element Analysis Report**

### **Practitioner**

*Printed on Wednesday, August 15, 2007 for:*

**Dr. Donna Adams**

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Suite 4

Anytown, US 55555

555-555-5554

(fax)

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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

### Deficient Mineralization

**Element Analysis Date: 10/10/2002**

Female / Age: 52

Dr. Donna Adams (5)

Client ID: (13100)

555-555-5554

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

### Low Results

	-80	-60	-40	-20	0					
						<b>% Status</b>	<b>Result</b>	<i>Low</i>	<i>High</i>	
Magnesium						-70.00	<b>L</b>	<b>32.00</b>	40.00	80.00
Copper						-44.59	<b>L</b>	<b>0.60</b>	0.52	2.00

### High Results

	-50	0	50	100	150					
						<b>% Status</b>	<b>Result</b>	<i>Low</i>	<i>High</i>	
Lead						450.00	<b>H</b>	<b>0.50</b>	0.00	0.10
Calcium						33.33	<b>H</b>	<b>15.00</b>	0.00	18.00
Chromium						31.82	<b>H</b>	<b>0.70</b>	0.25	0.80

## Basic Status Alphabetical

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

-100	-50	0	50	100	% Status	Result	Low	High
					0.00	1.50	0.00	3.00
					0.00	0.02	0.00	0.04
			25		<b>33.33 H</b>	<b>15.00</b>	0.00	18.00
			25		<b>31.82 H</b>	<b>0.70</b>	0.25	0.80
	-25				<b>-44.59 L</b>	<b>0.60</b>	0.52	2.00
	-75			50	<b>450.00 H</b>	<b>0.50</b>	0.00	0.10
	-75				<b>-70.00 L</b>	<b>32.00</b>	40.00	80.00
					-4.55	0.50	0.25	0.80
					-10.00	0.00	0.00	0.00
					4.55	0.02	0.01	0.03
					-10.00	1800.00	1000.00	3000.00
					-21.43	0.20	0.12	0.40
					-22.22	0.15	0.10	0.28
					-10.00	8.00	6.00	11.00
	-25%		25%		<b>Total Status Deviation</b>	<b>50.89</b>		
					<b>Total Status Skew</b>	<b>23.35</b>		

## Client Summary Review

### Deficient Mineralization

Female / Age: 52

Element Analysis Date: 10/10/2002

Dr. Donna Adams (5)

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### Nutritional Support

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

**1-Copper**  
1x daily 2 mg

**1-Magnesium**  
2x daily 200 mg

**Results Missing From Test**

A more comprehensive report would have been generated if the following results were provided.

Arsenic

**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
Toxic Minerals	115.00%	110.00%
Essential Minerals	25.25%	-11.31%

**Lab Reported out-of-range Values**

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

**Lead ( 450.00%)**

Lead toxicity can manifest itself in numerous ways such as: kidney damage, epigastric pain and nausea, male and female reproductive failure, sideroblastic anemia, demyelization, axonal degradation, paralysis, pain, and many abnormal neurological disorders. Potential sources of lead include: house paint, drinking water, pesticides, and color newsprint.

**Magnesium (-70.00%)**

Involved in over 300 enzyme systems, magnesium is a very important trace mineral. Deficiencies can lead to hypertension, diabetes, PMS, CVD, neuromuscular disease, and many others. The major dietary sources of magnesium are nuts, beans, and dark green vegetables.

## Nutrition - Detail

### Deficient Mineralization

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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-Copper** 1x daily 2 mg

COPPER (Cu)

2 mg

A 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

Copper

#### ***Rationale***

Normal

Increased

#### **1-Magnesium** 2x daily 200 mg

MAGNESIUM (Mg)

Second most abundant mineral in intracellular fluid. It helps facilitate Na - K transport and influences Ca levels. It is involved in vasodilation, contraction, as well as cardiac and skeletal muscle cells. Required in over 300 enzymes, temperature control, neuronal homeostasis and has a profound effect on cardiac physiology

Decreased

Magnesium

Normal

Increased

## Drug Interactions

### Deficient Mineralization

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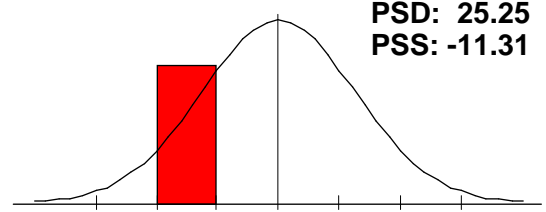
Drugs listed below tend to further aggravate elements of blood chemistry that are out of range (H or L). The (#) after each drug denotes the number of times that drug is flagged as being potentially harmful.

Progesterone

**Essential Minerals**

Calcium[H], Chromium[H], Copper[L], Magnesium[L], Manganese, Molybdenum, Potassium, Selenium, Vanadium, Zinc.

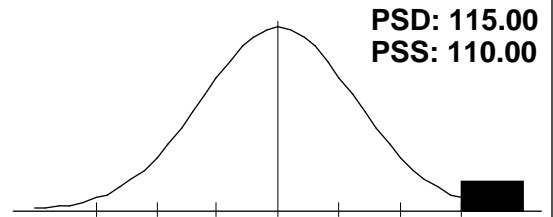
The low reading of this panel suggests the need for trace mineral supplementation. Check the Nutritional Detail section of the report for specific recommendations.



**Toxic Minerals**

Aluminum, Cadmium, Lead[H], Mercury.

Any amount of heavy metals is detrimental to optimal health but this panel profile shows excessive amounts of toxic elements intracellularly. A careful program of detoxification is essential to the achievement of health.



## Clinical Correlation

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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.

**No disease pattern matches > 66.0%**