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# Blood Chemistry Analysis

# Functional Health Report



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## Patient Report

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**Requested by** Ms Maev Creaven  
Maev Creaven Nutrition



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**Test date** Feb 28, 2020

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# What's Inside?

An introduction to functional blood chemistry analysis and your report.

An in-depth functional system and nutrient evaluation.

A full breakdown of all individual biomarker results, showing distance from optimal, comparative and historical views.

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- 1 What's Inside?
- 3 Practitioner's Notes
- 4 Functional BCA
- 5 Patient Report

The top areas that need the most attention.

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An introduction to functional blood chemistry analysis and your report.

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# Introduction

- 1 What's Inside?
- 3 Practitioner's Notes
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# Ms Maev Creaven's Report

This report highlights the notes made about the results of this blood test.

## REPORT



# Functional Blood Chemistry Analysis

Functional Blood Chemistry Analysis can be defined as the process by which complex and comprehensive blood biomarkers are organized, analyzed and interpreted to provide a comprehensive assessment of the state and trends of the main body systems, the supporting body accessory systems, along with the status of nutrients and trends towards and away from clinical dysfunction.

## WHY BLOOD TESTING?

Blood has a lot to tell us about your state of health and the blood chemistry and CBC / hematology test is the most commonly ordered medical lab test worldwide. These blood tests are an integral part of Western clinical medicine and are used to aid in the diagnostic decision-making process. Patients understand and are educated that blood testing is the norm for health assessment.

However, many, many people start to feel unwell long before a traditional blood test becomes diagnostic and more often than not, patients like you are told by their physician that "everything on your blood test looks normal."

## "NORMAL" IS NOT OPTIMAL

Most patients who feel "unwell" will come out "normal" on a blood test. Clinical experience suggests that these people are by no means "normal" and are a far cry from being functionally optimal. They may not yet have progressed to a known disease state but they are what we call dys-functional, i.e. their physiological systems are no longer functioning properly and they are starting to feel un-well.

The issue is not that the blood test is a poor diagnostic tool, far from it. The issue is that the ranges used on a traditional lab test are based on statistics and not on whether a certain value represents good health or optimal physiological function. The problem is that "normal" reference ranges usually represent "average" populations rather than the optimal level required to maintain good health. Most "normal" ranges are too broad to adequately detect health problems before they become pathology and are not useful for detecting the emergence of dysfunction.

## THE FUNCTIONAL APPROACH

The functional approach to chem screen and CBC analysis is oriented around changes in physiology and not pathology. We use ranges that are based on optimal physiology and not the "normal" population. This results in a tighter "Functional Physiological Range", which allows us to evaluate the area within the "Normal" range that indicates that something is not quite right in the physiological systems associated with this biomarker. This gives us the ability to detect changes in your physiological "function". We can identify the factors that obstruct you from achieving optimal physiological, biochemical, and metabolic functioning in your body.

Another thing that separates the Functional Blood Chemistry Analysis from the Traditional approach is we are not simply looking at one individual biomarker at a time in a linear report of the data. Rather, we use trend analysis between the individual biomarkers to establish your otherwise hidden trend towards or away from a functional health optimal.

## THE FUNCTIONAL HEALTH REPORT

The Functional Health Report is the result of a detailed algorithmic analysis of your blood test results. Our analytical and interpretive software analyzes the blood test data for its hidden meaning and reveals the subtle, web-like patterns hidden within the numbers that signal the first stages of functional change in your body.

## SUMMARY

In closing, Blood testing is no longer simply a part of disease or injury management. It's a vital component of a comprehensive Functional Medicine work up and plays a vital role in uncovering hidden health trends, comprehensive health promotion and disease prevention.



# Patient Report

Your report is the result of a detailed and proprietary algorithmic analysis of your complex and comprehensive blood biomarkers.



## MS MAEV CREAVEN

Nutritional Therapy Practitioner

## THE FUNCTIONAL HEALTH REPORT

The Functional Health Report uniquely organises and creates an interpretation providing a comprehensive insight and assessment into the state of previously hidden health trends of the main body systems, its supporting body accessory systems, along with reporting on the status of key nutrients and trends to and from clinical dysfunction.

The analytical and interpretive software analyzes the blood test data for its hidden meaning and reveals the subtle, web-like patterns hidden within the numbers that signal the first stages of functional change in your body.

## ASSESSMENT

The Assessment section is at the very heart of the Functional Health Report. It is here that the findings of the algorithmic trend analysis are presented.

The Body Systems and Accessory reports show the level of dysfunction that exists in the various physiological and supporting accessory systems in your body.

The Nutrient Status report gives you an indication of your general nutritional status and the Nutrient Deficiencies report shows the degree of deficiency for individual nutrients.

Each of the assessment reports is accompanied by a section that contains detailed descriptions and interpretation explanations of the results presented in each of the reports in this section.

## ANALYSIS

The Analysis section shows you the actual results of your blood test itself.

The Blood Test Results Report lists the results of your blood test results and shows you if an individual biomarker is outside of the optimal range and/or outside of the clinical lab range.

The Blood Test Results Comparative Report compares results of the latest and previous Chemistry Screen and Hematology test and gives you a sense of whether or not there has been an improvement on the individual biomarker level.

The Blood Test History report allows you to compare results over time and see where improvement has been made and allows you to track progress in the individual biomarkers.

A Blood Test Score report is made showing which markers exhibit the largest shifts away from an optimal norm either higher or lower.

## HEALTH IMPROVEMENT PLAN

All the information on the Assessment and Analysis sections of the report are summarized in the Health Improvement section, which focuses on the top areas of need as presented in this report.



An in-depth functional system and nutrient evaluation.

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## Assessment

- 7 Functional Body Systems
- 9 Accessory Systems
- 11 Nutrient Status
- 13 Nutrient Deficiencies

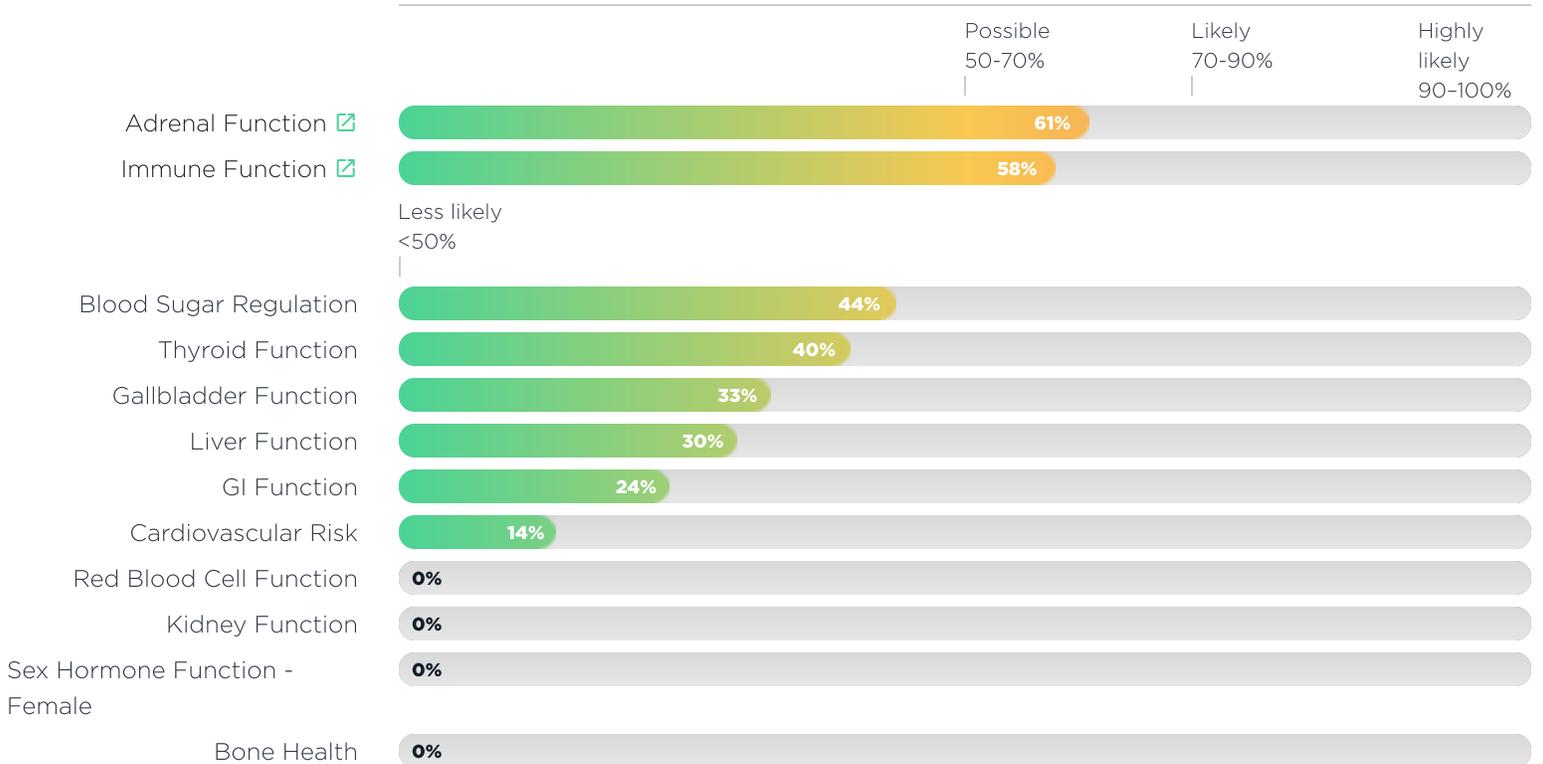
# Functional Body Systems

The Functional Body System results represent an algorithmic analysis of this blood test. These results have been converted into your individual Functional Body Systems Report based on our latest research.

This report gives you an indication of the level of dysfunction that exists in the various physiological systems in your body.

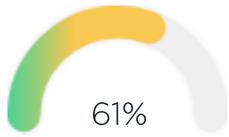
Each Body System that has a probability of dysfunction above 50% is included in the section that follows so you can read a highly detailed description and individual explanation of the results shown in this report.

## PROBABILITY OF DYSFUNCTION



# Functional Body Systems Details

This section contains detailed descriptions and explanations of the results presented in the Functional Body Systems report including all the biomarkers considered in the algorithmic analysis and the rationale behind the interpretation.



61%

Dysfunction Possible.  
There may be improvement needed in certain areas.

## ADRENAL FUNCTION [↗](#)

The Adrenal Function score reflects the degree of function in your adrenal glands. The adrenal glands produce certain hormones in response to stress. They are responsible for what is commonly called “the fight or flight response”. Unfortunately, when your body is under constant stress, which is very common, your adrenal glands become less functional. Adrenal dysfunction can be caused by an increased output of stress hormones (adrenal stress) or more commonly a decreased output of adrenal hormones (adrenal insufficiency).

### Rationale

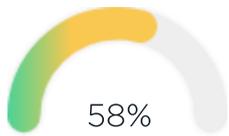
Potassium [↑](#), Sodium : Potassium [↓](#), Cholesterol - Total [↑](#)

### Biomarkers considered

Sodium, Potassium, Sodium : Potassium, BUN, Chloride, Cholesterol - Total, Triglycerides

### Patient result not available - consider running in future tests:

Glucose - Fasting, CO2, DHEA-S - Female, Cortisol - AM, Cortisol - PM



58%

Dysfunction Possible.  
There may be improvement needed in certain areas.

## IMMUNE FUNCTION [↗](#)

The Immune Function score allows us to assess the state of function in your immune system. When the immune system is in a state of balance we are able to cope and deal with infections with little or no lasting negative side-effects. Biomarkers on a blood test allow us to check and see if the immune system is in a state of balance or not. Some of the factors to consider include a low functioning immune system ( a condition called immune insufficiency), bacterial or viral infections or GI dysfunction associated with decreased immune function: abnormal immunity in the gut lining, a decrease in immune cell function in the gut or an increase in abnormal bacteria, etc. in the gut (a condition called dysbiosis).

### Rationale

Neutrophils - % [↓](#), Monocytes - % [↑](#), Neutrophils - Absolute [↓](#), Alk Phos [↓](#)

### Biomarkers considered

Total WBCs, Neutrophils - %, Monocytes - %, Monocytes - Absolute, Neutrophils - Absolute, Albumin, Alk Phos, Ferritin

### Patient result not available - consider running in future tests:

Globulin - Total, Lymphocytes - %, Lymphocytes - Absolute

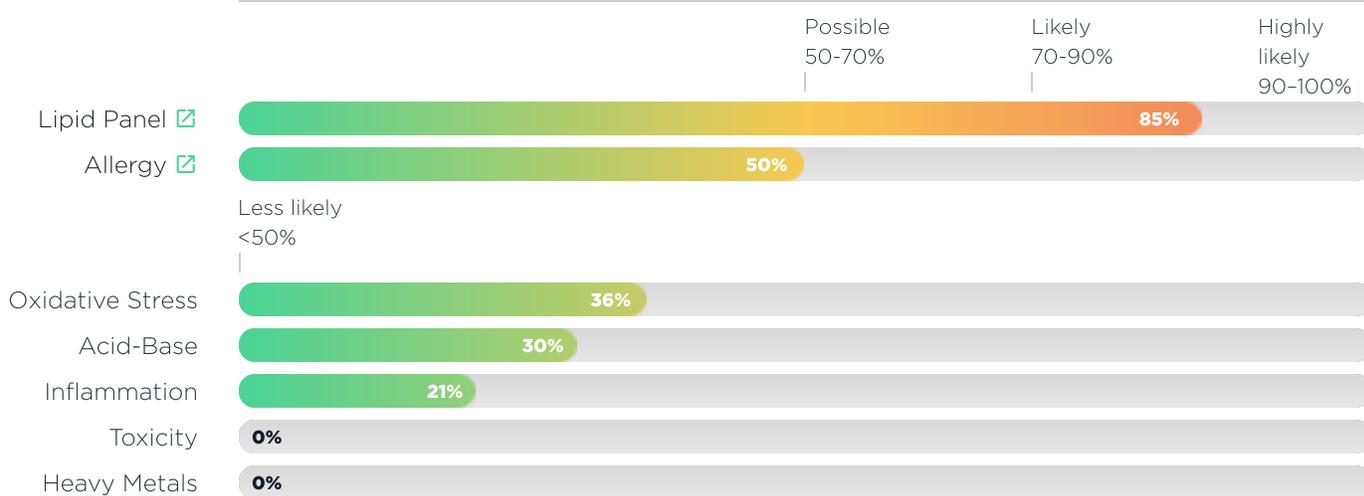
# Accessory Systems

The Accessory System results represent an algorithmic analysis of this blood test. These results have been converted into your individual Accessory Systems Report based on our latest research.

This report gives you an indication of the level of dysfunction that exists in the various physiological systems in your body.

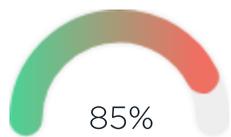
Each Accessory System that has a probability of dysfunction above 50% is included in the section that follows so you can read a highly detailed description and individual explanation of the results shown in this report.

## PROBABILITY OF DYSFUNCTION



# Accessory Systems Details

This section contains detailed descriptions and explanations of the results presented in the Accessory Systems report including all the biomarkers considered in the algorithmic analysis and the rationale behind the interpretation.



85%

Dysfunction Likely.  
Improvement required

## LIPID PANEL [🔗](#)

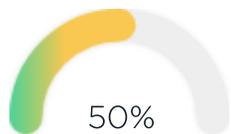
The Lipid Panel score gives us an indication of the levels of cholesterol and fat in your blood. An increased Lipid Panel score indicates that you have higher than optimal levels of cholesterol and fat in your blood (a condition called hyperlipidemia). Hyperlipidemia is associated with an increased risk of cardiovascular disease and may be genetic or be due to dietary factors, hormonal imbalances, blood sugar dysregulation and/or other metabolic imbalances.

### Rationale

Cholesterol - Total ↑, LDL Cholesterol ↑

### Biomarkers considered

Cholesterol - Total, Triglycerides, LDL Cholesterol, Cholesterol : HDL, Triglyceride:HDL, HDL Cholesterol



50%

Dysfunction Possible.  
There may be improvement needed in certain areas.

## ALLERGY [🔗](#)

The Allergy score reflects the degree of food or environmental sensitivities/allergies you may be dealing with. A number of biomarkers on a blood test may increase in association with food allergies and/or sensitivities. A high Allergy score may indicate the need for further assessment or evaluation of food or environmental sensitivities/allergies.

### Rationale

Eosinophils - % ↑

### Biomarkers considered

Eosinophils - %, Basophils - %, Eosinophils - Absolute, Basophils - Absolute

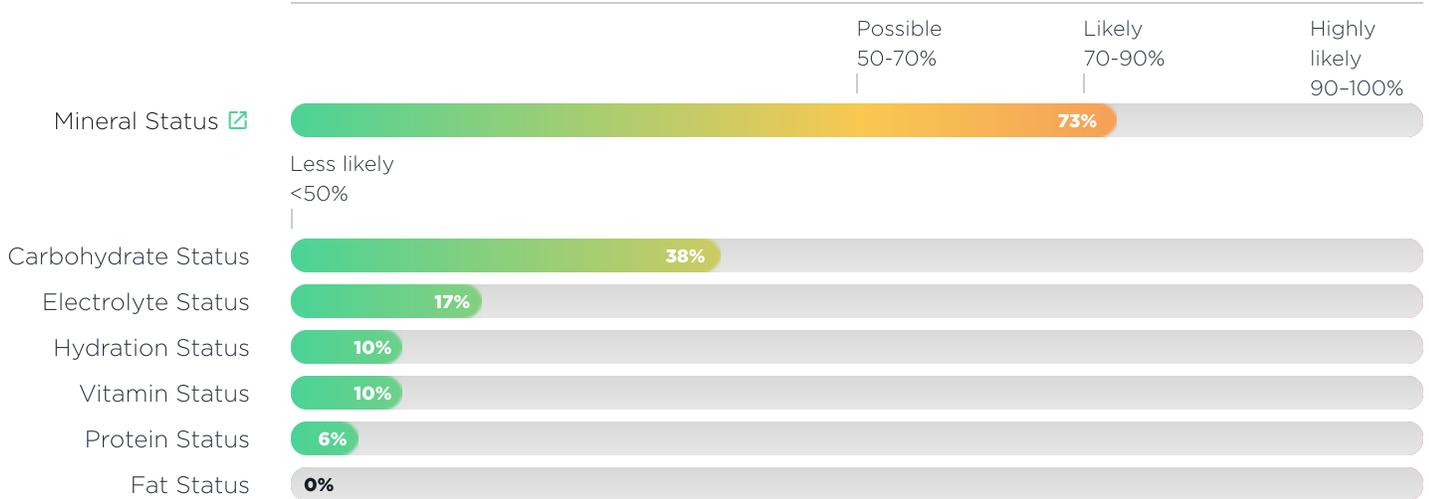
# Nutrient Status

The Nutrient Status results represent an algorithmic analysis of this blood test. These results have been converted into your individual Nutrient Status Report based on our latest research.

This report gives you an indication of your general nutritional state. The Nutrient Status is influenced by actual dietary intake, digestion, absorption, assimilation, and cellular uptake of the nutrients themselves.

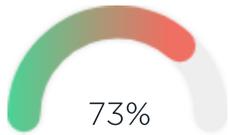
Each Nutrient category that has a probability of dysfunction above 50% is included in the section that follows so you can read a detailed description and individual explanation of the results shown in this report.

## PROBABILITY OF DYSFUNCTION



# Nutrient Status Details

This section contains detailed descriptions and explanations of the results presented in the Nutrient Status report including all the biomarkers considered in the algorithmic analysis and the rationale behind the interpretation.



73%

Dysfunction Likely.  
Improvement required

## MINERAL STATUS

The Mineral Status score gives us a general indication of the balance of certain minerals in your body based on the results of this blood test. Mineral levels in the body are closely regulated and deficiency in one or more minerals may be due to a number of factors such as the amount in your diet, the ability to digest and break down individual minerals from the food or supplements you consume, and the ability of those minerals to be absorbed, transported and ultimately taken up by the cells themselves.

### Rationale

Alk Phos ↓, T3 - Total ↓, T3 - Free ↓, Magnesium - Serum ↓

### Biomarkers considered

Potassium, Calcium, Alk Phos, GGT, Iron - Serum, Ferritin, T3 - Total, T3 - Free, Magnesium - Serum

### Patient result not available - consider running in future tests:

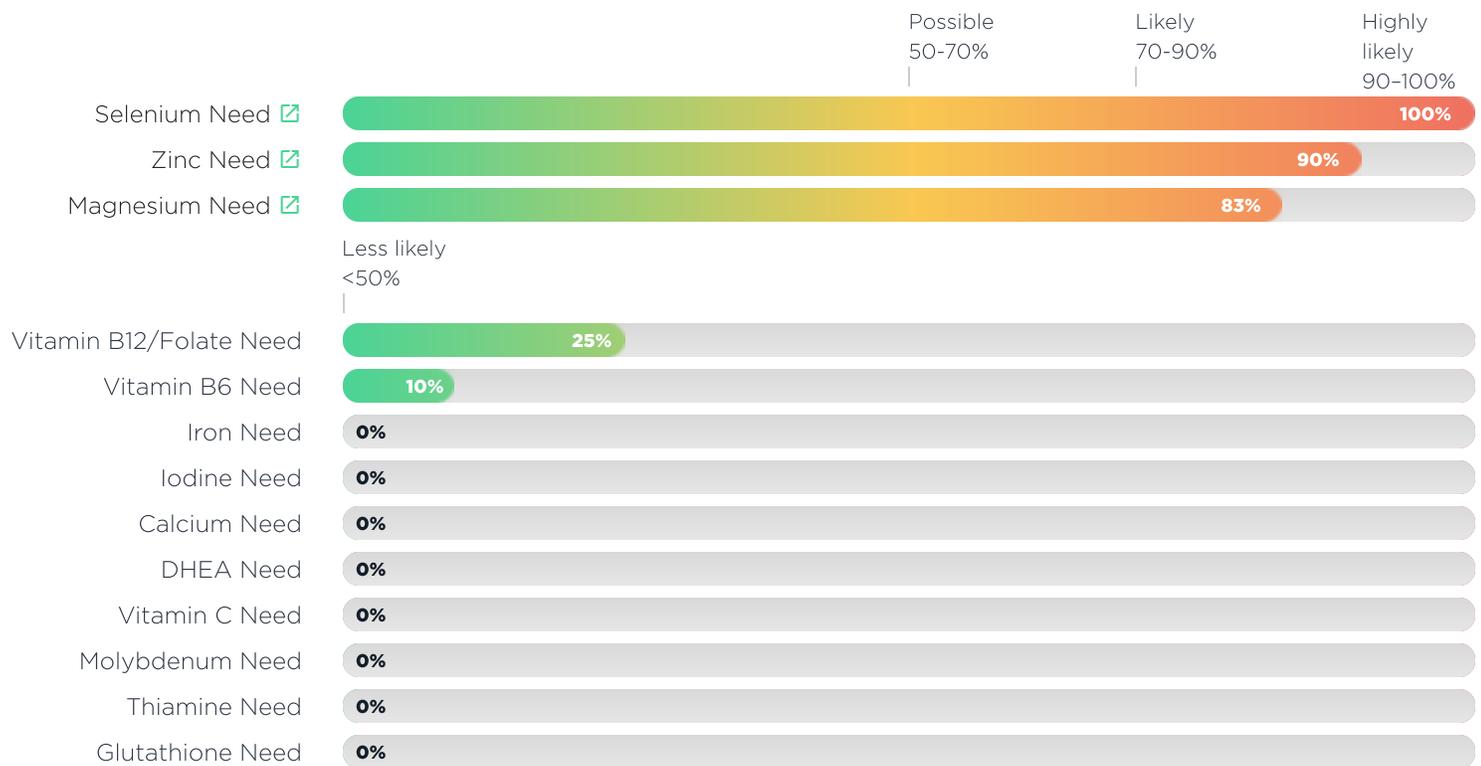
Uric Acid - Female, Phosphorus, TIBC, % Transferrin saturation, MCV, Copper - Serum, Zinc - Serum

# Individual Nutrient Deficiencies

The values represent the degree of deficiency for individual nutrients based on your blood results. The status of an individual nutrient is based on a number of factors such as actual dietary intake, digestion, absorption, assimilation and cellular uptake of the nutrients themselves. All of these factors will be taken into consideration before determining whether or not you actually need an individual nutrient.

Each individual Nutrient Deficiency that has a probability of dysfunction above 50% is included in the section that follows so you can read a highly detailed description and individual explanation of the results shown in this report.

## PROBABILITY OF DYSFUNCTION



# Individual Nutrient Deficiencies Details

This section contains detailed descriptions and explanations of the results presented in the Nutrient Deficiencies report including all the biomarkers considered in the algorithmic analysis and the rationale behind the interpretation.



100%

## SELENIUM NEED

The results of your blood test indicate that your selenium levels might be lower than optimal.

### Rationale

T3 - Total ↓, T3 - Free ↓

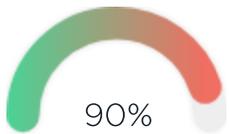
### Biomarkers considered

T3 - Total, T3 - Free

### Patient result not available - consider running in future tests:

T3 Uptake

Dysfunction Highly Likely.  
Much improvement  
required.



90%

## ZINC NEED

The results of your blood test indicate that your Zinc levels might be lower than optimal.

### Rationale

Alk Phos ↓

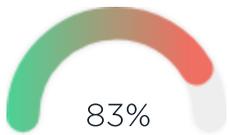
### Biomarkers considered

Alk Phos

### Patient result not available - consider running in future tests:

Zinc - Serum

Dysfunction Highly Likely.  
Much improvement  
required.



83%

## MAGNESIUM NEED

The results of your blood test indicate that your magnesium levels might be lower than optimal.

### Rationale

Magnesium - Serum ↓

### Biomarkers considered

Magnesium - Serum, GGT

### Patient result not available - consider running in future tests:

Magnesium - RBC

Dysfunction Likely.  
Improvement required



A full breakdown of all individual biomarker results, showing distance from optimal, comparative and historical views.

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## **Analytics**

- 16 Blood Test Results
- 23 Blood Test Results Comp.
- 26 Blood Test Score
- 28 Blood Test History
- 31 Out of Optimal Range

Renal  
Iron Markers  
Hormones

Electrolytes  
Lipids  
CBC/Hematology  
Proteins  
Thyroid  
White Blood Cells

Minerals  
Inflammation

Liver and GB  
Vitamins

# Blood Test Results

The Blood Test Results Report lists the results of the Chemistry Screen and CBC and shows you whether or not an individual biomarker is outside of the optimal range and/or outside of the clinical lab range. The biomarkers are grouped into their most common categories.

Each biomarker in the Blood Test results report that is above or below the Optimal or Standard Range hyperlinks into our Out of Optimal Range report so you can read a description of the biomarker and some of the reasons why it may be high or low.



## RENAL

BUN  
4.50 mmol/L urea



Creatinine  
75.00 μmol/L



BUN : Creatinine  
0.06 Ratio



## ELECTROLYTES

Sodium  
140.00 mmol/L



Potassium   
4.90 mmol/L



Sodium : Potassium   
28.57 ratio



Chloride  
101.00 mmol/L



## PROTEINS

Albumin  
45.00 g/L



## MINERALS

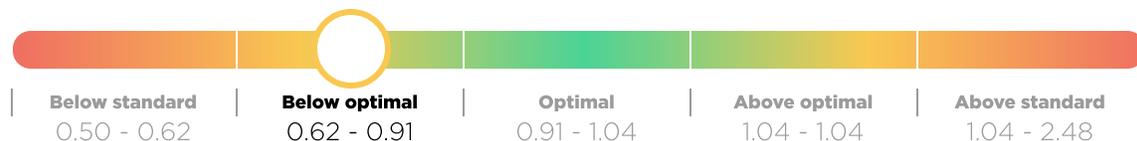
Calcium  
2.47 mmol/L



Calcium : Albumin  
0.05 ratio



Magnesium - Serum 📌  
0.78 mmol/L



## LIVER AND GB

Alk Phos 📌  
39.00 IU/L



ALT 📌  
36.00 IU/L



Bilirubin - Total 📌  
5.00 μmol/L



GGT  
20.00 IU/L



## IRON MARKERS

Iron - Serum  
19.40 μmol/L

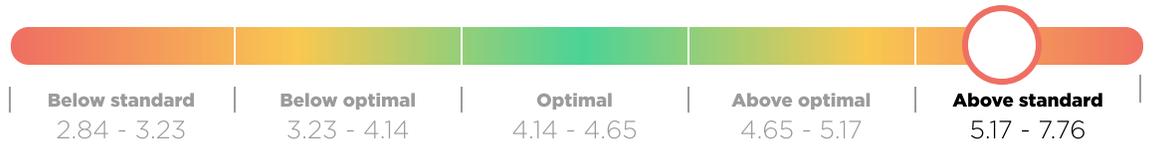


Ferritin 📌  
88.00 μg/L

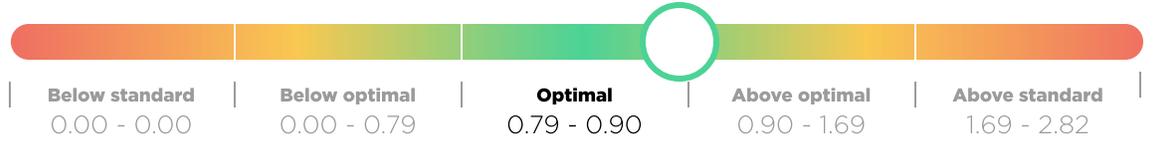


# LIPIDS

Cholesterol - Total   
6.60 mmol/L



Triglycerides  
0.90 mmol/L



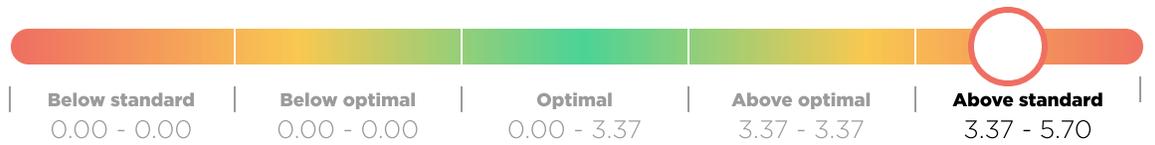
LDL Cholesterol   
3.90 mmol/L



HDL Cholesterol   
2.28 mmol/L



Non-HDL Cholesterol   
4.30 mmol/L



Cholesterol : HDL  
2.89 Ratio



Triglyceride:HDL  
0.39 ratio



## THYROID

TSH  
1.70 mIU/L



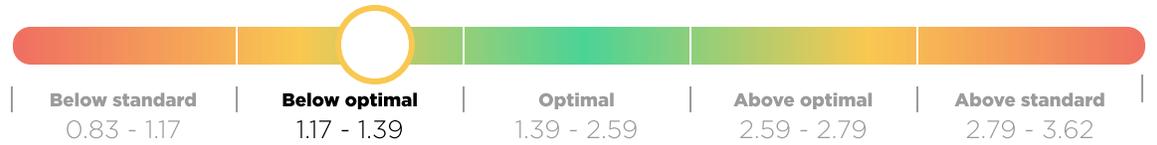
T4 - Total  
85.80 nmol/L



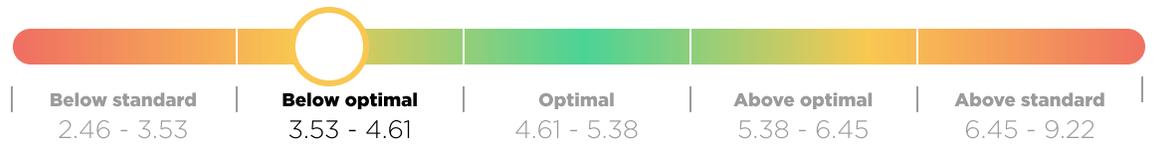
T4 - Free  
18.93 pmol/L



T3 - Total   
1.30 nmol/L



T3 - Free   
4.00 pmol/L



Thyroid Peroxidase (TPO)  
Abs LABCORP  
9.00 IU/ml



## INFLAMMATION

Homocysteine   
4.00  $\mu$ mol/L



## VITAMINS

Vitamin D (25-OH)

173.00 nmol/L



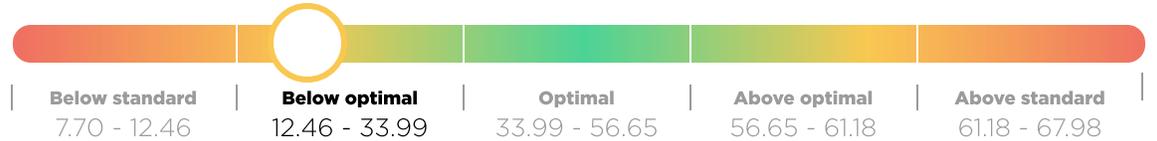
Vitamin B12

1309.00 pmol/L



Folate - Serum

19.00 nmol/L



## HORMONES

FSH - Female

87.60 mIU/ml



## CBC/HEMATOLOGY

RBC - Female

4.38 10E12/L



Hemoglobin - Female

139.00 g/L



Hematocrit - Female

0.40 Prop. of 1.0



MCH

31.70 pg



Platelets

242.00 x10E9/L



# WHITE BLOOD CELLS

Total WBCs  
5.50 giga/L



Neutrophils - %   
23.64 %



Monocytes - %   
7.27 %



Eosinophils - %   
5.45 %



Basophils - %  
0.00 %



Neutrophils - Absolute   
1.30 giga/L



Monocytes - Absolute  
0.40 giga/L



Eosinophils - Absolute  
0.30 giga/L



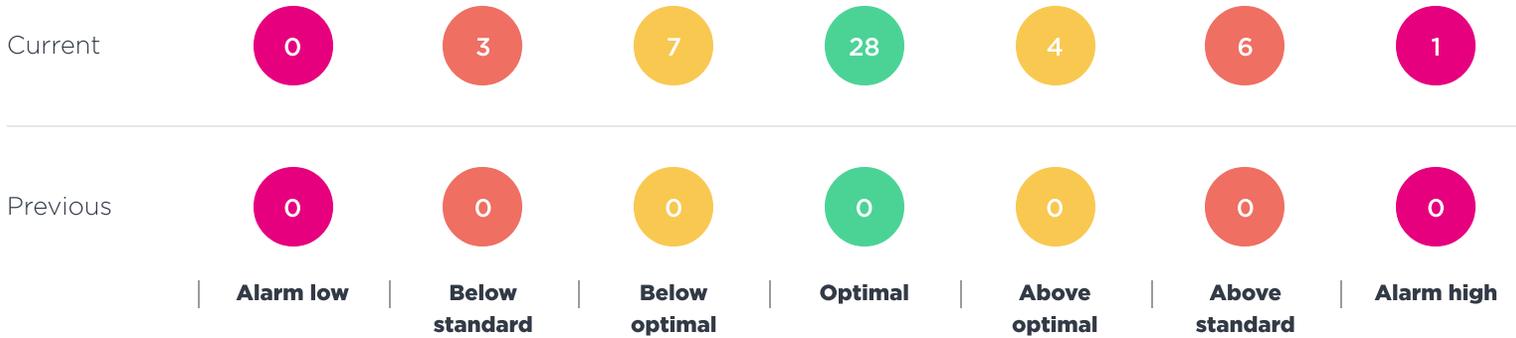
Basophils - Absolute  
0.00 giga/L



# Blood Test Results Comparative

The Blood Test Results Comparative Report lists the results of the latest and previous Chemistry Screen and CBC and shows you whether or not an individual biomarker is outside of the optimal range and/or outside of the clinical lab range.

## Comparative total number of biomarkers by optimal range



# Comparative Report

continued

Biomarker	Current Feb 28 2020	Optimal range	Standard range	Units
BUN <a href="#">🔗</a>	4.50	3.57 - 5.71	2.50 - 8.92	mmol/L urea
Creatinine <a href="#">🔗</a>	75.00	70.72 - 97.24	35.36 - 132.60	µmol/L
BUN : Creatinine <a href="#">🔗</a>	0.06	0.04 - 0.06	0.02 - 0.09	Ratio
Sodium <a href="#">🔗</a>	140.00	135.00 - 142.00	135.00 - 146.00	mmol/L
Potassium <a href="#">🔗</a>	4.90	4.00 - 4.50	3.50 - 5.30	mmol/L
Sodium : Potassium <a href="#">🔗</a>	28.57	30.00 - 35.00	30.00 - 35.00	ratio
Chloride <a href="#">🔗</a>	101.00	100.00 - 106.00	98.00 - 110.00	mmol/L
Albumin <a href="#">🔗</a>	45.00	40.00 - 50.00	36.00 - 51.00	g/L
Calcium <a href="#">🔗</a>	2.47	2.30 - 2.50	2.15 - 2.60	mmol/L
Calcium : Albumin <a href="#">🔗</a>	0.05	0.00 - 0.06	0.00 - 0.06	ratio
Magnesium - Serum <a href="#">🔗</a>	0.78	0.91 - 1.04	0.62 - 1.04	mmol/L
Alk Phos <a href="#">🔗</a>	39.00	70.00 - 100.00	35.00 - 115.00	IU/L
ALT <a href="#">🔗</a>	36.00	10.00 - 26.00	6.00 - 29.00	IU/L
Bilirubin - Total <a href="#">🔗</a>	5.00	5.13 - 15.39	3.42 - 20.52	µmol/L
GGT <a href="#">🔗</a>	20.00	10.00 - 30.00	3.00 - 70.00	IU/L
Iron - Serum <a href="#">🔗</a>	19.40	15.22 - 23.27	7.16 - 28.64	µmol/L
Ferritin <a href="#">🔗</a>	88.00	30.00 - 70.00	10.00 - 232.00	µg/L
Cholesterol - Total <a href="#">🔗</a>	6.60	4.14 - 4.65	3.23 - 5.17	mmol/L
Triglycerides <a href="#">🔗</a>	0.90	0.79 - 0.90	0.00 - 1.69	mmol/L
LDL Cholesterol <a href="#">🔗</a>	3.90	2.07 - 2.59	0.00 - 2.59	mmol/L
HDL Cholesterol <a href="#">🔗</a>	2.28	1.42 - 1.81	1.19 - 2.59	mmol/L
Non-HDL Cholesterol <a href="#">🔗</a>	4.30	0.00 - 3.37	0.00 - 3.37	mmol/L
Cholesterol : HDL <a href="#">🔗</a>	2.89	0.00 - 3.00	0.00 - 5.00	Ratio
Triglyceride:HDL <a href="#">🔗</a>	0.39	0.22 - 0.83	0.00 - 0.87	ratio
TSH <a href="#">🔗</a>	1.70	1.30 - 3.00	0.40 - 4.50	mIU/L
T4 - Total <a href="#">🔗</a>	85.80	77.22 - 153.15	57.92 - 154.44	nmol/L
T4 - Free <a href="#">🔗</a>	18.93	12.87 - 19.30	10.30 - 23.17	pmol/L
T3 - Total <a href="#">🔗</a>	1.30	1.39 - 2.59	1.17 - 2.79	nmol/L
T3 - Free <a href="#">🔗</a>	4.00	4.61 - 5.38	3.53 - 6.45	pmol/L
Thyroid Peroxidase (TPO) Abs LABCORP <a href="#">🔗</a>	9.00	0.00 - 34.00	0.00 - 34.00	IU/ml
Homocysteine <a href="#">🔗</a>	4.00	5.00 - 7.20	0.00 - 10.30	µmol/L
Vitamin D (25-OH) <a href="#">🔗</a>	173.00	124.80 - 249.60	74.88 - 249.60	nmol/L
Vitamin B12 <a href="#">🔗</a>	1309.00 <a href="#">⚠️</a>	332.01 - 590.24	147.56 - 811.58	pmol/L
Folate - Serum <a href="#">🔗</a>	19.00	33.99 - 56.65	12.46 - 61.18	nmol/L
FSH - Female <a href="#">🔗</a>	87.60	1.50 - 10.00	1.00 - 10.20	mIU/ml
Total WBCs <a href="#">🔗</a>	5.50	5.50 - 7.50	3.80 - 10.80	giga/L
RBC - Female <a href="#">🔗</a>	4.38	3.90 - 4.50	3.80 - 5.10	10E12/L
Hemoglobin - Female <a href="#">🔗</a>	139.00	135.00 - 145.00	117.00 - 155.00	g/L
Hematocrit - Female <a href="#">🔗</a>	0.40	0.37 - 0.44	0.35 - 0.45	Prop. of 1.0

Biomarker	Current Feb 28 2020	Optimal range	Standard range	Units
MCH <a href="#">↗</a>	31.70	28.00 - 31.90	27.00 - 33.00	pg
Platelets <a href="#">↗</a>	242.00	155.00 - 385.00	140.00 - 400.00	x10E9/L
Neutrophils - % <a href="#">↗</a>	23.64	40.00 - 60.00	38.00 - 74.00	%
Monocytes - % <a href="#">↗</a>	7.27	0.00 - 7.00	4.00 - 13.00	%
Eosinophils - % <a href="#">↗</a>	5.45	0.00 - 3.00	0.00 - 3.00	%
Basophils - % <a href="#">↗</a>	0.00	0.00 - 1.00	0.00 - 1.00	%
Neutrophils - Absolute <a href="#">↗</a>	1.30	1.90 - 4.20	1.50 - 7.80	giga/L
Monocytes - Absolute <a href="#">↗</a>	0.40	0.28 - 0.58	0.20 - 0.95	giga/L
Eosinophils - Absolute <a href="#">↗</a>	0.30	0.00 - 0.30	0.00 - 0.50	giga/L
Basophils - Absolute <a href="#">↗</a>	0.00	0.00 - 0.10	0.00 - 0.20	giga/L

# Blood Test Score Report

This report shows the biomarkers on the blood test that are farthest from optimal expressed as a %. The biomarkers that appear closest to the top and the bottom are those biomarkers that are farthest from optimal and should be carefully reviewed.

Biomarker	Lab result	Optimal range		% deviation	Optimal range	
		Low	High		Low	High
FSH - Female	87.60	1.50	10.00	963		
Cholesterol - Total	6.60	4.14	4.65	426		
Vitamin B12	1309.00	332.01	590.24	328		
LDL Cholesterol	3.90	2.07	2.59	304		
HDL Cholesterol	2.28	1.42	1.81	171		
Eosinophils - %	5.45	0.00	3.00	132		
Potassium	4.90	4.00	4.50	130		
ALT	36.00	10.00	26.00	112		
Ferritin	88.00	30.00	70.00	95		
Non-HDL Cholesterol	4.30	0.00	3.37	78		
Monocytes - %	7.27	0.00	7.00	54		
Eosinophils - Absolute	0.30	0.00	0.30	50		
Triglycerides	0.90	0.79	0.90	47		
Cholesterol : HDL	2.89	0.00	3.00	46		
MCH	31.70	28.00	31.90	45		
T4 - Free	18.93	12.87	19.30	44		
Calcium	2.47	2.30	2.50	35		
BUN : Creatinine	0.06	0.04	0.06	31		
RBC - Female	4.38	3.90	4.50	30		
Calcium : Albumin	0.05	0.00	0.06	27		
Sodium	140.00	135.00	142.00	21		
Iron - Serum	19.40	15.22	23.27	2		
GGT	20.00	10.00	30.00	0		
Albumin	45.00	40.00	50.00	0		
BUN	4.50	3.57	5.71	-7		
Hematocrit - Female	0.40	0.37	0.44	-7		
Hemoglobin - Female	139.00	135.00	145.00	-10		
Monocytes - Absolute	0.40	0.28	0.58	-10		
Vitamin D (25-OH)	173.00	124.80	249.60	-11		
Platelets	242.00	155.00	385.00	-12		
Triglyceride:HDL	0.39	0.22	0.83	-22		
Thyroid Peroxidase (TPO) Abs LABCORP	9.00	0.00	34.00	-24		

Biomarker	Lab result	Optimal range		% deviation	Optimal range	
		Low	High		Low	High
TSH	1.70	1.30	3.00	-26		
Chloride	101.00	100.00	106.00	-33		
Creatinine	75.00	70.72	97.24	-34		
T4 - Total	85.80	77.22	153.15	-39		
Total WBCs	5.50	5.50	7.50	-50		
Basophils - %	0.00	0.00	1.00	-50		
Basophils - Absolute	0.00	0.00	0.10	-50		
Bilirubin - Total	5.00	5.13	15.39	-51		
T3 - Total	1.30	1.39	2.59	-57		
Neutrophils - Absolute	1.30	1.90	4.20	-76		
Sodium : Potassium	28.57	30.00	35.00	-79		
Homocysteine	4.00	5.00	7.20	-95		
Folate - Serum	19.00	33.99	56.65	-116		
T3 - Free	4.00	4.61	5.38	-129		
Neutrophils - %	23.64	40.00	60.00	-132		
Alk Phos	39.00	70.00	100.00	-153		
Magnesium - Serum	0.78	0.91	1.04	-155		

# Blood Test History

The Blood Test History Report lists the results of your Chemistry Screen and CBC tests side by side with the latest test listed on the right hand side. This report allows you to compare results over time and see where improvement has been made and allows you to track progress.

**Key**

- Optimal
- Above / Below optimal
- Above / Below standard
- Alarm high / Alarm low

Biomarker	Latest 1 Test Result Feb 28 2020
BUN <a href="#">↗</a>	4.50
Creatinine <a href="#">↗</a>	75.00
BUN : Creatinine <a href="#">↗</a>	0.06
Sodium <a href="#">↗</a>	140.00
Potassium <a href="#">↗</a>	4.90
Chloride <a href="#">↗</a>	101.00
Sodium : Potassium <a href="#">↗</a>	28.57
Albumin <a href="#">↗</a>	45.00
Calcium <a href="#">↗</a>	2.47
Calcium : Albumin <a href="#">↗</a>	0.05
Magnesium - Serum <a href="#">↗</a>	0.78
Alk Phos <a href="#">↗</a>	39.00
ALT <a href="#">↗</a>	36.00
GGT <a href="#">↗</a>	20.00
Bilirubin - Total <a href="#">↗</a>	5.00
Iron - Serum <a href="#">↗</a>	19.40
Ferritin <a href="#">↗</a>	88.00
Cholesterol - Total <a href="#">↗</a>	6.60
Triglycerides <a href="#">↗</a>	0.90

Biomarker	Latest 1 Test Result Feb 28 2020
LDL Cholesterol <a href="#">🔗</a>	3.90
HDL Cholesterol <a href="#">🔗</a>	2.28
Non-HDL Cholesterol <a href="#">🔗</a>	4.30
Cholesterol : HDL <a href="#">🔗</a>	2.89
Triglyceride:HDL <a href="#">🔗</a>	0.39
TSH <a href="#">🔗</a>	1.70
T4 - Total <a href="#">🔗</a>	85.80
T4 - Free <a href="#">🔗</a>	18.93
T3 - Total <a href="#">🔗</a>	1.30
T3 - Free <a href="#">🔗</a>	4.00
Thyroid Peroxidase (TPO) Abs LABCORP <a href="#">🔗</a>	9.00
Homocysteine <a href="#">🔗</a>	4.00
Vitamin D (25-OH) <a href="#">🔗</a>	173.00
Vitamin B12 <a href="#">🔗</a>	1309.00 <b>⚠️</b>
Folate - Serum <a href="#">🔗</a>	19.00
FSH - Female <a href="#">🔗</a>	87.60
RBC - Female <a href="#">🔗</a>	4.38
Hemoglobin - Female <a href="#">🔗</a>	139.00
Hematocrit - Female <a href="#">🔗</a>	0.40
MCH <a href="#">🔗</a>	31.70
Platelets <a href="#">🔗</a>	242.00
Total WBCs <a href="#">🔗</a>	5.50
Neutrophils - % <a href="#">🔗</a>	23.64
Monocytes - % <a href="#">🔗</a>	7.27
Eosinophils - % <a href="#">🔗</a>	5.45
Basophils - % <a href="#">🔗</a>	0.00
Neutrophils - Absolute <a href="#">🔗</a>	1.30

Biomarker	Latest 1 Test Result Feb 28 2020
Monocytes - Absolute <a href="#">🔗</a>	0.40
Eosinophils - Absolute <a href="#">🔗</a>	0.30
Basophils - Absolute <a href="#">🔗</a>	0.00

# Out of Optimal Range

The following report shows all of the biomarkers that are out of the optimal reference range and gives you some important information as to why each biomarker might be elevated or decreased.

Each biomarker in the Out of Optimal Range report hyperlinks back into the Blood Test Results report so you can see a more detailed view of the blood test result itself.

## Total number of biomarkers by optimal range



## Above Optimal

87.60  
mIU/ml

### **FSH - FEMALE**

FSH or Follicle-Stimulating Hormone is a hormone produced in and secreted by the anterior pituitary. FSH plays an important role in puberty, the menstrual cycle, and fertility. Elevated levels will be seen in menopause, ovarian dysfunction, and Polycystic Ovary Syndrome.

6.60  
mmol/L

### **CHOLESTEROL - TOTAL**

Cholesterol is a steroid found in every cell of the body and in the plasma. It is an essential component in the structure of the cell membrane where it controls membrane fluidity. It provides the structural backbone for every steroid hormone in the body, which includes adrenal and sex hormones and vitamin D. The myelin sheaths of nerve fibers are derived from cholesterol and the bile salts that emulsify fats are composed of cholesterol. Cholesterol is made in the body by the liver and other organs and from dietary sources. The liver, the intestines, and the skin produce between 60-80% of the body's cholesterol. The remainder comes from the diet. Increased cholesterol is just one of many independent risk factors for cardiovascular disease. It is also associated with metabolic syndrome, hypothyroidism, biliary stasis, and fatty liver.

1309.00  
pmol/L

### **VITAMIN B12**

Vitamin B12 is an essential nutrient for DNA synthesis and red blood cell maturation and is also necessary for myelin sheath formation and the maintenance of nerves in the body. Paradoxically, elevated serum B12 levels may be accompanied by signs of B12 deficiency and may indicate a functional deficiency marked by inadequate uptake at the tissue level.

3.90  
mmol/L

### **LDL CHOLESTEROL**

LDL functions to transport cholesterol and other fatty acids from the liver to the peripheral tissues for uptake and metabolism by the cells. It is known as "bad cholesterol" because it is thought that this process of bringing cholesterol from the liver to the peripheral tissue increases the risk for atherosclerosis. An increased LDL cholesterol is just one of many independent risk factors for cardiovascular disease. It is also associated with metabolic syndrome, oxidative stress, and fatty liver.

2.28  
mmol/L

### **HDL CHOLESTEROL** [↗](#)

HDL functions to transport cholesterol from the peripheral tissues and vessel walls to the liver for processing and metabolism into bile salts. It is known as “good cholesterol” because it is thought that this process of bringing cholesterol from the peripheral tissue to the liver is protective against atherosclerosis. Increased HDL is considered protective for the formation of fatty plaques in the artery.

5.45  
%

### **EOSINOPHILS - %** [↗](#)

Eosinophils are a type of White Blood Cell, which are often increased in people that are suffering from intestinal parasites or food or environmental sensitivities/allergies.

4.90  
mmol/L

### **POTASSIUM** [↗](#)

Potassium is one of the main electrolytes in the body. Due to the critical functions of potassium for human metabolism and physiology, it is essential for the body to maintain optimal serum levels even though a small concentration is found outside of the cell. Potassium levels should always be viewed in relation to the other electrolytes. Potassium concentration is greatly influenced by adrenal hormones. Increased levels are associated with adrenal insufficiency and may also be elevated in dehydration.

36.00  
IU/L

### **ALT** [↗](#)

ALT is an enzyme present in high concentrations in the liver and to a lesser extent skeletal muscle, the heart, and kidney. ALT will be liberated into the bloodstream following cell damage or destruction. Any condition or situation that causes damage to the hepatocytes will cause leakage of ALT into the bloodstream. These include exposure to chemicals, viruses (viral hepatitis, mononucleosis, cytomegalovirus, Epstein Barr, etc.), alcoholic hepatitis. The most common non-infectious cause of an increased ALT is a condition called steatosis (fatty liver).

88.00  
µg/L

### **FERRITIN** [↗](#)

Ferritin is the main storage form of iron in the body. Increased levels are associated with iron overload, an increasing risk of cardiovascular disease, inflammation and oxidative stress.

4.30  
mmol/L

### **NON-HDL CHOLESTEROL** [↗](#)

Non-HDL cholesterol represents the circulating cholesterol that is not carried by HDL (the protective carrier that collects cholesterol from tissues and blood vessels and transports it back to the liver). An elevated Non-HDL Cholesterol is associated with an increase risk of cardiovascular disease and related events.



## **MONOCYTES - %**

Monocytes are white blood cells that are the body's second line of defense against infection. They are phagocytic cells that are capable of movement and remove dead cells, microorganisms, and particulate matter from circulating blood. Levels tend to rise at the recovery phase of an infection or with chronic infection.

## Below Optimal

0.78  
mmol/L

### MAGNESIUM - SERUM [↗](#)

Magnesium is important for many different enzymatic reactions, including carbohydrate metabolism, protein synthesis, nucleic acid synthesis, and muscular contraction. Magnesium is also needed for energy production and is used by the body in the blood clotting mechanism. A decreased magnesium is a common finding with muscle cramps.

39.00  
IU/L

### ALK PHOS [↗](#)

Alkaline phosphatase (ALP) is a group of isoenzymes that originate in the bone, liver, intestines, skin, and placenta. It has a maximal activity at a pH of 9.0-10.0, hence the term alkaline phosphatase. Decreased levels of ALP have been associated with zinc deficiency.

23.64  
%

### NEUTROPHILS - % [↗](#)

Neutrophils are the white blood cells used by the body to combat bacterial infections and are the most numerous and important white cell in the body's reaction to inflammation. Neutrophils - % tells us the % distribution of neutrophils in the total white blood cell count. Decreased levels are often seen in chronic viral infections.

4.00  
pmol/L

### T3 - FREE [↗](#)

T-3 is the most active thyroid hormone and is primarily produced from the conversion of thyroxine (T-4) in the peripheral tissue. Free T3 is the unbound form of T3 measured in the blood. Free T3 represents approximately 8 - 10% of circulating T3 in the blood. Free T-3 levels may be decreased with hypothyroidism and is associated with selenium deficiency.

19.00  
nmol/L

### FOLATE - SERUM [↗](#)

Folate functions as a coenzyme in the process of methylation. Along with vitamin B12, folate is essential for DNA synthesis. Low folate intake can result in folate deficiency, which can impair methylation, DNA synthesis and red blood cell production.

4.00  
μmol/L

### HOMOCYSTEINE [↗](#)

Homocysteine is a molecule formed from the incomplete metabolism of the amino acid methionine. Decreased levels of homocysteine are associated with a decrease in the body's detoxification capacity and an increased risk of oxidative stress.

28.57  
ratio

### **SODIUM : POTASSIUM**

The Sodium:Potassium ratio is determined from the serum sodium and serum potassium levels. Both of these elements are under the influence of the adrenal glands. A decreased Sodium:Potassium ratio is associated with chronic stress and adrenal insufficiency.

1.30  
giga/L

### **NEUTROPHILS - ABSOLUTE**

Neutrophils are the white blood cells used by the body to combat bacterial infections and are the most numerous and important white cell in the body's reaction to inflammation. *Neutrophils - Absolute* is an actual count of the number of neutrophils in a known volume of blood. Decreased levels are often seen in chronic viral infections.

1.30  
nmol/L

### **T3 - TOTAL**

T-3 is the most active thyroid hormone and is primarily produced from the conversion of thyroxine (T-4) in the peripheral tissue. T-3 is 4 -5 times more metabolically active than T-4. Total T3 reflects the total amount of T3 present in the blood i.e. amount bound to protein and free levels. Decreased total T-3 are associated with Hypothyroidism and/or a selenium deficiency.

5.00  
 $\mu$ mol/L

### **BILIRUBIN - TOTAL**

The total bilirubin is composed of two forms of bilirubin: Indirect or unconjugated bilirubin, which circulates in the blood on its way to the liver and direct or conjugated bilirubin, which is the form of bilirubin made water-soluble before it is excreted in the bile. A decreased bilirubin has been associated with a trend towards oxidative stress.



The Health Improvement Plan takes all the information on this report and focuses on the top areas that need the most attention.

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## Health Improvement Plan

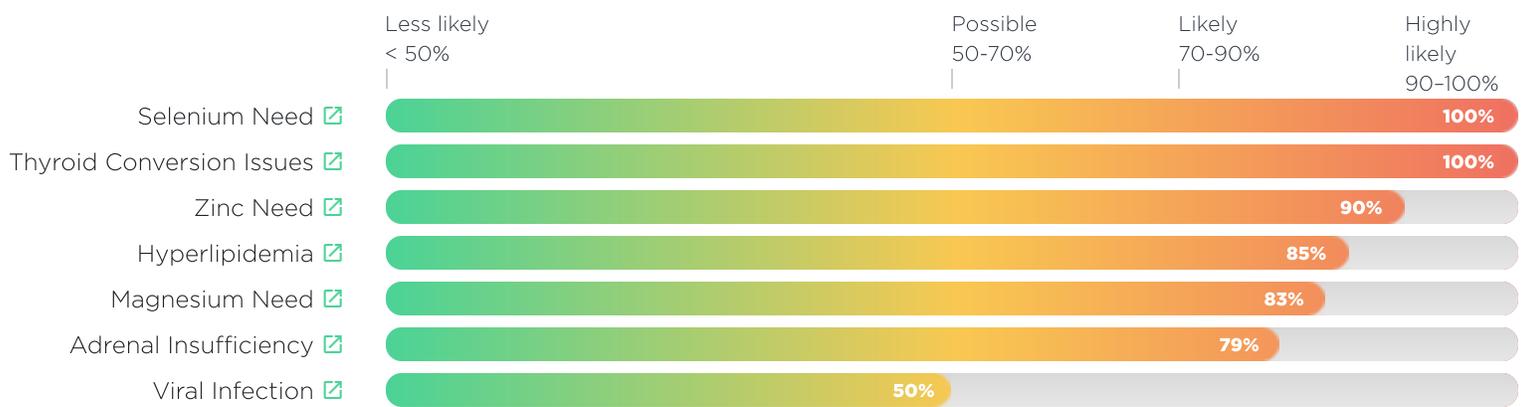
- 38 Health Improvement
- 42 Product Summary

# Health Improvement

The Health Improvement Plan takes all the information on this report and focuses on the top areas that need the most attention.

Each area of Health Improvement is included in the section that follows so you can read a detailed description and individual explanation of the results shown in this report.

## NEEDS ATTENTION

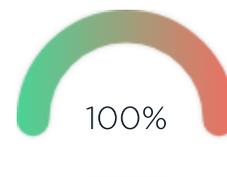


## Health Improvement Details

This section contains detailed descriptions and explanations of the results presented in the Health Improvement Plan report including all the biomarkers considered in the algorithmic analysis and the rationale behind the interpretation.

### SELENIUM NEED [↗](#)

The results of your blood test indicate that your selenium levels might be lower than optimal and shows a need for selenium supplementation.



#### Rationale

T3 - Total [↓](#), T3 - Free [↓](#)



#### Product Name

DFH Complete Multi™

#### Dosage and Directions

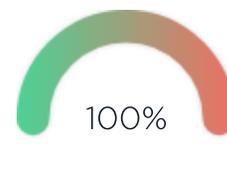
Take 6 capsules per day, 2 with each meal.

#### Details

DFH Complete Multi™ is a full-spectrum multivitamin with Albion chelated minerals for maximum absorption and bioavailability. This powerhouse multivitamin supplies supportive nutrients not normally found in regular multis, such as alpha lipoic acid, TMG, fruit bioflavonoids, choline, and inositol. This formula also contains high gamma tocopherol vitamin E, high levels of all the B vitamins, including our proprietary NatureFolate™ blend of active isomer naturally-occurring folates, and natural mixed carotenoids.

### THYROID CONVERSION ISSUES [↗](#)

The results of your blood test indicate a tendency towards a difficulty converting thyroxine (T4) into triiodothyronine (T3), which can cause symptoms of hypothyroidism, and a need for thyroid gland support.



#### Rationale

T3 - Total [↓](#), T3 - Free [↓](#)



#### Product Name

Thyroid Synergy™

#### Dosage and Directions

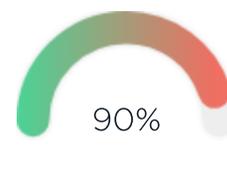
Take 2 capsules per day with meals.

#### Details

Thyroid Synergy™ was designed to be a top-quality, all-in-one formula for the nutritional support of thyroid function. The non-stimulating adaptogenic botanical American ginseng (*Panax quinquefolius*) helps maintain healthy cortisol, blood glucose and insulin levels, along with a balanced conversion of peripheral thyroid hormone. Essential vitamins, minerals, and other nutrients work synergistically to provide a premium thyroid product in just two capsules a day.

### ZINC NEED [↗](#)

The results of your blood test indicate that your zinc levels might be lower than optimal and shows a need for zinc supplementation.



#### Rationale

Alk Phos [↓](#)

**Product Name**

Zinc Supreme™

**Dosage and Directions**

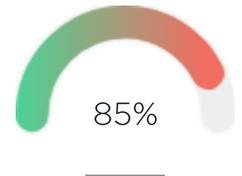
Take 1 capsule daily with a meal.

**Details**

Zinc Supreme™ offers chelated minerals by Albion Advanced Nutrition, the leader in mineral technology. The zinc is zinc bis-glycinate chelate and the molybdenum is bis-glycinate chelate. These are ideal chelates with a 2:1 molar ratio of two amino acids of glycine chemically bonded in liquid to one mineral ion of zinc or molybdenum for optimal absorption. These minerals are combined with other nutrients like vitamins B6 and taurine to provide superior results.

**HYPERLIPIDEMIA**

The results of your blood test indicate that you have higher than optimal levels of cholesterol and fat in your blood (a condition called hyperlipidemia), which is associated with an increased risk of cardiovascular disease. There is a need for cardiovascular support, especially support to help lower excessive blood fats.

**Rationale**

Cholesterol - Total , LDL Cholesterol

**Product Name**

Foresterol™

**Dosage and Directions**

Take 3 tablets per day, 1 with each meal.

**Details**

Foresterol™ contains Reducol™, a phytosterol mixture from the non-GMO tall oil of the coniferous pine tree. Reducol™ has such significant LDL cholesterol-lowering properties that the FDA allows cholesterol-lowering claims for the plant sterols it contains.\* Foresterol™ mainly consists of four major phytosterols: beta-sitosterol, campesterol (in the free sterol form, not as sterol esters), campestanol, and sitostanol.

**Product Name**

Lipotrienols RYR™

**Dosage and Directions**

Take 2 capsules per day in the evening with food, or as directed by your health care practitioner. For best results, do not take within six hours of taking a vitamin E supplement containing d-alpha tocopherol.

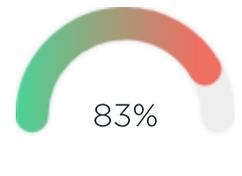
**Details**

Lipotrienols RYR™ is a powerful combination of natural substances designed to provide nutritional support for cardiac and vascular health. This formula includes high delta-fraction tocotrienols, organic red yeast rice extract (*Monascus purpurea*), and lycopene with added lecithin for bioavailability.\*

WARNING: Do not use if you are pregnant, may become pregnant, or are breast feeding, as using this product may cause birth defects.

**MAGNESIUM NEED**

The results of your blood test indicate that your magnesium levels might be lower than optimal and shows a need for magnesium supplementation.

**Rationale**

Magnesium - Serum

**Product Name**

Magnesium Malate Chelate

**Dosage and Directions**

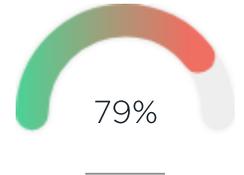
Take 2 tablets per day with meals.

**Details**

Magnesium Malate Chelate contains two superior forms of magnesium, one fully chelated to glycine and the other bound to malic acid, which gives this formula excellent absorption and health-promoting properties. The unique properties of this magnesium formula allow for greater absorption and tolerability than non-bound magnesium salts available on the market.

**ADRENAL INSUFFICIENCY**

The results of your blood test indicate a tendency towards adrenal insufficiency and a need for adrenal gland support. The adrenal glands produce certain hormones in response to stress. They are responsible for what is commonly called “the fight or flight response”. Unfortunately, when your body is under constant stress, which is very common, your adrenal glands become less functional and we recommend adrenal gland support.

**Rationale**

Sodium : Potassium ↓, Potassium ↑, Cholesterol - Total ↑

**Product Name**

Adrenal Complex

**Dosage and Directions**

Take 2 capsules with meals

**Details**

Adrenal Complex is a glandular-based product designed to support overall adrenal function. It is fortified with N-acetyl tyrosine, vitamin C and a comprehensive spectrum of B vitamins. Adrenal Complex is ideal for those under chronic stress due to its ability to balance cortisol and replenish catecholamines (dopamine, norepinephrine, and epinephrine).

**VIRAL INFECTION**

The results of your blood test indicate a tendency towards a viral infection and a need for immune support.

**Rationale**

Monocytes - % ↑, Neutrophils - % ↓

**Product Name**

Immunitone Plus™

**Dosage and Directions**

Take 3 capsules per day with meals.

**Details**

Immunitone Plus™ is an herbal formula that is designed to support healthy immune system function during cold and flu season. It contains herbs that support normal natural killer (NK) cell activity and the balance of cytokines, which are the regulatory proteins released by immune cells as part of a normal immune system response.\*

**Product Name**

Silvercillin

**Dosage and Directions**

Take 5 ml (approx. one teaspoon) orally per day.

**Details**

Silvercillin™ is a highly effective antimicrobial preparation composed of pure silver complexed with purified water. Silvercillin™ is an incredibly highly powerful, non-toxic form of silver.



# Product Summary

The Product summary report takes all the information on this report and provides a summary of the nutritional supplements recommended to help bring the systems of the body back into balance. This plan focuses on the top areas of need as presented in this report.

The Product summary report has been prepared for your patient based upon current algorithms. Additional personalized recommendations for nutritional support may be applicable based on this laboratory evaluation, your patient's history and your clinical practice experience.

PROTOCOLS	PRIMARY PRODUCTS		DOSAGE
Selenium Need	DFH Complete Multi™		Take 6 capsules per day, 2 with each meal.
Thyroid Conversion Issues	Thyroid Synergy™		Take 2 capsules per day with meals.
Zinc Need	Zinc Supreme™		Take 1 capsule daily with a meal.
Hyperlipidemia	Foresterol™		Take 3 tablets per day, 1 with each meal.
Magnesium Need	Magnesium Malate Chelate		Take 2 tablets per day with meals.
Adrenal Insufficiency	Adrenal Complex		Take 2 capsules with meals
Viral Infection	Immunitone Plus™		Take 3 capsules per day with meals.
	Silvercillin		Take 5 ml (approx. one teaspoon) orally per day.

## Other potential product recommendations

PROTOCOLS	SECONDARY PRODUCTS	DOSAGE	
Hyperlipidemia	Lipotrienols RYP™		Take 2 capsules per day in the evening with food, or as directed by your health care practitioner. For best results, do not take within six hours of taking a vitamin E supplement containing d-alpha tocopherol.

# 5

Highly detailed and interpretive descriptions of the results presented in each of the assessment and analysis section reports.

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## Appendix

45 Disclaimer



# Disclaimer

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The 'optimal ranges' set forth in this Report are general reference recommendations only, and are not intended to be guidelines for any specific individual. The 'optimal ranges' set forth in this Report are for educational purposes only, and are not intended to be, nor should they be construed as, a claim or representation of medical diagnosis or treatment.

Neither this Report, nor any information contained in this Report, should be considered complete, or exhaustive. This report does not contain information on all diseases, ailments, physical conditions or their treatment. This report is based on the lab data provided, which may or may not include all relevant and appropriate measures of your biochemistry.

The absence of a warning for a given drug or supplement or any combination thereof in no way should be construed to indicate that the drug or supplement or any combination thereof is safe, effective, or appropriate for you. Statements made about a supplement, product or treatment have not been evaluated by the Food and Drug Administration (FDA) and any mentioned supplement, product or treatment is not intended to diagnose, treat, cure or prevent any disease. The information contained in this Report has not been evaluated by the FDA.

You are encouraged to confirm any information obtained from this Report with other sources, and review all information regarding any medical condition or the treatment of such condition with your physician.

**NEVER DISREGARD PROFESSIONAL MEDICAL ADVICE, DELAY SEEKING MEDICAL ADVICE OR TREATMENT, OR STOP CURRENT MEDICAL TREATMENT, BECAUSE OF SOMETHING YOU HAVE READ IN THIS REPORT.**

Consult your physician or a qualified healthcare practitioner regarding the applicability of any of the information or materials provided in this Report in regards to your symptoms or medical condition. Always consult your physician before beginning a new treatment, diet, exercise, fitness plan, or health plan or program, and before taking any drug, supplement, or any combination thereof; or if you have questions or concerns about your health, a medical condition, or any plan or course of treatment. If you think you have a medical emergency, call 911 or your doctor immediately.