ways2well

Blood Chemistry Analysis

Functional Health Report



Practitioner Report

Prepared for Tyler Anderton

28 year old male born May 26,

1995 Fasting

Requested by Joseph Hurt, FNPC

Ways 2 Well

Collected Dec (

Date

Dec 07, 2023

Lab Quest

Powered by







What's Inside?

SECTION 1: INTRODUCTION

An introduction to Functional Blood Chemistry Analysis and this report.

What's Inside?

SECTION 2: ANALYSIS

A full breakdown of all individual biomarker results.

- 3 Blood Test Results
- 9 Blood Test Comparative
- 12 Blood Test History
- 16 Out of Optimal Range

SECTION 3: ASSESSMENT

An in-depth functional system and nutrient evaluation.

23 Nutrient Deficiencies

SECTION 4: APPENDIX

Additional information pertinent to this report.

26 Disclaimer







A full breakdown of all the individual biomarker results, showing you if a particular biomarker is outside of the optimal range or outside of the reference range plus a comparative and historical view.

Analytics

- **Blood Test Results**
- 9 **Blood Test Comparative**
- 12 Blood Test History
- 16 Out of Optimal Range

ANALYTICS 命 ④ ①	Blood Test Results	Blood Test Comparative	Blood Test History	Out of Optimal Range
	Blood Glucose	Renal	Prostate	Electrolytes

Minerals

Hormones

Blood Test Results

The Blood Test Results Report lists the results of your patient's Chemistry Screen and CBC and shows you whether or not an individual biomarker is optimal, outside of the optimal range, or outside of the standard range. The biomarkers are grouped into their most common categories.

Liver and GB

CBC

Lipids

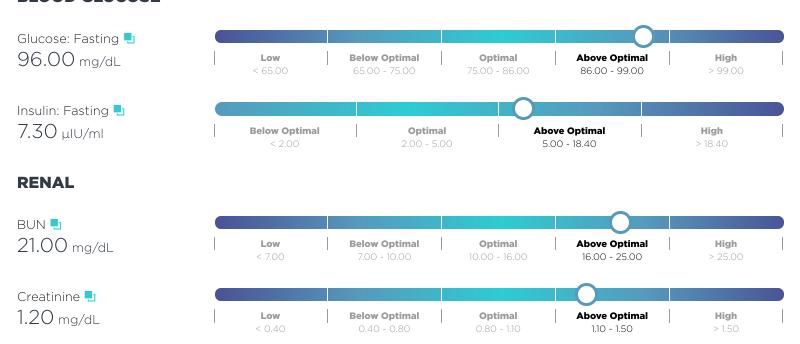
WBCs

Thyroid

Some biomarkers in the Blood Test Results Report that are above or below the Optimal or marked Low or High may be hyperlinked into the "Out of Optimal Range Report", so you can read some background information on those biomarkers and why they may be high or low.

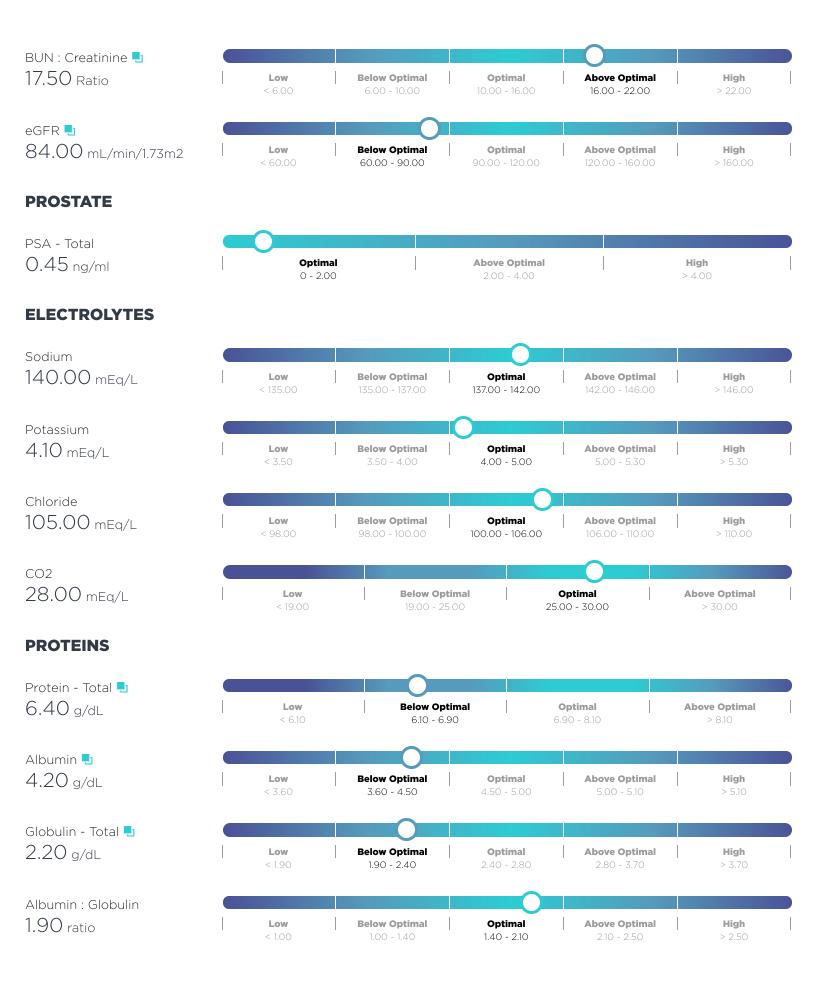


BLOOD GLUCOSE

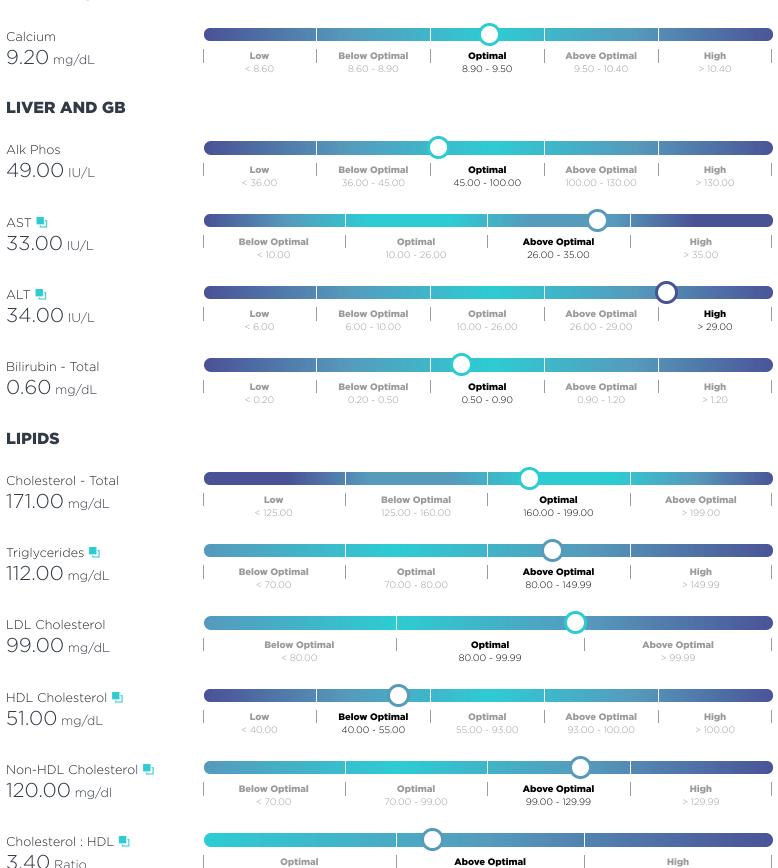


Proteins

Vitamins

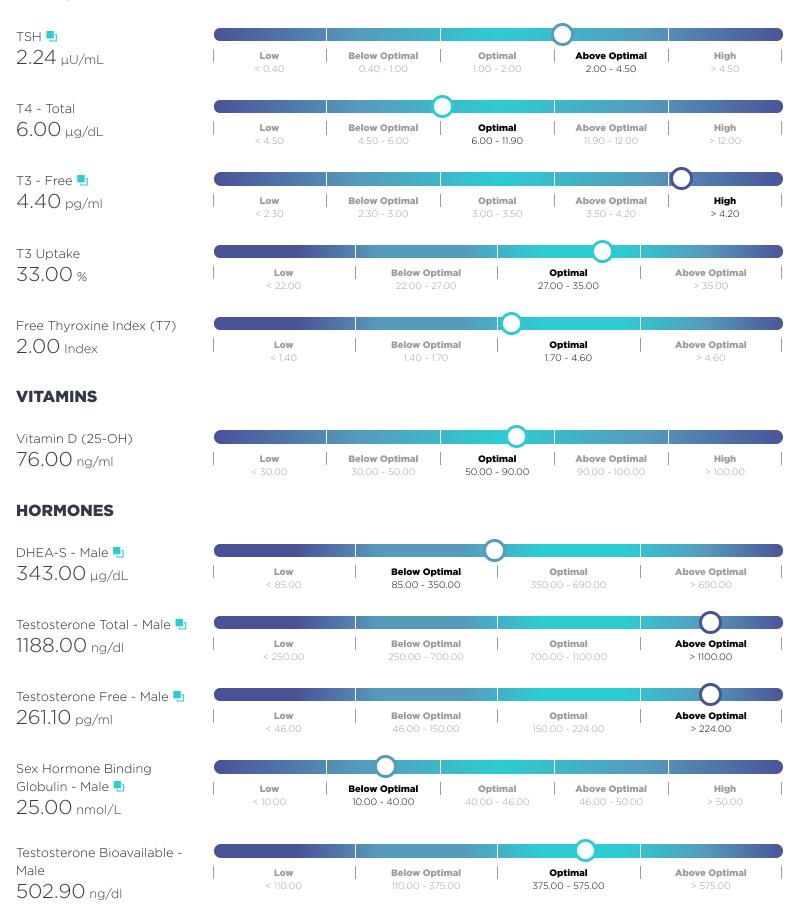


MINERALS

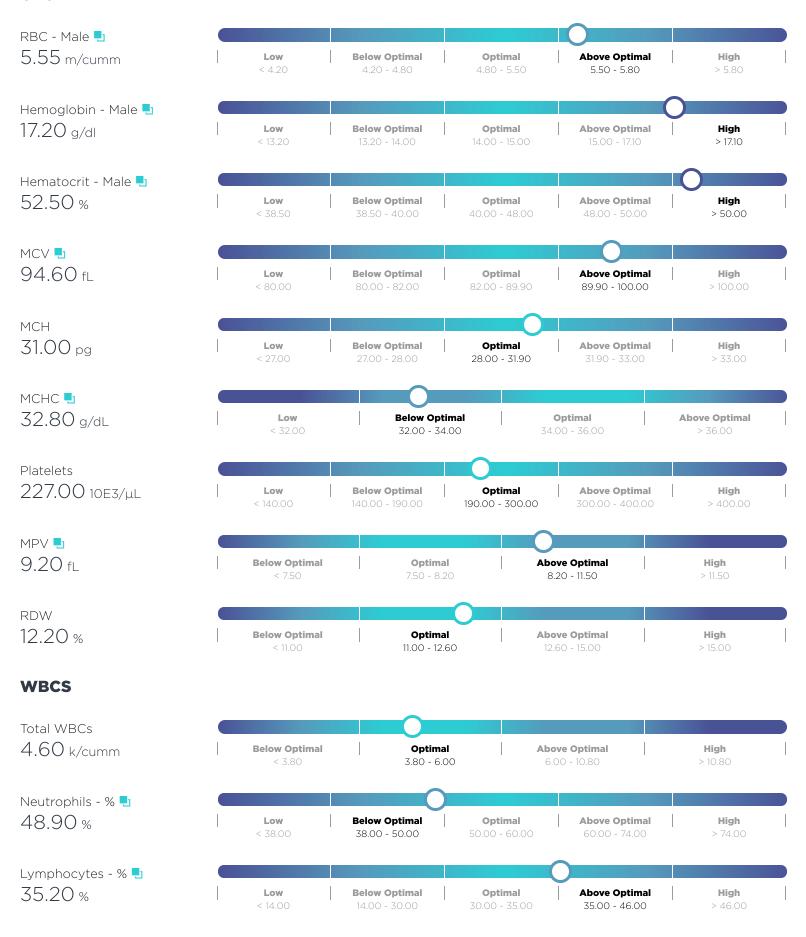


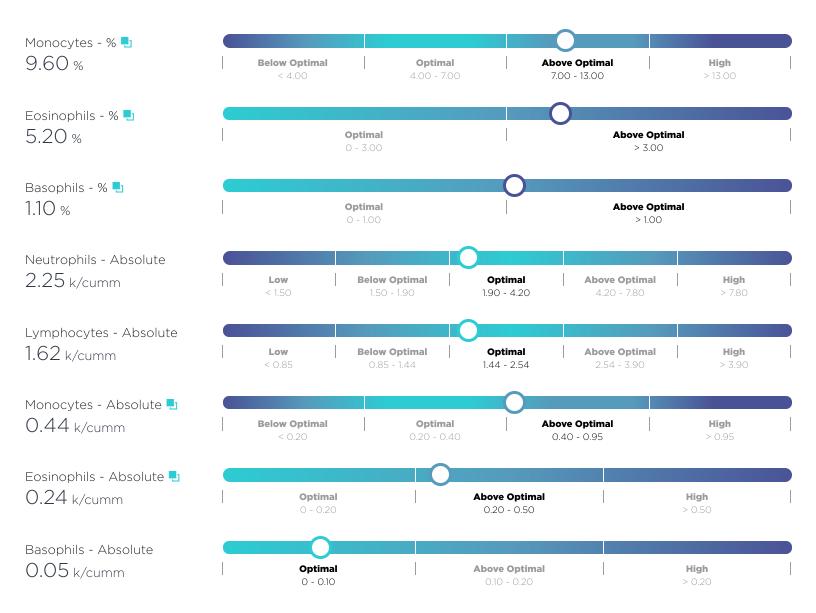
3.00 - 5.00

THYROID



CBC





⋒ ① ○

Blood Test Results **Blood Test Comparative**

Blood Test History Out of Optimal Range

Blood Test Results Comparative

The Blood Test Results Comparative Report lists the results of your patient's latest and previous Chemistry Screen and CBC and shows you whether or not an individual biomarker is optimal, outside of the optimal range, or outside of the standard range.

A comparison of the total number of biomarkers by optimal range

Current	0	0	9	23	17	8	0
Previous	0	0	12	29	14	2	0
	Alarm Low	Low	Below Optimal	Optimal	Above Optimal	High	Alarm High

Biomarker		Quest	Quest			
		Previous Sep 15 2023	Current Dec 07 2023	Optimal range	Standard range	Units
BLOOD GLUCOSE						
Glucose: Fasting 🤨	0	98.00 个	96.00 ↑	75.00 - 86.00	65.00 - 99.00	mg/dL
Insulin: Fasting 🖣	Q	3.20	7.30 ↑	2.00 - 5.00	0 - 18.40	μIU/ml
RENAL						
BUN •		25.00 个	21.00 个	10.00 - 16.00	7.00 - 25.00	mg/dL
Creatinine 🗓	0	1.28 ↑	1.20 ↑	0.80 - 1.10	0.40 - 1.50	mg/dL
BUN : Creatinine 🛂	0	20.00 ↑	17.50 ↑	10.00 - 16.00	6.00 - 22.00	Ratio
eGFR •	(78.00 ↓	84.00 ↓	90.00 - 120.00	60.00 - 160.00	mL/min/1.73m2
PROSTATE						
PSA - Total 🛂		0.54	0.45	0 - 2.00	0 - 4.00	ng/ml
ELECTROLYTES						
Sodium •		139.00	140.00	137.00 - 142.00	135.00 - 146.00	mEq/L
Potassium 🖣		4.90	4.10	4.00 - 5.00	3.50 - 5.30	mEq/L

Biomarker		Quest	Quest			
		Previous Sep 15 2023	Current Dec 07 2023	Optimal range	Standard range	Units
Chloride 🛂		105.00	105.00	100.00 - 106.00	98.00 - 110.00	mEq/L
CO2 •		29.00	28.00	25.00 - 30.00	19.00 - 30.00	mEq/L
PROTEINS						
Protein - Total 🤨		6.20 ↓	6.40 ↓	6.90 - 8.10	6.10 - 8.10	g/dL
Albumin 🛂	0	3.90 ↓	4.20 ↓	4.50 - 5.00	3.60 - 5.10	g/dL
Globulin - Total 🛂	0	2.30 ↓	2.20 ↓	2.40 - 2.80	1.90 - 3.70	g/dL
Albumin : Globulin 🗓		1.70	1.90	1.40 - 2.10	1.00 - 2.50	ratio
MINERALS						
Calcium 🖣		9.00	9.20	8.90 - 9.50	8.60 - 10.40	mg/dL
LIVER AND GB						
Alk Phos 🗓	0	38.00 ↓	49.00	45.00 - 100.00	36.00 - 130.00	IU/L
AST 🖣	0	30.00 ↑	33.00 ↑	10.00 - 26.00	10.00 - 35.00	IU/L
ALT 🛂	0	27.00 个	34.00 ↑ ↑	10.00 - 26.00	6.00 - 29.00	IU/L
Bilirubin - Total 🖣		0.50	0.60	0.50 - 0.90	0.20 - 1.20	mg/dL
LIPIDS						
Cholesterol - Total 🖣	0	132.00 ↓	171.00	160.00 - 199.00	125.00 - 199.00	mg/dL
Triglycerides •	O	68.00 ↓	112.00 个	70.00 - 80.00	0 - 149.99	mg/dL
LDL Cholesterol 🛂		70.00 ↓	99.00	80.00 - 99.99	0 - 99.99	mg/dL
HDL Cholesterol 🖣	0	48.00 ↓	51.00 ↓	55.00 - 93.00	40.00 - 100.00	mg/dL
Non-HDL Cholesterol 🖣	0	84.00	120.00 ↑	70.00 - 99.00	0 - 129.99	mg/dl
Cholesterol : HDL 🛂	0	2.80	3.40 ↑	0 - 3.00	0 - 5.00	Ratio
THYROID						
TSH •	0	1.98	2.24 ↑	1.00 - 2.00	0.40 - 4.50	μU/mL
T4 - Total 🖣	_	6.40	6.00	6.00 - 11.90	4.50 - 12.00	μg/dL
T3 - Free 🗓	0	4.10 ↑	4.40 ↑ ↑	3.00 - 3.50	2.30 - 4.20	pg/ml
T3 Uptake 🖣		33.00	33.00	27.00 - 35.00	22.00 - 35.00	%
Free Thyroxine Index (T7) 🗓		2.10	2.00	1.70 - 4.60	1.40 - 3.80	Index
VITAMINS						
Vitamin D (25-OH) 🗓		89.00	76.00	50.00 - 90.00	30.00 - 100.00	ng/ml
HORMONES						
DHEA-S - Male 🗓	Q	346.00 ↓	343.00 ↓	350.00 - 690.00	85.00 - 690.00	μg/dL

Biomarker		Quest	Quest			
		Previous Sep 15 2023	Current Dec 07 2023	Optimal range	Standard range	Units
Testosterone Total - Male 🖣	0	1259.00 个 个	1188.00 ↑ ↑	700.00 - 1100.00	250.00 - 1100.00	ng/dl
Testosterone Free - Male 🖣	0	160.80	261.10 ↑ ↑	150.00 - 224.00	46.00 - 224.00	pg/ml
Sex Hormone Binding Globulin - Male 🗓	0	47.00 ↑	25.00 ↓	40.00 - 46.00	10.00 - 50.00	nmol/L
Testosterone Bioavailable - Male	0	288.70 ↓	502.90	375.00 - 575.00	110.00 - 575.00	ng/dl
СВС						
RBC - Male 🖢	O	5.28	5.55 个	4.80 - 5.50	4.20 - 5.80	m/cumm
Hemoglobin - Male 🛂	0	16.30 个	17.20 个个	14.00 - 15.00	13.20 - 17.10	g/dl
Hematocrit - Male 🛂	0	48.70 ↑	52.50 个个	40.00 - 48.00	38.50 - 50.00	%
MCV ■	0	92.20 ↑	94.60 ↑	82.00 - 89.90	80.00 - 100.00	fL
MCH •		30.90	31.00	28.00 - 31.90	27.00 - 33.00	pg
MCHC •	O	33.50 ↓	32.80 ↓	34.00 - 36.00	32.00 - 36.00	g/dL
Platelets •		213.00	227.00	190.00 - 300.00	140.00 - 400.00	10E3/μL
MPV •		9.50 ↑	9.20 ↑	7.50 - 8.20	7.50 - 11.50	fL
RDW •		12.10	12.20	11.00 - 12.60	11.00 - 15.00	%
WBCS						
Total WBCs 🗓		4.80	4.60	3.80 - 6.00	3.80 - 10.80	k/cumm
Neutrophils - % 🛂	0	52.70	48.90 ↓	50.00 - 60.00	38.00 - 74.00	%
Lymphocytes - % 🛂	0	35.40 ↑	35.20 个	30.00 - 35.00	14.00 - 46.00	%
Monocytes - % 🛂	0	8.30 个	9.60 个	4.00 - 7.00	4.00 - 13.00	%
Eosinophils - % 🖣	0	2.30	5.20 个个	0 - 3.00		%
Basophils - % 🗓	0	1.30 个个	1.10 个个	0 - 1.00		%
Neutrophils - Absolute 🖣		2.53	2.25	1.90 - 4.20	1.50 - 7.80	k/cumm
Lymphocytes - Absolute 🖣		1.70	1.62	1.44 - 2.54	0.85 - 3.90	k/cumm
Monocytes - Absolute 🗓	0	0.40	0.44 ↑	0.20 - 0.40	0.20 - 0.95	k/cumm
Eosinophils - Absolute 🗓	O	0.11	0.24 ↑	0 - 0.20	0 - 0.50	k/cumm
Basophils - Absolute 🖣		0.06	0.05	0 - 0.10	0 - 0.20	k/cumm

Blood Test Results Blood Test Comparative Blood Test History Out of Optimal Range

Blood Test History

The Blood Test History Report lists the results of your patient's 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 3 Test I	Results	
	Quest	Quest	Quest
	Jun 03 2023	Sep 15 2023	Dec 07 2023
BLOOD GLUCOSE			
Glucose: Fasting •	81.00	98.00 个	96.00 ↑
Hemoglobin A1C	4.70		
eAG	88.19		
Insulin: Fasting •	3.20	3.20	7.30 个
Triglyceride-Glucose Index (TyG)	4.20	4.40	
RENAL			
BUN •	22.00 个	25.00 ↑	21.00 个
Creatinine •	1.24 个	1.28 个	1.20 个
BUN : Creatinine •	17.74 个	20.00 ↑	17.50 个
eGFR • 1	81.00 ↓	78.00 ↓	84.00 ↓
PROSTATE			
PSA - Total 🗓	 0.41	0.54	0.45
ELECTROLYTES			
Sodium •	 139.00	139.00	140.00
Potassium •	4.20	4.90	4.10
Chloride 🛂	103.00	105.00	105.00
CO2 •1	29.00	29.00	28.00

Biomarker		Latest 3 Test Results			
		Quest	Quest	Quest	
		Jun 03 2023	Sep 15 2023	Dec 07 202	
Protein - Total 🖣		6.60 ↓	6.20 ↓	6.40 ↓	
Albumin 🖣		4.20 ↓	3.90 ↓	4.20 ↓	
Globulin - Total 🛂		2.40	2.30 ↓	2.20 ↓	
Albumin : Globulin 🛂		1.80	1.70	1.90	
MINERALS					
Calcium 🗓		9.30	9.00	9.20	
Magnesium - Serum		2.20			
Calcium : Albumin		2.21 个	2.31 个		
LIVER AND GB					
Alk Phos •		46.00	38.00 ↓	49.00	
AST •		39.00 ↑ ↑	30.00 ↑	33.00 ↑	
ALT •	•	35.00 ↑ ↑	27.00 个	34.00 ↑ ↑	
Bilirubin - Total 🖣		0.50	0.50	0.60	
IRON MARKERS					
Ferritin		117.00 个			
LIPIDS					
Cholesterol - Total 🖣		117.00 ↓ ↓	132.00 ↓	171.00	
Triglycerides 🗓		55.00 ↓	68.00 ↓	112.00 ↑	
LDL Cholesterol •		56.00 ↓	70.00 ↓	99.00	
HDL Cholesterol •		47.00 ↓	48.00 ↓	51.00 ↓	
Non-HDL Cholesterol 🖣		70.00	84.00	120.00 ↑	
LDL : HDL - Male		1.19	1.46		
Triglyceride:HDL		1.17	1.42		
Cholesterol : HDL 🛂		2.50	2.80	3.40 ↑	
THYROID					
TSH •		1.02	1.98	2.24 ↑	

Biomarker		Latest 3 Test F	Results	
		Quest	Quest	Quest
		Jun 03 2023		Dec 07 2023
T4 - Total •		7.20	6.40	6.00
T3 - Free 🗓		3.70 个	4.10 ↑	4.40 个个
T3 Uptake 🗓	•	34.00	33.00	33.00
Free Thyroxine Index (T7)		2.40	2.10	2.00
VITAMINS				
Vitamin D (25-OH) 🗓		115.00 个个	89.00	76.00
Vitamin B12		1362.00 个个		
Folate - Serum		21.10		
HORMONES				
DHEA-S - Male 🗓		239.00 ↓	346.00 ↓	343.00 ↓
Testosterone Total - Male 🛂		617.00 ↓	1259.00 个 个	1188.00 个 个
Testosterone Free - Male 🗓		71.20 ↓	160.80	261.10 个个
Sex Hormone Binding Globulin - Male 🖣		42.00	47.00 ↑	25.00 ↓
Estradiol - Male		20.00 ↓		
Cortisol - Total/AM		9.00 ↓		
Cortisol : DHEA-S		0.04		
% Testosterone Bioavailable - Male		22.23 ↓ ↓	22.93 ↓ ↓	
Testosterone Bioavailable - Male 🖣		137.20 ↓	288.70 ↓	502.90
СВС				
RBC - Male 🗓		5.48	5.28	5.55 个
Hemoglobin - Male 🗓	-	17.20 个个	16.30 ↑	17.20 个个
Hematocrit - Male 🗓		51.10 个个	48.70 ↑	52.50 个个
MCV •		93.20 个	92.20 个	94.60 ↑
MCH •		31.40	30.90	31.00
MCHC •		33.70 ↓	33.50 ↓	32.80 ↓
Platelets •		245.00	213.00	227.00

D'	1 -1 - 1 7 7 - 1	D lb .	
Biomarker	Latest 3 Test		
	Quest	Quest	Quest
	Jun 03 2023	Sep 15 2023	Dec 07 2023
MPV •	9.60 ↑	9.50 ↑	9.20 个
RDW •	11.80	12.10	12.20
WBCS			
Total WBCs 🗓	4.00	4.80	4.60
Neutrophils - % 🖣	 48.40 ↓	52.70	48.90 ↓
Lymphocytes - % 🗓	36.10 个	35.40 ↑	35.20 ↑
Monocytes - % 🗓	9.50 个	8.30 个	9.60 ↑
Eosinophils - % 🗓	4.00 ↑ ↑	2.30	5.20 个个
Basophils - % 🖣	2.00 ↑↑	1.30 个个	1.10 个个
Neutrophils - Absolute 🖣	1.94	2.53	2.25
Lymphocytes - Absolute 🖣	1.44	1.70	1.62
Monocytes - Absolute 🖣	0.38	0.40	0.44 ↑
Eosinophils - Absolute 🖣	0.16	0.11	0.24 ↑
Basophils - Absolute 🗓	0.08	0.06	0.05
Neutrophil : Lymphocyte	1.35	1.49	

ANALYTICS

⋒ ●

Blood Test Results Blood Test Comparative Blood Test History Out of Optimal Range

Out of Optimal Range

The following report shows all of the biomarkers that are out of the optimal 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 a see a more detailed view of the blood test result itself.

Total number of biomarkers by range

















Alarm Low

LOW

Below Optimal

Optimal

Above Optimal

High

Alarm High

Total

Above Optimal

Basophils - % 🗐

1.10 %

Basophils are a type of White Blood Cell, which will often be increased with tissue inflammation and is often seen with cases of intestinal parasites. Testosterone Total - Male 📑

1188.00 ng/dl

Testosterone is the primary sex hormone for men. The total testosterone test measures both the testosterone that is bound to serum proteins and the unbound form (free testosterone). Elevated total testosterone levels may be seen in patients that are over supplementing with supplemental testosterone or can be a sign of testosterone overproduction in the body.

ALT 📑

34.00 IU/L

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).

Testosterone Free - Male 📑

261.10 pg/ml

Testosterone is the primary sex hormone for men. The free testosterone test measures the testosterone that is unbound to serum proteins such as Sex Hormone Binding Globulin (SHBG) and albumin. Elevated free testosterone levels may be seen in patients that are over supplementing with supplemental testosterone or can be a sign of testosterone over-production in the body.

Hematocrit - Male 📑

52.50 %

The hematocrit (HCT) measures the percentage of the volume of red blood cells in a known volume of centrifuged blood. It is an integral part of the Complete Blood Count (CBC) or Hemotology panel. Elevated levels of hematocrit are associated with dehydration. An increased hematocrit is also associated with but by no means diagnostic of asthma or emphysema. Due to the lack of optimum oxygenation of the blood, the body will increase the red blood cell count to increase the number of cells that can be oxygenated. The hematocrit will go up accordingly.

Eosinophils - % 📑

5.20%

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.

T3 - Free 🖶

4.40 pg/ml

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 elevated with hyperthyroidism and is associated with iodine deficiency.

Hemoglobin - Male 📑

17.20 a/dl

Hemoglobin is the oxygen carrying molecule in red blood cells.
Hemoglobin levels may be increased in cases of dehydration.

Lymphocytes - % 📑

35.20%

Lymphocytes are a type of white blood cell. An increase in Lymphocytes - % is usually a sign of a viral infection but can also be a sign of increased toxicity in the body or inflammation.

RBC - Male 🛂

5.55 m/cumm

The RBC Count determines the total number of red blood cells or erythrocytes found in a cubic millimeter of blood. The red blood cell functions to carry oxygen from the lungs to the body tissues and to transfer carbon dioxide from the tissues to the lungs where it is expelled. Increased levels are associated with dehydration, stress, a need for vitamin C and respiratory distress such as asthma.

Cholesterol : HDL 🛂

3.40 Ratio

The ratio of total cholesterol to HDL is a far better predictor of cardiovascular disease than cholesterol by itself. A lower ratio is ideal because you want to lower cholesterol (but not too low) and raise HDL. A level below 3.0 would be ideal. Every increase of 1.0, i.e. 3.0 to 4.0 increases the risk of heart attack by 60%.

Eosinophils - Absolute 🕙

0.24 k/cumm

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

0.44 k/cumm

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.

TSH 📑

2.24 µU/mL

TSH or thyroid-stimulating hormone is a hormone produced by the anterior pituitary to control the thyroid gland's production of the thyroid hormone thyroxine (T4). TSH levels can be confusing because TSH levels increase when there is too little thyroid hormone in circulation. An elevated TSH is a sign that the body needs more thyroid hormone. Elevated levels of TSH are associated with primary hypothyroidism.

BUN : Creatinine 🕙

17.50 Ratio

The BUN/Creatinine is a ratio between the BUN and Creatinine levels. An increased level is associated with renal dysfunction.

Creatinine 📑

1.20 mg/dL

Creatinine is produced primarily from the contraction of muscle and is removed by the kidneys. A disorder of the kidney and/or urinary tract will reduce the excretion of creatinine and thus raise blood serum levels.

Creatinine is traditionally used with BUN to assess for impaired kidney function. Elevated levels can also indicate dysfunction in the prostate.

AST 📑

33.00 IU/L

AST is an enzyme present in highly metabolic tissues such as skeletal muscle, the liver, the heart, kidney, and lungs. This enzyme is at times released into the bloodstream following cell damage or destruction. AST levels will be increased when liver cells and/or heart muscle cells and/or skeletal muscle cells are damaged. The cause of the damage must be investigated.

MCV 📑

94.60 fL

The MCV is a measurement of the volume in cubic microns of an average single red blood cell. MCV indicates whether the red blood cell size appears normal (normocytic), small (microcytic), or large (macrocytic). An increase or decrease in MCV can help determine the type of anemia present. An increased MCV is associated with B12, folate, or vitamin C deficiency.

Non-HDL Cholesterol 🤚

120.00 mg/dl

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

Insulin: Fasting 📑

7.30 µIU/mI

Insulin is the hormone released by the pancreas in response to rising blood glucose levels and decreases blood glucose by transporting glucose into the cells. Often people lose their ability to utilize insulin to effectively drive blood glucose into energy-producing cells. This is commonly known as "insulin resistance" and is associated with increasing levels of insulin in the blood. Excess insulin is associated with greater risks of heart attack, stroke, metabolic syndrome, and diabetes.

BUN 📑

21.00 mg/dL

BUN or Blood Urea Nitrogen reflects the ratio between the production and clearance of urea in the body. Urea is formed almost entirely by the liver from both protein metabolism and protein digestion. The amount of urea excreted as BUN varies with the amount of dietary protein intake. Increased BUN may be due to increased production of urea by the liver or decreased excretion by the kidney. BUN is a test used predominantly to measure kidney function, where it will be increased. An increased BUN is also associated with dehydration and hypochlorhydria.

Monocytes - % 🤚

9.60%

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.

Triglycerides 🛂

112.00 mg/dL

Serum triglycerides are composed of fatty acid molecules that enter the bloodstream either from the liver or from the diet. Levels will be elevated in metabolic syndrome, fatty liver, in people with an increased risk of cardiovascular disease, hypothyroidism, and adrenal dysfunction

Glucose: Fasting 🦶

96.00 mg/dL

Blood glucose levels are regulated by several important hormones including insulin and glucagon. Glucose is also directly formed in the body from carbohydrate digestion and from the conversion in the liver of other sugars, such as fructose, and fat into glucose. Increased blood glucose is associated with type 1 & 2 diabetes, metabolic syndrome, and insulin resistance.

MPV 📑

9.20 fL

MPV or Mean Platelet Volume is a calculated measurement of the relative size of platelets in the blood. Elevated levels of MPV are seen with platelet destruction.

Below Optimal

DHEA-S - Male 📑

343.00 µg/dL

DHEA is produced primarily from the adrenals and is the most abundant circulating steroid in the human body and influences more than 150 known anabolic (repair) functions throughout the body and brain. It is the precursor for the sex hormones: testosterone, progesterone, and estrogen. Decreased levels are associated with adrenal insufficiency and many common age-related conditions, including diseases of the nervous, cardiovascular, and immune systems such as metabolic syndrome, coronary artery disease, osteoporosis, mood disorders, and sexual dysfunction. Ideally, DHEA levels should be maintained at the level of a healthy 30-vear-old to maximize the antiaging effects

HDL Cholesterol

51.00 mg/dL

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. Decreased HDL is considered atherogenic (tending towards the formation of fatty plaques in the artery).

Neutrophils - % 📑

48.90%

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.

eGFR 📑

84.00 mL/min/1.73m2

The eGFR is a calculated estimate of the kidney's Glomerular Filtration Rate. It uses 4 variables: age, race, creatinine levels and gender to estimate kidney function. Levels below 90 are an indication of a mild loss of kidney function. Levels below 60 indicate a moderate loss of kidney function and may require a visit to a renal specialist for further evaluation.

Protein - Total 📑

6.40 g/dL

Total serum protein is composed of albumin and total globulin. Conditions that affect albumin and total globulin readings will impact the total protein value. A decreased total protein can be an indication of malnutrition, digestive dysfunction due to HCI need, or liver dysfunction. Malnutrition leads to a decreased total protein level in the serum primarily from lack of available essential amino acids.

Globulin - Total 🖶

2.20 g/dL

Globulins constitute the body's antibody system and Total globulin is a measurement of all the individual globulin fractions in the blood. Decreased levels are associated with inflammation in the digestive system and immune insufficiency.

MCHC 5

32.80 g/dL

The Mean Corpuscular Hemoglobin Concentration (MCHC) measures the average concentration of hemoglobin in the red blood cells. It is a calculated value. Decreased levels are associated with a vitamin C need, vitamin B6 and iron deficiencies, and a heavy metal body burden.

Albumin 📑

4.20 g/dL

Albumin is one of the major blood proteins. Produced primarily in the liver, Albumin plays a major role in water distribution and serves as a transport protein for hormones and various drugs. Albumin levels are affected by digestive dysfunction and a decreased albumin can be an indication of malnutrition, digestive dysfunction due to HCl need (hypochlorhydria), or liver dysfunction. Malnutrition leads to a decreased albumin level in the serum primarily from lack of available essential amino acids. Decreased albumin can also be a strong indicator of oxidative stress and excess free radical activity.

Sex Hormone Binding Globulin - Male 🕙

25.00 nmol/L

Sex Hormone Binding Globulin (SHBG) is a protein produced primarily in the liver and to some extent the testes and the brain. SHBG acts as a transport molecule for carrying estrogen and testosterone around the body and delivering them to receptors on the cells. Decreased SHBG levels are associated with metabolic syndrome and an increased risk of cardiovascular disease.



An in-depth functional system and nutrient evaluation.

Assessment

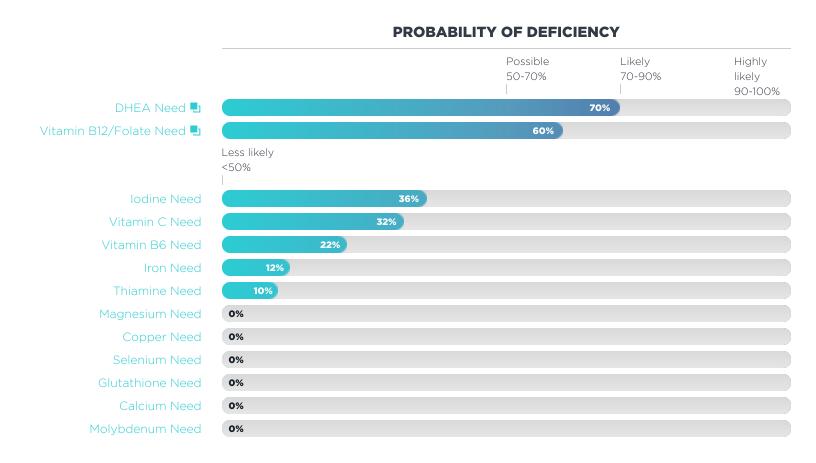
23 Nutrient Deficiencies

Nutrient Deficiencies

Individual Nutrient Deficiencies

The scores represent the degree of deficiency for individual nutrients based on your patient's 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 must be taken into consideration before determining whether or not your patient actually needs 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 detailed description and individual explanation of the results shown in this report.



Individual Nutrient Deficiency 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.



Deficiency Likely.
Improvement required.

DHEA NEED 📑

The results of this blood test indicate that this patient's DHEA levels might be lower than optimal.

Rationale

DHEA-S - Male ↓

Biomarkers considered

DHEA-S - Male



Deficiency Possible.

There may be improvement needed in certain areas.

VITAMIN B12/FOLATE NEED 🤨

Consider a Vitamin B12 and folate need if the MCV is increased along with an increased MCH and an increased Methylmalonic Acid (MMA). If there is also an increased RDW, MCHC, and LDH (especially the LDH-1 isoenzyme fraction), and a decreased Uric Acid the probability of vitamin B-12/folate deficiency anemia is very high. Serum Vitamin B12 and serum Folate may also be decreased.

Rationale

MCV ↑, Neutrophils - % ↓

Biomarkers considered

MCV, RBC - Male, Hemoglobin -Male, Hematocrit - Male, MCH, MCHC, RDW, Neutrophils - %

Biomarkers not available in this test - consider running in future tests:

Vitamin B12, Methylmalonic Acid, LDH, Homocysteine, Folate - Serum, Folate - RBC



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

Appendix

26 Disclaimer



Disclaimer

This Report contains information for the exclusive use of the named recipient only, and contains confidential, and privileged information. If you are not the named recipient or have not been given permission by the person, you are prohibited from reading or utilizing this report in any way, and you are further notified that any distribution, dissemination, or copying of this Report is strictly prohibited.

All information provided in this Report is provided for educational purposes only, including without limitation the 'optimal ranges' set forth in this Report. Neither this Report, nor any of the information contained in this Report, is intended for, or should be used for the purpose of, medical diagnosis, prevention, or treatment, including self-diagnosis, prevention, or treatment. This Report should not be used as a substitute for professional medical care, and should not be relied upon in diagnosing or treating a medical condition, ailment, or disease.

The 'optimal ranges' set forth in this Report are general reference reccomendations 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) U.S. or MHRA U.K. Any mentioned supplement, product, or treatment is not intended to diagnose, treat, cure or prevent any disease. The FDA or MHRA U.K. has not evaluated the information contained in this Report.

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.