ADVANCED
INTEGRATIVE MEDICAL 360

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Functional Health Report

Patient Copy

Sample Patient

Conventional US Units

Table of Contents

Blood Test Results Report

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

Above Optimal Range ↑
9 Current 5 Previous

Above Standard Range ↑
5 Current 5 Previous

Alarm High
0 Current 4 Previous

Below Optimal Range ↓
4 Current 5 Previous

Below Standard Range ↓
2 Current 3 Previous

Alarm Low
2 Current 0 Previous

Element	Current Sep 11 2019	Previous Jun 14 2019	Impr	Optimal Range	Standard Range	Units
Glucose	106.00 ↑	121.00 ↑	👍	72.00 - 90.00	65.00 - 99.00	mg/dL
Hemoglobin A1C	5.70 ↑	5.90 ↑	👍	5.00 - 5.50	0.00 - 5.60	%
BUN	14.00	12.00		10.00 - 16.00	7.00 - 25.00	mg/dL
Creatinine	1.15 ↑	1.13 ↑	👎	0.80 - 1.10	0.40 - 1.35	mg/dL
BUN/Creatinine Ratio	12.00	11.00		10.00 - 16.00	6.00 - 22.00	Ratio
eGFR Non-Afr. American	56.00 ↓	57.00 ↓	👎	90.00 - 120.00	60.00 - 90.00	mL/min/1.73m2
eGFR African American	65.00 ↓	66.00 ↓	👎	90.00 - 120.00	60.00 - 90.00	mL/min/1.73m2
Sodium	142.00	142.00		135.00 - 142.00	135.00 - 146.00	mEq/L
Potassium	4.20	4.30		4.00 - 4.50	3.50 - 5.30	mEq/L
Sodium/Potassium Ratio	33.80	33.02		30.00 - 35.00	30.00 - 35.00	ratio
Chloride	105.00	103.00		100.00 - 106.00	98.00 - 110.00	mEq/L
CO2	28.00	34.00 ↑	👍	25.00 - 30.00	19.00 - 30.00	mEq/L
Anion gap	13.20 ↑	9.30	👎	7.00 - 12.00	6.00 - 16.00	mEq/L
Protein, total	7.00	7.10		6.90 - 7.40	6.10 - 8.10	g/dL
Albumin	4.50	4.00		4.00 - 5.00	3.60 - 5.10	g/dL
Globulin, total	2.50	3.10 ↑	👍	2.40 - 2.80	2.00 - 3.50	g/dL
Albumin/Globulin Ratio	1.80	1.30 ↓	👍	1.40 - 2.10	1.00 - 2.50	ratio
Calcium	9.90	9.60		9.40 - 10.10	8.60 - 10.40	mg/dL
Calcium/Albumin Ratio	2.20	2.40		0.00 - 2.60	0.00 - 2.70	ratio
Alk Phos	62.00 ↓	75.00	👎	70.00 - 100.00	35.00 - 115.00	IU/L
AST (SGOT)	23.00	17.00		10.00 - 26.00	10.00 - 35.00	IU/L
ALT (SGPT)	29.00 ↑	23.00	👎	10.00 - 26.00	6.00 - 29.00	IU/L
Bilirubin - Total	0.40	0.40		0.10 - 0.90	0.20 - 1.20	mg/dL
Cholesterol - Total	188.00	207.00 ↑	👍	155.00 - 190.00	125.00 - 200.00	mg/dL
Triglycerides	146.00 ↑	293.00 ⚠	👍	50.00 - 100.00	0.00 - 150.00	mg/dL
LDL Cholesterol	113.00	121.00 ↑	👍	0.00 - 120.00	0.00 - 130.00	mg/dL
HDL Cholesterol	49.00 ↓	44.00 ↓	👍	55.00 - 70.00	46.00 - 100.00	mg/dL

Cholesterol/HDL Ratio	3.80 ↑	4.70 ↑		0.00 - 3.00	0.00 - 5.00	Ratio
Triglyceride/HDL Ratio	2.97 ↑	6.65 ⚠		0.00 - 2.00	0.00 - 3.30	ratio
TSH	0.18 !	1.51		1.00 - 3.00	0.40 - 4.50	µU/mL
Free T3	2.50 ↓	2.30 ↓		2.80 - 3.50	2.30 - 4.20	pg/ml
Free T4	1.00	0.80 ↓		1.00 - 1.50	0.80 - 1.80	ng/dL
C-Reactive Protein	1.00	2.70		0.00 - 5.00	0.00 - 7.90	mg/L
Cortisol - AM	9.90			4.00 - 22.00	4.00 - 22.00	µg/dL
Estradiol, Female	23.00	29.00		19.00 - 357.00	19.00 - 357.00	pg/ml
Testosterone, Total Female	53.00 ↑	65.00 ⚠		35.00 - 45.00	2.00 - 45.00	ng/dl
Testosterone, Free Female	3.60 ↑	7.60 ⚠		1.00 - 2.20	0.20 - 5.00	pg/ml
Total WBCs	3.00 ↓	3.50 ↓		5.30 - 7.50	3.80 - 10.80	k/cumm
RBC, Female	4.88 ↑	4.82 ↑		3.90 - 4.50	3.80 - 5.10	m/cumm
Hemoglobin, Female	14.40	14.10		13.50 - 14.50	11.70 - 15.50	g/dl
Hematocrit, Female	43.10	43.50		37.00 - 44.00	35.00 - 45.00	%
MCV	88.30	90.20		85.00 - 92.00	80.00 - 100.00	fL
MCH	29.50	29.30		27.00 - 31.90	27.00 - 33.00	pg
MCHC	33.40	32.40		32.00 - 35.00	32.00 - 36.00	g/dL
Platelets	134.00 !	149.00 ↓		150.00 - 400.00	140.00 - 415.00	k/cumm
RDW	13.70 ↑	12.90		11.70 - 13.00	11.00 - 15.00	%
Neutrophils	46.00	50.50		40.00 - 60.00	40.00 - 60.00	%
Lymphocytes	42.60 ↑	38.90		25.00 - 40.00	25.00 - 40.00	%
Monocytes	8.70 ↑	7.10 ↑		0.00 - 7.00	0.00 - 7.00	%
Eosinophils	2.00	2.60		0.00 - 3.00	0.00 - 3.00	%
Basophils	0.70	0.90		0.00 - 1.00	0.00 - 1.00	%

Out of Optimal Range Report

The following results show all of the elements that are out of the optimal reference range. The elements that appear closest to the top of each section are those elements that are farthest from optimal.

Above Optimal Range
14 Total

Below Optimal Range
8 Total

Above Optimal

Testosterone, Free Female ↑ 3.60 pg/ml (+ 167 %)

In women, free testosterone can help in the evaluation of polycystic ovarian syndrome, testosterone-producing tumors of the ovary, tumors of the adrenal cortices, and congenital adrenal hyperplasia.

Imbalances of testosterone in postmenopausal women are associated with various forms of coronary heart disease and cardiovascular events, including myocardial infarction.

Triglycerides ↑ 146.00 mg/dL (+ 142 %)

Serum triglycerides are composed of fatty acid molecules that enter the blood stream either from the liver or from the diet. Patients that are optimally metabolizing their fats and carbohydrates tend to have a triglyceride level about one-half of the total cholesterol level. Levels will be elevated in metabolic syndrome, fatty liver, in patients with an increased risk of cardiovascular disease, hypothyroidism and adrenal dysfunction. Levels will be decreased in liver dysfunction, a diet deficient in fat, and inflammatory processes.

Glucose ↑ 106.00 mg/dL (+ 139 %)

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, into glucose. Increased blood glucose is associated with type 1 & 2 diabetes, metabolic syndrome, and insulin resistance. Decreased levels of blood glucose are associated with hypoglycemia.

Testosterone, Total Female ↑ 53.00 ng/dl (+ 130 %)

In women, total testosterone can help in the evaluation of polycystic ovarian syndrome, testosterone-producing tumors of the ovary, tumors of the adrenal cortices, and congenital adrenal hyperplasia.

Imbalances of testosterone in postmenopausal women are associated with various forms of coronary heart disease and cardiovascular events, including myocardial infarction.

RBC, Female ↑ 4.88 m/cumm (+ 113 %)

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. The RBC Count determines the total number of cells or erythrocytes found in a cubic millimeter of blood. Increased levels are associated with dehydration, stress, a need for vitamin C and respiratory distress such as asthma. Decreased levels are primarily associated with anemia.

RDW ↑ 13.70 % (+ 104 %)

The Red Cell Distribution Width (RDW) is essentially an indication of the degree of abnormal variation in the size of red blood cells (called anisocytosis). Although the RDW will increase with vitamin BI2 deficiency, folic acid, and iron anemia, it is increased most frequently with vitamin B12 deficiency anemia.

Triglyceride/HDL Ratio ↑ 2.97 ratio (+ 98 %)

The Triglyceride:HDL ratio is determined from serum triglyceride and HDL levels. Increased ratios are associated with an increased risk of developing insulin resistance and Type II Diabetes. A decreased ratio is associated with a decreased risk of developing insulin resistance and Type II Diabetes.

Hemoglobin A1C ↑ 5.70 % (+ 90 %)

The Hemoglobin A1C test measure the amount of glucose that combines with hemoglobin to form glycohemoglobin during the normal lifespan of a red blood cell, which is about 120 days. The amount of glycohemoglobin formed is in direct proportion to the amount of glucose present in the blood stream during the 120-day red blood cell lifespan. In the presence of high blood glucose levels (hyperglycemia) the amount of hemoglobin that is glycosylated to form glycohemoglobin increases and the hemoglobin A1C level will be high. It is used primarily to monitor long-term blood glucose control and to help determine therapeutic options for treatment and management. Studies have shown that the closer to normal the hemoglobin A1C levels are kept, the less likely those patients are to develop the long-term complications of diabetes.

Cholesterol/HDL Ratio ↑ 3.80 Ratio (+ 77 %)

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%.

Monocytes ↑ 8.70 % (+ 74 %)

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.

Anion gap ↑ 13.20 mEq/L (+ 74 %)

The anion gap is the measurement of the difference between the sum of the sodium and potassium levels and the sum of the serum CO_2/bicarbonate and chloride levels. Increased levels are associated with thiamine deficiency and metabolic acidosis.

ALT (SGPT) ↑ 29.00 IU/L (+ 69 %)

SGPT/ALT is an enzyme present in high concentrations in the liver and to lesser extent skeletal muscle, the heart, and kidney. SGPT/ALT will be liberated into the bloodstream following cell damage or destruction. Any condition or situation that causes damage to the hepatocytes will cause a leakage of SGPT/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).

Lymphocytes ↑ 42.60 % (+ 67 %)

Lymphocytes are a type of white blood cell. An increase in lymphocyte concentration is usually a sign of a viral infection but can also be a sign of increased toxicity in the body or inflammation. Decreased levels are often seen in a chronic viral infection and oxidative stress.

Creatinine ↑ 1.15 mg/dL (+ 67 %)

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.

Below Optimal

eGFR Non-Afr. American ↓ 56.00 mL/min/1.73m2 (- 163 %)

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.

Total WBCs ↓ 3.00 k/cumm (- 155 %)

The total White Blood Cell (WBC) count measures the sum of all the WBCs in the peripheral blood. White Blood Cells fight infection, defend the body through a process called phagocytosis, and produce, transport and distribute antibodies as part of the immune process. It is important to look at the WBC differential count (neutrophils, lymphocytes, etc.) to locate the source of an increased or decreased WBC count.

eGFR African American ↓ 65.00 mL/min/1.73m2 (- 133 %)

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.

Free T3 ↓ 2.50 pg/ml (- 93 %)

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 decreased with hypothyroidism.

TSH ↓ 0.18 µU/mL (- 91 %)

TSH is a hormone produced from the anterior pituitary to control thyroid function. TSH stimulates the thyroid cells to increase the production of thyroid hormone (T-4), to store thyroid hormone and to release thyroid hormone into the bloodstream. TSH synthesis and secretion is regulated by the release of TRH (Thyroid Releasing Hormone) from the hypothalamus. TSH levels describe the body's desire for more thyroid hormone (T4 or T3), which is done in relation to the body's ability to use energy. A high TSH is the body's way of saying "we need more thyroid hormone". A low TSH reflects the body's low need for thyroid hormone. Optimal TSH levels tell us that the thyroid hormone levels match the body's current need and/or ability to utilize the energy.

HDL Cholesterol ↓ 49.00 mg/dL (- 90 %)

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, increased HDL is considered protective.

Alk Phos ↓ 62.00 IU/L (- 77 %)

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.

Platelets ↓ 134.00 k/cumm (- 56 %)

Platelets or thrombocytes are the smallest of the formed elements in the blood. Platelets are necessary for blood clotting, vascular integrity, and vasoconstriction. They form a platelet plug, which plugs up breaks in small vessels. increased platelets may be seen with atherosclerosis. Decreased levels are associated with oxidative stress, heavy metal body burden and infections.

Functional Index Report

The indices shown below represent an analysis of your blood test results. These results have been converted into your individual Functional Indices Report based on our latest research. This report gives me an indication of the level of dysfunction that exists in the various physiological systems in your body from the digestion of the food you eat to the health of your liver and the strength of your immune system – which are all key factors in maintaining optimal health. We can use this information to put together a unique treatment plan designed to bring your body back into a state of functional health, wellness and energy.

Score Guide: **90% - 100%** - Dysfunction Highly Likely, **70% - 90%** - Dysfunction Likely, **50% - 70%** - Dysfunction Possible, **< 50%** - Dysfunction Less Likely.

Functional Index	0% — 100%
Immune Function Index	100%
Thyroid Function Index	100%
Blood Sugar Index	92%
Toxicity Index	75%
Heavy Metal Index	58%
Kidney Function Index	48%
Lipid Panel Index	45%
Cardiovascular Risk Index	42%
Acid-Base Index	30%
Oxidative Stress Index	29%
Liver Function Index	28%
Inflammation Index	15%
Red Blood Cell Index	13%
GI Function Index	12%
Adrenal Function Index	11%
Gallbladder Function Index	8%
Bone Health Index	6%
Allergy Index	0%
Electrolyte Index	0%
Sex Hormone Index - Female	0%

Immune Function Index

The Immune Function Index 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. Elements 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). For your blood test, your Immune Function Index is:

[100%] - Dysfunction Highly Likely. Much improvement required.

Rationale:
Total WBCs ↓, Lymphocytes ↑, Monocytes ↑, Alk Phos ↓

Thyroid Function Index

The Thyroid Function Index allows us to assess the functional health of your thyroid. The thyroid produces hormones that control how the body uses energy. They are responsible for controlling metabolism in the body, for maintaining body temperature, regulating cholesterol and controlling mood. By examining specific elements on the blood test we can see if your thyroid is in a state of increased function (a condition called hyperthyroidism), in a state of decreased function (hypothyroidism) or hopefully optimal function! For your blood test, your Thyroid Function Index is:

[100%] - Dysfunction Highly Likely. Much improvement required.

Rationale:
TSH ↓, Free T3 ↓

Blood Sugar Index

The Blood Sugar index tells us how well your body is regulating blood glucose. Blood sugar dysregulation is very common. It doesn't suddenly emerge but rather develops slowly, so we can look for clues in your blood test that can help us determine if there's dysregulation and if so what it is. Some conditions associated with blood sugar dysregulation include hypoglycemia (periods of low blood sugar), metabolic syndrome, hyperinsulinemia and diabetes. For your blood test, your Blood Sugar Index is:

[92%] - Dysfunction Highly Likely. Much improvement required.

Rationale:
Glucose ↑, Triglycerides ↑, HDL Cholesterol ↓

Toxicity Index

The Toxicity Index gives us an indication of whether or not you are dealing with an increased toxicity body burden. Toxins can accumulate in the body from an increased exposure from food, water, or the environment. Toxins can also increase because the body's detoxification and elimination functions may be compromised. Whereas a simple blood test cannot tell us which toxins might be a burden to the body we can measure elements in the blood that are affected by the presence of toxins, giving us a functional index for toxicity. For your blood test, your Toxicity Index is:

[75%] - Dysfunction Likely. Improvement required.

Rationale:
HDL Cholesterol ↓, Platelets ↓, Lymphocytes ↑

Heavy Metal Index

The Heavy metal Index gives us an indication of whether or not your body is dealing with what we call a heavy metal burden. Heavy metals can accumulate in your body from environmental exposure, excessive use of aluminum cooking utensils, deodorants, canned foods, etc., excess consumption of fish that might contain mercury, lead containing paints, amalgam fillings, and in some cases well water and municipal water supplies. Whereas a simple blood test cannot tell which metals might be a burden to your body we can measure elements in the blood that are affected by the presence of toxic metals. For your blood test, your Heavy Metal Index is:

[58%] - Dysfunction Possible. There may be improvement needed in certain areas.

Rationale:
Platelets ↓, TSH ↓

Nutrient Index Report

The indices shown below represent an analysis of your blood test results. These results have been converted into your individual Nutrient Assessment Report based on our latest research. This report gives me an indication of your nutritional status. Nutritional status is influenced by actual dietary intake, digestion, absorption, assimilation and cellular uptake of the nutrients themselves. We can use this information to put together a unique treatment plan designed to bring your body back into a state of functional health, wellness and energy.

Score Guide: **90% - 100%** - Nutrient Status is Poor, **75% - 90%** - Nutrient Status is Low, **50% - 75%** - Moderate Nutrient Status, **< 50%** - Optimum Nutrient Status

Nutrient Index	0% 100%
Carbohydrate Index	75%
Mineral Index	38%
Vitamin Index	17%
Protein Index	12%
Hydration Index	10%
Fat Index	0%

Carbohydrate Index

The Carbohydrate Index gives us an assessment of your dietary intake of carbohydrates, especially refined carbohydrates (white flour, white rice, white pasta, etc.) and sugars. A diet high in refined carbohydrates and sugars will deplete important nutrients that are used by the body to handle carbohydrates and may also increase blood glucose and blood fat levels, all of which can be measured in your blood. For your blood test, your Carbohydrate Index is:

[75%] - Nutrient Status is Low. Improvement required.

Rationale:
Glucose ↑, Triglycerides ↑, HDL Cholesterol ↓, Total WBCs ↓

Individual Nutrient Values

The values below 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 must be taken into consideration before determining whether or not you actually need an individual nutrient. I will use the information in this section of your Nutrient Assessment Report to put together an individualized treatment plan to bring your body back into a state of optimal nutritional function.

Score Guide: **90% - 100%** - Deficiency Highly Likely, **70% - 90%** - Deficiency Likely, **50% - 70%** - Deficiency Possible, **< 50%** - Deficiency Less Likely.

Individual Nutrients	0% 100%
Zinc Need	80%
Thiamine Need	56%
Selenium Need	50%
Vitamin B12/Folate Need	25%
Iron Deficiency	3%
Vitamin B6 Need	0%
Iodine Need	0%
Magnesium Need	0%
Calcium Need	0%
DHEA Need	0%
Vitamin C Need	0%
Vitamin D Need	0%
Molybdenum Need	0%
Glutathione Need	0%

Zinc Need

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

[80%] - Dysfunction Likely. Improvement required.

Rationale:
Alk Phos↓

Thiamine Need

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

[56%] - Dysfunction Possible. There may be improvement needed in certain areas.

Rationale:
Anion gap ↑, Glucose ↑

Selenium Need

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

[50%] - Dysfunction Possible. There may be improvement needed in certain areas.

Rationale:
Free T3 ↓

Blood Test History Report

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

Element	Latest 2 Test Results	
	Jun 14 2019	Sep 11 2019
Glucose	121.00 ↑	106.00 ↑
Hemoglobin A1C	5.90 ↑	5.70 ↑
Insulin - Fasting		
Fructosamine		
C-Peptide		
BUN	12.00	14.00
Creatinine	1.13 ↑	1.15 ↑
Creatinine, 24-hour urine		
Creatinine Clearance		
eGFR Non-Afr. American	57.00 ↓	56.00 ↓
eGFR African American	66.00 ↓	65.00 ↓
BUN/Creatinine Ratio	11.00	12.00
Sodium	142.00	142.00
Potassium	4.30	4.20
Sodium/Potassium Ratio	33.02	33.80
Chloride	103.00	105.00
CO2	34.00 ↑	28.00
Anion gap	9.30	13.20 ↑
Uric Acid, female		
Protein, total	7.10	7.00
Albumin	4.00	4.50
Globulin, total	3.10 ↑	2.50
Albumin/Globulin Ratio	1.30 ↓	1.80
Calcium	9.60	9.90
Calcium/Albumin Ratio	2.40	2.20
Phosphorus		
Calcium/Phosphorous Ratio		
Collagen Cross-Linked NTx		
Magnesium		

Element	Latest 2 Test Results	
	Jun 14 2019	Sep 11 2019
Alk Phos	75.00	62.00 ↓
LDH		
AST (SGOT)	17.00	23.00
ALT (SGPT)	23.00	29.00 ↑
GGT		
Bilirubin - Total	0.40	0.40
Bilirubin - Direct		
Bilirubin - Indirect		
Iron - Serum		
Ferritin		
TIBC		
% Transferrin saturation		
Cholesterol - Total	207.00 ↑	188.00
Triglycerides	293.00 ⚠	146.00 ↑
LDL Cholesterol	121.00 ↑	113.00
HDL Cholesterol	44.00 ↓	49.00 ↓
VLDL Cholesterol		
Cholesterol/HDL Ratio	4.70 ↑	3.80 ↑
Triglyceride/HDL Ratio	6.65 ⚠	2.97 ↑
Leptin, Female		
TSH	1.51	0.18 ⚠
Total T4		
Total T3		
Free T4	0.80 ↓	1.00
Free T3	2.30 ↓	2.50 ↓
T3 Uptake		
Free Thyroxine Index (T7)		
Thyroid Peroxidase (TPO) Abs		
Thyroglobulin Abs		
Reverse T3		
C-Reactive Protein	2.70	1.00
Hs CRP, Female		
ESR, Female		
Homocysteine		

Element	Latest 2 Test Results	
	Jun 14 2019	Sep 11 2019
Fibrinogen		
Creatine Kinase		
Vitamin D (25-OH)		
Vitamin B12		
Folate		
DHEA-S, Female		
Cortisol - AM		9.90
Cortisol - PM		
Testosterone, Free Female	7.60 ⚠	3.60 ↑
Testosterone, Total Female	65.00 ⚠	53.00 ↑
Sex Hormone Binding Globulin, female		
Estradiol, Female	29.00	23.00
Progesterone, Female		
Total WBCs	3.50 ↓	3.00 ↓
RBC, Female	4.82 ↑	4.88 ↑
Reticulocyte count		
Hemoglobin, Female	14.10	14.40
Hematocrit, Female	43.50	43.10
MCV	90.20	88.30
MCH	29.30	29.50
MCHC	32.40	33.40
Platelets	149.00 ↓	134.00 ⚠
RDW	12.90	13.70 ↑
Neutrophils	50.50	46.00
Bands		
Lymphocytes	38.90	42.60 ↑
Monocytes	7.10 ↑	8.70 ↑
Eosinophils	2.60	2.00
Basophils	0.90	0.70

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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.