Standard Process Event 100 Main Street Rochester, NY 14564 123-555-0123

For Patient: Ashbrook, Sandra

Doctor: Dr. Seminar

Evaluation Date: 10/14/2017 **Blood Test Date:** 10/14/2017

Blood Panel - Markers Out of Range and Patterns

(Pattern: proprietary formula using one or more Blood Markers)

Blood Panel: Check for Markers that are out of Lab Range _____

NOTE Only one supplement is pre-checked for each Marker, you can select more as needed.

Marker "Hemoglobin A1c" is out of lab range (the Total Score is 490).

Blood Panel: Check for Patterns WITH NO Markers that are out of Lab Range

A pattern for "Lipid Dysfunction" was found (the Total Score is 480). Consider starting with the 21 Day Purification plus Adrenal Tonic Phytosynergist®.

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Blood Panel - Detail

Below Optimal < Above Optimal > Below Lab < Above Lab >				
Marker	Value	Optimal Range	Lab Range	Units
Chemistries				
Glucose, Serum Hemoglobin A1c BUN Creatinine, Serum eGFR Protein, Total, Serum Albumin, Serum Globulin, Total Bilirubin Total Alkaline Phosphatase AST (SGOT) (Aspartate aminotransferase) ALT (SGPT) (Alanine Aminotransferase)	67 <	75 - 86 $4.8 - 5.6$ $10 - 16$ $0.80 - 1.00$ > 59 $6.9 - 7.4$ $4.0 - 4.8$ $2.4 - 2.8$ $0.1 - 1.2$ $70 - 100$ $10 - 30$ $10 - 30$ $10 - 30$	$\begin{array}{c} 65 - 99 \\ 4.8 - 5.6 \\ 6 - 24 \\ 0.57 - 1.00 \\ > 59 \\ 6.0 - 8.5 \\ 3.5 - 5.5 \\ 1.5 - 4.5 \\ 0.0 - 1.2 \\ 39 - 117 \\ 0 - 40 \\ 0 - 32 \\ \end{array}$	mg/dL % mg/dL mg/dL ml/min/1.73 g/dL g/dL g/dL iU/L IU/L IU/L
Lipids	12	10 - 30	0 - 60	IU/L
Cholesterol, Total Triglycerides HDL Cholesterol LDL Cholesterol T. Chol/HDL Ratio	172 < 107 > 60 90 2.9	180 - 220 70 - 100 > 55 80 - 120 0.0 - 3.5	100 - 199 0 - 149 > 39 0 - 99 0.0 - 4.4	mg/dL mg/dL mg/dL mg/dL
LDL/HDL Ratio	1.5	0.0 - 3.5	0.0 - 3.2	Ratio

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Values Outside of the Opti	mal and/or Laboratory Range
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Alkaline Phosphatase (57 IU/L)

Alkaline phosphatase is a certain kind of protein found in all body tissues. It is made from zinc and is primarily produced in bone, liver, intestines and skin. When Alkaline Phosphatase levels are low, this can indicate a possible zinc deficiency.

Notes to Clinician

General Comment: Zinc-dependant enzyme formed by the liver; will elevate with any bile obstruction. Rarely increased; most commonly due to zinc deficiency, insufficient protein intake or exogenous estrogens. Elevated in children or after bone fracture.

Marker is low: Provide dietary or supplemental source of zinc; ensure adequate digestion and dietary mineral intake. Can also decrease with estrogen use.

ALT (SGPT) (Alanine Aminotransferase) (8 IU/L)

ALT is an enzyme that is produced in liver cells. There is a higher concentration in the liver with lesser amounts in heart, muscle, skin and kidneys. It can be used to determine possible liver dysfunction and to a lesser degree, biliary or possible gall bladder dysfunction.

Notes to Clinician

General Comment: Indicator for liver damage; use in context with other markers. Marker is low: Support liver, digestion and protein intake.

< Cholesterol, Total (172 mg/dL)

Cholesterol is a fat-like substance that circulates in your blood. Because cholesterol can't dissolve in blood, it has to be carried to cells by special proteins called lipoproteins (LDL's, VLDL's and HDL's). Your body needs adequate amounts of some cholesterol in order to stay healthy.

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< Glucose, Serum (67 mg/dL)

Glucose is a simple sugar which the body uses as its primary source of fuel for energy. Almost all of the body's cells require sufficient glucose to function properly, especially the brain and nervous system. Glucose is transported into the cells by a hormone called insulin or can be stored in the liver. If there is too much glucose, it gets stored as triglycerides. If blood glucose drops too low, as can happen between meals, during a strenuous workout or at night, the liver gets the signal to release some of its stored glucose into the blood to try and restore normal blood sugar. Evaluating blood glucose levels helps screen for and monitor hypoglycemia (low blood sugar), hyperglycemia (elevated blood sugar), diabetes and pre-diabetes. This test should be included as a part of any regular physical or performed when symptoms of blood sugar fluctuations are present.

Notes to Clinician

General Comment: Ranges between 90 and 100 can indicate impending glucose intolerance. Dietary modification and blood sugar support are crucial.

Marker is low: Pancreas support required; modify diet, ensure regular meals and provide A-F Betafood to enhance glycogen storage.

>> Hemoglobin A1c (5.7 %)

The A1C test result reflects your average blood sugar level for the past two to three months. Specifically, the A1C test measures what percentage of your hemoglobin - a protein in red blood cells that carries oxygen - is coated with sugar (glycated). The sugar in your bloodstream makes the cells sticky which prevents them from delivering enough oxygen to your cells and is also one of the most significant contributors to cardiovascular disease. Once dietary changes have been incorporated, this marker can be retested to monitor your improvement.

Triglycerides (107 mg/dL)

Serum (blood) triglycerides are an indicator of the amount of stored fat in the body. Levels of triglycerides can vary with age, sex, glucose metabolism and health of the liver. Excess calories from food that your body doesn't immediately use are converted into triglycerides and stored as fat for later use.

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