

# Clinician Blood Panel Results

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

**For Patient:** Bacon, Bob  
**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 "Glucose, Serum" is out of lab range (the Total Score is 490).

Marker "Iron Saturation" is out of lab range (the Total Score is 480).

Marker "LDL Cholesterol" is out of lab range (the Total Score is 470). Also consider starting with the 21 Day Purification.

Marker "C-Reactive Protein" is out of lab range (the Total Score is 460).

Marker "Neutrophils (Absolute)" is out of lab range (the Total Score is 450).

\_\_\_\_\_ 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 440). Consider starting with the 21 Day Purification plus Adrenal Tonic Phytosynergist®.

A pattern for "Increased Neutrophils or Lymphocytes" was found (the Total Score is 430).

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Marker	Value	Optimal Range	Lab Range	Units
Chemistries				
Glucose, Serum .....	104 >>	75 - 86	65 - 99	mg/dL
Hemoglobin A1c .....	5.6	4.8 - 5.6	4.8 - 5.6	%
Uric Acid, Serum .....	5.0	3.5 - 5.9	3.7 - 8.6	mg/dL
BUN .....	15	10 - 16	6 - 24	mg/dL
Creatinine, Serum .....	0.95	0.80 - 1.00	0.57 - 1.00	mg/dL
eGFR .....	98	> 59	> 59	ml/min/1.73
Sodium, Serum .....	141	135 - 142	134 - 144	mmol/L
Potassium, Serum .....	4.2	4.0 - 4.5	3.5 - 5.2	mmol/L
Chloride, Serum .....	101	100 - 106	97 - 108	mmol/L
Carbon Dioxide, Total .....	22	21 - 26	18 - 29	mmol/L
Calcium, Serum .....	9.4	9.2 - 10.0	8.7 - 10.2	mg/dL
Phosphorus, Serum .....	3.3	3.0 - 4.0	2.5 - 4.5	mg/dL
Magnesium, Serum .....	2.3	> 2.0	1.6 - 2.3	mg/dL
Protein, Total, Serum .....	7.1	6.9 - 7.4	6.0 - 8.5	g/dL
Albumin, Serum .....	4.7	4.0 - 4.8	3.5 - 5.5	g/dL
Globulin, Total .....	2.4	2.4 - 2.8	1.5 - 4.5	g/dL
Albumin/Globulin Ratio .....	2.0	1.4 - 2.1	1.1 - 2.5	
Bilirubin Total .....	0.9	0.1 - 1.2	0.0 - 1.2	mg/dL
Alkaline Phosphatase .....	61 <	70 - 100	39 - 117	IU/L
LDH (Lactate dehydrogenase) .....	182	140 - 200	119 - 226	IU/L
AST (SGOT) (Aspartate aminotransferase) .....	17	10 - 30	0 - 40	IU/L
ALT (SGPT) (Alanine Aminotransferase) .....	22	10 - 30	0 - 32	IU/L
GGT .....	16	10 - 30	0 - 60	IU/L
Iron Binding Capacity (TIBC) .....	322	250 - 350	250 - 450	ug/dL
UIBC (Unsaturated Iron Binding Capacity) .....	292	150 - 375	131 - 425	ug/dL
Iron, Serum .....	30 <	85 - 130	27 - 159	ug/dL
Iron Saturation .....	9 <<	25 - 30	15 - 55	%
Ferritin, Serum .....	223	25 - 236	30 - 400	ng/mL

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Marker	Value	Optimal Range	Lab Range	Units
<b>Lipids</b>				
Cholesterol, Total .....	169 <	180 - 220	100 - 199	mg/dL
Triglycerides .....	54 <	70 - 100	0 - 149	mg/dL
HDL Cholesterol .....	54 <	> 55	> 39	mg/dL
VLDL Cholesterol .....	11	5 - 40	5 - 40	mg/dL
LDL Cholesterol .....	104 >>	80 - 120	0 - 99	mg/dL
T. Chol/HDL Ratio .....	3.1	0.0 - 3.5	0.0 - 4.4	
LDL/HDL Ratio .....	1.9	0.0 - 3.5	0.0 - 3.2	Ratio
C-Reactive Protein .....	18.86 >>	0.00 - 0.55	0.00 - 3.00	mg/L
<b>Thyroid</b>				
TSH .....	1.870	1.000 - 2.000	0.450 - 4.500	uIU/ml
Thyroxine (T4) .....	8.1	7.5 - 8.1	4.5 - 12.0	ug/dL
T3 Uptake .....	34	27 - 37	24 - 39	%
Free Thyroxine Index .....	2.8	1.2 - 4.9	1.2 - 4.9	
<b>Immunoassay</b>				
Vitamin D, 25-Hydroxy .....	58.8 >	35.0 - 50.0	30.0 - 100.0	ng/mL

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Marker	Value	Optimal Range	Lab Range	Units
CBC, Platelet Ct, and Dil				
WBC (White Blood Cells) .....	10.2 >	5.0 - 7.5	3.4 - 10.8	x10E3/uL
RBC (Red Blood Cells) .....	4.97 >	4.20 - 4.90	4.14 - 5.80	x10E6/uL
Hemoglobin .....	14.8	14.0 - 15.0	12.6 - 17.7	g/dL
Hematocrit .....	46.1	40.0 - 48.0	37.5 - 51.0	%
MCV (Mean Corpuscular Volume) .....	93.0 >	82.0 - 89.9	79.0 - 97.0	fL
MCH (Mean Corpuscular Hemoglobin) .....	29.8	28.0 - 31.9	26.6 - 33.0	pg
MCHC (Mean Corpuscular Hemoglobin Concentration) .....	32.1	32.0 - 35.0	31.5 - 35.7	g/dL
RDW (Random Distribution of RBC Weight) .....	14.2 >	0.0 - 13.0	12.3 - 15.4	%
Platelets .....	231	185 - 385	150 - 379	x10E3/uL
Neutrophils .....	70 >	40 - 60	40 - 74	%
Lymphs .....	23 <	24 - 44	14 - 46	%
Monocytes .....	5	4 - 13	4 - 12	%
Eosinophils (Eos) .....	2	0 - 3	0 - 5	%
Basophils (Basos) .....	0	0 - 1	0 - 3	%
Neutrophils (Absolute) .....	7.1 >>	1.8 - 7.8	1.4 - 7.0	x10E3/uL
Lymphs (Absolute) .....	2.3	0.7 - 4.5	0.7 - 3.1	x10E3/uL
Monocytes (Absolute) .....	0.5	0.1 - 1.0	0.1 - 0.9	x10E3/uL
Eosinophils (Eos) (Absolute) .....	0.2	0.0 - 0.4	0.0 - 0.4	x10E3/uL
Basophils (Basos) (Absolute) .....	0.0	0.0 - 0.2	0.0 - 0.2	x10E3/uL
Immature Granulocytes .....	0	0 - 1	0 - 2	%
Immature Granulocytes (Absolute) .....	0.0	0.0 - 0.1	0.0 - 0.1	x10E3/uL

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### < Alkaline Phosphatase (61 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.

### >> C-Reactive Protein (18.86 mg/L)

The C-reactive protein (CRP) test is used to detect inflammation in your body. CRP is a protein made by the liver and released into the bloodstream. The CRP test is especially useful for tracking infections.

### < Cholesterol, Total (169 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.

### >> Glucose, Serum (104 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.

### < HDL Cholesterol (54 mg/dL)

Cholesterol is a waxy substance that comes from two sources: your body and food. Your body makes all the cholesterol you need and circulates it through the blood via special lipoproteins. HDL is one of those proteins that is responsible for bringing cholesterol back to the liver to be recycled and then sent out again (bound to LDL) to do whatever the body needs it to do.

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### << Iron Saturation (9 %)

Also known as % saturation, this is a calculated value  $[(\text{serum iron} \times 100) / \text{TIBC}]$  that can indicate whether or not you have iron-deficient anemia. Levels below 25% indicate a higher possibility that anemia is present.

### < Iron, Serum (30 ug/dL)

Iron comes from the food you eat and requires adequate hydrochloric acid in the stomach to be fully utilized and absorbed. When your iron levels are low, this can indicate digestive insufficiency or reduced iron intake or both. Women are more likely to have reduced iron levels due to monthly menstrual blood loss or because of increased demand during pregnancy. Because iron is needed to help deliver oxygen to the cells, ensuring you have adequate iron is crucial. This test measures the amount of iron in your blood stream that is available for use by your body.

### Notes to Clinician

General Comment: Measures serum-bound iron; adequate levels require dietary intake of iron-containing foods and adequate hydrochloric acid.

Marker is low: Chronic iron deficiency linked to SIBO, hypochlorhydria or insufficient intake.

### >> LDL Cholesterol (104 mg/dL)

LDL is a very important blood protein that helps transport cholesterol from the liver out into the body for use wherever it is needed. It is not "bad" cholesterol as is commonly reported. LDL is how your body is able to obtain and use cholesterol in order to manufacture hormones, help manage stress, keep your brain healthy, metabolize vitamin D and a variety of other functions.

### < Lymphs (23 %)

A lymphocyte is a type of white blood cell present in the blood. As a part of the body's primary defense system, lymphocytes are able to recognize hundreds of millions of different molecules and can send the signal very quickly that an invader has arrived. They are formed in lymphatic tissues such as the tonsils, spleen, thymus and lymph nodes and can help protect your body from viral infections.

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### > MCV (Mean Corpuscular Volume) (93.0 fL)

Mean corpuscular volume (abbreviated as MCV) is the average amount of space occupied (size) by each a single red blood cell. This indicates whether the cell is too small (microcytic) or too large (macrocytic). As such, it is a very useful marker for determining if anemia is present.

#### Notes to Clinician

General Comment: Part of anemia screening; distinguishes between iron deficient and folic acid/B12 anemia; can be normal with concomitant findings; also affected by insufficient hydrochloric acid.

Marker is high: Most likely either hypochlorhydria or Folic Acid B2 anemia. Hypothyroidism and vitamin C deficiency may also be involved.

### > Neutrophils (70 %)

Neutrophils are a type of white blood cell. Over 60% - 70% of white blood cells are neutrophils. They are usually the first responders to infection and so will be elevated in early stages and decrease with nutritional intervention. The typical life span of a neutrophil is 8 days. Just like other white blood cells, they are formed in the bone marrow.

### >> Neutrophils (Absolute) (7.1 x10E3/uL)

Neutrophils are a type of white blood cell. Over 60% - 70% of white blood cells are neutrophils. They are usually the first responders to infection and so will be elevated in early stages and decrease with nutritional intervention. The typical life span of a neutrophil is 8 days. Just like other white blood cells, they are formed in the bone marrow.

### > RBC (Red Blood Cells) (4.97 x10E6/uL)

Red blood cells are the most common cell and make up approximately 25% of all cells in the human body. They carry oxygen to body tissues and have a life span of approximately 100-120 days. Red blood cells store 65% of all iron in the body and as such can be a key indicator of possible anemia.

#### Notes to Clinician

General Comment: Carry oxygen to tissues; life span of 120 days; key marker for anemias; affected by dehydration and vitamin C deficiency.

Marker is high: Most commonly due to dehydration - consider adding Celtic Sea Salt to daily diet. Can also be due to asthma or othe respiratory distress.

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### > RDW (Random Distribution of RBC Weight) (14.2 %)

RDW measures the consistency of the size of red blood cells. When RDW levels deviate, this is an indicator of possible anemia.

#### Notes to Clinician

General Comment: Key marker for various types of anemia.  
Marker is high: Can be either iron-deficient or folic acid/B12 anemia.

### < Triglycerides (54 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.

### > Vitamin D, 25-Hydroxy (58.8 ng/mL)

The most accurate way to measure how much vitamin D is in your body is the 25-hydroxy vitamin D blood test. In the kidney, 25-hydroxy vitamin D changes into an active form of the vitamin. The active form of vitamin D helps control calcium and phosphate levels in the body as well as a large number of other very important functions.

#### Notes to Clinician

General Comment: 25-Hydroxy vitamin D is the inactive form; active form is 1-25 D calcitriol which is a steroid hormone and converted in the small intestine, liver and kidneys.  
Marker is high: Rule out excess intake from dietary supplements.

### > WBC (White Blood Cells) (10.2 x10E3/uL)

There are 5 types of white blood cells which make up approximately 1% of the total blood volume. Their life span is approximately 13-20 days and their production is regulated by the endocrine system. All white blood cells are involved in a large number of immune system activities, depending on which type of white blood cell is needed (Neutrophils, Lymphocytes, Monocytes, Eosinophils and Basophils). Each of these are formed in the bone marrow on a daily basis.

#### Notes to Clinician

General Comment: Immune system cells regulated by endocrine system; affected by elevated blood sugar.  
Marker is high: Look for acute viral or bacterial infection; support a healthy diet and stable blood sugar; provide adrenal support. Dysbiosis or other GI disturbance is possible.

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