Clinician Blood Panel Results

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

For Patient: Brim, Jamie
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 "RBC (Red Blood Cells)" is out of lab range (the Total Score is 480).

Marker "Hemoglobin" is out of lab range (the Total Score is 470).

Marker "RDW (Random Distribution of RBC Weight)" is out of lab range (the Total Score is 460).

Marker "Creatinine, Serum" is out of lab range (the Total Score is 450).

Marker "Platelets" is out of lab range (the Total Score is 440).

Marker "Hematocrit" is out of lab range (but all supplements for this marker are already in the schedule).

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

A pattern for "Increased Neutrophils or Lymphocytes" was found (the Total Score is 420).

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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	104 >>	75 - 86	65 - 99	mg/dL
BUN	19 >	10 - 16	6 - 24	mg/dL
Creatinine, Serum	1.30 >>	0.80 - 1.00	0.57 - 1.00	mg/dL
Sodium, Serum	140	135 - 142	134 - 144	mmol/L
Potassium, Serum	4.1	4.0 - 4.5	3.5 - 5.2	mmol/L
Chloride, Serum	101	100 - 106	97 - 108	mmol/L
Carbon Dioxide, Total	26	21 - 26	18 - 29	mmol/L
Calcium, Serum	9.4	9.2 - 10.0	8.7 - 10.2	mg/dL
Protein, Total, Serum	7.4	6.9 - 7.4	6.0 - 8.5	g/dL
Albumin, Serum	4.6	4.0 - 4.8	3.5 - 5.5	g/dL
Bilirubin Total	0.2	0.1 - 1.2	0.0 - 1.2	mg/dL
Alkaline Phosphatase	108 >	70 - 100	39 - 117	IU/L
AST (SGOT) (Aspartate aminotransferase)	15	10 - 30	0 - 40	IU/L
ALT (SGPT) (Alanine Aminotransferase)	14	10 - 30	0 - 32	IU/L
CBC, Platelet Ct, and Dif				
RBC (Red Blood Cells)	5.30 >>	4.00 - 4.50	3.77 - 5.28	x10E6/uL
Hemoglobin	16.0 >>	13.5 - 14.5	11.1 - 15.9	g/dL
Hematocrit	47.2 >>	37.0 - 44.0	34.0 - 46.6	%
MCV (Mean Corpuscular Volume)	89.1	82.0 - 89.9	79.0 - 97.0	fL
MCH (Mean Corpuscular Hemoglobin)	30.2	28.0 - 31.9	26.6 - 33.0	pg
MCHC (Mean Corpuscular Hemoglobin Concentratio	33.9	32.0 - 35.0	31.5 - 35.7	g/dL
RDW (Random Distribution of RBC Weight)	41.1 >>	0.0 - 13.0	12.3 - 15.4	%
Platelets	135 <<	185 - 385	150 - 379	x10E3/uL
Neutrophils	74 >	40 - 60	40 - 74	%
Eosinophils (Eos)	1	0 - 3	0 - 5	%
Basophils (Basos)	1	0 - 1	0 - 3	%
Lymphs (Absolute)	1.3	0.7 - 4.5	0.7 - 3.1	x10E3/uL
Monocytes (Absolute)	0.5	0.1 - 1.0	0.1 - 0.9	x10E3/uL

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Values Outside of the Optimal and/or Laboratory Range

Below Optimal < | Above Optimal > | Below Lab << | Above Lab >>

> Alkaline Phosphatase (108 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 high: Suspect biliary obstruction first; rule out excess vitamin D intake or intestinal hyperpermeability.

> BUN (19 mg/dL)

BUN stands for "Blood Urea Nitrogen" but can also be referred to as Urea. It is removed almost entirely by the kidneys so it is very useful as an initial indicator of kidney dysfunction. However, levels outside of the functional ranges can point to other areas of deficiency in the body as well.

Notes to Clinician

General Comment: Waste product formed by the liver as byproduct of protein metabolism; can indicate kidney insufficiency or intestinal dysbiosis.
Marker is high: Always consider the Bowel Flora Protocol and/or upper digestive support. Livaplex or Livco can also be helpful. Evaluate other kidney markers in conjunction with BUN.

>> Creatinine, Serum (1.30 mg/dL)

Creatinine is a normal waste product that builds up in your blood from using your muscles. This blood marker can be elevated in individuals who participate in excessive physical activity or exercise. Women usually have a lower creatinine levels than men, most commonly due to a lower amount of muscle mass. Your body produces creatinine at a fairly constant rate throughout the day and is eventually excreted through the kidneys.

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>> 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.

>> Hematocrit (47.2 %)

This test measures what percentage of your blood is made up of red blood cells. Normal blood contains white blood cells, red blood cells, platelets, and the fluid portion called plasma. The word hematocrit means to separate. In this test, your red blood cells are separated from the rest of your blood so they can be measured. Your hematocrit (HCT) shows whether you have a normal amount of red blood cells, too many, or too few.

>> Hemoglobin (16.0 g/dL)

This is a blood test to find out how much hemoglobin is in your blood. Hemoglobin is the main part of your red blood cells. Hemoglobin is made up of a protein called globin and a compound called heme. Heme consists of iron and a pigment called porphyrin, which gives your blood its red color. Hemoglobin serves the important role of carrying oxygen and carbon dioxide through your blood. If your hemoglobin is too low, you may not be able to supply the cells in your body with the oxygen they need to survive.

> Neutrophils (74 %)

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.

<< Platelets (135 x10E3/uL)

Platelets are the smallest cells in the blood stream. They live for only 8-10 days and their primary function is to help form clots and stop bleeding. Your bone marrow produces up to 10 trillion platelets per day.

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>> RBC (Red Blood Cells) (5.30 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.

>> RDW (Random Distribution of RBC Weight) (41.1 %)

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