Clinician Blood Panel Results

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

For Patient: Delucia, Eugene Evaluation Date: 10/14/2017

Doctor: Dr. Seminar 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 - Detail

Below Optimal < Above Optimal >	Below Lab	< Above La	b >	
Marker	Value	Optimal Range	Lab Range	Units
CBC, Platelet Ct, and Dif				
WBC (White Blood Cells)	6.9	5.0 - 7.5	3.4 - 10.8	x10E3/uL
RBC (Red Blood Cells)	5.10 >	4.20 - 4.90	4.14 - 5.80	x10E6/uL
Hemoglobin	16.7 >	14.0 - 15.0	12.6 - 17.7	g/dL
Hematocrit	49.3 >	40.0 - 48.0	37.5 - 51.0	%
MCV (Mean Corpuscular Volume)	97.0 >	82.0 - 89.9	79.0 - 97.0	fL
MCH (Mean Corpuscular Hemoglobin)	32.7 >	28.0 - 31.9	26.6 - 33.0	pg
MCHC (Mean Corpuscular Hemoglobin Concentration	33.9	32.0 - 35.0	31.5 - 35.7	g/dL
RDW (Random Distribution of RBC Weight)	14.0 >	0.0 - 13.0	12.3 - 15.4	%
Platelets	255	185 - 385	150 - 379	x10E3/uL
Neutrophils	59	40 - 60	40 - 74	%
Lymphs	27	24 - 44	14 - 46	%
Monocytes	9	4 - 13	4 - 12	%
Eosinophils (Eos)	3	0 - 3	0 - 5	%
Basophils (Basos)	2 >	0 - 1	0 - 3	%
Neutrophils (Absolute)	4.0	1.8 - 7.8	1.4 - 7.0	x10E3/uL
Lymphs (Absolute)	1.9	0.7 - 4.5	0.7 - 3.1	x10E3/uL
Monocytes (Absolute)	0.6	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)	0.1	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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Values Outside of the Optimal and/or Laboratory Range

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> Basophils (Basos) (2 %)

Basophils are one of the five types of white blood cells. They are manufactured in the bone marrow. These small cells appear to sound an alarm when infectious agents invade your blood. They secrete chemicals such as histamine which help control the body's immune response.

Notes to Clinician

General Comment: Involved in allergic responses; release histamine and IgE as appropriate; help mediate hypersensitive reactions.

Marker is high: Rule out intestinal parasites or any kind of inflammation.

> Hematocrit (49.3 %)

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.

Notes to Clinician

General Comment: Key marker for anemia and dehydration; nutrient deficiencies, spleen dysfunction or exogenous testosterone can be involved.

Marker is high: Most commonly due to dehydration; rule out exogenous testosterone exposure.

Hemoglobin (16.7 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.

Notes to Clinician

General Comment: Key marker for anemia and dehydration; can involve vitamin C deficiency, increased testosterone and adrenal dysfuction.

Marker is high: Consider dehydration, adrenal dysfunction and possible exogenous testosterone exposure.

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> MCH (Mean Corpuscular Hemoglobin) (32.7 pg)

This marker measures the average weight of hemoglobin in red blood cells. It can be an indicator of several types of anemia or even digestive insufficiency.

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.

> MCV (Mean Corpuscular Volume) (97.0 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.

> RBC (Red Blood Cells) (5.10 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 dehdration - consider adding Celtic Sea Salt to daily diet. Can also be due to asthma or othe respiratory distress.

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1/28/2018

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RDW (Random Distribution of RBC Weight) (14.0 %)

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.

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