

# Clinician Blood Panel Results

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

**For Patient:** Rhodes, Steve

**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 "Cholesterol, Total" is out of lab range but no supplements were added because this marker is used in pattern "Lipid Dysfunction" below. Also consider starting with the 21 Day Purification.

Marker "LDL Cholesterol" is out of lab range (the Total Score is 490). Also consider starting with the 21 Day Purification.

Marker "Alkaline Phosphatase" is out of lab range but no supplements were added because this marker is used in pattern "Decreased Alkaline Phosphatase" below.

Marker "Albumin/Globulin Ratio" is out of lab range (but no supplements are added when it's Low).

Marker "T. Chol/HDL Ratio" is out of lab range (but no supplements are added when it's High).

\_\_\_\_\_ Blood Panel: Check for Patterns WITH 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®.

A pattern for "Decreased Alkaline Phosphatase" was found (the Total Score is 470). Add A-F Betafood if on a PPI or acid blocker, or if bloating.

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

A pattern for "Digestion: Hypochlorhydria" was found (the Total Score is 460). Zypan may be used in place of DiGest Forte (if on a PPI or acid blocker). Zypan® is not selected because DiGest Forte is in the schedule and is selected.

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## Blood Panel - Detail

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Marker	Value	Optimal Range	Lab Range	Units
<b>Chemistries</b>				
Glucose, Serum .....	93 >	75 - 86	65 - 99	mg/dL
BUN .....	14	10 - 16	6 - 24	mg/dL
eGFR .....	60	> 59	> 59	ml/min/1.73
Sodium, Serum .....	138	135 - 142	134 - 144	mmol/L
Potassium, Serum .....	4.1	4.0 - 4.5	3.5 - 5.2	mmol/L
Chloride, Serum .....	103	100 - 106	97 - 108	mmol/L
Carbon Dioxide, Total .....	27 >	21 - 26	18 - 29	mmol/L
Calcium, Serum .....	9.1 <	9.2 - 10.0	8.7 - 10.2	mg/dL
Protein, Total, Serum .....	7.5 >	6.9 - 7.4	6.0 - 8.5	g/dL
Albumin, Serum .....	3.7 <	4.0 - 4.8	3.5 - 5.5	g/dL
Globulin, Total .....	3.8 >	2.4 - 2.8	1.5 - 4.5	g/dL
Albumin/Globulin Ratio .....	1.0 <<	1.4 - 2.1	1.1 - 2.5	
Bilirubin Total .....	0.5	0.1 - 1.2	0.0 - 1.2	mg/dL
Alkaline Phosphatase .....	36 <<	70 - 100	39 - 117	IU/L
AST (SGOT) (Aspartate aminotransferase) .....	26	10 - 30	0 - 40	IU/L
ALT (SGPT) (Alanine Aminotransferase) .....	26	10 - 30	0 - 32	IU/L
<b>Lipids</b>				
Cholesterol, Total .....	281 >>	180 - 220	100 - 199	mg/dL
Triglycerides .....	119 >	70 - 100	0 - 149	mg/dL
HDL Cholesterol .....	46 <	> 55	> 39	mg/dL
LDL Cholesterol .....	211 >>	80 - 120	0 - 99	mg/dL
T. Chol/HDL Ratio .....	6.1 >>	0.0 - 3.5	0.0 - 4.4	
<b>Immunoassay</b>				
Vitamin D, 25-Hydroxy .....	33.8 <	35.0 - 50.0	30.0 - 100.0	ng/mL

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CBC, Platelet Ct, and Dil				
WBC (White Blood Cells) .....	5.2	5.0 - 7.5	3.4 - 10.8	x10E3/uL
RBC (Red Blood Cells) .....	4.95 >	4.20 - 4.90	4.14 - 5.80	x10E6/uL
Hemoglobin .....	15.2 >	14.0 - 15.0	12.6 - 17.7	g/dL
Hematocrit .....	45.4	40.0 - 48.0	37.5 - 51.0	%
MCV (Mean Corpuscular Volume) .....	91.7 >	82.0 - 89.9	79.0 - 97.0	fL
MCH (Mean Corpuscular Hemoglobin) .....	30.7	28.0 - 31.9	26.6 - 33.0	pg
MCHC (Mean Corpuscular Hemoglobin Concentration) .....	33.5	32.0 - 35.0	31.5 - 35.7	g/dL
RDW (Random Distribution of RBC Weight) .....	12.5	0.0 - 13.0	12.3 - 15.4	%
Platelets .....	202	185 - 385	150 - 379	x10E3/uL
Lymphs .....	29	24 - 44	14 - 46	%
Monocytes .....	11	4 - 13	4 - 12	%
Eosinophils (Eos) .....	2	0 - 3	0 - 5	%
Basophils (Basos) .....	1	0 - 1	0 - 3	%
Neutrophils (Absolute) .....	3.0	1.8 - 7.8	1.4 - 7.0	x10E3/uL

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### < Albumin, Serum (3.7 g/dL)

Albumin is the most abundant transport protein in the body, representing 60% of total plasma proteins. It moves vitamins, proteins, hormones, amino acids, and minerals, including calcium and magnesium through the blood stream. It is produced in the liver from amino acids which come from dietary protein and is essential for proper immune system function. It can be affected by poor digestion or insufficient protein intake.

#### Notes to Clinician

General Comment: Produced by the liver from protein in the diet; needed for optimal immune function.  
Marker is low: Highly affected by poor protein intake and hypochlorhydria.

### << Albumin/Globulin Ratio (1.0 )

The Albumin/Globulin Ratio is used to measure the levels of protein in your body. Each of these proteins are very important and have different functions or jobs to do. This test provides information about the ratio between the two, ensuring you don't have more of one kind than another.

### << Alkaline Phosphatase (36 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.

### < Calcium, Serum (9.1 mg/dL)

This test indicates how much calcium is in the bloodstream rather than how much is in the bones. Measuring calcium is an excellent indicator of parathyroid function, digestive efficiency and the ability of your body to use and absorb other vitamins and minerals. True calcium deficiency has more to do with the body's inability to absorb calcium in the small intestine than the actual need for supplemental calcium.

### > Carbon Dioxide, Total (27 mmol/L)

This test measures the amount of carbon dioxide in your blood. When you digest food, your body makes carbon dioxide as a waste product in the form of a gas. Your blood carries this gas to your lungs, where you exhale it and exchange it for oxygen throughout the day. In the body, most of the CO<sub>2</sub> is in the form of a substance called bicarbonate. Therefore, the CO<sub>2</sub> blood test is really a measure of your blood bicarbonate level.

#### Notes to Clinician

General Comment: Supplementation may not be needed. Rule out other contributing dietary and lifestyle factors.  
Marker is high: Rule out antacid use, excessive diarrhea or vomiting, or respiratory issues.

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### >> Cholesterol, Total (281 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.

### > Globulin, Total (3.8 g/dL)

Globulin is made up of different proteins called alpha, beta, and gamma types. Some of these globulins are made by the liver while others are made by the immune system. Certain globulins bind with hemoglobin. Other globulins transport metals, such as iron, in the blood stream and can also help fight infection.

#### Notes to Clinician

General Comment: Component of immune system; part of total protein; key indicator for liver or digestive dysfunctions.

Marker is high: Elevated levels can indicate inflammation or infection in the GI tract; important to support overall digestion.

### > Glucose, Serum (93 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 high: Elevated levels indicate long-term sugar-handling issues. Important to correct diet and stabilize blood glucose levels.

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### < HDL Cholesterol (46 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.

### > Hemoglobin (15.2 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 dysfunction.

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

### >> LDL Cholesterol (211 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.

### > MCV (Mean Corpuscular Volume) (91.7 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.

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### > Protein, Total, Serum (7.5 g/dL)

Your body is made of protein so ensuring protein levels in the blood are at their optimal levels is very important. Total protein in the blood is composed of albumin and globulin. Lack of dietary intake or inadequate hydrochloric acid in the stomach can lead to decreased protein levels. Normal protein values also help maintain fluid balance in the tissues, preventing edema.

### > RBC (Red Blood Cells) (4.95 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 other respiratory distress.

### >> T. Chol/HDL Ratio (6.1 )

This is a calculated measurement that many conventional health care practitioners use to determine possible cardiovascular health. Studies have shown that cholesterol is not as correlated with heart disease as was previously thought. Because the functional ranges of cholesterol may be higher than typically recommended, this ratio may not provide much useful information. To calculate your cholesterol ratio, divide your high-density lipoprotein (HDL) cholesterol number into your total cholesterol number.

### > Triglycerides (119 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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### < Vitamin D, 25-Hydroxy (33.8 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 low: Rule out excessive sunscreen use, support digestion and detoxification. Retest every 6-8 weeks to ensure adequate level is obtained.

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