

Lab Id	Name	Gender
4-120		FEMALE
Lab Date	Created	Updated
	Oct 03, 2018 10:39:04 AM EDT	Oct 03, 2018 10:46:26 AM EDT

Chemical Name	Result	Optimum Range	Usual Range	Chemical Description
Magnesium	2.2	2.6 - 2.2 Mg/dL	2.6 - 1.3 Mg/dL	Magnesium is required for ADP as a source of energy and is concentrated in the bone, cartilage, and within the cell itself. This blood value represents only 1% of the total body levels of magnesium. Magnesium is necessary for protein and carbohydrate metabolism, contraction of muscles, heart function and certain nerve function. As a chelating mineral for aluminum this nutrient is important for body balance of toxic minerals. A necessary mineral for each beat of the heart.
Sodium	143.0	144.0 - 140.0 mEq/L	148.0 - 135.0 mEq/L	Reflects body fluid control and kidney function. Sodium is an extra cellular nutrient and is regulated in the body by mineral corticoid hormones for balance. It helps acid/alkaline balance as well as transmitting of nerve impulses.
Potassium	4.6	4.6 - 4.0 mEq/L	5.5 - 3.5 mEq/L	Potassium: Reflects health of the heart muscles and mineral exchange for proper heart regulation. Potassium is the major intracellular electrolyte that must be in balance with sodium. These levels are determined by the health of the adrenal glands.
Chloride	100.0	105.0 - 100.0 mEq./l	110.0 - 96.0 mEq./l	Chloride reflects proper fluid exchange across cell membranes, bowel and bladder. It is a blood electrolyte that is in the extracellular spaces.
Carbon Dioxide (CO2)	28.0	28.0 - 24.0 mEq/L	30.0 - 18.0 mEq/L	Carbon Dioxide represents 60% of the blood buffering capacity. However this is not the most accurate measurement for determining body pH balance alone. Urine and saliva pH tests should be performed.
BUN- Blood Urea Nitrogen	18.0	18.0 - 13.0 Mg/dL	18.0 - 7.0 Mg/dL	Gives metabolic reflection of liver, kidney, and other gland functions. This is a waste product formed by amino acids, the building blocks of protein performed within the liver. BUN with CO2 constitutes the final production of protein metabolism.

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Creatinine	0.8	1.0 - 0.8 mg/dl	1.03 - 0.44 mg/dl	Creatinine is a waste material from muscle catabolism (breakdown). It is removed from the body by kidneys and is produced at a constant rate depending on the muscle mass of individual. As long as muscle mass remains constant, creatinine production will remain constant.
Calcium	9.7	9.9 - 9.6 mg/dl	10.6 - 8.5 mg/dl	One of the top four macro-minerals which is associated with protein absorption through intestinal membranes. This mineral is a critical indicator of primary protein and fat digestion, absorption, and assimilation in the bowel.
eGFR	60.0	121.0 - 60.0 ML/Min	120.0 - 60.0 ML/Min	Glomerular filtration rate (GFR) describes the flow rate of filtered fluid through the kidney. Creatinine clearance rate is the volume of blood plasma that is cleared of creatinine per unit time and is a useful measure for approximating the GFR. The results of these tests are important in assessing the excretory function of the kidneys.
Protein Total	7.0 🟡	7.6 - 7.1 ml	8.3 - 6.4 ml	Protein: A representation of Albumin, Globulin and Fibrinogen. These protein molecules transport nutrients and help maintain proper pressure between plasma cells.
Globulin	2.3 🟡	3.0 - 2.4 g/100ml	4.0 - 2.0 g/100ml	Globulins are a water-soluble class of proteins, which reflects antibodies(in response to infection, allergic reactions, and organ transplants), other non-cellular defenses, and enzymes involving infection and immunity.
Alkaline Phosphatase	47.0 🔴	80.0 - 60.0 u/l	130.0 - 50.0 u/l	Alkaline Phosphatase: An enzyme produced by cellular activity of bones or liver. This level can be an indication of degeneration or repair processes that may be in progress. AIP is a zinc dependent enzyme.
SGOT/AST	15.0 🟡	22.0 - 18.0 U/L	31.0 - 0.0 U/L	SGOT (AST): Enzyme of the bowel, liver or gallbladder.
SGPT/ALT	18.0	22.0 - 18.0 mEq/l	31.0 - 0.0 mEq/l	SGPT/ALT Serum Glutamic Pyruvic Transaminase, (Alinine Aminotransferase) An enzyme associated with liver function.
Bilirubin, Total	0.4 🟡	0.7 - 0.5 mg/dl	1.5 - 0.1 mg/dl	Total Bilirubin: Reflects the elimination function of liver and gallbladder. When old red blood cells die(hemolysis) they are converted to bilirubin and then removed from the body via the liver and gallbladder as bile. Bile acts to breakdown essential fats for cell function and bile also helps to excrete toxic rancid fats from the body.

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Glucose	90.0	90.0 - 75.0 Mg/dL	100.0 - 65.0 Mg/dL	Glucose is the fasting blood sugar, the preferred fuel for the energy cycle of the body under normal conditions. Approx. 80% of body energy comes from glucose.
Anion Gap	15.0	15.0 - 7.0 U/L	16.0 - 6.0 U/L	Anion Gap: The difference between Sodium and Chloride - CO ₂ . This measurement can help to verify lactic acidosis and possible free radical damage.
Cholesterol	219.0 	180.0 - 150.0	200.0 - 120.0	All hormones in the male and female body are manufactured from this as a starting material. Up to 1800 mg is produced in the liver daily for cell and hormone support. Dietary intake of Cholesterol is necessary.
Cholesterol HDL	92.0	120.0 - 55.0 mg	120.0 - 40.0 mg	HDL Cholesterol: High Density Lipoprotein, these are considered the "Good guy cholesterol". They act as artery cleansers. HDL is higher in protein and represents the presence of good protein metabolism.
Cholesterol LDL	118.0 	90.0 - 50.0 mg/dl	99.0 - 0.0 mg/dl	Low Density Lipoprotein, Smaller LDL particles are more susceptible to oxidative damage, these lipids are well documented for determining risk of cardiovascular disease. It is the LDL, which accumulate in the matrix connective tissue of the vessels.
Triglyceride	42.0 	115.0 - 79.0 mg/dl	150.0 - 0.0 mg/dl	Triglycerides: A form of fat they are a major supply of stored energy in the blood.
Albumin/Globulin A/G Ratio	2.0	2.0 - 1.5	2.7 - 1.1	Albumin/Globulin Ratio A/G: This ratio helps in the differentiation of functional versus organic imbalances in the liver, kidneys or immune system. Digestive factors can be determined from A/G ratio.
WBC (White Blood Cell)	3.4 	7.0 - 5.0 x1000/cu.mm	11.0 - 4.0 x1000/cu.mm	Total White Blood Cell count reveals the resistance mechanism of the blood to fight infectious antibodies. During a state of infection or inflammation, WBCs move freely through the blood, destroying invading bacteria, fungus, parasites and viruses.
RBC (Red Blood Cells)	4.51	4.8 - 4.2 mil	5.1 - 3.8 mil	(RBC) Red Blood Cells: Oxygen and nutrient transport cells of the body.
Hemoglobin	14.1	15.5 - 13.5 g/dl	15.5 - 11.7 g/dl	Hemoglobin is the iron containing and oxygen pigmentation in the blood.
Hematocrit	43.3 	43.0 - 39.0 %	44.0 - 34.0 %	Percentage of cells in whole blood

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MCV (Mean Corpuscular Volume)	96.0 📈	88.0 - 85.0 cu. microns	97.0 - 80.0 cu. microns	(MCV) Mean Corpuscular Volume: Indicates the size of the average red blood cell.
MCH (Mean Corpuscular Hemoglobin)	31.0	32.0 - 27.7 uu gms	32.0 - 27.0 uu gms	(MCH) Mean Corpuscular Hemoglobin: Determines the average weight of the hemoglobin found in red blood cells.
MCHC (Mean Corpuscular Hemoglobin Concentration)	33.0	35.0 - 33.0 U/100 ml (%)	37.0 - 32.0 U/100 ml (%)	(MCHC) Mean Corpuscular Hemoglobin Concentration: Determines if the average red blood cell is anemic.
Platelets	282.0 📈	250.0 - 200.0 K/cu. mm	350.0 - 150.0 K/cu. mm	Platelets: Small fragments of cells which cause the blood to clot. These are stimulated by injury or stress to the body.
Neutrophils	44.0 📉	65.0 - 55.0 %	74.0 - 40.0 %	A chief granulocyte, especially effective as an engulfer (phagocyte) of any cellular debris from catabolism or foreign material in the bloodstream. Functioning as phagocytes, neutrophils release enzymes and seek out to destroy invading organisms in the first line of immune defense.
Lymphocytes	43.0 📈	40.0 - 25.0 %	48.0 - 19.0 %	Lymphocytes are white blood cells involved in the resistance to bacteria, viruses, allergies, infections, antibody production to fight cancer cell formation, and destroying the toxic products of protein metabolism.
Monocytes	11.0 📈	7.0 - 4.0 % of WBC	9.0 - 3.0 % of WBC	Monocytes: These cells are produced in the bone marrow, circulate in the blood, then go into tissue to become macrophage who look for foreign invaders to destroy. In times of increased inflammation in the body, monocytes respond to restore tissue damage. Interleukin 10(IL-10) is an anti-inflammatory cytokine that is primarily produced by monocytes. (https://www.ncbi.nlm.nih.gov/pubmedhealth/PMHT0022057/)
Eosinophils	2.0	2.0 - 0.1 %	7.0 - 0.1 %	Eosinophils are granulocytes, which are needed by the body to protect against allergic infection of the lungs, bowels, throat and skin. During episodes of an allergic response or parasitic infection these cells will be present in large numbers.

Chemical Name	Result	Optimum Range	Usual Range	Chemical Description
Vitamin D3 (Cholecalciferol)	67.0 🟡	100.0 - 70.0 ng/ml	100.0 - 32.0 ng/ml	Vitamin D (Cholecalciferol 25-Hydroxy D3): A natural hormone which acts in the body to increase tissue repair and immune support. Bone building, muscle building and calcium absorption depend on adequate D3. It is also known as a neurohormone affecting both the endocrine and nervous systems.
Thyroid Stimulating Hormone TSH	4.8 🔴	3.0 - 1.0 IU/ML	4.5 - 0.45 IU/ML	TSH Thyroid Stimulating Hormone: TSH, secreted from the pituitary gland, regulates the uptake of iodine as well as the synthesis and secretion of thyroid hormones. TSH secretion is regulated by negative feedback by circulating free thyroid hormone. Even though it is also stimulated by hypothalamic thyrotrophin-releasing hormone (TRH), this can be overridden by abnormally high circulating levels of free T4. TSH is not an adequate marker for determining thyroid health, Thyroid hormones must be considered for complete thyroid assessment.
Ferritin (premenopause)	67.0	122.0 - 15.0 ng/mL	150.0 - 15.0 ng/mL	Ferritin is a globular protein containing 20% iron that is found or stored in the intestines, liver, and spleen. It is the most reliable indicator of total body iron status and reflects the body's iron stores.
Free T3, Triiodothyronine (2.0-4.4)	2.4 🟡	4.2 - 2.5 pg/ml	4.2 - 2.3 pg/ml	Triiodothyronine T3 is a thyroid hormone and affects almost every physiological process in the body, including metabolism, body temperature, heart rate and growth and development. As a hormone on target tissues T3 is approximately four times more potent than those of T4. About 20% of thyroid hormone is produced as T3 and 80% is produced as T4.
Free T4 (.7-1.53)	1.7 🟡	1.53 - 0.7 ng/dl	4.9 - 1.2 ng/dl	T4 Free Thyroxine): The primary free and unbound thyroid hormone produced in the thyroid gland, an energy stimulator of the body. Free T4 is unbound and the most available for cellular use and energy.
Coronary Heart Disease Risk (CHD)	2.38	3.0 - 0.0 ratio	4.0 - 0.0 ratio	Determines the risk to heart disease. Total Cholesterol/HDL
BUN/Creatinine Ratio	22.5 🟡	20.0 - 12.0 U/L	25.0 - 6.0 U/L	BUN/Creatinine Ratio is an assessment for determining chronic renal dysfunction.
Anion Gap	15.0 🟡	12.0 - 7.0 U/L	15.0 - 5.0 U/L	Anion Gap: The difference between Sodium and Chloride - CO2. This measurement can help to verify lactic acidosis and possible free radical damage.

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Triglyceride/HDL Ratio	0.46	1.5 - 0.0 ratio	4.0 - 0.0 ratio	Given as a marker for the type of LDL molecules in your blood. Large particles do not cause as much harm as the denser non-protective molecules associated with plaque deposits and increase risk to heart disease.

Out Of Range Chemicals

Chemical Name	Action
Protein Total ⬇️	<p>Low Protein is an indicator of malnutrition and possible liver insufficiency. Consider digestive support and HCL for the stomach to aid in protein digestion. Recommendations: ABSINTHIUM or ZYPAN, ABUNDANT C(this helps body create HCL)</p>
Globulin ⬇️	<p>**Low Globulin levels indicate a lowered immune system reserve, malnutrition, liver dysfunction and/or impaired protein digestion and metabolism. Gluten and other environmental chemicals, which damage intestinal villa, can impede globulin production. Most common causes of functional globulin abnormalities is related to LOW HCL. Decreased levels may suggest putrification and fermentation when HCL levels are low. Recommendations: ABUNDANT C, ABSINTHIUM or ZYPAN, ABUNDANT GUT/ENERGY, ABUNDANT REPAIR, ABUNDANT LIVER **Food sensitivity testing with ELISA/ACT(ask us to send this to you or pick up at our center), followed by careful dietary plan should be considered.</p>
Alkaline Phosphatase ⬇️	<p>Low Alkaline Phosphatase suggests exhausted adrenal system or low thyroid function, usually stress related. Low levels of zinc possible as ALP is a zinc dependent enzyme. Improving adrenal exhausting can be an extensive process and may require many months. Improving lifestyle habits; rest and reducing physical and emotional stress are a must in conjunction with nutritional support for the endocrine system and the adrenal glands. Glandulars, herbal adaptagens, and B12 support are important. It is important to verify anemia and low Hydrochloric acid (HCL)when ALP is low. More Stress assessments should be considered. ABUNDANT MULTI, ABUNDANT MAGNESIUM or ABUNDANT BONES, ABUNDANT CELL COMMUNICATION, ABUNDANT IMMUNITY, ABUNDANT CLARITY or ABUNDANT BLOOD VESSELS, ABUNDANT ADRENALS or ADRENAL LF, ADAPTO CODE, ADRENO CODE, THYRO CODE, ABSINTHIUM or ZYPAN, ABUNDANT IMMUNITY ZINC</p>
SGOT/AST ⬇️	<p>Low SGOT levels indicate a deficiency of endocrine function possible, due to decreased oxygen available to the cells involved. Vitamin E and exercise are needed. A fatty liver is probable therefore cleansing of the liver and gallbladder is necessary. Recommendations: ABUNDANT LIVER, ABUNDANT PATHWAYS DETOX, ABUNDANT GUT/ENERGY, LIVER MILIEU</p>

Chemical Name	Action
Bilirubin, Total ⬇️	<p>Low Total Bilirubin indicates inefficient blood cell breakdown by the spleen and liver. Specific support for these organs is recommended. The manufacturing of new red blood cells in the bone marrow is often dysfunctional here. Nutritional support to enhance bone marrow production of RBC's may include protein, iron, B12, B6, folic acid and HCL support.</p> <p>Recommendations: ABUNDANT BLOOD VESSELS or ABUNDANT ANEMIA PROTECTION, ABSINTHIUM or ZYPAN, LIVER MILIEU, AF BETA FOOD</p>
Cholesterol ⬆️	<p>High levels of cholesterol are seen in fatty and toxic liver conditions.</p>
Cholesterol LDL ⬆️	<p>Elevated LDL is associated with free radical oxidation and increase risk to heart disease. Increase antioxidant intake with vegetables, turmeric, etc and reduce animal / trans fats (margarine, and heat processed oils). Cleansing of the liver and gallbladder is important. Glutathione supports liver function(in ABUNDANT PATHWAY/DETOX. Be sure bowels are moving daily. Recommendations: ABUNDANT LIVER, ABUNDANT PATHWAYS/DETOX or TRIZOMAL, ABUNDANT METABOLISM, ABUNDANT BRAIN OMEGAS, ABUNDANT C</p>
Triglyceride ⬇️	<p>Low Triglycerides usually reflect reduced carbohydrate utilization and/or hypoglycemia, often seen with an increased sensitivity to stress. Pancreas support can be beneficial with choline. Protein malnutrition and low levels of HCL are possible. Recommendations: ABSINTHIUM OR ZYPAN OR METAGEST, ABUNDANT MULTI, ABUNDANT CELL COMMUNICATION, PANCREA LIFE FORCE OR CATALYSTE 7</p>
WBC (White Blood Cell) ⬇️	<p>Low WBC indicates a weakened immune system which, when due to decreased lymphocytes, is associated with a tendency toward malignant disease or infection. Chronic low WBC is associated with heavy metals in the bone marrow. Recommendations: ABUNDANT C, ABUNDANT MULTI, ABUNDANT IMMUNITY, ECHINACEA 1:2</p>
Hematocrit ⬆️	<p>Elevated Hematocrit is suggestive of dehydration, overactive stimulators from the kidney, or decreased spleen breakdown of red blood cells. It can also be seen as an early sign of over production of RBC.s in the bone marrow.Hyperchromic anemia is possible. General toxicity is common with elevated Hematocrit. Recommendations: ABUNDANT PATHWAYS/DETOX, REHYDRATE, INCREASE FLUIDS TO HALF BODY WEIGHT IN OUNCES</p>
MCV (Mean Corpuscular Volume) ⬆️	<p>Elevated MCV indicates that the red blood cells are large in volume and are generally older due to a failure of the spleen to retire them at the proper time. Macrocytes (oversized RBC) are generally present in large numbers and is commonly seen with low B12 and folic acid. Suggestions: ABUNDANT BLOOD VESSELS</p>

Chemical Name	Action
Platelets ⬆️	<p>Elevated Platelets indicate thick blood or a stress within the bone marrow. Premature blood clotting, arteriosclerosis, cancer, inflammatory arthritis, anemia, pregnancy, oral contraceptives are all possible related issues. More water and additional vitamin C are needed. Exercise is beneficial to thin blood and increase blood flow. Enzymes therapy can support cleaning up the blood with high platelets. Ginkgo Biloba, vitamin E, and EFAs from flax and fish oil is recommended. Since obesity can contribute to increased platelet aggregation, weight loss is important. Recommendations: MARCOZYME, ABUNDANT C, MCT OIL, GINKGO INTRINSIC, ABUNDANT LIVER, ABUNDANT BRAIN OMEGAS</p>
Neutrophils ⬇️	<p>Decreased Neutrophils are seen with depressed bone marrow activity, which affects the manufacturing of new red and white blood cells. Possible issues with ACUTE viral or bacterial infections. Magnesium, Calcium, Vitamin B12, Folic Acid, Vitamin D and Zinc are beneficial. Immune building herbs such as Olive Leaf, Echinacea, Andrographis, Burdock and Berberine should be considered. ABUNDANT MAGNESIUM or ABUNDANT BONES, ABUNDANT IMMUNITY ZINC, ABUNDANT MULTI, ABUNDANT VESSEL GUARD, ABUNDANT C, OLIVE LEAF or ECHINA INTRINSIC, BACTERIA or VIRAL TOX with DRAINAGE MILIEU</p>
Lymphocytes ⬆️	<p>Elevated Lymphocytes indicate activity by the immune system. Excessive lymphocytes are an indication of the body's ability to handle toxins so you may suspect SYSTEMIC TOXINS. Possible issues with CHRONIC VIRAL but also possible bacterial infections. Often they will increase to a level equal to or exceeding the neutrophil level and the need for ascorbate vitamin C, thymus support and B vitamins. Echinacea is recommended to enhance immune balancing properties and help cleanse the lymph system. Exercise is beneficial for lymphatic health and studies have shown that regular exercise can reduce the risk of cancer up to 250%. ABUNDANT C, ABUNDANT BLOOD VESSELS, ABUNDANT MULTI, OLIVE LEAF INTRINSIC or ECHINACEA 1:2, VIRA Tox or BACTERIA Tox with DRAINAGE MILIEU</p>
Monocytes ⬆️	<p>Elevated monocytes are present during periods of inflammation, bacterial infection, Epstein-Barr virus, chronic infection, prostate hypertrophy, ovarian or uterine dysfunction, and tissue breakdown. By occasionally implementing a vegetarian diet by reducing meats, eggs and dairy products, the body will dramatically lower arachadonic acid which contributes to elevated monocytes. Recommendations: ABUNDANT C, MARCOZYME, ABUNDANT LIVER, ABUNDANT IMMUNITY, ABUNDANT BRAIN OMEGAS or MCT OIL, BACTERIA TOX PROTOCOL, MONO TOX PROTOCOAL or VIRA TOX PROTOCOL with accompanying DRAINAGE MILIEU and HERBS</p>

Chemical Name	Action
Vitamin D3 (Cholecalciferol) ⬇️	Low levels of D3 pose great health risk of more than 16 different cancers, bone weakness, osteoporosis, muscle loss, lack of energy, increase risk of IBD and slow healing. One hour of sunshine with 80% skin exposure during mid day sun is equivalent to 20,000 IU of vitamin D3. Absorption of nutrients from food and supplementing is important with a healthy gut lining and proper function of digestive organs. Recommendations: ABUNDANT SUNSHINE WITH K2(take with meal), GUT/ENERGY(take away from food) or GI REPLENISH, LIPOGEN, AL 270 ENZYMES
Thyroid Stimulating Hormone TSH ⬆️	Elevated TSH levels are seen in individuals with low Thyroid function. The pituitary gland secretes higher levels of TSH to activate the thyroid to produce more thyroid hormones. When TSH is elevated the thyroid is typically not producing adequate hormones for body balance. Low protein intake or under-utilization is probable. Reduced liver function can also be the underlying problem with Elevated TSH. An elevated TSH with decreased or normal T3 and/or T4 indicates hypothyroidism. Many times with hypothyroidism, the T3 and T4 are normal.(Hashimoto's, pituitary tumor, TSH antibodies) Recommendations: ABUNDANT LIVER, ABUNDANT PATHWAYS/DETOX, ABSINTHIUM OR METAGEST, THYRODEX 150, THYRO CODE, adjustments needed to your thyroid medication
Free T3, Triiodothyronine (2.0-4.4) ⬇️	Lowered levels are associated with lowered thyroid and parathyroid activity. Conversion of T4 to T3 requires selenium and zinc and B6 for adequate function.
Free T4 (.7-1.53) ⬆️	Elevated T4 indicates a hyperactive thyroid or compensation for endocrine imbalance elsewhere in the body. If elevated with low cholesterol consider pituitary dysfunction. Common allergies to gluten found in wheat, oats and other grains have been found in thyroiditis. 90% of thyroiditis cases studied who had elevated thyroid function improved by removing gluten from the diet.
BUN/Creatinine Ratio ⬆️	Elevated Ratio has been associated with kidney dysfunction, posterior pituitary dysfunction and low intake of water. High protein diets also can be a factor. Measure lean tissue and calculate protein needs.
Anion Gap ⬆️	Elevated Anion Gap is seen in conditions of lactic acidosis, kidney failure and possible toxic agents possible. Careful alkaline diet with quality minerals and detoxification should be considered. B1, malic acid, B12 taurine, methionine, cysteine and glutamine are helpful. More Raw Fruits and Vegetables are needed.