

		La	b Resu	ults - L	J.S.				
Client Nam	Client Name								
Units LAB RANGE				B RANGE IDEAL RANGE		DATE			
CATEGORIES		Min	Max	Min	Max		Possible Interpretation		
Lab Markers						Results	High	Low	Follow-up
							Diabetes; insulin resistance; thiamin	Hypoglycemia; low adrenal	Test fasting insulin, hemoglobin A1C
Glucose, serum	mg/dL	65.0	110.0	75.0	89.0		deficiency; stress; liver.	0.000	
							Gout; atherosclerosis; oxidative stress; rheumatoid arthritis; kidney;	Deficiency of molybdenum, B-12/folate and/or copper	If high, evaluate for signs and symptoms of joint pain. If low, check for other signs of B12 deficiency and
Uric acid, serum (female)	mg/dL	1.8	7.0	3.2	5.5		circulation; leaky gut syndrome	апа/от соррет	mineral deficiency (home tests)
and acia, ceram (remaie)		1.0	7.0	5.2	5.5		Gout; atherosclerosis; oxidative	Deficiency of molybdenum, B-12/folate	If high, evaluate for signs and symptoms of joint pain.
							stress; rheumatoid arthritis; kidney;	and/or copper	If low, check for other signs of B12 deficiency and
Uric acid, serum (male)	mg/dL	1.8	7.0	3.7	6.0		circulation; leaky gut syndrome		mineral deficiency (home tests)
							Malabsorption; kidney issues;	Malabsorption; liver dysfunction; low	HCl challenge, enzymes, optimize digestion
Blood urea nitrogen (BUN), serum	mg/dL	8.0	28.0	13.0	18.0		dehydration; excessive protein intake;	protein diet	
blood drea filtrogen (Bolv), serdin	mg/uL	8.0	28.0	13.0	16.0		hyperadrenal Urinary tract congestion/obstruction;	Muscle wasting; malabsorption	HCl challenge, enzymes, optimize digestion
Creatinine, serum	mg/dL	0.5	1.2	0.7	1.1		kidneys; prostate	,	
Estimated glomerular filtration rate	mL/min/1.73								referral to kidney specialist
(eGFR), serum	m^2	59.0	-	59.0	-				
Estimated glomerular filtration rate	mL/min/1.73								referral to kidney specialist
(eGFR) (African American), serum	m^2	59.0	-	59.0	-				
BUN/Creatinine Ratio	-	8.0	27.0	8.0	27.0		See BUN & Creatinine	See BUN & Creatinine	HCl challenge, enzymes, optimize digestion
							Hyperadrenal; dehydration	Hypoadrenal; edema; laxative use	check for signs of edema or dehydration, Adrenal
									Stress Index Test, HeartMath and other stress
Sodium, serum	mEq/L	135.0	148.0	135.0	140.0				management skills
							Hypoadrenal; dehydration; acidosis	Hyperadrenal; hypertension; diuretics	Check for signs of edema or dehydration, Adrenal
Potassium, serum	mEq/L	3.5	5.5	4.0	4.5				Stress Index Test, HeartMath and other stress management skills
r otassiam, serum	meq/e	3.3	5.5	4.0	4.5		Acidosis; hyperadrenal	Hypochlorhydria; alkalosis; hypoadrenal	HCl challenge, ph monitoring and appropriate diet
							, , , , , , , , , , , , , , , , , , ,		changes, Adrenal Stress Index Test, HeartMath and
Chloride, serum, plasma	mEq/L	99.0	111.0	100.0	106.0				other stress management skills
Carbon dioxide, total, serum	mEq/L	19.0	31.0	25.0	30.0		Alkalosis; hyperadrenal;	Acidosis; thiamin (B-1) deficiency;	pH monitoring and appropriate diet changes, HCl
Carbon dioxide, total, serum	IIIEQ/L	19.0	31.0	25.0	30.0		hypochlorhydria; respiratory distress Hypothyroid; vitamin D excess;	hyperventilation Hypochlorhydria;	challenge Check serum vitamin D, HCl challenge, optimize
							hypoadrenal; hyper- parathyroid	hypoparathyroid;deficiency of vitamin D,	omega 6 to 3 fat ratio per the chart and consider
Calcium, serum	mg/dL	8.7	10.5	9.2	10.1			essential fatty acids, or calcium	blood spot fatty acid test
,	S.						Hypoparathyroid; fracture; excess	Hyper parathyroid; hypochlorhydria;	Test and adjust vitamin D supplementation, HCl
							vitamin D intake; excess dietary	hyperinsulin; high carb diet; vitamin D	challenge, enzymes, optimize digestion
Phosphorus, serum	mg/dL	2.3	4.8	3.5	4.0		phosphate (soda); kidney	deficiency	
	1						Dehydration	Hypochlorhydria; poor digestion; GI	Protein intake, HCl challenge, enzymes, optimize
								inflammation; liver; low protein diet	digestion, supplement with raw protein powder (Sunwarrior, Warrior Food, Vitamin Code raw protein)
Protein, total, serum	g/dL	6.2	8.3	6.9	7.4				until digestive status is optimized
,,	8/						Dehydration	Hypochlorhydria; liver; oxidative stress;	Rule out liver problems, check protein intake, HCl
								vitamin C deficiency	challenge, enzymes, optimize digestion, supplement
									with raw protein powder (Sunwarrior, Warrior Food,
Albumin, serum	g/dL	3.8	5.0	4.0	5.0				Vitamin Code raw protein) until digestive status is optimized, anti-inflammatory diet
Albumin, Serum	g/uL	3.0	3.0	4.0	5.0				openinged, and initialinitatory diet



Client Name									
	Units	LAB RANGE		IDEAL RANGE		DATE			
CATEGORIES		Min	Max	Min	Max		Possible Interpretation		
Lab Markers						Results	High	Low	Follow-up
Globulin, total, serum	g/dL	2.0	3.8	2.4	2.8		Hypochlorhydria; liver; oxidative stress; metals/chemicals; autoimmune/allergy	Poor digestion; GI inflammation; low immunity	Rule out liver problems, check protein intake, HCl challenge, enzymes, optimize digestion, supplement with raw protein powder (Sunwarrior, Warrior Food, Vitamin Code raw protein) until digestive status is optimized, anti-inflammatory diet
A/G Ratio	calc	1.1	2.3	1.5	2.0		See Globulin & Albumin	See Globulin & Albumin	,
Bilirubin, serum, total	mg/dL	0.1	1.5	0.2	1.2		Liver/gallbladder; thymus; oxidative stress; RBC hemolysis; Gilbert's syndrome	Spleen	Check liver
Alkaline phosphatase, serum	U/L	27.0	142.0	70.0	90.0		Liver/gall bladder; bone loss/disease; leaky gut syndrome; shingles; vitamin C deficiency	Estrogen dominance; zinc and/or B-6 deficiency; malabsorption; hypothyroid/adrenal	If >120, do isoenzymes
Lactate dehydrogenase (LDH), serum	U/L	89.0	215.0	140.0	180.0		Liver/gall bladder; heart; B12/folate deficiency; inflammation; tissue destruction; viral infection	Hypoglycemia	Isoenzymes if high
Aspartate aminotransferase (AST) (SGOT), serum	U/L	1.0	45.0	10.0	26.0		Liver; heart; muscle breakdown; mono/EBV/CMV	Vitamin B-6 deficiency; alcoholism	If the SGOT is elevated above SGPT, look outside of liver
Alanine aminotransferase (ALT) (SGPT), serum	U/L	1.0	55.0	10.0	26.0		Liver/gall bladder; muscle breakdown; alcoholism	Vitamin B-6 deficiency; early fatty liver; alcoholism	If the SGOT is elevated above SGPT, look outside of liver
Gamma-glutamyltransferase (GGT), serum	U/L	5.0	52.0	10.0	26.0		Liver/gall bladder; pancreas (including insufficiency); excess alcohol;	Vitamin B-6 and/or magnesium deficiency; malabsorption; hypothyroid; oral contraceptives	If GGT is elevated above SGOT & SGPT, problem is more likely in gall bladder, bile ducts & pancreas
Iron, serum	μg/dL	40.0	180.0	85.0	130.0		Liver; hemochromotosis; excess consumption of iron; iron conversion problem (B-12, folic acid, B-6, molybdenum); chronic viral infection	Anemia; hypochlorhydria; internal bleeding	Serum ferritin, look at hemoglobin, hematocrit and MCV, HCL challenge if low
Cholesterol, total, serum	mg/dL	0.1	200.0	150.0	200.0		Hypothyroid; adrenal stress; fat malabsorption; insulin resistance/diabetes; fatty liver; multiple sclerosis; trans fats	Oxidative stress; heavy metal/chemical overload; gallbladder; low fat diet; hyperthyroid; autoimmune; hyperadrenals	VAP; VLDL; C-reactive protein; homocysteine, imaging of heart
Triglycerides, serum	mg/dL	35.0	160.0	50.0	100.0		Insulin resistance/diabetes; high sugar intake; liver; fat malabsorption; alcoholism; stress; hypothyroid	Fat malabsorption; low fat diet; hyperthyroid; autoimmune; hyper adrenals	low sugar diet, avoid refined foods, optimize fat digestion (enzymes)
Cholesterol, high-density lipoprotein (HDL) (low level), serum	mg/dL	40.0	110.0	55.0	110.0		Autoimmune processes; estrogen dominance	Refined carbs; insulin resistance/diabetes; oxidative stress; heavy metal/chemical; fatty liver; hyperthyroid; sedentary lifestyle	Rule out estrogen dominance, if high. If low, increase exercise
Cholesterol, low-density lipoprotein (LDL) (high-level), serum	mg/dL	1.0	130.0	10.0	99.0		Insulin resistance/diabetes; high sugar intake; liver; fat malabsorption; alcoholism; stress; hypothyroid		VAP; VLDL; C-reactive protein; homocysteine, imaging of heart
Triglycerides/HDL ratio, calc THYROID MARKERS	-	0.3	4.0	0.8	1.3				Increase exercise if low: burst training, weights
Thyroid-stimulating hormone (TSH), serum	μIU/mL	0.3	5.7	1.5	3.0		Hypothyroidism	Hyperthyroid; hypopituitary; heavy metals	Additional testing: Total T4, Free T3 and antibodies: thyroid peroxidase (TPO) and Antithyroglobulin if high, thyroid stimulating antibodies, if low



Client Name									
	Units	LAB RANGE IDEAL RANGE		RANGE	DATE				
CATEGORIES		Min	Max	Min	Max		Possible Interpretation		
Lab Markers						Results	High	Low	Follow-up
							Hyperthyroidism, thyroid replacement	Hypothyroid, anterior pituitary	Replenish nutrients, test for antibodies as per TSH
Thyroxine, total, (T4 or TT4), serum	μg/mL	4.5	12.5	6.0	12.0		medication	dysfunction, iodine or selenium deficiency, deficiency of cofactors: B1	follow-up
, , , , , , , , , , , , , , , , , , , ,							Hyperthyroidism, thyroid replacement	Hypothyroid; deficiency of selenium or	Further testing as per TSH
Triiodothyronine (T3) uptake, serum	%	27.0	37.0	28.0	38.0		medication	iodine	
Free Thyroxine Index (FTI), serum		1.2	4.9	1.2	4.9				
Total T3 or TT3 (total triiodothyronine),	ng/dL	100.0	180.0	100.0	180.0				
TI ((57.4)							Hyperthyroid; estrogen dominance; adrenal fatigue	Hypothyroid; iodine deficiency	
Thyroxine, free (FT4), serum	ng/dL	0.7	2.0	1.0	1.5		Hyperthyroid; iodine deficiency, T4	Hypothyroid; selenium deficiency, T4	Test estrogen, testosterone, look for exogenous
Free T3 or FT3 (triiodothyronine, free),							over conversion, excess testosterone	under conversion, estrogen dominance	sources, i.e., birth control pills, hormone replacement
serum	pg/dL	2.0	4.4	3.0	4.5				therapy
Reverse T3 (RT3 or Reverse							Low Free T3 , insufficient T4 to T3	No specific significance	Full thyroid panel and nutritional replacement.
Triiodothyronine), serum	ng/dL	90.0	350.0	90.0	350.0		conversion		
Triiodottiyiotiiile), serdiii	1.6/ 02	30.0	550.0	30.0	550.0		Poor unbinding of thyroid hormones		Full thyroid and hormone evaluation - birth control
							and insufficient levels of free		pills
Thyroxine-binding globulin (TBG), serum	μg/m	18.0	27.0	18.0	27.0		hormones - excess estrogen		
Thyroglobulin antibody screen (or							Autoimmune thyroid, probably	Normal is negative	Immune system balancing protocol, gluten and
antithyroglobulin), serum	IU/mL	0.0	1.0	0.0	1.0		Hashimoto's	N 1: ::	allergen free diet
Thyroid peroxidase (TPO) antibodies,	111/1	0.0	24.0	0.0	2.0		Autoimmune thyroid, probably Hashimoto's	Normal is negative	Immune system balancing protocol, gluten and allergen free diet
serum CBC MARKERS	IU/mL	0.0	34.0	0.0	2.0		Tidaminoto 3		anergen nee diet
CBC IVIARRERS							Acute viral or bacterial infection;	Chronic viral or bacterial infection;	Further testing to determine source of infection,
							stress; highly refined diets; parasites	enzyme deficiency; lupus; raw food diet;	nutritional deficiency
White blood cell count (WBC), whole								deficiencies of B-6, B-12 and/or folic acid;	·
blood	/μL	4.0	10.5	5.0	8.0			food allergies; parasites	
Red blood cell count (RBC) (female),							Dehydration; respiratory distress;	Anemia (iron, B-6, B-12 and/or folic acid);	Retest in 3 months, hydrate properly if high. If low,
whole blood	x10^6/μL	3.9	5.1	3.9	4.5		vitamin C deficiency; polycythemia vera	internal bleeding	look at other markers and possibly test ferritin, iron, B12 -methylmalonic acid
whole blood	λ10 0/μι	3.3	3.1	3.3	4.3		Dehydration; respiratory distress;	Anemia (iron, B-6, B-12 and/or folic acid);	Retest in 3 months, hydrate properly, if high. If low,
Red blood cell count (RBC) (male), whole							vitamin C deficiency; polycythemia	internal bleeding	look at other markers and possibly test ferritin, iron,
blood	x10^6/μL	3.9	5.1	4.2	4.9		vera		B12 -methlymalonic acid
							Asthma/emphysema; polycythemia	Anemia; vitamin C deficiency; digestive	Look at other markers - hct, rbc, mcv and test ferritin,
Hemoglobin (Hb) (female), whole blood	g/dL	12.0	16.0	13.5	14.5		vera; dehydration	inflammation; internal bleeding; copper	iron
Hemoglobin (Hb) (Temale), whole blood	g/uL	12.0	16.0	15.5	14.5		Asthma/emphysema; polycythemia	deficiency Anemia; vitamin C deficiency; digestive	Look at other markers - hct, rbc, mcv and test ferritin,
							vera; dehydration	inflammation; internal bleeding; copper	iron
Hemoglobin (Hb) (male), whole blood	g/dL	12.0	16.0	14.0	15.0			deficiency	
							Asthma/emphysema; polycythemia	Anemia; internal bleeding; digestion	Look at other markers - hct, rbc, mcv and test ferritin,
							vera; dehydration; spleen; deficiency	inflammation; thymus hypofunction;	iron, rule out internal bleeding
Hematocrit (female), whole blood	%	36.0	48.2	37.0	44.0		of B-6; adrenal	deficiencies of vitamin C or thiamin (B-1);	
							Asthma/emphysema; polycythemia	Anemia; internal bleeding; digestion	look at other markers - hct, rbc, mcv and test ferritin,
							vera; dehydration; spleen; deficiency	inflammation; thymus hypofunction;	iron, rule out internal bleeding
Hematocrit (male), whole blood	%	36.0	48.2	40.0	48.0		of B-6; adrenal	deficiencies of vitamin C or thiamin (B-1); parasites	
mematochit (male), whole blood	/0	50.0	46.2	40.0	46.U	<u> </u>		parasites	<u>l</u>



Client Name									
	Units	LAB R	ANGE	IDEAL RANGE		DATE			
CATEGORIES		Min	Max	Min	Max		Possible Interpretation		
Lab Markers						Results	High	Low	Follow-up
							Anemia (B-12/folic acid);	Anemia (iron/B-6); internal bleeding	Urinary methylmalonic acid to test B-12, or
Mean corpuscular volume (MCV), whole							hypochlohydria; vitamin C deficiency;		supplement (sublingual, patch, or shot)
blood	μm^3	82.0	103.0	85.0	92.0		heavy metals; parasites		
Mean corpuscular hemoglobin (MCH),							Anemia (B-12/folic acid);	Anemia(iron/B-6); vitamin C deficiency;	Urinary methylmalonic acid to test B-12, or
whole blood	pg/cell	27.0	34.0	27.0	32.0		hypochlohydria	internal bleeding; heavy metals body	supplement (sublingual, patch, or shot)
Mean corpuscular hemoglobin							Anemia (B-12/folic acid);	Anemia(iron/B-6); vitamin C deficiency;	Urinary methylmalonic acid to test B-12, or
	,						hypochlohydria	internal bleeding; heavy metals body	supplement (sublingual, patch, or shot)
concentration (MCHC), whole blood Red blood cell distribution width (RDW	g/dL	30.9	35.4	32.0	35.0		D. C	burden	
,							Deficiencies of iron, B-12 and/or folate; thalassemia	Blood loss anemia	Urinary methylmalonic acid to test B-12, or
or RCDW)	%	10.8	14.8	0.0	13.0		· '		supplement (sublingual, patch or shot)
Platelet count (thrombocytes), whole							Atherosclerosis	heavy metals, free radicals	Vitamin E and EFAs to thin blood if high, test for
blood	×10^3/μL	150.0	400.0	150.0	450.0				metals and improve antioxidants, if low
Neutrophils, whole blood, number							Bacterial	Viral issue	Find root cause of inflammation/infection
fraction	%	40.0	78.0	40.0	60.0				
Lymphocytes, whole blood, number							Viral issue	Bacterial	Find root cause of inflammation/infection
fraction	%	15.0	50.0	25.0	40.0				
Monocytes, whole blood, number							Acute and healing and recovery	n/a	Find root cause of inflammation/infection
							stages, parasites, liver dysfunction,		
fraction	%	0.0	13.0	0.0	7.0		prostate		5.6
Eosinophils, whole blood, number							Allergy, parasites	n/a	Find root cause of inflammation/infection
fraction	%	0.0	5.0	0.0	3.0				
Basophils, whole blood, number fraction	%	0.0	5.0	0.0	1.0		Inflammation, parasites	n/a	Find root cause of inflammation/infection
Neutrophils (absolute), whole blood	/μL	1.8	7.8	1.8	7.8		Same as above	Same as above	Same as above
Lymphs (absolute), whole blood	/μL	0.7	4.5	0.7	4.5		Same as above	Same as above	Same as above
Monocytes (absolute), whole blood	/μL	0.1	1.0	0.1	1.0		Same as above	Same as above	Same as above
Eosinophils (absolute), whole blood	/µL	0.0	0.4	0.0	0.4		Same as above	Same as above	Same as above
Basophils (absolute), whole blood	/µL	0.0	0.2	0.0	0.2		Same as above	Same as above	Same as above
ADDITIONAL MARKERS									
Homocysteine (female), plasma	mg/L	4.0	10.0	4.0	10.0		Cardiovascular risk	n/a	Further lipid testing, VAP, CRP
Homocysteine (male), plasma	mg/L	4.0	12.0	4.0	12.0		Cardiovascular risk	n/a	Further lipid testing, VAP, CRP
Erythrocyte sedimentation rate (ESR),	mm/hr	0.0	20.0	0.0	20.0		Inflammation	n/a	Find source of inflammation
hs-CRP (high-sensitivity C-reactive	11111/111	0.0	20.0	0.0	20.0		Inflammation, vascular inflammation,	n/a	Find source of inflammation
,	,	0.0	2.0	0.0	2.0		atherosclerosis		This source of inhammation
protein), serum	mg/L	0.0	3.0	0.0	3.0			,	5 11 11 11 11 140 600
Apolipoprotein A-1,serum	mg/dL	110.0	162.0	110.0	162.0		Lipid disorder	n/a	Further lipid testing, VAP, CRP
Apolipoprotein B, serum	mg/dL	52.0	109.0	52.0	109.0		Lipid disorder	n/a	Further lipid testing, VAP, CRP
Reticulocytes count (female), whole							Hemolytic anemia (can be a sign of	Chronic anemia (deficiencies of B-6, B-12,	Medical evaluation if high
blood	%	0.5	2.5	0.5	2.5		serious disease!)	folate and/or iron); hypoadrenal	
							Hemolytic anemia (can be a sign of		Medical evaluation if high
Reticulocytes count (male), whole blood	%	0.5	1.5	0.5	1.5		serious disease!)		_
Hemoglobin A1C (glycated hemoglobin),	hemoglobin	4.8	5.9	4.5	5.0		Diabetes/insulin resistance	Hypoglycemia	Low carb diet and retest
							Nothing indicated by too low,	Nothing indicated by too low	
							hyperinsulinemia, diabetes, metabolic	,	
Insulin, fasting, serum	μIU/mL	2.0	25.0	2.0	5.0		syndrome		



Client Name									
	Units	LAB RANGE		IDEAL	RANGE	DATE			
CATEGORIES		Min	Max	Min	Max		Possible Interpretation		
Lab Markers						Results	High	Low	Follow-up
Iron (transferrin) saturation (calc),							Hemochromotosis; internal bleeding;	Iron deficiency	Supplement as appropriate
	% - iron						deficiencies of B-6, B-12, folate and/or	•	
female, serum	serum/TIBC	12.0	45.0	12.0	45.0		protein		
							Hemochromotosis; internal bleeding;	Iron deficiency	Supplement as appropriate
Iron (transferrin) saturation (calc), male,	% - iron						deficiencies of B-6, B-12, folate and/or		
serum	serum/TIBC	15.0	50.0	15.0	50.0		protein		
							Anemia; internal bleeding	Hemochromotosis; internal bleeding; low	medical evaluation to rule out serious disease
TIBC - total iron binding capacity, serum	mcg/dL	250.0	390.0	250.0	350.0			protein	
Transferrin, serum	mg/dL	200.0	360.0	200.0	360.0				
							Hemochromotosis; excess	Anemia	If high, reduce iron intake , donate blood, evaluation
							consumption of iron; inflammation;		for hemochromatosis
Ferritin (female), serum	ng/mL	10.0	235.0	40.0	110.0		liver; oxidative stress		
, , ,	Ŭ.						Hemochromotosis; excess	Anemia	If high, reduce iron intake, donate blood, evaluation
							consumption of iron; inflammation;		for hemochromatosis
Ferritin (male), serum	ng/mL	10.0	235.0	40.0	200.0		liver; oxidative stress		
retritin (male), serum	11g/111L	10.0	233.0	40.0	200.0		Kidney; hypothyroid	Muscle spasm; epilepsy; hyperadrenal;	Food, supplementation
Magnesium, serum	mEg/L	1.3	2.3	2.0	2.5		Kidney, hypothyroid	malabsorption	1 ood, supplementation
VITAMINS	-V							malabor priori	
							Excess vitamin D intake, kidney stress	Insufficient vitamin D Intake, insufficient	
Vitamin D, 25-hydroxyvitamin D, serum	ng/mL	32.0	100.0	70.0	100.0		1,,	sunlight, kidney stress	
							Excessive vitamin B12 intake	Insufficient vitamin B12 intake, insufficient	
							ZAGOSATO TAGAMA BIZ IIIGARO	stomach acid, intrinsic factor antibodies,	
Vitamin B12, serum	pg/mL	211.0	911.0	800.0	1500.0			sterrage dela, memberater antibodies,	
Folate, serum	ng/mL	5.4	-	5.4	-		Excess intake	Dietary deficiency	



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Units LAB RANGE		ANGE	IDEAL RANGE		DATE				
CATEGORIES		Min	Max	Min	Max		Possible Interpretation		
Lab Markers						Results	High	Low	Follow-up
HORMONES									
Cortisol, serum	μg/dL	0.0	17.0	4.0	22.0		Excess stress	Adrenal burnout	
Progesterone, serum	ng/mL	0.2	28.0	18.0	27.0		Excess supplementation	<u></u>	
Estradiol (E2), serum	pg/mL	19.0	528.0	352.0	450.0				
Sex-hormone binding globulin (SHBG),	μg/mL	18.0	114.0	18.0	114.0				
Testosterone, serum	ng/dL	14.0	76.0	35.0	45.0				
Free testosterone, serum	ng/dL	0.0	2.2	1.0	2.2				
Dehydroepiandrosterone sulfate (DHEA-	mcg/dL	65.0	380.0	275.0	400.0		Adrenal stress, PCOS	Adrenal burnout	
Luteinizing hormone (LH), serum	mIU/mL	0.0	76.3	0.0	76.3		Menopause, perimenopause		
Follicle-stimulating hormone (FSH),							Menopause, perimenopause		
serum	mIU/mL	2.8	17.2	2.8	17.2				
Aldosterone, serum	ng/dL	1.0	16.0	1.0	16.0				
Adrenocorticotropic hormone (ACTH),	pg/mL	6.0	58.0	6.0	58.0				
IMMUNE MARKERS									
	a negative						Lyme's disease antibodies	Normal	
Lyme IgG/IgM antibodies, serum	test is normal	0.0	1.0	0.0	1.0				
Lyme IgG p41 band antibodies, serum	a negative test is normal	0.0	1.0	0.0	1.0		Lyme's disease antibodies	Normal	
	-						Candida overgrowth	Normal	
Candida IgG antibody, serum	antibody	0.0	10.0	0.0	10.0		Candida overgrowth	Normal	
Candida IgM antibody,serum	antibody	0.0	10.0	0.0	10.0		-		
Insulin-like growth factor 1 (IGF -1),							Can be suggestive of low growth hormone (GH)	Possible tumor or growth, pituitary tumor	
serum	ng/mL	117.0	329.0	117.0	329.0		` ,		
l	Negative is						Autoimmune, possibly Lupus	Normal	
Antinuclear Antibodies (ANA), serum	normal	0.0	0.0	0.0	0.0				
Carbohydrate antigen (CA 19-9), serum	U/mL	0.0	35.0	0.0	35.0		Autoimmune disease	Normal	
Carcinoembryonic antigen (CEA), serum	ng/mL	0.0	2.5	0.0	2.5		Cancer marker	Normal	
Sedimentation rate, whole blood	mm/h	0.0	20.0	0.0	20.0		Inflammation	Normal	
							Damage to muscle or heart, some	Normal	
6 1 (CI/) t-t-1 comm		24.0	170.0	340	.72.0		forms of muscular dystrophy if very		
Creatine kinase (CK), total, serum	U/L	24.0	173.0	24.0	173.0		high Autoimmuno disordor	Normal	
Intrinsic factor blocking antibody (IFA)	test is normal	0.0	1.0	0.0	1.0		Autoimmune disorder	Normai	

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