Dr. M. Samm Pryce | Balanced Integration

Functional Health Report

Patient Copy

Sample Patient

Lab Test on Dec 30, 2014
Conventional US Units

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Dr. Pryce's Notes

I will not be putting these in your custom vits due to the Hair Tissue MIneral Analysis EVEN though in this report you will see that they recommend it. The recommendation comes without the knowledge of the actual tissue mineral levels that need to be balanced, thus I have to put it ALL together.

I have tested your thyroid & the entire panel was well within reference range, so I believe the symptoms are coming from the tissue mineral being imbalanced.

* VITAMIN B12 *
Both vitamin B12 and its constituent cobalt, antagonize thyroid activity and disrupt the sodium/potassium relationship. Vitamin B12 should therefore be avoided at this time, especially if you are experiencing hypothyroidism (fatigue, weight gain, etc)

* VITAMIN C *
As vitamin C enhances the absorption of iron and antagonizes the mineral copper, large doses of vitamin C should be avoided until the tissue iron status has improved.

* VITAMIN D *
Vitamin D and PABA are known to antagonize thyroid function and increase the absorption and retention of calcium. Excessive vitamin D supplementation can contribute to a loss of potassium and suppress thyroid expression. You should avoid sources of extra vitamin D and PABA, especially if a hypo-thyroid symptoms are present.

Health Improvement Plan

The Health Improvement Plan takes all the information on this report and focuses on the top areas that need the most attention.

Hyperlipidemia

The results of your blood test indicate that you you have higher than optimal levels of cholesterol and fat in your blood (a condition called hyperlipidemia), which is associated with an increased risk of cardiovascular disease. There is a need for cardiovascular support, especially support to help lower excessive blood fats.

Rationale:
Cholesterol - Total ↑, Triglycerides ↑, LDL Cholesterol ↑, Cholesterol/HDL Ratio ↑

Metabolic Syndrome

The results of your blood test indicate a tendency towards metabolic syndrome and a need for blood sugar support.

Rationale:
Glucose ↑, Triglycerides ↑, Hemoglobin A1C ↑, Cholesterol - Total ↑, LDL Cholesterol ↑

Oxidative Stress

The results of your blood test indicate a tendency towards oxidative stress and shows a need for antioxidant support.

Rationale:
Lymphocytes ↓, LDL Cholesterol ↑

* These statements have not been evaluated by the Food and Drug Administration. This product is not intended to diagnose, treat, cure or prevent any disease.

This Health Improvement Plan has been prepared for by . Additional personalized recommendations for nutritional support may be applicable based on this laboratory evaluation, your history and other clinical findings.

Suggested Individual Nutrient Recommendations

The Health Improvement Plan takes all the information on this report and focuses on the top areas that need the most attention.

Vitamin D Need

The results of your blood test indicate that your vitamin D levels might be lower than optimal and shows a need for vitamin D supplementation.

Rationale:
Vitamin D (25-OH) ↓

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Blood Test Results Report

The Blood Test Results Report lists the results of your Blood Chemistry Screen and CBC Test and shows you whether or not an individual element is outside of the optimal range and/or outside of the clinical lab range.

Above Optimal Range ↑
3 Current 0 Previous

Above Standard Range ↑↑
7 Current 0 Previous

Alarm High
0 Current 0 Previous

Below Optimal Range ↓
2 Current 0 Previous

Below Standard Range ↓↓
0 Current 0 Previous

Alarm Low
1 Current 0 Previous

Element	Current Dec 30 2014	Previous Not Available	Impr	Optimal Range	Standard Range	Units
Glucose	102.00 ↑↑			75.00 - 86.00	65.00 - 99.00	mg/dL
Hemoglobin A1C	5.80 ↑↑			4.50 - 5.50	0.00 - 5.70	%
BUN	13.00			10.00 - 16.00	7.00 - 25.00	mg/dL
Creatinine	0.88			0.80 - 1.10	0.50 - 1.05	mg/dL
BUN/Creatinine Ratio	14.77			10.00 - 16.00	6.00 - 22.00	Ratio
eGFR Non-Afr. American	90.00			60.00 - 128.00	60.00 - 128.00	/min/1.73r
Sodium	138.00			135.00 - 142.00	135.00 - 146.00	mEq/L
Potassium	4.30			4.00 - 4.50	3.50 - 5.30	mEq/L
Sodium/Potassium Ratio	32.09			30.00 - 35.00	30.00 - 35.00	ratio
Chloride	106.00			100.00 - 106.00	98.00 - 110.00	mEq/L
CO2	28.00			25.00 - 30.00	19.00 - 30.00	mEq/L
Anion gap	8.30			7.00 - 12.00	6.00 - 16.00	mEq/L
Protein, total	7.10			6.90 - 7.40	6.10 - 8.10	g/dL
Albumin	4.30			4.00 - 5.00	3.60 - 5.10	g/dL
Calcium	9.30			9.20 - 10.00	8.60 - 10.40	mg/dL
Calcium/Albumin Ratio	2.16			0.00 - 2.60	0.00 - 2.60	ratio
Alk Phos	74.00			70.00 - 100.00	35.00 - 115.00	IU/L
AST (SGOT)	24.00			10.00 - 30.00	10.00 - 35.00	IU/L
ALT (SGPT)	31.00 ↑↑			10.00 - 30.00	6.00 - 29.00	IU/L
Bilirubin - Total	0.50			0.10 - 0.90	0.20 - 1.20	mg/dL
Cholesterol - Total	237.00 ↑↑			160.00 - 180.00	125.00 - 200.00	mg/dL
Triglycerides	157.00 ↑↑			70.00 - 80.00	0.00 - 150.00	mg/dL
LDL Cholesterol	151.00 ↑↑			0.00 - 120.00	0.00 - 130.00	mg/dL
HDL Cholesterol	55.00			55.00 - 70.00	46.00 - 100.00	mg/dL
Cholesterol/HDL Ratio	4.30 ↑			0.00 - 4.00	0.00 - 5.00	Ratio
Triglyceride/HDL Ratio	2.85 ↑↑			0.00 - 2.00	0.00 - 2.00	ratio
Free T3	3.10			3.00 - 3.50	2.30 - 4.20	pg/ml
Total T3	93.00			90.00 - 168.00	76.00 - 181.00	ng/dL

Total T4	7.10			6.00 - 11.90	4.50 - 12.00	µg/dL
T3 Uptake	34.00			27.00 - 37.00	22.00 - 35.00	%
Free Thyroxine Index (T7)	2.41			1.70 - 4.60	1.40 - 3.80	Index
Vitamin D (25-OH)	49.00 ↓			50.00 - 90.00	30.00 - 100.00	ng/ml
Vitamin B12	360.00 ↓			400.00 - 1100.00	200.00 - 1100.00	pg/ml
Folate	17.40			15.00 - 25.00	5.50 - 10.00	ng/ml
Total WBCs	5.70			5.50 - 7.50	3.80 - 10.80	k/cumm
RBC, Male	4.82			4.20 - 4.90	4.20 - 5.80	m/cumm
Hemoglobin, Male	15.20 ↑			14.00 - 15.00	13.20 - 17.10	g/dl
Hematocrit, Male	45.30			40.00 - 48.00	38.50 - 50.00	%
MCV	94.00 ↑			82.00 - 89.90	80.00 - 100.00	fL
MCHC	33.60			32.00 - 35.00	32.00 - 36.00	g/dL
RDW	12.50			11.70 - 13.00	11.00 - 15.00	%
Lymphocytes	1.60 ⚠			24.00 - 44.00	14.00 - 46.00	%
Monocytes	0.50			0.00 - 7.00	4.00 - 13.00	%
Eosinophils	0.20			0.00 - 3.00	0.00 - 3.00	%
Basophils	0.00			0.00 - 1.00	0.00 - 1.00	%

Out of Optimal Range Report

The following results show all of the elements that are out of the optimal reference range. The elements that appear closest to the top of each section are those elements that are farthest from optimal.

Above Optimal Range ↑
10 Total

Below Optimal Range ↓
3 Total

Above Optimal

Triglycerides ↑ 157.00 mg/dL (+ 820 %)

Serum triglycerides are composed of fatty acid molecules that enter the blood stream either from the liver or from the diet. Patients that are optimally metabolizing their fats and carbohydrates tend to have a triglyceride level about one-half of the total cholesterol level. Levels will be elevated in metabolic syndrome, fatty liver, in patients with an increased risk of cardiovascular disease, hypothyroidism and adrenal dysfunction. Levels will be decreased in liver dysfunction, a diet deficient in fat, and inflammatory processes.

Cholesterol - Total ↑ 237.00 mg/dL (+ 335 %)

Cholesterol is a steroid found in every cell of the body and in the plasma. It is an essential component in the structure of the cell membrane where it controls membrane fluidity. It provides the structural backbone for every steroid hormone in the body, which includes adrenal and sex hormones and vitamin D. The myelin sheaths of nerve fibers are derived from cholesterol and the bile salts that emulsify fats are composed of cholesterol. Cholesterol is made in the body by the liver and other organs, and from dietary sources. The liver, the intestines, and the skin produce between 60-80% of the body's cholesterol. The remainder comes from the diet. An increased cholesterol is just one of many independent risk factors for cardiovascular disease. It is also associated with metabolic syndrome, hypothyroidism, biliary stasis, and fatty liver. Decreased cholesterol levels are a strong indicator of gallbladder dysfunction, oxidative stress, inflammatory process, low fat diets and an increased heavy metal burden.

Glucose ↑ 102.00 mg/dL (+ 195 %)

Blood glucose levels are regulated by a number of important hormones including insulin and glucagon. Glucose is also directly formed in the body from carbohydrate digestion and from the conversion in the liver of other sugars, such as fructose, into glucose. Increased blood glucose is associated with type 1 & 2 diabetes, metabolic syndrome and insulin resistance. Decreased levels of blood glucose are associated with hypoglycemia.

MCV ↑ 94.00 fL (+ 102 %)

The MCV is a measurement of the volume in cubic microns of an average single red blood cell. MCV indicates whether the red blood cell size appears normal (normocytic), small (microcytic), or large (macrocytic). An increase or decrease in MCV can help determine the type of anemia present. An increased MCV is associated with B12, folate, or vitamin C deficiency. A decreased MCV is associated with iron and B6 deficiency.

Triglyceride/HDL Ratio ↑ 2.85 ratio (+ 92 %)

The Triglyceride:HDL ratio is determined from serum trigleceride and HDL levels. Increased ratios are associated with an increased risk of developing insulin resistance and Type II Diabetes. A decreased ratio is associated with a decreased risk of developing insulin resistance and Type II Diabetes.

Hemoglobin A1C ↑ 5.80 % (+ 80 %)

The Hemoglobin A1C test measure the amount of glucose that combines with hemoglobin to form glycohemoglobin during the normal lifespan of a red blood cell, which is about 120 days. The amount of glycohemoglobin formed is in direct proportion to the amount of glucose present in the blood stream during the 120-day red blood cell lifespan. In the presence of high blood glucose levels (hyperglycemia) the amount of hemoglobin that is glycosylated to form glycohemoglobin increases and the hemoglobin A1C level will be high. It is used primarily to monitor long-term blood glucose control and to help determine therapeutic options for treatment and management. Studies have shown that the closer to normal the hemoglobin A1C levels are kept, the less likely those patients are to develop the long-term complications of diabetes.

LDL Cholesterol ↑ 151.00 mg/dL (+ 76 %)

LDL functions to transport cholesterol and other fatty acids from the liver to the peripheral tissues for uptake and metabolism by the cells. It is known as “bad cholesterol” because it is thought that this process of bringing cholesterol from the liver to the peripheral tissue increases the risk for atherosclerosis. An increased LDL cholesterol is just one of many independent risk factors for cardiovascular disease. It is also associated with metabolic syndrome, oxidative stress and fatty liver.

Hemoglobin, Male ↑ 15.20 g/dl (+ 70 %)

Hemoglobin is the oxygen carrying molecule in red blood cells. Measuring hemoglobin is useful to determine the cause and type of anemia and for evaluating the efficacy of anemia treatment. Hemoglobin levels may be increased in cases of dehydration.

Cholesterol/HDL Ratio ↑ 4.30 Ratio (+ 58 %)

The ratio of total cholesterol to HDL is a far better predictor of cardiovascular disease than cholesterol by itself. A lower ratio is ideal because you want to lower cholesterol (but no too low) and raise HDL. A level below 3.0 would be ideal. Every increase of 1.0, i.e. 3.0 to 4.0 increases the risk of heart attack by 60%.

ALT (SGPT) ↑ 31.00 IU/L (+ 55 %)

SGPT/ALT is an enzyme present in high concentrations in the liver and to lesser extent skeletal muscle, the heart, and kidney. SGPT/ALT will be liberated into the bloodstream following cell damage or destruction. Any condition or situation that causes damage to the hepatocytes will cause a leakage of SGPT/ALT in to the bloodstream. These would be exposure to chemicals, viruses (viral hepatitis, mononucleosis, cytomegalovirus, Epstein Barr, etc.), alcoholic hepatitis. The most common non-infectious cause of an increased ALT is a condition called steatosis (fatty liver).

Below Optimal

Lymphocytes ↓ 1.60 % (- 162 %)
Lymphocytes are a type of white blood cell. An increase in lymphocyte concentration is usually a sign of a viral infection but can also be a sign of increased toxicity in the body or inflammation. Decreased levels are often seen in a chronic viral infection when the body can use up a large number of lymphocytes and oxidative stress..

Vitamin B12 ↓ 360.00 pg/ml (- 56 %)
Vitamin B12 is an essential nutrient for DNA synthesis and red blood cell maturation, and is also necessary for myelin sheath formation and maintenance in our nerves.

Vitamin D (25-OH) ↓ 49.00 ng/ml (- 52 %)
This vitamin D test measures for levels of 25-OH vitamin D and is a very good way to assess vitamin D status. Vitamin D deficiency has been associated with many disorders including many forms of cancer, hypertension, cardiovascular disease, chronic inflammation, chronic pain, mental illness including depression, diabetes, multiple sclerosis to name just a few.

Functional Index Report

The indices shown below represent an analysis of your blood test results. These results have been converted into your individual Functional Indices Report based on our latest research. This report gives me an indication of the level of dysfunction that exists in the various physiological systems in your body from the digestion of the food you eat to the health of your liver and the strength of your immune system – which are all key factors in maintaining optimal health. We can use this information to put together a unique treatment plan designed to bring your body back into a state of functional health, wellness and energy.

Score Guide: **90% - 100%** - Dysfunction Highly Likely, **70% - 90%** - Dysfunction Likely, **50% - 70%** - Dysfunction Possible, **< 50%** - Dysfunction Less Likely.

Functional Index	0% 100%
Lipid Panel Index	100%
Blood Sugar Index	69%
Oxidative Stress Index	52%
Cardiovascular Risk Index	44%
Immune Function Index	35%
Liver Function Index	25%
Gallbladder Function Index	25%
Adrenal Function Index	21%
Red Blood Cell Index	18%
Bone Health Index	17%
GI Function Index	7%
Allergy Index	0%
Prostate Function Index	0%
Toxicity Index	0%
Heavy Metal Index	0%
Inflammation Index	0%
Acid-Base Index	0%
Electrolyte Index	0%
Thyroid Function Index	0%
Kidney Function Index	0%
Sex Hormone Index - Male	0%

Lipid Panel Index

The Lipid Panel index gives us an indication of the levels of cholesterol and fat in your blood. An increased Lipid Panel Index indicates that you have higher than optimal levels of cholesterol and fat in your blood (a condition called hyperlipidemia). Hyperlipidemia is associated with an increased risk of cardiovascular disease and may be genetic or be due to dietary factors, hormonal imbalances, blood sugar dysregulation and/or other metabolic imbalances. For your blood test, your Lipid Panel Index is:

[100%] - Dysfunction Highly Likely. Much improvement required.

Rationale:
Cholesterol - Total ↑, Triglycerides ↑, LDL Cholesterol ↑, Cholesterol/HDL Ratio ↑

Blood Sugar Index

The Blood Sugar index tells us how well your body is regulating blood glucose. Blood sugar dysregulation is very common. It doesn't suddenly emerge but rather develops slowly, so we can look for clues in your blood test that can help us determine if there's dysregulation and if so what it is. Some conditions associated with blood sugar dysregulation include hypoglycemia (periods of low blood sugar), metabolic syndrome, hyperinsulinemia and diabetes. For your blood test, your Blood Sugar Index is:

[69%] - Dysfunction Possible. There may be improvement needed in certain areas.

Rationale:
Glucose ↑, Hemoglobin A1C ↑, Cholesterol - Total ↑, Triglycerides ↑, LDL Cholesterol ↑

Oxidative Stress Index

The Oxidative Stress index gives us an indication of the level of oxidative stress activity in your body. Oxidative stress is a disturbance in the free radical/antioxidant balance in the body and is associated with the aging process and a number of degenerative diseases. Oxidative stress arises when the levels of free radicals in the body are high and/or the levels of antioxidants in the body are low. The primary contribution to increased free radicals is the exposure to toxins from our environment. A high Oxidative Stress Index may indicate you need more antioxidants and/or need to make lifestyle changes such as quitting smoking, reducing stress, reducing alcohol consumption, etc. For your blood test, your Oxidative Stress Index is:

[52%] - Dysfunction Possible. There may be improvement needed in certain areas.

Rationale:
Lymphocytes ↓, LDL Cholesterol ↑

Nutrient Index Report

The indices shown below represent an analysis of your blood test results. These results have been converted into your individual Nutrient Assessment Report based on our latest research. This report gives me an indication of your nutritional status. Nutritional status is influenced by actual dietary intake, digestion, absorption, assimilation and cellular uptake of the nutrients themselves. We can use this information to put together a unique treatment plan designed to bring your body back into a state of functional health, wellness and energy.

Score Guide: **90% - 100%** - Nutrient Status is Poor, **75% - 90%** - Nutrient Status is Low, **50% - 75%** - Moderate Nutrient Status, **< 50%** - Optimum Nutrient Status

Nutrient Index	0% 100%
Carbohydrate Index	75%
Vitamin Index	38%
Hydration Index	10%
Protein Index	6%
Fat Index	0%
Mineral Index	0%

Carbohydrate Index

The Carbohydrate Index gives us an assessment of your dietary intake of carbohydrates, especially refined carbohydrates (white flour, white rice, white pasta, etc.) and sugars. A diet high in refined carbohydrates and sugars will deplete important nutrients that are used by the body to handle carbohydrates and may also increase blood glucose and blood fat levels, all of which can be measured in your blood. For your blood test, your Carbohydrate Index is:

[75%] - Nutrient Status is Low. Improvement required.

Rationale:
Glucose ↑, Cholesterol - Total ↑, Triglycerides ↑, LDL Cholesterol ↑

Individual Nutrient Values

The values below represent the degree of deficiency for individual nutrients based on your blood results. The status of an individual nutrient is based on a number of factors such as actual dietary intake, digestion, absorption, assimilation and cellular uptake of the nutrients themselves. All of these factors must be taken into consideration before determining whether or not you actually need an individual nutrient. I will use the information in this section of your Nutrient Assessment Report to put together an individualized treatment plan to bring your body back into a state of optimal nutritional function.

Score Guide: **90% - 100%** - Deficiency Highly Likely, **70% - 90%** - Deficiency Likely, **50% - 70%** - Deficiency Possible, **< 50%** - Deficiency Less Likely.

Individual Nutrients	0% 100%
Vitamin D Need	90%
Vitamin B12/Folate Need	42%
Calcium Need	29%
Vitamin C Need	10%
Thiamine Need	10%
Vitamin B6 Need	0%
Iron Deficiency	0%
Iodine Need	0%
Magnesium Need	0%
DHEA Need	0%
Molybdenum Need	0%
Selenium Need	0%
Glutathione Need	0%

Vitamin D Need

The results of your blood test indicate that your Vitamin D levels might be lower than optimal.

[90%] - Dysfunction Highly Likely. Much improvement required.

Rationale:
Vitamin D (25-OH) ↓

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