

MILLER CHIROPRACTIC HEALTH CENTER

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NUTRITION EVALUATION: 11/10/2016

PATIENT INFORMATION

Patient #: 54321
Anne Onymous
12345 Fifth St.
honolulu HI 98970
(937) 654-3210
s
Sex: F
Birth Date: 02/24/1967
Age: 49
Blood Type: A+

DATA USED FOR ANALYSIS

Medication	07/04/2003
Vitals	02/10/2006
Blood	08/16/2006
Hair	08/16/2006
PSS	03/02/2010

VITALS

Height: 6'2"
Weight: 185
Blood Pressure: 120 / 70
O2 Level: 99%
Heart Rate: 49

PRIMARY FINDINGS SUGGESTIVE OF

- Hypercholesterolemia
- Dehydration effects
- Possible Hemochromatosis
- Anemia
- Chronic Wasting Symptoms
- Noted Blood Values
- Very Low Hair Potassium
- Very Low Hair Cobalt
- Noted Hair Values
- Possible Kidney Involvement
- Low Minerals
- Low Functioning Thyroid
- Possible infection and/or inflammation
- Hormone Considerations
- Very High Hair Sulfur
- Very Low Hair Lithium
- Very Low Hair Rubidium

The purpose for this nutrition and lifestyle program is to create an optimum environment in which your body can heal and repair itself. This is achieved by eliminating foods and toxins, which

adversely affect the body, and by providing nutrients that the body may be lacking.

MEDICATIONS

- ❑ Acetaminophen old - Occasional.
- ❑ Microzide - More than 2 years.
- ❑ Pravochol - More than 2 years.
- ❑ Prozac - 6 months - 2 years.
- ❑ Micronase - Less than 6 months.
- ❑ Plaquenil - More than 2 years.
- ❑ Prevacid - 6 months - 2 years.

SIDE EFFECTS OF MEDICATIONS

- ❑ **Acetaminophen** (Otherwise known as Tylenol Pain/Arthritis & Panadol) is indicated for use in treating minor aches and pains.
Side Effects: hepatitis; hives; decreased blood platelets; decreased white blood cells; discolored spots and small elevations of the skin.
Possible Nutrients Depleted: Glutathione.
- ❑ **Micronase** (Otherwise known as Glibenclamide) used with diet and exercise to help control blood sugar in patients with type 2 diabetes.
Side Effects: hypoglycemia; cholestatic jaundice; hepatitis; nausea; heartburn; allergic skin reactions; leukopenia; thrombocytopenia; anemia; blurred vision; arthralgia; angiodema; malaga.
Possible Nutrients Depleted: Coenzyme Q10.
- ❑ **Hydrochlorothiazide** used alone or together with other medications to treat high blood pressure and fluid retention.
Side Effects: tachycardia; used cautiously in kidney disease; liver disease; dizziness; vertigo; drowsiness; lethargy; headaches; nightmares; diarrhea; digestive disorders; nausea; vomiting; constipation; blurred vision; sweating; impotence; fatigue; depression; mental confusion; headaches.
Possible Nutrients Depleted: Coenzyme Q10, Magnesium, Phosphorus, Potassium, Sodium, Vitamin B6, Zinc.
- ❑ **Plaquenil** used in the treatment of malaria, systemic lupus, and rheumatoid arthritis.
Side Effects: causes irreversible eye damage (retinopathy) in long term or high dosage treatment; retinal damage may progress even after cessation of therapy; muscular weakness; headaches; dizziness; gastrointestinal problems including diarrhea, anorexia, nausea, and abdominal cramps; vomiting; irritability; nervousness; emotional changes; nightmares; psychosis; vertigo; ataxia; convulsions; blurred vision; alopecia; itching; skin eruptions; dermatitis; anemias; thrombocytopenia. If objective improvement does not occur within six months, the drug should be discontinued. Plaquenil may exacerbate psoriasis and should not be used during pregnancy.
Possible Nutrients Depleted: unknown at this time.
- ❑ **Pravochol** used in the treatment of high blood pressure.
Side Effects: chest pain; rash; nausea and vomiting; diarrhea; abdominal pain; constipation; flatulence; heartburn; fatigue; localized pain; myalgia; headaches; dizziness; urinary abnormality; rhinitis; cough; memory loss; insomnia; depression; anxiety; arthralgia; flushing; pancreatitis; hepatitis; cirrhosis; anorexia; alopecia; loss of libido; erectile dysfunction; progression of cataracts.

Nutrients Depleted: Coenzyme Q10.

- ❑ **Prevacid** used in the treatment of acid reflux, GERD, and heartburn.

Side Effects: anaphylactic-like reaction, asthenia, candidiasis, chest pain (not otherwise specified), edema, fever, flu syndrome, halitosis, infection (not otherwise specified), malaise, angina, cerebrovascular accident, hypertension/hypotension, myocardial infarction, palpitations, shock (circulatory failure), vasodilation, melena, anorexia, bezoar, cardio spasm, cholelithiasis, constipation, dry mouth/thirst, dyspepsia, dysphagia, eructation, esophageal stenosis, esophageal ulcer, esophagitis, fecal discoloration, flatulence, gastric nodules/fundic gland polyps, gastroenteritis, gastrointestinal hemorrhage, hematemesis, increased appetite, increased salivation, rectal hemorrhage, stomatitis, tenesmus, ulcerative colitis, vomiting, diabetes mellitus, goiter, hyperglycemia/hypoglycemia, agranulocytosis, anemia, aplastic anemia, hemolysis, hemolytic anemia, leukopenia, neutropenia, pancytopenia, thrombocytopenia, and thrombotic thrombocytopenic purpura, gout, weight gain/loss. arthritis/arthritis, musculoskeletal pain, myalgia, agitation, amnesia, anxiety, apathy, confusion, depression, dizziness/syncope, hallucinations, hemiplegia, hostility aggravated, libido decreased, nervousness, paresthesia, thinking abnormality, asthma, bronchitis, cough increased, dyspnea, epistaxis, hemoptysis, hiccup, pneumonia, upper respiratory inflammation/infection, acne, alopecia, pruritus, rash, urticaria, blurred vision, deafness, eye pain, visual field defect, otitis media, speech disorder, taste perversion, tinnitus, abnormal menses, albuminuria, breast enlargement/gynecomastia, breast tenderness, glycosuria, hematuria, impotence, kidney calculus, urinary retention.

Possible Nutrients Depleted: Vitamin B12, Folic Acid, Vitamin D, Calcium, Iron and Zinc.

- ❑ **Prozac** (Otherwise known as Sarafem) is used for depression.

Side Effects: autonomic instability; extreme agitation; delirium; rash and itching; fever; arthritis; edema; lymph adenopathy; proteinuria; elevated liver enzymes; possible lung, kidney, or liver involvement; anxiety; nervousness; insomnia; fatigue; tremors; sweating; gastrointestinal complaints; anorexia; dizziness; light headedness; dry mouth.

Possible Nutrients Depleted: Chromium, Zinc, and Folic Acid.

INTERPRETING ALL TEST RESULTS

Your test results are color coded for ease of analysis:

Yellow = values are outside the healthy range but still within the clinical range

Red = values are outside the clinical range

Blue = values extremely higher or lower than the clinical range limits.

INTERPRETING BLOOD LAB RESULTS

On the blood test results page found later in the report, you'll notice two columns on the right side of the page labeled "Healthy Range" and "Clinical Range". The clinical range is used by the medical community. Any values outside this range are indicative of a disease process. The healthy range is more narrow than the clinical range. Test values outside of the healthy range indicate results which are not as good as they should be. The tighter guidelines of the healthy range allows us to see signs of any developing diseases/conditions.

INTERPRETING HAIR LAB RESULTS

The hair analysis screening is looking for essential, nonessential and potentially toxic elements. These elements are irreversibly incorporated into growing hair. The amount of each element found in the hair is proportional to levels in other body tissues. This makes the hair analysis a

suitable indirect screening for physiological excess, deficiency or maldistribution of elements in the body. All screening tests have limitations which must be taken into consideration. Scalp hair is vulnerable to external contamination by water, hair treatments and other products. The data provided by a hair analysis should be considered in conjunction with symptoms, diet analysis, occupation and lifestyle, water source, physical examination and the results of other laboratory tests. However, accepting these limitations, hair analysis can provide useful insights into the toxic load and biochemical condition of the body.

For each elevated toxic element in the hair, the most common sources of exposure are listed in the report. Due to pollution, our industrial culture and other environmental factors, it is impossible to completely eliminate your exposure to some toxic elements. However by knowing the sources of toxins elevated in your body, you can work to reduce your exposure, thus lessening the total toxic burden on your body.

DIAGNOSTIC FINDINGS

CORONARY RISK ASSESSMENT

☐ Total Cholesterol:	255	☐ HDL Cholesterol:	69
☐ LDL Cholesterol:	171	☐ VLDL Cholesterol:	15

Coronary Risk Assessment: 3.70 Average

The coronary risk is determined by taking the total cholesterol and dividing it by the HDL. To reduce your risk of cardiovascular problems a value below 4 is recommended. The Total Cholesterol is determined by adding the HDL, LDL, and VLDL together. Recent studies have shown a correlation between a high HDL and longevity. Think of HDL as the healthy cholesterol and generally the higher the better. LDL is the bad cholesterol, as it tends to plug the arteries. The VLDL is the very worst cholesterol and is more like sludge. Lower is better for the LDL and VLDL in determining coronary risk and overall health.

HYPERCHOLESTEROLEMIA

The Cholesterol is high and the LDL Cholesterol is very high. Excess weight, poor diet, caffeine intake and lack of exercise all contribute to this condition. This should be reasonable to manage and correct with the recommended dietary plan and nutrients.

This finding is supported by:

Low Blood T4 Thyroxine • Low Blood T7 Free Thyroxine Index (FTI) • High Blood CRP
C-Reactive Protein • Low Hair Chromium

Nutrients Recommended:

Opti EPA

POSSIBLE KIDNEY INVOLVEMENT

The BUN, Creatinine and the BUN/Creatinine Ratio are all high. This indicates current and/or developing kidney involvement or possibly urinary tract infections or obstructions. Dehydration may also contribute to these findings.

This finding is supported by:

High Blood LDL Cholesterol • High Blood BUN (Blood Urea Nitrogen) • Low Blood Phosphorus
• Low Blood Globulin • High Blood LDH • Low Blood Serum Iron • High Blood Total Cholesterol
• High Blood Polys/Neutrophils • Low Blood Lymphocytes • High Blood Creatinine • High Blood
BUN / Creatinine Ratio

This finding is associated with:

Medications Taken - Microzide • Micronase • Pravochol • Prevacid • Prozac • Acetaminophen
old

Nutrients Recommended:

A-Potene 25,000IU • L-Arginine 700mg • Vitamin C 1000mg

DEHYDRATION EFFECTS

High Hematocrit.

This finding is associated with:

Medications Taken - Microzide • Plaquenil • Pravochol • Prevacid • Prozac

LOW MINERALS

The calcium and phosphorus are a little low, which will affect calcium metabolism and availability. The low phosphorus is also commonly associated with a vitamin D deficiency, although this may not always be the case. Vitamin D supplementation will be determined by the serum Vitamin D test.

This finding is associated with:

Medications Taken - Prevacid

Nutrients Recommended:

Calcium MCHC 250mg

POSSIBLE HEMOCHROMATOSIS

The Serum Iron is a little low and the Ferritin is high. This is poor metabolism of iron and may be associated with a condition known as hemochromatosis which is often a genetic or family trait. However, these findings are most likely due to liver dysfunction or infection. The liver converts the Ferritin (which in this case indicates high iron reserves) into Serum Iron. Be aware that a iron overload, indicated by the high Ferritin, can contribute or cause many serious metabolic problems including heart disease and failure, arrhythmia, diabetes, hypogonadism, cirrhosis, cancer, arthritis, enlarged spleen and/or liver and abdominal pain.

If there is no significant liver dysfunction/disease, anemia, infection, recent blood transfusion or cancer then one phlebotomy (having blood taken or drawn) of one pint of blood is recommended before the next blood test. Be sure and have the last blood draw at least 2 weeks before the blood test.

This finding is supported by:

High Blood CRP C-Reactive Protein

Nutrients Recommended:

Stress B Plus, 90 tabs

LOW FUNCTIONING THYROID

The T4 is very low, the T3 Uptake is high and the T7 is a little low. These readings are unusual and may be due to thyroid medication or other medication or possibly thyroid hormone supplements or other hormone vitamin supplements. The thyroid is apparently not producing sufficient T4. This may be hypothyroidism, but it is at least thyroid dysfunction. The pituitary gland stimulates the thyroid. It's possible that the pituitary is dysfunctioning a small degree. A TSH may be necessary to assess pituitary function concerning primary or secondary hypothyroid. Note: poor digestion can cause or contribute to a low thyroid function and caffeine lowers thyroid function. Low thyroid function means your metabolism is going to be slow. The thyroid gland controls your basal metabolic rate. This is the rate at which your body heals and repairs itself. It

also determines how fast chemical reactions occur in the body. With a low-functioning thyroid, your immune system is going to be low, digestion is going to be slow and energy will be reduced. It is difficult to have a good cholesterol level with a low thyroid. Large amounts of cauliflower, sauerkraut (cabbage), and asparagus do lower thyroid function, so do not eat these foods everyday. A couple of times per week would be acceptable. Interestingly, most cancers are seen in people with a low thyroid.

This finding is supported by:

High Blood LDL Cholesterol • Low Blood Phosphorus • Low Blood Globulin • Low Blood Alkaline Phosphatase 25-150 • High Blood LDH • Low Blood Serum Iron • High Blood Total Cholesterol • Low Blood T4 Thyroxine • Low Blood T7 Free Thyroxine Index (FTI) • High Hair Mercury • Low Hair Manganese

Nutrients Recommended:

Meda-Stim • Ultra G.L.A 240mg • Vital Trace Minerals

ANEMIA

The MCV and MCH are a little high. The MCV (Mean Corpuscular Volume) is the size (volume) of the average red cell. The Mean Corpuscular Hemoglobin (MCH) is the weight of hemoglobin in the average red cell. These values indicate dehydration or a B12/folate deficiency and a possible mild iron deficiency.

This finding is supported by:

Low Blood Globulin • Low Blood Alkaline Phosphatase 25-150 • High Blood LDH • High Hair Aluminum • High Hair Arsenic • High Hair Cadmium

This finding is associated with:

Medications Taken - Microzide • Micronase • Plaquenil • Prevacid • Acetaminophen old

Nutrients Recommended:

Methyl B12 Plus

POSSIBLE INFECTION AND/OR INFLAMMATION

The Polys are high and the Lymphocytes are a little low. This is most likely due to an infection.

The LDH and the C-reactive Protein (CRP) are a little high, which indicates nonspecific tissue injury and inflammation. It doesn't tell where, just that there is a problem and these values are good to monitor response to treatment.

NOTE: Recent studies have shown that the CRP is one of the best markers for predicting the chances of a having heart attack or stroke. A CRP and ESR close to zero are desired.

This finding is supported by:

Low Blood Phosphorus • Low Blood Globulin • High Blood LDH • Low Blood Serum Iron • High Blood CRP C-Reactive Protein • High Blood Polys/Neutrophils • Low Blood Lymphocytes • High Blood Creatinine

This finding is associated with:

Medications Taken - Micronase • Plaquenil • Pravochol • Prevacid • Prozac • Acetaminophen old

Nutrients Recommended:

Inflavonoid • Lauricidin • Vitamin C 1000mg

CHRONIC WASTING SYMPTOMS

The Alkaline Phosphatase, an enzyme which normally originates from liver and bone, is a little low. Enzymes initiate or speed up chemical reactions. Too high for this enzyme is not good

except if one is growing in height, but too low means that normal metabolic processes involving healing and repair will be slowed. Among other things, this is seen with malnutrition and Celiac disease. Mineral deficiencies including zinc, vitamin C, magnesium and potassium are usually seen with a low Alkaline Phosphatase. A diet including potassium rich foods at least twice per day such as broccoli, bananas, spinach, avocado and sweet potatoes is recommended.

Nutrients Recommended:
Vital Trace Minerals

HORMONE CONSIDERATIONS

Luteinizing Hormone (LH) in both males and females is essential for reproduction. LH levels are normally low during childhood and, in women, high after menopause.

In females, LH varies widely over the course of the female cycle. LH triggers ovulation, releasing the egg and prepares the uterus for implantation. The action of LH on the ovary stimulates androgen and other hormonal precursors for estradiol production.

Female

Follicular Clinical	1.90–12.5
Midcycle	8.7–76.3
Luteal	0.5–16.9
Pregnant	0.0–1.5
Postmenopausal	15.9–54.0
Contraceptives	0.7–5.6

In males, LH acts upon the testis and is responsible for the production of testosterone, which stimulates spermatogenesis and other endocrine activity.

Persistent High LH levels indicate the normal restricting feedback from the gonad is absent increasing production of both LH and FSH in the pituitary gland. While this is typical in the menopause, it is abnormal in the reproductive years. The most common causes of persistent high LH levels are:

1. Premature menopause
2. Polycystic Ovary Syndrome
3. Testicular failure

This finding is associated with:

Medications Taken - Pravochole • Prevacid

NOTED BLOOD VALUES

The Globulin is a little low. This can indicate a mildly reduced immune system with a tendency for infections. A diet with sufficient high quality protein is recommended.

The Triglyceride/HDL Cholesterol Ratio is optimal. Recent studies have shown that the ratio of triglycerides to HDL was the strongest predictor of a heart attack. In adults, the triglyceride/HDL ratio should be below 2.

VERY HIGH HAIR SULFUR

The sulfur level in the hair is very high. This does not necessarily correlate with high serum sulfur. It may be a result of using certain shampoos.

VERY LOW HAIR POTASSIUM

The potassium level in the hair is very low. Symptoms of potassium deficiency include muscle weakness, fatigue, and tachycardia. It is recommended that you eat at least 1-2 servings of potassium rich foods per day. The best sources of potassium are found in broccoli, bananas, avocado and sweet potatoes.

Nutrients Recommended:
Vital Trace Minerals

VERY LOW HAIR LITHIUM

The Lithium level in the hair is very low. Only very small amounts of lithium are needed. Hair levels of lithium do not necessarily indicate a deficiency according to most recent studies. If the followup hair test and related symptoms have not improved, very light therapy maybe indicated.

Nutrients Recommended:
Lithium 50mcg

VERY LOW HAIR COBALT

The cobalt level in the hair is very low. The only known biological use for cobalt is that it is absolutely necessary for vitamin B12 activity and function. Cobalt activates numerous enzymes and is stored in the liver as vitamin B12. Dietary cobalt and inorganic cobalt are poorly absorbed. Sources of cobalt are found in all animal products, meats, fish, cheese, brewer's yeast and yeast extracts. Vegetarians (vegans) who refuse eggs and dairy products, as well as people who lack an intrinsic factor, risk vitamin B12 and cobalt deficiencies.

Recommendation: eat an egg at least 3 times per week.

VERY LOW HAIR RUBIDIUM

The rubidium level in the hair is very low. There is inconclusive evidence that rubidium is essential to the body, but high levels have been shown to be toxic.

NOTED HAIR VALUES

The iron level in the hair is low. This does not necessarily correlate with low serum iron. Dietary sources include organ meats, poultry, fish, and dried beans and vegetables.

The manganese level in the hair is low. This trace element is a cofactor for a number of important enzymes and functions with vitamin K in the formation of prothrombin. The functions of manganese include: glucose utilization, lipid synthesis and lipid metabolism, cholesterol metabolism, pancreatic function and development, prevention of sterility, normal skeletal growth and development, important for protein and nucleic acid metabolism, activating enzyme functions and in thyroid hormone synthesis.

KNOWN DEFICIENCY SYMPTOMS: fatigue; lack of physical endurance; slow growth of fingernails and hair; impaired metabolism of bone and cartilage; dermatitis; weight loss; reduced fertility; increased allergic sensitivities; inflammation; ataxia; fainting; hearing loss; weak tendons and ligaments and possible cause of diabetes. Manganese activates several enzyme systems and supports the utilization of vitamin C, E, choline, and other B-vitamins. Inadequate choline utilization reduces the acetylcholine synthesis, causing conditions such as myasthenia gravis (loss of muscle strength).

Seizures are occasionally reported to be associated with severe manganese deficiency.

The cadmium level in the hair is a little high. Cadmium (Cd) is a toxic, heavy metal with no positive metabolic function in the body. It is relatively rare but it is more toxic than lead. Hair cadmium levels provide an excellent indication of body burden. Moderately high cadmium levels are consistent with hypertension, while very severe cadmium toxicity can cause hypotension. Recent studies have shown associations with cadmium and tumors of the lung, kidney, breast and prostate.

Cadmium also affects the kidneys, lungs, testes, arterial walls, and bones. It interferes with many enzymatic systems, leads to anemia, proteinuria and glucosurea and depletes glutathione,

calcium, phosphorus and zinc. Cadmium absorption is reduced by zinc, calcium and selenium. Alkaline phosphatase is commonly elevated with cadmium toxicity. One of the things that you should do to help your overall long-term health is to reduce your cadmium intake.

The most common sources of cadmium are: refined foods (white flour, white sugar, etc.), acid drinks left in galvanized pails or ice trays, superphosphate fertilizers, gluten flour, some cola drinks, tap water, atmospheric pollution in the burning of coal and petroleum products, seafood, plastic water pipes, margarine, canned fruits and beverages, sugar and molasses, alcoholic drinks, cigarette smoke, zinc smelters, cadmium plating used in soft drink dispensing machines. Cadmium toxicity is common among welders and construction workers (cement dust). Contamination may come from perms, dyes, bleach and some hair sprays, and can cause false highs for cadmium.

Symptoms of Contamination: hypertension; fatigue; muscle and joint pain/osteomalacia; anemia; lumbar pain; learning disabilities, dyslexia, delinquency, schizophrenia, high anxiety, atherosclerosis; kidney damage with associated urinary loss of essential minerals, amino acids and protein.

The boron level in the hair is high. Signs of toxicity include nausea, vomiting, diarrhea, dermatitis, lethargy, inflammation and edema in the legs, growth problems, testicular atrophy and other health problems. Boron is present in some cleaners, cements, ceramics, glass, water and soil. Make sure there are adequate levels of calcium, magnesium, phosphorus, riboflavin and B6.

The phosphorus level in the hair is high. This does not necessarily correlate with high serum phosphorus. Phosphorus is a major component of bones and teeth, and is used in chemical energy transfer, enzyme regulation, and in the metabolism of carbohydrates, amino acids, and lipids.

The strontium level in the hair is low. Strontium increases the utilization of calcium and may protect against osteoporosis. It essential for growth and is chemically similar to calcium and boron. Strontium can replace calcium in many biological processes.

Sources of strontium: brazil nuts, cereals, grains, dairy products and seafood.

The germanium level in the hair is high. This does not necessarily correlate with high levels of serum germanium.

The aluminum level in the hair is a little high. Any aluminum is too much. Aluminum toxicity is associated with Alzheimer's and Parkinson's disease, behavioral/learning disorders such as ADD, ADHD and autism. Aluminum has neurotoxic effects at high levels, but low levels of accumulation may not elicit immediate symptoms. Early symptoms of aluminum burden may include fatigue, headache, and other symptoms. Aluminum is a heavy metal that displaces your other good minerals, such as magnesium, calcium, zinc and phosphorus. One of the things that you should do to help your overall long-term health is to reduce your aluminum intake. The most common sources of aluminum to avoid are: antiperspirants, aluminum cookware, antacids, some baking sodas, baking powder, some breath mints, pickles, some skin lotion, some cosmetics, aluminum foil, canned goods, emulsifiers in some processed cheese, table salt - anti-caking compound, bleaching agent used in white flour, buffered aspirin, some toothpaste, dental amalgams, cigarette filters, and drinking water (tap water). Do not eat or drink anything that comes in a can. Read your labels before you purchase. Aluminum has also been found in a granola bar. Prosthetic devices produced by Zimmer Company and Johnson and Johnson typically are made of aluminum, vanadium, and titanium, which might cause increased levels in

the hair and/or urine.

Aluminum rods are commonly used in hot water tanks in area of acidic water. These rods will dissolve neutralizing the water, thus protecting the hot water tank. A rod of magnesium is an option for the same purpose.

Note: Fluoride and fluoridation increases the absorption of aluminum.

Chlorella and magnesium with malic acid have been reported to be quite effective in lowering aluminum.

The arsenic level in the hair is a little high. Chronic arsenic exposure is known to cause: Bone marrow depression; leukopenia; normochromic anemia; exfoliation and pigmentation of skin; neurological symptoms; polyneuritis; altered hematopoiesis; liver degeneration; kidney degeneration; skin cancer; cancers of the respiratory tract; agitation; learning impairment; and confusion. Delayed toxicity symptoms include abdominal pain, nausea, vomiting, hematuria, and jaundice. Ingestion of relatively large amounts of soluble arsenic compounds, especially on an empty stomach, affect the myocardium, causing death within a few hours. Ingesting smaller amounts of arsenic can cause epigastric pain, vomiting and diarrhea, followed by inflammation of the conjunctiva and respiratory mucous membranes, epistaxis, transient jaundice, cardiomyopathy, erythematous or visceral rashes, and sweating. Other symptoms: malaise; muscle weakness; eczema; dermatitis; increased salivation; strong "garlic breath", alopecia totalis, vomiting, diarrhea and skin cancer. Hematological, renal, or pancreatic dysfunction may be observed. Symptoms of neuropathy are experienced typically appear as with tingling and paresthesia in the extremities. Proteinuria and methemoglobinemia are frequently observed, causing renal failure and death.

Arsenic can be absorbed by the human body through the respiratory and gastrointestinal tracts and through the skin. Arsenic is found in tobacco smoke and is a suspected causative factor in lung cancer. Metal smelting and the production of glass, ceramics, insecticides, fungicides and herbicides mobilize environmental arsenic. Drinking water may also be a source of arsenic, and the use of arsenic-containing paints is a known source of arsenic poisoning. Elevated hair levels are seen long before acute clinical signs of arsenic toxicity are obvious.

Therapeutic consideration for chronic overexposure: antioxidant therapy, especially ascorbic acid or calcium ascorbate, vitamin E (all tocopherols), increased intake of sulfur-containing amino acids, vitamin B6. Note: arsenic suppresses iodine and selenium.

Research: the relationship between cognitive functions and hair mineral concentrations of lead, arsenic, cadmium, and aluminum was examined for a random selection of 69 children. The data obtained showed a significant correlation between reading and writing skill and elevated arsenic levels, as well as interaction between arsenic and lead. Children with reduced visual-motor skills, had clearly elevated aluminum and lead levels.

The mercury (Hg) level in the hair is a little high. Mercury is a toxic element for humans and animals. Hair mercury level is an accurate indicator of mercury body burden. A considerable variance in the sensitivity of different individuals to mercury has been observed, with some exhibiting symptoms at 3 to 5 ppm. Even very low levels of mercury have been found to suppress biological selenium activity. After dental amalgams are used, elevated hair mercury may be observed for six months to over a year. Hair mercury has been found to correlate with acute myocardial infarction where on average a 1 ppm mercury was found to correlate with a 9 percent increase in acute myocardial infarction risk.

Mercury displaces selenium (which is a major anti-oxidant), zinc (protein, DNA and energy metabolism) and copper. Supplementation of magnesium, zinc, calcium, selenium, and manganese has been shown to be beneficial in relieving mercury loads.

Symptoms of acute contamination: metallic taste, thirst, discoloration and edema of oral mucosa,

burning mouth pain, salivation, abdominal pain, vomiting, bloody diarrhea, severe gastroenteritis, colitis, nephrosis, anuria, uremia, shock.

Symptoms of chronic contamination: gingivitis; weakness; ataxia; intention tremors; chronic fatigue (caused by inhibition of thyroid conversion of T4 to T3); depression; poor memory and cognitive function; learning disabilities; behavioral disorders; emotional instability; speech impairment, irritability; peripheral numbness, tingling or neuropathy; sleep disturbance; decreased senses of touch; hearing or vision; hypersensitivity and allergies; persistent infections including chronic yeast overgrowth; compromised immune function; cardiovascular disease. It disrupts intracellular transport in neurons and can decrease the production of neurotransmitters. Eventually this can lead to autoimmune diseases such as SLE (systemic lupus erythematosus), myelinopathies such as MS and myasthenia gravis, rheumatoid arthritis, MCS (multiple chemical sensitivity), and chronic candidiasis. An inverse relationship has been observed between hair mercury levels and intelligence scores in elementary school children.

Other sources of mercury are: large fish, pesticide residues, mercurial fungicides on seed grains, dental fillings, coal burning, calomel (mercurous chloride), interior paints, pharmaceuticals, the manufacture of paper, pulp and plastic products, and water.

The titanium level in the hair is a little high. Titanium generally has low toxicity. Titanium (Ti) has wide industrial uses, and elevated Ti may be the result of industrial exposure. Titanium is used in metal alloying and is used as titanium dioxide to coat welding rods. Titanium dioxide pigment is present in **paints, inks, dyes, shoe whiteners, plastics, some cosmetics, toothpaste, conditioners, shampoos, paper fillers and ceramic glazes. Elevated hair titanium also may be an artifact (false high) of hair treatments such as dyeing or "highlighting". Surgical or dental implants may be a source of titanium in the hair.** Prosthetic devices produced by Zimmer Company and Johnson and Johnson typically are made of aluminum, vanadium, and titanium, which might cause increased levels in the hair and/or urine.

Nutrients Recommended:

Calcium MCHC 250mg • Chlorella Clean, 180 caps • MagMalic • Manganese Chelate • Multiple Vitamin • Stress B Plus, 90 tabs • Vital Trace Minerals

LIFESTYLE / DIETARY RECOMMENDATIONS

DIET FOCUS

Food can be broken down into basically two categories:

1. Energy (calories from fat, carbohydrates and protein)
2. Nourishment (the nutrient density of the food; vitamin and mineral content).

When planning your meals, use this thought process:

1. Get at least 2 vegetables with each meal. Fruit should be limited only if you have glucose handling issues. However, always consume more vegetables than fruits.
2. Proteins: 25-35% of the meal needs to be of a protein source.
 - Focus on good quality protein and not the processed protein bars, drinks, and powders.
 - Most desirable proteins: meats (like chicken, fish, turkey and even red meat), eggs, beans, seeds, nuts, sprouts, quinoa, nut butters (ie. peanut butter, cashew butter, almond butter).
 - Eliminate these least desirable proteins: processed soy, processed dairy, pork, processed luncheon meats (those that contain "nitrates" or "nitrites").
 - Search Google "USDA SR 21" for a downloadable database to look up nutritional content of foods.
3. Carbohydrates: 40-60% of your meal needs to be carbohydrate.
 - Most desirable carbohydrate sources: whole grain breads, pastas (including egg noodles), and rice, whole vegetables, whole fruit.
 - Eliminate these least desirable carbohydrates: white sugar, white flour, fruit juice, high fructose corn syrup, chips, French fries, pop/soda
4. Fats: Your meal should contain anywhere from 15-25% fat.
 - Most desirable fat sources: nuts (cashews, almonds, pecans, walnuts, Brazil nuts (raw and unsalted are preferred), seeds (sunflower seeds, pumpkin seeds), avocados, coconut oil, fish, nut butters (peanut butter, almond butter, etc)
 - Desirable Cooking Oils: Grape Seed Oil, Olive Oil, Coconut Oil, Palm Oil
 - Eliminated these least desirable fat sources: anything with trans-fat (AKA: hydrogenated fat), interesterified fat or Olestra. Bacon, sausage, etc.
 - Strictly avoid hydrogenated/trans-fats: About 80% of trans fats in your diet come from processed foods, fast food, primarily snack foods and desserts.
5. Special instructions may be given based upon certain metabolic conditions such as cancer, diabetes, kidney disorders etc.

IDENTIFYING LOW NUTRIENT DENSE FOODS

Below is a list of foods and items that will help you identify low nutrient dense foods and cooking/storage processes that lower the nutrient density in foods. These are strongly recommended you avoid. **READ YOUR INGREDIENT LABELS!!** Later in your report, you will find exchanges for these items and helpful hints for implementing these lifestyle habits.

1. **Artificial Sweeteners:** "aspartame", "saccharin", "sucralose", "acesulfame potassium", "sorbitol", "maltitol", etc.
2. **Flavor Enhancers and Preservatives:** "MSG", "monosodium glutamate", "nitrate" or "nitrite" ingredients found in many dressings, sauces, Chinese foods, processed meats, pork products, bologna, some wieners, and many luncheon meat. HVP (hydrolyzed vegetable protein) and processed soy proteins can contain up to 40% MSG.
3. **Artificial colors and dyes:** look for terms such as "FD&C", "lake", "red", "yellow", etc. Read your supplement labels carefully.
4. **Canned Foods and Drinks:** choose fresh or frozen varieties. Limit canned food consumption to canned beans and tuna. Foods stored in glass are acceptable.
5. **Microwave Cooking and Deep Frying** lower the nutrient density more so than stove top cooking.
6. **Artificial Fats:** "hydrogenated" [a.k.a. "trans fat"] and "interesterified" fats are found in margarine, many pre-packaged foods, supplements, and dressings; avoid "Olestra" containing products.
7. **Refined Carbohydrates:** processed foods such as white sugar, white flour, corn syrup, "enriched" foods, etc.
8. **Commercial Meats:** Try to get the cleanest, freshest meat you can find. Look for meat that is labeled with terms such as "No Hormones", "No Antibiotics", "Free Range", "Organic", etc.
9. **Shellfish and Bottom-feeders:** crab, shrimp, lobster, oyster, catfish, etc.
10. **Dairy Products:** cottage cheese, yogurt, cheese, sour cream, etc. (anything with cow's milk). This does not include eggs.
11. **Coffee (regular & chemically decaffeinated), Liquor (distilled), All sodas, Tea (black decaf & black regular).** Organic herbal teas are acceptable.
12. **Soy Products:** isolated soy protein, texturized vegetable protein, soy supplements, soy protein powder, soy protein bars, tofu, etc. Limited fermented soy products (tempeh and miso) and whole soy beans are acceptable. Don't make soy your main protein source, limit to 3-4 servings per week.
13. **Chlorine and Fluoride Sources:** tap water, heavy chlorine exposure in swimming pools, fluoride toothpaste, fluoride supplements, fluoride mouthwash, etc.

AEROBIC EXERCISE

Examples of aerobic exercise are jogging, cycling, elliptical trainer, fast-paced walking, etc. It is recommended that you build up to at least 40 minutes a day. If at first you do not have the energy to exercise this much, it is recommended that you start slowly by exercising 10 minutes two or three times a day until you can gradually build up to 40 minutes a day.

STRENGTH TRAINING

If you are not currently on a weight training program, a muscle building exercise (i.e. step exercise) 10 minutes a day is encouraged. If at first you do not have the energy or physical ability to perform this exercise, it is recommended that you start slowly by setting a goal to do this exercise 2 minutes two or three times a day until you can gradually build up to 10 minutes a day.

WATER CONSUMPTION

Drink 1 quart of clean, filtered water per 50lbs of body weight per day. Do not go over 3 quarts regardless of your weight. More water might be necessary depending on exercise, environment and perspiration. We recommend using a multiple filtration system for your drinking and cooking water. There are several types of these, which include reverse osmosis. Distilled water is not recommended. Since distilled water has little or no mineral content, it acts like a vacuum that can actually leach minerals from your system.

A word of caution - anytime you make drastic changes in diet, vitamin intake, or exercise, realize that you may feel somewhat worse before you feel better. It doesn't happen often, but as your body detoxifies, you may feel worse if it occurs too fast. If you do feel worse, don't panic, it will pass in a few days. If this problem does occur, take half of what is recommended for three days and slowly over two weeks progress to taking the complete program.

Everything that has been recommended is very important and many of these things work together. In order to get the most effective results, it is important that you follow the program exactly as outlined. Following the diet may not be easy, but if you do, you will get the best outcome. Likewise, if you don't take the vitamins, or only take part of them, you may not see the expected results. Many people with some very serious problems have been helped using this program. The purpose of this analysis is to benefit you. This is for your well being, so please do the program as recommended so that you will achieve the best results.

Attached is a list of supplements that have been carefully selected for your specific problems. All supplement dosages should be spread throughout the day and taken with food unless otherwise suggested. These supplement brands are recommended because they are of the highest quality. Occasionally, you will hear rumors regarding vitamin toxicity. Rest assured that these issues have been researched and the risk of significant side effects is extremely low. Historical data and experience have shown these supplements, along with the dietary changes, to be the best in helping you achieve the necessary improvements needed on your test results.

Please keep this report for future reference and bring it with you to your next evaluation.

If we can be of any further assistance to you or your family please do not hesitate to ask.

Yours in health,

Dennis Miller, DC

Name: Anne Onymous

Lab: LabCorp

Blood Test Results

Legend: Warning High Risk Critical ★ Optimal 😊 Improvement 😞 Worse ∅ No Improvement

Test Description	Current Rating 08/16/2006		Prior 08/01/2006	Delta	Healthy	Clinical	Units
Glucose	91.00	★	84.00		80.00 - 95.00	65.00 - 99.00	mg/dL
Hemoglobin A1C (Gly-Hgh)	5.40	★	10.00	😊	4.80 - 5.60	4.60 - 6.40	%
Uric Acid	6.20	★	4.40		3.50 - 6.60	2.50 - 7.10	mg/dL
BUN (Blood Urea Nitrogen)	22.00	High	11.00	😞	8.00 - 16.00	6.00 - 20.00	mg/dL
Creatinine	1.00	High	0.70	😞	0.70 - 0.87	0.57 - 1.00	mg/dL
BUN / Creatinine Ratio	22.00	High	16.00	😞	13.00 - 18.00	8.00 - 20.00	ratio
Sodium	142.00	★	147.00	😊	139.00 - 143.00	134.00 - 144.00	meq/dL
Potassium	4.30	★	4.40		3.80 - 4.50	3.50 - 5.20	meq/dL
Chloride	104.00	★	103.00		102.00 - 106.00	97.00 - 108.00	meq/dL
Magnesium	2.10	★	1.90	😊	1.90 - 2.51	1.60 - 2.60	mg/dL
Calcium	9.50	low	10.60	😊	9.61 - 10.00	8.70 - 10.20	mg/dL
Calcium/Albumin Ratio	2.20	★	2.30		2.10 - 2.50	2.03 - 2.71	ratio
Phosphorus	3.30	low	5.70	😊	3.40 - 4.00	2.50 - 4.50	mg/dL
Total Protein	7.10	★	7.30		7.10 - 7.61	6.00 - 8.50	gm/dL
Albumin	4.40	★	4.60	😊	4.10 - 4.50	3.50 - 5.50	gm/dL
Globulin	2.70	low	2.70	∅	2.80 - 3.51	1.50 - 4.50	gm/dL
A/G Ratio	1.60	★	1.70	😊	1.20 - 1.60	1.10 - 2.50	ratio
Total Bilirubin	0.60	★	0.30	😊	0.30 - 0.90	0.00 - 1.20	mg/dL
Alkaline Phosphatase 25-150	54.00	low	59.00	😞	65.00 - 108.00	25.00 - 160.00	IU/L
Creatine Kinase	62.00	★	45.00	😊	32.00 - 116.00	24.00 - 173.00	u/l
LDH	165.00	high	178.00	😊	120.00 - 160.00	100.00 - 214.00	IU/L
SGOT (AST)	23.00	★	21.00		15.00 - 26.00	6.00 - 40.00	IU/L
SGPT (ALT)	12.00	★	30.00	😊	8.00 - 26.00	0.00 - 32.00	IU/L
GGT	19.00	★	14.00	😊	18.00 - 35.00	10.00 - 60.00	IU/L
Serum Iron	83.00	low	82.00	😊	85.00 - 120.00	35.00 - 155.00	mcg/dL
Ferritin	161.00	High	17.00	😞	45.00 - 110.00	15.00 - 150.00	NG/ML
Total Cholesterol	255.00	High	181.00	😞	150.00 - 180.00	100.00 - 199.00	mg/dL
Triglyceride	73.00	★	95.00		50.00 - 125.00	0.00 - 149.00	mg/dL
HDL Cholesterol	69.00	★	55.00	😊	39.00 - 120.00	36.00 - 140.00	mg/dL
VLDL Cholesterol	15.00	★	19.00		5.00 - 20.00	4.00 - 40.00	mg/dL
LDL Cholesterol	171.00	Very High	107.00	😞	50.00 - 75.00	6.00 - 99.00	mg/dL
Total Cholesterol / HDL Ratio	3.70	★	3.30		0.00 - 4.00	0.00 - 5.00	ratio
Triglyceride/HDL Ratio	1.10	★	1.70		0.00 - 2.00	0.00 - 4.00	ratio
T4 Thyroxine	3.10	Very Low	6.60	😞	7.10 - 9.00	4.50 - 12.00	mcg/dL
T3 Uptake	49.00	High	29.00	😞	29.00 - 35.00	24.00 - 39.00	%
T7 Free Thyroxine Index (FTI)	1.50	low	1.90	😞	2.61 - 3.60	1.20 - 4.90	
CRP C-Reactive Protein	2.40	high	1.30	😞	0.00 - 1.50	0.00 - 4.90	mg/L
White Blood Count	8.00	★	16.00	😊	5.70 - 8.50	3.40 - 10.80	k/cumm
Red Blood Count	4.52	★	4.56		4.27 - 4.78	4.14 - 5.80	m/cumm
Hemoglobin	14.20	★	14.30		12.50 - 14.50	11.10 - 15.90	gm/dL
Hematocrit	42.30	high	43.50	😊	38.00 - 42.00	34.00 - 46.00	%
MCV	94.00	high	95.00	😊	84.00 - 92.00	79.00 - 97.00	cu.m
MCH	31.50	high	31.30	😞	28.60 - 31.00	26.60 - 33.00	pg
MCHC	33.70	★	32.80	😊	33.20 - 34.50	31.50 - 35.70	%
Platelets	256.00	★	623.00	😊	215.00 - 319.00	150.00 - 379.00	k/cumm
Polys/Neutrophils (SEGS-PMNS)	77.00	High	57.00	😞	51.00 - 63.00	40.00 - 74.00	%
Lymphocytes	16.00	low	36.00	😞	24.00 - 36.00	14.00 - 46.00	%
Monocytes	6.00	★	7.00		5.00 - 7.00	4.00 - 13.00	%
Eosinophils	1.00	★	0.00		0.00 - 3.50	0.00 - 5.00	%
Basophils	0.00	★	0.00		0.00 - 2.00	0.00 - 3.00	%
ESR-Erythrocyte Sed Rate, Westergren	2.00	★	1.00		0.00 - 10.00	0.00 - 32.00	mm/HR
Luteinizing Hormone (LH)	80.00	High			0.50 - 12.50	0.00 - 76.30	mIU/ml

Name: Anne Onymous

Lab: LabCorp

Blood Test Results

Legend: ■ Warning ■ High Risk ■ Critical

	Prior Results					
	07/03/2006	06/28/2006	05/19/2006	04/12/2006	02/10/2006	07/04/2003
Glucose	92.00	83.00	79.00	91.00	88.00	102.00
Hemoglobin A1C (Gly-Hgh)	5.40	5.40	5.00	6.00	5.10	12.40
Uric Acid	5.90	5.60	6.30	10.50	5.60	5.60
BUN (Blood Urea Nitrogen)	16.00	9.00	23.00	22.00	15.00	20.00
Creatinine	0.90	0.90	1.50	1.10	1.10	1.00
BUN / Creatinine Ratio	18.00	10.00	15.00	20.00	14.00	20.00
Sodium	139.00	140.00	142.00	140.00	139.00	139.00
Potassium	4.30	4.20	5.20	5.00	4.60	4.10
Chloride	100.00	100.00	103.00	105.00	99.00	103.00
Magnesium	2.10	1.80	2.40	2.10	2.10	2.20
Calcium	9.80	9.30	10.20	9.40	10.00	9.30
Calcium/Albumin Ratio	2.08	2.30	2.10	2.29	2.02	2.33
Phosphorus	3.40	3.90	3.50	3.80	4.00	3.90
Total Protein	8.30	8.70	7.90	7.60	7.70	7.70
Albumin	4.70	4.10	4.80	4.10	5.00	4.00
Globulin	3.60	4.60	3.10	3.50	2.70	3.60
A/G Ratio	1.30	0.90	1.50	1.20	1.90	1.10
Total Bilirubin	0.80	0.80	0.50	0.40	1.40	0.40
Alkaline Phosphatase 25-150	72.00	64.00	56.00	112.00	70.00	67.00
Creatine Kinase	106.00	80.00	82.00	194.00	73.00	435.00
LDH	161.00	160.00	149.00	194.00	123.00	123.00
SGOT (AST)	44.00	21.00	36.00	32.00	16.00	38.00
SGPT (ALT)	57.00	14.00	33.00	36.00	26.00	65.00
GGT	44.00	9.00	18.00	26.00	18.00	68.00
Serum Iron	99.00	97.00	99.00	56.00	156.00	121.00
Ferritin	66.00	64.00	108.00	44.00	63.00	2.00
Total Cholesterol	350.00	114.00	213.00	170.00	165.00	227.00
Triglyceride	181.00	78.00	204.00	93.00	191.00	85.00
HDL Cholesterol	54.00	35.00	40.00	30.00	43.00	43.00
VLDL Cholesterol	36.00	16.00	41.00	19.00	38.00	17.00
LDL Cholesterol	260.00	63.00	132.00	121.00	84.00	137.00
Total Cholesterol / HDL Ratio	6.50	3.30	5.30	5.70	3.80	5.20
Triglyceride/HDL Ratio	3.40	2.20	5.10	3.10	4.40	
T4 Thyroxine	9.40	7.70	7.30	8.20	6.10	9.80
T3 Uptake	31.00	29.00	32.00	32.00	35.00	29.00
T7 Free Thyroxine Index (FTI)	2.90	2.20	2.30	2.60	2.10	2.80
CRP C-Reactive Protein	1.90	1.40	5.70	17.30	0.30	26.40
White Blood Count	7.20	7.80	5.80	8.20	6.10	7.60
Red Blood Count	4.97	5.00	5.11	4.01	5.53	3.10
Hemoglobin	15.60	14.80	15.90	12.80	17.30	7.20
Hematocrit	46.10	45.50	47.00	37.70	50.10	31.50
MCV	93.00	91.00	92.00	94.00	91.00	89.00
MCH	31.40	29.60	31.10	31.80	31.30	30.90
MCHC	33.80	32.60	33.80	33.90	34.60	34.50
Platelets	217.00	239.00	288.00	350.00	243.00	97.00
Polys/Neutrophils (SEGS-PMNS)	57.00	72.00	57.00	58.00	59.00	54.00
Lymphocytes	21.00	13.00	33.00	30.00	34.00	25.00
Monocytes	11.00	5.00	7.00	10.00	5.00	6.00
Eosinophils	10.00	10.00	2.00	2.00	2.00	4.00
Basophils	1.00	0.00	1.00	0.00	0.00	1.00
ESR-Erythrocyte Sed Rate, Westergren	2.00	7.00	9.00	102.00	2.00	37.00
Luteinizing Hormone (LH)						

Name: Anne Onymous

Lab: Doctor's Data #1, (with Ranges)

Hair Test Results

Legend: Warning High Risk Critical ★ Optimal 😊 Improvement 😞 Worse ∅ No Improvement

Test Description	Current Rating 08/16/2006		Prior 08/01/2006	Delta	Healthy		Clinical		Units
Toxic Elements									
Aluminum	4.10	high	7.60	😊	0-	2.20	2.21-	7.00	ug/g
Antimony	0.02	★	0.03	😊	0-	0.04	0.05-	0.07	ug/g
Arsenic	0.05	high	0.03	😞	0-	0.03	0.04-	0.06	ug/g
Barium	0.27	★	2.70	😊	0-	1.00	1.01-	2.00	ug/g
Beryllium	0.01	★	0.01		0-	0.01	0.02-	0.02	ug/g
Bismuth	0.01	★	0.36	😊	0-	1.00	1.01-	2.00	ug/g
Cadmium	0.03	high	0.06	😊	0-	0.03	0.04-	0.05	ug/g
Lead	0.27	★	0.22	😞	0-	0.40	0.41-	0.60	ug/g
Mercury	0.65	high	0.53	😞	0-	0.50	0.51-	0.80	ug/g
Platinum	0.00	★	0.00		0-	0.00	0.01-	0.00	ug/g
Thallium	0.00	★	0.00		0-	0.00	0.01-	0.00	ug/g
Thorium	0.00	★	0.00		0-	0.00	0.01-	0.00	ug/g
Uranium	0.01	★	0.03		0-	0.03	0.04-	0.06	ug/g
Nickel	0.04	★	0.69	😊	0-	0.25	0.26-	0.30	ug/g
Silver	0.01	★	0.80	😊	0-	0.10	0.11-	0.15	ug/g
Tin	0.06	★	0.13		0-	0.29	0.30-	0.30	ug/g
Titanium	0.49	high	0.53	😊	0-	0.40	0.41-	0.70	ug/g
Total Toxic Representation	2.00	★	3.00	😊	0-	2.00	2.01-	3.00	
Essential Elements									
Calcium	309.00	low	1,360.00	😊	663.00-	753.00	300.00-	1200.00	ug/g
Magnesium	41.00	low	270.00	😊	53.00-	62.00	35.00-	120.00	ug/g
Sodium	24.00	low	47.00	😞	72.00-	126.00	20.00-	250.00	ug/g
Potassium	3.00	Very Low	6.00	😞	30.00-	53.00	8.00-	75.00	ug/g
Copper	20.00	★	12.00	😊	18.00-	29.00	11.00-	37.00	ug/g
Zinc	160.00	★	180.00	😊	150.00-	170.00	140.00-	220.00	ug/g
Manganese	0.06	Low	0.09	😞	0.28-	0.40	0.08-	0.60	ug/g
Chromium	0.42	low	0.47	😞	0.48-	0.57	0.40-	0.65	ug/g
Vanadium	0.03	low	0.02	😊	0.04-	0.05	0.02-	0.06	ug/g
Molybdenum	0.03	low	0.04	😞	0.03-	0.04	0.02-	0.05	ug/g
Boron	2.00	High	3.10	😊	0.65-	1.30	0.25-	1.50	ug/g
Iodine	1.40	high	6.70	😊	0.76-	1.30	0.25-	1.80	ug/g
Lithium	0.00	Very Low	0.00	∅	0.01-	0.02	0.01-	0.02	ug/g
Phosphorus	241.00	High	166.00	😞	173.00-	197.00	150.00-	220.00	ug/g
Selenium	0.84	★	1.10	😊	0.62-	1.03	0.55-	1.10	ug/g
Strontium	0.28	Low	7.70	😊	2.00-	2.90	0.50-	7.60	ug/g
Sulfur	55500.00	Very High	48,300.00	😞	46000.00-	48000.00	44000.00-	50000.00	ug/g
Cobalt	0.00	Very Low	0.02	😞	0.02-	0.03	0.00-	0.04	ug/g
Iron	6.00	Low	7.00	😞	9.00-	13.00	7.00-	16.00	ug/g
Germanium	0.05	High	0.03	😞	0.03-	0.04	0.03-	0.04	ug/g
Rubidium	0.00	Very Low	0.01	😞	0.02-	0.03	0.01-	0.10	ug/g
Zirconium	0.03	low	0.84	😊	0.07-	0.25	0.02-	0.42	ug/g

Legend: ■ Warning ■ High Risk ■ Critical

	Prior Results				
	07/31/2006	07/27/2006	07/03/2006	06/07/2006	02/10/2006
Toxic Elements					
Aluminum	18.00	13.00	12.00	2.90	5.30
Antimony	0.12	0.03	0.12	0.02	0.08
Arsenic	0.09	0.03	0.03	0.05	0.70
Barium	0.35	2.40	3.20	0.22	2.10
Beryllium	0.01	0.01	0.01	0.01	0.01
Bismuth	0.02	0.02	0.02	0.01	0.02
Cadmium	0.31	0.19	0.20	0.10	0.10
Lead	39.00	0.09	0.58	0.54	0.52
Mercury	0.20	0.10	0.31	0.55	0.15
Platinum	0.00	0.00	0.00	0.00	0.00
Thallium	0.01	0.00	0.00	0.00	0.00
Thorium	0.00	0.00	0.00	0.00	0.00
Uranium	0.02	0.04	0.02	0.02	0.01
Nickel	0.15	0.09	0.20	0.08	0.19
Silver	0.25	0.09	0.50	0.02	0.05
Tin	0.27	0.21	0.49	0.28	0.15
Titanium	0.96	0.72	0.28	0.35	0.87
Total Toxic Representation	4.00	2.00	3.00	2.00	3.00
Essential Elements					
Calcium	236.00	475.00	931.00	162.00	767.00
Magnesium	55.00	110.00	120.00	31.00	320.00
Sodium	840.00	18.00	130.00	110.00	500.00
Potassium	250.00	6.00	120.00	10.00	230.00
Copper	12.00	10.00	12.00	12.00	12.00
Zinc	150.00	190.00	140.00	170.00	130.00
Manganese	0.15	0.04	0.28	0.64	1.10
Chromium	0.47	0.25	0.42	0.26	0.41
Vanadium	0.06	0.01	0.03	0.02	0.02
Molybdenum	0.07	0.05	0.05	0.03	0.07
Boron	16.00	1.90	3.90	0.46	3.10
Iodine	0.48	0.59	4.00	0.24	0.23
Lithium	0.00	0.00	0.02	0.00	0.00
Phosphorus	254.00	246.00	142.00	187.00	354.00
Selenium	1.40	0.95	0.76	0.70	1.10
Strontium	0.24	4.40	8.30	0.30	7.30
Sulfur	48,100.00	54,500.00	45,000.00	47,500.00	41,200.00
Cobalt	0.01	0.01	0.02	0.01	0.01
Iron	8.90	8.70	10.00	7.40	12.00
Germanium	0.04	0.04	0.04	0.05	0.03
Rubidium	0.24	0.01	0.11	0.01	0.16
Zirconium	1.70	7.90	0.38	0.37	1.50

VITAMIN AND SUPPLEMENT RECOMMENDATIONS

SUPPLIER: #1 SBN/Merkle Vitamin Line

PATIENT: Anne Onymous

SEX: F

AGE: 49

WEIGHT: 185

<u>Supplement</u>	<u>Number Per Day</u>
A-Potene 25,000IU	1
Calcium MCHC 250mg	2
Chlorella Clean, 180 caps	2
Inflavonoid	2
L-Arginine 700mg	1
Lauricidin	2
MagMalic	2
Manganese Chelate	1
Meda-Stim	2
Methyl B12 Plus	3
Multiple Vitamin	2
Opti EPA	1
Stress B Plus, 90 tabs	1
Ultra G.L.A 240mg	1
Vital Trace Minerals	2
Vitamin C 1000mg	3