

SEX: Male AGE: 38

Toxic & Essential Elements; Hair

TOXIC METALS					
		RESULT μg/g	REFERENCE INTERVAL	PERCENTILE 68 th 95 th	
Aluminum	(AI)	1.7	< 7.0		
Antimony	(Sb)	0.021	< 0.066		
Arsenic	(As)	0.032	< 0.080		
Barium	(Ba)	0.46	< 1.0		
Beryllium	(Be)	< 0.01	< 0.020		
Bismuth	(Bi)	0.024	< 2.0	•	
Cadmium	(Cd)	0.009	< 0.065	•	
Lead	(Pb)	0.21	< 0.80		
Mercury	(Hg)	0.56	< 0.80		
Platinum	(Pt)	< 0.003	< 0.005		
Thallium	(TI)	0.001	< 0.002		
Thorium	(Th)	< 0.001	< 0.002		
Uranium	(U)	0.004	< 0.060		
Nickel	(Ni)	0.24	< 0.20		
Silver	(Ag)	0.03	< 0.08		
Tin	(Sn)	0.11	< 0.30		
Titanium	(Ti)	0.29	< 0.60		
Total Toxic Representati	on				

ESSENTIAL AND OTHER ELEMENTS							
		RESULT	REFERENCE	PERCENTILE			
		μg/g	INTERVAL	2.5 th 16 th 50 th 84 th 97.5 th			
Calcium	(Ca)	378	200- 750	•			
Magnesium	(Mg)	36	25- 75				
Sodium	(Na)	38	20- 180				
Potassium	(K)	13	9- 80				
Copper	(Cu)	8.1	11- 30				
Zinc	(Zn)	410	130- 200				
Manganese	(Mn)	0.09	0.08- 0.50				
Chromium	(Cr)	0.36	0.40- 0.70				
Vanadium	(V)	0.018	0.018- 0.065				
Molybdenum	(Mo)	0.031	0.025- 0.060	_			
Boron	(B)	0.63	0.40- 3.0				
lodine	(I)	0.19	0.25- 1.8				
Lithium	(Li)	< 0.004	0.007- 0.020				
Phosphorus	(P)	131	150- 220				
Selenium	(Se)	0.79	0.70- 1.2				
Strontium	(Sr)	0.84	0.30- 3.5	-			
Sulfur	(S)	45000	44000- 50000				
Cobalt	(Co)	0.009	0.004- 0.020	•			
Iron	(Fe)	6.9	7.0- 16				
Germanium	(Ge)	0.035	0.030- 0.040				
Rubidium	(Rb)	0.016	0.011- 0.12				
Zirconium	(Zr)	0.36	0.020- 0.44				

SPECIMEN DATA			RATIOS		
COMMENTS:		ELEMENTS	RATIOS	RANGE	
		Ca/Mg	10.5	4- 30	
Date Collected: 01/03/2015	Sample Size: 0.201 g	Ca/P	2.89	0.8- 8	
Date Received: 01/12/2015	Sample Type: неаd	Na/K	2.92	0.5- 10	
Date Completed: 01/14/2015	Hair Color: Black	Zn/Cu	50.6	4- 20	
Methodology: ICP/MS	Treatment:	Zn/Cd	> 999	> 800	
	Shampoo: Hs	<u>-</u>			

Health history for hair test 1048

- 1) What are your current symptoms and health history? lower back pain, shortness of breath, trouble sleeping, anxiety,
- 2) Dental history (wisdom teeth removed? First root canal placed? Braces? First amalgam etc...) no amalgams
- 3) What dental work do you currently have in place? What part of the dental cleanup have you completed? regular cleanings
- 4) What dentistry did your mother have at any time before or during pregnancy? don't know
- 5) What vaccinations have you had and when (including flu and especially travel shots)? regular scheduled vaccines in the late 70's early 80's
- 6) Supplements and medications (including dosages) taken at time of hair test, or for the 3-6 months before the sample was taken. none
- 7) Other information you feel may be relevant?
- 8) What is your location city & country (so that we can learn where certain toxins are more prevalent). Philadelphia, PA