

HAIR ELEMENTS



PATIENT: Number 349
SEX: Male
AGE: 2
LOCATION: Lincoln, NE

POTENTIALLY TOXIC ELEMENTS

TOXIC ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE	
			68 th	95 th
Aluminum	14	< 8.0		
Antimony	0.14	< 0.066		
Arsenic	0.10	< 0.080		
Barium	0.58	< 0.50		
Beryllium	< 0.01	< 0.020		
Bismuth	0.087	< 2.0		
Cadmium	0.041	< 0.070		
Lead	0.41	< 1.0		
Mercury	0.25	< 0.40		
Platinum	< 0.003	< 0.005		
Thallium	< 0.001	< 0.002		
Thorium	0.001	< 0.002		
Uranium	0.35	< 0.060		
Nickel	0.08	< 0.20		
Silver	0.06	< 0.20		
Tin	0.45	< 0.30		
Titanium	1.1	< 1.0		
Total Toxic Representation				

ESSENTIAL AND OTHER ELEMENTS

ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE				
			2.5 th	16 th	50 th	84 th	97.5 th
Calcium	120	125- 370					
Magnesium	77	12- 30					
Sodium	10	20- 200					
Potassium	10	12- 200					
Copper	11	11- 18					
Zinc	93	100- 190					
Manganese	0.18	0.10- 0.50					
Chromium	0.45	0.43- 0.80					
Vanadium	0.19	0.030- 0.10					
Molybdenum	0.11	0.050- 0.13					
Boron	1.2	0.70- 5.0					
Iodine	0.62	0.25- 1.3					
Lithium	0.004	0.007- 0.020					
Phosphorus	170	150- 220					
Selenium	0.68	0.70- 1.1					
Strontium	0.35	0.16- 1.0					
Sulfur	49600	45500- 53000					
Cobalt	0.008	0.004- 0.020					
Iron	12	7.0- 16					
Germanium	0.033	0.030- 0.040					
Rubidium	0.019	0.016- 0.18					
Zirconium	1.4	0.040- 1.0					

SPECIMEN DATA

COMMENTS:
 Date Collected: 4/20/2010 Sample Size: 0.202 g
 Date Received: 4/22/2010 Sample Type: Head
 Date Completed: 4/25/2010 Hair Color: Brown
 Client Reference: 1229638 Treatment:
 Methodology: ICP-MS Shampoo: Whole Foods

RATIOS

ELEMENTS	RATIOS	EXPECTED RANGE
Ca/Mg	1.56	4- 30
Ca/P	0.706	0.8- 8
Na/K	1	0.5- 10
Zn/Cu	8.45	4- 20
Zn/Cd	> 999	> 800

Health history for hair test 349

Age: 2 yrs 2 months

- 1) What are your current symptoms and health history? Over 50 food allergies, several environmental allergies, eczema, diarrhea, mucousy stools
- 2) Dental history (wisdom teeth removed? First root canal placed? Braces? First amalgam etc...) none
- 3) What dental work do you currently have in place? What part of the dental cleanup have you completed? n/a
- 4) What dentistry did your mother have at any time before or during pregnancy? 2 amalgams during pregnancy, 1 tooth extraction, 1 root canal
- 5) What vaccinations have you had and when (including flu and especially travel shots)? all vaccinations until 15 months, no flu shots
- 6) Supplements and medications (including dosages) taken at time of hair test, or for the 3-6 months before the sample was taken. multivitamin, probiotic
- 7) Other information you feel may be relevant? gf/cf/very restricted rotation diet
- 8) What is your location - city & country (so that we can learn where certain toxins are more prevalent).Lincoln, NE