

HAIR ELEMENTS



PATIENT: Number 382
SEX: Female
AGE: 5
LOCATION: Russia

POTENTIALLY TOXIC ELEMENTS

TOXIC ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE	
			68 th	95 th
Aluminum	5.7	< 8.0		
Antimony	0.032	< 0.066		
Arsenic	0.095	< 0.080		
Barium	0.18	< 0.75		
Beryllium	< 0.01	< 0.020		
Bismuth	0.049	< 2.0		
Cadmium	0.064	< 0.070		
Lead	0.75	< 1.0		
Mercury	0.09	< 0.40		
Platinum	< 0.003	< 0.005		
Thallium	0.001	< 0.002		
Thorium	0.001	< 0.002		
Uranium	0.11	< 0.060		
Nickel	0.15	< 0.30		
Silver	0.24	< 0.20		
Tin	1.1	< 0.30		
Titanium	0.49	< 0.90		
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	146	140- 500					
Magnesium	11	15- 45					
Sodium	250	18- 180					
Potassium	220	10- 150					
Copper	9.3	11- 24					
Zinc	42	100- 190					
Manganese	0.12	0.10- 0.50					
Chromium	0.62	0.43- 0.70					
Vanadium	0.077	0.030- 0.10					
Molybdenum	0.080	0.050- 0.13					
Boron	1.5	0.40- 3.5					
Iodine	0.61	0.25- 1.3					
Lithium	0.012	0.007- 0.020					
Phosphorus	157	150- 220					
Selenium	0.68	0.70- 1.1					
Strontium	0.17	0.19- 2.0					
Sulfur	47000	45500- 53000					
Cobalt	0.009	0.005- 0.030					
Iron	15	7.0- 16					
Germanium	0.037	0.030- 0.040					
Rubidium	0.20	0.012- 0.16					
Zirconium	0.44	0.030- 1.0					

SPECIMEN DATA

COMMENTS:

Date Collected: 4/10/2010 Sample Size: 0.2 g
 Date Received: 5/24/2010 Sample Type: Head
 Date Completed: 6/1/2010 Hair Color: Brown
 Client Reference: 1232712 Treatment:
 Methodology: ICP-MS Shampoo: Baby

V010.08

RATIOS

ELEMENTS	RATIOS	EXPECTED RANGE
Ca/Mg	13.3	4- 30
Ca/P	0.93	1- 12
Na/K	1.14	0.5- 10
Zn/Cu	4.52	4- 20
Zn/Cd	656	> 800

Health history for hair test 382

1. **What are your current symptoms and health history?** child underweight and short
2. **Dental history (Wisdom teeth removed and when? Any other extractions. First root canal placed? Braces? First amalgam etc...)** none
3. **What dental work do you currently have in place? What part of the dental clean-up have you completed?** none
4. **What dentistry did your mother have at any time before or during pregnancy?** none
5. **What vaccinations have you had and when (including flu and especially travel shots)?** standard 5 or so for Russia
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. **What is your age, height and weight?** 5 yrs old, 35" 30lbs
8. **Other information you feel may be relevant?**
9. **What is your location – city & country (so that we can learn where certain toxins are more prevalent).** Russia