

# HAIR ELEMENTS



**PATIENT: Number 439**  
**SEX: Male**  
**AGE: 5**  
**LOCATION: Boston, MA, USA**

POTENTIALLY TOXIC ELEMENTS				
TOXIC ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE	
			68 <sup>th</sup>	95 <sup>th</sup>
Aluminum	5.6	< 8.0		
Antimony	0.19	< 0.066		
Arsenic	0.14	< 0.080		
Barium	0.45	< 0.50		
Beryllium	< 0.01	< 0.020		
Bismuth	0.12	< 2.0		
Cadmium	0.053	< 0.070		
Lead	1.4	< 1.0		
Mercury	0.56	< 0.40		
Platinum	< 0.003	< 0.005		
Thallium	0.001	< 0.002		
Thorium	0.001	< 0.002		
Uranium	0.004	< 0.060		
Nickel	0.19	< 0.20		
Silver	0.10	< 0.20		
Tin	1.3	< 0.30		
Titanium	0.96	< 1.0		
Total Toxic Representation				

ESSENTIAL AND OTHER ELEMENTS							
ELEMENTS	RESULT $\mu\text{g/g}$	REFERENCE RANGE	PERCENTILE				
			2.5 <sup>th</sup>	16 <sup>th</sup>	50 <sup>th</sup>	84 <sup>th</sup>	97.5 <sup>th</sup>
Calcium	284	125- 370					
Magnesium	11	12- 30					
Sodium	240	20- 200					
Potassium	660	12- 200					
Copper	10	11- 18					
Zinc	51	100- 190					
Manganese	0.26	0.10- 0.50					
Chromium	0.53	0.43- 0.80					
Vanadium	0.034	0.030- 0.10					
Molybdenum	0.11	0.050- 0.13					
Boron	4.8	0.70- 5.0					
Iodine	0.80	0.25- 1.3					
Lithium	0.008	0.007- 0.020					
Phosphorus	252	150- 220					
Selenium	1.0	0.70- 1.1					
Strontium	0.38	0.16- 1.0					
Sulfur	48400	45500- 53000					
Cobalt	0.016	0.004- 0.020					
Iron	13	7.0- 16					
Germanium	0.029	0.030- 0.040					
Rubidium	0.64	0.016- 0.18					
Zirconium	0.18	0.040- 1.0					

SPECIMEN DATA			RATIOS		
<b>COMMENTS:</b>			<b>ELEMENTS</b>	<b>RATIOS</b>	<b>EXPECTED RANGE</b>
Date Collected: 11/19/2010	Sample Size: 0.199 g		Ca/Mg	25.8	4- 30
Date Received: 11/23/2010	Sample Type: Head		Ca/P	1.13	0.8- 8
Date Completed: 11/24/2010	Hair Color: Black		Na/K	0.364	0.5- 10
Client Reference: 1252358	Treatment:		Zn/Cu	5.1	4- 20
Methodology: ICP-MS	Shampoo: Gpb		Zn/Cd	962	> 800

V010.08

## **Health history for hair test 439**

### **1, What are current symptoms and health history?**

irritable, over-emotional, food cravings, mood swings, restless; short of attention.

### **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?**

His mom have two amalgam teeth during his pregnancy.

### **5. What vaccinations have you had and when (including flu and especially travel shots)?**

Did scheduled vaccinations as normal 4 years old kid.

### **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?**

4 years and 6 months, weigh 45 pounds

### **8. Other information you feel may be relevant?**

Not at this moment.

### **9. What is your location – city & country (so that we can learn where certain toxins are more prevalent).**

Boston, MA