

PATIENT: Number 788

SEX: Male AGE: 1

Toxic & Essential Elements; Hair

TOXIC METALS							
		RESULT μg/g	REFERENCE INTERVAL	PERCENTILE 95 th			
Aluminum	(AI)	24	< 8.0				
Antimony	(Sb)	0.34	< 0.066				
Arsenic	(As)	0.19	< 0.080				
Barium	(Ba)	0.37	< 0.50				
Beryllium	(Be)	0.012	< 0.020				
Bismuth	(Bi)	0.045	< 2.0	•			
Cadmium	(Cd)	0.031	< 0.070				
Lead	(Pb)	0.57	< 1.0				
Mercury	(Hg)	0.17	< 0.40				
Platinum	(Pt)	< 0.003	< 0.005				
Thallium	(TI)	< 0.001	< 0.002				
Thorium	(Th)	0.001	< 0.002				
Uranium	(U)	0.012	< 0.060				
Nickel	(Ni)	0.20	< 0.20				
Silver	(Ag)	0.61	< 0.20				
Tin	(Sn)	0.72	< 0.30				
Titanium	(Ti)	0.57	< 1.0				
Total Toxic Represent	ation						

ESSENTIAL AND OTHER ELEMENTS									
		RESULT µg/g	REFERENCE INTERVAL	PERCENTILE 2.5 th 16 th 50 th 84 th 97.5 th					
Calcium	(Ca)	157	125- 370						
Magnesium	(Mg)	18	12- 30		•				
Sodium	(Na)	14	20- 200						
Potassium	(K)	15	12- 200						
Copper	(Cu)	9.5	11- 18						
Zinc	(Zn)	92	100- 190						
Manganese	(Mn)	0.20	0.10- 0.50		•				
Chromium	(Cr)	0.61	0.43- 0.80						
Vanadium	(V)	0.056	0.030- 0.10		-				
Molybdenum	(Mo)	0.081	0.050- 0.13		•				
Boron	(B)	34	0.70- 5.0						
lodine	(I)	5.1	0.25- 1.3						
Lithium	(Li)	< 0.004	0.007- 0.020						
Phosphorus	(P)	145	150- 220						
Selenium	(Se)	0.84	0.70- 1.1						
Strontium	(Sr)	0.44	0.16- 1.0						
Sulfur	(S)	46400	45500- 53000						
Cobalt	(Co)	0.009	0.004- 0.020		-				
Iron	(Fe)	12	7.0- 16						
Germanium	(Ge)	0.027	0.030- 0.040						
Rubidium	(Rb)	0.021	0.016- 0.18						
Zirconium	(Zr)	5.4	0.040- 1.0						

SPECIMEN DATA			RATIOS		
COMMENTS:		ELEMENTS	RATIOS	RANGE	
		Ca/Mg	8.72	4- 30	
Date Collected: 05/28/2013	Sample Size: 0.195 g	Ca/P	1.08	0.8- 8	
Date Received: 06/03/2013	Sample Type: Head	Na/K	0.933	0.5- 10	
Date Completed: 06/06/2013	Hair Color: Blond	Zn/Cu	9.68	4- 20	
Methodology: ICP/MS	Treatment:	Zn/Cd	> 999	> 800	
	Shampoo: Organic				

Health history for hair test 788

- 1. Medical history: NONE that we know of child is 1 Yo
- 2. Dental history (Wisdom teeth removed and when? Any other extractions. First root canal placed? Braces? First amalgam etc...) NONE

What are your current symptoms and health history?

- 3. What dental work do you currently have in place? What part of the dental clean-up have you complete. NONE
- 4. What dentistry did your mother have at any time before or during pregnancy?
- --- 7 Amalgams
- 5. What vaccinations have you had and when (including flu and especially travel shots)?
- ---- All Vaccines up until age of 6 months then discontinued
- 6.Supplements and medications (including dosages) taken at time of hair test, or for the 3-6 months before the sample was taken? Probiotics RAW garden of life infant

7What is your age, height and weight? he is 1 yo. 27 inch tall and 24lbs 8.Other information you feel may be relevant? I had amalgams in place during pregnancy.

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