



PATIENT: Number 528
 SEX: Female
 AGE: 3

Toxic & Essential Elements; Hair

TOXIC METALS			
	RESULT µg/g	REFERENCE INTERVAL	PERCENTILE 68 th 95 th
Aluminum (Al)	9.1	< 8.0	
Antimony (Sb)	0.12	< 0.066	
Arsenic (As)	0.37	< 0.080	
Barium (Ba)	0.23	< 0.75	
Beryllium (Be)	0.012	< 0.020	
Bismuth (Bi)	0.11	< 2.0	
Cadmium (Cd)	0.10	< 0.070	
Lead (Pb)	8.3	< 1.0	
Mercury (Hg)	0.07	< 0.40	
Platinum (Pt)	0.003	< 0.005	
Thallium (Tl)	< 0.001	< 0.002	
Thorium (Th)	< 0.001	< 0.002	
Uranium (U)	0.007	< 0.060	
Nickel (Ni)	0.14	< 0.30	
Silver (Ag)	0.73	< 0.20	
Tin (Sn)	1.0	< 0.30	
Titanium (Ti)	0.97	< 0.90	
Total Toxic Representation			

ESSENTIAL AND OTHER ELEMENTS					
	RESULT µg/g	REFERENCE INTERVAL	PERCENTILE 2.5 th 16 th 50 th 84 th 97.5 th		
Calcium (Ca)	184	140- 500			
Magnesium (Mg)	9	15- 45			
Sodium (Na)	27	18- 180			
Potassium (K)	46	10- 150			
Copper (Cu)	15	11- 24			
Zinc (Zn)	76	100- 190			
Manganese (Mn)	0.22	0.10- 0.50			
Chromium (Cr)	0.66	0.43- 0.70			
Vanadium (V)	0.16	0.030- 0.10			
Molybdenum (Mo)	0.13	0.050- 0.13			
Boron (B)	7.5	0.40- 3.5			
Iodine (I)	4.2	0.25- 1.3			
Lithium (Li)	< 0.004	0.007- 0.020			
Phosphorus (P)	160	150- 220			
Selenium (Se)	1.3	0.70- 1.1			
Strontium (Sr)	0.13	0.19- 2.0			
Sulfur (S)	47600	45500- 53000			
Cobalt (Co)	0.012	0.005- 0.030			
Iron (Fe)	12	7.0- 16			
Germanium (Ge)	0.026	0.030- 0.040			
Rubidium (Rb)	0.065	0.012- 0.16			
Zirconium (Zr)	0.26	0.030- 1.0			

SPECIMEN DATA		RATIOS	
COMMENTS:		ELEMENTS	RATIOS
Date Collected: 9/26/2011		Ca/Mg	20.4
Date Received: 9/29/2011		Ca/P	1.15
Date Completed: 9/30/2011		Na/K	0.587
Methodology: ICP/MS		Zn/Cu	5.07
Sample Size: 0.195 g		Zn/Cd	760
Sample Type: Head			
Hair Color: Brown			
Treatment:			
Shampoo: Aubrey Organics			
		RANGE	
			4- 30
			1- 12
			0.5- 10
			4- 20
			> 800

Health history for hair test 528

What are your current symptoms and health history?

Sensory issues, reflux, food allergies, neurological issues, slow development, blood levels of Lead 8, viral issues & AutoImmune disease.

Dental history (Wisdom teeth removed and when? Any other extractions. First root canal placed? Braces? First amalgam etc...)

Mother has mercury

What dental work do you currently have in place? What part of the dental clean-up have you completed? SHE is 3 no mercury

What dentistry did your mother have at any time before or during pregnancy? mercury & root canal

What vaccinations have you had and when (including flu and especially travel shots)? DTaP, IPV & Hib

Supplements and medications (including dosages) taken at time of hair test, or for the 3-6 months before the sample was taken? AC protocol round #31, zinc, mag/cal, liver support, ACE, OoO, GSE, OLE

What is your age, height and weight? 3 yrs, 32 lbs, 34 inches

Other information you feel may be relevant? Levels of lead in the blood are down to below 3.

What is your location - city & country (so that we can learn where certain toxins are more prevalent). Allentown, PA