



PATIENT: Number 605
 SEX: Male
 AGE: 6

Toxic & Essential Elements; Hair

TOXIC METALS			
	RESULT µg/g	REFERENCE INTERVAL	PERCENTILE 68 th 95 th
Aluminum (Al)	11	< 8.0	
Antimony (Sb)	0.037	< 0.066	
Arsenic (As)	0.032	< 0.080	
Barium (Ba)	0.17	< 0.75	
Beryllium (Be)	< 0.01	< 0.020	
Bismuth (Bi)	0.011	< 2.0	
Cadmium (Cd)	0.016	< 0.070	
Lead (Pb)	0.21	< 1.0	
Mercury (Hg)	0.15	< 0.40	
Platinum (Pt)	< 0.003	< 0.005	
Thallium (Tl)	< 0.001	< 0.002	
Thorium (Th)	0.001	< 0.002	
Uranium (U)	0.014	< 0.060	
Nickel (Ni)	0.08	< 0.20	
Silver (Ag)	0.09	< 0.14	
Tin (Sn)	0.19	< 0.30	
Titanium (Ti)	0.60	< 0.70	
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)	170	160- 500			
Magnesium (Mg)	15	12- 50			
Sodium (Na)	120	20- 200			
Potassium (K)	130	12- 140			
Copper (Cu)	11	11- 32			
Zinc (Zn)	180	110- 190			
Manganese (Mn)	0.15	0.08- 0.50			
Chromium (Cr)	0.40	0.40- 0.70			
Vanadium (V)	0.024	0.025- 0.10			
Molybdenum (Mo)	0.041	0.040- 0.090			
Boron (B)	0.44	0.50- 3.5			
Iodine (I)	0.46	0.25- 1.3			
Lithium (Li)	0.039	0.007- 0.020			
Phosphorus (P)	253	150- 220			
Selenium (Se)	0.42	0.70- 1.1			
Strontium (Sr)	0.29	0.21- 2.1			
Sulfur (S)	51200	44000- 51000			
Cobalt (Co)	0.009	0.004- 0.020			
Iron (Fe)	7.8	7.0- 16			
Germanium (Ge)	0.033	0.030- 0.040			
Rubidium (Rb)	0.11	0.008- 0.080			
Zirconium (Zr)	0.11	0.060- 0.70			

SPECIMEN DATA		RATIOS		
COMMENTS:		ELEMENTS	RATIOS	RANGE
Date Collected: 3/3/2012	Sample Size: 0.197 g	Ca/Mg	11.3	4- 30
Date Received: 3/22/2012	Sample Type: Head	Ca/P	0.672	0.8- 8
Date Completed: 3/24/2012	Hair Color: Brown	Na/K	0.923	0.5- 10
Methodology: ICP/MS	Treatment:	Zn/Cu	16.4	4- 20
	Shampoo: Anglamarck	Zn/Cd	> 999	> 800

Health history for hair test 605

1. What are your current symptoms and health history?

Slender, normal height. unilateral hearing impairment (nearly deaf on one side), night-enuresis, slightly aggressive

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?

8-12 amalgam fillings

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

Normal childhood vaccination program

6. Supplements and medications (including dosages) taken at time of hair test, or for the 3-6 months before the sample was taken?

None (possibly eye-Q)

7. What is your age, height and weight?

6Y 118 cm

8. Other information you feel may be relevant?

no known allergies,

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

Norway