

Mar. 13. 2014 10:17AM

CHIROPRACTIC HEALING

No. 6905 P. 29

ReacHealth Laboratory:

123 International y
Springfield, OR 97477541-687-2134
1-800-826-3616EUGENE HEALING CENTER
492 E 13TH AVE STE 200
EUGENE, OR 97401ACCT. NO. EL33002037
COLLECT. 12/18/13 15:53
RECEIVED 12/18/13 15:53
REPORTED 12/23/13 07:37Fax: 95414857102
PATIENT GIFFEN, TODD
PT I.D.
SEX M AGE 28Y
Pt. Phone: 5413210010
FINAL REPORT page 1

91537

TIMOTHY BILL WALTER ND

DOB 03/13/85

Test Procedure	Results	Reference Range
LACTATE	2.5 H	0.5-2.2 mmol/L Lab No: 100
CK	251	5-290 IU/L Lab No: 100
C-REACTIVE PROTEIN, HIGH SENSITIVITY		Lab No: 100
CRP, HIGH SENSITIVITY	2.94 H	<0.70 mg/L
RISK OF FUTURE MI	2.02 HIGH	

Relative risk for future MI listed above is the risk derived from hs-CRP only and is independent of other risk factors. The risk from sex, age, smoking, diabetes, hypertension, hyperlipidemia, family history and body mass index are not included in the above risk of future MI and should be included in the overall risk assessment for future coronary events.

Samples from patients with acute or chronic inflammatory disease states, tissue injury or infections may exhibit elevated hs-CRP and should not be used for assessment of CAD risk. Inflammation related to CAD generally does not exceed 10 mg/L. In the above situations or when hs-CRP exceeds 10 mg/L, repeat hs-CRP in 2-3 weeks to assess future CAD risk.

Test Procedure	Results	Reference Range
CELIAC DISEASE PANEL		Lab No: 100
Endomysial Antibody IgA	NEGATIVE	
Endomysial Antibody IgA Level	<1:5	

NEGATIVE: Endomysial IgA Titer less than 1:5 is negative. No significant level of Endomysial IgA antibody detected.

** CONTINUED ON NEXT PAGE **

12/23/13.
Q

EUGENE HEALING CENTER
492 E 13TH AVE STE 200
EUGENE, OR 97401

ACCT. NO. EL33002037
COLLECT. 12/18/13 15:53
RECEIVED 12/18/13 15:53
REPORTED 12/23/13 07:37

Fax: 95414857102
PATIENT GIFFEN, TODD
PT I.D.
SEX M AGE 28Y
Pt. Phone: 5413210010
FINAL REPORT page 2

91537

TIMOTHY BILL WALTER ND

DOB 03/13/85

Test Procedure	Results	Reference Range
Tissue Transglutaminase IgA	NEGATIVE	Lab No:100
Tissue Transglutaminase IgA Level 5		EU
NEGATIVE: ELISA Unit value less than 20 is negative. No significant level of Tissue Transglutaminase IgA antibody detected.		
GLIADIN (DGP) IgG ANTIBODY		Lab No:100
GLIADIN IgG ANTIBODY	NEGATIVE	
GLIADIN IgG LEVEL 3		EU
NEGATIVE: ELISA Unit value less than 20 is negative. No significant level of Gliadin IgG antibody detected.		
GLIADIN (DGP) IgA ANTIBODY		Lab No:100
GLIADIN IgA ANTIBODY	NEGATIVE	
GLIADIN IgA LEVEL 5		EU
NEGATIVE: ELISA Unit value less than 20 is negative. No significant level of Gliadin IgA antibody detected.		
IMMUNOGLOBULIN A, TOTAL		Lab No:100
IgA	273	40-350 mg/dL
HELICOBACTER PYLORI IgG, IgA		Lab No:100
HELICOBACTER PYLORI, IgG	NEGATIVE ✓	
HELICOBACTER PYLORI, IgG LEVEL 4.7		EU
NEGATIVE: An ELISA Unit less than or equal to 20.0 is negative. No significant level of H. pylori IgG detected.		
HELICOBACTER PYLORI, IgA	NEGATIVE	
HELICOBACTER PYLORI, IgA LEVEL 15.2		EU
NEGATIVE: An ELISA Unit less than or equal to 20.0 is negative. No significant level of H. pylori IgA detected.		

Test Procedure	Results	Reference Range
----------------	---------	-----------------

** CONTINUED ON NEXT PAGE **

12/23/13
②

EUGENE HEALING CENTER
492 E 13TH AVE STE 200
EUGENE, OR 97401

ACCT. NO. EL33002037
COLLECT. 12/18/13 15:53
RECEIVED 12/18/13 15:53
REPORTED 12/23/13 07:37

Fax: 95414857102
PATIENT GIFFEN, TODD
PT I.D.
SEX M AGE 28Y
Pt. Phone: 5413210010
FINAL REPORT page 3

91537
TIMOTHY BILL WALTER ND

DOB 03/13/85

Test Procedure	Results	Reference Range
LACTATE DEHYDROGENASE ISOENZYMES		
LACTATE DEHYDROGENASE 1	15	14-27 %
LACTATE DEHYDROGENASE 2	27 L	29-42 %
LACTATE DEHYDROGENASE 3	23	18-30 %
LACTATE DEHYDROGENASE 4	16 H	8-15 %
LACTATE DEHYDROGENASE 5	19	6-23 %
LACTATE DEHYDROGENASE, TOTAL	239 H	105-230 U/L

*

Test performed at: ARUP Inc.
500 Chipeta Way
Salt Lake City UT 84108

CREATINE KINASE ELECTROPHORESIS

CK MM	100	96-100 %
CK MB	0	0-4 %
CK BB	0	0-0 %
CK TOTAL	281 H	20-200 U/L

REFERENCE INTERVAL: CK Total

Access complete set of age- and/or gender-specific
reference intervals for this test in the ARUP Laboratory
Test Directory (aruplab.com).

CK-MACRO TYPE I	0	0-0 %
CK-MACRO TYPE II	0	0-0 %

*

Test performed at: ARUP Inc.
500 Chipeta Way
Salt Lake City UT 84108

** CONTINUED ON NEXT PAGE **

12/23/13
R

EUGENE HEALING CENTER
492 E 13TH AVE STE 200
EUGENE, OR 97401

ACCT. NO. EL33002037
COLLECT. 12/18/13 15:53
RECEIVED 12/18/13 15:53
REPORTED 12/23/13 07:37

Fax: 95414857102
PATIENT GIFFEN, TODD
PT I.D.
SEX M AGE 28Y
Pt. Phone: 5413210010
FINAL REPORT page 4

91537

TIMOTHY BILL WALTER ND

DOB 03/13/85

Test Procedure
ALDOLASE

Results
6.2

Reference Range
1.5-8.1 U/L

REFERENCE INTERVAL: Aldolase

Access complete set of age- and/or gender-specific
reference intervals for this test in the ARUP Laboratory
Test Directory (aruplab.com).

*

Test performed at: ARUP Inc.
500 Chipeta Way
Salt Lake City UT 84108

** END OF PATIENT REPORT **

12/23/13.
②