TEST REPORT

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Beaverton, OR 97008
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ZRT LABORATORY

 # D2026 05 01 019 B

Ordering Provider:
Getuwell

Samples Received
05/01/2026

Report Date
05/14/2026

Samples Collected
Blood Spot - 04/26/26 08:00

Patient Name: Blood Spot CardioMetabolic
Patient Phone Number:

Gender	Height	Waist
Male	6 ft in	38 in
DOB	**Weight**	**BMI**
1/1/1972 (54 yrs)	200 lb	27.1

TEST NAME	RESULTS | 04/26/26	RANGE
Blood Spot CardioMetabolic Markers		
Insulin	14.1	1-15 µIU/mL (optimal 2-6)
Hemoglobin A1c	5.4	4-6%
HDL	48	40-60 mg/dL
Triglycerides	230 H	<150 mg/dL
Cholesterol	225	132-239 mg/dL (200-239 Borderline)
LDL	131	<160 mg/dL (optimal 100-159)
VLDL	46 H	<30 mg/dL
hsCRP	0.7	<3 mg/L

<dl *= Less than the detectable limit of the lab.* ***N/A*** *= Not applicable; 1 or more values used in this calculation is less than the detectable limit.* ***H*** *= High.* ***L*** *= Low.*

Therapies

oral Thyroxine (T4) (Pharmaceutical) (3 Days Last Used)

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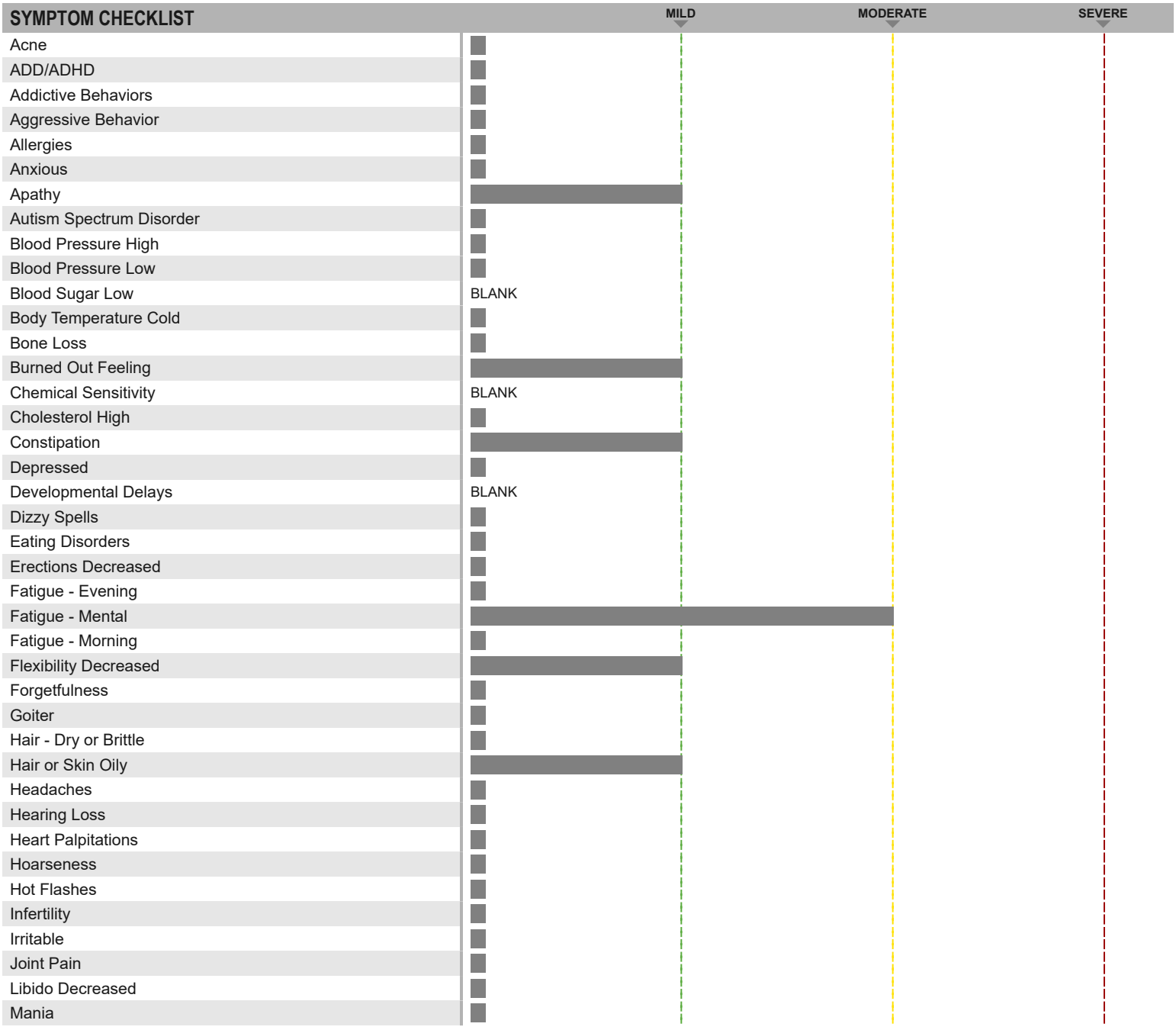
Laboratory Director

Alison McAllister, ND.
(Ordering Provider unless otherwise specified on page 1)

Disclaimer: Symptom Categories below show percent of symptoms self-reported by the patient compared to total available symptoms for each category. For detailed information on category breakdowns, go to www.zrtlab.com/patient-symptoms.

SYMPTOM CATEGORIES	RESULTS | 04/26/26
Estrogen / Progesterone Deficiency	0%
Estrogen Dominance / Progesterone Deficiency	17%
Low Androgens (DHEA/Testosterone)	14%
High Androgens (DHEA/Testosterone)	15%
Low Cortisol	11%
High Cortisol	14%
Hypometabolism	10%
Metabolic Syndrome	25%



The above results and comments are for informational purposes only and are not to be construed as medical advice. Please consult your healthcare practitioner for diagnosis and treatment.

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SYMPTOM CHECKLIST	MILD / MODERATE / SEVERE
Mental Sharpness Decreased	BLANK
Muscle Size Decreased	
Muscle Soreness	
Nails Breaking or Brittle	
Neck or Back Pain	
Nervous	
Night Sweats	
Numbness - Feet or Hands	
OCD	
Panic Attacks	
Prostate Cancer	
Prostate Problems	
Pulse Rate Slow	
Rapid Aging	
Rapid Heartbeat	
Ringing In Ears	
Skin Thinning	
Sleeping Difficulty	
Stamina Decreased	BLANK
Stress	
Sugar Cravings	
Sweating Decreased	
Swelling or Puffy Eyes/Face	BLANK
Triglycerides Elevated	
Urinary Urge Increased	
Urine Flow Decreased	
Weight Gain - Breast or Hips	
Weight Gain - Waist	

Lab Comments

INSULIN (fasting) is within normal range, but higher than the optimal range of 2-6, suggesting an evolving insulin resistance. Insulin resistance predisposes to significantly increased lifetime risk for developing more serious health conditions such as metabolic syndrome (high blood pressure, excessive weight gain in the waist, elevated blood lipids), diabetes, and cardiovascular disease. Stress reduction, exercise, proper diet (reducing consumption of excessive carbohydrates), and balancing hormones within normal physiological ranges are important for prevention of insulin resistance/metabolic syndrome and long term risks to health.

Hemoglobin A1c (HbA1c) is within range. HbA1c is a measure of red blood cell hemoglobin glycation and reflects the average blood glucose for the previous 3 months. The American Diabetic Association recommends the following HbA1c levels: normal if it is <5.7%, prediabetes 5.7%-6.4%, and diabetic >6.5%.

HDL cholesterol is within the ranges most health experts consider as low risk for cardiovascular disease. However, HDL-cholesterol should be evaluated in parallel with LDL and triglycerides, which also are risk factors.

Triglycerides are elevated. Triglycerides are a type of fat in the bloodstream that is taken up by tissues and used as a primary energy source. Triglycerides are derived from fats consumed in food and synthesized in the body from carbohydrates (sugars). Triglycerides are stored by tissues and released into the bloodstream in response to hormonal signals. Elevated triglycerides (hypertriglyceridemia) above 200 mg/dL are associated with increased risk for heart disease and stroke. Hypertriglyceridemia above 150 mg/dL signals insulin resistance/metabolic syndrome and is often found in untreated type 2 diabetes. Calorie restriction, lowering simple carbohydrates in the diet, and exercise are natural ways to lower triglycerides and reduce risk for cardiovascular disease and diabetes.

Cholesterol is within a range (200-240 mg/dL) considered by most health educators as moderate risk for cardiovascular disease. Cholesterol should be evaluated in parallel with other lipid risk factors, which include triglycerides, LDL and HDL cholesterol. The current NCEP-ATP III recommendations for LDL cholesterol are <100 optimal, 100-129 near optimal, and 130 and above becomes the high range. The ADA and American College of Cardiology Foundation's consensus statement recommended a cutoff of 100 mg/dL for LDL in patients at high risk who have 2 or more additional risk factors for CVD. For additional information see http://en.wikipedia.org/wiki/Cholesterol

High Sensitivity C-Reactive Protein (hs-CRP) is within normal range (< 3 mg/L). Elevated hs-CRP is a marker of inflammation and contributor to

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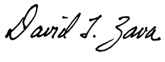
pro-inflammatory and pro-thrombotic elements of cardiovascular disease risk.



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