

25304-0022

* **US BioTek** US BioTek, 16020 Linden Av N, Shoreline WA 98133

Lab ID
Patient ID PAT-100009
Ext ID 25304-0022

Test Patient

Sex: Female • 45yrs • 01-Jan-80

RECEIVED
31-Oct-25

HEAVY METALS PANEL

Specimen type - Urine, Spot

Collected

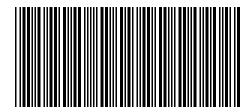
20-Oct-25 10.23am

PHYSIOLOGICAL MINERALS

TEST	RESULT	H/L	REFERENCE	UNITS
● Calcium	55.00		(<450.00)	mg/gCR
● Iron	2.9		(<200.0)	ug/gCR
● Magnesium	32.00		(<290.00)	mg/gCR
● Zinc	0.13		(<900.00)	mg/gCR

TRACE MINERALS

TEST	RESULT	H/L		REFERENCE	UNITS
Boron	0.11			(<5500)	ug/gCR
Chromium	2.09			(<4.60)	ug/gCR
Cobalt	0.88			(<1.60)	ug/gCR
Copper	66.0	H		(<55.0)	ug/gCR
Germanium	0.30			(<1.50)	ug/gCR
Iodine	88.00	L		(>100.00)	ug/L
Lithium	45.00			(<55.00)	ug/gCR
Manganese	0.93			(<1.50)	ug/gCR
Molybdenum	10.60			(<65.00)	ug/gCR
Nickel	0.81			(<2.00)	ug/gCR
Rubidium	11			(<3000)	ug/gCR
Selenium	11.70			(<63.00)	ug/gCR
Strontium	82.00			(<310.00)	ug/gCR
Vanadium	3.88			(<8.00)	ug/gCR



25304-0022

Lab ID
Patient ID PAT-100009
Ext ID 25304-0022

Test Patient

Sex: Female • 45yrs • 01-Jan-80

RECEIVED
31-Oct-25

TOXIC METALS

TEST	RESULT	H/L		REFERENCE	UNITS
Aluminium	25.00	H		(<40.00)	ug/gCR
Antimony	<DL			(<1.00)	ug/gCR
Arsenic	38.00	H		(<35.00)	ug/gCR
Barium	0.89			(<5.70)	ug/gCR
Beryllium	<DL			(<0.60)	ug/gCR
Bismuth	<DL			(<1.00)	ug/gCR
Bromine	190.00			(<4800)	ug/gCR
Cadmium	0.22			(<0.60)	ug/gCR
Cesium	2.33			(<10.30)	ug/gCR
Gadolinium	<DL			(<0.23)	ug/gCR
Gallium	<DL			(<0.10)	ug/gCR
Lead	19.00			(<8.00)	ug/gCR
Mercury	5.9			(<3.0)	ug/gCR
Palladium	0.01			(<15.00)	ug/gCR
Platinum	0.10			(<1.00)	ug/gCR
Silver	0.22			(<0.10)	ug/gCR
Tellurium	<DL			(<0.80)	ug/gCR
Thallium	<DL			(<1.50)	ug/gCR
Tin	0.65			(<0.50)	ug/gCR
Titanium	0.05			(<50.00)	ug/gCR
Tungsten	0.01			(<0.50)	ug/gCR
Uranium	0.01			(<0.10)	ug/gCR
Zirconium	0.16			(<5.00)	ug/gCR



PATIENT REPORT

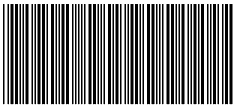
4100 FairwayDr. Ste 600, Carrollton, Tx 75010

clientservices@realtimelab.com

972.492.75010



Clinical Laboratory Improvement Amendments



25304-0022

Lab ID
Patient ID PAT-100009
Ext ID 25304-0022

Test Patient

Sex: Female • 45yrs • 01-Jan-80

RECEIVED
31-Oct-25

Nutrient Mineral Comment

COPPER ELEVATED:

Elevated urine copper excretion may be due to Wilsons disease. Elevated levels may also occur with copper toxicity, chronic active liver disease and in contaminated specimens. Please correlate clinically and repeat with follow up testing if necessary.

IODINE COMMENT: Urinary iodine reflects dietary iodine intake, more than 90% of dietary iodine is excreted in the urine. WHO Guidelines: >100 ug/gCR Not Iodine deficient 50 - 100 ug/gCR Mild Iodine deficiency 20 - 49 ug/gCR Moderate Iodine deficiency < 20 ug/gCR Severe Iodine deficiency Low levels of iodine may lead to hypothyroidism and goitre and in severe cases, intellectual disability.

Toxic Metals Comment

ALUMINUM (Al) ELEVATED:

Description: A neurotoxic metal found in cookware, antacids, food additives, vaccines, and deodorants. It accumulates in the brain, bones, and kidneys.

Symptoms: Cognitive decline, memory loss, fatigue, anemia, osteopenia.

Treatment: Avoid exposure, support detox with silica-rich water, malic acid, NAC, and glutathione. Consider chelation with EDTA in high exposures

ARSENIC (As) ELEVATED:

Description: A toxic metalloid found in contaminated water, rice, seafood (organic arsenic), pesticides, and pressure-treated wood.

Symptoms: Fatigue, neuropathy, skin changes, cardiovascular disease, increased cancer risk.

Treatment: Distinguish between organic and inorganic forms; support methylation (folate, B12, SAME), and use chelation agents like DMSA or NAC if applicable.

Methodology

Inductively Coupled Plasma Mass Spectrometry (ICP-MS), Automated Chemistry/Immunochemistry