

DEMO DEMO

FINAL REPORT

Accession ID: 2524094699

Name: DEMO DEMO
Date of Birth: 00-00-0000
Biological Sex: Male
Age: 63
Height:
Weight:
Fasting:
Telephone: 000-000-0000
Street Address:
Email:

Provider Information

Practice Name: DEMO CLIENT, MD
Provider Name: DEMO CLIENT, MD
Phlebotomist: 0
Telephone: 000-000-0000
Address: 3521 Leonard Ct, Santa Clara, CA 95054

Specimen Information

Sample Type	Collection Time	Received Time	Report	Final Report Date
Serum	Local 2026-07-07 00:00	2026-07-08 11:09 (PDT)	Foundation Baseline - P2	2026-07-15 10:52 (PDT)
EDTA	Local 2026-07-07 00:00	2026-07-08 11:09 (PDT)	Foundation Baseline - P2	2026-07-15 10:52 (PDT)
Plasma	Local 2026-07-07 00:00	2026-07-08 11:09 (PDT)	Foundation Baseline - P2	2026-07-15 10:52 (PDT)

Foundation Baseline

Your Foundation Health Report

Foundation Baseline - Summary	Pg 3
Metabolic Score	Pg 4
Inflammation Score	Pg 6
Neural Score	Pg 7
Cardio Score	Pg 8
Recovery and Resilience Score	Pg 9
Hormone Score	Pg 10
Cellular Score	Pg 11



SUMMARY OF FINDINGS

7 Systems Assessed

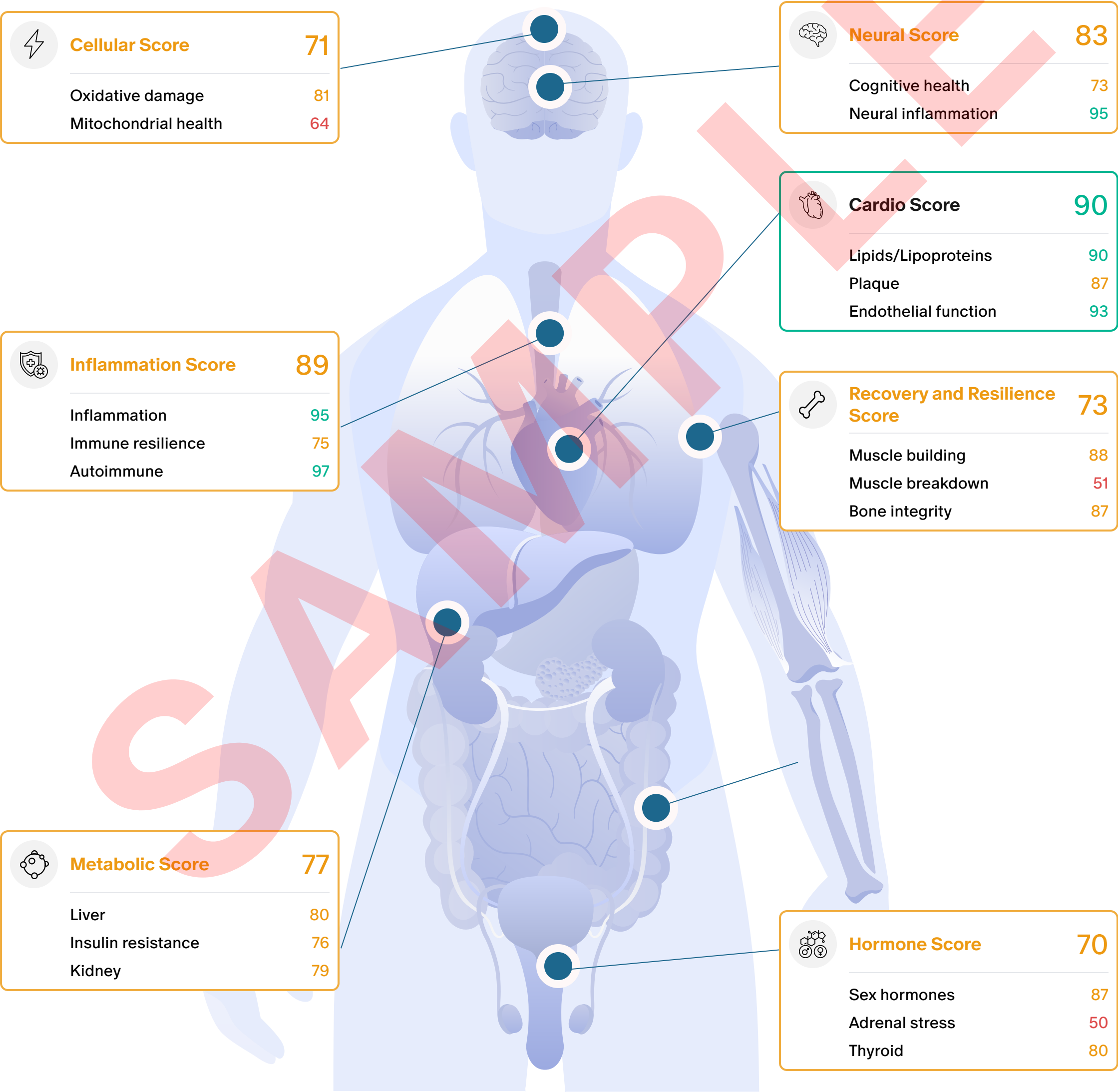
Composed of

1 Normal > 89

6 Moderate 70-89

0 High Risk < 70

Body System Scores



METABOLIC SCORE

77/100

MODERATE

Liver80/100			Continued - Insulin resistance		
TEST	RESULT	REF.	TEST	RESULT	REF.
Albumin	4.3 g/dL	3.4 5.2	Fasting Glucose	143 mg/dL	69 100
Total Protein	6.5 g/dL	6.1 8	Lipase	18.3 U/L	12.9 60
AST	49 U/L	40	Adiponectin	14.7 ug/mL	4.4 58.5
ALP	32 U/L	39 129	Fructosamine	289 umol/L	285
ALT	73 U/L	41	Ferritin	30 ng/mL	29 400
GGT	17 U/L	60	Kidney79/100		
Bilirubin Direct	<0.2 mg/dL	0.3	TEST	RESULT	REF.
Bilirubin Total	0.3 mg/dL	1.2	Uric Acid	6.8 mg/dL	3.3 7
Insulin resistance76/100			Creatinine	1.37 mg/dL	0.69 1.2
TEST	RESULT	REF.	BUN/ Creatinine Ratio	11	9 20
HbA1c	6.8 %	5.6 6.4	Cystatin C	1.42 mg/L	0.6 0.95
Fasting Insulin	5.8 uU/mL	2.5 24.9	eGFR	54	30 59
HOMA-IR (calculated)	2.0	0.6 2	BUN	15 mg/dL	7 23

Continued - METABOLIC SCORE

TEST	RESULT	REF.
Serum Osmolality	300.9 mOsm/kg	284.9 315
Sodium	139 mmol/L	135 145
Potassium	4.8 mmol/L	3.4 5.1
Chloride	107 mmol/L	97 107
CO ₂	16 mmol/L	17 29

INFLAMMATION SCORE

89/100

MODERATE

Inflammation			95/100	Continued - Immune resilience			
TEST	RESULT	REF.		TEST	RESULT	REF.	
hs-CRP	0.7 mg/L			Lymphocytes	30.1%		
Total WBC	5.32 x 10^3/μL			Basophils	0.4%		
Immune resilience			75/100	Eosinophils	4.1%		
TEST	RESULT	REF.		Monocytes	7.5%		
Neutrophil/ Lymphocyte Ratio	1.84			Total IgG	701 mg/dL		
Neutrophil count	2.95 x 10^3/μL			Total IgM	35 mg/dL		
Immature Granulocyte count	0.130 x 10^3/μL			Autoimmune			
Immature Granulocytes	2.4%			TEST NAME	RESULT	PATTERN	TITER
Lymphocyte count	1.60 x 10^3/μL			ANA	CURR. NEGATIVE	Not Applicable	< 1:40
Basophil count	<0.03 x 10^3/μL			TEST	RESULT	REF.	
Eosinophil count	0.22 x 10^3/μL			RF IgM	11 IU/mL		
Monocyte count	0.40 x 10^3/μL						
Neutrophils	55.5%						

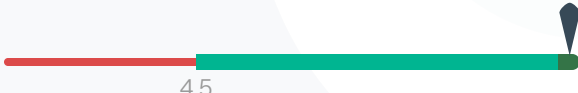
Service Date: Local 2026-07-07 00:00

NEURAL SCORE

83/100

MODERATE

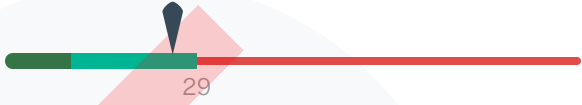
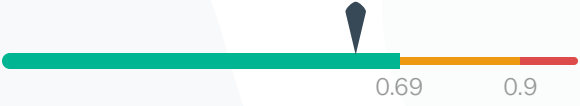
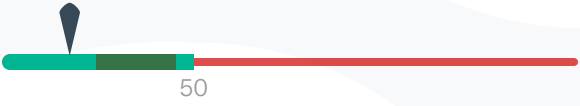
73/100

TEST	RESULT	REF.
Homocysteine	24 $\mu\text{mol/L}$	
Vitamin B12	302 pg/mL	
Folate	17.5 ng/mL	

CARDIO SCORE

90/100

NORMAL

Lipids/Lipoproteins			90/100	Plaque			87/100
TEST	RESULT	REF.		TEST	RESULT	REF.	
Apo B	80 mg/dL			Lp(a)	26 mg/dL		
Apo B/Apo A-1 Ratio	0.62			MPO	425.0 pmol/L		
Lp(a)	26 mg/dL			Homocysteine	24 µmol/L		
sdLDL	18.5 mg/dL			IRF	9.5 %		
Triglycerides	97 mg/dL			MPV	13.0 fL		
HDL Direct	43 mg/dL			Platelet Count	198.0 x10^3/µL		
Apo A-1	129 mg/dL						
Total Cholesterol	166 mg/dL						
LDL Direct	102 mg/dL						
Cholesterol/HDL Ratio	3.9						
LDL, Calculated	95 mg/dL						

RECOVERY AND RESILIENCE SCORE

73/100

MODERATE

Muscle building88/100

Bone integrity87/100

TEST	RESULT	REF.
IGF-1	46 ng/mL	42 - 220

Muscle breakdown51/100

TEST	RESULT	REF.
LDH	139 U/L	134 - 225
Total CK	13 U/L	29 - 223
AST	49 U/L	0 - 40
Uric Acid	6.8 mg/dL	3.3 - 7

TEST	RESULT	REF.
Vitamin D, 25-OH	40.8 ng/mL	29.9 - 108
Calcium	8.9 mg/dL	8.8 - 10.6
ALP	32 U/L	39 - 129
Inorganic phosphate	3.6 mg/dL	2.4 - 4.5

HORMONE SCORE

70/100

MODERATE

Sex hormones87/100

Thyroid80/100

TEST	RESULT	REF.	TEST	RESULT	REF.
Total Testosterone	674.0 ng/dL	203.3 - 1415.5	Anti-TPO	13 IU/mL	0 - 34
Free Testosterone	6.72 ng/dL	3.24 - 30.66	Anti-TG	17.7 IU/mL	0 - 115
Estradiol	23.5 pg/mL	25.7 - 60.7	TSH	9.690 µIU/mL	0.11 - 4.91
Progesterone	<0.1 ng/mL	0 - 0.595	Free T4	1.2 ng/dL	0.8 - 1.7
SHBG	94.8 nmol/L	19.2 - 76.4	Free T3	1.7 pg/mL	1.9 - 4.4
LH	3.4 mIU/mL	1.6 - 8.6	Total T3	0.4 ng/mL	0.7 - 2
FSH	4.8 mIU/mL	1.4 - 12.4	Total T4	6.8 µg/dL	4.4 - 9.8
Prolactin	10.60 ng/mL	4.03 - 15.2	Serum Iron	88 µg/dL	58 - 158

Adrenal stress50/100

TEST	RESULT	REF.
Cortisol	5.7 µg/dL	6.1 - 19.4
DHEA-S	31.6 µg/dL	51.6 - 295

CELLULAR SCORE

71/100

MODERATE

Mitochondrial health64/100			Continued - Mitochondrial health		
TEST	RESULT	REF.	TEST	RESULT	REF.
TIBC	360 µg/dL	170 - 505	RDW - SD	45.0 fL	35 - 43.9
Transferrin	288 mg/dL	202 - 362	Reticulocyte Count	0.0355 x 10^6/µL	0.0443 - 0.1451
Transferrin Saturation	24 %	14 - 50	Retic-Hemoglobin	34.3 pg	28.1 - 35.7
UIBC	272 µg/dL	111 - 347	Reticulocyte %	1.0 %	3
Hematocrit	34.5 %	40 - 51			
Hemoglobin	11.6 g/dL	13.6 - 17.5			
MCH	31.7 pg	25.6 - 32.2			
MCHC	33.6 g/dL	32.2 - 36.5			
MCV	94.3 fL	78.9 - 92.2			
Nucleated RBC count	<0.01 x 10^3/µL	0.012			
Nucleated RBC%	0.0 /100WBC	0.2			
RBC Count	3.66 x 10^6/µL	4.62 - 6.08			
RDW - CV	13.0 %	11.5 - 14.4			

INTRODUCTION

Vibrant Wellness is pleased to offer Foundation Baseline testing to support healthy lifestyle choices in consultation with your healthcare provider. The Foundation Baseline evaluates biomarkers across key scoring domains including: Cellular Score, Inflammation Score, Metabolic Score, Neural Score, Cardio Score, Recovery and Resilience Score, and Hormone Score. Results are intended to be interpreted by healthcare providers to support a systems-based understanding of overall health and to guide personalized wellness strategies.

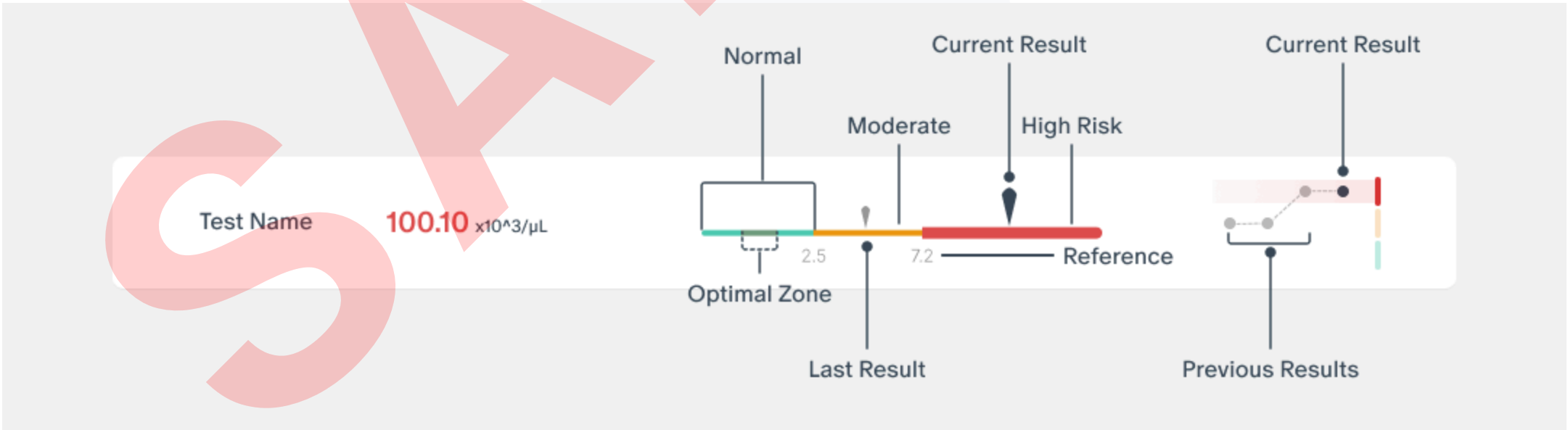
Methodology

The Foundation Baseline uses the FDA-approved Roche Cobas platform for markers evaluating the Cellular Score, Inflammation Score, Metabolic Score, Neural Score, Cardio Score, Recovery and Resilience Score, and Hormone Score.

Interpretation of Report

The Foundation Baseline report begins with a comprehensive summary page that provides an integrated overview of the patient’s overall health status across core physiological systems. The summary highlights system-level health scores on a standardized 100-point scale, categorizing results into risk tiers to help prioritize clinical attention. Key scoring domains include: Cellular Score (Oxidative Damage and Mitochondrial Health), Inflammation Score (Inflammation, Immune Resilience and Autoimmune), Metabolic Score (Liver, Insulin Resistance and Kidney), Neural Score (Cognitive Health and Neural Inflammation), Cardio Score (Lipids/Lipoproteins, Plaque, Endothelial Function), Recovery and Resilience Score (Muscle Building, Muscle Breakdown and Bone Integrity), and Gut Inflammation) and Hormone Score (Sex Hormones, Adrenal Stress and Thyroid). These scores are visually mapped onto a full-body anatomical illustration, allowing for intuitive visualization of system-specific imbalances and their relative severity. A green score is >89 and indicates optimal functioning, a yellow score is 89 but 70 and indicates sub-optimal functioning, and a red score is <70 and indicates impaired functioning.

This integrative presentation supports rapid risk stratification and helps guide targeted follow-up testing, lifestyle interventions, and personalized care planning based on the cumulative impact of underlying biochemical, hormonal, inflammatory, and metabolic markers. Reference ranges have been established based on cohorts of 500 relatively healthy adults over 18 years of age. Reference populations and age stratification may vary by analyte for FDA-approved tests included in this panel. This is followed by critical values if applicable and follow-up recommendations of additional testing and a complete list of all biomarkers tested with quantitative results to enable a full overview along with the corresponding reference ranges, with results displayed in a quantile-style format using horizontal bars segmented into dark green (optimum), green (in control), and red (risk) zones , positioning the patient's value as a pin to intuitively convey relative risk levels. The patient's value is considered normal if it falls within the dark green (optimum) or green (in control) zone. The optimum zone determination is based on literature findings associated with mortality and longevity, clinical consensus, and research institute sentiment. The current result and previous result are listed to the left of the reference range. The reference metric, used to establish where a patient’s result lies in the reference range, is listed to the right of the reference range. See the image below for an example of a visual representation of the results.



Please note: Consider all supplements in relation to medical history and symptoms. Not all recommended supplements are appropriate in all individual cases. It is important that you discuss any modifications to your diet, exercise, drug, and/or nutritional supplementation with your healthcare provider before making any changes.

Regulatory Disclaimer: This test was performed by Vibrant America Clinical Laboratory at 3521 Leonard Ct, Santa Clara, CA 95054 (CLIA No. 05D2078809, CAP No. 8970308). This test¹ was developed, and its performance characteristics determined, by Vibrant America Clinical Laboratory. This test has not been cleared or approved by the U.S. Food and Drug Administration (FDA).

ABBREVIATIONS AND ACRONYMS

Abbreviation	Term	Abbreviation	Term
25-OH	25-Hydroxy	IgG	Immunoglobulin G
ACTH	Adrenocorticotropic Hormone	IgM	Immunoglobulin M
ALP	Alkaline Phosphatase	IL-6	Interleukin-6
ALT	Alanine Aminotransferase	IRF	Immature Reticulocyte Fraction
ANA	Antinuclear Antibody	LC-MS/MS	Liquid Chromatography–Tandem Mass Spectrometry
Anti-CCP3	Anti-Cyclic Citrullinated Peptide (3rd Generation) Antibody	LDH	Lactate Dehydrogenase
Anti-TG	Anti-Thyroglobulin Antibody	LDL	Low-Density Lipoprotein
Anti-TPO	Anti-Thyroid Peroxidase Antibody	LH	Luteinizing Hormone
Apo A-1	Apolipoprotein A-1	Lp(a)	Lipoprotein(a)
Apo B	Apolipoprotein B	Lp-PLA2	Lipoprotein-Associated Phospholipase A2 (PLAC Test)
AST	Aspartate Aminotransferase	LPS	Lipopolysaccharide
BUN	Blood Urea Nitrogen	MCH	Mean Corpuscular Hemoglobin
CK	Creatine Kinase	MCHC	Mean Corpuscular Hemoglobin Concentration
CLIA	Chemiluminescent Immunoassay	MCV	Mean Corpuscular Volume
CO2	Carbon Dioxide	MPO	Myeloperoxidase
Cr	Creatinine	MPV	Mean Platelet Volume
CRH	Corticotropin-Releasing Hormone	ox-LDL	Oxidized Low-Density Lipoprotein
CRP	C-Reactive Protein	PTH	Parathyroid Hormone
Cys	Cystatin C	RBC	Red Blood Cell
DHEA-S	Dehydroepiandrosterone Sulfate	RDW - CV	Red Cell Distribution Width (Coefficient of Variation)
eGFR	Estimated Glomerular Filtration Rate	RDW - SD	Red Cell Distribution Width (Standard Deviation)
FSH	Follicle-Stimulating Hormone	Retic-Hemoglobin	Reticulocyte Hemoglobin Content
GGT	Gamma-Glutamyl Transferase	RF	Rheumatoid Factor
GH	Growth Hormone	sdLDL	Small Dense Low-Density Lipoprotein
GnRH	Gonadotropin-Releasing Hormone	SHBG	Sex Hormone-Binding Globulin
Hb	Hemoglobin	T3	Triiodothyronine
HbA1c	Hemoglobin A1c (Glycated Hemoglobin)	T4	Thyroxine
Hct	Hematocrit	TIBC	Total Iron-Binding Capacity
HDL	High-Density Lipoprotein	TNF-α	Tumor Necrosis Factor Alpha
HOMA-IR	Homeostatic Model Assessment of Insulin Resistance	TRH	Thyrotropin-Releasing Hormone
hs-CRP	High-Sensitivity C-Reactive Protein	TSH	Thyroid-Stimulating Hormone
IgA	Immunoglobulin A	UIBC	Unsaturated Iron-Binding Capacity
IGF-1	Insulin-like Growth Factor 1	WBC	White Blood Cell

RISK AND LIMITATIONS

Test results reflect biological and analytical findings at the time of specimen collection and may vary between individuals. Reference ranges for most of laboratory-developed tests (LDT) were established using a healthy adult population and may not be representative of other specific populations (e.g. pediatric, pregnant, individuals with chronic conditions or from all ethnic backgrounds). They do not provide absolute levels at which the symptoms may occur and hence clinical correlation by the provider is recommended.

Results may be affected by pre-analytical variables related to specimen collection, handling, transport, storage, and inherent biological variability. Specimens including urine, saliva, stool, and blood-based samples (serum, plasma, EDTA whole blood, TES, and dried blood spots) may be impacted by improper collection technique, contamination, insufficient sample volume, delayed shipment or processing, temperature excursions, or improper storage conditions. Additional factors such as hemolysis; anticoagulant effects; clotting, centrifugation, or mixing parameters; incomplete mixing with transport media; and variability in dried blood spot application or saturation may further affect analyte stability or result accuracy. Specimen-specific factors, including urine dilution or concentration, variability in saliva composition or flow rate, and intermittent microbial shedding in stool, may also contribute to result variability. For stool-based testing, one negative specimen does not rule out the possibility of parasitic infection or the presence of other pathogens. These pre-analytical variables may impact result accuracy and, in some cases, lead to a Test Not Performed (TNP). When clinically appropriate, repeat testing may be recommended; however, repeat testing may still fail to produce a reportable result if the underlying limitations persist.

All laboratory testing methodologies are subject to inherent analytical limitations related to instrument performance, assay design, methodological variability, and the specifications of FDA-approved and laboratory-developed analytes included in a test panel. As with all clinical laboratory testing, there is a small possibility of incorrect results due to technical errors, sample misidentification, contamination, rare genetic variants, or software-related issues.

Genetic testing is helpful in analyzing risks to various diseases. However, it is important to note that genetic risk determinants are neither necessary nor sufficient for the development of disease. Environmental and lifestyle risk factors could also affect the risk of disease development. Genetic risk does not indicate how common a health condition or variant is within the population; a risk-associated variant may be common or uncommon. Interpretation of genetic results should consider individual health context, as population-based reference frameworks may not fully represent all age groups, ethnic backgrounds, or health profiles. Genetic testing evaluates only the genotypes indicated and does not assess other genetic abnormalities found elsewhere in the genome. Different laboratories may test different variants when evaluating genetic risk for a given condition; therefore, genetic risk results may not be directly comparable between laboratories.

Some individuals may experience anxiety related to their genetic test results. Vibrant encourages any concerned individual to consult with a qualified healthcare professional prior to sample collection for a genetic test. Users of the test are encouraged to discuss their test results with a genetic counselor, board-certified clinical molecular geneticist, or equivalent health care professional. In some cases, the identification of risk-associated genetic variants may prompt discussion with a healthcare provider about additional testing or follow-up.

The reported analytes, SNPs, and associated informational content are informed by scientific knowledge at the time of reporting, including peer-reviewed scientific publications, publicly available research, and guidance from recognized scientific and public health organizations. Interpretive content may be updated as scientific knowledge continues to evolve. Clinical interpretations and associated risk assessments are largely derived from studies conducted in specific populations and may not be fully applicable to all individuals, including those of differing sexes, ages, ethnic backgrounds, ancestries, or underlying health conditions not represented in the original study population. Thus, accounting for a patient's full clinical picture should be considered when extrapolating patients results to specific lab result-associated health outcomes. The informational content included in this report is derived from publicly available scientific literature and is provided for educational and informational purposes only. This content does not replace medical advice from a qualified healthcare professional. Any wellness, nutritional, or dietary recommendations, diagnoses of medical conditions, or treatment decisions based on these results are made at the discretion and responsibility of the ordering healthcare professional.

Vibrant does not diagnose, treat, or cure medical conditions and does not replace the care of a licensed medical practitioner or counselor, nor does Vibrant recommend self-diagnosis or self-medication. Depending on the nature of testing, individuals who receive moderate- or high-risk results may be advised to pursue confirmatory testing and appropriate medical follow-up. Vibrant assumes no liability for any loss, injury, or damages arising from the procurement, compilation, interpretation, delivery, or reporting of information contained in this report, nor from any decisions made or actions taken based on these results.

The supplement recommendations and dosage guidelines provided are intended for general informational purposes only and should not replace professional medical advice; final dosage decisions must be made in consultation with your healthcare provider. Vibrant disclaims any liability for adverse effects, outcomes, or consequences arising from the use of these suggestions.