
Biolab Medical Unit

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Biolab reference: UUXZ/XXXX/G19

Patient: SAMPLE REPORT

Date: 10-07-2019

DOB: 12-03-1983

Your reference:

Sex: FEMALE

Doctor: SAMPLE REPORT

Sample Date: 10-07-2019

Serum Vitamins

<u>Vitamin:</u>	<u>Result:</u>	<u>Units:</u>	<u>Reference range</u>
RETINOL (Vitamin A)	1.98	$\mu\text{mol/L}$	1.05 - 2.80
ALPHA-CAROTENE	0.28	$\mu\text{mol/L}$	0.30 - 1.50
BETA-CAROTENE	0.34	$\mu\text{mol/L}$	0.40 - 3.00
VITAMIN C	29	$\mu\text{mol/L}$	34 - 114
ALPHA-TOCOPHEROL (Vitamin E)	30	$\mu\text{mol/L}$	25 - 60
GAMMA-TOCOPHEROL (Vitamin E)	1.72	$\mu\text{mol/L}$	2.0 - 8.5

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Functional Blood B Vitamins

B1 THIAMINE (ETK activation)	1.24	Status: BORDERLINE < 1.15 normal 1.15 - 1.25 borderline > 1.25 deficient
B2 RIBOFLAVIN (EGR activation)	1.62	Status: DEFICIENT < 1.20 normal 1.20 - 1.30 borderline > 1.30 deficient
B6 PYRIDOXINE (EGOT activation)	1.70	Status: NORMAL < 1.75 normal 1.75 - 2.00 borderline > 2.00 deficient

Results expressed as ratio of activated to basal activity in IU/gHb.

Reference: Mount JN, Heduan E, Herd C, et al. Ann. Clin. Biochem. 1987; 24: 41-46.

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Reference: **XXXX/XXXX/G19**

DOB: **09/01/1984**

Patient: **Sample Report**

Sex: **FEMALE**

Clinician: **Sample Report**

Sample date: **17/7/19**

Clinician's reference:

Report printed: 18/07/2019

Vitamin D Profile

			<u>Reference range</u>
Vitamin D3 (cholecalciferol)	34	nmol/L	
Vitamin D2 (ergocalciferol)	3	nmol/L	(not present unless supplemental ergocalciferol has been consumed).
Total 25-hydroxy vitamin D	37	nmol/L (15 µg/L)	75 - 200 nmol/L (30 - 80 µg/L)

Comments:

Notes:

The serum concentration of 25-hydroxy vitamin D is the most sensitive and useful index of vitamin D status and correlates well with the plasma parathyroid hormone concentration and alkaline phosphatase activity. There is a two-fold seasonal variation in 25-hydroxy vitamin D in temperate regions of the globe.

For healthy subjects, with no medical condition and normal sun exposure, the serum reference interval for 25-hydroxy vitamin D is 75 – 200 nmol/L (30 – 80 µg/L).

The treatment target for subjects with medical conditions that may be associated with vitamin D deficiency is a serum range of 125 – 150 nmol/L (50 – 60 µg/L).

Vitamin D levels in supplemented individuals should be monitored carefully during the summer, when endogenous synthesis of vitamin D is at its maximum.

Vitamin D2, which is of plant origin, is the form contained in certain supplements. Total 25-hydroxy vitamin D can be taken as the sum of 25-hydroxy D3 and 25-hydroxy D2. Most subjects have very low levels of vitamin D2 in comparison to D3.

References:

1. Holick MF. Deficiency of sunlight and vitamin D. *BMJ* 2008;336:1318-1319.
2. Holick MF. Vitamin D and sunlight: strategies for cancer prevention and other health benefits. *Clin J Am Soc Nephrol* 2008; June 11.
3. Holick MF. Sunlight and vitamin D for bone health and prevention of autoimmune diseases, cancers, and cardiovascular disease. *Am J Clin Nutr* 80:1678-1688S, 2004.
3. Mawer EB, Davies M. Vitamin D nutrition and bone disease in adults. *Reviews in Endocrine & Metabolic Disorders* 2001; 2; 153-164.
5. Morris HA. Vitamin D: a hormone for all seasons - how much is enough? *Clin Biochem Rev* 2004; 26: 21-32.

