recommended that you not eat for at least 12 hours to obtain an accurate result for this test. Low values are not generally considered significant.

HDL CHOLESTEROL: High density lipoprotein (HDL) cholesterol is one of several types of fats and is a part of “total cholesterol.” It is referred to as “good cholesterol” because it acts as a scavenger, removing excess cholesterol from artery walls. It has been shown that the higher the level of HDL cholesterol, the lower the risk of developing heart disease.

LDL CHOLESTEROL: Low density lipoprotein (LDL) cholesterol is a part of the “total cholesterol.” This is the cholesterol that forms deposits on artery walls. The lower the amount of LDL cholesterol, the lower the risk of developing heart disease.

CORONARY RISK RATIO: is obtained by comparing the total cholesterol level to the HDL cholesterol level. The higher this number, the greater the risk of coronary heart disease. A high HDL cholesterol level will result in a lower ratio, which means a lower risk. This could be true even if the total cholesterol level is high. It is this ratio that appears to be a better measure of the lipid associated risk of coronary heart disease development.

OTHER SCREENINGS OFFERED:

Complete Blood Count (CBC)**

WBC (WHITE BLOOD CELL COUNT): White blood cells are one of your body’s methods of fighting infection, abnormal values may indicate viral or bacterial infections.

RBC (RED BLOOD CELL COUNT): Red blood cells carry oxygen throughout your body and determine your blood type; abnormal values may indicate anemia, overhydration, iron deficiency, bleeding, dehydration, polycythemia and some lung diseases. People who live at higher altitudes may see an evaluation in their red blood cell count.

HGB (HEMOGLOBIN): Hemoglobin allows oxygen to be carried by your red blood cells. Anemia, iron deficiency, bleeding, dehydration, polycythemia and some lung diseases and living in high altitudes may cause high or low hemoglobin results.

HCT (HEMATOCRIT): Your hematocrit is a measurement of your blood volume. Anemia, iron deficiency, bleeding, dehydration, polycythemia, some lung diseases and living at a higher altitude may cause high or low hematocrit results.

MPV (Mean Platelet Volume): MPV is an indicator of platelet size; a high or low MPV may indicate older platelets and younger platelets.

Additional Tests**

PROSTATIC SPECIFIC ANTIGEN (PSA) (OPTIONAL BLOOD SCREEN FOR MALES): Prostate specific antigen (PSA) is a blood screening that measures a protein that is only produced by the male prostate gland. Generally, a higher level of PSA is a warning sign for prostate problems. Your doctor is the best one to interpret your PSA results.

Newly updated prostate cancer screening guidelines from the American Cancer Society reaffirm the recommendation that men should discuss the uncertainties, risks, and potential benefits of screening for prostate cancer before deciding whether to be tested. Discussion about screening should start at age 50 for men at average risk.

HEMOGLOBIN A1C (OPTIONAL SCREEN FOR PEOPLE MANAGING DIABETES): This is a blood test that measures the average glucose over the past 2-3 months. It is used to provide feedback on diabetes management, by looking at the “big picture.” Home blood glucose monitoring, or fingersticks, give a “snapshot” of what the blood glucose level is at one particular moment. Current recommendations include having hemoglobin A1C checked every 3 to 6 months if you have diabetes. At this time, A1C is not used to diagnose diabetes.

YOUR SCREENING RESULTS

Screening values that are OUTSIDE the reference ranges: 1. May show that you had eaten shortly before your blood was drawn. 2. May mean there was a problem drawing your blood. 3. May indicate possible problems needing medical evaluation.

ABNORMAL TEST RESULTS SHOULD BE REVIEWED BY YOUR HEALTHCARE PROVIDER:

It is not possible to diagnose or treat any disease or health problem with this blood screen alone. It can help you learn more about your body and detect potential problems in early stages when treatment or changes in personal health habits can be most effective.

YOUR BLOOD RESULTS

You and your healthcare provider can learn a great deal about your health from a sample of your blood. Laboratory tests help in several ways. Sometimes test results will be abnormal before you have any symptoms. For those times when symptoms have developed, laboratory test results help confirm that a problem does exist.

But a normal test result is just as significant as an abnormal result. When a result is normal, it not only helps to rule out disease, but it also establishes a baseline for you. Each person has his or her own baseline “normal.” A person’s own result is the best baseline for monitoring any change that takes place in the future. If any of your values are significantly different from previous results but still normal, contact your health care provider.

MEDICATIONS AND FASTING:

Over-the-counter medications, prescription drugs, alternative medications, alcohol consumption and your fasting time may affect blood chemistry screening results. Your healthcare provider must have a complete and honest picture of your use of medications in order to effectively evaluate your health status. If all the needed information is provided, time and money will be saved. A 12-hour fast is recommended for the most accurate results.

** Not included in the Health Profile
**HEALTH PROFILE includes:**

**Diabetes Screen**

GLUCOSE is the primary energy source for all body tissues. The sugars and carbohydrates you eat are ordinarily converted into glucose, which can be used to either produce immediate energy or be stored in the liver or as fat throughout the body. High blood glucose (hyperglycemia) after fasting for 12 hours suggests diabetes. Your doctor may want to do further testing. A low glucose level (hyposglycemia) accompanied with symptoms such as weakness, nausea, sweating and difficulty thinking clearly, is suggestive of diabetes. Even if you know you have diabetes, it is important to report any abnormal levels to your health care provider.

**Kidney Function**

BUN (blood urea nitrogen) is a waste product from protein breakdown in the liver. It is excreted by the kidneys. If a person is dehydrated, or if a person is dehydrated, the BUN level will increase. Internal blood loss, high protein diets and/or strenuous exercise can also cause a high BUN level. A low BUN level may be the result of liver disease, poor diet, pregnancy or drinking too much water.

CREATININE is the end product of muscles. The muscles break down and produce creatinine. A high level may indicate kidney disease, poor dietary intake, dehydration, infection, or a high protein diet. A low level of creatinine may indicate dehydration or poor dietary intake.

**Liver Function**

ALBUMIN is the most plentiful protein in the blood. Approximately two-thirds of the total protein circulating in your blood is albumin. It is produced primarily in the liver and helps keep the fluid portion of the blood within the blood vessels. When your albumin level is low, water may leak into other parts of your body. A low albumin level may be caused by dehydration, excessive sweating. Numerous drugs, including diuretics, cancer chemotherapy, and hormones can cause low albumin levels. A high albumin level can be caused by dehydration or by having the liver function.

**Electrolytes**

SODIUM is one of the body’s principal minerals, regulated by the kidneys. It plays an important role in water balance in the body. A low level of sodium may be caused by diarrhea, vomiting, or excessive sweating. Numerous drugs, including diuretics, can cause low sodium levels. A high level of sodium can be caused by dehydration, high salt intake, or dehydration. A low level of potassium can be caused by diarrhea, vomiting, or excessive sweating. Numerous drugs, including diuretics, can cause low potassium levels. A high level of potassium can be caused by dehydration, low salt intake, or dehydration.

**Muscle and Bone Function**

CALCIUM is an important element in the body. It is essential for maintaining the integrity of bone and teeth, heart function and blood clotting. Ninety-nine percent of the calcium in your body is contained in your bones. Low levels of calcium in the blood can be associated with malnutrition. High levels can be caused by bone disease, excessive use of antacids and milk, cancer, overdosing on Vitamin D and some hormone disorders. Any elevated calcium level should be evaluated by your health care provider.

**Iron Function**

IRON is needed to make hemoglobin and myoglobin, which transport oxygen to the muscles. If the body is low in iron, all body cells, particularly muscles in adults and brain cells in children, do not function up to par. On the other hand too much iron in the body can cause injury to the heart, pancreas, joints, testicles, ovaries, etc. Iron excess is found in the hereditary disease called hemochromatosis which occurs in about 3 out of 1,000 people. Any value outside the specified reference range should be evaluated by your health care provider.

**Heart Function**

CHOLESTEROL is an essential blood fat found in nearly every body tissue. Elevated levels have been shown to be associated with a higher risk of heart disease and clogged blood vessels. If elevated, the result should be discussed with your health care provider.

**Transaminase, AST (SGOT)**

The AST enzyme is found mainly in the liver, heart, and muscles. It is released into the bloodstream when some of the capillaries or cells in these organs are damaged. Increased levels are usually associated with liver disease.

**Transaminase, ALT (SGPT)**

The ALT enzyme is found mainly in the liver. Damage from alcohol, strenuous exercise and a number of diseases can cause high values from both AST (SGOT) and ALT (SGPT) and should be evaluated by your health care provider. Low values are not generally considered significant.

**TSH (Thyroid Stimulating Hormone)**

TSH is the pituitary hormone that controls the thyroid gland function, as it stimulates the thyroid to produce thyroid hormone. When the thyroid fails to respond to a stimulus, serum TSH increases. This condition is called primary hypothyroidism. In contrast, when the thyroid gland is overactive and producing too much thyroid hormone, the serum TSH decreases. This is called primary hyperthyroidism. The TSH test may indicate if your dose of thyroid hormone is correct, should you be taking that medication. Your health care provider should evaluate any changes in medication as well as results outside the reference range.

**Triglycerides**

Triglycerides are fatty substances in the body which act as a major form of stored energy. This is a blood fat that may be related to a higher risk of heart disease. Elevated levels may be caused by food and alcohol.