



BIO HEALTHCARE
HUB™

PREDICT PREVENT PROTECT

CLINICAL AND DIAGNOSTIC TESTING

Your Biomedical Healthcare Report

One platform for all the clinical testing you need. Blood, gut and DNA testing, interpreted and presented in a single place.

BLOOD TEST NAME Well Man Blood Profile	NAME Curtis Ujah
DATE OF BIRTH 22-07-1988	DATE OF TEST 11-03-2026

49 biomarkers analysed across ten body systems

Prepared for Curtis Ujah • Report reference BHH-WMP-11032026

Healthcare Report Disclaimer. The Report is prepared solely on the basis of your blood sample and the information which you have provided to us, without access to your full medical records. Whilst tailored to your personal information, you understand the Report is generic in nature. This means that (i) you must not rely on the Report to diagnose or treat suspected or actual medical conditions; and (ii) you are solely responsible for any actions you do (or do not) take before and after receiving the Report, and when you take (or do not take) such actions. We recommend that you always consult an appropriate medical professional for advice on your specific circumstances and situation, in particular before adopting any of the general healthcare or lifestyle advice offered in the Report or otherwise via the Services. You accept that any incomplete or inaccurate information on your health profile may lead to incomplete or inaccurate interpretation and healthcare and lifestyle advice. You assume full responsibility for reading, and drawing conclusions from, the results and report obtained from use of the services (including the Report and your Account dashboard).

Your results at a glance

38

IN RANGE

Within the reference range for your age and sex

9

OUTSIDE RANGE

Worth discussing with a medical professional

2

AWAITING RESULT

No value returned by the laboratory

Markers outside the reference range Listed with the reference range that applies to you

Cholesterol HEART AND CHOLESTEROL	5.6 mmol/L	Less than 5 mmol/L	▲ High
HDL HEART AND CHOLESTEROL	1.8 mmol/L	0.9 to 1.5 mmol/L	▲ High
LDL HEART AND CHOLESTEROL	3.5 mmol/L	Less than 3.0 mmol/L	▲ High
Aspartate Aminotransferase (AST) LIVER FUNCTION	49 IU/L	Male 0 to 37 IU/L	▲ High
Creatinine KIDNEY FUNCTION	105 umol/L	Male 59 to 104 umol/L	▲ Borderline high
Neutrophils FULL BLOOD COUNT	1.91 x10^9/L	2.0 to 7.5 x10^9/L	▼ Borderline low
Vitamin D VITAMINS AND MINERALS	42 nmol/L	Normal range 50 to 200 nmol/L	▼ Borderline low
Vitamin B-12 VITAMINS AND MINERALS	211.4 pmol/L	25.1 to 165.0 pmol/L	▲ High
CK (Creatine kinase) HORMONES AND MUSCLE	937 IU/L	Male 38 to 204 IU/L	▲ High

In range

Borderline, just outside the limit

Outside the range

No result returned

A result outside the reference range is common and is not a diagnosis on its own. Training load, hydration, recent meals and supplements all move individual markers, and a clinician reads them together rather than one by one.

The Well Man Blood Profile provides key information on kidney function, liver function, heart, thyroid health and blood sugar (HbA1c), and also checks iron, calcium and testosterone levels. Testosterone is a sex hormone that plays an important role in the body. In men it is thought to regulate sex drive (libido), bone mass, fat distribution, muscle mass and strength, and the production of red blood cells and sperm. Other areas tested are whether you are anaemic, have an infection, or are experiencing any underlying inflammation. It also includes a full blood count, which checks the types and numbers of cells in your blood, including red blood cells, white blood cells and platelets. This gives an indication of your general health and provides important clues about certain health problems. Vitamins and minerals are also checked to see whether they are adequate.

Everything included in this panel

Colour coded by where each result sits against its reference range

Cholesterol	HDL	LDL	Non-HDL cholesterol	Triglycerides	Total/HDL ratio	hs-CRP	HbA1c
TSH	FT4	Alanine transferase (ALT)	Albumin	Alkaline phosphatase (ALP)			
Aspartate Aminotransferase (AST)	Bilirubin	Gamma GT	Globulin	Total protein	Creatinine	eGFR	
Urea	Uric Acid	Haemoglobin	HCT (haematocrit)	Red Blood Cell (RBC)			
MCV (mean corpuscular volume)	MCH (mean corpuscular haemoglobin)	MCHC	RDW	Platelets Count			
MPV	White Blood Cell (WBC)	Neutrophils	Lymphocytes	Monocytes	Eosinophils	Basophils	
Ferritin	Iron	T.I.B.C	Transferrin saturation	Vitamin D	Vitamin B-12	Folate	Magnesium
Calcium	Corrected Calcium	Testosterone	CK (Creatine kinase)				

In range Borderline, just outside the limit Outside the range No result returned

How to read a strip

Each strip runs green through the reference range for your age and sex, amber for the narrow margin just outside it, and red beyond that. The white marker shows exactly where your result sits.

Why ranges differ

Reference ranges vary by sex, age and laboratory method. Where men and women differ, both ranges are shown.

What a range is not

A reference range describes the middle of a healthy population, not an optimal target. Trends across repeat tests carry more information than any single reading.

Every marker, explained

RESULTS

Heart and cholesterol

The lipid profile and inflammation markers used to assess cardiovascular risk.

7 MARKERS

Cholesterol

5.6 mmol/L

Less than 5 mmol/L



An essential fat, partly from food and partly made by the liver. It is the sum of HDL and LDL, so it is important to see which fraction is driving a raised total.

▲ IF HIGH Over years this raises the chance of fatty deposits narrowing your arteries.

▼ IF LOW Generally favourable, though very low levels are worth discussing.

HDL

1.8 mmol/L

0.9 to 1.5 mmol/L



The protective fraction of cholesterol. It collects excess cholesterol from the blood and returns it to the liver for removal. Higher levels are generally associated with lower cardiovascular risk.

▲ IF HIGH Protective. HDL clears cholesterol out of the arteries and back to the liver.

▼ IF LOW Less cholesterol is being cleared away, which raises cardiovascular risk.

LDL

3.5 mmol/L

Less than 3.0 mmol/L



The fraction that carries cholesterol out to the tissues. In excess it contributes to fatty deposits in the artery walls, which is closely linked to increased heart disease risk.

▲ IF HIGH The main driver of fatty build up in artery walls and of heart disease risk.

▼ IF LOW Generally favourable for your heart.

Non-HDL cholesterol

In range

3.8 mmol/L

Less than 3.9 mmol/L



Total cholesterol minus HDL. It captures every potentially damaging fraction, not just LDL, which makes it a more complete marker of cardiovascular risk.

▲ **IF HIGH** Every harmful cholesterol fraction combined, so overall cardiovascular risk rises.

▼ **IF LOW** Generally favourable for your heart.

Triglycerides

In range

0.6 mmol/L

0 to 2.3 mmol/L



The form in which the body stores surplus calories as fat. Persistently high levels are a risk factor for microvascular disease around the heart.

▲ **IF HIGH** Surplus calories are stored as blood fat, straining the small vessels around the heart.

▼ **IF LOW** Generally favourable.

Total/HDL ratio

In range

32 ratio

20 and over

Visual scale not available for this marker

Total cholesterol measured against HDL. The relationship between the two carries more information about cardiovascular risk than either figure on its own.

▲ **IF HIGH** A wider gap between total cholesterol and the protective fraction.

▼ **IF LOW** A closer balance between the two. Read alongside your HDL and LDL.

hs-CRP

In range

0.3 mg/L

Less than 5 mg/L



A high sensitivity marker of low level inflammation, associated with damage to blood vessel walls. Raised levels can flag increased cardiovascular risk.

▲ **IF HIGH** Low level inflammation somewhere, which over time can irritate blood vessel walls.

▼ **IF LOW** No sign of ongoing inflammation.

RESULTS

Blood sugar and thyroid

Average glucose control and the hormones that regulate metabolism.

3 MARKERS

HbA1c

In range

39 mmol/mol

Non-diabetic 20 to 41 mmol/mol



Glucose bound to haemoglobin, reflecting average blood sugar over roughly the previous three months. It is the standard measure for diagnosing and monitoring type 2 diabetes.

▲ IF HIGH Blood sugar has run high for months, moving towards prediabetes or diabetes.

▼ IF LOW Blood sugar has been well controlled.

TSH

In range

3.01 mIU/L

0.27 to 4.2 mIU/L



Thyroid Stimulating Hormone, released by the pituitary gland to drive the thyroid. Raised TSH can indicate an underactive thyroid; reduced TSH can indicate an overactive one.

▲ IF HIGH Your pituitary is pushing the thyroid harder, suggesting an underactive thyroid.

▼ IF LOW Can suggest an overactive thyroid making more hormone than the body needs.

FT4

In range

15.2 pmol/L

12 to 22 pmol/L



Free thyroxine, one of the two hormones released by the thyroid. High results can accompany an overactive thyroid, low results an underactive one.

▲ IF HIGH More thyroid hormone than needed, which can speed the heart and disturb sleep.

▼ IF LOW Less than needed, which can bring fatigue, weight gain and feeling cold.

RESULTS

Liver function

Enzymes and proteins that show how well the liver is working.

8 MARKERS

Alanine transferase (ALT)

In range

39 IU/L

Male 10 to 50 IU/L

Female 10 to 35



An enzyme produced by the liver. Raised ALT can indicate liver inflammation caused by medication, alcohol or viruses. High intensity exercise also lifts ALT.

▲ **IF HIGH** Your liver is under strain, often from alcohol, medication, a virus or very hard training.

▼ **IF LOW** Rarely a concern on its own.

Albumin

In range

45 g/L

Over 15 years 35 to 50 g/L

1 to 14 years 38 to 54



The main protein made by the liver. It keeps fluid inside blood vessels and transports substances such as medication. High levels usually reflect dehydration.

▲ **IF HIGH** Usually dehydration rather than a problem with the liver itself.

▼ **IF LOW** The liver may be making less protein, or your diet is short on it.

Alkaline phosphatase (ALP)

In range

67 IU/L

Over 15 years 40 to 129 IU/L

1 to 14 years 60 to 425



An enzyme found mainly in the liver and bones. Raised levels can relate to the liver, gall bladder or bones, so it is read alongside other liver tests to locate the source.

▲ **IF HIGH** Points to the liver, bile ducts or bones. Normal in growing teenagers and pregnancy.

▼ **IF LOW** Uncommon. Can reflect low zinc or an underactive thyroid.

Aspartate Aminotransferase (AST)

High

49 IU/L

Male 0 to 37 IU/L

Female 0 to 31



An enzyme made by the liver, and in smaller amounts by the heart, kidneys, brain and muscle. Levels rise when any of those tissues are stressed or damaged, including after heavy training.

▲ **IF HIGH** Tissue is leaking enzyme, most often liver or muscle after heavy exercise.

▼ **IF LOW** Not clinically significant.

Bilirubin

In range

8 $\mu\text{mol/L}$



Male 0 to 20 $\mu\text{mol/L}$
Female 0 to 20

A yellow compound produced as old red blood cells break down, cleared by the liver. Raised levels can indicate the liver is not clearing it efficiently, or reflect Gilbert's syndrome.

▲ IF HIGH The liver is clearing waste more slowly, which can tint the eyes and skin yellow.

▼ IF LOW No health significance.

Gamma GT

In range

27 IU/L



Male 10 to 71 IU/L
Female 6 to 42

A liver enzyme raised by disease affecting liver tissue or the bile ducts. Read with ALP it helps separate liver damage from bone damage, and it is also sensitive to alcohol intake.

▲ IF HIGH Commonly reflects alcohol intake, certain medications, or pressure on the bile ducts.

▼ IF LOW No health significance.

Globulin

In range

30 g/L



19 to 35 g/L

A family of proteins made by the immune system and the liver that transport iron and help fight infection. Raised levels can follow dehydration, chronic inflammation or infection.

▲ IF HIGH Your immune system is active, or you are dehydrated.

▼ IF LOW Can point to reduced protein production or protein lost through the kidneys.

Total protein

In range

75 g/L



63 to 83 g/L

The sum of albumin and globulin. Levels outside the range can indicate kidney or liver disorders, or reflect nutritional status.

▲ IF HIGH Usually dehydration, occasionally ongoing immune activity.

▼ IF LOW Can follow low protein intake, or liver or kidney trouble.

RESULTS

Kidney function

How efficiently the kidneys are filtering waste from the blood.

4 MARKERS

Creatinine

Borderline high

105 $\mu\text{mol/L}$

Male 59 to 104 $\mu\text{mol/L}$
Female 45 to 84



A by-product of muscle metabolism cleared by the kidneys. Raised levels can reflect impaired kidney function, but also creatine supplements, high animal protein intake or intense exercise.

▲ IF HIGH The kidneys may be filtering less well, though muscle mass and creatine also raise it.

▼ IF LOW Often simply lower muscle mass, and rarely a problem.

eGFR

In range

78 ml/min/1.73m^2

Reference range not supplied
by the laboratory

Visual scale not available for this marker

The estimated glomerular filtration rate, calculated from creatinine, sex, age and weight. It estimates how much blood the kidneys filter each minute. A lower figure in people with high muscle mass does not necessarily indicate impaired function.

▲ IF HIGH Efficient filtering, with nothing to act on.

▼ IF LOW The kidneys are clearing waste more slowly, which is worth tracking over time.

Urea

In range

5.8 mmol/L

1.7 to 8.3 mmol/L



A waste product of protein metabolism filtered out by the kidneys. Raised levels can indicate reduced kidney function, a high protein intake or dehydration.

▲ IF HIGH Reduced kidney clearance, a high protein intake, or simply not drinking enough.

▼ IF LOW Can follow a low protein diet, heavy fluid intake or liver problems.

Uric Acid

In range

315 $\mu\text{mol/L}$

Male 266 to 474 $\mu\text{mol/L}$
Female 140 to 360



A waste product from the breakdown of protein. When levels stay high, crystals can deposit in the joints and cause gout.

▲ IF HIGH Crystals can settle in the joints and trigger gout, most often in the big toe.

▼ IF LOW Rarely a concern.

RESULTS

Full blood count

The types and numbers of cells circulating in your blood.

15 MARKERS

Haemoglobin

In range

164 g/L

Male 130 to 170 g/L

Female 115 to 155

100

190

The protein in red blood cells that carries oxygen to your tissues and returns carbon dioxide to the lungs. A low result indicates anaemia.

▲ IF HIGH Blood is thicker than usual, which can follow dehydration, smoking or altitude.

▼ IF LOW Anaemia. Less oxygen reaches your tissues, bringing tiredness and breathlessness.

HCT (haematocrit)

In range

0.475

Male 0.38 to 0.50

Female 0.33 to 0.45

0.1

1

The proportion of your blood made up of red blood cells. Too few or too many can point to a range of conditions.

▲ IF HIGH A higher proportion of red cells, often dehydration, making the blood thicker.

▼ IF LOW Fewer red cells relative to fluid, which points towards anaemia.

Red Blood Cell (RBC)

In range

5.48 $\times 10^{12}/L$

Male 4.40 to 5.80 $\times 10^{12}/L$

Female 3.95 to 5.15

1

7

The number of red blood cells in your sample. It helps identify red cell disorders such as anaemia.

▲ IF HIGH More red cells than usual, which can thicken the blood.

▼ IF LOW Fewer cells to carry oxygen, a common feature of anaemia.

MCV (mean corpuscular volume)

In range

86.7 fl

80 to 99 fl

Child 75 to 92

10

100

The average size of your red blood cells. It helps distinguish between the different causes of anaemia.

▲ IF HIGH Larger red cells, often linked to low B12 or folate, or to alcohol.

▼ IF LOW Smaller red cells, most often caused by low iron.

MCH (mean corpuscular haemoglobin)

In range

29.9 pg



27.0 to 33.5 pg

Child 25.0 to 32.0

The average amount of haemoglobin carried in each red blood cell.

▲ IF HIGH Each red cell carries more haemoglobin, usually alongside larger cells.

▼ IF LOW Each cell carries less haemoglobin, typically an iron related pattern.

MCHC

In range

345 g/L



300 to 350 g/L

The average concentration of haemoglobin within a given volume of red blood cells.

▲ IF HIGH Densely packed haemoglobin, occasionally seen with certain red cell disorders.

▼ IF LOW Paler red cells, which usually accompanies iron deficiency.

RDW

In range

11.9



11.5 to 15

How much your red blood cells vary in size. It is used alongside MCV to help diagnose anaemia.

▲ IF HIGH Your red cells vary widely in size, an early clue to a developing deficiency.

▼ IF LOW Uniform red cell size, which is normal.

Platelets Count

In range

271 $\times 10^9/L$



150 to 400 $\times 10^9/L$

The cells responsible for clotting. A low count can mean bleeding takes longer to stop; a high count is called thrombocytosis.

▲ IF HIGH Blood clots more readily than usual.

▼ IF LOW Bruising and bleeding may take longer to settle.

MPV

In range

9.8 fl

7 to 13 fl



The average size of your platelets. It helps identify bleeding disorders and bone marrow conditions.

▲ IF HIGH Newer, larger platelets are being released, meaning turnover has increased.

▼ IF LOW Platelets are older and smaller, which can reflect reduced marrow production.

White Blood Cell (WBC)

In range

4.95 $\times 10^9/L$

3.0 to 10.0 $\times 10^9/L$



The total number of immune cells in your blood, used to screen for infection, inflammation and other conditions.

▲ IF HIGH Your immune system is responding to something, commonly infection, injury or stress.

▼ IF LOW Fewer immune cells available, which can make infections harder to fight off.

Neutrophils

Borderline low

1.91 $\times 10^9/L$

2.0 to 7.5 $\times 10^9/L$



The immune cells that respond first to bacterial infection. Counts outside the range are worth reviewing with a clinician, particularly if repeated.

▲ IF HIGH Typically a bacterial infection, inflammation or physical stress.

▼ IF LOW Your first line of defence against bacterial infection is thinner than usual.

Lymphocytes

In range

2.28 $\times 10^9/L$

Male 1.2 to 3.65 $\times 10^9/L$
Female 1.2 to 5.2



The B and T cells that drive your longer term immune response, including immunity built after infection or vaccination.

▲ IF HIGH Often a viral infection, and sometimes a longer running immune response.

▼ IF LOW Can follow a recent infection, physical stress or certain medications.

Monocytes

In range

0.42 $\times 10^9/L$



0.2 to 1.0 $\times 10^9/L$

Immune cells that clear damaged cells and debris and support the response to infection.

▲ IF HIGH The body is clearing an infection or dealing with ongoing inflammation.

▼ IF LOW Uncommon and rarely significant on its own.

Eosinophils

In range

0.26 $\times 10^9/L$



0 to 0.4 $\times 10^9/L$

Immune cells that become active in allergic conditions and certain infections.

▲ IF HIGH Commonly allergy, asthma, hay fever or a parasitic infection.

▼ IF LOW Normal and not a concern.

Basophils

In range

0.08 $\times 10^9/L$



0 to 0.1 $\times 10^9/L$

Immune cells from the bone marrow that help regulate the immune and allergic response.

▲ IF HIGH Uncommon. Can accompany allergic reactions or ongoing inflammation.

▼ IF LOW Normal and not a concern.

RESULTS

Iron studies

Iron stores and how effectively iron is transported around the body.

4 MARKERS

Ferritin

In range

100 $\mu g/L$



Male 30 to 400 $\mu g/L$

Female 13 to 150

The protein that stores iron, and the best single indicator of total iron stores. Low levels indicate depleted stores; high levels can reflect iron overload or liver damage.

▲ IF HIGH Iron stores are full, or inflammation is lifting the reading independently of iron.

▼ IF LOW Iron stores are running down, the earliest sign of deficiency, before anaemia appears.

Iron

In range

13.0 umol/L

Male 10.6 to 28.3 umol/L
Female 6.6 to 26.0



The amount of iron circulating in your blood. Both low and high levels can cause muscle weakness, poor concentration and fatigue.

▲ IF HIGH Too much circulating iron, which over time can deposit in the organs.

▼ IF LOW Not enough iron to make haemoglobin, bringing fatigue and poor concentration.

T.I.B.C

In range

63 umol/L

41 to 77 umol/L



How much iron your blood is capable of carrying. It rises in iron deficiency and stays normal or falls in iron overload.

▲ IF HIGH Your blood is reaching for iron, a classic pattern in iron deficiency.

▼ IF LOW Iron is plentiful, or protein levels are low.

Transferrin saturation

In range

21 %

20 to 55 %



The proportion of your iron transport capacity currently in use. High values suggest iron overload, low values iron deficiency.

▲ IF HIGH Iron transport is running near capacity, which can indicate iron overload.

▼ IF LOW Little iron is being carried, consistent with depleted stores.

RESULTS

Vitamins and minerals

Micronutrient levels that support energy, bone health and nerve function.

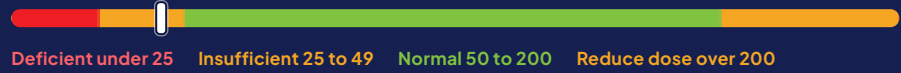
6 MARKERS

Vitamin D

Borderline low

42 nmol/L

Normal range 50 to 200 nmol/L



A hormone activated by sunlight and found in oily fish, egg yolk and fortified foods. It helps the gut absorb calcium and maintain bone strength.

▲ IF HIGH Usually over supplementation, which can push calcium levels up.

▼ IF LOW Weaker calcium absorption over time, affecting bone strength, muscle function and immunity.

Vitamin B-12

High

211.4 pmol/L

25.1 to 165.0 pmol/L



Essential for red blood cell production and nerve function. Deficiency can cause anaemia or nerve damage; raised levels most often reflect supplementation.

▲ IF HIGH Almost always supplementation, though occasionally a liver or blood condition.

▼ IF LOW Can cause anaemia and, over time, tingling or numbness in the hands and feet.

Folate

In range

14.3 ug/L

Greater than 2.9 ug/L



A B vitamin used to make red blood cells and to build and repair DNA. It comes almost entirely from diet.

▲ IF HIGH Usually supplementation, and rarely a problem.

▼ IF LOW Red cell production suffers, and in pregnancy it matters for the developing baby.

Magnesium

In range

0.80 mmol/L

0.60 to 1.00 mmol/L



Involved in energy production, DNA repair, muscle contraction and nerve signalling. Low levels can follow high alcohol intake or a diet low in leafy greens and nuts.

▲ IF HIGH Uncommon, and mostly seen when the kidneys are not clearing it.

▼ IF LOW Can bring muscle cramps, poor sleep, palpitations and low energy.

Calcium

No result

mmol/L

Visual scale not available for this marker

2.20 to 2.60 mmol/L

The most abundant mineral in the body, central to bone and tooth strength, muscle contraction, nerve signalling and blood clotting.

▲ IF HIGH Can cause thirst, tiredness and, over time, kidney stones.

▼ IF LOW Can cause muscle cramps, tingling fingers and, over time, weaker bones.

Corrected Calcium

No result

mmol/L

Visual scale not available for this marker

2.20 to 2.60 mmol/L

Calcium adjusted for your albumin level, giving a more accurate picture of the calcium actually available to your body.

▲ IF HIGH Calcium adjusted for protein, so the same effects apply with a truer reading.

▼ IF LOW Calcium adjusted for protein, so the same effects apply with a truer reading.

RESULTS

Hormones and muscle

Sex hormone levels and the enzyme released when muscle tissue is stressed.

2 MARKERS

Testosterone

In range

22.6 nmol/L



Male 18 to 50 years 7.6 to 31.4 nmol/L

Male over 50 years 6.68 to 25.7

The principal male sex hormone, produced in the testicles. It supports muscle mass, bone density, body hair and libido, and low levels can reduce all four.

▲ IF HIGH Usually reflects supplementation, and can affect mood, skin and fertility.

▼ IF LOW Can reduce muscle mass, bone density, libido, energy and mood.

CK (Creatine kinase)

High

937 IU/L



Male 38 to 204 IU/L

Female 26 to 192

An enzyme concentrated in muscle that leaks into the blood when muscle tissue is stressed or damaged. Levels rise sharply after hard training and settle as the tissue repairs.

▲ IF HIGH Muscle tissue has broken down, most often from hard training, and settles as you recover.

▼ IF LOW Not clinically significant.

HEART AND CHOLESTEROL		
Cholesterol	5.6 mmol/L	High
HDL	1.8 mmol/L	High
LDL	3.5 mmol/L	High
Non-HDL cholesterol	3.8 mmol/L	In range
Triglycerides	0.6 mmol/L	In range
Total/HDL ratio	32 ratio	In range
hs-CRP	0.3 mg/L	In range
BLOOD SUGAR AND THYROID		
HbA1c	39 mmol/mol	In range
TSH	3.01 mIU/L	In range
FT4	15.2 pmol/L	In range
LIVER FUNCTION		
Alanine transferase (ALT)	39 IU/L	In range
Albumin	45 g/L	In range
Alkaline phosphatase (ALP)	67 IU/L	In range
Aspartate Aminotransferase (AST)	49 IU/L	High
Bilirubin	8 umol/L	In range
Gamma GT	27 IU/L	In range
Globulin	30 g/L	In range
Total protein	75 g/L	In range
KIDNEY FUNCTION		
Creatinine	105 umol/L	Borderline high
eGFR	78 ml/min/1.73m2	In range
Urea	5.8 mmol/L	In range
Uric Acid	315 umol/L	In range

FULL BLOOD COUNT		
Haemoglobin	164 g/L	In range
HCT (haematocrit)	0.475	In range
Red Blood Cell (RBC)	5.48 x10^12/L	In range
MCV (mean corpuscular volume)	86.7 fl	In range
MCH (mean corpuscular haemoglobin)	29.9 pg	In range
MCHC	345 g/L	In range
RDW	11.9	In range
Platelets Count	271 x10^9/L	In range
MPV	9.8 fl	In range
White Blood Cell (WBC)	4.95 x10^9/L	In range
Neutrophils	1.91 x10^9/L	Borderline low
Lymphocytes	2.28 x10^9/L	In range
Monocytes	0.42 x10^9/L	In range
Eosinophils	0.26 x10^9/L	In range
Basophils	0.08 x10^9/L	In range
IRON STUDIES		
Ferritin	100 ug/L	In range
Iron	13.0 umol/L	In range
T.I.B.C	63 umol/L	In range
Transferrin saturation	21 %	In range
VITAMINS AND MINERALS		
Vitamin D	42 nmol/L	Borderline low
Vitamin B-12	211.4 pmol/L	High
Folate	14.3 ug/L	In range
Magnesium	0.80 mmol/L	In range
Calcium	– mmol/L	No result
Corrected Calcium	– mmol/L	No result
HORMONES AND MUSCLE		
Testosterone	22.6 nmol/L	In range
CK (Creatine kinase)	937 IU/L	High

Turn results into a plan

Book your results consultation

A clinician will walk through this report with you, place each marker in the context of your history and lifestyle, and agree a retest interval.

● Blood testing

Panels covering cardiovascular, metabolic, hormonal and nutritional health, with results delivered to your account dashboard.

● Gut testing

Microbiome analysis that maps the bacterial populations shaping digestion, immunity and mood.

● DNA testing

Predictive insight into how your genetics influence nutrition, medication response and long term risk.

● Ongoing monitoring

Repeat testing at agreed intervals so each marker becomes a trend rather than a single snapshot.

Healthcare Report Disclaimer. The Report is prepared solely on the basis of your blood sample and the information which you have provided to us, without access to your full medical records. Whilst tailored to your personal information, you understand the Report is generic in nature. This means that (i) you must not rely on the Report to diagnose or treat suspected or actual medical conditions; and (ii) you are solely responsible for any actions you do (or do not) take before and after receiving the Report, and when you take (or do not take) such actions. We recommend that you always consult an appropriate medical professional for advice on your specific circumstances and situation, in particular before adopting any of the general healthcare or lifestyle advice offered in the Report or otherwise via the Services. You accept that any incomplete or inaccurate information on your health profile may lead to incomplete or inaccurate interpretation and healthcare and lifestyle advice. You assume full responsibility for reading, and drawing conclusions from, the results and report obtained from use of the services (including the Report and your Account dashboard).