SAMPLE REPORT

Date of Birth: 12-Aug-1961

Sex : F

Collected: 31/Oct/2019 Received: 31/Oct/2019 **INTERNATIONAL** PATIENT 1000 Lab id: Sample

Dr.EDWARD CHAN

International Psychology Centre 11-1 Wisma Laxton Jalan Desa KUALA LUMPUR MALAYSIA 58100

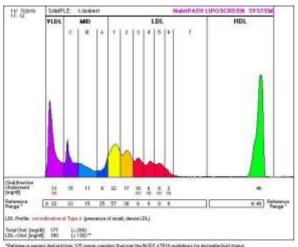
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			ICTDV		
DI GOD GERLIN		BIOCHEM			
BLOOD - SERUM Result	It	Range	Units		
LIPIDS					
CHOLESTEROL 4.6	6	0.0 -5.5	mmol/L		
TRIGLYCERIDES 1.2	2	0.2 - 1.5	mmol/L		
LIPID STUDIES					
HDL(Protective) 1.7	7	> 1.2	mmol/L		
LDL(Atherogenic) 2.4	4	0.5 - 3.5	mmol/L		
Cholesterol/HDL Ratio 2.7	7				
LDL/HDL RATIO (Risk Factor) 1.4	4	0.0 - 3.2			
Trig/HDL Ratio 0.7	7	0.5 - 1.7	RATIO		•
Lipoprotein (a) 1.4	4	0.0 - 75.0	nmol/L		•
LIPOSCREEN LDL Subfractions2					
Very Low Density Lipoprotein (VLDL) 0.8	8*H	0.1 - 0.6	mmol/L		
Intermediate Density Lipoprotein (IDL-1) 0.4	4	0.1 - 0.6	mmol/L		
Intermediate Density Lipoprotein (IDL-2) 0.3	3	0.1 - 0.4	mmol/L		
Intermediate Density Lipoprotein (IDL-3) 0.2	2	0.1 - 0.6	mmol/L		
Low Density Lipoprotein (LDL-1) 0.56	6	0.10 - 1.50	mmol/L		
Low Density Lipoprotein (LDL-2) 0.44	4	0.10 - 0.80	mmol/L		100
Low Density Lipoprotein (LDL-3) 0.26	6*H	0.00 - 0.20	mmol/L	ĺ	
Low Density Lipoprotein (LDL-4) 0.21	21*H	0.00 - 0.01	mmol/L		
Low Density Lipoprotein (LDL-5) 0.21	21*H	0.00 - 0.01	mmol/L		
Low Density Lipoprotein (LDL-6) 0.05	05*H	0.00 - 0.01	mmol/L		
Low Density Lipoprotein (LDL-7) 0.00	0	0.00 - 0.01	mmol/L		•
LDL Phenotype Pattern Type B	B ABN	ORMAL			
Mean Particle Size 253.0	0*L	> 268.0	Angstrom		
Oxidised LDL 61.0	0	< 117.0	IU/L		•



"Sufference ranges ded ved from 125 serian congless that even the NCSF ATF18 guidelines for exclusive lipid crease "126. < in congressed of the cush of cholestwent is WCS baseds C through A as well as all the authorisations."

(*) Result outside normal reference range

(H) Result is above upper limit of reference rang (L) Result is below lower limit of reference range

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LIPOSCREEN Comments

RESULT INTERPRETATION

The Liposcreen LDL Subractions test provides a superior indicator for Coronary Artery Disease (CAD) risk than other conventionally available lipid profiles.

Many individuals with normal LDL and HDL cholesterol levels remain at risk from CAD as these conventional tests do not convey the detail of the CAD risk. Liposcreen additionally quantifies the different subfractions.

Liposcreen clearly identifies a patient's LDL phenotype profile;

This patient has a profile Not indicative of Type A, which is deemed ABNORMAL.

This is due to the presence of elevated levels of small dense LDLs (LDL3, LDL4, LDL5 and LDL6).

Of note is the elevated VLDL, which when significantly elevated is also deemed highly atherogenic.

Elevations of IDL3 can be attributable to raised Lipoprotein (a) levels.

Also of note is the low LDL Mean Particle size of 253 Angstrom, which indicates the presence of LDLs of a size capable of penetrating the endothelial lining and causing the development of atheromatous plaques.

Type A Deemed a normal profile.

Predominance of large/buoyant (less atherogenic) LDL

subclasses (LDL 1 and 2).

Mean Particle Size of > 263 Angstrom (A).

Elevated Cholesterol, Normal Triglycerides, Elevated Apo B

Deemed an ABNORMAL profile. Type B

Predominance of small/dense (more atherogenic) LDL

subclasses (LDL3, 4, 5, 6, 7).
Mean Particle Size of < 258 Angstrom (A).</pre>

Raised Cholesterol, Raised Triglycerides, Raised VLDL, Low HDLC

This profile is the designated atherogenic lipoprotein

phenotype, consistent with an increased risk of CAD. It is also It is also characteristically prevalent in insulin-resistant states such as Metabolic Syndrome and Type 2 Diabetes mellitus.

Follow up Liposcreen testing, for this patient, is recommended in 06 months.

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Lipid Profile Comment

TRIG/HDL RATIO COMMENT:

HDL is closely related to triglycerides. Commonly, patients with elevated triglycerides also have low HDL levels, and also tend to have elevated levels of clotting factors in their blood stream, which is unhealthy in protecting against heart disease. The triglyceride/HDL ratio is found to be one of the better predictors of heart disease. Research shows that people with an elevated ratio of triglycerides to HDL have 16 times the risk of heart attack as those with the low/normal.

Therefore, in adults, the triglyceride/HDL ratio should ideally be below 2.0 .

TRIG/HDL Reference Range:

< 0.9	Considered ideal	(minimal risk)
> 1.7	High	<pre>(moderate risk)</pre>
> 2.6	Very High	(high risk)

Tests ordered: LipOx