DEMO DEMO

Name: DEMO DEMO Date of Birth: 03-06-1980 Biological Sex: Female

Age: 45 Height: Weight: Fasting: Telephone: 000-000-0000

Street Address:

Email:

FINAL REPORT

Accession ID: 2566646155

Practice Name: DEMO CLIENT, MD

Provider Name: DEMO CLIENT, MD

Phlebotomist: 0

Telephone: 000-000-0000 Address: 3521 Leonard Ct, Santa

Clara, CA 95054

Report Information

Provider Information

Current Result Previous Result

In Control Moderate Risk

Specimen Information

Sample Type	Collection Time	Received Time	Report	Final Report Date
Stool	2025-07-07 07:00 (UTC)	2025-07-08 19:40 (UTC)	Gut Zoomer - P2	2025-07-21 21:12 (UTC)
Unpreserved Stool	2025-07-07 07:00 (UTC)	2025-07-08 19:40 (UTC)	Gut Zoomer - P2	2025-07-21 21:12 (UTC)





Date of Birth: 03-06-1980 Accession ID: 2566646155

Service Date: 2025-07-07 07:00 (UTC)



INTRODUCTION

Vibrant Wellness is pleased to present to you 'Gut Zoomer' testing to help you make healthy lifestyle choices in consultation with your healthcare provider. It is intended to be used as a tool to encourage general healthy lifestyle choices.

Gut Zoomer is a health analytics tool based on the gut microbiome which provides potential risks for intestinal permeability, cardiovascular, metabolic, neurological, intestinal, autoimmune, liver, hormonal, and nutritional health conditions. Additionally, it has panels for detection of gut pathogens and digestive markers. It is intended to be used to improve functions associated with a general state of health, and where it is well understood as well as accepted that healthy lifestyle choices may play an important role in these health outcomes.

Methodology:

Gut Zoomer is split into 6 sections: Gut Pathogens, Gut Commensal, Digestion and Immune Balance, Gut Inflammatory, Gut Antibodies, and Gut Metabolites. Gut Pathogens uses real-time PCR Assay designed for semi-quantitative and qualitative detection of group- specific DNA in clinical stool samples. Gut Commensal uses deep metagenomic PCR to semi-quantitatively assess the presence of key commensal bacterial populations, providing resolution from phylum down to species level to support comprehensive gut microbiome profiling. Digestion and Immune Balance panel and Gut Inflammatory markers are a quantitative assay that detects calprotectin, anti-gliadin, eosinophil protein X, lactoferrin, zonulin, lysozyme, MMP 9, pancreatic elastase 1, S100A12, and slgA levels with Sandwich ELISA Enzyme-Linked ImmunoSorbent Assay methodology. ELISA (enzyme-linked immunosorbent assay) methodology is used for detecting ß-glucuronidase, pH, and fecal immunochemical test (FIT). Gut Antibodies panel utilizes a multiplexed microarray chip technology to provide accurate quantitative analysis of gut-related antibody markers. Tandem mass spectrometry methodology (LC-MS/MS) is used for detecting Gut Metabolites like fatty acids markers and bile acid markers and dietary fiber detection. Colorimetric assay methodology is used for detecting fat malabsorption like fecal fat, fecal triglycerides, and total phospholipids.

Interpretation of Report:

The following terminologies are used consistently in the report and are explained below.

Gut Diversity is an indicator for the amount of individual bacteria from each of the bacterial species present in your gut microbiome. There are two indices calculated including Shannon's Index (scale 0-3) and Simpson's Index (scale 0-1). For both calculations, higher index value represents increased diversity of species. While Shannon's is a better indicator of "richness" of the diversity, Simpson's is a better indicator of "evenness." The calculated Index values are surrounded with a risk indicator (green - high diversity, yellow - moderate diversity, and red - low diversity).

Gut Phyla distribution is displayed in a pie chart with each pie representing the % of individual phyla tested.

Key Ratios are calculated and displayed comprising of F/B (Firmicutes to Bacteroidetes ratio) and P/B (Prevotella to Bacteroides ratio), along with the corresponding risk indicator.

Gut Commensal bacteria is represented using relative abundance values. Relative abundance is the percent composition of an organism of a particular kind relative to the total number of organisms in your gut microbiome. The abundance of individual bacterial phylum/family/genus/species is calculated by comparing the relative abundance to the healthy reference range. Reference ranges have been established using results from 200 healthy individuals. The abundance is always mentioned in the report along with the potential associated risks; however, it is applicable only when indicated in RED. Associated probiotic tests are displayed in each panel with suggestions based on potential associated risks.

Gut Pathogens comprising of pathogenic bacteria, parasites, virus, and fungi are indicated as DETECTED or NOT DETECTED along with the levels in respective units. Worm and antibiotic resistance gene testing are displayed as DETECTED or NOT DETECTED based on the test result.

Digestion and Immune Balance, Gut Inflammatory, Gut Antibodies, and **Gut Metabolites** markers are displayed along with a risk indicator and the corresponding reference range for each test calculated using results from 200 healthy individuals. All test results are displayed with risk indicator and abundance direction as applicable. (red – high risk, yellow – moderate risk and green – low risk).

Vibrant Wellness is a personalized health analytics company founded out of our passion to serve patients and providers. The Vibrant Wellness platform provides tools for you to track and analyze your general wellness profile. All testing offered by Vibrant Wellness is performed by Vibrant America, a CLIA certified lab CLIA#: 05D2078809 and Vibrant Genomics, a CLIA certified lab CLIA#: 05D2098445. Vibrant Wellness provides and makes available this report and any related services pursuant to the Terms of Use Agreement (the "Terms") on its website at www.vibrant-wellness.com. By accessing, browsing, or otherwise using the report or website or any services, you acknowledge that you have read, understood, and agree to be bound by these terms. If you do not agree to these terms, you shall not access, browse, or use the report or website. The statements in this report have not been evaluated by the Food and Drug Administration and are only meant to be lifestyle choices for potential risk mitigation. Please consult your healthcare provider for medication, treatment, or lifestyle management. This product is not intended to diagnose, treat, or cure any disease.



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Gut Zoomer

INTRODUCTION

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Interpretation of Report:

Comments provided by Vibrant Wellness are for educational purposes only and are not intended to be used as or substituted for medical advice. We do not treat or cure medical conditions. Vibrant Wellness does not replace the care of a medical practitioner or counselor and does not recommend self-diagnosis or self-medication. Depending on the nature of your testing, if you receive a high risk or moderate risk result, confirmatory testing may be recommended, and you will be encouraged to seek medical attention for additional follow up. Vibrant Wellness shall not be liable to you or anyone else for loss or injury caused in whole or part by procuring, compiling, interpreting, delivering, or reporting information through this report. Also, in no event shall Vibrant Wellness be held liable to you or anyone else for any decisions made or action taken or not taken by you in reliance on such information.

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, and nutritional supplementation with your healthcare provider before making any changes. Pediatric ranges have not been established for these tests.



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Gut Zoomer - Summary

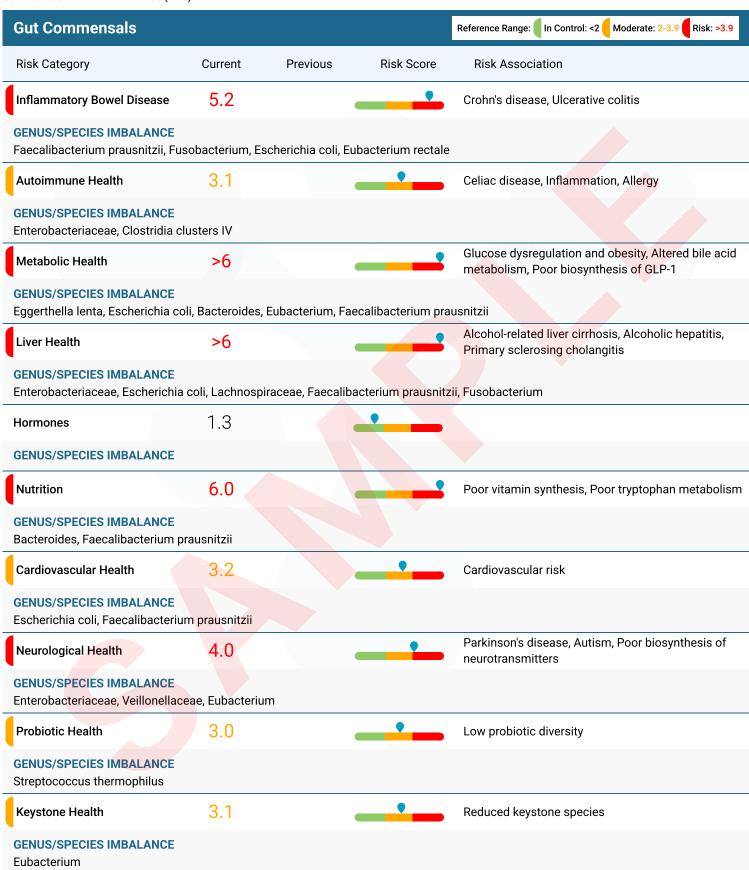




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Gut Zoomer - Summary





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Gut Zoomer - Summary

Gut Commensals

Supplement Suggestions

PROBIOTICS

Intestinal Permeability: Lactobacillus acidophilus, Lactobacillus plantarum, Bifidobacterim infantis, E. coli Nissle 1917, Bifidobacterium animalis lactis BB-12

Inflammatory Bowel Disease: Butyrate

SUPPLEMENTS

Intestinal Permeability: Vitamin D, Inulin, Vitamin A, Glutamine, Curcumin, Zinc, Cocoa, L-arginine, Epigallocatechin 3-gallate, Quercetin,

Tributyrin, Inulin-propionate ester

Irritable Bowel Syndrome: Vitamin D, Psyllium husk, Peppermint oil *Inflammatory Bowel Disease:* Vitamin D, Milk thistle, Phosphatidylcholine

Autoimmune Health: Vitamin D, Vitamin E

Metabolic Health: Vitamin D, Folate, Glutamine, Calcium, Cocoa, Green tea extract

Liver Health: Milk thistle, Artichoke extract

Nutrition: Folate

Cardiovascular Health: Vitamin D, Folate, Green tea extract

Neurological Health: Vitamin D, Vitamin A, Curcumin, Omega-3 fatty acids, Glutamine, N-acetyl-cysteine

SUPPORTIVE SUPPLEMENTS

Intestinal Permeability: Resistant starch

Inflammatory Bowel Disease: Folate, Phosphatidylcholine

Autoimmune Health: Vitamin A, Zinc

Metabolic Health: Inulin, Fructooligosaccharides, Galactooligosaccharides

Liver Health: Vitamin D, Milk thistle, Artichoke extract, Curcumin

Cardiovascular Health: Protocatechuic acid

Neurological Health: Berberine, 5-HTP

Consider these supplements in relation to medical history and symptoms. Not all recommended supplements are appropriate in all individual cases. Consult a knowledgeable healthcare provider before taking any supplemental nutrients or probiotics.

GUT PATHOGENS

No markers are outside the normal reference range



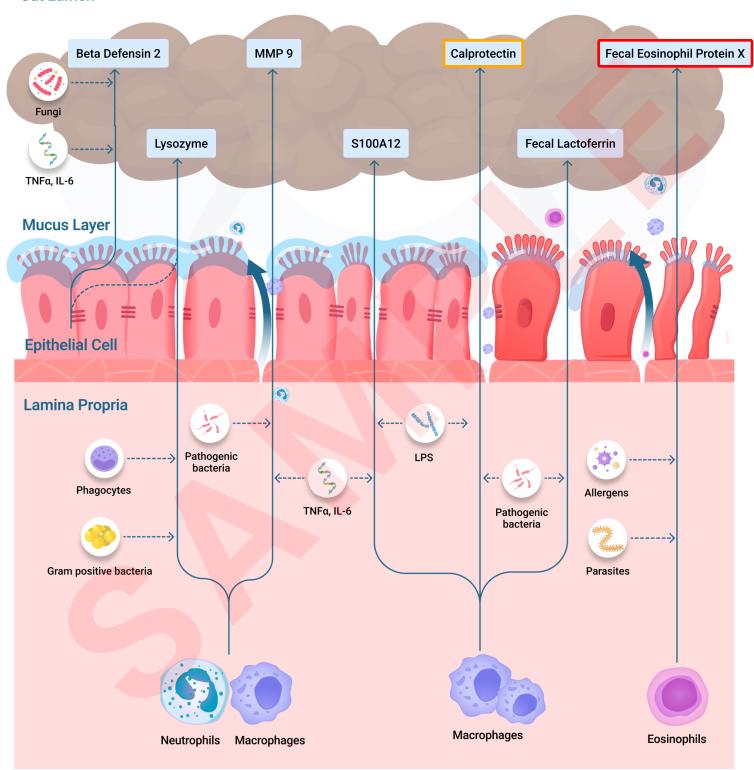
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Gut Zoomer - Summary

Gut Inflammation

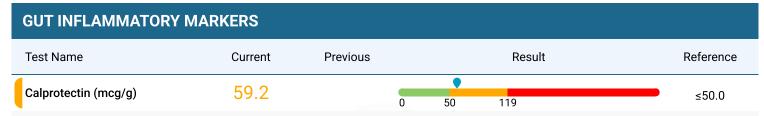
Gut Lumen



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Gut Zoomer - Summary



Calprotectin, a protein released by neutrophils, is a hallmark of inflammation in the gastrointestinal tract. Elevated calprotectin levels indicate active disease and immune cell infiltration, which can result in tissue damage and disrupted gut function. Symptoms may include abdominal pain and loose stools. The presence of elevated calprotectin in stool serves as a marker of neutrophil activity and gastrointestinal inflammation. This makes it a valuable biomarker for conditions such as inflammatory bowel disease (IBD), including ulcerative colitis (UC) and Crohn's disease, and for distinguishing these conditions from irritable bowel syndrome (IBS), which typically does not involve significant inflammation.



Eosinophil Protein X (EPX) is a water-soluble protein produced by eosinophils and reflects their activity in the gastrointestinal tract. Elevated levels of EPX may result from food allergies, parasitic infections, or inflammatory conditions. High EPX levels signify active tissue damage and inflammation associated with eosinophilic activity. Prolonged elevation of EPX is commonly associated with symptoms such as bloating and abdominal pain and is indicative of conditions such as inflammatory bowel disease (IBD).

Supplement Suggestions

SUPPLEMENTS

Calprotectin: Phosphatidylcholine
Fecal Eosinophil Protein X: Lactoferrin

Consider these supplements in relation to medical history and symptoms. Not all recommended supplements are appropriate in all individual cases. Consult a knowledgeable healthcare provider before taking any supplemental nutrients or probiotics.



Secretory IgA (SIgA) is an antibody that plays a critical role in mucosal immunity, protecting epithelial barriers by neutralizing pathogens and modulating the intestinal microbiota. SIgA is secreted by plasma cells in the lamina propria and transported across the gut epithelium. Low SIgA levels reflect compromised mucosal immunity, potentially leaving the gut epithelial barrier more vulnerable to pathogens. This deficiency is often linked to chronic stress, malnutrition, or underlying immunodeficiency conditions. Insufficient SIgA production can result in increased susceptibility to infections, digestive disturbances, and food intolerances. Associated symptoms may include bloating, diarrhea, and recurrent infections. Monitoring SIgA levels is crucial for identifying weakened immune function and addressing the underlying factors to restore intestinal homeostasis and enhance mucosal defense.

Supplement Suggestions

SUPPLEMENTS

slgA: Saccharomyces boulardii, Beta-glucans, Vitamin A

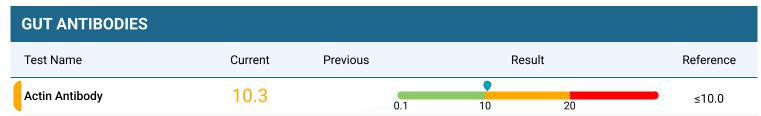
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Gut Zoomer - Summary



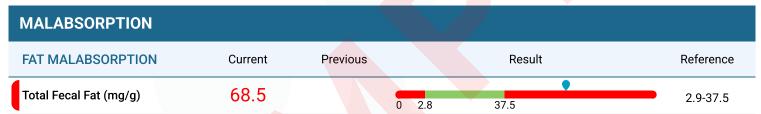
The actin antibody test identifies autoantibodies directed against filamentous actin (F-actin), a key cytoskeletal protein found within intestinal epithelial cells and hepatocytes. The presence of these antibodies reflects an autoimmune response often triggered by significant epithelial damage and disruption of cellular integrity. Elevated actin antibody levels are most commonly associated with autoimmune hepatitis but may also appear in severe forms of celiac disease, particularly those involving villous atrophy or refractory disease states. In the gastrointestinal context, their presence suggests advanced mucosal injury and immune dysregulation. Symptoms may include persistent diarrhea, abdominal discomfort, fatigue, and in hepatic involvement, jaundice or elevated liver enzymes. The actin antibody test serves as a marker of tissue-specific autoimmunity and helps evaluate the extent of epithelial and mucosal damage, making it particularly valuable in assessing the severity and chronicity of immune-mediated gut disorders.

Supplement Suggestions

SUPPORTIVE SUPPLEMENTS

Actin Antibody: Curcumin, Omega-3 fatty acids, Green tea extract

Consider these supplements in relation to medical history and symptoms. Not all recommended supplements are appropriate in all individual cases. Consult a knowledgeable healthcare provider before taking any supplemental nutrients or probiotics.



Total fecal fat is the amount of undigested fat excreted in the stool and is used as a marker to assess fat digestion and absorption efficiency. Excess fecal fat, or steatorrhea, indicates malabsorption disorders caused by inadequate bile production, pancreatic enzyme deficiencies, or impaired intestinal function. Conditions such as celiac disease, Crohn's disease, pancreatitis, or cystic fibrosis can lead to fat malabsorption. Elevated fecal fat may signify digestive insufficiency and is often associated with symptoms such as greasy stools, abdominal discomfort, and nutrient deficiencies due to poor absorption of essential fatty acids and fat-soluble vitamins.



Long-chain fatty acids (LCFAs), including omega-3 and omega-6 families, are essential for immune regulation, brain health, and membrane structure. However, elevated LCFA levels in stool indicate malabsorption, often due to bile salt insufficiency, excessive dietary fat intake, or intestinal inflammation. Conditions impairing pancreatic lipase activity or bile acid production can also contribute to LCFA malabsorption. Elevated fecal LCFAs may cause symptoms such as greasy stools, bloating, and systemic nutrient deficiencies. Efficient lipid digestion is crucial for maintaining energy balance and supporting vital physiological functions.

Supplement Suggestions

SUPPLEMENTS

Total Fecal Fat: Lipase

SUPPORTIVE SUPPLEMENTS

Long Chain Fatty Acids: Betaine HCL

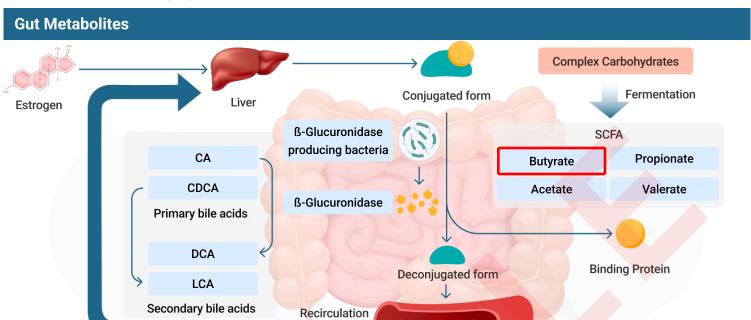
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Gut Zoomer - Summary



Intestinal excretion

Conjugated form

CHOLIC ACID (CA)

- Fat malabsorption (greasy stools) from dysregulated bile synthesis and affected cholesterol metabolism.
- · Digestive discomfort due to gut dysbiosis.





ACETATE

- Dysregulated cholesterol levels due to altered lipid metabolism.
- Mood swings from affected neuronal signaling.
- Increased inflammation.

Colon, Brain

CHENODEOXYCHOLIC ACID (CDCA)

- Affected bowel movements from gut inflammation and impaired motility.
- Insulin resistance and poor blood sugar regulation due to disrupted GLP-1 sensitivity.





PROPIONATE

- Potential weight regulation issues due to altered energy homeostasis.
- Impaired satiety leading to overeating due to affected GLP-1 secretion.



Liver,

DEOXYCHOLIC ACID (DCA)

- Elevated gut inflammation via NF-κB.
- Bowel discomfort due to low stool water content affecting gut motility and bowel movement.

Immune cells, Colon



BUTYRATE

- Gastric discomfort from weakened intestinal lining.
- Poor blood sugar control due to disrupted glucose regulation via GLP-1.
- Brain fog from impaired neurogenesis.



LITHOCHOLIC ACID (LCA)

- Toxin build-up due to poor detoxification
- Frequent gut infections from reduced immunity via VDR.
- Bloating and irregular stools from gut dysbiosis.



Liver, Gut

VALERATE

 Affected skin barrier function leading to dry, irritated, and itchy skin



Skin

β-GLUCURONIDASE

- Increased toxin reabsorption due to impaired glucuronidation.
- Hormonal imbalances leading to estrogen dominance.
- Elevated risk of inflammation.

β-GLUCURONIDASE PRODUCING BACTERIA

- Increased toxin reabsorption due to glucuronide cleavage (release of toxins or hormones).
- Hormonal disruptions, including estrogen dominance.
- Gut microbiota imbalance leading to inflammation.

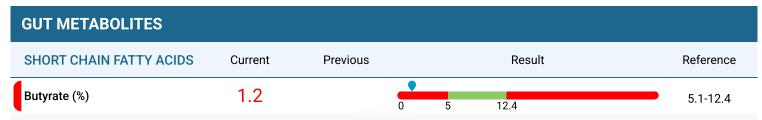




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Gut Zoomer - Summary



Butyrate is a short-chain fatty acid (SCFA) primarily produced through the bacterial fermentation of resistant starch and dietary fibers. This process involves the microbial hydrolysis of dietary polysaccharides into monosaccharides, which are then fermented to form butyrate. Butyrate serves as a vital energy source for colonocytes and supports gut barrier function by enhancing tight junction integrity. It also reduces intestinal inflammation and oxidative stress, promoting a healthy gut environment. Butyrate exerts its effects through G-protein-coupled receptors 41 and 43 (GPR41 and GPR43), contributing to insulin sensitivity via glucagon-like peptide-1 (GLP-1), which aids in glucose metabolism and enhances insulin secretion. Recent studies have shown that butyrate can support neurogenesis (the formation of new neurons) in the brain via the 'gut-brain axis.' Low fecal butyrate levels can cause gastrointestinal issues due to a compromised intestinal lining, impaired blood sugar regulation from disrupted GLP-1 activity, and cognitive symptoms like brain fog due to affected neurogenesis.



36.4



210

45.4-210.1

Total short-chain fatty acids (SCFAs) refer to the combined concentration of acetate, butyrate, propionate, valerate, iso-butyrate, and other SCFAs in the gut. They are produced through the anaerobic fermentation of indigestible dietary fibers, such as resistant starch and polysaccharides, by gut microbiota. SCFAs play essential roles in maintaining gut health by serving as energy sources for intestinal epithelial cells, strengthening the gut barrier, and regulating microbial diversity. They help suppress intestinal inflammation, support gut homeostasis, and influence systemic metabolic and immune responses. SCFAs interact with G-protein-coupled receptors 41 and 43 (GPR41 and GPR43), affecting gut motility, energy metabolism, and inflammatory pathways. Their benefits extend beyond the gut, impacting insulin sensitivity, lipid metabolism, and neuroimmune interactions. Low fecal SCFA levels indicate dysbiosis and are linked to various health conditions, including irritable bowel syndrome, inflammatory bowel disease, obesity, and metabolic disorders. Symptoms of reduced SCFAs may include bloating, abdominal discomfort, fatigue, and irregular bowel movements.

Supplement Suggestions

SUPPLEMENTS

Butyrate: Fructans, Inulin, Vitamin B2

Total Short Chain Fatty Acids: Fructans, Inulin

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Gut Zoomer - Summary

Suggestions

Prebiotics

Prebiotics are non-digestible fibers that serve as a food source for beneficial gut bacteria, promoting a balanced microbiome and enhancing digestive health. By nourishing beneficial microbes, prebiotics help strengthen the gut barrier, support nutrient absorption, and regulate inflammation, all of which contribute to overall well-being. Based on the assessment of gut commensals, pathogenic microorganisms, and digestive health markers, increasing your intake of prebiotic-rich foods or supplements may help improve gut health and microbial balance.



SUPPLEMENTS

FOOD SOURCES

Inulin 10 g/day **Fructooligosaccharides** 20 g/day Galactooligosaccharides 5 g/day Resistant starch 15 g/day **Fructans** 7.5 g/day Inulin-propionate ester 10 g/day



Fruits

Bananas



Vegetables

Onions, Garlic, Green Bananas, Cooked Potatoes, Asparagus



Dairy

Milk, Cheese, Yogurt, Butter



Chicory Root, Legume, Wheat



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Gut Zoomer - Summary

Suggestions

Probiotics

Probiotics are beneficial bacteria and yeasts that contribute to gut health by maintaining a balanced microbiome, supporting digestion, and enhancing immune function. A healthy gut microbiome aids in breaking down nutrients, producing essential vitamins, and preventing the overgrowth of harmful microbes, which collectively support metabolic balance and immune resilience. Based on the assessment of gut commensals, pathogenic microorganisms, and digestive health markers, incorporating probiotic-rich foods and supplements may help improve your gut health and support overall well-being.



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FOOD SOURCES

Butyrate 300 mg/day

Lactobacillus acidophilus

CFU/day

10 billion CFU/day Lactobacillus plantarum

10 billion CFU/day

Bifidobacterim 10 billion infantis CFU/day **Saccharomyces** 10 billion

E. coli Nissle 1917

10 billion CFU/day

Bifidobacterium animalis lactis BB-12

10 billion CFU/day



boulardii

Vegetables

Kimchi, Sauerkraut, Pickles



Dairy

Kefir, Yogurt



Natto



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Gut Zoomer-Summary

Suggestions

Nutrients

Essential nutrients, including vitamins and minerals, play a vital role in maintaining gut health by supporting digestive processes, microbial diversity, and immune function. Proper nutrient intake helps regulate gut motility, maintain intestinal integrity, and reduce inflammation, which in turn promotes overall metabolic and physiological balance. Based on the evaluation of key biomarkers, ensuring adequate intake of these nutrients through a well-balanced diet or supplementation may help optimize gut function and overall well-being.







Vitamin D	600 IU/day	Folate	400 mcg/day	Vitamin A	2333 IU/day
Omega-3 fatty acids	950 mg/day	Glutamine	25 mg/day	Phosp <mark>hatid</mark> ylcholine	6 g/day
Zinc	9 mg/day	Calcium	1,000 mg/day	N-acetyl-cysteine	600 mg/day
L-arginine	1.5 g/day	Vitamin E	22 IU/day	Betaine HCL	350 mg/day
Vitamin B2	1.1 mg/day				



Fruits

Citrus Fruits



Vegetables

Leafy Greens, Spinach, Legumes, Carrots, Cabbage, Soybeans, Garlic, Onions, Beets



FOOD SOURCES

Dairy

Milk, Cheese, Yogurt, Butter



Fiber

Legumes, Nuts, Seeds, Flaxseeds, Walnuts, Beans, Whole Grains, Almonds



Animal Protein

Eggs, Meat, Fatty Fish, Poultry, Liver, Shellfish, Seafood



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Gut Zoomer - Summary

Suggestions

Botanicals

Botanicals are plant-derived compounds, such as polyphenols, flavonoids, and terpenoids, that support gut health by aiding digestion, modulating the microbiome, and reducing gastrointestinal inflammation. Many botanicals possess prebiotic, antimicrobial, and anti-inflammatory properties, which help maintain gut microbial balance and improve digestive efficiency, ultimately benefiting systemic health. Based on the assessment of relevant biomarkers,



SUPPLEMENTS

FOOD SOURCES

incorporating specific botanical extracts may help promote gut health and enhance overall well-being.

Green tea extract

Milk thistle

450 mg/day Curcumin 3 g/day

Cocoa

0.1 g/day 5 g/day

Vegetables

Artichoke extract

Psyllium husk

Goldenseal, Barberry, Oregon Grape, Tree Turmeric, Turmeric, Artichokes, Green Tea

900 mg/day

50 mg/day

7 g/day

Fiber

Berberine

Milk Thistle Seeds, Cocoa Beans, Dark Chocolate, Cocoa Powder, Psyllium Seeds



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GUT PATHOGEN	S						
Bacteria	Current	Previous	Reference	Bacteria	Current	Previous	Reference
Clostridium difficile	<1e1		≤5e2	Clostridium difficile Toxin A	<1e2		≤5.8e2
Clostridium difficile Toxin B	<1e2		≤5.8e2	Clostridium perfringens	<1e2		≤1e2
Campylobacter spp.	<1e1		≤4.8e2	Campylobacter coli	<1e1		≤5e2
Campylobacter jejuni	<1e1		≤5e2	Campylobacter upsaliensis	<1e1		≤5e2
Vibrio (vulnificus)	<1e2		≤5e2	Vibrio (parahaemolyticus)	<1e2		≤7e2
Vibrio (cholerae)	<1e2		≤5e2	Enteropathogenic E.coli (EPEC)	<1e2		≤5e2
Enteroaggregative E.coli (EAEC)	<1e2		≤6.5e2	Enterotoxigenic E.coli (ETEC) Lt/St	<1e2		≤3e2
Shiga-Like Toxin Producing E.coli (STEC) Stx1/Stx2	<1e2		≤3e2	E.coli 0157	<1e2		≤3e2
Shigella/EIEC	<1e2		≤8e2	Helicobacter pylori	<1e2		≤3e3
Non-pylori Helicobacter spp.	<1e2		≤1e3	Listeria	<1e3		≤1.5e3
Klebsiella pneumoniae	<1e2		≤1e3	Yersinia enterocolitica	<1e2		≤5e2
Salmonella	<1e2		≤9e2	Plesiomonas shigelloides	<1e2		≤8e2
Edwardsiella tarda	<1e3		≤2e3	Aeromonas spp.	<1e2		≤1e3
Staphylococcus aureus	<1e3		≤1e3	Bacillus cereus	<1e1		≤5e2
Parasites - Protozoans	Current	Previous	Reference	Parasites - Protozoans	Current	Previous	Reference
Cryptosporidium	<1e3		≤2.5e3	Giardia lamblia	<1e2		≤3e3
Chilomastix mesnili	<1e2		≤5e2	Dientamoeba fragilis	<1e2		≤5e2
Entamoeba coli	<1e3		≤3e3	Blastocystis hominis	<1e3		≤1.5e3
Isospora belli	<1e3		≤1e3	Pentatrichomonas hominis	<1e2		≤5e2
Entamoeba histolytica	<1e2		≤2.5e3	Cyclospora cayetanensis	<1e3		≤5e3
Cyclospora spp.	<1e3		≤5e3	Endolimax nana	<1e3		≤1.5e3
Trichomonas hominis	<1e2		≤5e2	Balantidium coli	<1e2		≤4.6e2



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GUT PATHOGEN	S						
Fungi	Current	Previous	Reference	Fungi	Current	Previous	Reference
Candida spp.	<1e1		≤1e2	Candida albicans	<1e1		≤2.5e2
Candida glabrata	<1e2		≤7.6e2	Rodotorula spp.	<1e2		≤1e3
Geotrichum spp.	<1e3		≤2e3	Microsporidium spp.	<1e3		≤1.2e3
Virus	Current	Previous	Reference	Virus	Current	Previous	Reference
Adenovirus F40/41	<1e2		≤5e2	Astrovirus	<1e2		≤5e2
Norovirus GI	<1e1		≤5e2	Norovirus GII	<1e1		≤5e2
Sapovirus I	<1e2		≤5e2	Sapovirus II	<1e2		≤5e2
Sapovirus IV	<1e2		≤5e2	Sapovirus V	<1e2		≤5e2
Enterovirus	<1e2		≤1e2	Epstein Barr virus	<1e2		≤1e3
Rotavirus A	<1e2		≤5e2	Cytomegalovirus	<1e2		≤1e3
Human bocavirus	<1e1		≤1e2				
Antibiotic Resistant Genes	Cu	rrent	Previous	Antibiotic Resist Genes	tance Cu	urrent	Previous
Helicobacter - Clarithromycin	NOT DE	ETECTED		Helicobacter - Fluoroquinolones	NOT D	ETECTED	
Fluoroquinolones	NOT DE	ETECTED		Vancomycin	NOT D	ETECTED	
b-lactamase	NOT DE	ETECTED		Macrolides	NOT D	ETECTED	
Tetracycline	NOT DE	ETECTED		Aminoglycoside	NOT D	ETECTED	
Bactrim	NOT DE	ETECTED		Carbapenem	NOT D	ETECTED	
Rifampin	NOT DE	ETECTED		Polymyxins	NOT D	ETECTED	
Parasites - Helmint	ns Cu	rrent	Previous	Parasites - Heln	ninths Co	urrent	Previous
Larval Nematode	NOT DE	ETECTED		Taenia solium	NOT D	ETECTED	
Fasciola/Fasciolopsis	NOT DE	ETECTED		Dipylidium caninu	m NOT D	ETECTED	
Enterobius vermiculari	s NOT DE	ETECTED		Ancylostoma duoc	denale NOT D	ETECTED	
Necator americanus	NOT DE	ETECTED		Taenia spp.	NOT D	ETECTED	

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GUT PATHOGENS					
Parasites - Helminths	Current	Previous	Parasites - Helminths	Current	Previous
Strongyloides stercoralis	NOT DETECTED		Schistosoma	NOT DETECTED	
Hymenolepis	NOT DETECTED		Diphyllobothrium latum	NOT DETECTED	
Mansonella	NOT DETECTED		Ascaris lumbricoides	NOT DETECTED	
Trichuris trichiura	NOT DETECTED				
GUT INFLAMMATORY	MARKERS				
Test Name	Current	Previous	Resul	t	Reference
Beta Defensin 2 (ng/mL)	9.5		0 34.9		≤34.9
Lysozyme (ng/mL)	546.7		0 5	75	≤575.0
MMP 9 (ng/mL)	0.2		0 0.2		≤0.2
S100A12 (mcg/ml)	14.5		0 50		≤50.0
Calprotectin (mcg/g)	59.2		0 50 119		≤50.0
Fecal Lactoferrin (mcg/ml)	5.3		0 6.4		≤6.4
Fecal Eosinophil Protein X (mcg/g)	8.4		0 4.8	•	≤4.8
DIGESTION AND IMM	UNE BALANCE				
Test Name	Current	Previous	Resul	t	Reference
Pancreatic Elastase 1 (mcg/g	353.4		0 100 199	•	≥200.0
Fecal Imm <mark>unoc</mark> hemical Test (FIT) (mcg/g)	3.1		0 10		≤10.0
Fecal Zon <mark>ulin (ng/mL)</mark>	48.2		0 25 160		25.1-160.8
рН	6.5		0 6 7.8		6.1-7.8
slgA (mcg/g)	234.7		0 425 145	50	426.0-1450
GUT ANTIBODIES					
Test Name	Current	Previous	Resul	t	Reference
Lipopolysaccharide Antibody	4.5		0.1 10	20	≤10.0

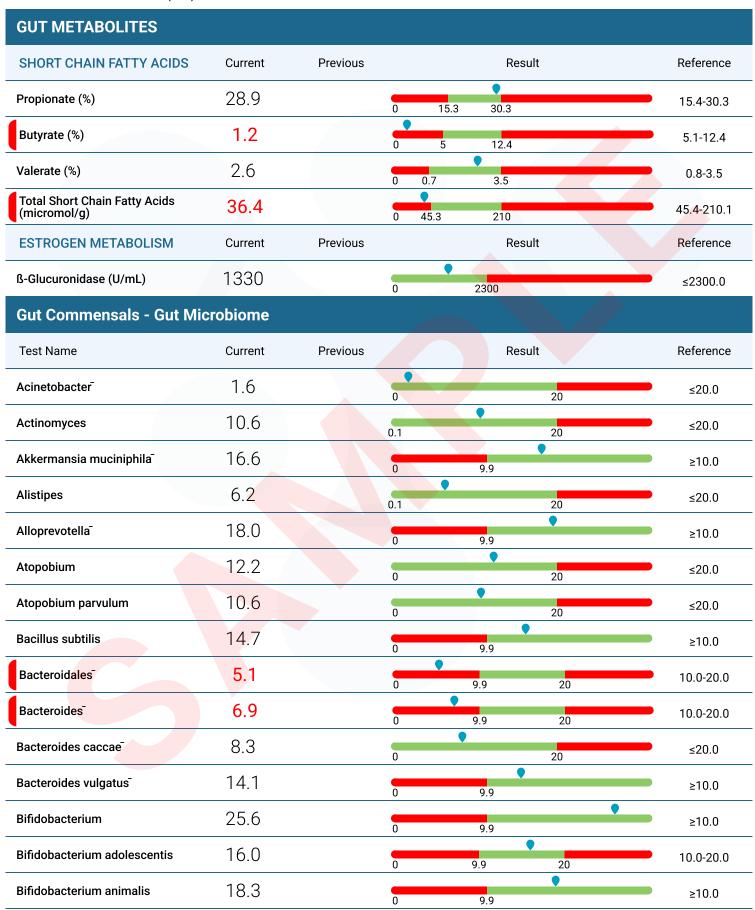
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Test Name	Current	Previous		Result	Reference
Anti-Saccharomyces Cerevisiae Antibody	7.6		0.1 10	20	≤10.0
Fissue Transglutaminase	5.3		0.1 10	20	≤10.0
Peamidated Gliadin Peptide	7.5		0.1 10	20	≤10.0
ecal Anti Gliadin	9.5		0.1 10	20	≤10.0
Actin Antibody	10.3		0.1 10	20	≤10.0
MALABSORPTION					
DIETARY FIBER	Current	Previous	DIETARY FIBER	Current	Previous
leat Fiber NO	OT DETECTED		Vegetable Fiber	NOT DETECTED	
FAT MALABSORPTION	Current	Previous		Result	Reference
Total Fecal Fat (mg/g)	68.5		0 2.8 37	.5	2.9-37.5
otal Fecal Triglycerides (mg/g)	1.5		0 0.2 2.	5	0.3-2.5
ong Chain Fatty Acids (mg/g)	60.0		0 0.8 28	.1	0.9-28.1
otal Cholesterol (mg/g)	3.2		0 0.4 5.	3	0.5-5.3
otal Phospholipids (mg/g)	1.0		0 0.2 6.	4	0.3-6.4
GUT METABOLITES					
BILE ACID METABOLITES	Current	Previous		Result	Reference
cholic Aci <mark>d (C</mark> A) (%)	0.25		0 0.36		≤0.36
henodeo <mark>xycholic Acid (CDCA)</mark> %)	0.58		0 1.25		≤1.25
eoxycholic Acid (DCA) (%)	27.65		0 24.2	75.8	24.25-75.8
ithocholic Acid (LCA) (%)	57.36		0 24.1	75.7	24.16-75.7
CA/DCA Ratio	2.07		0 0.31 3.3	38	0.32-3.38
CHORT CHAIN FATTY ACIDS	Current	Previous		Result	Reference
cetate (%)	67.3			•	60.2-72.7

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Gut Commensals - Gut Mic	crobiome			
Test Name	Current	Previous	Result	Reference
Bifidobacterium animalis subspecies lactis	22.9		0 9.9	≥10.0
Bifidobacterium catenulatum	9.3		0 9.9	≥10.0
Blautia	17.6		0 9.9 20	10.0-20.0
Blautia hydrogenotorophica	14.3		0 9.9 20	10.0-20.0
Bradyrhizobiaceae ⁻	9.7		20	≤20.0
Butyricimonas ⁻	30.0		9.9	≥10.0
Butyrivibrio	20.5		9.9	≥10.0
Catenibacterium	17.2		9.9	≥10.0
Christensenella minuta	25.2		9.9	≥10.0
Clostridia clusters IV	4.4		0 9.9	≥10.0
Clostridia clusters XIVa	15.8		9.9	≥10.0
Clostridia clusters XVIII	5.2		0 9.9	≥10.0
Clostridiales Family XIV Incertae Sedis	12.3		9.9	≥10.0
Clostridium	12.6		0 9.9 20	10.0-20.0
Clostridium hathewayi	8.8		20	≤20.0
Clostridium ramosum	9.3		0 20	≤20.0
Clostridiu <mark>m sym</mark> biosum	7.2		0 20	≤20.0
Clotridiales Incertae Sedis IV	14.2		0 20	≤20.0
Collinsella	11.5		0 20	≤20.0
Coprococcus	29.0		0 9.9 20	10.0-20.0
Desulfovibrio -	12.6		0 20	≤20.0
Desulfovibrio piger ⁻	7.2		0 9.9 20	10.0-20.0
Dialister invisus	26.5		0 9.9	≥10.0

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Gut Commensals - Gut M	icrobiome			
Test Name	Current	Previous	Result	Reference
Dorea	21.7	0	20	≤20.0
Eggerthella lenta	20.2	0	20	≤20.0
Enterobacter aerogenes	9.7	0	20	≤20.0
Enterobacteria ¯	11.5	0	20	≤20.0
Enterobacteriaceae ⁻	29.2	0	9.9 20	10.0-20.0
Enterococcus	15.0	0	9.9 20	10.0-20.0
Enterococcus gallinarum	18.5	0	20	≤20.0
Enterococcus species	9.6	0	20	≤20.0
Escherichia colí	21.4	0	9.9 20	10.0-20.0
Eubacterium	5.5	0	9.9	≥10.0
Eubacterium rectale	9.8	0	9.9 20	10.0-20.0
Faecalibacterium prausnitzii	6.9	0	9.9 20	10.0-20.0
Fusobacterium -	27.7	0	9.9 20	10.0-20.0
Haemophilus -	14.8	0	9.9	≥10.0
Hafnia	28.3	0	9.9	≥10.0
Holdemania	9.2	0.1	20	≤20.0
Lachnospi <mark>rac</mark> eae	20.7	0	9.9 20	10.0-20.0
Lactobacillaceae	14.6	0	20	≤20.0
Lactobacillus	17.0	0	9.9	≥10.0
Lactobacillus animalis	18.7	0	9.9	≥10.0
Lactobacillus ruminis	11.3	0	20	≤20.0
Lactobacillus sakei	13.3	0	9.9	≥10.0
Lactococcus	12.3	0.1	20	≤20.0

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Gut Commensals - Gut Mic	robiome			
Test Name	Current	Previous	Result	Reference
Leuconostoc	19.7	0	9.9	≥10.0
Marvinbryantia	11.2	0.1	20	≤20.0
Methanobrevibacter smithii	4.5	0	9.9 20	10.0-20.0
Mycoplana ⁻	6.9	0	20	≤20.0
Oscillospira ⁻	21.4	0	9.9	≥10.0
Parabacteroides	19.8	0	9.9	≥10.0
Pediococcus	24.1	0	9.9	≥10.0
Peptostreptococcus	16.3	0	9.9	≥10.0
Phascolarctobacterium -	21.7	0	9.9	≥10.0
Porphyromonas gingivalis -	4.0	0	20	≤20.0
Prevotella -	11.8	0	9.9 20	10.0-20.0
Prevotella coprí	7.3	0.1	20	≤20.0
Propionibacterium freudenreichii	25.7	0	9.9	≥10.0
Proteus mirabilis	10.5	0	20	≤20.0
Pseudobutyrivibrio -	28.6	0	9.9	≥10.0
Pseudomonas ⁻	9.8	0	20	≤20.0
Roseburia	22.2	0	9.9	≥10.0
Roseburia intestinalis	15.6	0	9.9 20	10.0-20.0
Ruminococcaceae	18.0	0	9.9 20	10.0-20.0
Ruminococcus	15.6	0	9.9 20	10.0-20.0
Ruminococcus bromii	22.0	0	9.9	≥10.0
Ruminococcus gnavus	16.0	0	9.9 20	10.0-20.0
Ruminococcus obeum	8.9	0	20	≤20.0

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Gut Commensals - Gut M	licrobiome			
Test Name	Current	Previous	Result	Reference
Solobacterium moorei	7.0	0	20	≤20.0
3-Galactosidase producing pacteria	18.4	0	20	≤20.0
3-Glucuronidase producing pacteria	13.9	0	20	≤20.0
Staphylococcaceae	4.7	0	20	≤20.0
Staphylococcus epidermidis	2.0	0	20	≤20.0
Staphylococcus pasteuri	2.4	0	20	≤20.0
Staphylococcus species	2.8	0	20	≤20.0
Streptococcus species	19.4	0	20	≤20.0
yzzerella	0.6	0	20	≤20.0
yzzerella 4	2.4	0	20	≤20.0
Veillonella ⁻	5.9	0	9.9 20	10.0-20.0
Veillonellaceae ⁻	5.5	0	9.9	≥10.0
Gut Commensals - Probi	otic Organism	ıs		
Test Name	Current	Previous	Result	Reference
Bacillus coagulans	6.7	0	9.9	≥10.0
Bifidobacterium bifidum	22.3	0	9.9	≥10.0
Bifidobact <mark>eriu</mark> m breve	11.9	0	9.9	≥10.0
Bifidobact <mark>erium dentiu</mark> m	13.0	0	9.9	≥10.0
Bifidobacterium infantis	25.8	0	9.9	≥10.0
Bifidobacterium longum	25.8	0	9.9	≥10.0
Escherichia coli Nissle¯	24.0	0	9.9	≥10.0
actobacillus acidophilus	12.8	0	9.9	≥10.0
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Gut Commensals - Probio	otic Organism	s			
Test Name	Current	Previous		Result	Reference
Lactobacillus bulgaricus	21.8		0	9.9	≥10.0
Lactobacillus casei	19.0		0	9.9	≥10.0
Lactobacillus fermentum	27.1		0	9.9	≥10.0
Lactobacillus paracasei	23.4		0	9.9	≥10.0
Lactobacillus plantarum	24.4		0	9.9	≥10.0
Lactobacillus reuteri	15.6		0	9.9	≥10.0
Lactobacillus rhamnosus	12.4		0	9.9	≥10.0
Lactobacillus rhamnosus GG	22.3		0	9.9	≥10.0
Lactobacillus salivarius	19.4		0	9.9	≥10.0
Saccharomyces boulardii	21.2		0	9.9	≥10.0
Streptococcus	19.4		0	9.9 20	10.0-20.0
Streptococcus thermophilus	6.4		0	9.9 20	10.0-20.0



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Gut Zoomer

Risk and Limitations

This test has been developed and its performance characteristics determined by Vibrant America LLC., a CLIA certified lab and Vibrant Genomics, a CLIA and CAP certified lab. These assays have not been cleared or approved by the U.S. Food and Drug Administration. Vibrant Wellness provides additional contextual information on these tests and provides the report in a more descriptive fashion.

Gut Zoomer testing is performed at Vibrant Genomics and Vibrant America utilizing ISO-13485 developed technology. Vibrant America has effective procedures in place to protect against technical and operational problems. However, such problems may still occur. Examples include failure to obtain the result for a specific test due to circumstances beyond Vibrant's control. Vibrant may re-test a sample to obtain these results but upon re-testing the results may still not be obtained. As with all medical laboratory testing, there is a small chance that the laboratory could report incorrect results. A tested individual may wish to pursue further testing to verify any results.

Tested individuals should not change their diet, physical activity, or any medical treatments they are currently using based on the results without consulting their personal health care provider. The information in this report is intended for educational purposes only. While every attempt has been made to provide current and accurate information, neither the author nor the publisher can be held accountable for any errors or omissions. Tested individuals may find their experience is not consistent with Vibrant's selected peer reviewed scientific research findings of relative improvement for study groups. The science in this area is still developing and many personal health factors affect diet and health. Since subjects in the scientific studies referenced in this report may have had personal health and other factors different from those of tested individuals, results from these studies may not be representative of the results experienced by tested individuals. Further, some recommendations may or may not be attainable, depending on the tested individual's physical ability or other personal health factors. A limitation of this testing is that many of these scientific studies may have been performed in selected populations only. The interpretations and recommendations are done in the context of these studies, but the results may or may not be relevant to tested individuals of different or mixed ethnicities. Please note that pediatric ranges have not been established for these tests. Interference studies have not been established for individuals on immunosuppressive drugs.

Based on test results and other medical knowledge of the tested individual, health care providers might consider additional independent testing, or consult another health care provider or genetic counselor.

Vibrant Wellness makes no claims as to the diagnostic or therapeutic use of its tests or other informational materials. Vibrant Wellness reports and other information do not constitute medical advice and are not a substitute for professional medical advice. Please consult your healthcare practitioner for questions regarding test results, or before beginning any course of supplementation or dietary changes.

Vibrant America/Wellness makes no claims as to the diagnostic or therapeutic use of its tests or other informational materials. Vibrant Wellness reports and other information do not constitute medical advice and are not a substitute for professional medical advice. Please consult your healthcare practitioner for questions regarding test results, or before beginning any course of supplementation, dietary or lifestyle changes. A summary of the test information that allows the user to understand how the test works and how to interpret the results of the test is provided at the start of the test report.

