DEMO DEMO

Name: DEMO DEMO
Date of Birth: 11-12-1990
Biological Sex: Male
Age: 35
Height: 64 inches
Weight: 160 lbs
Fasting:

Telephone: 000-000-0000
Street Address:
Email:

FINAL REPORT

Accession ID: 2925884069

Provider Information

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

Current Result Previous Result In Control Moderate Risk

Specimen Information

Sample Type	Collection Time	Received Time	Report	Final Report Date
Stool	2026-01-15 10:00 (PST)	2026-01-15 16:39 (PST)	Gut Zoomer - P2	2026-01-16 09:53 (PST)
Unpreserved Stool	2026-01-15 10:00 (PST)	2026-01-15 16:39 (PST)	Gut Zoomer - P2	2026-01-16 09:53 (PST)

VibrantWellness
3521 Leonard Ct, Santa Clara, CA 95054
1-866-364-0963 | support@vibrant-america.com | www.vibrant-wellness.com

VibrantWellness

Gut Zoomer

Your Gut Health Report

Gut Diversity Pg 5

Gut Commensals Pg 5

Gut Pathogens Pg 7

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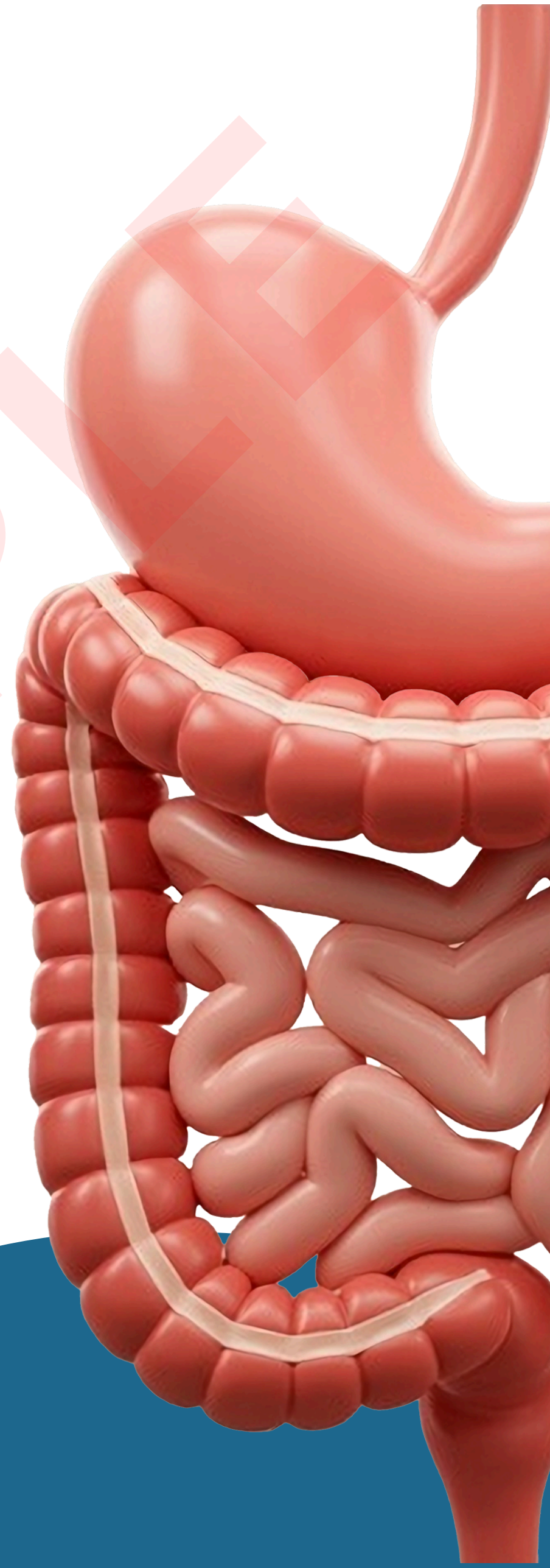
Digestion and Immune Balance Pg 10

Gut Antibodies Pg 10

Malabsorption Pg 11

Gut Metabolites Pg 12

Gut Neurotransmitters Pg 16



Gut Zoomer

INTRODUCTION

Vibrant Wellness is pleased to present Gut Zoomer testing to support healthy lifestyle choices in consultation with your healthcare provider. The Gut Zoomer evaluates biomarkers across key gastrointestinal-health categories, including Gut Commensals, Phyla & Diversity Indices, Inflammatory Markers, Digestion and Immune Balance Markers, Gut Metabolites, Gut Antibodies, Malabsorption Markers, Gut Pathogens and Antibiotic Resistance Genes. Results are intended to be interpreted by healthcare providers to guide personalized wellness strategies informed by the gastrointestinal ecosystem.

Methodology

Gut Zoomer is split into 7 sections: Gut Pathogens, Gut Commensal, Gut Inflammation, Gut Antibodies, Gut Metabolites, Gut Diversity, and Gut Neurotransmitters. 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 sIgA levels with sandwich ELISA (enzyme-linked immunosorbent assay) methodology. ELISA methodology is used for detecting ß-glucuronidase, pH, and fecal immunochemical test (FIT). The Gut Antibodies panel utilizes multiplexed microarray chip technology to provide accurate quantitative analysis of gut-related antibody markers. Liquid chromatography tandem mass spectrometry methodology (LC-MS/MS) is used for detecting Gut Metabolites like short chain fatty acids markers and bile acid markers, dietary fiber detection, and gut neurotransmitters markers. Colorimetric assay methodology is used for detecting fat malabsorption like fecal fat, fecal triglycerides, and total phospholipids. Urine creatinine is measured using a kinetic colorimetric assay based on the Jaffé method.

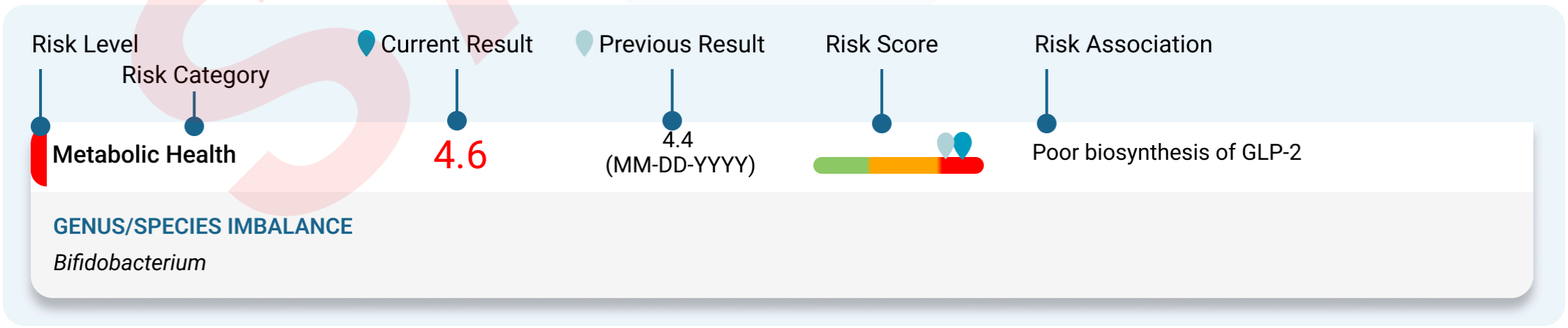
Interpretation of Report

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 adults over 18 years of age, and pediatric reference ranges are not available. 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, including pathogenic bacteria, parasites, viruses, and fungi, are reported both qualitatively and quantitatively. Pathogenic bacteria, parasites, viruses, and fungi are reported in copies/µL. Quantitative results are expressed in scientific notation, where "e" denotes the exponent of 10. For instance, a value of 1e2 corresponds to 1×10^2, or 100 CFU/mL for the specified organism. Worms and antibiotic resistance genes are reported as DETECTED or NOT DETECTED, depending on the test outcome. The patient's risk score is considered low if it falls within the green (normal) zone. The current result and previous result are listed to the left of the reference range illustration. The risk association is listed to the right of the risk score. The Risk category and level are listed on the left hand side. (see image below)



Gut Zoomer

INTRODUCTION

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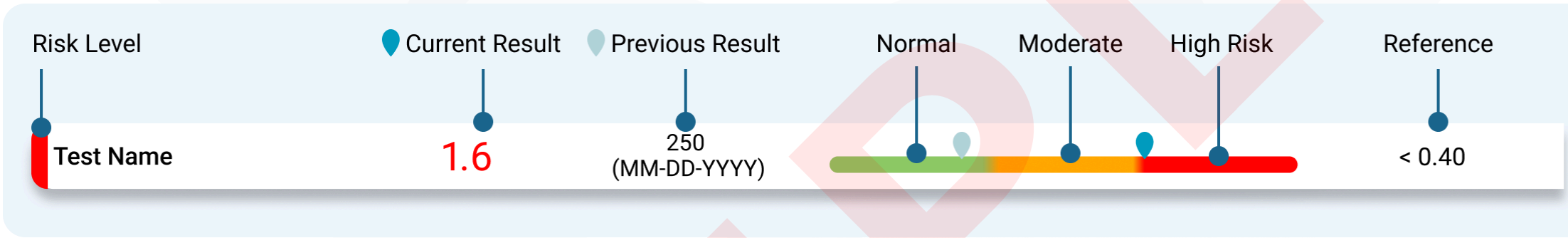
Interpretation of Report

Digestion and Immune Balance, **Gut Inflammatory**, **Gut Antibodies**, **Gut Metabolites**, and **Gut Neurotransmitters** markers are displayed along with a risk indicator and the corresponding reference range. Reference ranges for **Digestion and Immune Balance**, **Gut Inflammatory**, **Gut Antibodies**, and **Gut Metabolites** markers were calculated using results from 200 healthy adults over 18 years of age, and pediatric reference ranges are not available. Reference ranges for **Gut Neurotransmitters** markers were established using a cohort of 1,000 apparently healthy individuals and validated across three age groups: <10 years, 10–14 years, and >14 years. All test results are displayed with a risk indicator and abundance direction as applicable. (red – high risk, yellow – moderate risk and green – low risk). The patient's risk score is considered low if it falls within the green (normal) zone. The current result and previous result are listed to the left of the reference range illustration. The reference metric, used to establish the reference range, is listed to the right of the reference range illustration (see image below)



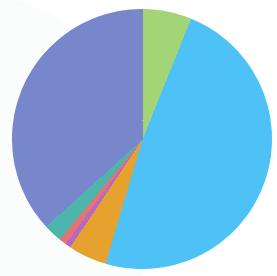
Please note: It is important that you discuss any modifications to your diet, exercise, drug, and/or nutritional supplementation with your healthcare provider before making any changes. Antibody titers do not indicate the presence or absence of infection, the diagnosis of which should be made based upon a thorough evaluation of clinical history.

Patient Name: **DEMO DEMO**
Date of Birth: **11-12-1990** Accession ID: **2925884069**
Service Date: **2026-01-15 10:00 (PST)**

Gut Zoomer - Summary

Gut Diversity

INDEX	Reference	Current	Previous
Shannon's Index	≥ 2.40	1.7	
Simpson's Index	≥ 0.74	0.60	



- 6.1% Proteobacteria-
- 48.5% Firmicutes
- 4.8% Actinobacteria
- 0.7% Euryarchaeota
- 0.9% Fusobacteria-
- 2.3% Verrucomicrobia-
- 36.7% Bacteroidetes-

NOTE

Shannon's Index: Higher values indicate richness.

Simpson's Index: Higher values indicate evenness.

KEY RATIOS	Current	Previous	Result	Reference
Firmicutes/Bacteroidetes	1.3		0 0.9 7	≤0.9
Higher risk for obesity, metabolic disorders, and inflammation.				
Prevotella/Bacteroides	0.90		0 0.47	≥0.48

Gut Commensals

Reference Range: In Control: <2 Moderate: 2-3.9 Risk: >3.9

Risk Category	Current	Previous	Risk Score	Risk Association
Intestinal Permeability	3.4			Low butyrate production, Low propionate production, Low acetate production
GENUS/SPECIES IMBALANCE Bifidobacterium				
Intestinal Gas	3.1			Elevated hydrogen production, Elevated carbon dioxide production
GENUS/SPECIES IMBALANCE Dorea				
SIBO	3.4			SIBO syndrome
GENUS/SPECIES IMBALANCE Streptococcus				
Irritable Bowel Syndrome	2.8			Irritable bowel syndrome
GENUS/SPECIES IMBALANCE Bifidobacterium, Dorea				

Patient Name: **DEMO DEMO**
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Gut Zoomer - Summary

Gut Commensals

Reference Range: In Control: <2 | Moderate: 2-3.9 | Risk: >3.9

Risk Category	Current	Previous	Risk Score	Risk Association
Inflammatory Bowel Disease	3.5			Ulcerative colitis
GENUS/SPECIES IMBALANCE Streptococcus, Bifidobacterium				
Autoimmune Health	2.9			Celiac disease
GENUS/SPECIES IMBALANCE Bifidobacterium				
Metabolic Health	3.1			Poor biosynthesis of GLP-2
GENUS/SPECIES IMBALANCE Bifidobacterium				
Liver Health	2.9			Liver cirrhosis, Alcoholic hepatitis, Primary sclerosing cholangitis
GENUS/SPECIES IMBALANCE Streptococcus				
Hormones	1.5			
GENUS/SPECIES IMBALANCE				
Nutrition	3.3			Poor vitamin synthesis, Poor tryptophan metabolism
GENUS/SPECIES IMBALANCE Bifidobacterium				
Cardiovascular Health	2.8			Cardiovascular risk
GENUS/SPECIES IMBALANCE Prevotella copri, Streptococcus				
Neurological Health	3.0			Alzheimer's disease, Autism, Depression, Poor biosynthesis of neurotransmitters
GENUS/SPECIES IMBALANCE Bifidobacterium, Desulfovibrio, Alistipes				
Probiotic Health	1.0			
GENUS/SPECIES IMBALANCE				
Keystone Health	3.2			Reduced keystone species
GENUS/SPECIES IMBALANCE Bifidobacterium				

Gut Commensals

Supplement Suggestions

PROBIOTICS

SIBO: Lactobacillus casei

Irritable Bowel Syndrome: Lactobacillus plantarum 299v

Inflammatory Bowel Disease: Butyrate

Keystone Health: Lactobacillus acidophilus, Akkermansia muciniphila, Lactobacillus rhamnosus GG, Bifidobacterium

SUPPLEMENTS

Intestinal Permeability: Inulin, Vitamin B2, Fructans, Cocoa, Sodium butyrate, Tributyrin, Inulin-propionate ester

Intestinal Gas: Iron, Alpha-Galactosidase

Irritable Bowel Syndrome: Vitamin D, Psyllium husk, Peppermint oil

Inflammatory Bowel Disease: Vitamin D, Omega-3 fatty acids, Milk thistle, Phosphatidylcholine, Palmitoylethanolamide (PEA)

Autoimmune Health: Vitamin D, Iron, Vitamin B12, Folic acid, Calcium

Liver Health: Milk thistle, Artichoke extract

Nutrition: Vitamin B6, Vitamin C, B complex vitamins

Cardiovascular Health: Omega-3 fatty acids, Vitamin D, Coenzyme Q10, Vitamin E, Folate, Vitamin B3

Neurological Health: Omega-3 fatty acids, Vitamin D, Coenzyme Q10, Melatonin, Docosahexaenoic acid (DHA), α-lipoic acid, N-acetyl-cysteine, Soy isoflavones, L-carnitine, Folinic acid

Keystone Health: Inulin, Galactooligosaccharides, Vitamin C, Vitamin B2, Vitamin B3, Xylo-oligosaccharides, Lactulose, Xylooligosaccharide, Raspberry Extracts, Red wine polyphenols

SUPPORTIVE SUPPLEMENTS

Intestinal Permeability: Resistant starch

SIBO: Berberine

Inflammatory Bowel Disease: Omega-3 fatty acids, Phosphatidylcholine, Palmitoylethanolamide (PEA), Pomegranate juice, Eicosapentaenoic acid

Metabolic Health: Inulin, Galactooligosaccharides, Fructooligosaccharides

Liver Health: Milk thistle, Artichoke extract, Vitamin E, Curcumin, Glutathione

Cardiovascular Health: Omega-3 fatty acids, Coenzyme Q10, Curcumin, Vitamin E, Protocatechuic acid, Quercetin-3-glucuronide, α-Asarone, Gallic acid, Enterolactone, Enterodiol

Neurological Health: Berberine, 5-HTP

Keystone Health: Resistant starch

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

Bacteria	Current	Previous	Reference	
Clostridium perfringens	1.1e3		≤1e2	

Clostridium perfringens: Clostridium perfringens is a spore-forming bacterium that can cause food poisoning and gas gangrene. Exposure to this bacterium occurs through ingestion of improperly cooked or stored food, particularly meat and poultry. Symptoms associated with its infection may include abdominal cramps, diarrhea, and, in severe cases, tissue necrosis and systemic toxicity.

GUT PATHOGENS

Supplement Suggestions

SUPPORTIVE SUPPLEMENTS

Clostridium perfringens: Lactobacillus plantarum

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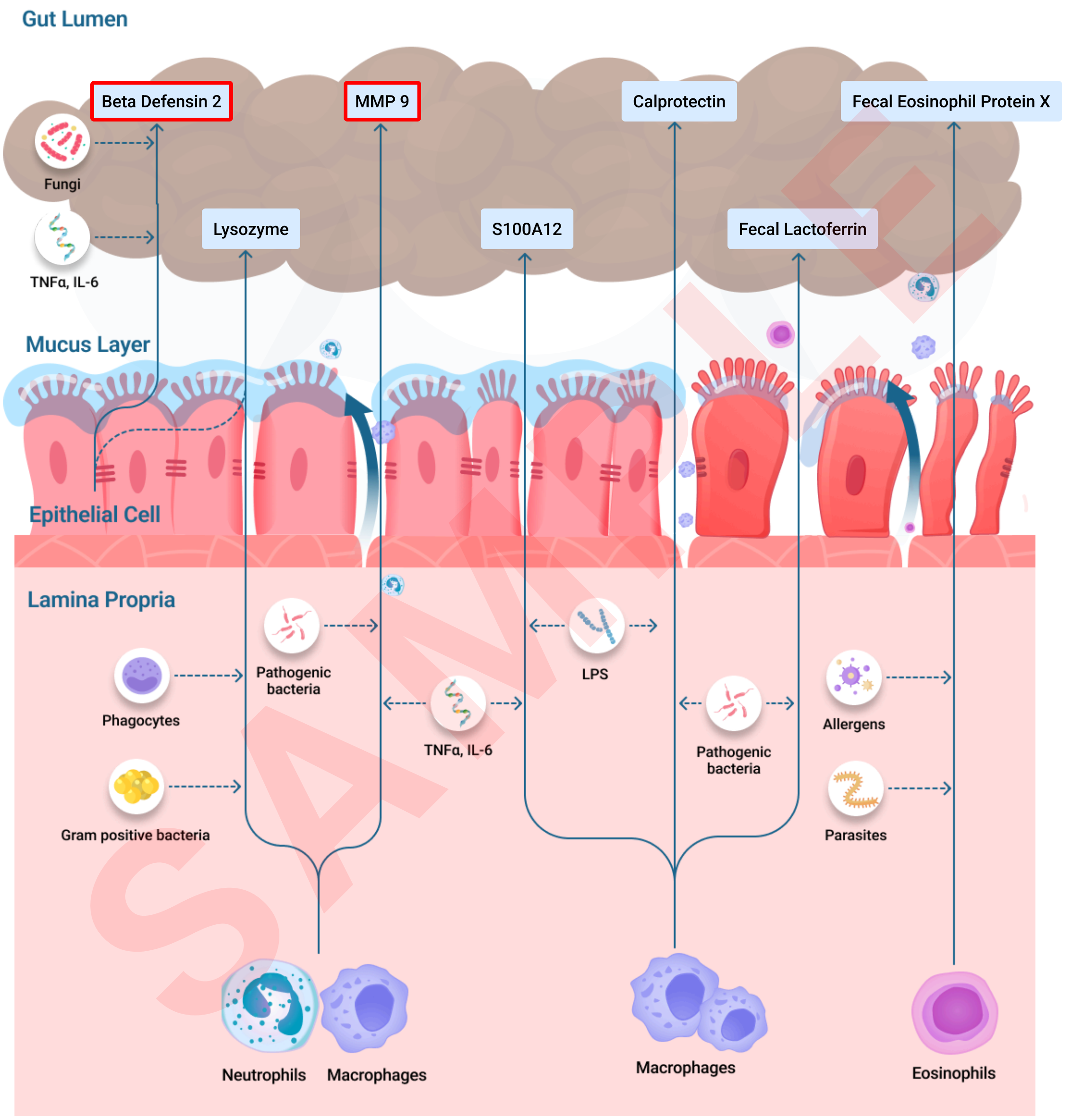
Gut Zoomer - Summary

Gut Inflammation



Gut Zoomer - Summary

GUT INFLAMMATORY MARKERS

Test Name	Current	Previous	Result	Reference
Beta Defensin 2 (ng/mL)	83.1		0 — 34.9	≤34.9

Beta-defensin is an antimicrobial peptide produced by epithelial cells lining the gut mucosa. It is secreted in response to microbial overgrowth, particularly involving gram-negative bacteria and fungi. Elevated levels of beta-defensin indicate an active immune response to these microorganisms or the presence of inflammation. Sustained elevation may signal persistent gut inflammation and damage to the epithelial barrier. Symptoms associated with elevated beta-defensin include abdominal pain and diarrhea, which are commonly observed in inflammatory bowel disease (IBD) and Candida overgrowth.

Test Name	Current	Previous	Result	Reference
MMP 9 (ng/mL)	0.3		0 — 0.2	≤0.2

MMP-9 is an enzyme produced by neutrophils and macrophages during inflammatory responses in the gut, often in response to gut microorganisms, contributing to active immune activity in the gastrointestinal tract. Elevated levels of MMP-9 indicate severe intestinal inflammation, commonly correlating with active ulcerative colitis (UC) or other inflammatory bowel conditions. High MMP-9 levels suggest matrix degradation and mucosal damage, reflecting advanced disease activity and leading to symptoms such as mucus-filled diarrhea and rectal bleeding.

Supplement Suggestions

SUPPLEMENTS

MMP 9: Milk thistle

SUPPORTIVE SUPPLEMENTS

Beta Defensin 2: Butyrate

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.

DIGESTION AND IMMUNE BALANCE

No markers are outside the normal reference range

GUT ANTIBODIES

Test Name	Current	Previous	Result	Reference
Actin Antibody	10.6		0.1 — 10 — 20	≤10.0

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.

Gut Zoomer - Summary

GUT ANTIBODIES

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.

MALABSORPTION

DIETARY FIBER	Current	Previous
Vegetable Fiber	DETECTED	

Vegetable Fiber: Vegetable fibers in stool may indicate improper digestion, inadequate chewing, or digestive enzyme insufficiency, all of which can compromise nutrient absorption. Consuming vegetable fiber benefits gut health by promoting regular bowel movements and supporting healthy microbiota. However, undigested fibers can result in symptoms like bloating, abdominal discomfort, or irregular stools. Encouraging thorough chewing and mindful eating helps optimize digestion, thereby improving nutrient uptake and reducing the risk of weight gain, obesity, and related metabolic disorders.

Supplement Suggestions

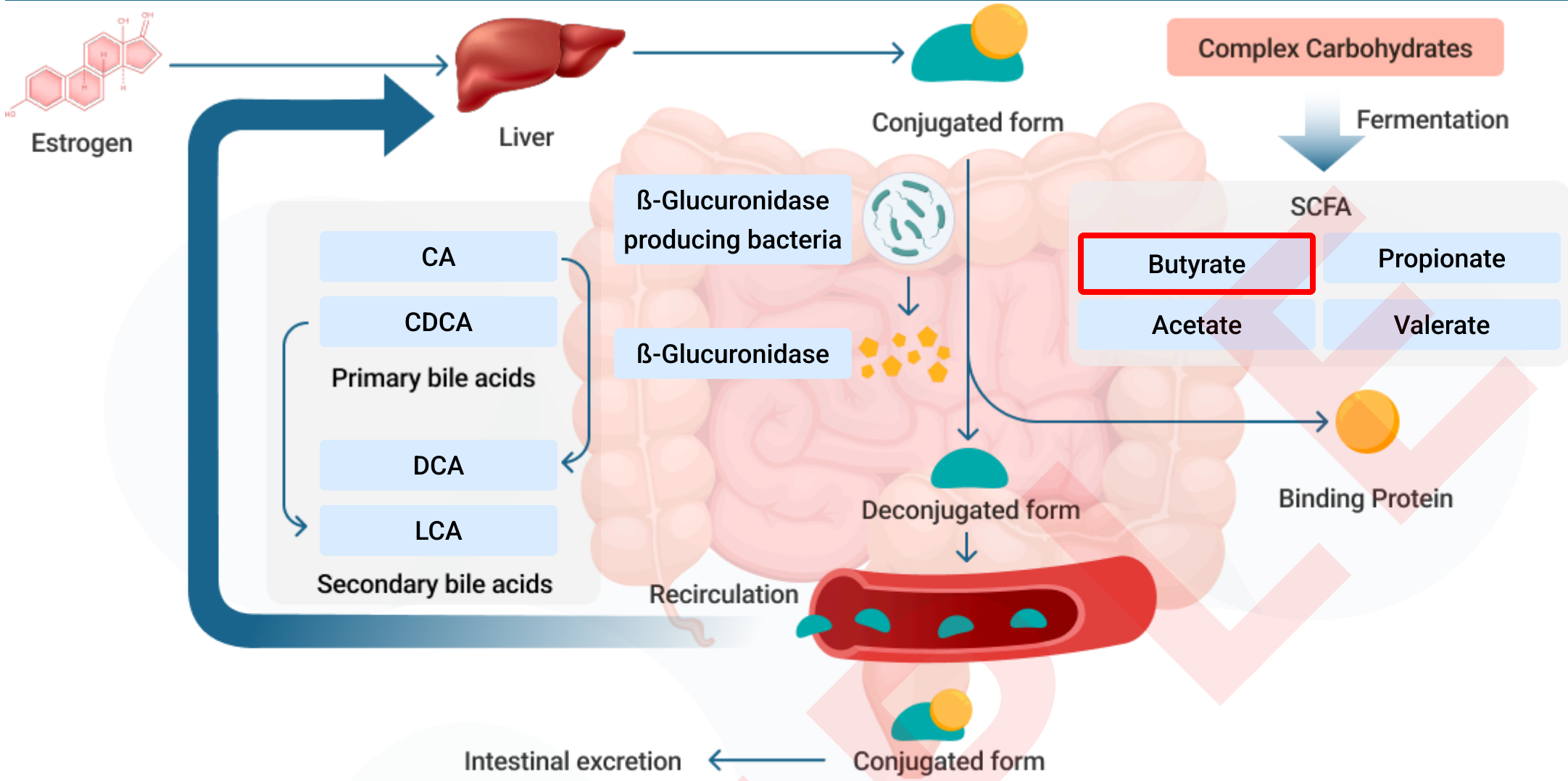
SUPPORTIVE SUPPLEMENTS

Vegetable Fiber: Betaine HCL, Taurine

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 Zoomer - Summary

Gut Metabolites



CHOLIC ACID (CA)

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

Gallbladder, Liver, Gut

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.

Brown adipose tissue, Gut

PROPIONATE

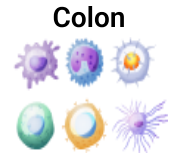
- Potential weight regulation issues due to altered energy homeostasis.
- Impaired satiety leading to overeating due to affected GLP-1 secretion.

Liver, Pancreas

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.

Gut, Brain

LITHOCHOLIC ACID (LCA)

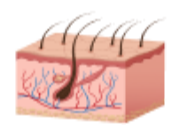
- Toxin build-up due to poor detoxification
- Frequent gut infections from reduced immunity via VDR.
- Bloating and irregular stools from gut dysbiosis.

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.

Liver, Gut

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.

Liver, Gut

Gut Zoomer - Summary

GUT METABOLITES

SHORT CHAIN FATTY ACIDS	Current	Previous	Result	Reference
Butyrate (%)	1.1		0 — 5 — 12.4	5.1-12.4

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.

Total Short Chain Fatty Acids (micromol/g)	30.6		0 — 45.3 — 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

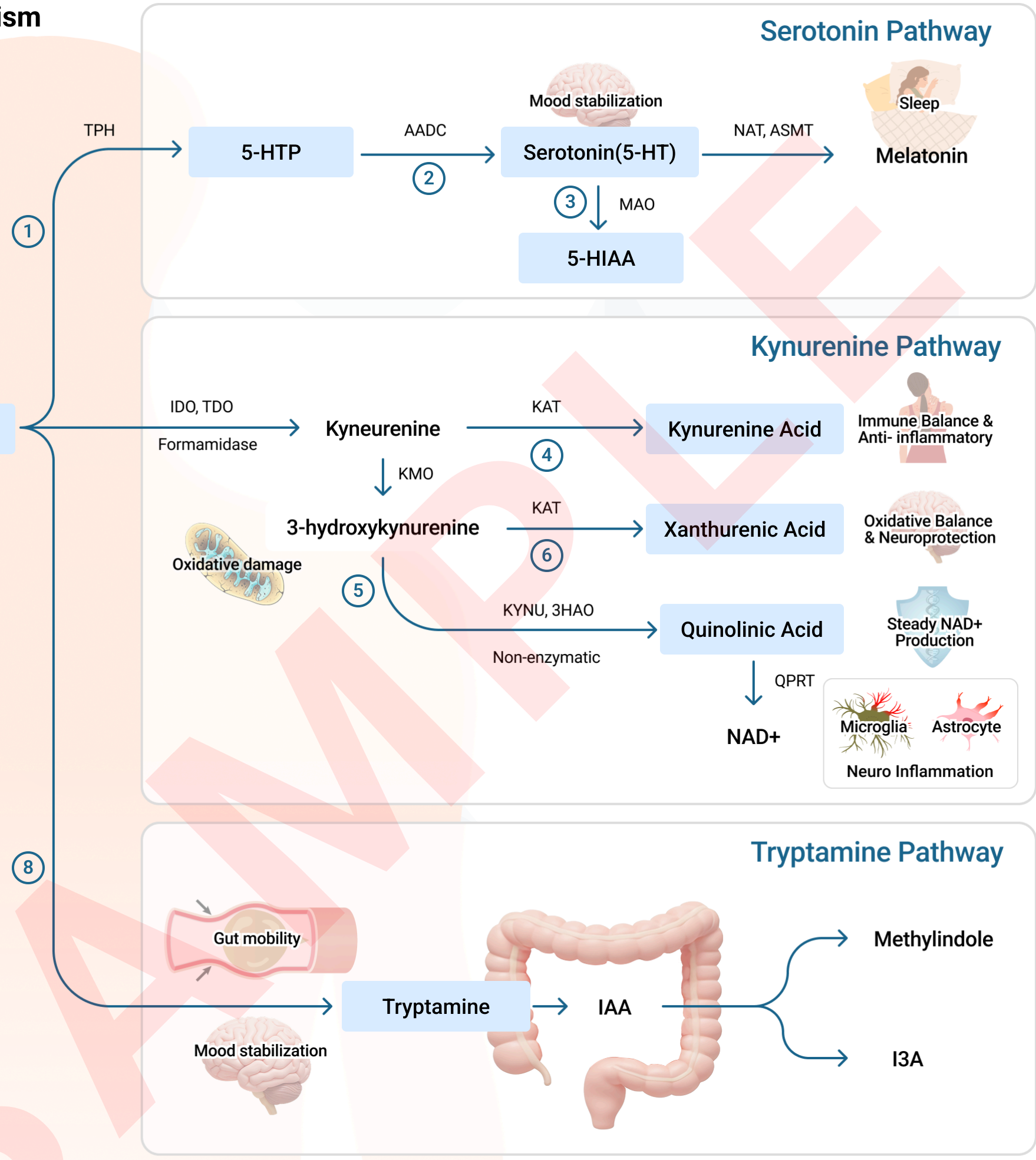
Total Short Chain Fatty Acids: Fructans, Inulin

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 Zoomer - Summary

Gut Neurotransmitters

Tryptophan Metabolism



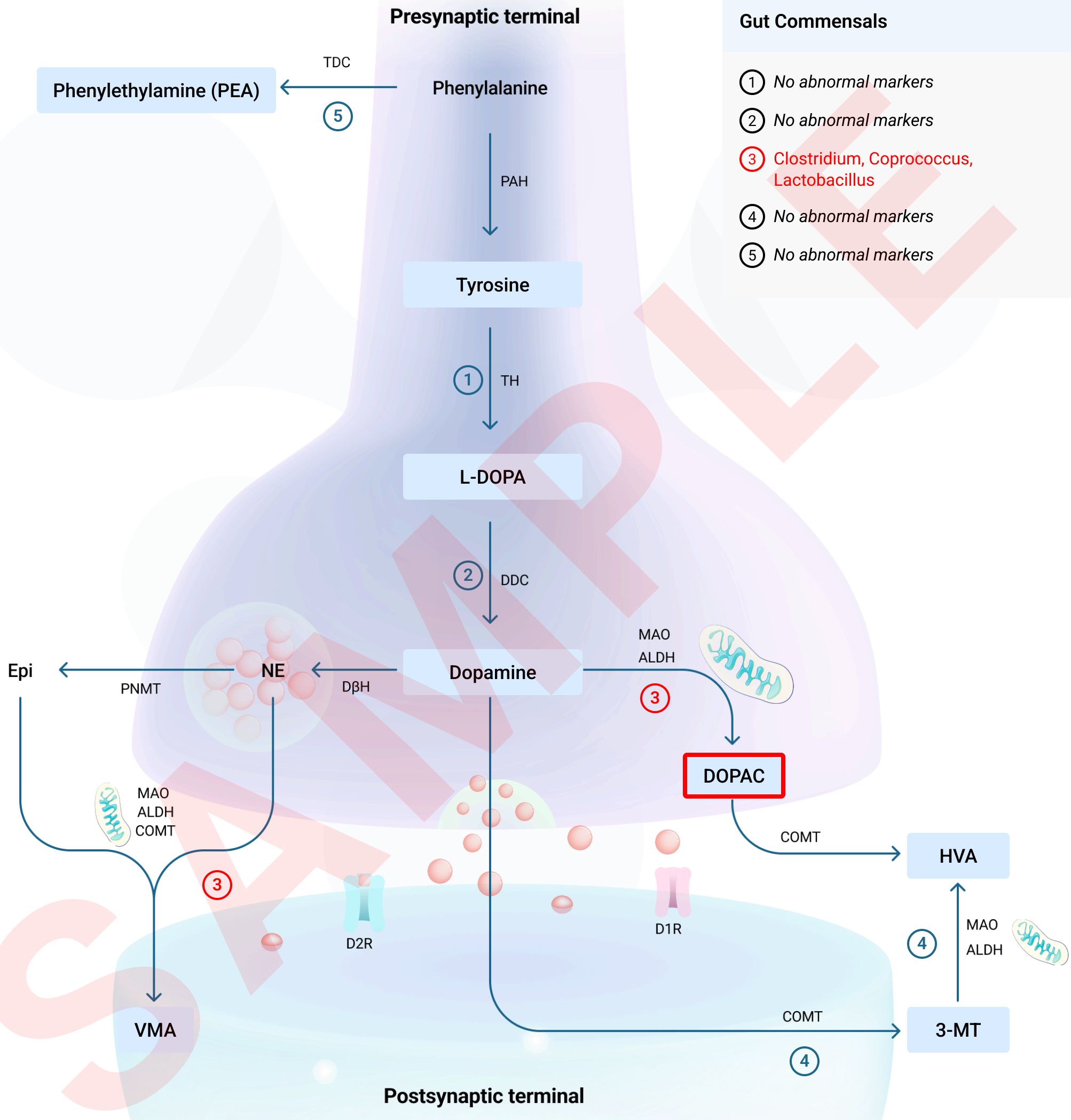
Gut Commensals

1. *No abnormal markers*
2. *No abnormal markers*
3. *No abnormal markers*
4. *No abnormal markers*
5. *No abnormal markers*
6. *No abnormal markers*
7. *No abnormal markers*
8. *No abnormal markers*

Gut Zoomer - Summary

Gut Neurotransmitters

Tyrosine Metabolism



Gut Commensals

1. *No abnormal markers*
2. *No abnormal markers*
3. Clostridium, Coprococcus, Lactobacillus
4. *No abnormal markers*
5. *No abnormal markers*

ABBREVIATION KEY

NE	*Norepinephrine*	**Epi**	*Epinephrine*	**VMA**	*Vanillylmandelic acid*
HVA	*Homovanillic acid*	**COMT**	*Catechol-O-methyltransferase*	**MAO**	*Monoamine oxidase*
DOPAC	*3, 4-Dihydroxyphenylacetic acid*	**3-MT**	*3-Methoxytyramine*	**ALDH**	*Aldehyde Dehydrogenase*
PAH	*Phenylalanine hydroxylase*	**TH**	*Tyrosine hydroxylase*	**TDC**	*Tyrosine decarboxylase*
DDC	*Dopa decarboxylase*	**L-DOPA**	*L-3,4-dihydroxyphenylalanine*	**PNMT**	*Phenylethanolamine N-methyltransferase*
DβH	*Dopamine β-hydroxylase*	**D1R**	*Dopamine receptor D1*	**D2R**	*Dopamine receptor D1*

Gut Zoomer - Summary

Gut Neurotransmitters

Dopaminergic Pathway	Current	Previous	Result	Reference
DOPAC (mcg/g)	2846.12		0 577 1655	577.3-1655.5

3,4-Dihydroxyphenylacetic acid (DOPAC) is a major metabolite formed when dopamine is broken down by monoamine oxidase A (MAOA), which initiates dopamine degradation, and aldehyde dehydrogenase (ALDH), which converts the intermediate into DOPAC. Gut microbes such as Clostridium, Coprococcus, and Lactobacillus support dopamine production and influence its turnover, contributing to DOPAC formation. High DOPAC levels indicate increased activity of these microbes, which enhance dopamine synthesis and accelerate its breakdown. This heightened turnover can contribute to stress, agitation, impulsivity, neuroinflammatory responses, and rapid gut motility. Clinically, elevated DOPAC is associated with anxiety, behavioral instability, and diarrhea due to excessive dopaminergic breakdown and disrupted gut–brain communication.

HVA /DOPAC Ratio	2.55		0 2.59 8.3	2.6-8.3

Homovanillic acid (HVA) and 3,4-dihydroxyphenylacetic acid (DOPAC) are key metabolites in dopamine breakdown. Dopamine is first converted into DOPAC and 3-methoxytyramine (3-MT), which are then further metabolized into HVA. The HVA/DOPAC ratio reflects the efficiency with which dopamine is converted from its intermediate (DOPAC) into its final metabolite (HVA). A low HVA/DOPAC ratio indicates reduced dopamine turnover. Clinically, this may reflect impaired dopamine metabolism, reduced monoamine oxidase (MAO) activity, or insufficient cofactors and may present with low motivation, fatigue, and blunted emotional response.

Supplement Suggestions

SUPPLEMENTS

HVA /DOPAC Ratio: SAMe (S-adenosyl methionine), Magnesium

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 Zoomer - Summary

Suggestions

Prebiotics

Prebiotics are non-digestible fiber compounds designed to selectively nourish beneficial gut bacteria and promote healthy microbiome composition and function. These agents work by serving as food sources for beneficial microbes, stimulating their growth and metabolic activity, or creating an environment that supports optimal gut barrier function. Based on your health assessments, this report provides recommendations for appropriate prebiotic supplementation tailored to the specific requirements identified. These recommendations serve as guidance and must be reviewed with a qualified healthcare provider to ensure proper selection, dosage, and gradual introduction protocol. Responsible use of prebiotics is essential to optimize gut flora balance while minimizing potential digestive discomfort during microbiome adaptation.

SUPPLEMENTS

Inulin	50 mg/day	**Galactooligosaccharides**	5.5 g/day	**Fructooligosaccharides**	20 g/day
Resistant starch	15 g/day	**Fructans**	7.5 g/day	**Xylo-oligosaccharides**	1.4 g/day
Lactulose	30 ml/day	**Xylooligosaccharide**	1.4 g/day	**Inulin-propionate ester**	10 g/day

FOOD SOURCES

Fruits

Bananas, Green Bananas, Apples

Vegetables

Onions, Garlic, Asparagus, Cooked And Cooled Potatoes, Bamboo Shoots, Leeks, Artichokes

Dairy

Milk, Yogurt, Cheese, Butter, Kefir

Fiber

Chicory Root, Legumes, Wheat, Corn Husks, Oats, Barley

Probiotics

Probiotics are beneficial live microorganisms designed to restore and maintain healthy gut microbiome balance and support digestive and immune function. These agents work by colonizing the intestinal tract, competing with harmful bacteria, producing beneficial metabolites, or modulating immune responses. Based on individual microbiome assessments, this report provides recommendations for appropriate probiotic strains tailored to the specific imbalances or digestive concerns identified. These recommendations serve as guidance and must be reviewed with a qualified healthcare provider to ensure proper selection, colony count, and duration of supplementation. Responsible use of probiotics is essential to optimize gut health benefits and minimize potential digestive discomfort during initial colonization.

SUPPLEMENTS

Butyrate	300 mg/day	**Lactobacillus acidophilus**	10 billion CFU/day	**Akkermansia muciniphila**	10 billion CFU/day
Lactobacillus rhamnosus GG	10 billion CFU/day	**Bifidobacterium**	10 billion CFU/day	**Lactobacillus casei**	10 billion CFU/day
Lactobacillus plantarum 299v	10 billion CFU/day	**Lactobacillus plantarum**	10 billion CFU/day		

Suggestions

FOOD SOURCES

Fruits
Apples, Berries

Vegetables
Kimchi, Sauerkraut, Onion, Tempeh

Dairy
Kefir, Yogurt, Curd, Cheese

Fiber
Natto, Flaxseed, Green Tea

Animal Protein
Fish Oil

Nutrients

Nutrients are a diverse group of essential vitamins, minerals, and compounds designed to support fundamental cellular processes, energy production, and overall physiological function throughout the body. These agents work by serving as cofactors in enzymatic reactions, supporting cellular repair mechanisms, or providing building blocks for optimal metabolic function. Based on individual health assessments, this report provides recommendations for appropriate nutrient supplementation tailored to the specific deficiencies or requirements identified. These recommendations serve as guidance and must be reviewed with a qualified healthcare provider to ensure proper selection, dosage, and duration of supplementation. Responsible use of nutrients is essential to optimize absorption and utilization while preventing potential imbalances or toxicity.

SUPPLEMENTS

Omega-3 fatty acids	950 mg/day	**Vitamin D**	600 IU/day	**Coenzyme Q10**	100 mg/day
Vitamin E	22 IU/day	**Vitamin B2**	1.3 mg/day	**Selenium**	55 mcg/day
Vitamin B6	1.3 mg/day	**Iron**	8 mg/day	**Vitamin C**	90 mg/day
Vitamin B3	16 mg/day				

FOOD SOURCES

Fruits
Bananas, Citrus Fruits

Vegetables
Spinach, Potatos

Dairy
Milk, Cheese, Yogurt, Butter, Seafood, Eggs, Meat

Fiber
Whole Grains, Flaxseeds, Walnuts, Nuts, Seeds, Almonds, Brazil Nuts, Lentils

Animal Protein
Fatty Fish, Poultry, Organ Meats (heart, Liver), Eggs, Red Meat, Fish

Gut Zoomer - Summary

Suggestions

Botanicals

Botanicals are plant-derived compounds designed to support health and wellness through natural bioactive substances found in herbs, roots, leaves, and other plant materials. These agents work by providing phytochemicals that can modulate various physiological processes to promote optimal function, reduce inflammation, or support immune health. Based on individual health assessments, this report provides recommendations for appropriate botanical supplements tailored to the specific health concerns identified. These recommendations serve as guidance and must be reviewed with a qualified healthcare provider to ensure proper selection, dosage, and duration of use. Responsible use of botanicals is essential to optimize health benefits and minimize potential interactions or adverse effects.

SUPPLEMENTS

Berberine	900 mg/day	**Milk thistle**	450 mg/day	**Curcumin**	0.1 g/day
Artichoke extract	50 mg/day	**Enterolactone**	30 g/day	**Enterodiol**	2.3 mg/day
Pomegranate juice	125 ml/day	**Raspberry Extracts**	123 g/day	**Red wine polyphenols**	200 ml/day
Lemon peel waste oligosaccharides (LPOS)					

FOOD SOURCES

Fruits

Pomegranate, Raspberrry, Red Grapes

Vegetables

Goldenseal, Barberry, Oregon Grape, Tree Turmeric, Turmeric, Artichokes, Lemon

Fiber

Flaxseeds, Sesame Seeds, Whole Grains, Legumes, Milk Thistle Seeds

Gut Zoomer - All Markers

GUT PATHOGENS

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	1.1e3		≤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 O157	<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 Zoomer - All Markers

GUT PATHOGENS

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 Resistance Genes	Current	Previous	Antibiotic Resistance Genes	Current	Previous
Helicobacter - Clarithromycin	NOT DETECTED		Helicobacter - Fluoroquinolones	NOT DETECTED	
Fluoroquinolones	NOT DETECTED		Vancomycin	NOT DETECTED	
b-lactamase	NOT DETECTED		Macrolides	NOT DETECTED	
Tetracycline	NOT DETECTED		Aminoglycoside	NOT DETECTED	
Bactrim	NOT DETECTED		Carbapenem	NOT DETECTED	
Rifampin	NOT DETECTED		Polymyxins	NOT DETECTED	

Parasites - Helminths	Current	Previous	Parasites - Helminths	Current	Previous
Larval Nematode	NOT DETECTED		Taenia solium	NOT DETECTED	
Fasciola/Fasciolopsis	NOT DETECTED		Dipylidium caninum	NOT DETECTED	
Enterobius vermicularis	NOT DETECTED		Ancylostoma duodenale	NOT DETECTED	
Necator americanus	NOT DETECTED		Taenia spp.	NOT DETECTED	

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Gut Zoomer - All Markers

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	Result	Reference
Beta Defensin 2 (ng/mL)	83.1		0 34.9	≤34.9
Lysozyme (ng/mL)	500.5		0 575	≤575.0
MMP 9 (ng/mL)	0.3		0 0.2	≤0.2
S100A12 (mcg/ml)	27.6		0 50	≤50.0
Calprotectin (mcg/g)	0.6		0 50 119	≤50.0
Fecal Lactoferrin (mcg/ml)	2.6		0 6.4	≤6.4
Fecal Eosinophil Protein X (mcg/g)	1.4		0 4.8	≤4.8

DIGESTION AND IMMUNE BALANCE

Test Name	Current	Previous	Result	Reference
Pancreatic Elastase 1 (mcg/g)	265.6		0 100 199	≥200.0
Fecal Immunochemical Test (FIT) (mcg/g)	6.9		0 10	≤10.0
Fecal Zonulin (ng/mL)	104.2		0 25 160	25.1-160.8
pH	6.9		0 6 7.8	6.1-7.8
sIgA (mcg/g)	1029.2		0 425 1450	426.0-1450.0

GUT ANTIBODIES

Test Name	Current	Previous	Result	Reference
Lipopolysaccharide Antibody	6.3		0.1 10 20	≤10.0

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Gut Zoomer - All Markers

GUT ANTIBODIES

Test Name	Current	Previous	Result	Reference
Anti-Saccharomyces Cerevisiae Antibody	5.5		0.1 10 20	≤10.0
Tissue Transglutaminase	5.0		0.1 10 20	≤10.0
Deamidated Gliadin Peptide	2.8		0.1 10 20	≤10.0
Fecal Anti Gliadin	6.4		0.1 10 20	≤10.0
Actin Antibody	10.6		0.1 10 20	≤10.0

MALABSORPTION

DIETARY FIBER	Current	Previous	DIETARY FIBER	Current	Previous
Meat Fiber	NOT DETECTED		**Vegetable Fiber**	DETECTED	

FAT MALABSORPTION	Current	Previous	Result	Reference
Total Fecal Fat (mg/g)	28.9		0 2.8 37.5	2.9-37.5
Total Fecal Triglycerides (mg/g)	1.8		0 0.2 2.5	0.3-2.5
Long Chain Fatty Acids (mg/g)	18.5		0 0.8 28.1	0.9-28.1
Total Cholesterol (mg/g)	4.1		0 0.4 5.3	0.5-5.3
Total Phospholipids (mg/g)	1.0		0 0.2 6.4	0.3-6.4

Gut Neurotransmitters

Serotonergic Pathway	Current	Previous	Result	Reference
Serotonin (mcg/g)	96.11		0 51.1 127	51.2-127.9
5-HIAA (mcg/g)	6662.48		0 1710 9788	1711-9788
5-HTP (mcg/g)	84.94		0 11.3 185	11.4-185.6
Tryptophan (mg/g)	10.39		0 4.14 15.9	4.15-15.9

GABAergic Pathway	Current	Previous	Result	Reference
GABA (mcg/g)	213.01		0 170 375	170.1-375.8
Glutamate (mcg/g)	2887.38		0 1479 3566	1479.8-3566.9

Gut Zoomer - All Markers

Gut Neurotransmitters

Other Pathways	Current	Previous	Result	Reference
Glycine (mg/g)	164.33		0 54.7 175	54.8-175.3
Taurine (mg/g)	76.39		0 27.2 122	27.3-122.5
Acetylcholine (mcg/g)	1.73		0 1.69 5.9	1.7-5.9
Aspartate (mcg/g)	1800.72		0 900 3178	900.5-3178.7
Serine (mg/g)	30.32		0 13.6 40.9	13.7-40.9
Oxytocin (mcg/g)	459.97		0 250 705	250.1-705
Histaminergic Pathway	**Current**	**Previous**	**Result**	**Reference**
Histamine (mcg/g)	18.57		0 4.79 21.7	4.8-21.7
Dopaminergic Pathway	**Current**	**Previous**	**Result**	**Reference**
PEA (Phenylethylamine) (mcg/g)	7.47		0 4.09 22.4	4.1-22.4
Dopamine (mcg/g)	213.16		0 125 254	125.2-254.7
DOPAC (mcg/g)	2846.12		0 577 1655	577.3-1655.5
HVA (mcg/g)	7263.24		0 3534 8455	3535-8455
Normetanephrine (mcg/g)	31.22		0 14.9 36.7	15-36.7
VMA (mcg/g)	4306.63		0 2411 5047	2411.2-5047.8
3-MT (3-Methoxytyramine) (mcg/g)	32.32		0 13.5 35.2	13.6-35.2
Metanephrine (mcg/g)	82.94		0 40.5 127	40.6-127.8
Tyrosine (mcg/g)	7355.82		0 5010 1266	5011-12668
Tyramine (mcg/g)	447.77		0 200 457	200.1-457.2
L-DOPA (mcg/g)	812.00		0 0.09 855	0.1-855.8
HVA/VMA Ratio	1.69		0 0.73 1.88	0.74-1.88
HVA /DOPAC Ratio	2.55		0 2.59 8.3	2.6-8.3

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Gut Zoomer - All Markers

Gut Neurotransmitters

Tryptamine Pathway	Current	Previous	Result	Reference
Tryptamine (mcg/g)	56.75		0 15.7 115	15.8-115.7

Kynurenine Pathway	Current	Previous	Result	Reference
Xanthurenic acid (mg/g)	0.18		0 0.09 1.6	0.1-1.6
Quinolinic acid (mcg/g)	2200.23		0 610 2432	610.3-2432.9
Kynurenic acid (mcg/g)	583.35		0 125 991	125.6-991.3
Quinolinic Acid / 5-HIAA Ratio	0.33		0 0.31 1.1	0.32-1.1

GUT METABOLITES

BILE ACID METABOLITES	Current	Previous	Result	Reference
Cholic Acid (CA) (%)	0.07		0 0.36	≤0.36
Chenodeoxycholic Acid (CDCA) (%)	1.04		0 1.25	≤1.25
Deoxycholic Acid (DCA) (%)	49.71		0 24.2 75.8	24.25-75.84
Lithocholic Acid (LCA) (%)	39.20		0 24.1 75.7	24.16-75.75
LCA/DCA Ratio	0.79		0 0.31 3.38	0.32-3.38

SHORT CHAIN FATTY ACIDS	Current	Previous	Result	Reference
Acetate (%)	71.7		0 60.1 72.7	60.2-72.7
Propionate (%)	24.4		0 15.3 30.3	15.4-30.3
Butyrate (%)	1.1		0 5 12.4	5.1-12.4
Valerate (%)	1.8		0 0.7 3.5	0.8-3.5
Total Short Chain Fatty Acids (micromol/g)	30.6		0 45.3 210	45.4-210.1

ESTROGEN METABOLISM	Current	Previous	Result	Reference
ß-Glucuronidase (U/mL)	281		0 2300	≤2300.0

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Gut Zoomer - All Markers

Gut Commensals - Gut Microbiome

Test Name	Current	Previous	Result	Reference
Acinetobacter	12.9		0 – 20	≤20.0
Actinomyces	15.7		0.1 – 20	≤20.0
Akkermansia muciniphila	25.5		0 – 9.9	≥10.0
Alistipes	27.2		0.1 – 20	≤20.0
Alloprevotella	22.7		0 – 9.9	≥10.0
Atopobium	10.0		0 – 20	≤20.0
Atopobium parvulum	14.0		0 – 20	≤20.0
Bacillus subtilis	15.0		0 – 9.9	≥10.0
Bacteroidales	15.8		0 – 9.9 – 20	10.0-20.0
Bacteroides	15.2		0 – 9.9 – 20	10.0-20.0
Bacteroides caccae	14.8		0 – 20	≤20.0
Bacteroides vulgatus	24.9		0 – 9.9	≥10.0
Bifidobacterium	6.1		0 – 9.9	≥10.0
Bifidobacterium adolescentis	10.9		0 – 9.9 – 20	10.0-20.0
Bifidobacterium animalis	20.2		0 – 9.9	≥10.0
Bifidobacterium animalis subspecies lactis	16.5		0 – 9.9	≥10.0
Bifidobacterium catenulatum	17.8		0 – 9.9	≥10.0
Blautia	16.6		0 – 9.9 – 20	10.0-20.0
Blautia hydrogenotorophica	13.5		0 – 9.9 – 20	10.0-20.0
Bradyrhizobiaceae	12.9		0 – 20	≤20.0
Butyricimonas	18.6		0 – 9.9	≥10.0
Butyrivibrio	17.3		0 – 9.9	≥10.0
Catenibacterium	18.7		0 – 9.9	≥10.0

Gut Commensals - Gut Microbiome

Test Name	Current	Previous	Result	Reference
Christensenella minuta	16.5		0 9.9	≥10.0
Clostridia clusters IV	18.6		0 9.9	≥10.0
Clostridia clusters XIVa	23.6		0 9.9	≥10.0
Clostridia clusters XVIII	20.2		0 9.9	≥10.0
Clostridiales Family XIV Incertae Sedis	18.8		0 9.9	≥10.0
Clostridium	13.4		0 9.9 20	10.0-20.0
Clostridium hathewayi-	7.9		0 20	≤20.0
Clostridium ramosum	10.7		0 20	≤20.0
Clostridium symbiosum-	12.9		0 20	≤20.0
Clotridiales Incertae Sedis IV	15.2		0 20	≤20.0
Collinsella	12.2		0 20	≤20.0
Coprococcus	12.4		0 9.9 20	10.0-20.0
Desulfovibrio-	21.4		0 20	≤20.0
Desulfovibrio piger-	13.8		0 9.9 20	10.0-20.0
Dialister invisus-	14.4		0 9.9	≥10.0
Dorea	22.1		0 20	≤20.0
Eggerthella lenta	12.7		0 20	≤20.0
Enterobacter aerogenes-	11.8		0 20	≤20.0
Enterobacteria-	10.1		0 20	≤20.0
Enterobacteriaceae-	11.8		0 9.9 20	10.0-20.0
Enterococcus	14.2		0 9.9 20	10.0-20.0
Enterococcus gallinarum	11.5		0 20	≤20.0
Escherichia coli-	13.2		0 9.9 20	10.0-20.0

Gut Zoomer - All Markers

Gut Commensals - Gut Microbiome

Test Name	Current	Previous	Result	Reference
Eubacterium	19.0		0 9.9	≥10.0
Eubacterium rectale	16.5		0 9.9 20	10.0-20.0
Faecalibacterium prausnitzii	11.8		0 9.9 20	10.0-20.0
Fusobacterium-	14.0		0 9.9 20	10.0-20.0
Haemophilus-	24.8		0 9.9	≥10.0
Hafnia	18.5		0 9.9	≥10.0
Holdemania	13.8		0.1 20	≤20.0
Lachnospiraceae	14.9		0 9.9 20	10.0-20.0
Lactobacillaceae	12.1		0 20	≤20.0
Lactobacillus	11.5		0 9.9	≥10.0
Lactobacillus animalis	17.9		0 9.9	≥10.0
Lactobacillus ruminis	13.9		0 20	≤20.0
Lactobacillus sakei	17.8		0 9.9	≥10.0
Lactococcus	12.0		0.1 20	≤20.0
Leuconostoc	17.4		0 9.9	≥10.0
Marvinbryantia	16.2		0.1 20	≤20.0
Methanobrevibacter smithii	14.0		0 9.9 20	10.0-20.0
Mycoplana-	14.0		0 20	≤20.0
Oscillospira-	17.2		0 9.9	≥10.0
Parabacteroides	17.0		0 9.9	≥10.0
Pediococcus	29.3		0 9.9	≥10.0
Peptostreptococcus	19.0		0 9.9	≥10.0
Phascolarctobacterium-	16.8		0 9.9	≥10.0

Gut Zoomer - All Markers

Gut Commensals - Gut Microbiome

Test Name	Current	Previous	Result	Reference
Porphyromonas gingivalis-	12.1		0 20	≤20.0
Prevotella-	13.6		0 9.9 20	10.0-20.0
Prevotella copri-	25.5		0.1 20	≤20.0
Propionibacterium freudenreichii	18.9		0 9.9	≥10.0
Proteus mirabilis-	13.0		0 20	≤20.0
Pseudobutyrivibrio-	16.0		0 9.9	≥10.0
Pseudomonas-	12.9		0 20	≤20.0
Roseburia	23.0		0 9.9	≥10.0
Roseburia intestinalis	16.6		0 9.9 20	10.0-20.0
Ruminococcaceae	18.1		0 9.9 20	10.0-20.0
Ruminococcus	14.7		0 9.9 20	10.0-20.0
Ruminococcus bromii	16.7		0 9.9	≥10.0
Ruminococcus gnavus	13.9		0 9.9 20	10.0-20.0
Ruminococcus obeum	11.6		0 20	≤20.0
Solobacterium moorei	13.5		0 20	≤20.0
ß-Galactosidase producing bacteria	19.7		0 20	≤20.0
ß-Glucuronidase producing bacteria	19.0		0 20	≤20.0
Staphylococcaceae	11.5		0 20	≤20.0
Staphylococcus epidermidis	11.4		0 20	≤20.0
Staphylococcus pasteuri	13.8		0 20	≤20.0
Staphylococcus species	12.8		0 20	≤20.0
Tyzzerella	12.5		0 20	≤20.0
Tyzzerella 4	14.6		0 20	≤20.0

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Gut Commensals - Gut Microbiome

Test Name	Current	Previous	Result	Reference
Veillonella	13.9		0 9.9 20	10.0-20.0
Veillonellaceae	18.0		0 9.9	≥10.0

Gut Commensals - Probiotic Organisms

Test Name	Current	Previous	Result	Reference
Bacillus coagulans	16.6		0 9.9	≥10.0
Bifidobacterium bifidum	15.0		0 9.9	≥10.0
Bifidobacterium breve	16.6		0 9.9	≥10.0
Bifidobacterium dentium	13.5		0 9.9	≥10.0
Bifidobacterium infantis	19.9		0 9.9	≥10.0
Bifidobacterium longum	12.1		0 9.9	≥10.0
Escherichia coli Nissle	18.2		0 9.9	≥10.0
Lactobacillus acidophilus	20.8		0 9.9	≥10.0
Lactobacillus brevis	14.7		0 9.9	≥10.0
Lactobacillus bulgaricus	18.7		0 9.9	≥10.0
Lactobacillus casei	19.1		0 9.9	≥10.0
Lactobacillus fermentum	17.1		0 9.9	≥10.0
Lactobacillus paracasei	17.2		0 9.9	≥10.0
Lactobacillus plantarum	15.3		0 9.9	≥10.0
Lactobacillus reuteri	16.9		0 9.9	≥10.0
Lactobacillus rhamnosus	18.2		0 9.9	≥10.0
Lactobacillus rhamnosus GG	19.1		0 9.9	≥10.0
Lactobacillus salivarius	17.3		0 9.9	≥10.0
Saccharomyces boulardii	17.7		0 9.9	≥10.0

Patient Name: **DEMO DEMO**
Date of Birth: **11-12-1990** Accession ID: **2925884069**
Service Date: **2026-01-15 10:00 (PST)**

Gut Zoomer - All Markers

Gut Commensals - Probiotic Organisms

Test Name	Current	Previous	Result	Reference
Streptococcus	21.9			10.0-20.0
Streptococcus thermophilus	14.1			10.0-20.0

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This test is a laboratory-developed test (LDT) that has been designed, manufactured, validated and performed by Vibrant in accordance with applicable federal and state laboratory regulations. This test has not been reviewed or approved by the U.S. Food and Drug Administration (FDA). Certain individual analytes within this test may be measured using FDA approved assays.

The informational content (including summaries, descriptions, images, and other materials) included in this report is based on publicly available scientific literature and for informational purposes only. This content and test results do not replace medical advice from a qualified healthcare professional. Test results are intended for use by healthcare professionals and must be interpreted based on their knowledge of the patient's clinical history and presentation. Any wellness, nutritional, or dietary recommendations, diagnoses of medical conditions, or treatment decisions based on these results are made at the discretion and responsibility of the healthcare professional.

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Risk and Limitations

Results reflect biological and analytical findings at the time of specimen collection and may vary between individuals. Reference ranges for laboratory-developed tests (LDT) were established using a healthy adult population and may not be representative of other specific populations (e.g. pediatric, pregnant, individuals with chronic conditions or from all ethnic backgrounds). They do not provide absolute levels at which the symptoms may occur and hence clinical correlation by the provider is recommended.

Results may be affected by factors outside the control of Vibrant, including stool collection technique, storage prior to shipping, transport and timing of collection relative to diet, medication use, or supplementation. For stool-based testing, intermittent shedding of microorganisms that can also lead to variability between samples collected at different time points. Detection of microbial DNA or RNA depends on specimen integrity and may be impacted by sequence variability or genetic changes in target regions, potentially resulting in false negatives. Degradation or instability of extracted DNA may occur if specimens are not collected or transported according to recommended guidelines, potentially affecting result accuracy or leading to a Test Not Performed (TNP). In some TNP cases, repeat testing may be recommended when clinically appropriate, although repeat testing may still not yield a reportable result if the underlying limitations persist.

Results generated using laboratory testing methodologies are subject to inherent analytical limitations related to instrument performance, assay specifications of individual FDA-approved and laboratory-developed test (LDT) analytes included in the test panel, and methodological variability. As with all clinical laboratory testing, there is a small chance that the laboratory could report incorrect results.

The reported analytes and associated informational content are informed by scientific knowledge at the time of reporting, including peer-reviewed scientific publications, publicly available research, and guidance from recognized scientific and public health organizations. Interpretive content may be updated as scientific knowledge continues to evolve.

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