

FINAL REPORT

Accession ID: 2601066080

Date of Birth: 12-01-1994
Biological Sex: Female
Age: 31
Height:
Weight:
Fasting:

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Dubai 0000
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Provider Information

Practice Name: General Medicine
Provider Name: Volha Krasotskaya,
MD(30322)
Phlebotomist: 888888

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Report Information

Current Result Previous Result In Control Moderate Risk

Specimen Information

Sample Type	Collection Time	Received Time	Report	Final Report Date
Serum	Local 2026-01-07 03:00	2026-01-09 23:41 (+04)	Vibrant America - P2	2026-01-16 05:49 (+04)
EDTA	Local 2026-01-07 03:00	2026-01-09 23:41 (+04)		

Anemia

No markers are outside the normal reference range

Nutrition

Test Name	Current	Previous	Result	Reference
Vitamin D, 25-OH* (ng/mL)	29.8			30.0-108.0
Folate (ng/mL)	7.0			≥4.6
Vitamin B12 (pg/mL)	386			232.0-1245.0

Total IgA

No markers are outside the normal reference range

Celiac

Celiac HLA Genetics	Result	Potential Risk
DQ8 ^{1*}	POSITIVE	Patient is most likely to develop celiac disease.

Anemia

Test Name	Current	Previous	Result	Reference
Ferritin (ng/mL)	60		<div><div></div><div></div><div></div></div> <div>012150</div>	13.0-150.0
Iron (ug/dL)	66		<div><div></div><div></div><div></div></div> <div>036145</div>	37.0-145.0
UIBC (µg/dL)	200		<div><div></div><div></div><div></div></div> <div>0111347</div>	112.0-347.0
TIBC (µg/dL)	266		<div><div></div><div></div><div></div></div> <div>0148492</div>	149.0-492.0
Transferrin (mg/dL)	214		<div><div></div><div></div><div></div></div> <div>0202362</div>	203.0-362.0
Transferrin Saturation (%)	25		<div><div></div><div></div><div></div></div> <div>01145</div>	12.0-45.0

Nutrition

Test Name	Current	Previous	Result	Reference
Folate (ng/mL)	7.0		<div><div></div><div></div><div></div></div> <div>04.5</div>	≥4.6
Vitamin D, 25-OH* (ng/mL)	29.8		<div><div></div><div></div><div></div></div> <div>029.9108</div>	30.0-108.0
Vitamin B12 (pg/mL)	386		<div><div></div><div></div><div></div></div> <div>02311245</div>	232.0-1245.0

Total IgA

Test Name	Current	Previous	Result	Reference
Total IgA (mg/dL)	204		<div><div></div><div></div><div></div></div> <div>060356</div>	61.0-356.0

Celiac

Celiac & Gluten Sensitivity	Current	Previous	Result	Reference
Anti-tTG IgA*	0.70		<div><div></div><div></div><div></div></div> <div>00.941.05</div>	≤0.94
Anti-tTG IgG*	0.36		<div><div></div><div></div><div></div></div> <div>00.941.05</div>	≤0.94
Anti-DGP IgA*	0.36		<div><div></div><div></div><div></div></div> <div>00.941.05</div>	≤0.94
Anti-Gliadin IgG*	0.30		<div><div></div><div></div><div></div></div> <div>00.941.05</div>	≤0.94

Celiac HLA Genetics	Result	Potential Risk
DQ2 ^{1*}	NEGATIVE	Patient is unlikely to develop celiac disease.
DQ8 ^{1*}	POSITIVE	Patient is most likely to develop celiac disease.

Risk and Limitations

Test results reflect biological and analytical findings at the time of specimen collection and may vary between individuals. Reference ranges for most of 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 pre-analytical variables related to specimen collection, handling, transport, storage, and inherent biological variability. Specimens including urine, saliva, stool, and blood-based samples (serum, plasma, EDTA whole blood, TES, and dried blood spots) may be impacted by improper collection technique, contamination, insufficient sample volume, delayed shipment or processing, temperature excursions, or improper storage conditions. Additional factors such as hemolysis; anticoagulant effects; clotting, centrifugation, or mixing parameters; incomplete mixing with transport media; and variability in dried blood spot application or saturation may further affect analyte stability or result accuracy. Specimen-specific factors, including urine dilution or concentration, variability in saliva composition or flow rate, and intermittent microbial shedding in stool, may also contribute to result variability. These factors may impact result accuracy and, in some cases, lead to a Test Not Performed (TNP). When clinically appropriate, repeat testing may be recommended; however, repeat testing may still fail to produce a reportable result if the underlying limitations persist.

All laboratory testing methodologies are subject to inherent analytical limitations related to instrument performance, assay design, methodological variability, and the specifications of FDA-approved and laboratory-developed analytes included in a test panel. As with all clinical laboratory testing, there is a small possibility of incorrect results due to technical errors, sample misidentification, contamination, rare genetic variants, or software-related issues.

Genetic testing is helpful in analyzing risks to various diseases. However, it is important to note that genetic risk determinants are neither necessary nor sufficient for the development of disease. Environmental and lifestyle risk factors could also affect the risk of disease development. Genetic risk does not indicate how common a health condition or variant is within the population; a risk-associated variant may be common or uncommon. Interpretation of genetic results should consider individual health context, as population-based reference frameworks may not fully represent all age groups, ethnic backgrounds, or health profiles. Genetic testing evaluates only the genotypes indicated and does not assess other genetic abnormalities found elsewhere in the genome. Different laboratories may test different variants when evaluating genetic risk for a given condition; therefore, genetic risk results may not be directly comparable between laboratories.

Some individuals may experience anxiety related to their genetic test results. Vibrant encourages any concerned individual to consult with a qualified healthcare professional prior to sample collection for a genetic test. Users of the test are encouraged to discuss their test results with a genetic counselor, board-certified clinical molecular geneticist, or equivalent health care professional. In some cases, the identification of risk-associated genetic variants may prompt discussion with a healthcare provider about additional testing or follow-up.

The reported analytes, SNPs, 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. The informational content included in this report is derived from publicly available scientific literature and is provided for educational and informational purposes only. This content does not replace medical advice from a qualified healthcare professional. 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 ordering healthcare professional.

Vibrant does not diagnose, treat, or cure medical conditions and does not replace the care of a licensed medical practitioner or counselor, nor does Vibrant recommend self-diagnosis or self-medication. Depending on the nature of testing, individuals who receive moderate- or high-risk results may be advised to pursue confirmatory testing and appropriate medical follow-up. Vibrant assumes no liability for any loss, injury, or damages arising from the procurement, compilation, interpretation, delivery, or reporting of information contained in this report, nor from any decisions made or actions taken based on these results.

The supplement recommendations and dosage guidelines provided are intended for general informational purposes only and should not replace professional medical advice; final dosage decisions must be made in consultation with your healthcare provider.

