

Microdigestive Panel

Age 0	Sex M	Date of Birth	Accession # 500014	Test Code 6010
Date Co 12/3/	llected 2012	Date Received 12/3/2012	Date Reported 12/4/2012	
Comme	rits			1

Doctor Name and Address:	
Sample Report	
Fax:	
Phone:)

Test	Result	Abnormal Result	Normal Range
MICROSCOPIC EXAM			
Neutral Fats	3-8/HPF	Yes	0 - 7 /HPF
Starch	0-1 /HPF	Yes	0/HPF
Undigested Meat Fibers	0-1 /HPF	Yes	0 /HPF
Vegetable Fibers	4-10 /HPF	Yes	0 - 5 /HPF
WBC	3-5/HPF	Yes	0 - 3 /HPF
RBC	0-2/HPF	Yes	0 - 1 /HPF
Yeast	5-10/HPF	Yes	0 - 5 /HPF
Steatocrit	11.7%	Yes - High	0 - 8.8 %
COMMENTS:			
NEUTRAL FAT:	possible biliary tree blocka to food allergies. SUGGESTED FOLLOW-U replacement therapy challe	erit over 8.8% suggests pancrege, also found in patients with IP: Pancreatic sufficiency testinge. Food allergy (ELISA) teallergies. Repeat test on abn	rapid intestinal motility t, pancreatic enzyme st should also be
STARCH:	The presence of starch suggests pancreatic insufficiency or biliary tree blockage. SUGGESTED FOLLOW-UP: Pancreatic sufficiency test, pancreatic enzyme replacement.		
UNDIGESTED MEAT FIBERS:	If 0-2/HPF are seen, and there is no evidence of digestive difficulty, this may be normal. However, more than 2/HPF may be an indication of insufficient stomach HCL and pepsin production. This may interfere with proper protein breakdown in the gut. Decreased HCL secretion is associated with vitamin B12 deficiency. Decreased HCL also leads to an alkaline intestinal environment, which may result in bowel flora imbalance. SUGGESTED FOLLOW-UP: Heidelberg Capsule Gastric Analysis or Betaine HCL and Pepsin challenge.		
VEGETABLE FIBERS:	28 - 2 SECOND 28 - 22 - EAD € CONSUM	ncreatic enzyme deficiency. T	This may be due to eith

Patient Name: Doe, John

Accession #: 500014 Test ID 14513 Test Code: 6010

Test	Result	Abnormal Result	Normal Range	
	weak pancreas or an insuf signaling the pancreas to t	weak pancreas or an insufficient acid bolus of food entering the intestine and signaling the pancreas to turn on.		
	SUGGESTED FOLLOW-UP: Repeat microscopic exam for vegetable and fi remnants. Check results of meat fibers, digestion and pH. A qualitative test measures pancreatic sufficiency may be an option.			
RBC'S:	More than an occasional RBC suggests lower intestinal bleeding chemical irritation, ulceration or varcositus.			
	SUGGESTED FOLLOW-UP: Determine exact cause of increased RBCs.			
YEAST CELLS:	Over 5/HPF suggests a po microscopically is only sug by a culture if symptoms ar	ssible yeast infection. The pr gestive of a yeast infection an nd history agree.	esence of yeast cells ad must be confirmed	
	SUGGESTED FOLLOW-U infection.	IP: Culture for yeast to confir	m or rule out a yeast	
STEATOCRIT:	Over 7/HPF and/or steatoo possible biliary tree blocka motility due to food allergie	rit over 8.8% suggests pancre ge, also found in patients with s.	eatic insufficiency or rapid intestinal	
	replacement therapy challe	IP: Pancreatic sufficiency tesenge. Food allergy (ELISA) te allergies. Repeat test on abn	st should also be	