

UTI ZOOMER DEMO

Name: UTI ZOOMER DEMO
Date of Birth: 01-01-1111
Gender: Male
Age: 01
Height:
Weight:
Fasting: UNKNOWN

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

FINAL REPORT

Accession ID: 2406206035

Provider Information

Practice Name: DEMO CLIENT, MD
Provider Name: DEMO CLIENT, MD
Phlebotomist: 0

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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
Urine UTI	2024-03-21 01:00 (PST)	2024-03-22 15:42 (PST)	UTI Zoomer - P2	2024-07-17 14:28 (PST)
Urine Analysis	2024-03-21 01:00 (PST)	2024-03-22 15:42 (PST)	UTI Zoomer - P2	2024-07-17 14:28 (PST)



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TNP Test not performed

R&L Refer to risks and limitations at the end of report

Notes Refer to Lab notes at the end of the table

INTRODUCTION

Vibrant Wellness is pleased to present to you 'UTI Zoomer' testing to help you make healthy lifestyle choices in consultation with your physician and dietitian. It is intended to be used as a tool to encourage general healthy lifestyle choices. UTI Zoomer is a health analytics tool to help uncover potential underlying causes of chronic inflammation, metabolic and systemic conditions, kidney and bladder disorder, infections, and other health issues linked with Urinalysis and Urinary Tract Infections. It is intended to be used to improve multiple aspects of physical well-being where it is well understood as well as accepted that healthy lifestyle choices may play an important role in these health outcomes.

Methodology:

UTI Zoomer is split into two sections – Urinalysis and Urinary Tract Infections. Urinalysis is performed using FDA approved fully automated Siemens Clinitek Novus and Sysmex UF-5000 instruments. Urinary Tract Infections (UTI) and identification of associated resistance genes use real-time PCR assay designed for qualitative detection of group-specific DNA in clinical urine samples.

Interpretation of Report:

Urinary Tract Infections (UTI) pathogenic bacteria are indicated as DETECTED in Red or NOT DETECTED in Green. Antibiotic resistance genes are categorized based on Antibiotic Class, Drug, and Resistant Genes. Individual Resistance Genes are marked in Red if Detected or in Black if Not Detected. For Urinalysis, the classification of Green denotes a result that is within the normal reference range, the classification of Yellow denotes a result that is moderately elevated with respect to the reference range and the classification of Red denotes a result that is elevated with respect to the normal reference range. Supplement suggestions for Urinalysis and UTIs are provided in the summary section. Reference ranges have been established using results from 200 healthy individuals.

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 should 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 physician for medication, treatment, or lifestyle management. This product is not intended to diagnose, treat, or cure any disease.

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Please note:

Consider all supplements in relation to medical history and symptoms. Not all suggested supplements are appropriate in all individual cases. It is important that you discuss any modifications to your diet, exercise, and nutritional supplementation with your physician before making any changes. Pediatric ranges have not been established for these tests.

UTI

Test Name	Current	Previous	Test Name	Current	Previous
Candida glabrata	DETECTED		Escherichia coli	DETECTED	
Klebsiella oxytoca	DETECTED		Proteus mirabilis	DETECTED	
Pseudomonas aeruginosa	DETECTED		Staphylococcus aureus	DETECTED	
Staphylococcus xylosum	DETECTED		Streptococcus agalactiae (Group B Strep)	DETECTED	

Candida glabrata: Candida glabrata is a yeast species that frequently causes urinary tract infections, especially in immunocompromised patients or those with long-term catheterization. C. glabrata adheres to the urinary tract epithelium and can form biofilms, often exhibiting resistance to common antifungal treatments, making the infections challenging to manage.

Escherichia coli: E. coli is the most common cause of UTIs. This bacteria is normally found in the gastrointestinal tract but can enter the urinary tract through the urethra. Once in the bladder, E. coli can adhere to the bladder lining and multiply, leading to an infection. E. coli produces toxins and enzymes that can damage the bladder and urinary tract, causing inflammation, pain, and other symptoms of a UTI.

Klebsiella oxytoca: Klebsiella oxytoca is a bacterium known for causing urinary tract infections, especially in healthcare settings. After entering the urinary system, K. oxytoca adheres to the uroepithelium and multiplies, leading to infection characterized by pain and inflammation.

Proteus mirabilis: Proteus mirabilis is a bacteria that can cause UTIs, especially in individuals with urinary tract abnormalities or those who have recently undergone urinary procedures. This bacteria can produce enzymes that allow it to move up the urinary tract and reach the bladder, where it can cause inflammation and infection.

Pseudomonas aeruginosa: Pseudomonas aeruginosa is an opportunistic pathogen that can cause UTIs, particularly in individuals with compromised immune systems or those using urinary catheters. This bacteria can produce toxins and enzymes that damage the bladder and urinary tract, leading to infection.

Staphylococcus aureus: Staphylococcus aureus is a relatively uncommon cause of urinary tract infections in the general population but is more frequent among patients with urinary catheters. Most isolates are methicillin-resistant (MRSA), and S. aureus bacteriuria can lead to invasive infections, posing significant treatment challenges.

Staphylococcus xylosum: Staphylococcus xylosum is a bacteria that can cause UTIs, especially in young, sexually active women. This bacteria can adhere to the cells lining the urinary tract and produce enzymes that damage the bladder and urethra, leading to infection.

Streptococcus agalactiae (Group B Strep): Streptococcus agalactiae (Group B Strep) is a Gram-positive bacterium that can cause urinary tract infections, particularly in pregnant women, newborns, and immunocompromised individuals. It adheres to the urinary tract epithelium and multiplies, leading to infection and inflammation, often requiring antibiotic treatment to prevent complications.

Antibiotic Resistance Genes

Antibiotic Class	Drug	Resistant Genes
Aminoglycosides	Gentamicin, Tobramycin	aac(6')-Ib; aac(6')-Im
Beta Lactams	Amoxicillin, Piperacillin	blaCMY, blaCTX-M, blaTEM, SHV
Fluoroquinolone	Ciprofloxacin, Levofloxacin	qnrA, qnrB, qnrS
Fosfomycin	Fosfomycin	fosA3, fosA, fosA4, fosA5
Glycopeptides	Vancomycin, Teicoplanin	vanA, vanB, vanD
Macrolides (MLs-Groups)	Azithromycin, Clarithromycin	erm33; ermA; ermB; ermC; ermD; ermE; ermF; ermG; ermT; ermX, mefA, mphA, mphB, mphC, msrA, msrD
Nitrofurans	Nitrofurantoin	nfsA, nfsB
Polymyxins	Colistin	mcr-1; mcr-2; mcr-3; mcr-4; mcr-5; mcr-6; mcr-7; mcr-8; mcr-9

Antibiotic Resistance Genes

Antibiotic Class	Drug	Resistant Genes
Tetracyclines	Doxycycline, Minocycline	tetA, tetB, tetC, tetD, tetE, tetM, tetO, tetQ, tetS, tetT, tetW, tetX, tetY

Supplement Suggestion-UTI

Nutrients	Dosage	Purpose
Plant-based dietary product	8.5 g/day	Supplementation with the described plant-based dietary product for at least seven days increases urinary pH by providing alkalizing nutrients from ingredients like barley grass, wheat grass, and spirulina. The increased intake of these alkaline-forming foods helps neutralize acids in the body, leading to a more alkaline urinary environment. Additionally, the presence of bacterial cultures and fiber enhances gut health and promotes the excretion of acidic waste, further supporting an alkaline shift in urinary pH.
Probiotics	10-20 billion CFU/day	Probiotic supplements prevent Group B Streptococcus colonization by competing for adhesion sites on mucosal surfaces, producing antimicrobial substances like bacteriocins and acids, and modulating the host immune response to enhance pathogen clearance.
Leaves of Halodule pinifolia		Leaves of Halodule pinifolia exhibit growth inhibitory activity against UTI bacteria E. coli through the disruption of bacterial cell membrane integrity. The bioactive compounds in the leaves interact with the bacterial membrane, leading to leakage of intracellular contents and cell death. This antimicrobial effect effectively inhibits the growth of E. coli in urinary tract infections. The leaves of Halodule pinifolia exhibit growth inhibitory activity against UTI bacteria Proteus mirabilis by releasing bioactive compounds such as flavonoids and tannins. These compounds disrupt bacterial cell membranes, inhibit essential enzymatic pathways, and interfere with bacterial adhesion, thereby impeding growth and proliferation of P. mirabilis. This mechanism underscores the potential of H. pinifolia as a natural source of antimicrobial agents against urinary tract infections. The leaves of Halodule pinifolia exert growth inhibitory activity against Pseudomonas aeruginosa through the production of bioactive compounds that disrupt bacterial cell membrane integrity, leading to cell lysis and death.

Supplement Suggestion-UTI

Nutrients	Dosage	Purpose
Leaves of <i>Cymodocea rotundata</i>		<p>The leaves of <i>Cymodocea rotundata</i> exhibit growth inhibitory activity against <i>E. coli</i> through the production of antimicrobial compounds. These compounds disrupt bacterial cell wall synthesis and membrane integrity, leading to bacterial cell death and inhibition of UTI infection. The leaves of <i>Cymodocea rotundata</i> exhibit growth inhibitory activity against <i>Proteus mirabilis</i> through the disruption of bacterial cell wall synthesis. Bioactive compounds in the leaves interfere with essential enzymes, leading to impaired bacterial growth and increased susceptibility to environmental stressors. This mechanism effectively reduces UTI-related bacterial infection. Leaves of <i>Cymodocea rotundata</i> exhibit growth inhibitory activity against UTI bacteria <i>Pseudomonas aeruginosa</i> by disrupting bacterial cell membrane integrity, leading to increased permeability and leakage of cellular contents, which ultimately inhibits bacterial growth and proliferation.</p>
Alcoholic leaf extract of <i>Cassia sophera</i>	200 mg/kg/day	<p>The alcoholic leaf extract of <i>Cassia sophera</i> exhibits growth inhibitory activity against UTI-causing <i>E. coli</i> by disrupting bacterial cell walls and membranes, interfering with protein synthesis, and inducing oxidative stress, leading to bacterial cell death. The alcoholic leaf extract of <i>Cassia sophera</i> inhibits the growth of UTI-causing <i>Proteus mirabilis</i> by disrupting the bacterial cell membrane integrity, inhibiting urease enzyme activity crucial for its pathogenicity, and generating oxidative stress, ultimately leading to bacterial cell death. The alcoholic leaf extract of <i>Cassia sophera</i> inhibits the growth of UTI-causing <i>Pseudomonas aeruginosa</i> by compromising bacterial cell membrane integrity, interfering with quorum sensing mechanisms, and inducing oxidative stress, ultimately leading to bacterial cell death.</p>
D-mannose	2000 mg/day	<p>D-mannose inhibits the growth of UTI-causing <i>E. coli</i> by binding to the bacterial fimbriae, preventing their attachment to the urinary tract epithelium, and facilitating their expulsion through urine.</p>
Cranberries	1500 mg/day	<p>Cranberries inhibit the growth of <i>E. coli</i> in urinary tract infections by preventing bacterial adhesion to the urinary tract walls, reducing biofilm formation, and increasing the acidity of urine, which hampers bacterial survival.</p>
Coleus aromaticus (Mexican mint) essential oils		<p><i>Coleus aromaticus</i> (Mexican mint) essential oils inhibit growth of UTI bacteria <i>Klebsiella oxytoca</i> by disrupting bacterial cell membrane integrity, leading to leakage of cellular contents and eventual cell death. This is achieved through the action of bioactive compounds like carvacrol and thymol, which penetrate the bacterial membrane and interfere with essential cellular processes, inhibiting bacterial proliferation and survival.</p>

Supplement Suggestion-UTI

Nutrients	Dosage	Purpose
Ocimum sanctum (holy basil) essential oils	200 mg/kg/day	Ocimum sanctum (holy basil) essential oils exhibit growth inhibitory activity against Klebsiella oxytoca by disrupting the bacterial cell membrane integrity, leading to increased permeability and ultimately causing cell death.
Cashew (Anacardium occidentale L.) apple juice	100 g/day	Cashew (Anacardium occidentale L.) apple juice exhibits urobactericidal activity against Pseudomonas aeruginosa by inhibiting bacterial growth through the disruption of cell wall synthesis, interference with quorum sensing, and enhancement of the host immune response, effectively reducing the bacterial load in the urinary tract.
Niacin	16 mg/day	Niacin inhibits Candida glabrata colonization in urinary tract infections (UTIs) by enhancing host immune responses and disrupting fungal cell wall integrity. It modulates macrophage activity to enhance fungal clearance and induces oxidative stress within the fungal cells. Additionally, niacin interferes with biofilm formation, a key factor in Candida adherence and persistence.

Urinalysis

Test Name	Current	Previous	Reference	Test Name	Current	Previous	Reference
Bilirubin	3+		NEGATIVE	Clarity	CLOUDY		CLEAR
Glucose	2+		NEGATIVE	Ketone	1+		NEGATIVE

Bilirubin: There is no presence of bilirubin in normal urine. However, if the urine shows the presence of bilirubin it is indicative of liver dysfunction, biliary obstruction, congenital hyperbilirubinemia, viral or drug-induced hepatitis, or cirrhosis.

Clarity: Clarity in urinalysis refers to the transparency of the urine, which is often clear or translucent. Cloudiness may suggest the presence of microorganisms, blood clots, mucus, or crystals such as calcium phosphate or uric acid. Clarity testing is crucial because it can reveal information about possible infections, kidney stone formation, and other urinary tract pathological disorders.

Glucose: The presence of glucose in urine implies glycosuria, which can occur with diabetes, Cushing syndrome, or during pregnancy. Renal glycosuria, which is defined as glucose in urine despite normal blood glucose levels, may be caused by a mutation in the sodium-glucose associated transporter 2. False positives can result from ketones or levodopa, whereas false negatives can be impacted by factors such as higher specific gravity, high amounts of uric acid, or vitamin C.

Ketone: Ketones (ketone bodies), such as acetoacetic acid and acetone, found in urine indicate accelerated fat metabolism. This is critical in detecting illnesses like diabetic ketoacidosis, malnutrition, or specific diets.

Urinalysis

Test Name	Current	Previous	Reference	Test Name	Current	Previous	Reference
Leukocytes	3+		NEGATIVE	Nitrite	POSITIVE		NEGATIVE
Occult Blood	NHT		NEGATIVE	Protein	4+		NEGATIVE
Red Blood Cells (/HPF)	3.6		≤1.9	White Blood Cells (/HPF)	29.7		≤4.9

Leukocytes: Leukocytes in urinalysis serve as indicators of inflammation within the genitourinary tract. A positive leukocyte esterase test suggests the presence of leukocytes, indicating possible infection or inflammation such as UTIs, STIs, or other urinary tract conditions.

Nitrite: Nitrites in urinalysis indicate the presence of bacteria capable of reducing nitrates to nitrites, commonly associated with urinary tract infections (UTIs) caused by nitrate-reducing bacteria like E. coli. A positive nitrite test suggests bacterial infection, though false negatives can occur due to factors like acidic urine, recent vitamin C intake, or insufficient bladder rest.

Occult Blood: Occult blood in urine, which is not apparent to the human eye, can suggest underlying diseases such as urinary tract hemorrhage or renal disease.

Protein: Presence of high protein concentration in urine, is linked to various illnesses of the kidney and this condition is referred to as proteinuria.

Red Blood Cells: Presence of red blood cells in urine can indicate various conditions, including acute glomerulonephritis, stone disease, trauma, malignancy, or menstruation.

White Blood Cells: The presence of white blood cells (WBCs) in urine, also known as pyuria, is indicative of genitourinary inflammation. WBCs are detected to assess inflammation and infection in the urinary tract during urinalysis.

Supplement Suggestion-Urinalysis

Nutrients	Dosage	Purpose
Vitamin D	600 IU/day	Vitamin D supplements help prevent ketoacidosis by enhancing insulin sensitivity, which improves glucose metabolism and reduces ketone production. They also modulate the immune response, reducing inflammation and the risk of infections that can trigger ketoacidosis. Additionally, vitamin D supports pancreatic β -cell function, ensuring better insulin secretion and blood sugar regulation. Vitamin D supplements reduce hematuria by enhancing the integrity of renal epithelial cells, thereby strengthening the glomerular filtration barrier. This leads to decreased leakage of red blood cells into the urine. Additionally, vitamin D's anti-inflammatory properties reduce inflammation in the kidneys, further preventing hematuria. Vitamin D supplements reduce proteinuria by enhancing renal tubular reabsorption of proteins and decreasing glomerular permeability. This effect is mediated through the vitamin D receptor's regulation of calcium homeostasis and inflammatory responses. Additionally, vitamin D modulates renal cell function, improving overall kidney health and function. Vitamin D supplements reduce hematuria by enhancing the integrity of renal epithelial cells, thereby strengthening the glomerular filtration barrier. This leads to decreased leakage of red blood cells into the urine. Additionally, Vitamin D's anti-inflammatory properties reduce inflammation in the kidneys, further preventing hematuria.
Turmeric	250 mg/day	Turmeric supplements reduce hematuria primarily through the anti-inflammatory properties of curcumin, which alleviates inflammation in the urinary tract. Curcumin's antioxidant effects protect against oxidative damage to the renal tissues. Additionally, curcumin's antimicrobial properties can help address infections that may cause hematuria. Turmeric supplements reduce proteinuria primarily through their active compound curcumin, which exhibits anti-inflammatory and antioxidant properties. Curcumin inhibits nuclear factor-kappa B (NF- κ B) and reduces pro-inflammatory cytokines, thereby decreasing glomerular inflammation and damage. This protective effect on kidney tissues results in reduced leakage of proteins into the urine.
Vitamin C	90 mg/day	Vitamin C (ascorbic acid) reduces urinary nitrates by directly reacting with nitrite in the urine to form non-toxic compounds, thus reducing nitrite levels. This antioxidant effect minimizes the conversion of nitrates to nitrites, thereby lowering overall urinary nitrate levels. Additionally, vitamin C enhances the reduction of nitrate to nitrite within the body, leading to less nitrate excretion in urine. Vitamin C reduces urinary leukocytes by enhancing immune function and reducing oxidative stress, which lowers inflammation and urinary tract infections. It also acts as an antioxidant, protecting cells from damage and modulating the immune response. This leads to decreased leukocyte presence in the urine.

Supplement Suggestion-Urinalysis

Nutrients	Dosage	Purpose
Zinc	10 mg/day	Zinc supplements prevent hyperbilirubinemia by inducing the synthesis of metallothionein, a protein that binds and sequesters free bilirubin, reducing its levels in the blood. Zinc also inhibits heme oxygenase, the enzyme responsible for bilirubin production, thereby decreasing bilirubin formation. Furthermore, zinc enhances liver function and bilirubin conjugation, promoting its excretion from the body.
Cranberry extract	76 mg/day	Cranberry juice reduces pyuria by inhibiting bacterial adhesion to the urinary tract, due to its proanthocyanidins which prevent pathogens from sticking to the bladder wall. This lowers bacterial load and inflammation, leading to reduced pus formation in urine. Additionally, the juice's diuretic effect helps flush out bacteria and debris.
Anacardium occidentale (cashew)	350 mg/kg/day	Anacardium occidentale (cashew) prevents glycosuria by enhancing insulin secretion and improving tissue glucose uptake, lowering blood glucose levels. Its antioxidant properties protect pancreatic beta cells, maintaining insulin production. Additionally, it inhibits α -glucosidase, reducing carbohydrate digestion and absorption.

UTI					
Test Name	Current	Previous	Test Name	Current	Previous
Acinetobacter baumannii	NOT DETECTED		Candida albicans	NOT DETECTED	
Candida glabrata	DETECTED		Candida parapsilosis	NOT DETECTED	
Candida tropicalis	NOT DETECTED		Citrobacter freundii	NOT DETECTED	
Enterobacter cloacae complex	NOT DETECTED		Enterococcus faecalis	NOT DETECTED	
Enterococcus faecium	NOT DETECTED		Escherichia coli	DETECTED	
Klebsiella aerogenes (Enterobacter aerogenes)	NOT DETECTED		Klebsiella oxytoca	DETECTED	
Klebsiella pneumoniae	NOT DETECTED		Morganella morganii	NOT DETECTED	
Proteus mirabilis	DETECTED		Proteus vulgaris	NOT DETECTED	
Providencia stuartii	NOT DETECTED		Pseudomonas aeruginosa	DETECTED	
Staphylococcus aureus	DETECTED		Staphylococcus saprophyticus	NOT DETECTED	
Staphylococcus xylosus	DETECTED		Streptococcus agalactiae (Group B Strep)	DETECTED	

Antibiotic Resistance Genes

Antibiotic Class	Drug	Resistant Genes
Aminoglycosides	Gentamicin, Tobramycin	aac(6')-Ib; aac(6')-Im
Beta Lactams	Amoxicillin, Piperacillin	blaCMY, blaCTX-M, blaTEM, SHV
Fluoroquinolone	Ciprofloxacin, Levofloxacin	qnrA, qnrB, qnrS

Antibiotic Resistance Genes

Antibiotic Class	Drug	Resistant Genes
Fosfomycin	Fosfomycin	fosA3, fosA, fosA4, fosA5
Glycopeptides	Vancomycin, Teicoplanin	vanA, vanB, vanD
Macrolides (MLs-Groups)	Azithromycin, Clarithromycin	erm33; ermA; ermB; ermC; ermD; ermE; ermF; ermG; ermT; ermX, mefA, mphA, mphB, mphC, msrA, msrD
Nitrofurans	Nitrofurantoin	nfsA, nfsB
Polymyxins	Colistin	mcr-1; mcr-2; mcr-3; mcr-4; mcr-5; mcr-6; mcr-7; mcr-8; mcr-9
Tetracyclines	Doxycycline, Minocycline	tetA, tetB, tetC, tetD, tetE, tetM, tetO, tetQ, tetS, tetT, tetW, tetX, tetY

Urinalysis

Test Name	Current	Previous	Reference	Test Name	Current	Previous	Reference
Bilirubin	3+		NEGATIVE	Clarity	CLOUDY		CLEAR
Color	DARK YELLOW		DARK YELLOW	Epithelial Cells (/HPF)	2.1		≤3.9
Glucose	2+		NEGATIVE	Hyaline Casts (/LPF)	1.27		≤3.99
Ketone	1+		NEGATIVE	Leukocytes	3+		NEGATIVE

Urinalysis

Test Name	Current	Previous	Reference	Test Name	Current	Previous	Reference
Nitrite	POSITIVE		NEGATIVE	Occult Blood	NHT		NEGATIVE
pH	7.2		5.0-8.4	Protein	4+		NEGATIVE
Red Blood Cells (/HPF)	3.6		≤1.9	Specific Gravity	1.023		1.001-1.035
Urobilinogen (E.U./dL)	0.4		0.2-1.9	White Blood Cells (/HPF)	29.7		≤4.9

SAMPLE

Risk and Limitations

This test has been developed and its performance characteristics determined by Vibrant America, a CLIA and CAP certified lab and Vibrant Genomics, a CLIA and CAP certified lab. The UTI PCR assays have not been cleared or approved by the U.S. Food and Drug Administration. Urinalysis has been 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.

UTI Zoomer testing is performed at Vibrant America and Vibrant Genomics utilizing 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. 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 a genetic counselor. The suggested supplements and dosages in this report are based on current research and are not intended as medical advice. Individual needs may vary, and these suggestions should not replace professional medical guidance. Consult with a qualified healthcare provider before starting any new supplement regimen, especially if you have pre-existing health conditions or are taking medications. For specific scientific references supporting these suggestions, please contact our support team.

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 with questions regarding test results, or before beginning any course of supplementation, dietary or lifestyle changes.