



PATIENT REPORT



FOODPRINT[®]

Food IgG Antibody Test



Dear Sample Report,

Please find enclosed the Patient Report for your FoodPrint[®] IgG antibody test, which includes information about the specific food IgG antibodies detected in your blood sample and guidelines on how to make full use of the test results:

TEST REPORT

Two different types of Test Report are provided with every FoodPrint[®] IgG antibody test:

- 1) **Food Groups** – foods are listed according to their respective food group
- 2) **Order of Reactivity** – foods are ranked by strength of antibody reaction

A numerical value is displayed in a coloured box adjacent to each food, which represents the concentration of IgG antibodies detected for each food. Foods are categorised as **ELEVATED BORDERLINE** or **NORMAL**, depending on the antibody level detected.

PATIENT GUIDEBOOK

- ✓ Information about food intolerance and commonly used terminology
- ✓ How to interpret the test results
- ✓ How to plan your diet
- ✓ Monitoring symptoms, re-introducing foods and avoiding new food intolerances
- ✓ How to avoid dairy, eggs, wheat, gluten and yeast
- ✓ Frequently asked questions

Any change in diet or removal of certain foods/food groups needs to be carefully managed to ensure that essential nutrients are maintained. Information provided in the Patient Guidebook is for general use only. If in doubt, please seek advice from a qualified healthcare professional.

Please note: the FoodPrint[®] IgG antibody test does NOT test for **classical allergies**, which involve the production of IgE antibodies and cause rapid-onset of symptoms such as rashes, swelling, violent sickness, difficulty breathing and anaphylactic shock. **If you have a food allergy, it is important to continue avoiding that food, regardless of the test results obtained.** This advice also applies if you have been diagnosed with Coeliac disease or any other food related condition such as lactose intolerance.

If you would like further information or wish to discuss any matters raised in the Patient Report, please do not hesitate to contact CNS on 01353 863279.

Kind regards
Cambridge Nutritional Sciences

555-4-01



Test Report : Food Groups

Patient Name: Sample Report
Patient Number: 10000
Date of Birth: 01/01/2000

Analysis Date: 09/03/2017
Test Reference: 12345

ELEVATED (≥30 U/ml)	BORDERLINE (24-29 U/ml)	NORMAL (≤23 U/ml)
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DAIRY / EGG

84	Egg White	108	Milk (Cow)	60	Milk (Sheep)
22	Egg Yolk	63	Milk (Goat)		

GRAINS (Gluten-Containing)*

72	Barley	34	Oat	73	Wheat
52	Durum Wheat	25	Rye		
110	Gluten*	54	Spelt		

GRAINS (Gluten-Free)

1	Buckwheat	0	Millet
38	Corn (Maize)	29	Rice

FRUIT

3	Apple	2	Grapefruit	3	Peach
3	Avocado	0	Kiwi	3	Pear
0	Banana	3	Lemon	4	Pineapple
2	Blackberry	2	Melon (Galia/Honeydew)	1	Raspberry
5	Blackcurrant	0	Olive	2	Strawberry
5	Grape (Black/Red/White)	14	Orange		

VEGETABLES

4	Aubergine	2	Cauliflower	23	Pea
0	Bean (Green)	10	Celery	3	Pepper (Green/Red/Yellow)
19	Bean (White Haricot)	3	Cucumber	53	Potato
1	Beetroot	3	Leek	27	Soya Bean
5	Broccoli	5	Lentil	14	Tomato
15	Cabbage (Savoy/White)	2	Lettuce		
3	Carrot	3	Onion		

FISH / SEAFOOD

4	Cod	3	Lobster	14	Salmon
9	Crab	11	Mackerel	3	Shrimp/Prawn
1	Haddock	3	Mussel	18	Sole
4	Herring	6	Plaice	10	Tuna

MEAT

1	Beef	0	Lamb	3	Turkey
3	Chicken	2	Pork	2	Venison

HERBS / SPICES

3	Chilli (Red)	4	Ginger	0	Peppercorn (Black/White)
0	Garlic	7	Nutmeg	0	Vanilla

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NUTS / SEEDS

24	Almond	45	Hazelnut	18	Sunflower Seed
25	Brazil Nut	39	Peanut	7	Walnut
66	Cashew Nut	3	Rapeseed		
1	Coconut	0	Sesame Seed		

MISCELLANEOUS

3	Carob	24	Mushroom	59	Yeast (Brewer's)
3	Cocoa Bean	2	Tea (Black)		
2	Coffee	42	Yeast (Baker's)		

* Gluten is tested separately to the gluten-containing grains. If your Test Report shows an elevated reaction to gluten, it is important to eliminate consumption of foods that contain these grains, even if the grain results are not elevated. Please refer to the Patient Guidebook for further information.



Test Report : Order of Reactivity

Patient Name: Sample Report
Patient Number: 10000
Date of Birth: 01/01/2000

Analysis Date: 09/03/2017
Test Reference: 12345

ELEVATED FOODS (≥30 U/ml)

110	Gluten*	63	Milk (Goat)	45	Hazelnut
108	Milk (Cow)	60	Milk (Sheep)	42	Yeast (Baker's)
84	Egg White	59	Yeast (Brewer's)	39	Peanut
73	Wheat	54	Spelt	38	Corn (Maize)
72	Barley	53	Potato	34	Oat
66	Cashew Nut	52	Durum Wheat		

BORDERLINE FOODS (24-29 U/ml)

29	Rice	25	Brazil Nut	24	Almond
27	Soya Bean	25	Rye	24	Mushroom

NORMAL FOODS (≤23 U/ml)

23	Pea	4	Pineapple	2	Lettuce
22	Egg Yolk	3	Apple	2	Melon (Galia/Honeydew)
19	Bean (White Haricot)	3	Avocado	2	Pork
18	Sole	3	Carob	2	Strawberry
18	Sunflower Seed	3	Carrot	2	Tea (Black)
15	Cabbage (Savoy/White)	3	Chicken	2	Venison
14	Orange	3	Chilli (Red)	1	Beef
14	Salmon	3	Cocoa Bean	1	Beetroot
14	Tomato	3	Cucumber	1	Buckwheat
11	Mackerel	3	Leek	1	Coconut
10	Celery	3	Lemon	1	Haddock
10	Tuna	3	Lobster	1	Raspberry
9	Crab	3	Mussel	0	Banana
7	Nutmeg	3	Onion	0	Bean (Green)
7	Walnut	3	Peach	0	Garlic
6	Plaice	3	Pear	0	Kiwi
5	Blackcurrant	3	Pepper (Green/Red/Yellow)	0	Lamb
5	Broccoli	3	Rapeseed	0	Millet
5	Grape (Black/Red/White)	3	Shrimp/Prawn	0	Olive
5	Lentil	3	Turkey	0	Peppercorn (Black/White)
4	Aubergine	2	Blackberry	0	Sesame Seed
4	Cod	2	Cauliflower	0	Vanilla
4	Ginger	2	Coffee		
4	Herring	2	Grapefruit		

* Gluten is tested separately to the gluten-containing grains. If your Test Report shows an elevated reaction to gluten, it is important to eliminate consumption of foods that contain these grains, even if the grain results are not elevated. Please refer to the Patient Guidebook for further information.