PULS® CARDIAC TEST

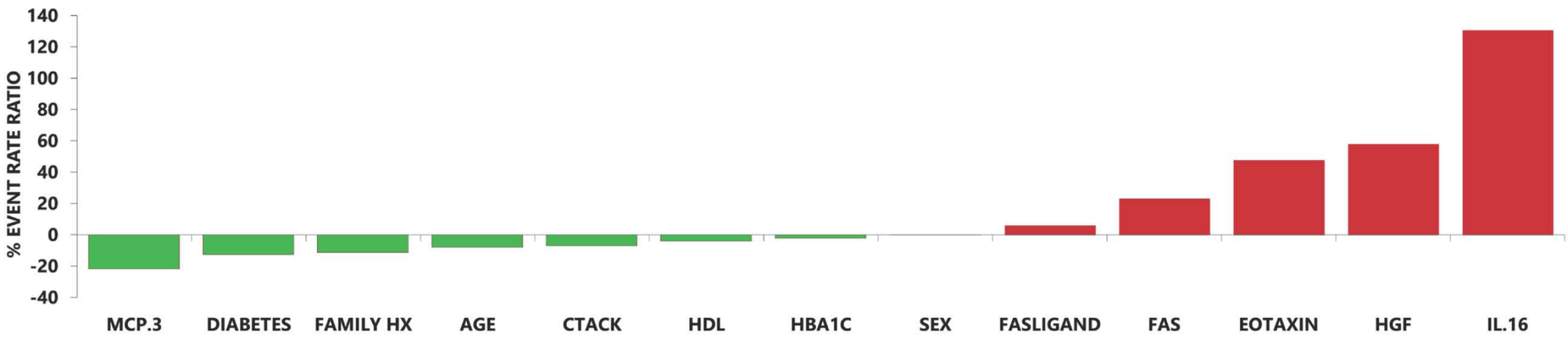
LifeLabs®

PATIENT INFORMATION	SPECIMEN INFORMATION	PRACTITIONER INFORMATION
Name	Collection Date/Time	Name Maximus, Paul
Age 55 Sex M	Received Date/Time	Client ID
DOB	Report Date/Time	Address
Accession ID	Report Status Final	

Patient Acute Coronary Syndrome (ACS) Profile is Elevated

TEST INTERPRETATION:

1. Your PULS score indicates that **13.85%** (Absolute Risk) of individuals of your age, sex, and score had a cardiac event within a 5 year time period. Your expected score of **2.18%** is where you should be according to your current age and sex.
2. Your PULS score indicates that you are **6.35** times (Relative Risk) more likely to experience an ACS (heart attack) than would be expected for your age and sex.
3. This PULS score classifies you at **High** Risk by AHA/ACC Cardiovascular Risk Guidelines.



GRAPH

Decreased event ratio Increased event ratio

The size and location of each bar on the Protein Biomarker Graph indicates the relative impact of each biomarker in the formation & progression of cardiac lesions. The chart is read from right to left. Red bars above the zero line indicate factors that increase the probability of experiencing an Acute Coronary Syndrome (ACS). Green bars below the zero line indicate factors that decrease your probability of experiencing an ACS.

PULS CARDIAC TEST				PULS EXPECTED SCORE GAP			
① PULS Score (Absolute Risk)	< 3.50%	3.50% - 7.49%	13.85 ≥ 7.50%	Expected Score For Age and Sex	2.18	② Score Gap (Relative Risk)	< 5 Times / 6.35 ≥ 5 Times
③ AHA/ACC Guidelines Class	High	This patient is at high risk and should be treated as such. A low threshold for additional testing should be applied to this patient to better define the clinical picture and treatment plan. Aggressive lifestyle modification, supplements, and or medication should be considered. If the clinical situation warrants it, and the patient is not currently under the care of a cardiologist, referral to a cardiologist might be warranted.					

The PULS™ Cardiac Test measures protein biomarkers of active Unstable Lesion formation and progression, produced by the pathways (chemotaxis, apoptosis, cell proliferation, inflammation & angiogenesis). An integrated score calculated in combination with established clinical risk factors demonstrates clinical utility that identifies the vulnerable patient and improves accuracy in cardiovascular risk classification that could lead to improved preventive care and fewer deaths. This document contains private and confidential healthcare information protected by federal and state law. If you receive this report in error, please call: (866) 299-8998. For more information about this test, please visit gdbiosciences.com.

METHODOLOGY: Chemiluminescent Immunoassay and Photometry

GD Biosciences is authorized under the Clinical Laboratory Improvement Amendments (CLIA) to develop and perform laboratory testing. This test was developed and its performance characteristics determined by GD Biosciences. The U.S. Food and Drug Administration (FDA) has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions.

PULS® CARDIAC TEST LifeLabs®

PATIENT INFORMATION		SPECIMEN INFORMATION	PRACTITIONER INFORMATION
Name		Collection Date/Time	Name Maximus, Paul
Age 55	Sex M	Received Date/Time	Client ID
DOB		Report Date/Time	Address
Accession ID		Report Status Final	

ABOUT THIS TEST

The PULS Cardiac Score quantifies endothelial damage and predicts the likelihood of Acute Coronary Syndrome (ACS-heart attack, unstable angina & sudden cardiac death) within 5 years. The PULS Cardiac test measures the body's immune response pathway of coronary endothelial damage causing the formation, progression & likelihood of cardiac lesion rupture that can lead to a heart attack.

PROTEIN RESULTS (RELATIVE % CONTRIBUTION TO THE PULS SCORE)

PULS Biomarker	Relation To Endothelial Damage & Unstable Cardiac Lesions	Normal	Borderline	Elevated
MEASURES IMMUNE FORMATION & FREE RADICAL DAMAGE				
IL-16	Signaling molecule that triggers the repair process; often associated with stress, obesity, and sleep apnea			130.62
MEASURES IMMUNE RESPONSE				
MCP-3	Recruits monocyte/macrophages that form foam cells to clean up damaged cells, lipids, and cellular debris	21.79		
Eotaxin	Recruits eosinophils that consume fibrin and facilitates repair			47.64
CTACK	Recruits T-cells that regulate the local inflammatory response at the site of a lesion	7.07		
MEASURES DISEASE PROGRESSION				
Fas	Soluble form prevents programmed cell death (apoptosis) - usually indicates healing			23.1
FasLigand	Initiates programmed cell death and recycling - associated with more acute processes		5.88	
HGF	Governs tissue remodeling & repair			57.83
MEASURES INSULIN SENSITIVITY				
HBA1c	Helps define insulin sensitivity and increased values indicate increased risk	5.4		

MEASURES METABOLIC RISK FACTOR		LOW	NORMAL
HDL	Helps remove damaged cholesterol and neutralizes free radicals		53

TEST COMMENTS

The PULS™ Cardiac Test measures protein biomarkers of active Unstable Lesion formation and progression, produced by the pathways (chemotaxis, apoptosis, cell proliferation, inflammation & angiogenesis). An integrated score calculated in combination with established clinical risk factors demonstrates clinical utility that identifies the vulnerable patient and improves accuracy in cardiovascular risk classification that could lead to improved preventive care and fewer deaths. This document contains private and confidential healthcare information protected by federal and state law. If you receive this report in error, please call: (866) 299-8998. For more information about this test, please visit gdbiosciences.com.

METHODOLOGY: Chemiluminescent Immunoassay and Photometry

GD Biosciences is authorized under the Clinical Laboratory Improvement Amendments (CLIA) to develop and perform laboratory testing. This test was developed and its performance characteristics determined by GD Biosciences. The U.S. Food and Drug Administration (FDA) has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions.

PULS® CARDIAC TEST

LifeLabs®

PATIENT INFORMATION	SPECIMEN INFORMATION	PRACTITIONER INFORMATION
Name	Collection Date/Time	Name Maximus, Paul
Age 55 Sex M	Received Date/Time	Client ID
DOB	Report Date/Time	Address
Accession ID	Report Status Final	

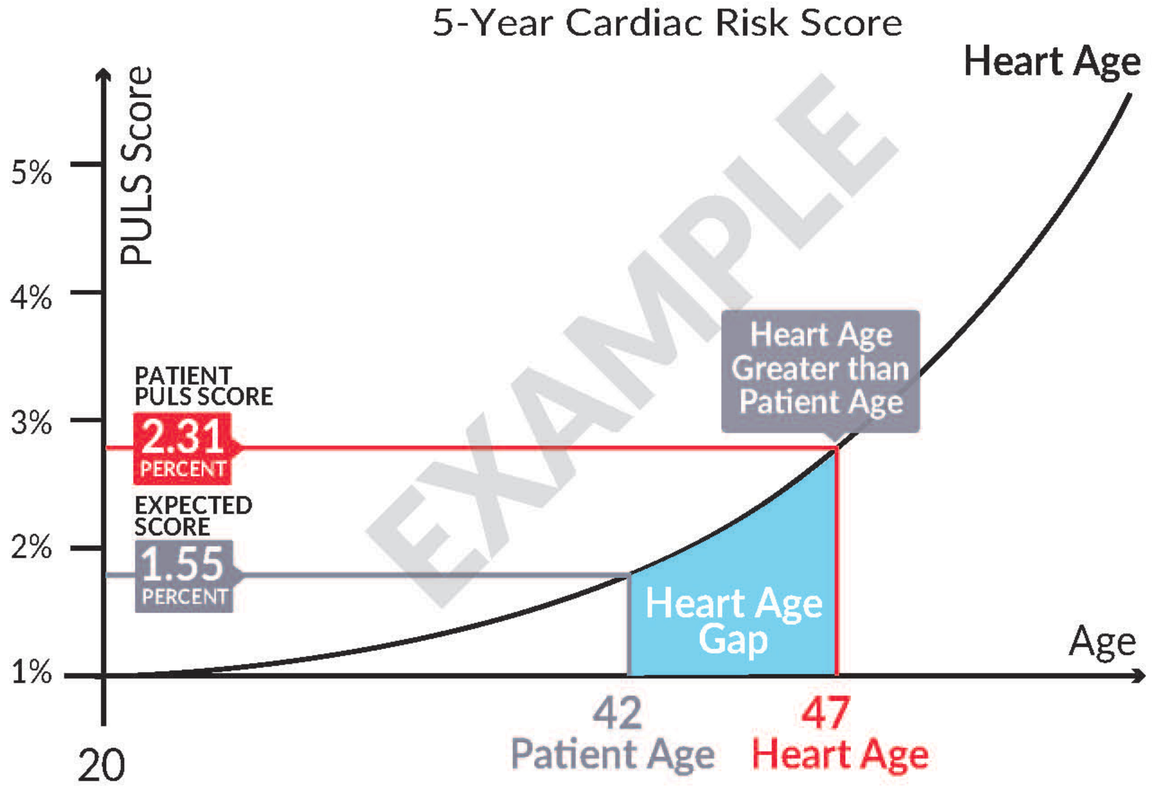
HEART AGE

Heart age is designed to give you an understanding of your heart health within a 5 year time frame. Your age has an expected risk score even if everything is normal. When your calculated PULS Cardiac Score is higher than your expected heart age, that means that your heart age is older than your current age.

Your Age	55
Your Calculated Heart Age	>80
Your Heart Age Difference	>25

HOW HEART AGE IS CALCULATED

5-Year Cardiac Risk Score



PULS CARDIAC SCORE SERIAL RESULTS

No prior results available for serial reporting.

The PULS™ Cardiac Test measures protein biomarkers of active Unstable Lesion formation and progression, produced by the pathways (chemotaxis, apoptosis, cell proliferation, inflammation & angiogenesis). An integrated score calculated in combination with established clinical risk factors demonstrates clinical utility that identifies the vulnerable patient and improves accuracy in cardiovascular risk classification that could lead to improved preventive care and fewer deaths. This document contains private and confidential healthcare information protected by federal and state law. If you receive this report in error, please call: (866) 299-8998. For more information about this test, please visit gdbiosciences.com.

METHODOLOGY: Chemiluminescent Immunoassay and Photometry

GD Biosciences is authorized under the Clinical Laboratory Improvement Amendments (CLIA) to develop and perform laboratory testing. This test was developed and its performance characteristics determined by GD Biosciences. The U.S. Food and Drug Administration (FDA) has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions.