

Patient	t Informa	ation:														Sampl	е Туре	: Blo	odspo	1	
Name:			LAST N	IAME,	FIRST	NAME							Date Dra	wn:		03/0	1/2025				
Date of	f Birth:		01/01/2	001									Date Co	mplete	d:	03/0	8/2025				
Access	ion Num	ber:	11111										Provider	: '		Prov	ider's I	Vame			
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Overvie	Overview of the Food Inflammation Test																				

The Food Inflammation Test (FIT Test) measures IgG and Complement reactions to 22 foods and additives which cause delayed food sensitivity. Food sensitivities begin when food antigens cross the gut epithelium and evoke an immune response leading to the production of IgG antibody and the formation of immune complexes which activate complement. In most cases immune complexes are cleared from the circulation and do not cause any symptoms. However in some people, the immune complexes may lead to various symptoms that can affect almost any tissue or organ. Adverse symptoms include: irritable bowel syndrome, joint pain, chronic headaches, migraines, fatigue, eczema and psoriasis to name a few. These symptoms generally occur days after the food is ingested which makes the offending food hard to identify without proper testing.

Many similar or even unrelated foods may share similar antigens (proteins) which results in cross-reactivity between foods. For example, sensitivity to white potato may result in sensitivity to red potato because these two foods are very similar. By contrast, two unrelated foods such as gluten from wheat and coffee may cross react because there are gluten-like antigens in coffee. This results from antibodies that are produced against antigens from one food which cross react with other foods containing similar antigens. The net result is that cross reactivity of food antigens may cause a person to test positive for a food that they have never consumed.



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This test was developed and its performance characteristics were determined by KBMO Diagnostics, LLC. It has not been cleared by the U.S. Food & Drug Administration (FDA).

Rev: 6.3



Gut Barrier Panel		Sample Type: Bloodspot				
Name:	LAST NAME, FIRST NAME	Date Drawn:	03/01/2025			
Date of Birth:	01/01/2001	Date Completed:	03/08/2025			
Accession Number:	11111	Provider:	Provider's Name			

Gut Barrier Panel

KBMO has created a unique Gut Barrier Panel which in recognition that leaky gut occurs across a spectrum we have included the following gatekeeper markers: Candida, Zonulin and Occludin and LPS. For each marker, we measure IgG 1-4 /C3d in addition to IgA 1 and 2.

Gut Barrier Panel									
		lgG1-4+C3d	lgA1-2						
		Cut off		Cut off					
Candida	Positive		Negative						
Zonulin	Negative		Negative						
Occludin	Negative		Negative						
LPS	Negative		Positive						

Candida:

we measure and use any candida overgrowth in the stomach/dysbiosis as a precursor to leaky gut occurrence

Zonulin:

Is a marker of intestinal permeability, otherwise known as leaky gut. If a patient has elevated Zonulin levels, the normal regulation of the tight junctions is compromised. This Zonulin marker is unique to KBMO please follow the link for more information: http://kbmodiagnostics.com/zonulin-test/

Occludin:

is a marker of tight junction stabilization and optimal barrier function. Elevated occludin indicates that the tight junctions are breaking down.

LPS:

Lipopolysaccharides (LPS) are a major structural component of the outer membrane of gram-negative bacteria. Elevated levels of antibody against LPS may be indicative of Leaky Gut Syndrome and other gastrointestinal inflammatory diseases. For more information on LPS, please visit the following link:

https://kbmodiagnostics.com/gut-barrier-panel/

GB Panel Interpretation:

If any of the 8 markers are positive, we recommend to consult your provider with regards to a gut healing protocol.

Laboratory Information:	
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