

Client:	Sample Report
DOB:	

Consult with a licensed healthcare professional before making changes based upon any information contained within this report. These recommendations and explanations are based upon clinical observation by Maximized Genetics, LLC and current medical research. These results are for educational purposes only and not intended to diagnose, treat or cure any disease or condition. The use of this test and its recommendations have not been approved by the FDA. Maximized Genetics, LLC and its staff are not responsible for how this test is used or any damages resulting from its use.



DNA

DNA can be described as your own personal cookbook. Full of recipes that create you as a human being, each page contains specific details about every cellular process in your body.

Genetic Basics Understanding Your Results

Proteins

Proteins are created by a series of amino acids that all code for specific functions in cells, tissues, and organs.

Variations

Variations (or single nucleotide polymorphism – SNP) in allele pairing create regulatory issues within the body. Variations can be considered slight changes to your ingredients in the recipe. When you inherit genes from your parents, your alleles may join in a specific pattern. We call these patterns wild type, heterozygous, and homozygous. Wild type simply means that the pairing is most commonly found in nature. Heterozygous means you have one variation from a parent (different alleles). Homozygous means you have two variations (the same allele) from both parents.

Epigenetics

Alleles are the nitrogenous bases: adenine (A), thymine (T), cytosine (C), and guanine

(G). When sequenced together correctly, they create the final product: proteins. Alleles also determine the visual expression of your genes. For example: curly hair, green eyes, etc. This is known as your phenotype. Epigenetics is the study of how the environment influences genetic expression. While we may have variations in our genetic code, our environment controls whether our genes are switched on or off. Our test does not account for environmental influences. We report genetic variations only. Work with a trained provider if you need help understanding the epigenetic influences.

Genes

Genes should be considered the recipes of your cookbook. Each recipe is designed to produce a fully functional product. In this case, your product is a protein. You inherit your genes from your parents. Your recipes need the appropriate ingredients. In this case, ingredients are called alleles.



YOUR GENETICS & VITAMIN B12

Do you get enough vitamin B12? Do you take the right form of B12? Since your body does not produce B12, it is important to make sure you get adequate amounts of it in the correct form. B12 is important for a number of processes in the body, especially the production of neurotransmitters, energy, and blood cells. People often feel better switching to the correct form of B12 based on genetics and/or increasing their consumption.

B12 BLOOD LEVELS

Many genes are associated with decreased blood B12 levels. Increasing supplementation or using dermal or injectable B12 can help bypass a possible genetic issue.

You tested for three of the five markers associated with low levels of Vitamin B12. Consider increasing supplementation and monitoring with labs with a trained practitioner.

YOUR RESULTS

METHYL-B12 NEED

Produced by the enzyme MTRR, Methylcobalamin is the main form of B12 used in the methylation cycle for detoxification and neurotransmitter production. It is more bioactive than other forms like cyanocobalamin.

You tested positive for one of the two markers that indicate additional supplementation of methyl-B12. Consider Methyl-B12 supplementation and homocysteine testing.

ADENOSYL-B12 NEED

Adenosylcobalamin is mainly used to produce energy within the mitochondria. Many people report increased energy with Adeno-B12 supplementation.

You tested positive for one of the three markers for considering supplementation with Adeno-B12. Consider annual Methylmalonic acid testing and additional Adenob12 supplementation.

METHYL-B12 SENSITIVITY

Some people report sensitivities to methylated B12, including increased aggression and hyperactivity. We can occasonally predict these sensitivities by looking at other mutations.

YOUR RESULTS

You tested for three of the six markers for methyl-B12 sensitivity. Hydroxy-B12 is a safer form and can be used in cases of methy-B12 sensitivity. LOW B12 SYMPTOMS

-FATIGUE -POOR BALANCE -MEMORY LOSS -NEUROPATHY -TINGLING FEET -DEPRESSION -ANXIEY -PALE SKIN -SMOOTH TONGUE -CONSTIPATION -DIARRHEA -HEART PALPITATIONS





YOUR GENETICS & FOLATE

Folate, or B9, is a vitamin required for numerous processes in the body. DNA replication, neurotransmitter production and degradation, detoxification, and prevention of cardiovascular disease are just a few. It is found naturally in uncooked leafy green vegetables.

FOLATE / MTHFR

The MTHFR enzyme processes folates into methyl-folate, crucial for methylation, DNA synthesis and numerous other processes in the body. Low levels of methylfolate have been associated with numerous symptoms and diseases. There are two main variants: C667T and A1298C.

Since MTHFR creates methylfolate, you can supplement with oral methylfolate. This can speed up the methylation cycle, returning detoxification and neurotransmitter production back to normal. This testing and approach has become common in fertility and psychiatric practices.

It is important to start slow and titrate up when using methyl folate. 400mcg is a common starting point for adults. Some research points to benefits from 400mcg to 15mg; however, many people do very well on doses under 2mg. Please see a licensed practitioner for help in determining folate need and dosage.

MTHFR

You have tested positive for one copy of the MTHFR C677T. This can result in up to a 40% decrease in conversion of dietary folate into Methyl-Folate. Consider Homocysteine or Methylation testing.

Avoiding synthetic folic acid and possibly supplementing with methyl-folate could potentially improve symptoms. Please discuss supplementation with a nutritionally trained practitioner.

YOUR RESULTS

METHYLFOLATE SENSITIVITY

Some people can be sensitive to methylfolate. In this case, different forms of vitamin B9 may be used. Consider folinic acid, and work with a practitioner to monitor progress.

You tested for three of the six markers for methyl-folate sensitivity. Folinic acid is a safer form and can be used in cases of methy-folate sensitivity. Please consult with a trained physician.

MTHFR SYMPTOMS

-DEPRESSION -ANXIETY -ADD/ADHD -MISCARRIAGE -CARDIOVASCULAR DISEASE -BLOOD CLOTS -BIPOLAR -SCHIZOPHRENIA -CANCER -MIDLINE DEFECTS -AND MORE

FOLLOW UP TESTING

You have tested as having potentially low levels of methyl folate. Homocysteine, RBC Folate, and SAM/SAH ratio tests might be ordred by your doctor to confirm.

You tested as having a homozygous mutation on one of the folate receptors. This can lead to low levels of folate inside the cell.

An RBC-Folate test can indicate low levels of folate inside your cells.





YOUR GENETICS, & VITAMIN A

Vitamin A is essential for proper vision, growth, immune function, and gut health. There are two types of vitamin A: retinoids and carotenoids. Carotenoids are found in orange plants, such as carrots, and are precursors to retinoids (the bioavailable form). Retinol is the active form that is required for health.

VITAMIN A / BCMO1

When most people think about increasing their vitamin A levels, they typically reach for a carrot or orange-colored vegetable. However, this is a carotenoid, not a retinoid or retinol. Our bodies have to convert carotenoids into retinoids by an enzyme called BCMO1. Some people have issues in BCMO1 that slow down their ability to form retinol from beta carotene. Your test checked for five different variations that might slow down retinal formation within your body. Consider working with a provider to monitor your blood retinol levels.

DIETARY SOURCES OF RETINOIDS

- Free range eggs - Organic Heavy Cream - Shrimp -Cod-liver oil Grass fed butter
Grass fed beef liver
Grass fed beef
Wild caught fatty fish

YOUR RESULTS

VITAMIN A

You tested for one of the five markers for having difficulty producing the active form of vitamin A. Retinal Palmitate might be beneficial.

LOW VITAMIN A SYMPTOMS

- VISION ISSUES - INFERTILITY - MOOD DISORDERS -SKIN PROBLEMS -THYROID DYSFUNCTION -GROWTH DELAYS -INFECTIONS

HIGH VITAMIN A SYMPTOMS

- HAIR LOSS -LIVER DAMAGE -MENTAL CONFUSION



VITAMIN A IS A FAT SOLUBLE VITAMIN AND THERE ARE STUDIES THAT SHOW EXCESSIVE INTAKE CAN LEAD TO TOXIC LEVELS. HIGH LEVELS OF RETINOL MIGHT CONTRIBUTE TO INCREASED LEVELS OF HEART DISEASE AND CANCER. PLEASE DISCUSS SUPPLEMENTATION WITH A TRAINED PROVIDER AND MONITOR BLOOD RETINOL LEVELS.





YOUR GENETICS, & INFLAMMATION

Inflammation is a natural part of our immune system that is used to protect us; however, it can become overactive. This increase in inflammation can cause many problems, such as cardiovascular, neurological, and autoimmune diseases. The Standard American Diet (SAD) is full of inflammatory foods and chemicals that add to this disease process. Your genes make you more susceptible to inflammation. Maintaining low levels of inflammation is the key to health.

ANTI-INFLAMMATORY FOODS

- Blueberries - Ginger/Turmeric - Dark Chocolate - Good fats
- Grass fed butter
 Free ranged eggs
 Grass fed beef
 Wild caught fatty fish

PRO-INFLAMMATORY FOODS

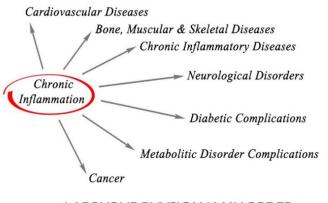
- Sugar - Vegetable oils - Fried foods - Wheat flour

- Dairy

- Bad fats - Processed meats - Traditionally raised meats - Fast foods - Trans fat

OTHER CAUSES OF INFLAMMATION

- Lack of sleep
 Lack of exercise
 Lack of rest
 Over training
- Poor gut health
 Infection
 Toxic exposures
 Food Sensitivities



LABS YOUR PHYSICAN MAY ORDER

HS-CRP: High Sensitive C-Reactive Protein ESR: Erythrocyte Sedimentation Rate TNF: Tumor Necrosis Factor PLA2: Phospholipase A2 Activity Test Omega 3/6 Ratios or Faty Acid Tests

YOUR RESULTS

GENERALIIZED INFLAMMATION

You tested negative for the marker for increased levels of inflammation. There may still be inflammation present.

ARACHIDONIC ACID

You tested as having higher levels of the proinflammatory fatty acid, arachidonic acid. Consider omega 3 supplementation and avoidance of high omega 6 containing foods,





YOUR GENETICS & DETOXIFICATION

Every day, we are exposed to hundreds of toxic chemicals in our environment. Our bodies also make toxic metabolic waste that has to be filtered hourly. Many of these pathways can be slowed down by different genetic variations. This section will break down some of these variations we have found in your sample.

INSECTICIDES

YOUR RESULTS ACETAMINOPHEN

Organophosphate insecticides are one of the most toxic substances on the planet. They can cause diarrhea, PDD, autism, depression, aggression, and other emotional conditions. Children exposed to these have twice the risk of autism and PDD. Children tend to be more susceptible to insecticides.

> You have tested as being overly sensitive to pesticides. Adherence to an organic diet and avoidance of pesticides and insecticides should be highly considered.

Due to the prevalence of acetaminophen use, knowing your genetic potential for toxic side effects is crucial. It has been associated with liver conditions, asthma, autism, GI issues, acidosis, blood cancers, and immune system depression. These are due to lowered glutathione levels and liver involvement.

You tested negative for having increased toxicity from acetaminophen use.

GLUTATHIONE

Glutathione is our master antioxidant and detoxifying molecule. Oxidative stress and toxic exposures can cause low levels of glutathione. Those with genetic predisposition to low levels may be more susceptible to the effects of environmental toxins. MTHFR and methylation SNPs can also affect glutathione levels

You tested as having normal potential glutathione levels.

ESTROGEN

In women, excessive levels of estrogen can lead to many conditions, including anxiety and even cancer. There are certain genetic situations that might limit someone's ability to remove estrogen from the body, which will increase estrogen levels.

ESTROGEN LEVELS

4-OH ESTRADIOL

You tested for three of the 4 markers associated with conditions in estrogen metabolism. Estrogen levels should be evaluated and appropriate medical intervention should be utilized. You have tested positive for a marker associated with increased 4-OH-Estradiol, a very reactive form of estrogen. It is recommended to evaluate 4-OH-Estradiol annually and appropriate medical intervention be utilized.



YOUR GENETIC SUMMARY

	B12 Levels:	You tested for three of the five markers associated with low levels of Vitamin B12. Consider increasing supplementation and monitoring with labs with a trained practitioner.
	Methyl-B12 Need:	You tested positive for one of the two markers that indicate additional supplementation of methyl- B12. Consider Methyl-B12 supplementation and homocysteine testing.
	Methy-B12 Sensitivity	You tested for three of the six markers for methyl-B12 sensitivity. Hydroxy-B12 is a safer form and can be used in cases of methy-B12 sensitivity.
Marke	Adeno-B12 Need	You tested positive for one of the three markers for considering supplementation with Adeno-B12. Consider annual Methylmalonic acid testing and additional Adeno-b12 supplementation.
Vitamin Markers	Vitamin A Levels:	You tested for one of the five markers for having difficulty producing the active form of vitamin A. Retinal Palmitate might be beneficial.
Ż	Vitamin D Levels:	You tested for two of three markers for low vitamin D. Consider testing both 25-OH Vitamin D and 1,25- OH Vitamin D with your PCP.
	MTHFR/Folate:	You have tested positive for one copy of the MTHFR C677T. This can result in up to a 40% decrease in conversion of dietary folate into Methyl-Folate. Consider Homocysteine or Methylation testing.
	Methyl-Folate Sensitivity	You tested for three of the six markers for methyl-folate sensitivity. Folinic acid is a safer form and can be used in cases of methy-folate sensitivity. Please consult with a trained physician.
istamine	Dietary Histamine:	You tested as having the slower form of the enzyme that breaks down dietary histamine. Common in allergies, anxiety, and migraine headaches, a low histamine/tyramine diet and supplementary DAO
Hista	Cellular Histamine:	You have tested negative for an issue associated with the enzyme that breaks down histamine,
tion	DHA Fish Oil:	You tested as having normal levels of the beneficial omega 3 fatty acid, DHA.
& Inflammation	Phos-Choline:	You tested as having normal levels of the beneficial lipid Phosphatidylcholine.
	Arachidonic Acid:	You tested as having higher levels of the pro-inflammatory fatty acid, arachidonic acid. Consider omega 3 supplementation and avoidance of high omega 6 containing foods, such as conventionally
	Inflammation:	You tested negative for the marker for increased levels of inflammation. There may still be inflammation present.
	Estrogen Levels:	You tested for three of the 4 markers associated with conditions in estrogen metabolism. Estrogen levels should be evaluated and appropriate medical intervention should be utilized.
snoa	Bad Estrogen:	You have tested positive for a marker associated with increased 4-OH-Estradiol, a very reactive form of estrogen. It is recommended to evaluate 4-OH-Estradiol annually and appropriate medical
Miscellaneous	Pesticide Sensitivity:	You have tested as being overly sensitive to pesticides. Adherence to an organic diet and avoidance of pesticides and insecticides should be highly considered.
Mis	Glutathione Need:	You tested as having normal potential glutathione levels.
	Probiotic:	Based on your genetic results, it is likely you might benefit from a probiotic containing the strains: Bifidobacterium infantis, Bifidobacterium longum and Lactobacillus plantarum.

SNP Report

Client:	0				
Gene	RS#	Result	Client	Minor	Short Description
APOE	rs429358	Wild Type	Т	С	If rs 7412 is T =E2 If rs74412 is C = E3 (normal)
APOE	rs7412	Wild Type	С	т	If rs429358 is C = E4 If rs 429358 is T = Normal
BCMO1	rs11645428	-+ Heterozygous	GA	А	Slight risk for low vitamin A levels.
BCMO1	rs12934922	++ Homozygous	Т	Т	Risk of low Vitamin A Levels. Retinal palmitate or acetate might benefit.
BCMO1	rs6564851	-+ Heterozygous	GT	G	Slight risk for low vitamin A levels.
BCMO1	rs7501331	Wild Type	С	t	Normal vitamin A levels.
BCMO1	rs6420424	-+ Heterozygous	GA	А	Slight risk for low vitamin A levels.
CBS	rs28934891	Wild Type	С	Т	normal
CBS	rs4920037	Wild Type	G	А	normal
CBS	rs2851391	-+ Heterozygous	СТ	Т	Possible slight reduction in CBS activity.
CBS 360	rs1801181	-+ Heterozygous	AG	А	Potentially a mild upregulation of CBS
CBS 699	rs234706	Wild Type	G	A	normal
COMT 61 P199P	rs769224	Wild Type	G	А	Normal COMT status
СОМТ Н62Н	rs4633	++ Homozygous	Т	Т	Possible down regulation of COMT. Mercury sensitive. Estrogen issue
COMT L136L	rs4818	Wild Type	С	G	Normal COMT status
COMT V158M	rs4680	++ Homozygous	A	A	Significant down regulation of COMT. Anxiety, etc. Estrogen issues.
DAOA/DAAO	rs3741775	Wild Type	А	С	Normal DAAO Enzyme
DAO (AOC1)	rs10156191	++ Homozygous	t	Т	Significantly reduced DAO enzyme activity, consider low histamine diet.
DHFR	rs1643649	-+ Heterozygous	СТ	С	Risk of low tetrahydrofolate. Avoid Bactrim ECGC, and grape seed extract.
FADS1	rs174548	Wild Type	С	G	no variant detected.
FADS1(MYRF)	rs174537	++ Homozygous	G	G	Increased levels of pro-inflammatory Arachidonic Acid. Limit Omega 6 intake.
FADS2	rs1535	-+ Heterozygous	GA	G	Possible low DHA levels, consider fish oil.
FOLR2	rs651933	++ Homozygous	А	A	Risk of low intracellular levels of folate. Avoid folic acid. (Mainly placenta)
FUT2	rs602662	++ Homozygous	А	A	Low serum b12 levels. This is the most severe of the 3 FUT mutations.
FUT2	rs492602	++ Homozygous	G	G	Low serum b12 levels. This is the least significant FUT2 SNP.
FUT2	rs601338	++ Homozygous	А	А	Low serum b12, Non-Secretor status. Nora virus immunity. Dysbiosis common.
G6PD	rs1050828	Wild Type	С	Т	no variant detected.
G6PD	rs1050829	Wild Type	Т	Α	no variant detected.
G6PD	rs5030868	Wild Type	G	А	no variant detected.
GPX1	rs1050450	-+ Heterozygous	GA	А	risk of low glutathione and elevated heavy metals.
GSTP1	rs1138272	Wild Type	С	Т	no variant detected.
GSTP1	rs1695	-+ Heterozygous	GA	G	Possible decrease in the ability to detox chemicals and heavy metals
HFE	rs1799945	-+ Heterozygous	CG	G	Carrier, likely unaffected
HFE	rs1800562	Wild Type	G	А	No variant detected. Increased risk of Iron anemia.
HFE	rs1800730	++ Homozygous	Т	Т	Hemochromatosis risk
LRRK2	rs34637584	Wild Type	G	А	no variant detected.
MAOA T1410C	rs1137070	++ Homozygous	Т	Т	Increased MAO Activity and associated with autism and depression.
MAOA	rs6323	++ Homozygous	G	G	Increased MAO activity and Serotonin clearance. ADHD risk. B2, Tyrosine, 5-htp
MAOA	rs72554632	++ Homozygous	t	Т	MAO deficiency. Pathogenic Abnormal behavior. Brunner syndrome.
МАОВ	rs1799836	Wild Type	Т	С	Linked to increased anger and Parkinson's disease risk.
MAT1A R264H	rs72558181	Wild Type	С	Т	no variant detected.
ММАВ	rs2287182	-+ Heterozygous	СТ	Т	Potential need for Adenosylcobalamin
MTHFS	rs6495446	-+ Heterozygous	СТ	Т	Possible mild folinic acid sensitivity.
MTHFD1	RS2236225	++ Homozygous	А	Α	Possibly low levels of 5,10 methylenetetrahydrofolate, MTHFR's substrate.

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MTHFR A1298C	rs1801131	Wild Type	Т	G	no variant detected.
MTHFR C677T	rs1801133	-+ Heterozygous	GA	А	40% reduction in enzyme activity. Consider methylfolate and methyl testing.
MTR	rs1805087	-+ Heterozygous	AG	G	Possible elevation in homocysteine.
MTRR	rs1801394	++ Homozygous	G	G	Reduced Levels of Methyl-B12 and increased homocysteine.
MTRR A66G	rs1532268	-+ Heterozygous	СТ	Т	possible low levels of methyl-b12 and elevated homocysteine
MUT	rs1141321	Wild Type	С	Т	no variant detected.
MUT	rs9369898	-+ Heterozygous	AG	G	Possible benefit to using Adeno-B12
NOS3	rs1799983	-+ Heterozygous	GT	Т	possible NO issue.
NOS3	rs2070744	-+ Heterozygous	СТ	Т	Conflicting studies.
NQ01	rs1800566	Wild Type	G	А	no variant detected.
PEMT	rs4244593	-+ Heterozygous	GT	Т	Possible low phosphatidylcholine levels. Consider supplementation.
PEMT	rs4646406	-+ Heterozygous	TA	А	Possible low phosphatidylcholine levels. Consider supplementation.
PEMT	rs7946	-+ Heterozygous	СТ	Т	Possible low phosphatidylcholine levels. Consider supplementation.
PON1 Q192R	rs662	++ Homozygous	С	С	Insecticide Sensitivity and increased artery disease. Increase olive oil use.
SHMT1	rs1979277	Wild Type	G	А	no variant detected.
SLC19A1	rs1051266	Wild Type	С	Т	no variant detected.
SOD1	rs2070424	Wild Type	А	G	normal levels of SOD1
SOD1	rs4998557	Wild Type	G	А	no variant detected.
SOD2	rs2758331	-+ Heterozygous	CA	А	possible increase in oxidative stress
SOD2	rs4880	-+ Heterozygous	AG	А	possible increase in oxidative stress
SOD3	rs1799895	Wild Type	С	G	normal levels of plasma SOD3
SUOX(A628C)	rs7297662	++ Homozygous	G	G	Sulfite oxidase deficiency. Consider molybdenum supplementation
SUOX(S370S)	rs773115	-+ Heterozygous	CG	G	Possible sulfite oxidase deficiency.
TCN1	rs526934	-+ Heterozygous	AG	G	Potentially low serum b12. Consider labs and supplementation
TCN2	rs1801198	-+ Heterozygous	GC	G	Potentially low serum b12. Consider labs and supplementation
TNF	rs1800629	Wild Type	G	А	no variant detected.
VDR TAQ	rs731236	++ Homozygous	G	G	Consider 1,25 and 25-Oh Vitamin D testing.
VDR-BSM	rs1544410	++ Homozygous	Т	Т	Low bone density and breast cancer risk factor. 25 and 1,25-OH Vit. D testing.
VDR-FOK	rs2228570	-+ Heterozygous	AG	А	Diabetes risk, consider monitoring 1,25 and 25-oh vitamin D.
Prothrombin (F2)	rs1799963	Wild Type	G	А	no variant detected.
HNMT	rs1050891	-+ Heterozygous	AG	G	Possible elevation in histamine.
AHCY-01	rs819147	Wild Type	Т	G	no variant detected.
Factor 5	rs6025	Wild Type	С	G	no variant detected.
CYP1B1 L432V	rs1056836	++ Homozygous	G	G	Breast cancer risks. Monitor 4-OH Estradiol. Lower prostate cancer risks.
CYP2E1 *5b	rs2031920	Wild Type	С	т	no variant detected.
CYP2E1 *6	rs6413432	Wild Type	т	А	no variant detected.
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Client: Your genotype.

Minor: The genotype that is found least in nature.

Wild Type: The genotype that is found most often in nature, this is reported as green. This isn't always ideal. Homozygous: This means you tested for both copies of the minor type allele. This typically has more severe issues. Heterozygous: This means you tested for one copy of the minor allele and one copy of the wild type allele. Gene: This is the specific gene we are looking at for variations.

RS#: This is the specific variation within the gene. There are multiple locations within a gene for potential variations, all of which can indicate a different issue or severity.

SNP Information		
APoE rs429358 Wild Type rs7412 Wild Type	The <u>APoE</u> gene codes for a protein responsible for moving cholesterol and fat around the body. Issues here can result in cardiovascular conditions and is a risk factor for Alzheimer's and dementia. APoE status is technically defined by these two SNPs, rs429358 and <u>rs7412</u> .	
	e1 = rs429358(C or +) & rs7412 (T or +) e2 = rs429358(T or -) & rs7412(T or +) e3 = rs429358(T or -) & rs7412(C or -) e4 = rs429358(C or +) & rs7412(C or -)	
	E1 is extremely rare. E2's have a greater risk for vascular disease and hyperlipoproteinemia, cholesterol and triglyceride levels can be 2x to 3x higher, and is implicated in Parkinson's disease. E2's tend to respond well to high carb, low fat diets. E3's is the neural type and is found in humans around 78% of the time. E4's is implicated in Alzheimer's disease, impaired cognitive function, reduced hippocampal volume within the brain, faster progression of MS and associated with higher levels of Vit. D. E4's tend to respond well to hormone replacement therapy and high carb, low fat diets. Discuss this mutation with your PCP or cardiologist.	
BCMO rs11645428 -+ Heterozygous rs12934922 ++ Homozygous rs6564851 -+ Heterozygous rs7501331 Wild Type rs6420424 -+ Heterozygous	beta-carotene oxygenase 1 The BCMO gene codes for the enzyme responsible for creating Vitamin A from dietary carotenoids. SNP's here can slow down the conversion of beta carotene from the diet into Vitamin A. These individuals can have low vitamin A levels while eating a diet rich in carotenoids. Interesting enough, this SNP can cause someone's skin to turn orange if they eat a large amount of beta carotene.	
	These SNPs may lead someone to needing Retinyl Palmitate to bypass this conversion problem. This becomes increasingly useful during times of sickness because of the necessity for vitamin A for the immune system. Discuss Vitamin A supplementation with your physician or nutritional consultant.	

CBS		
rs28934891	Wild Type	
rs4920037	Wild Type	
rs2851391	-+ Heterozygous	
rs1801181 (360)	-+ Heterozygous	
rs234706 (699)	Wild Type	

cystathionine beta-synthase

CBS is a gene that encodes the enzyme cystathionine beta-synthase, which is responsible for using vitamin B6 to convert the amino acids homocysteine and serine to cystathionine. Health conditions associated with this gene include homocystinuria. When homocysteine levels are affected, we see skeletal abnormalities, cognitive issues, eye problems, and abnormal blood clotting. It is important to get your homocysteine levels checked yearly, especially if this mutation is present. It is not a common practice for physicians to order homocysteine levels, so one must ask for it. Also, consider getting your B6 levels checked yearly.

CBS SNPs are typically considered to slow down the CBS enzyme, potentially causing elevated homocysteine and low levels of the master antioxidant glutathione. However, many consider RS1801181 (CBS 360) and RS234706 (CBS 699) to be up regulated SNPs. If CBS is truly upregulated it can cause excess ammonia levels and sulfite levels. Gut health becomes paramount in ammonia removal. Many products on the market are designed to increase butyrate within the colon. Butyrate helps remove ammonia from the body and is commonly assessed on extensive stool testing. As well in the case of a CBS upregulation, the neurotoxic chemical, sulfite can increase. Sulfite is broken down by the enzyme SUOX. Maximized Genetics is one of the only labs who look at SNPs within the SUOX gene. These SNPs could potential increased sulfite levels even further.

CBS upregulations is also clinically seen with toxic compounds and when the body's glutathione levels become low. Focusing on lowering toxin exposure and gut health should be highly considered.

CONT rs769224 -- Wild Type rs4633 ++ Homozygou: rs4818 -- Wild Type rs4680 ++ Homozygou:

COMT is a gene (with multiple forms) that codes for the enzyme catechol-Omethyltransferase, which is specifically used to break down neurotransmitters in the brain, kidneys, liver, and blood. These neurotransmitters play an important role in the pre-frontal cortex of the brain, where impulsivity, planning, short term memory, and emotions are controlled. Dopamine and norepinephrine levels are particularly affected by mutations in this gene.

Health concerns related to this gene mutation generally revolve around mental health disorders. Particularly, schizophrenia has been related to a mutation in the COMT V158M snp. Other disorders that may be related are bipolar disorder, eating disorders, OCD, panic disorders, and anxiety.

Research suggests that this gene can be used to choose various medications related to ADHD.

Pain response may also be related to this mutation.

If this gene mutation is present, note that stress is a driver for inflammation and disease. Work with your functional medicine practitioner to discuss lowering inflammation throughout the body by creating a healthy diet and lifestyle. Also, consider an organic acids test to look for neurotransmitter levels.

DAOA/DAAO rs3741775 Wild Type	DAO/DAAO (rs3741775) should not be confused the DAO(AOC1) gene. It is common amongst "genetic experts" and websites to get these confused. DAAO is D-Amino-Acid Oxidase and breaks down D-Amino acids, especially targeting D-Serine. The DAO(AOC1) enzyme targets extracellular histamine and is a completely different gene. The DAAO SNP is assumed to be an upregulation, meaning the enzyme is faster than normal. This creates an issue with lack of D-Serine. D-Serine is a NMDA receptor agonist and this SNP can result in a less NMDA activity which has been associated with schizophrenia. There can also be disruptions in glutamate receptor stimulation as well. And lastly, it's believed that SNPs here can potentially increase oxalate production. If symptoms of high oxalates are present you may want to consider a low oxalate diet. People with DAAO sometimes respond favorably to Piracetam (500mg 2x a day), Vitamin C, and SAMe. And once again, do not get this SNP confused with AOC1.
DAO(AOC1) rs10156191 ++ Homozygous	DAO/AOC1 is an enzyme that degrades extracellular histamine. The SNP tested is assumed to downregulate of the activity of DAO, per current research. This can result in increased levels of histamine and excess histamine symptoms. The DAO enzyme is commercially available for supplementation and should be considered if laboratory histamine ranges are elevated along with this SNP. DAO supplementation has the potential to created ammonia and hydrogen peroxide. Consider catalase and butyrate supplementation if this becomes a problem. DAO is a copper and B6 dependent enzyme so these should be evaluated as well. Finally, a low histamine diet should be discussed with a physician or nutritional expert.
DHFR rs1643649 -+ Heterozygous	Dihydrofolate reductase This gene mutation is associated with megaloblastic anemia, which can cause seizures and learning difficulties. Avoid the use of folic acid and the antibiotic Bactrim. Folinic acid can help bypass this enzyme SNP.
FADS1rs174548 Wild Typers174537++ Homozygousrs1535-+ Heterozygous	 FADS1 (rs174548, rs174537) This gene is used to create fatty acid unsaturation. If present, low levels of phosphatidylcholine may be present. Phosphatidylcholine is needed as a precursor to acetyl-choline, which is extremely important for neurological function. Choline, in general, is considered beneficial for memory, motivation, and muscle function. As an essential part of every cell membrane, people with this gene mutation may want to consider supplementation of phosphatidylcholine. A second FADS1 gene (rs174537) is considered crucial in heart disease. If this gene is present, avoid consumption of Omega 6 fatty acids, as they will increase inflammation. Examples of Omega 6 fatty acids include vegetable oils (canola, sunflower, soy, corn), and grains FADS2 (RS1535) This is a gene to create fatty acid unsaturation. It is associated with lower DHA (Omega 3) levels. It is also connected to higher IQ in breastfed babies and hyperactivity in children. If this gene mutation is present, consider taking a high quality fish oil, specifically DHA.

FOLR2 rs651933 ++ Homozygous	FOLR2 Folate receptor beta This gene codes folate receptors on the cell membrane. It has a high affinity for folic acid, which can block the reduction of bioavailable folate. Research is currently limited about this SNP, but some cite its association to neural tube defects, rheumatoid arthritis, and cerebral folate transport deficiency. FOL2 receptors are found in high quantity within the placenta.
FUT2 rs602662 ++ Homozygous rs492602 ++ Homozygous rs601338 ++ Homozygous	FUT2 fucosyltransferase 2 This gene is associated with vitamin B12 levels. When this mutation is present, a person may have a deficiency in B12. If a person specifically has a mutation in rs601338, he/she may be immune from Norovirus, but it creates potential gut dysbiosis. Consider B12 deficiency testing and supplementation with methylcobalamin.
G6PD rs1050828 Wild Type rs1050829 Wild Type rs5030868 Wild Type	<u>glucose-6-phosphate dehydrogenase</u> The enzyme that is encoded from this gene helps protect the red blood cell from oxidative stress. Mutations in this gene create glucose-6-phosphate dehydrogenase deficiency, which can lead to hemolytic anemia and/or neonatal jaundice. Fava beans and IV vitamin C and Hydrogen Peroxide (H202) need to be avoided with this mutation. Discuss this with your physician to see if certain medications will make this worse.
GPX1 rs1050450 -+ Heterozygous	glutathione peroxidase 1 With a mutation in this SNP, one has the potential for glutathione deficiency. Glutathione is protective against oxidative cellular damage, but when deficient, multiple diseases can occur. Research states that the following diseases can be linked to this gene mutation: brain tumors, breast cancer, osteoporosis, selenium deficiency induced osteoporosis, and cardiovascular risk
GSTP1 rs1138272 Wild Type rs1695 -+ Heterozygous	Glutathione S-Transferase Pi 1 is a gene responsible for the pi class of enzymes responsible for detoxification of xenobiotics in the body. With a mutation in this gene, a person may be more susceptible to cancers. Consider glutathione testing and supplementation.
HFE rs1799945 -+ Heterozygous rs1800562 Wild Type rs1800730 ++ Homozygous	This class of genes is responsible for hereditary hemochromatosis, which causes difficulty with iron metabolism. This gene creates hepcidin, which regulates iron. Symptoms of hemochromatosis include issues with joints, skin, liver, heart, thyroid, and reproductive organs. People with this gene mutation may not notice issues until their 40's or later. Check iron levels, liver enzymes, and other standard lab work on a regular basis.

LRRK2 rs34637584 Wild Type	This gene is associated with the development of Parkinson's. If this gene is present, research suggests a 15% chance of developing Parkinson's by age 60, 21% by age 70, and 32% chance by age 80. A high fat, low carb diet may provide some protection. We suggest getting nutrient levels tested on a yearly basis, and pay close attention to B-vitamin levels. Work with a provider who can come up with a specific diet plan, and order the Nutrigenomic Panel to understand other genetic risks involved.
MAO-A rs1137070 ++ Homozygous rs6323 ++ Homozygous rs72554632 ++ Homozygous MAO-B rs1799836 Wild Type	MAOA & MAOB Monoamine Oxidase A and B are enzymes involved in the breakdown of neurotransmitters (serotonin, dopamine, norepinephrine, etc.). When this gene mutation is present, a person may have monoamine oxidase deficiency (aka Brunner Syndrome), which causes a build of neurotransmitters in the brain. This can lead to symptoms such as impulsivity, aggression, depression, and other psychiatric issues. Considered a male issue, boys tend to be diagnosed as autistic or ADHD. Other concerns related to this gene mutation include weak muscles, repetitive hand movements, behavioral and/or developmental delays, and panic disorders (especially in females). Cheese appears to make symptoms worse. Research suggests that these genes may be connected to Parkinson's as well. If this gene mutation is present, consider organic acid testing, neurotransmitter testing, and nutrient deficiency testing on a yearly basis. The gut-brain axis needs to be monitored closely. We report the G allele for rs 6263 as the minor allele per dbsnp and the research we reviewed indicated the G allele as being the minor and more problematic allele (increases the MAO activity). This is a highly researched SNP and some other reporting and testing companies for some reason report the opposite for this SNP.
MAT1A rs72558181 Wild Type	Methionine Adenosyl transferase 1A gene mutations may create hypermethioninemia, a condition that can have significant neurological delays. Symptoms include muscle weakness, liver problems, delay in motor skills, and a cabbage smell from breath and sweat. With a mutation in this gene, diets high in protein cause a build up in the amino acid, methionine. Many people may not even realize they have this condition. Consider a lower protein diet as it relates to the rest of your genetic profile.
MMAB rs2287182 -+ Heterozygous	A gene mutation here causes methylmalonic academia, which is a condition that creates difficulty in breaking down proteins and lipids. Adenosylcobalamin is the active mitochondrial form of B12 needed to create the enzyme methylmalonyl CoA mutase. Motor and other developmental delays may be of immediate concern with this genetic mutation, and long term mitochondrial issues may occur. Consider taking Adenosylcobalamin for your B12 needs.
MTHFS rs6495446 -+ Heterozygous	Methenyltetrahydrofolate Synthetase People with this gene mutation should avoid folinic acid.

MTHED1 https://www.second.com/second/seco		
mithyleneternalydrofolate reductase TH801131 A1298C - Widf Type T1801131 A1298C - Widf Type T1801133 C6777 - Widf Type TH801173 C6777 - Widf Type The MTHFR gene is responsible for coding the enzyme that processes amino acids, namely homocysteine and methionine, through the conversion of various forms of folate (vitamin B9). Several conditions have been associated with mutations in the MTHFR gene is responsible for a sociated with mutations and their impact on disease. While one can find many associations between the gene and certain conditions, reproducibility of such research is virtually non-existent. When homocysteine levels are affected, we see skeletal abnormalities, cognitive issues, eye problems, and abnormal blood clotting. This alone may be attributed to a link between MTHFR and health conditions. It is important to get your homocysteine levels checked yearly, especially if this mutation san affect hundreds of chemical conversions throughout the body. Multiple nutrients are involved in this cycle, but close attention is given to Folate (B9). Cobalamin (B12), PSP (B6), and Riboflavin (B2). It is important to check nutrient status yearly as well. Work with a practitioner who is proficient in both serum and intracellular lab work. Currently, attention is given to He two main forms of MTHFR, 677 and 1298, with significantly more importance being placed on 677. There are many more forms of MTHFR, bave they are no clinical significance yet. The type of mutation, both by rsid and whether it is homozygous or heterozygous, determines the effects one has. However, keep in mind that a genetic mutation does not have to be present to have difficulities with m		synthetase 1 If a mutation in this gene is present, a person may have low serum levels of folate (vitamin B9). Folic acid should be avoided. Health risks include neural tube defects and colorectal
	rs1801131 A1298C Wild Type	 The MTHFR gene is responsible for coding the enzyme that processes amino acids, namely homocysteine and methionine, through the conversion of various forms of folate (vitamin B9). Several conditions have been associated with mutations in the MTHFR gene: homocystinuria, anencephaly, spina bifida, glaucoma, high blood pressure, heart disease, psychiatric disorders, and various cancers. Research in varied and conflicting as it relates to MTHFR mutations and their impact on disease. While one can find many associations between the gene and certain conditions, reproducibility of such research is virtually non-existent. When homocysteine levels are affected, we see skeletal abnormalities, cognitive issues, eye problems, and abnormal blood clotting. This alone may be attributed to a link between MTHFR and health conditions. It is important to get your homocysteine levels checked yearly, especially if this mutation is present. It is not a common practice for physicians to order homocysteine levels, so one must ask for it. As a part of the methylation cycle, MTHFR mutatitons can affect hundreds of chemical conversions throughout the body. Multiple nutrients are involved in this cycle, but close attention is given to Folate (B9), Cobalamin (B12), PSP (B6), and Riboflavin (B2). It is important to check nutrient status yearly as well. Work with a practitioner who is proficient in both serum and intracellular lab work. Currently, attention is given to the two main forms of MTHFR, 677 and 1298, with significantly more importance being placed on 677. There are many more forms of MTHFR, but they have no clinical significance yet. The type of mutation, both by rsid and whether it is homozygous or heterozygous, determines the effects one has. However, keep in mind that a genetic mutation does not have to be present to have difficulties with methylation or any named health condition. Attention must be given to diet and lifestyle, as well as environmental factors. If a MTHFR mu

MTR rs1805087 -+ Heterozygous	5-methyltetrahydrofolate-homocysteine methyltransferase This gene encodes for the enzyme, methionine synthase, which is needed for the metabolism of methionine, and amino acid. It requires the use of methylcobalamin (an active form of B12). This gene mutation can lead to homocystinuria. When homocysteine levels are affected, we see skeletal abnormalities, cognitive issues, eye problems, and abnormal blood clotting. It is important to get your homocysteine levels checked yearly, especially if this mutation is present. It is not a common practice for physicians to order homocysteine levels, so one must ask for it. This genetic mutation has also been suggested in Down Syndrome formation.
MTRR rs1801394 ++ Homozygous rs1532268 -+ Heterozygous	5-methyltetrahydrofolate-homocysteine methyltransferase reductase This gene encodes for the enzyme, methionine synthase reductase, which is needed for the metabolism of methionine synthase. This gene mutation can lead to homocystinuria. When homocysteine levels are affected, we see skeletal abnormalities, cognitive issues, eye problems, and abnormal blood clotting. It is important to get your homocysteine levels checked yearly, especially if this mutation is present. It is not a common practice for physicians to order homocysteine levels, so one must ask for it. This genetic mutation has also been suggested in Down Syndrome formation.
MUT rs1141321 Wild Type rs9369898 -+ Heterozygous	methylmalonyl CoA mutase This gene encodes for an enzyme that is responsible for breaking down lipids and proteins for energy use in the mitochondria. With a mutation here, methylmalonic acidemia is a concern. Symptoms occur in early infancy and include failure to thrive, lethargy, vomiting, weak muscle tone, and fatigue. If severe, survival expectation is low. Long term effects may be pancreatitis, kidney disease, and intellectual disabilities. Consult an expert geneticist for official diagnosis. MUT mutations can benefit from additional Adeno-B12.
NOS3 rs1799983 -+ Heterozygous rs2070744 -+ Heterozygous	Nitric Oxide Synthase 3 is an enzyme that allows for the production of nitric oxide from L- arginine. Nitric oxide is needed for vasodilation of arteria vessels and plays a major role in heart health. With this gene mutation, deficiencies in nitric oxide may be a concern. This can lead to ischemic stroke, myocardial infarction, essential hypertension, pre-eclampsia, and Alzheimer's. Consider getting your NO levels checked and/or supplement with L-arginine. Talk with your functional medicine provider before using supplementation. Be sure to have full cardiometabolic lab work done twice a year.
NQO1 rs1800566 Wild Type	NAD(P)H Quinone Dehydrogenase 1 Mutations in this gene have been associated with breast cancer, lung cancer, tardive dyskinesia, and Alzheimer's.

PEMT rs4244593 -+ Heterozygous rs4646406 -+ Heterozygous rs7946 -+ Heterozygous	Phosphatidylethanolamine N-Methyltransferase Mutations in this gene may lead to deficiencies in phosphatidylcholine, a phospholipid needed for cell membrane integrity. Health concerns related to this class of gene mutations include: endometriosis, orofacial clefts, and non-alcoholic fatty liver disease. Phosphatidylcholine is the precursor to Acetylcholine, a neurotransmitter responsible for memory formation. Clinically we have observed increased memory retention and function with Phosphatidylcholine supplementation with these SNPs. Discuss supplementation with your practitioner.
PON1 rs662 ++ Homozygous	paraoxonase 1 gene This gene allows for the breakdown of toxic chemicals, especially pesticides, medications, and heavy metals. Mutations in this gene allow for susceptibility to heart disease, diabetes, atherosclerosis, and pesticide poisoning. This is especially critical for microvascular issues related to eyesight in diabetes. Make sure you are choosing organic food sources and avoiding pesticide use. Some advanced labratories offer pesticide and environmental toxin testing.
SHMT rs1979277 Wild Type	Serine Hydroxymethyltransferase 1 RS1979277 SNPs can reduce the function by up to 50%. Research suggests this gene is associated with Adult Acute Lymphocytic Leukemia and cardiovascular disease. SNPs here can lower glycine levels in the body resulting in decreased glutathione and cartridge production. Consider increasing glycine containing foods. As well, this can SNP can increase Uracil levels and is potentially implicated in some cancers. B6 in the P-5-P form may be beneficial to helping SHMT function.
SLC19A1 rs1051266 Wild Type	This gene regulates the transport and levels of intracellular folate. Consider RBC folate testing and supplementation. This gene is associated with methotrexate metabolism difficulty and colorectal cancer. Synthetic Folic acid should be avoided.
SOD1 rs2070424 Wild Type rs4998557 Wild Type	superoxide dismutase 1 This gene encodes for superoxide dismutase, and enzyme that binds with copper and zinc to break down free radicles. Mutations in this gene are associated with amyotrophic lateral sclerosis (ALS), which is a disease characterized by muscle weakness and wasting. It is thought that this mutation increases the chance of oxidative stress on the motor neuron.
SOD2 rs2758331 -+ Heterozygous rs4880 -+ Heterozygous	Superoxide dismutase 2 Mutations of this gene have been linked to idiopathic cardiomyopathy, premature aging, cancer, and sporadic motor neuron disease. Consider SOD supplementation.
SOD3 rs1799895 Wild Type	Superoxide dismutase 3 This gene is associated with riding the body of free radicals and oxidative stress; however, this mutation is linked to an increase of oxidative stress. This gene mutation is associated with copper and folate pathways. Consider SOD supplementation.

SUOX rs7297662 ++ Homozygous rs773115 -+ Heterozygous	Sulfite oxidase This gene encodes for an enzyme that is needed in the final stages of degradations of sulfur containing amino acids, cysteine and methionine. Specifically the degradation of Sulfite into sulfate. Mutations in this gene are linked to early childhood neurological conditions, especially seizures and sulfite sensitivities. Consider molybdenum supplementation to help improve SUOX activity.
TCN1/2 rs526934 -+ Heterozygous rs1801198 -+ Heterozygous	Transcobalamin 1 This gene is necessary for the transportation of vitamin B12. With a mutation here, consider testing and supplementation with methylcobalamin. Research suggests difficulty with digestion and stomach acid. With a mutation in this gene, B12 levels may be low. Peripheral neuropathy is common with this deficiency. Consider intracellular nutrient testing and B12 supplementation.
TNF rs1800629 Wild Type	Tumor necrosis factor This gene is responsible for creating a pro-inflammatory cytokine that has a number of duties, including cell proliferation and differentiation, apoptosis, and lipid metabolism. A mutation here can lead to cancer, autoimmune disease, and insulin resistance. It has been specifically connected to rheumatoid arthritis, juvenile idiopathic arthritis, migraines, asthma, and narcolepsy. Follow a low-inflammatory diet and work with a functional medicine provider to reduce autoimmune chances.
VDR rs731236 ++ Homozygous rs1544410 ++ Homozygous rs2228570 -+ Heterozygous	VDR This gene encodes for the receptor site of vitamin D, which is responsible for regulating calcium and phosphate. Health concerns that are directly connected to a mutation in this gene include intervertebral disc disease and rickets. Consider testing vitamin D levels and supplementation of D3.
Prothrombin rs1799963 Wild Type	Coagulation factor II, thrombin This gene is needed for proper blood coagulation. Mutations in this gene lead to an increase of thrombosis, loss of pregnancy, and cerebral stroke. Follow an anti-inflammatory, Mediterranean Diet. Discuss testing options with your physician.
HNMT rs1050891 -+ Heterozygous	Histamine N-Methyltransferase This gene encodes for the enzyme histamine n-methyltransferase, which is found in cytosol and uses a major methyl donor. In the brain, histamine is a major neurotransmitter, and in the gut is controlled by DAO. Health conditions associated with a mutation in this gene include asthma and mental retardation. In ADHD children, certain food additives can be troublesome, including all food dyes and sodium benzoate.

AHCY-01 rs819147 Wild Type	Adenosylhomocysteinase This enzyme is responsible for the breakdown of the amino acid, methionine. Health risk with this gene mutation is hypermethioninemia, which is associated with a short stature, low homocysteine, and low glutathione. Consider testing.
Factor 5 rs6025 Wild Type	Factor 5 Mutation in this gene leads to possible venous thromboembolism. Warning: tamoxifen used for breast cancer treatment in a female with this gene mutation may lead to thromboembolism.
CYP1b1 rs1056836 ++ Homozygous	Cytochrome P450 family 1 subfamily B member 1 This gene encodes for an enzyme that is responsible for detoxing drugs and fats. Mutations in this gene may lead to early onset glaucoma. Estrogen is also broken down by this enzyme. RS1056836, when ++ is an upregulation of it's ability to produce the estrogen metabolite 4-oh-E2. This metabolite is associated with breast cancer. Discuses having a 4-oh-E2 level checked.
CYP2E1 rs2031920 (*5b) Wild Type rs6413432 (*6) Wild Type	Cytochrome P450 family 2 subfamily E member 1. This gene encodes for an enzyme that is responsible for detoxifying drungs like acetaminophen (Tylenol), ethanol, chlorzoxazone, and sevoflurane. These two SNPs, *5b and *6, increase the activity of the CYP2E1 enzyme. This enzyme speeds up conversion of acetaminophen into a toxic metabolite, NAPQI. Numerous studies show the connection between acetaminophen and liver damage, mitochondrial conditions, depletion of glutathione, neuronal death, ADHD, asthma, autism, kidney failure, gastroschisis, blood cancers, and numerous other conditions. Based upon current research, acetaminophen should be used with caution. Persons with these two mutations, could be at increased risk for oxidative/toxic damage from acetaminophen.

Client: Your genotype.

Minor: The genotype that is found least in nature.

Wild Type: The genotype that is found most often in nature, this is reported as green.

Homozygous: This means you tested for both copies of the minor type allele. This typically has more severe issues.

Heterozygous: This means you tested for one copy of the minor allele and one copy of the wild type allele.

Gene: This is the specific gene we are looking at for variations.

RS#: This is the specific variation within the gene. There are multiple locations within a gene for potential variations, all of which can indicate a different issue or severity.

Disclaimer: This test was developed by Maximized Genetics, LLC and has not been approved by the FDA. It is not intended to diagnose, treat, cure or prevent disease. This test should be considered for educational purposes only. Do not make decisions about your health without discussing it with a licensed practitioner. The information contained within the report does not consider other genetic variations or environmental factors that might contribute to someone's phenotype or symptoms. This test does not analyze all variations within a gene that someone might carry. The rs#'s contained within the report were picked from scientific literature, multiple physician colaborations, and clinical observation by Maximized Genetics and are subject to change at any time.