

Tests Still To Be Done

14 tests remaining | Bring this to your doctor

Patient: Jim Gurtner | DOB: 11/6/1961 | Age: 64 | Vegan
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DISCLAIMER: This document is for personal informational purposes only. It is not medical advice. Review all findings with qualified healthcare providers.

14 Tests Pending

These are tests still recommended but not yet completed. Print or share this list with your healthcare provider to schedule.

CIRS Panel (C4a, MMP-9, VEGF, MSH, TGF-b1, VIP)

Pending **Priority: critical**

Category: CIRS
Why: THE single most important outstanding test. Last tested 2018 - VEGF was critically low at 11, MMP-9 2x normal, C4a elevated. CIRS is the root cause driving hormonal collapse (DHEA-S crash), low leptin, and chronic inflammation. Cannot advance Shoemaker protocol without current markers.
Reference: C4a: <2830 | MMP-9: <332 | VEGF: 31-86 | MSH: 35-81
Linked: cirs, hormones

**** ORDER DIRECTLY (no doctor needed):**

True Health Labs

<https://truehealthlabs.com/chronic-inflammatory-response-syndrome-cirs/>

Direct-to-consumer Shoemaker panel. Includes MMP-9, TGF-b1, C4a, VEGF, MSH (VIP optional add-on). Self-pay, blood draw at any LabCorp/Quest location nationwide.

TIP: Take the free/low-cost VCS visual screening test first at survivingmold.com/store/online-vcs-screening (~\$15). If VCS is normal, CIRS is unlikely (~92% negative predictive value) and you can skip the \$400+ blood panel.

Repeat GI-MAP (or Genova GI Effects)

Pending **Priority: critical**

Category: GI
Why: 2020 GI-MAP showed major dysbiosis: H. pylori with antibiotic resistance, Clostridia 20x overgrown, Geotrichum (fungal) HIGH, SlgA 131 (critically low), Akkermansia undetectable. The gut microbiome has likely changed significantly in 6 years. Cannot guide current gut treatment - especially H. pylori status - without current data.
Reference: Comprehensive stool analysis with PCR. Confirms current H. pylori status, microbiome composition, inflammation markers.
Linked: gut

**** ORDER DIRECTLY (no doctor needed):**

Genova Connect (GI Effects)

<https://connect.gdx.net/products/gut-health-optimize>

Direct-to-consumer GI Effects (Genova's equivalent of GI-MAP, ~\$570-\$1,370 depending on tier). Mailed kit, home stool collection, \$15 third-party physician oversight fee included. HSA/FSA eligible.

GI Effects Premier (~\$700) recommended - includes microbiome detail comparable to GI-MAP. Will confirm H. pylori status and guide next gut treatment phase.

SIBO Breath Test (Lactulose, 3-hour)

Pending **Priority: critical**

Category: GI
Why: PERSISTENT BURPING is highly suggestive of SIBO (Small Intestinal Bacterial Overgrowth) - bacteria fermenting carbs in the small intestine where they do not belong. SIBO is extremely common downstream of long-term H. pylori (which suppresses stomach acid). A stool test does NOT diagnose SIBO - you need a separate breath test. This complements (not overlaps) the GI Effects test.

Reference: 3-hour lactulose breath test measures hydrogen and methane. Hydrogen+ = bacterial overgrowth. Methane+ = archaea (often constipation pattern). Hydrogen sulfide variant available.

Linked: gut

**** ORDER DIRECTLY (no doctor needed):**

Genova Connect (SIBO Test)

<https://connect.gdx.net/products/sibo-breath-test>

Direct-to-consumer 3-hour lactulose breath test (~\$300). At-home breath collection kit, \$15 third-party physician oversight fee included. HSA/FSA eligible.

Order with the GI Effects test - the two together tell the full gut story. Treatment pathway differs: SIBO+ = vegan herbal antimicrobials (berberine + allicin), H. pylori+ = mastic/black seed protocol intensification.

Echocardiogram

Pending

Priority: critical

Category: Cardiovascular

Why: Father died of cardiomyopathy at 63. Jim is 64. HFE hemochromatosis allows iron deposition in cardiac muscle. NT-proBNP was normal BUT 30% of structural heart disease patients have normal NT-proBNP. Echo assesses chamber size, wall thickness, valve function, and ejection fraction.

Reference: Structural heart assessment

Linked: cardiovascular, hemochromatosis

Urine Mycotoxin Panel

Pending

Priority: high

Category: CIRS

Why: Never tested. Would confirm or rule out active mycotoxin exposure. With HLA 4/3/53 multisusceptible genotype, Jim cannot clear mycotoxins naturally - need to know current burden.

Reference: RealTime Labs or Mosaic Diagnostics (formerly Great Plains)

Linked: cirs

**** ORDER DIRECTLY (no doctor needed):**

RealTime Labs

<https://realtimelab.com/order-test/>

Direct-to-consumer mycotoxin panel (~\$400). Mailed urine collection kit. Tests for major mold mycotoxins (Ochratoxin A, Aflatoxin, Trichothecene). Most established Shoemaker-aligned mycotoxin lab.

OxLDL / MPO / Lp-PLA2

Pending

Priority: high

Category: Cardiovascular

Why: Oxidized LDL, Myeloperoxidase, and Lp-PLA2 measure active arterial inflammation and plaque vulnerability. LDL particle number is HIGH (1763) - need to know if these particles are oxidized and dangerous.

Reference: OxLDL: <60 | MPO: <470 | Lp-PLA2: <200

Linked: cardiovascular

RBC Folate

Pending

Priority: high

Category: Methylation

Why: Plasma folate was critically low at 2.5 in 2018 but has never been properly retested. RBC folate is superior - measures intracellular folate status over 120 days. Essential for MTHFR 677++ management.

Reference: Optimal: >600 ng/mL

Linked: mthfr, pancytopenia

UACR + Renal Ultrasound

Pending **Priority: high**

Category: Kidney

Why: eGFR declined from 97 to 70 in 6 years (4.5x normal aging rate). UACR detects early kidney damage from albuminuria. Renal ultrasound checks for structural causes (stones, cysts, obstruction). Meets KDIGO referral criteria.

Reference: UACR: <30 mg/g normal

Linked: egfr

Selenium / Copper / Iodine

Pending **Priority: moderate**

Category: Minerals

Why: Selenium is critical for thyroid function and antioxidant defense (GPx enzyme). Copper/zinc ratio affects inflammation. Iodine for thyroid hormone synthesis.

Reference: Se: 70-150 | Cu: 70-155 | Iodine: varies

Vitamin E / CoQ10 (serum)

Pending **Priority: moderate**

Category: Vitamins

Why: CoQ10 is depleted 40-50% by HFE hemochromatosis. Need serum level to confirm 300mg/day supplementation is achieving adequate tissue levels. Vitamin E is a fat-soluble antioxidant partner to CoQ10.

Reference: CoQ10: 0.5-1.5 mg/L | Vit E: 5.5-17 mg/L

Linked: hemochromatosis

Cardiac MRI (T2-star)

Pending **Priority: moderate**

Category: Cardiovascular

Why: T2-star mapping specifically detects myocardial iron loading - the most dangerous consequence of hemochromatosis given Jim's family history of cardiomyopathy. More sensitive than echo for iron deposition.

Reference: T2*: >20ms normal

Linked: hemochromatosis, cardiovascular

CAC Score

Pending **Priority: moderate**

Category: Cardiovascular

Why: Coronary Artery Calcium score quantifies atherosclerotic calcification. Non-invasive CT scan. Given years of homocysteine at 39.1 damaging arteries, this would show if calcium has deposited.

Reference: Score: 0 ideal | >100 moderate | >400 high
Linked: cardiovascular

Upper Endoscopy with Biopsies

Pending **Priority: moderate**

Category: GI
Why: Direct visualization of stomach/duodenum. Can confirm H. pylori status, assess for atrophic changes, check for celiac disease, and evaluate iron absorption sites.
Reference: Procedural
Linked: gut

Transcranial Doppler

Pending **Priority: moderate**

Category: Neurovascular
Why: With head rotation - assesses vertebral artery blood flow during cervical movement. Directly tests the vertebral artery compression hypothesis underlying tinnitus.
Reference: Dynamic vascular assessment

Quick Checklist

Tear-off list for your doctor's appointment:

- CIRS Panel (C4a, MMP-9, VEGF, MSH, TGF-b1, VIP)
- Repeat GI-MAP (or Genova GI Effects)
- SIBO Breath Test (Lactulose, 3-hour)
- Echocardiogram
- Urine Mycotoxin Panel
- OxLDL / MPO / Lp-PLA2
- RBC Folate
- UACR + Renal Ultrasound
- Selenium / Copper / Iodine
- Vitamin E / CoQ10 (serum)
- Cardiac MRI (T2-star)
- CAC Score
- Upper Endoscopy with Biopsies
- Transcranial Doppler