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Nogales, Sonora
Mexico

COMPREHENSIVE STOOL ANALYSIS

Date Received : 05/06/2025 Date Tested: 05/06/2025 Sent Method : upload Source : Stool Service No : 99999

Patient:	**John Doe**	Date of Birth: 01-01-51	Sex: Male	**Health Practitioner:**	**The Office PCI**
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History:

Foreign Travel:

Symptoms:

Past Infection /Treatment:

Other infected in household:

Intestinal parasites: Normal value = 0 (not marked) Reference range: 0 (negative) - 4 (heavy presence) Specimens fixed and transported in SAF and concentrated using CONSED Reagent System (Alpha Tec, Vancouver, WA)

Protozoa:

Entamoeba coli	cysts	trophozoites
E. histolytica / E. dispar	cysts	trophozoites
Entamoeba hartmanni	cysts	trophozoites
Iodamoeba butschili	cysts	trophozoites
Endolimax nana	cysts	trophozoites
Giardia lamblia	**1 cysts**	trophozoites
Chilomastix mesnili	cysts	trophozoites
Balantidium coli	cysts	trophozoites

Blastocystis hominis
Dientamoeba fragilis
Trichomonas hominis
Cryptosporidium parvum
Isospora belli
Cyclospora cayetanensis

Trematoda (Flukes):

Schistosoma sp.
Fasciola/Fasciolopsis
Paragonimus westermani
Clonorchis/Heterophyes/Metagonimus

Fungi Spores and Common Yeasts:

1 Candida sp. ***1 Candida (dividing)***
1 Common Yeast *Yeast (dividing)*
Geotrichum sp.
Kloeckeri sp.
Hyphae

Cestoda (Tapeworms):

Taenia solium/Taenia saginata
Hymenolepis nana
Hymenolepis diminuta
Dipylidium caninum
Diphyllobothrium latum

Nematoda (Roundworms):

Larval Nematode
Ascaris lumbricoides
Ancylostoma/Necator
Strongyloides stercoralis
Trichostrongylus sp.
Trichuris trichiura
Enterobius vermicularis
Mansonella sp.

Other Observations:

Epithelial (squamous) cells
Epithelial (columnar) cells
2 Bacteria (normal bacilli)
Undigested Tissue
Charcot-Leyden crystals
WBC *RBC*
Fatty acid crystals
Starch granules
Pollen
1 Mucus

Comments *(samples tested at the Nogales facility):*

SUMMARY OF FINDINGS

GIARDIA LAMBLIA

Giardia lamblia is a microscopic parasitic flagellate that causes the diarrheal illness known as giardiasis. Giardiasis is a global disease. It infects nearly 2% of adults and 6% to 8% of children in developed countries worldwide. Nearly 33% of people in developing countries have had giardiasis. An infected person might shed 1-10 billion cysts daily. However, swallowing as few as 10 cysts might cause illness. Giardia cysts is protected by an outer shell that allows it to survive outside the body for long periods of time and makes it tolerant to chlorine disinfection. Like Cryptosporidium, the parasite can spread via recreational water, stream water, and municipal water from surface water treatment plants (20% of which carry infection) in the US and Canada. Giardia infection rates go up in late summer. Backpackers and wildlife enthusiasts are frequently exposed to Giardia from drinking stream water.

Transmission: It is found on surfaces or in soil, food, or water that has been contaminated with feces from infected humans or animals. Infection occurs by ingestion of mature cysts in contaminated food, water, or hands. Giardia may be passed person-to-person or even animal-to-person. Transmission can also occur through oral-anal sexual contact. The incubation period is 1 to 3 weeks after becoming infected.

Symptoms: Diarrhea, gas or flatulence**,** greasy stool that can float**,** stomach or abdominal cramps**,** upset stomach or nausea, dehydration, and weight loss. Some people are asymptomatic however, without proper treatment, can be carriers for years.

Treatment: Albendazole is recommended for allopathic treatment. The Freedom, Cleanse, Restore protocol is recommended for herbal treatment.

Prevention: Avoid drinking unboiled or unpurified tap water and avoid uncooked foods washed with unboiled or unpurified tap water. Avoid oral-anal sexual contact.

CANDIDA

Many species of Candida are harmless commensals of hosts including humans; however, when mucosal barriers are disrupted, the immune system is compromised, or the caprylic acid cycle is disrupted, they can invade and cause disease. Many species are found in gut flora including C. albicans in mammalian hosts, whereas others live in insect hosts.

Clinical significance: Candida is a fungus of worldwide distribution that multiplies proportional to the amount of natural or artificial carbs and sugars in the diet. Diet management is more important in treating Candida infections than the actual treatment itself. The most common species of Candida in the human intestine is C. albicans. When a Candida infection becomes systemic, it becomes much harder to treat. Candida also infects skin surfaces including oral and vaginal mucosa causing thrush and vaginitis. When host conditions are altered, Candida can cause disease in virtually any site where it becomes an indicator of immunosuppression. Among HIV infected individuals as well as those receiving prolonged antimicrobial therapy, thrush manifests as a serious and sometimes disseminated infection producing abscess, thrombophlebitis, endocarditis, or infections of the eyes or other organs (in over 90,000 people a year in the U.S). Women are more susceptible to genital fungal infections then men.

Treatment: Nystatin, Diflucan, Nizoral, or Sporonax are recommended for allopathic treatment. Freedom, Cleanse, Restore protocol is recommended for herbal treatment.

Prevention: Avoid high carb/sugar diets, minimize alcohol consumption, and avoid antibiotics when possible.

CANDIDA DIVIDING

Candida dividing: When Candida is found to be dividing in a fecal specimen it indicates pathology. The number of cells is dividing and the infection will grow until properly treated.

COMMON YEASTS

Non-dividing yeasts are usually considered non-pathogenic. Some species of yeast are opportunistic pathogens that can cause infection in people with compromised immune systems including HIV and AIDS patients.

Clinical significance: Cryptococcus sp. is a significant pathogen of immunocompromised people causing the disease termed cryptococcosis. This disease occurs in about 79% of AIDS patients in the USA, and a slightly smaller percentage (36%) in Western Europe. The cells of the yeast are surrounded by a rigid polysaccharide capsule, which helps to prevent them from being recognized and engulfed by white blood cells in the human body. Commensal yeasts are also found the mucus membranes of humans and other warm-blooded animals. While they are usually considered non-pathogenic, sometimes these same strains can become pathogenic. The yeast cells sprout a hyphal outgrowth, which locally penetrates the mucosal membrane, causing irritation and shedding of tissues.

Treatment: Fluconazole is recommended for allopathic treatment. Freedom, Cleanse, Restore protocol is recommended for herbal treatment. Tanalbit, a zinc tannate compound, is also recommended as an herbal alternative.

Prevention: Depending on the species, yeast infections can colonize the respiratory system or intestinal tract becoming systemic. Avoidance of inhaling or ingesting objects/substances contaminated with yeast spores is the best prevention.

BACTERIA NORMAL BACILLI

Bacilli (normal bacteria) is a general term used to describe the morphology of any rod-shaped bacterium. While not all rod shaped bacteria are good, we are reporting on the beneficial rod-shaped bacteria that are in the gut. It is the key in maintaining a healthy immune system.

Clinical significance: At proper levels it helps create energy from the fermentation of undigested carbohydrates and absorption of fatty acids. It also helps prevent the growth of harmful bacteria and fungi such as Candida, regulates the development of the gut, and synthesizes vitamins, especially vitamin K and B. The best reading for this is a level of 3. That indicates a good supply of your pro-flora. A level of 2 is adequate. A level of 1 indicates a low reading, and a level of 4 indicates an overgrowth. Bacterial overgrowth is an indicator of a number of pathologies including IBS, CFS, allergies, arthritis, diabetes, fibromyalgia, and auto-immune diseases. Metabolic substances produced by bacterial overgrowth will compromise absorption causing nutrient deficiencies and food allergies. Overgrowth is usually age related. Older people produce less acid in the stomach and therefore are subject to bacterial overgrowth.

Treatment: If a patient scores a 1 or 2, they should either supplement with a probiotic and/or adjust diet to cut out sugars, starches, and vegetable oils and consume real vegetables, proteins, fats, and fermented foods and drinks. Avoid antibiotics whenever possible as they will deplete all bacteria and enhance the growth of Candida and related fungi that will compete with healthy intestinal flora for food and space. If the patient scores a 4 (overgrowth), institute a low carb diet and use enteric-coated peppermint oil to control unfriendly bacteria that impair friendly bacteria.

MUCUS

Mucus is a natural product of a healthy intestine to protect against biological agents (parasites/bacteria) or chemical (toxins) agents that may compromise the intestinal lining. It functions as a lubricant for materials that must pass over membranes, e.g., food passing down the esophagus. A layer of mucus along the inner walls of the stomach is vital to protect the cell linings of that organ from the highly acidic environment within it. Mucus does not digest in the intestinal tract. Mucus is also secreted from glands within the rectum due to stimulation of the mucous membrane within. Mucus is often found in cylindrical casts confused by many as parasitic worms. It may be detected wrapped around fecal strands or alone.

Clinical significance: The detection of large amounts of mucus in a stool specimen indicates a serious aggravation of the intestine by parasitic or toxic agents.

Note: The Summary of Findings is for practitioner informational purposes only. References to treatment suggestions refer only to common practices and are not to be construed as PCI recommendations for specific individuals. It is incumbent upon practitioners to decide on the treatment that is best for their patient.