



Assessment Report

PATIENT DETAILS

Name **Sanne de Vries**
Gender **Female**
Age **34 years**
Date of birth **12-03-1992**

TEST DETAILS

Test Date **18-06-2026**
Report date **21-06-2026**
Location **Amsterdam Zuid**
Laboratory **Star-SHL**

OVERALL ASSESSMENT

Your blood test shows a largely healthy picture. Of the thirteen values measured, ten fall within the reference range. Three need attention: your vitamin D and ferritin are low, and your total cholesterol sits just above the upper limit.

None of these findings is worrying. All three respond well to diet, lifestyle and, where needed, supplementation.

KEY FINDINGS

Vitamin D low (46 nmol/L)

ATTENTION

Below the target of 75 nmol/L. This is very common in the Netherlands, particularly between October and April. Fatigue, muscle weakness and reduced immunity are the symptoms most often associated with it.

Ferritin low (18 µg/L)

ATTENTION

Your iron stores are limited while your hemoglobin is still normal. This pattern often precedes anaemia and explains fatigue even before the Hb has dropped.

Cholesterol slightly raised (5.1 mmol/L)

ATTENTION

Just above the 5.0 limit. Your HDL is high and your LDL is normal, so the overall risk profile stays favourable. This value alone does not call for treatment.

Thyroid, liver and kidneys are fine

GOOD

TSH, ALT and eGFR all sit comfortably within range. There is no indication of a thyroid, liver or kidney problem.

No sign of inflammation

GOOD

Your hsCRP is 0.8 mg/L. This value is sensitive to low-grade inflammation and is low here, which is favourable for long-term cardiovascular risk.

DETAILED ANALYSIS

Vitamins

ATTENTION

Your vitamin D is 46 nmol/L, below the target of 75. Your vitamin B12, at 312 pmol/L, is comfortably sufficient.

Vitamin D is mostly produced in the skin under the influence of sunlight. At Dutch latitudes that is barely possible between October and April, which makes a value like this ordinary in winter and spring. That does not make it unimportant: vitamin D contributes to bone formation, muscle strength and immune function.

Minerals

ATTENTION

Your ferritin is 18 µg/L, just under the lower limit of 20. Ferritin is the storage form of iron, and that store depletes before hemoglobin falls.

That is exactly what we see here: your hemoglobin is still normal (8.4 mmol/L), but the reserve your body draws on is small. Fatigue is a well-recognised symptom of this combination, even without anaemia.

Cardiovascular

ATTENTION

Your total cholesterol is 5.1 mmol/L, just above the 5.0 limit. What matters more than that single number is the composition: your HDL is 1.8 mmol/L (higher is better), your LDL 2.9 mmol/L (under the 3.0 limit) and your triglycerides 0.9 mmol/L (low).

This is a favourable profile. The raised total is largely a consequence of your high HDL, and HDL is protective. Looking at the total alone would give a misleading impression here.

Hematology

NORMAL

Your hemoglobin is 8.4 mmol/L and therefore within range. There is no anaemia. Do note the low ferritin above — it deserves attention precisely because the hemoglobin is still good.

Thyroid

NORMAL

Your TSH is 1.9 mU/L. That sits in the middle of the reference range and is consistent with a normally functioning thyroid. With a TSH in this range, additional free T4 testing is not needed.

Metabolic

NORMAL

Your fasting glucose is 4.9 mmol/L. There is no indication of disturbed glucose metabolism or diabetes.

Inflammation

NORMAL

Your hsCRP is 0.8 mg/L, below the 3.0 limit. This test is more sensitive than standard CRP and is used to detect low-grade inflammation. A low value is favourable.

Liver

NORMAL

Your ALT is 22 U/L, within range. This enzyme is released when liver cells are damaged; a normal value is consistent with a healthy liver.

Your eGFR is 96 mL/min/1.73m². This is a calculated measure of how much blood your kidneys filter per minute, and this value is normal for your age.

RECOMMENDATIONS

1 Supplement vitamin D

Take 25 to 50 micrograms (1000 to 2000 IU) of vitamin D3 daily, with your main meal — vitamin D is fat-soluble and absorbs better that way. Retest after three months to confirm the value is rising.

2 Rebuild your iron stores through diet

Red meat, lentils, tofu and dark leafy greens are the main sources. Combine them with vitamin C: a glass of orange juice with the meal raises absorption considerably. Tea and coffee do the opposite — leave an hour between them.

Talk to your GP before starting an iron supplement. Too much iron is harmful, and at a ferritin of 18 diet is often enough.

3 Leave the cholesterol alone

Your profile is favourable enough that a slightly raised total cholesterol needs no action here. Keep your current lifestyle and have it measured again in a year.

4 Retest after three months

Vitamin D and ferritin respond to supplementation and diet within a few months. A check after three months — vitamin D, ferritin and hemoglobin — will show whether the approach is working.

NEXT STEPS

There is no urgency. Start the vitamin D supplementation and the dietary changes, and have vitamin D, ferritin and hemoglobin measured again after three months.

Contact your GP if the fatigue persists despite this approach, or if new symptoms appear. This report does not replace a consultation.

TEST RESULTS

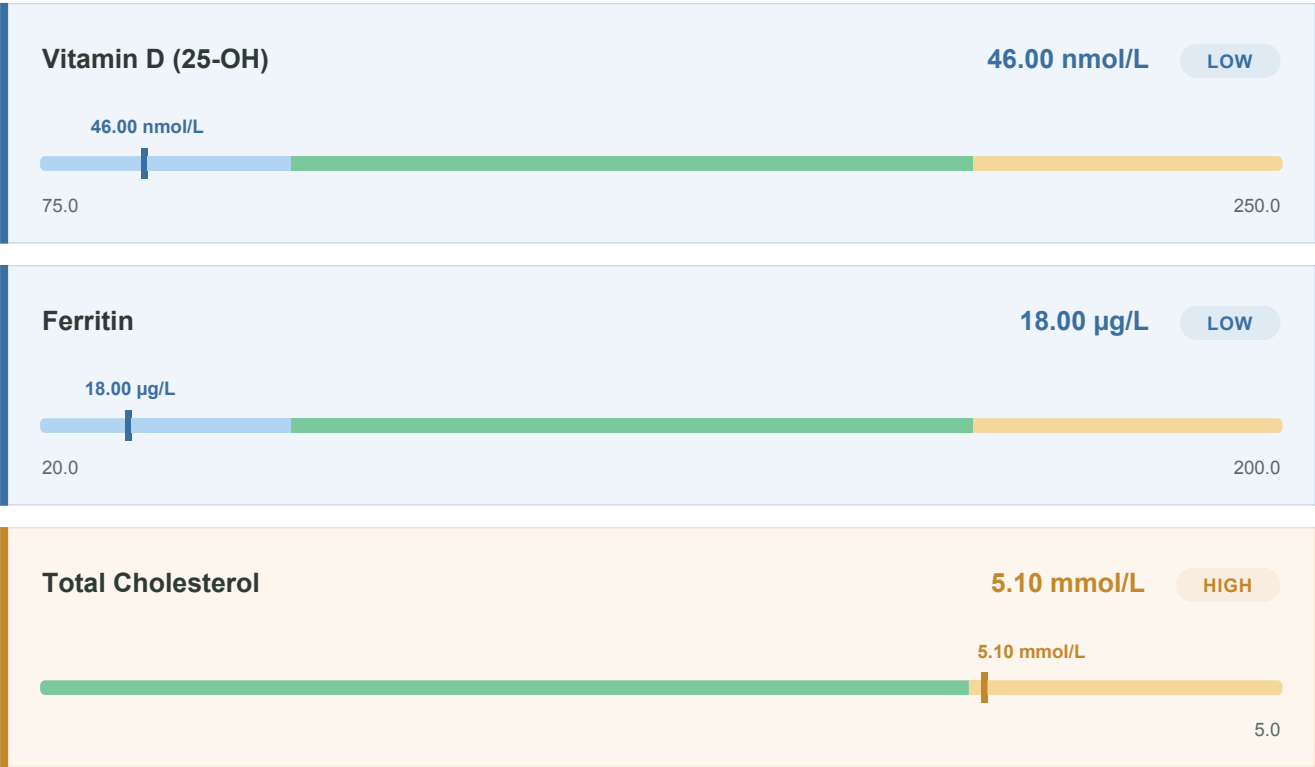
Results Overview

13 results tested

3 of 13 results outside reference range

MARKER	RESULT	REFERENCE	ASSESSMENT
Vitamin D (25-OH)	46.00 nmol/L	75.00 - 250.00 nmol/L	LOW
Ferritin	18.00 µg/L	20.00 - 200.00 µg/L	LOW
Total Cholesterol	5.10 mmol/L	— - 5.00 mmol/L	HIGH

Points of attention (3)

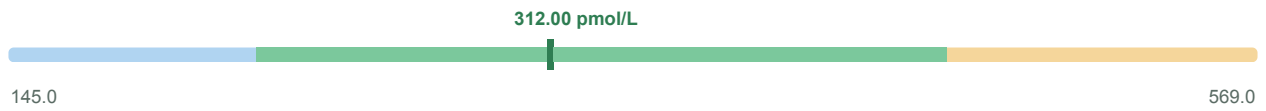


Within reference (10)

Vitamin B12

312.00 pmol/L

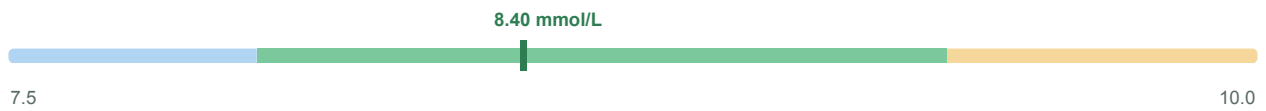
NORMAL



Hemoglobin

8.40 mmol/L

NORMAL



HDL Cholesterol

1.80 mmol/L

NORMAL



LDL Cholesterol

2.90 mmol/L

NORMAL



Triglycerides

0.90 mmol/L

NORMAL



TSH (Thyroid Stimulating Hormone)

1.90 mU/L

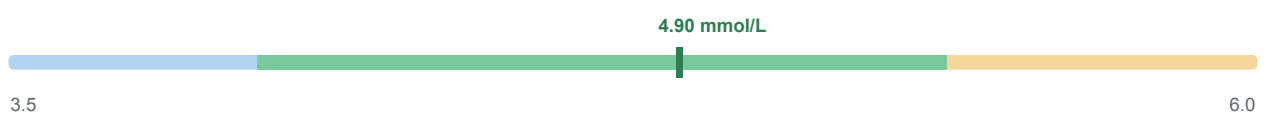
NORMAL



Glucose (Fasting)

4.90 mmol/L

NORMAL



hs-CRP (High Sensitivity CRP)

0.80 mg/L

NORMAL



ALT (Alanine Aminotransferase)

22.00 U/L

NORMAL



eGFR (Estimated Glomerular Filtration Rate)

96.00 mL/min/1.73m²

NORMAL



SAMPLE REPORT — FICTIONAL VALUES FOR A PERSON WHO DOES NOT EXIST. NOT MEDICAL ADVICE.

DISCLAIMER

This report was prepared by a BIG-registered doctor. It does not replace a personal medical consultation. Always consult your general practitioner if you have questions.

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