

MetaXplore™ Range Report Interpretation Checklist

1 ASSESS	Red flags (refer to a medical specialist, if necessary)	Faecal occult blood detected*	<input type="checkbox"/>	
		Calprotectin above 100 µg/g*	<input type="checkbox"/>	
		Lactoferrin above 7.2 µg/g*	<input type="checkbox"/>	
		Pancreatic elastase below 100 µg/mL*	<input type="checkbox"/>	
		Pathogens detected on diagnostic targeted pathogen panel**	<input type="checkbox"/>	
		Potential pathogens identified in metagenomic species table (search pathogen)	<input type="checkbox"/>	
	Gut terrain	Faecal pH*	<input type="checkbox"/>	
		Secretory IgA*	<input type="checkbox"/>	
		Zonulin*	<input type="checkbox"/>	
		Mucin degradation	<input type="checkbox"/>	
		Oral species	<input type="checkbox"/>	
Dysbiosis	Diversity and richness (species count)	<input type="checkbox"/>		
	Microbial markers out of range - acetate, <i>B. fragilis</i> toxin, branched-chain amino acids (BCAA), beta-glucuronidase, butyrate, hexa-acylated lipopolysaccharide (hexa-LPS), hydrogen sulphide, 3-indolepropionic acid (IPA), methane, oxalate, propionate, trimethylamine (TMA)	<input type="checkbox"/>		
	Species table for more advanced users - to learn more visit Co-Education	<input type="checkbox"/>		
2 APPLY	Findings & insights	Based on patient symptoms, bowel habits, health history, allergies, intolerances, tolerability, goals, motivations	<input type="checkbox"/>	
		Prioritise insights based on the markers that need addressing the most (via results range or via health categories)	<input type="checkbox"/>	
		If there are no markers out of range, work on healthy microbiome foundations to help the patient improve their microbiome potential	<input type="checkbox"/>	
		Request further pathology or investigative testing, if necessary	<input type="checkbox"/>	
3 ADAPT	Treatment based on patient response & re-test results	Regular patient check-ins to monitor progress, compliance and treatment tolerability	<input type="checkbox"/>	
		Re-test between 3-6 months to assess treatment success	<input type="checkbox"/>	
		Maintain microbiome health	<input type="checkbox"/>	

*Available in MetaXplore GI & GI Plus only **Available in MetaXplore GI Plus only

The faecal pH assay used in the MetaXplore™ range is for research use only and not to be used as a basis for diagnosis. The metagenomic assays used in the MetaXplore™ range are to determine the microbiome populations and associated functional pathways in a faecal sample. The application is for research use only and not to be used as a basis for diagnosis.

MetaXplore™ Range Report Interpretation Checklist Supplemental

<p style="text-align: center;">1 ASSESS</p>	<p>Red flags</p> <ul style="list-style-type: none"> • Faecal occult blood detected* • Calprotectin above 100 µg/g* • Lactoferrin above 7.2 µg/g* • Pancreatic elastase below 100 µg/mL* • Pathogens detected on diagnostic targeted pathogen panel** • Potential pathogens identified in metagenomic species table (search pathogen) 	<p>Questions?</p> <ul style="list-style-type: none"> • Are the red flags reflective of the patient presentation (signs, symptoms, health priorities) and patient history (disease, diagnosed conditions)? • Are pathogens detected in the diagnostic targeted pathogen panel or potential pathogens found using metagenomics when you search 'pathogen' in the species table, that require further investigation? • Does the patient need to be referred on to another healthcare professional? 	<p>Resources</p> <ul style="list-style-type: none"> • Pathogen and Pathobiont Guide • Interpretation Guide • First, Do No Harm Webinar • MetaXplore Referral Letter Template for Healthcare Professionals
	<p>Gut terrain</p> <ul style="list-style-type: none"> • Faecal pH* • Secretory IgA* • Zonulin* • Mucin degradation • Oral species 	<p>Questions?</p> <ul style="list-style-type: none"> • How do the out of range gastrointestinal markers relate to the patient's current presentation? E.g. symptoms, diagnosed conditions, health history, diet, lifestyle, supplements. • How does mucin degradation relate to the patient's diet (low fibre intake, disordered eating, fasting), gut transit time, diagnosed conditions and presence of mucin-degrading microbial species? • Are there any factors that would contribute to the presence of oral species? E.g. PPI medication, low stomach acid, stress. 	<p>Resources</p> <ul style="list-style-type: none"> • Interpretation Guide • Unlocking the Inner Ecosystem Webinar
	<p>Dysbiosis</p> <ul style="list-style-type: none"> • Diversity and richness (species count) • Microbial markers out of range - acetate, B. fragilis toxin, branched-chain amino acids (BCAA), beta-glucuronidase, butyrate, hexa-acylated lipopolysaccharide (hexa-LPS), hydrogen sulphide, 3-indolepropionic acid (IPA), methane, oxalate, propionate, trimethylamine (TMA) • Species table for more advanced users - to learn more visit Co-Education 	<p>Questions?</p> <ul style="list-style-type: none"> • How do the out of range microbial markers relate to the patient's current presentation? E.g. symptoms, diagnosed conditions, health history, diet, lifestyle, supplements. • Are there any markers that need to be considered together? E.g. butyrate and hydrogen sulphide or acetate and butyrate. • Species overabundance can indicate functional dysbiosis, how does this relate to the patient's presenting symptoms and microbial markers? 	<p>Resources</p> <ul style="list-style-type: none"> • Interpretation Guide • Unlocking the Inner Ecosystem Webinar • First, Do No Harm Webinar

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<p>2 APPLY</p>	<p>Findings & insights</p> <ul style="list-style-type: none"> • Based on patient symptoms, bowel habits, health history, allergies, intolerances, tolerability, goals, motivations • Prioritise insights based on the markers that need addressing the most (via results range or via health categories) • If there are no markers out of range, work on healthy microbiome foundations to help the patient improve their microbiome potential • Request further pathology or investigative testing, if necessary 	<p>Questions?</p> <ul style="list-style-type: none"> • What are the highest priorities for the patient in front of you? • How does the patient’s current presentation relate back to the microbiome and gastrointestinal markers? • Are there markers in the borderline range that need to be considered or monitored? • Are there any patient barriers to consider in personalising their insights? E.g. allergies, intolerances, preferences, cost, availability, tolerability. • Do you need to send the patient for further testing? 	<p>Resources</p> <ul style="list-style-type: none"> • From Plate to Microbes Webinar • Personalised Prebiotic Prescription Webinar • Pathogen and Pathobiont Guide • Dietary Impacts on the Gut Microbiome Guide • Prebiotic Guide • Patient handouts
<p>3 ADAPT</p>	<p>Treatment based on patient response & re-test results</p> <ul style="list-style-type: none"> • Treatment based on patient response & re-test results • Re-test between 3-6 months to assess treatment success • Maintain microbiome health 	<p>Questions?</p> <ul style="list-style-type: none"> • How have interventions impacted the microbiome? • Are changes to the interventions required for further improvement? E.g. increase dosage, longer prescription. 	<p>Resources</p> <ul style="list-style-type: none"> • Practitioner Portal • From Plate to Microbes Webinar • Personalised Prebiotic Prescription Webinar • Patient handouts

MetaXplore is proudly & exclusively available in Australia via Co-Biome and in the UK via Invivo Healthcare.

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