FoodPrint®

Your Food Report



Informing decisions
Improving health

Omega Diagnostics

19/01/2026

Dear Demo Patient 1,

Please find enclosed the Patient Report for your food sensitivity test, FoodPrint®. This includes information about the specific food IgG antibodies detected in your blood sample and guidelines on how to make full use of the test results:

TEST REPORT

Two different types of Test Report are provided with every FoodPrint® test:

1. **Food Groups** – foods are listed according to their respective food group
2. **Order of Reactivity** – foods are ranked by strength of antibody reaction

A numerical value is displayed in a coloured box adjacent to each food, which represents the concentration of IgG antibodies detected for each food. Foods are categorised as ELEVATED BORDERLINE or NORMAL, depending on the antibody level detected.

PATIENT GUIDEBOOK

- Information about food sensitivity and commonly used terminology
- Planning and implementing your results
- Replacements for common foods like dairy, eggs, wheat, gluten and yeast
- Monitoring symptoms, re-introducing foods and avoiding new food sensitivities
- Frequently asked questions

Any change in diet or removal of certain foods/food groups needs to be carefully managed to ensure that essential nutrients are maintained. Information provided in the Patient Guidebook is for general use only. If in doubt, please seek advice from a qualified healthcare professional.

To upgrade your FoodPrint® IgG antibody test to our most comprehensive panel (FP200+), please contact the practitioner/nutritionist who referred you for the FoodPrint® test, within 30 days from the sample analysis date.

Please note | FoodPrint® does NOT test for **classical allergies**, which involve the production of IgE antibodies and cause rapid onset of symptoms such as rashes, swelling, violent sickness, difficulty breathing and anaphylactic shock. **If you have a food allergy, it is important to continue avoiding that food, regardless of the test results obtained**. This advice also applies if you have been diagnosed with coeliac disease or any other food related condition such as lactose intolerance.

If you would like further information or wish to discuss any matters raised in the Patient Report, please do not hesitate to contact hello@cnslab.co.uk.

Finally, we'd love for you to submit a review about our products and our service:

Leave us a Google review here!

Leave us a Trustpilot review here!

Kind regards
The CNSLab Team

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Test Report : Food Groups

FoodPrint®

Patient Name:	Demo Patient 1	**Analysis Date:**	15/01/2026
Patient Number:	123456	**Test Reference:**	123456
Date of Birth:	01/02/2003		

ELEVATED (≥30 U/ml)	BORDERLINE (24-29 U/ml)	NORMAL (≤23 U/ml)
DAIRY / EGG		
69 Egg White	<15 Egg Yolk	140 Milk (Cow)
GRAINS (Gluten-Containing)*		
35 Barley	66 Gliadin*	<15 Rye
<15 Durum Wheat	42 Oat	31 Wheat
GRAINS (Gluten-Free)		
<15 Corn (Maize)	50 Rice	
FRUIT		
<15 Apple	<15 Lemon	<15 Raspberry
<15 Blackberry	25 Orange	<15 Strawberry
<15 Grapefruit	<15 Pear	
VEGETABLES		
21 Bean (Red Kidney)	<15 Cabbage (Savoy/White)	42 Potato
30 Bean (White Haricot)	<15 Cauliflower	16 Soya Bean
<15 Broccoli	38 Pea	
FISH / SEAFOOD		
<15 Cod	<15 Haddock	<15 Plaice
<15 Crab	<15 Lobster	<15 Shrimp/Prawn
MEAT		
<15 Beef	<15 Lamb	<15 Turkey
<15 Chicken	<15 Pork	
NUTS / SEEDS		
15 Almond	25 Hazelnut	
79 Cashew Nut	31 Peanut	
MISCELLANEOUS		
<15 Yeast (Baker's)	<15 Yeast (Brewer's)	

* Gliadin (gluten) is tested separately to the gluten-containing grains. If your Test Report shows an elevated reaction to gliadin, it is important to eliminate consumption of foods that contain these grains, even if the grain results are not elevated. Please refer to the Patient Guidebook for further information.

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Test Report : Order of Reactivity

FoodPrint®

Patient Name:	Demo Patient 1	**Analysis Date:**	15/01/2026
Patient Number:	123456	**Test Reference:**	123456
Date of Birth:	01/02/2003		

ELEVATED FOODS (≥30 U/ml)

140	Milk (Cow)	50	Rice	35	Barley
79	Cashew Nut	42	Oat	31	Peanut
69	Egg White	42	Potato	31	Wheat
66	Gliadin*	38	Pea	30	Bean (White Haricot)

BORDERLINE FOODS (24-29 U/ml)

25	Hazelnut	25	Orange

NORMAL FOODS (≤23 U/ml)

21	Bean (Red Kidney)	<15	Cod	<15	Pear
16	Soya Bean	<15	Corn (Maize)	<15	Plaice
15	Almond	<15	Crab	<15	Pork
<15	Apple	<15	Durum Wheat	<15	Raspberry
<15	Beef	<15	Egg Yolk	<15	Rye
<15	Blackberry	<15	Grapefruit	<15	Shrimp/Prawn
<15	Broccoli	<15	Haddock	<15	Strawberry
<15	Cabbage (Savoy/White)	<15	Lamb	<15	Turkey
<15	Cauliflower	<15	Lemon	<15	Yeast (Baker's)
<15	Chicken	<15	Lobster	<15	Yeast (Brewer's)

* Gliadin (gluten) is tested separately to the gluten-containing grains. If your Test Report shows an elevated reaction to gliadin, it is important to eliminate consumption of foods that contain these grains, even if the grain results are not elevated. Please refer to the Patient Guidebook for further information.