ZOĪ

ULTIMATE

BIOLOGY, EXAMS AND IMAGING

Zoī · Preventive medicine · June 2026

ULTIMATE - COMPLETE LIST OF EXAMS

06.2026

BIOLOGY

♀ women only · ♂ men only

METABOLISM

- Alphalinolenic acid
- Arachidonic acid
- Cis-vaccenic acid
- Dihomogammalinolenic acid
- Docosahexaenoic acid
- Eicosapentaenoic acid
- Eicosatrienoic acid
- Elaidic acid
- Gammalinolenic acid
- Linoleic acid
- Linoleic acid CLA2 C18:2(10t,12c)
- Linoleic acid CLA3 C18:2(9c,12t)
- Myristic acid
- Oleic acid
- Palmitic acid
- Palmitoleic acid
- Ratio AA:EPA
- Ratio LN:DGLA
- Ratio ω6:ω3
- Rumenic acid
- Stearic acid
- Total ω3
- Total ω6
- Transpalmitoleic acid
- Transvaccenic acid
- Vitamin B1
- Vitamin B2
- Vitamin B3
- Vitamin B6
- Vitamin K
- ω3 Index

CARDIORESPIRATORY

- Apolipoprotein A1
- Apolipoprotein A1/B
- Apolipoprotein B
- Atherogenic index
- CPK
- Fibrinogen
- HDL cholesterol
- Homocysteine
- LDL cholesterol (calculated)
- Lipemia
- Lipoprotein (a)
- Lp-PLA2
- Non-HDL cholesterol
- NT-proBNP
- sdLDL
- Total cholesterol
- Triglycerides
- Triglycerides:HDL ratio
- Vitamin B12
- Vitamin B9

ENDOCRINE

- Anti-TPO antibodies
- Bioavailable testosterone
- Bioavailable testosterone %
- Bound testosterone %
- DHEA sulfate
- Estimated average blood sugar
- Estradiol
- Fasting blood sugar
- Free PSA ♂
- Free testosterone
- Free testosterone %
- Free-T3
- Free-T4
- FSH
- Glycosuria
- HbA1c
- HbA1c IFCC
- HOMA index
- IGF-1
- Inhibin B ♂
- Insulin
- Ioduria
- LH
- Pregnenolone
- Progesterone
- Prolactin
- PSA ♂
- Quicki index
- Ratio Free PSA:Total PSA ♂
- SHBG
- T3
- T3 urinary
- Total testosterone
- TSH

IMMUNITY & INFLAMMATION

- Albumin
- Alpha-1 globulin
- Alpha-2 globulin
- Anti-HBc antibodies
- Anti-HBs antibodies
- Basophils
- Basophils (AV)
- Beta globulins
- Chlamydia trachomatis
- CMV IgG
- Eosinophils
- Eosinophils (AV)
- Epstein Barr IgG
- Ferritin
- Gamma globulins
- Gamma-globulins/Total protein ratio
- HBs antigen
- Hematocrit
- Hemoglobin
- Hemolysis
- Hepatitis C
- Herpes virus
- HIV
- HPV (PCR) ♀
- LBP (LPS-Binding Protein)
- Lymphocytes
- Lymphocytes (AV)
- MCH
- MCHC
- MCV
- Monocytes
- Monocytes (AV)
- MPV (mean platelet volume)
- Neutrophils
- Neutrophils (AV)
- Neutrophils:Lymphocytes ratio
- Platelets
- RBC (Erythrocytes)
- Red cell distribution width (RDW)
- suPAR
- Syphilis (TPHA)
- Total proteins (EPP)
- us CRP
- Vitamin A
- Vitamin D
- WBC (Leukocytes)
- Zinc

OXIDATIVE STRESS & ANTIOXIDANTS

- % transferrin saturation
- 8OH-D Guanosine
- 8OH-D Guanosine/creat.
- Antioxidant capacity n.meas.
- Calculated antioxidant capacity
- Coenzyme Q10
- Copper
- Copper/Zinc ratio
- Iron
- Iron : transferrin ratio
- Oxidized LDL IgG
- Selenium
- TIBC
- Total antioxidant capacity
- Transferrin
- Vitamin C (plasma)
- Vitamin E
- Vitamin E/Chol

DIGESTIVE

- Acetate
- ALAT
- Alkaline phosphatase
- ASAT
- Conjugated bilirubin
- Dysbiosis
- Ecological integrity
- Fecal calprotectin
- Fecal immunochemical test (FIT)
- Fungi
- Gamma-GT
- iso-Butyrate
- iso-Valerate
- Microbiome
- n-Butyrate
- n-Valerate
- Propionate
- Total bilirubin
- Total SCFA pool
- Unconjugated bilirubin

KIDNEY

- 24-hour urine volume
- Chloride
- Creatinine
- Creatininuria
- Cystatin C
- GFR (CKD-EPI)
- Hematuria
- Leukocyturia
- Proteinuria
- Sodium
- Uric acid
- Urine pH

STRESS, ENERGY & SLEEP

- 24h adrenaline
- 24h Serotonin
- 3.4DOPAC(DiOHfenylacet.)
- 5-HIAA
- Adrenaline
- CAR
- Cortisol 8pm
- Cortisol morning/8pm
- Cortisol+30'
- Cortisol/DHEA 8pm
- DHEAs 8pm
- DOPAC
- Dopamine
- HIAA
- Homovanillinic acid
- HVA/5-HIAA
- MHPG (MetoxyOHphenylglyc)
- Morning cortisol
- Noradrenaline
- Serotonin
- Urinary dopamine
- Urinary homovanillinic acid
- Urinary norepinephrine
- Urinary VMA
- VMA

ENVIRONMENTAL EXPOSURES

- Urinary cotinine

BIOLOGICAL AGE

- Genomic stability
- Index of aging
- Intercellular communication
- Mitochondrial function
- PhenoAge
- Telomere length

MEDICAL & TECHNICAL EXAMS

♀ women only · ♂ men only

A.G.E. READER

A non-invasive measurement, using skin autofluorescence, of advanced glycation end-product (AGE) accumulation. These markers are associated with age, glycaemic exposure, oxidative stress and certain cardiometabolic risks. The result is a risk indicator to be interpreted in the clinical context; it does not establish a diagnosis on its own.

VISUAL ACUITY

A measure of near and distance visual sharpness for each eye. It looks for refractive errors, myopia, hyperopia, astigmatism or presbyopia and checks the effectiveness of any existing correction.

ECG

A 12-lead recording of the heart's electrical activity at rest. At the time of the exam, it may reveal certain rhythm disorders, conduction abnormalities or electrical signs suggestive of ischaemia or previous cardiac injury, and serves as a baseline for follow-up over time.

360° CLINICAL EXAM WITH THE REFERRING DOCTOR

A full clinical examination performed by a physician: interview, physical examination, vital signs and synthesis. It puts all results into perspective, personalises interpretation and guides recommendations or any further tests.

DERMATOLOGICAL EXAM

A full skin examination performed by a dermatologist, with dermoscopy and photographic mapping of pigmented lesions when indicated. It looks for suspicious lesions that may suggest melanoma or carcinoma and, if needed, guides monitoring or biopsy.

GRIP STRENGTH

A measurement of hand grip strength using a dynamometer. Simple and reproducible, it helps assess overall muscle strength and functional frailty; a low value may be associated with age-related loss of muscle mass or performance.

BLOOD PRESSURE

A resting blood pressure measurement in both arms. It helps identify high blood pressure or an inter-arm pressure difference, and is a major cardiovascular-risk marker to be confirmed according to medical recommendations.

ANTHROPOMETRIC MEASUREMENTS

Basic anthropometric measurements: height, weight, waist circumference and body mass index. They establish follow-up markers and contribute to metabolic-risk assessment.

SPIROMETRY

A standardised measure of breathing volumes and respiratory flows. It assesses lung function and may reveal a ventilatory disorder, particularly airway obstruction, to be interpreted in the clinical context.

NEUROCOGNITIVE TEST

A standardised assessment of several cognitive functions: memory, attention, processing speed and executive function. It establishes a baseline, measures current performance and helps identify changes that may require further medical assessment.

TONAL AUDIOMETRY

A pure-tone audiogram that measures each ear's hearing threshold across the tested frequencies, especially those used for speech understanding. It specifies the degree and type of any hearing loss and may detect it before it is fully noticed.

EPIPROTEOMIC TEST

An estimate of biological ageing based on molecular biomarkers, including proteomic and epigenetic markers. It provides a complementary indicator of ageing pace observed in studies, associated with certain age-related health risks, but it cannot by itself diagnose, predict or rule out disease.

HEART RATE VARIABILITY

Heart-rate variability measures tiny variations between heartbeats. It provides an indirect indicator of autonomic nervous system balance and recovery capacity, influenced by sleep, stress, physical activity and some medications. It is best interpreted over time.

IMAGING

♀ women only · ♂ men only

CONE BEAM CT

Cone Beam CT is a 3D volumetric X-ray imaging exam performed with an optimised protocol to limit exposure. Depending on the area examined, ENT/dental or thoracic, it provides high-definition analysis of visible structures such as sinuses, airways, bone structures and, for thoracic protocols, lung tissue, bone structures and the heart. It looks for abnormalities such as sinus disease, polypoid lesions, lung nodules or structural abnormalities, with medical interpretation.

CORONARY ANGIOGRAPHY ON THE CARDIOLOGIST'S ADVICE

Coronary angiography is the invasive reference examination that directly visualises the coronary arteries via contrast injection. Offered by referral, on specialised cardiology indication, when non-invasive tests warrant it: it reflects access to the full cardiology technical platform.

CORONARY CT ANGIOGRAPHY

Coronary CT angiography images the coronary arteries to look for plaque and narrowing (atherosclerosis), at an early stage and before any symptoms. Performed as the default, the cardiac protocol can switch, depending on specialised cardiology assessment and ECG results, to a cardiac MRI or a stress MRI (in the same place), with possible referral for coronary angiography, and access to the full cardiology technical platform when needed.

DEXA SCAN

DEXA analyses body composition using low-dose dual-energy X-ray absorptiometry. It measures bone mineral density, the reference method for assessing osteoporosis, and distinguishes lean mass, peripheral fat mass and estimated visceral fat, which helps assess the cardiometabolic profile.

CARDIAC MRI ON THE CARDIOLOGIST'S ADVICE

Cardiac MRI provides detailed assessment of the myocardium, chambers, valves and great vessels. It measures volumes and pump function, analyses wall thickness and may look for fibrosis, scarring or tissue abnormalities. It complements echocardiography when a more in-depth assessment is useful.

WHOLE-BODY MRI

Whole-body MRI is radiation-free imaging that provides a panoramic assessment of many regions: neck, lymph nodes, vessels, chest, abdomen, pelvis, spine, long bones, soft tissues and visceral fat. It looks for morphological or tissue abnormalities that may require clinical correlation or targeted tests. It does not replace organised screening programmes or examinations recommended according to age, symptoms and risk factors.

BRAIN MRI

Brain MRI is radiation-free imaging dedicated to the brain. It provides a detailed assessment of the brain parenchyma, white matter and vascular structures to look for silent lesions (vascular sequelae, white-matter abnormalities) or morphological abnormalities. It complements whole-body MRI with an in-depth assessment of the brain, in correlation with the clinical examination.

STRESS MRI ON THE CARDIOLOGIST'S ADVICE

Stress cardiac MRI assesses myocardial perfusion under pharmacological stress to look for ischaemia, i.e. territories that are less well perfused under exertion. Performed in the same place as cardiac MRI, it is part of the cardiac protocol escalation based on cardiology assessment and ECG.

MAMMOGRAPHY ♀

Mammography is the reference radiological exam for organised breast cancer screening. It uses low-dose X-rays to look for masses, asymmetries or microcalcifications, sometimes before any clinical signs. Depending on breast density and clinical context, it may be complemented by ultrasound or other tests.

RETINAL OCT

OCT is contact-free, radiation-free optical imaging that provides cross-sectional views of the retina, macula and optic nerve. It measures, among other parameters, nerve fibre layer thickness and supports targeted screening or follow-up for glaucoma and macular diseases such as AMD or macular oedema, depending on the eye examination.

CARDIAC ULTRASOUND

A Doppler ultrasound that observes the heart in motion, in real time. It assesses the right and left chambers, ventricular function, heart muscle, pericardium, valves and proximal aorta, and estimates pulmonary pressures when measurements are contributive.

WHOLE-BODY ULTRASOUND

A radiation-free multiparametric ultrasound that explores, depending on the patient profile and acoustic windows, many accessible structures: thyroid and lymph node areas, carotids, abdominal aorta, liver, gallbladder and bile ducts, pancreas, spleen, kidneys, bladder, pelvis, uterus, ovaries or testes depending on sex, femoral axes and hernia orifices. It assesses shape, size and structure to look for possible abnormalities.

PELVIC ULTRASOUND ♀

A high-resolution pelvic ultrasound, performed transvaginally when indicated and accepted. It assesses the uterus, endometrium and ovaries to look for fibroids, ovarian cysts, endometrial abnormalities, fluid collections or masses, including in the absence of symptoms.

BREAST ULTRASOUND ♀

A radiation-free ultrasound that complements mammography when the context justifies it, especially in dense breasts or when an abnormality needs clarification. It helps distinguish cysts from solid masses and characterise some lesions not visible or insufficiently assessed on mammography alone.

The lists in this document are indicative and may be adjusted by the Zoï physician based on each member's medical profile.