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Ordering Provider:

EquiLife, LLC

Samples Received 07/08/2021

Report Date 07/16/2021

Saliva - 07/05/21 07:30

Samples Collected

Patient Name:

Patient Phone Number:

Gender Male	Height 5 ft 9 in	Waist 32 in	
DOB	Weight 183 lb	BMI 27.0	
TEST NAME	RESULTS 07/05/21		RANGE
Salivary Steroids			
Testosterone		92	44-148 pg/mL (Age Dependent)
DHEAS	6.1		2-23 ng/mL (Age Dependent)

<dI = Less than the detectable limit of the lab. N/A = Not applicable; 1 or more values used in this calculation is less than the detectable limit. H = High. L = Low.</p>

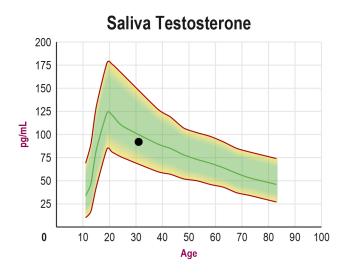
Therapies

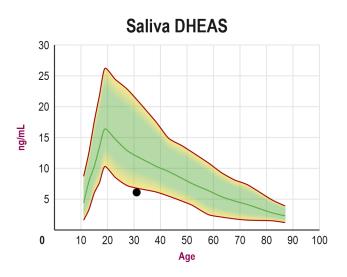
None Indicated

Graphs

Disclaimer: Graphs below represent averages for healthy individuals not using hormones. Supplementation ranges may be higher. Please see supplementation ranges and lab comments if results are higher or lower than expected.





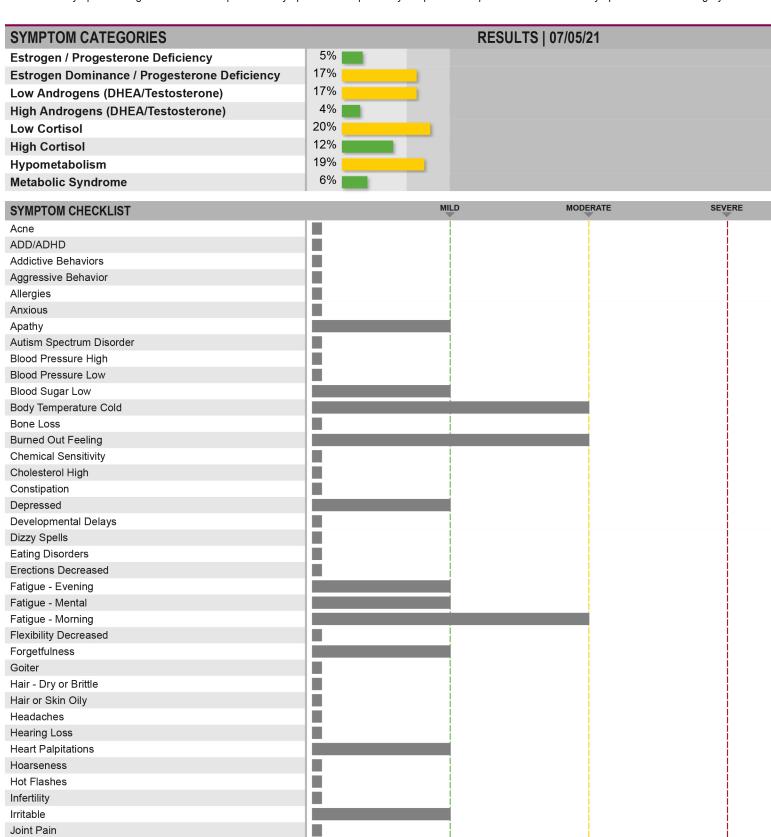


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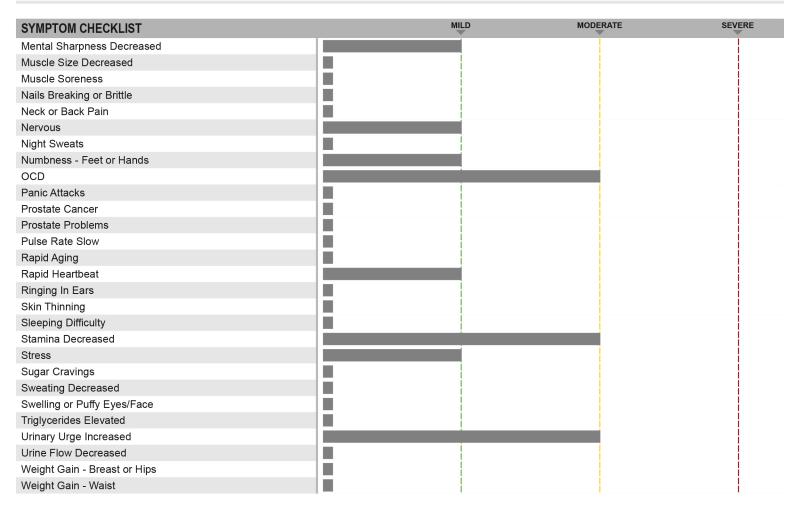
Libido Decreased

Mania

Disclaimer: Symptom Categories below show percent of symptoms self-reported by the patient compared to total available symptoms for each category.



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Lab Comments

Testosterone is within mid-normal range. In healthy males from youth to middle age testosterone levels usually range from about 80-120 pg/ml. Healthy testosterone levels drop to about 60-80 pg/ml in men > 60 years of age. Supplementation with physiological amounts of androgens usually raises testosterone to levels seen in young men. Testosterone ranges are age specific. Normal age-dependent testosterone levels are usually associated with few symptoms of androgen deficiency, however, in some individuals with other hormonal problems (e.g. low IGF1, low thyroid, low or high cortisol) symptoms can be similar to androgen deficiency.

DHEAS is within low-normal expected age range. Chronic low DHEAS may suggest HPA axis dysfunction, particularly if cortisol is also low and symptoms are indicative of low adrenal function. DHEAS is highest during the late teens to early twenties (10-20 ng/ml) and drops steadily with age to the lower end of range by age 70-80. Consider adrenal adaptogens or DHEA supplements if symptoms of androgen deficiency are problematic.