



Adrenal Hormone Report; saliva



Order: 200402-0082



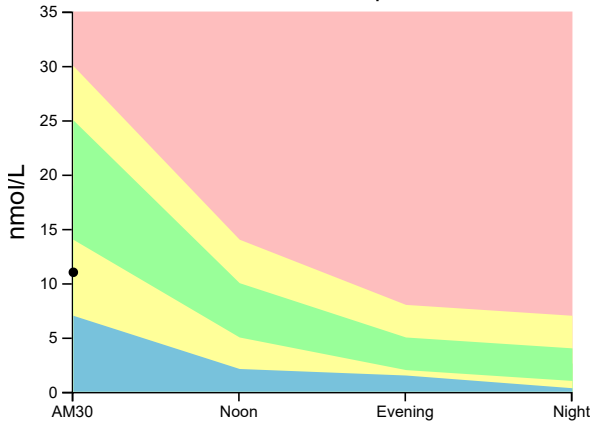
Regenerus Laboratories Ltd
Contact www.RegenerusLabs.com

Patient: Jane Doe
Id: SAMPLE
Age: 38 **DOB:** 03/01/1982
Sex: Female
Body Mass Index (BMI): 19.5
Menopausal Status: Pre-menopausal

Sample Collection **Date/Time**
Date Collected 03/20/2020
AM30 03/20/2020 07:40
Noon 03/20/2020 13:05
Evening 03/20/2020 18:00
Night 03/20/2020 22:30
Date Received 04/02/2020
Date Reported 04/06/2020

Analyte	Result	Unit	L	WRI	H	Optimal Range	Reference Interval
Cortisol AM30	11	nmol/L		◆		14.0 – 25.0	7.0 – 30.0
DHEA*	213	pg/mL		◆			106 – 300

Cortisol Graph



Hormone Comments:

- The AM cortisol level is suboptimal. Additional cortisol testing is a consideration.

Notes:

The current samples are routinely held three weeks from receipt for additional testing.

RI= Reference Interval, L (blue)= Low (below RI), WRI (green)= Within RI (optimal), WRI (yellow)= Within RI (not optimal), H (red)= High (above RI)

*This test was developed and its performance characteristics determined by Doctor's Data Laboratories in a manner consistent with CLIA requirements. The U. S. Food and Drug Administration (FDA) has not approved or cleared this test; however, FDA clearance is not currently required for clinical use. The results are not intended to be used as a sole means for clinical diagnosis or patient management decisions.

Methodology: Enzyme Immunoassay



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Analyte	Result	Unit	L	WRI	H	Reference Interval	Supplementation Range**
Estradiol (E2)	1.2	pg/mL		◆		0.6 – 4.5	1.0 – 6.0
Progesterone (Pg)	82	pg/mL	↓			127 – 446	400 – 4000
Pg/E2 Ratio†	68.3		↓			≥ 200	≥ 200
Testosterone	36	pg/mL		◆		6 – 49	25 – 60
DHEA*	213	pg/mL		◆		106 – 300	

Hormone Comments:

- Progesterone to estradiol (Pg/E2) ratio is consistent with progesterone insufficiency (estrogen dominance). Supplementation with progesterone to correct this relative deficiency is a consideration depending on the clinical picture. Note: The progesterone level is suggestive of an anovulatory cycle or luteal phase defect. Query BCP usage.
- The upper range testosterone is suggestive of PCOS, metabolic syndrome (insulin resistance) or exogenous exposure. Serum vitamin D, hemoglobin A1c and insulin testing may be warranted.
- Supplementation reference ranges are based on adherence to proper dosage interval(s). Please visit <https://www.DoctorsData.com/Resources/BestPractices.pdf> for more information.

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†The Pg/E2 ratio is an optimal range established based on clinical observation. Reference intervals for Pg/E2 ratio have not been established in males and post-menopausal women who are not supplementing with progesterone and/or estrogens.

**If supplementation is reported then the supplementation ranges will be graphed. The supplementation ranges depicted are for informational purposes only and were derived from a cohort of adult men and women utilizing physiologic transdermal bioidentical hormone therapy.

Methodology: Enzyme Immunoassay