Adrenal Hormone Report; saliva

Order: Sample Report
Client #: 12345
Doctor: Sample Doctor
Doctor's Data, Inc.
3755 Illinois Ave.
St. Charles, IL 60174 USA

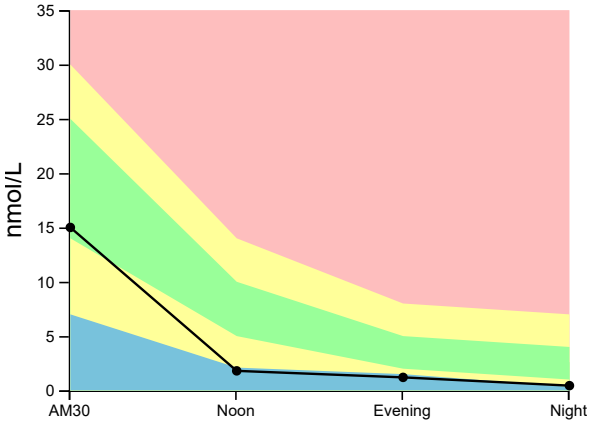
Patient: Sample Patient
Id: P9999999999
Age: 39 **DOB:** 01/01/1980
Sex: Female
Body Mass Index (BMI): 17.5

Menopausal Status: Pre-menopausal

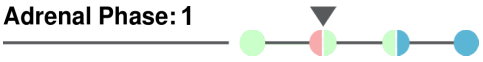
Sample Collection	Date/Time
Date Collected	10/21/2019
AM30	10/21/2019 08:15
Noon	10/21/2019 12:35
Evening	10/21/2019 18:05
Night	10/21/2019 22:32
Date Received	10/24/2019
Date Reported	10/29/2019

Analyte	Result	Unit	L	WRI	H	Optimal Range	Reference Interval
Cortisol AM30	15	nmol/L		◆		14.0 – 25.0	7.0 – 30.0
Cortisol Noon	1.8	nmol/L	↓			5.0 – 10.0	2.1 – 14.0
Cortisol Evening	1.2	nmol/L	↓			2.0 – 5.0	1.5 – 8.0
Cortisol Night	0.44	nmol/L		◆		1.0 – 4.0	0.33 – 7.0
DHEA*	15	pg/mL	↓				106 – 300

Cortisol Graph



Adrenal Phase: 1



Hormone Comments:

- AM cortisol level appears adequate, although the suboptimal diurnal cortisol pattern is suggestive of early (Phase 1) HPA axis (adrenal gland) dysfunction.
- DHEA levels typically decline with age and the level measured here is below the reference range. Note: Supplementation with DHEA may increase testosterone and/or estradiol levels.

Notes:
RI= Reference Interval, L (blue)= Low (below RI), WRI (green)= Within RI (optimal), WRI (yellow)= Within RI (not optimal), H (red)= High (above RI)
The current samples are routinely held three weeks from receipt for additional testing.

*This test was developed and its performance characteristics determined by Doctor's Data, Inc. The FDA has not approved or cleared this test; however, FDA clearance or approval is not currently required for clinical use. The results are not intended to be used as the sole means for clinical diagnosis or patient management decisions.

Methodology: Enzyme Immunoassay

Hormone Report; saliva

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Analyte	Result	Unit	L	WRI	H	Reference Interval	Supplementation Range**
Estrone (E1)*	29.0	pg/mL		◆		< 35	
Estradiol (E2)	0.60	pg/mL		◆		0.6 – 4.5	1.0 – 6.0
Estriol (E3)*	<5.0	pg/mL	↓			7.5 – 66	45 – 680
EQ (E3 / (E1 + E2)) Ratio	0.17		↓			≥ 1.0	
Progesterone (Pg)	26	pg/mL	↓			127 – 446	400 – 4000
Pg/E2 Ratio†	43.3		↓			≥ 200	≥ 200
Testosterone	7	pg/mL		◆		6 – 49	25 – 60
DHEA*	15	pg/mL	↓			106 – 300	

Hormone Comments:

- Estrone and estradiol are within the reference ranges, however the Estrogen Quotient (EQ) is low. Estriol is less potent than the other estrogens and when present in sufficient quantities (as indicated by an optimal EQ) it plays an antagonistic role, and may govern the proliferative effects of estrone and estradiol. Estriol supplementation is a consideration to balance this quotient and reduce associated risks.
- Progesterone to estradiol (Pg/E2) ratio is consistent with progesterone insufficiency (estrogen dominance). Supplementation with topical progesterone to correct this deficiency is a consideration. Note: The progesterone level is suggestive of an anovulatory cycle, luteal phase failure or collection outside of luteal phase.
- DHEA levels typically decline with age and the level measured here is below the reference range. Note: Supplementation with DHEA may increase testosterone and/or estradiol levels.

Notes:
Estriol result confirmed via repeat analysis.
RI= Reference Interval, L (blue)= Low (below RI), WRI (green)= Within RI (optimal), WRI (yellow)= Within RI (not optimal), H (red)= High (above RI)
The current samples are routinely held three weeks from receipt for additional testing.

†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.

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**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