BEST PRACTICES FOR SPECIMEN COLLECTION

HORMONE AND URINARY METABOLITES ASSESSMENT PROFILE

The following collection recommendations are specific to Doctor's Data. Adhering to these recommendations ensures test results correlate with established reference ranges. *Never discontinue prescription medications without first consulting your provider.*

Hormone Supplementation	Timing of Last Supplementation
Topical, IM/SQ Injections, subcutaneous pellets, transdermal patches	Continue hormones based on your regular schedule
Vaginal	Discontinue 72 hours prior and during sample collection as this may directly contaminate the urine
Sublingual (dissolved under the tongue), Oral	Discontinue 72 hours prior and during sample collection
Cortisol/Hydrocortisone	Discontinue 4-5 days prior to sample collection to test endogenous secretion
Additional Considerations	
Glucocorticoid supplementation: Consult with your health care provider if you are taking glucocorticoids. Certain medications such as asthma inhalers and anti-itch creams contain cortisol and can impact cortisol/cortisone levels.	
24 hours prior and during collection: avoid alcohol, caffeine, tobacco or nicotine-containing products and strenuous exercise.	
On day 1 of collection, do not drink more than 4 liters of fluids.	
If you are also testing Neurotransmitters from the same urine samples	
24 hours prior and during collection: avoid avocados, eggplant, tomatoes, bananas, melons, pineapple, grapefruit, plums, fruit juice, nuts, nut butters, wine, cheese, rice, and chocolate.	
Day of both collections: it is recommended to avoid all supplements and medications until after all samples have been collected (including those that regulate allergy, mood, sleep, pain and inflammation)	

Collection Schedule

Menopausal Status	When to Collect Samples
Premenopausal, regular cycles (28 days)	Days 19-23 (Mid luteal phase)
Premenopausal, regular cycles longer than 28 days	Count back 7-9 days from usual end of cycle, at a minimum of day 19 (Luteal phase is almost always 14-16 days long)
Perimenopausal, irregular cycles with ovulation pains	7 days after ovulation
Perimenopausal, irregular cycles, no ovulation pains	Test after day 14, and before day 1 of next cycle
Premenopausal, irregular cycle shorter than 14 days	Days 7-9
When there is no point of reference, e.g. 60 days	Collect samples; freeze; if no period within 2 days then mail the sample
Men and postmenopausal women	Anytime

Schedule	When to Collect Sample
Night shift workers	Shift workers should adapt the collection times in accordance with their own sleep / wake schedule.
Frequent travelers (especially across multiple time zones)	If possible, collect samples after 2 weeks at home on regular schedule.

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Filling out the Hormone Use Survey:

Note: Some pens can bleed through paper, obscuring information entered on the back page. Please use a ball point pen when filling out this document. Fill out all 3 sections. It is important that you make note of any hormone supplementation you are using in section 1. Make note of the last time you used that particular hormone in section 2, and how often you use the hormone in section 3.

Conjugated Estrogens (i.e. Premarin)	**Estradiol + Progestin** (i.e. birth control pills, HRT)	**Progestin only** (i.e. minipill, Depo injection, IUD)	**Estrone** (E1)	**Estradiol** (E2)	**Estriol** (E3)	**Progesterone** (P4)	**Testosterone** (T)	**DHEA**	**Corticosteroid** (i.e. cortisol, hydrocortisone, prednisone)	**Pregnenolone**	**Thyroid**	**Melatonin**

Conjugated Estrogens - This refers primarily to Premarin (conjugated equine estrogen). It is not referring to bioidentical estradiol or Bi-Est.

Estradiol + Progestin - This column refers to birth control pills, contraceptive rings, or conventional hormone replacement therapy that includes an estrogen and a progestin (synthetic progestogen). If you are taking bioidentical progesterone and estradiol, please do not mark this column.

Progestin only - This column refers to contraceptive options that are progestin only, i.e. hormonal IUDs, Depo injections, or the minipill. If you are taking bioidentical progesterone, do not mark this column.

Estrone (E1) - Rarely prescribed, estrone is a component of tri-est formulations.

Estradiol (E2) - This refers to bioidentical estradiol, one component of Bi-Est. This is usually administered in patches or creams, but is sometimes given orally or via vaginal suppository.

Estriol (E3) - A component of Bi-Est. Typically given in a cream, vaginal suppository, or rarely a pill.

Progesterone (P4) - Mark this column if you take bioidentical progesterone. Progesterone can be administered orally, sublingually, or in a cream. If you are getting a synthetic progestin in a birth control pill, or you use an IUD, do not mark this column.

Testosterone (T) - If you take testosterone of any kind (oral, patch, cream, or injection), mark it here.
DHEA - Fill in if you are using DHEA or 7-keto DHEA.

Corticosteroid - Glucocorticoid medications like hydrocortisone, Prednisone, Dexamethasone, etc. are noted here, as are hydrocortisone creams used for skin conditions. Asthma inhalers can contain corticosteroids, and rarely lip balm.

Pregnanolone - Any pregnanolone containing product should be noted here.

Thyroid - If you take T4, T3, or glandular thyroid, please make note of it here.

Melatonin - Any melatonin containing product can be noted in this column.

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HORMONE AND URINARY METABOLITES ASSESSMENT PROFILE

Doctor's Data has developed a urinary hormone test that provides the most meaningful and reliable results using an easy to collect 24-hr representative urine collection method.

Hormones are known to have cyclic variability during time periods and can also be affected by physical variables such as exercise, stress, and food. It is important to provide a urine sample that is collected in a manner to provide the most clinically useful information.

1. What if I can't wait until the suggested time to urinate?
If you need to urinate 1-2 hrs before the suggested time, it is appropriate to collect that void. Collecting a sample from a full bladder gives the most accurate information, so try to wait as long as possible (at least 2 hours) until the next void, and attempt to correspond to the next collection time on the instructions.

2. What if I can't urinate at the times requested?
Drink a glass or two of water and collect the sample once you are able to urinate.

3. What do I do if I miss a timed collection?
If you miss a sample, you may always collect the following day at that specific time.

4. Do I have to collect the samples in order?
No, if all the samples are collected at the appropriate times listed on the instructions, the order of collection doesn't matter. It is important to note that each tube does have a corresponding number. If you start with a sample other than #1, please keep this in mind and use the appropriate tube for the corresponding collection time.

5. Do I have to collect all urine from the day?
No, there will be urine during the day that will not be included. However, during the time period that urine is being collected it is important to collect urine from a full bladder as much as possible. It is more important to get a good representation of urine than it is to collect at a precise time.

6. Do I need to collect all four or five samples?
We highly recommend that all four collections be included. A minimum of 3 collections are required and these must include the waking and post-waking. The 5th midsleep tube is only needed if you wake to urinate during the night.

7. What if I wake up more than one time during my sleep?
During the period that urine is being collected, it is important to collect urine from a full bladder as much as possible. If you tend to wake multiple times in the night to urinate, please see this chart for guidance on when to collect or discard urine.

Wake to urinate after 3-4 hours	Wake again to urinate, and 2+ hours of sleep remain	Wake again to urinate, within 1-2 hours of normal wake time*
Collect in Midsleep (grey) tube	Discard urine	Collect in Waking (pink) tube

* It is important to attempt to wait for at least 2 hrs after getting out of bed to collect the next urine sample (post-waking).

Continued on next page

8. What if my sleep schedule is abnormal (night shift worker)?
Your collections should correspond to your pattern of eating and sleeping. The bedtime sample is collected before you go to sleep for your longest stretch of sleep and the waking is right after this sleeping period. The dinnertime should be collected 4-7 hours before going to sleep.

9. Do I need to stop taking my hormones for this test?
Depending on the route of administration, hormones may need to be discontinued for a period of time. Please refer to either the instructions that come with each kit or the recommendations listed on page 1.

10. What if the preservative is lost from the tube? Can I still use it?
Doctor's Data takes the extra step of adding preservative to tubes to stabilize the urine, but in fact freezing alone is appropriate for stabilization. If spillage of preservative occurs, you may continue to add the urine to the tube and submit to the lab. Urine should be stored in the freezer and sent back to Doctor's Data with the enclosed frozen ice pack as soon as possible. If the preservative comes in contact with skin, wash the area with cool, soapy water.

11. What is the minimum amount of time my samples need to be frozen before returning to the laboratory?
4-6 hours.

12. Is urinary hormone and metabolite testing appropriate for children?
This test is not meant for females not yet menstruating or males under the age of 12. To test children, salivary hormone testing may be a more appropriate medium.

13. Can urinary hormone and metabolite testing be utilized in patients with kidney disease?
Many types of kidney disease can impact creatinine which directly affects test results. In cases such as this, a better option is salivary hormone testing.