



SALIVA TEST REPORT

Patient Name

Jane Doe

Patient ID

JD700618

Non-smoker

BMI 27**Waist** 34 in**DOB**

6/18/1970 (48 yrs.)

Report Date and Time

1/16/2019 12:00

Medications

Synthroid, Valtrex, Lysine, Wellbutrin, Liothyronine, Allertec, Selenium, Vitamin Supplements.

Gender

F

Received Date and Time

1/9/2019 15:00

Menopausal Status

Postmenopausal

Specimen Collection Date and Time

Saliva Morning 1/6/2019 07:42

Saliva Noon 1/6/2019 12:00

Saliva Evening 1/6/2019 16:00

Saliva Night 1/6/2019 21:00

Provider ID: 0000

Doctor T

17387 63rd Ave

Lake Oswego, OR 97035

Ph: xxx-xxx-xxxx

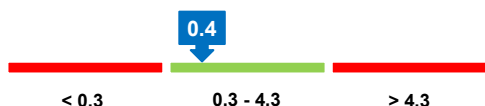
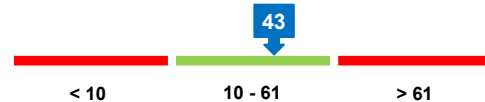
YOUR TEST RESULTS

Estradiol (pg/mL)

Normal Range

Low or High Range

Your Levels

**Progesterone (pg/mL)****Pg/E2 Ratio*****Testosterone (pg/mL)****DHEA (pg/mL)****Cortisol Morning (ng/ml)**

*Only when Estradiol is within normal premenopausal range

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What do your hormone results mean?

ESTRADIOL

Estradiol acts mainly as a growth hormone for the reproductive structures in females. In addition, estradiol works in conjunction with progesterone during the menstrual cycle and pregnancy. Low estrogen levels can cause low libido or diminished sex drive and too much estrogens can cause symptoms of estrogen dominance. In males, estradiol is involved in sperm maturation and also helps to maintain a healthy libido.

Estradiol has a significant role in maintaining healthy bone growth and improving blood flow in coronary arteries in addition to offering neuroprotective effects. Estrogens have been known to contribute to risk of breast cancer as well as some non-cancerous conditions like endometriosis and uterine fibroids.

PROGESTERONE

Progesterone in females is known to be involved in maintaining normal menstrual cycles and early stages of pregnancy. Low levels of progesterone can cause abnormal cycles or conception problems. Low progesterone levels could also result in higher estrogen levels, which has been known to decrease sex drive and cause weight gain. High progesterone levels have been known to be responsible for symptoms like mood swings, bloating, breast tenderness.

In men, progesterone acts as a precursor to testosterone. As men age, the testosterone levels decrease, the estradiol increases, and progesterone levels decline. Low progesterone levels in men can cause problems like weight gain, low sex drive, hair loss, depression or erectile dysfunction.

RATIO OF PROGESTERONE/ESTRADIOL

The ideal ratio of progesterone/estradiol ranges from 100-500 in premenopausal women, and 150-1000 in pre and postmenopausal women supplementing with oral or topical progesterone (excludes postmenopausal women with low estrogen levels and women on synthetic hormones (oral contraceptives or conventional hormone replacement therapy-HRT).

TESTOSTERONE

Testosterone has important role in maintaining bone strength, muscle mass and energy level. In women, testosterone contributes to sex drive or libido. Menopause causes significant decline in the testosterone levels. In men, testosterone is responsible for growth and development of sexual characteristics, facial and body hair, increased sexual drive and sperm production.

Low testosterone levels can result in conditions like hair loss, reduced muscle mass, hot flashes, depression and increased breast size. High testosterone levels have been linked with aggressive behavior, acne, low sperm count, liver disease and heart muscle damage.

DHEA

DHEA is produced by the adrenal glands and is a precursor to both testosterone and estrogens. DHEA is also a neurohormone as small quantities are produced in the brain. It has a broad spectrum of benefits including improved energy, mood, memory, increased testosterone levels, enhanced libido and immune function. In men, low DHEA levels can cause low libido, reduced muscle mass and strength, depression, fatigue and compromised immune function. In women, DHEA is known to balance other hormones like estrogens, progesterone and testosterone. Low DHEA levels can cause weight gain, depression, fatigue and low libido.

CORTISOL

In addition to being called as "the stress hormone", cortisol helps in proper glucose metabolism, converting sugars into energy. High cortisol levels in men have been associated with hyperglycemia, weight gain, compromised immune function and high blood pressure. Cortisol imbalance is known to result in conditions like irritability, fatigue, depression, foggy thinking, weight gain and bone loss. Stress reducing activities including meditation and breathing exercise have been recommended to relieve stress levels and avoid premature aging.

BLOOD SPOT TEST REPORT

Patient Name Jane Doe	Patient ID JD700618	Non-smoker BMI 27 Waist 34 in
DOB 6/18/1970 (48 yrs.)	Report Date and Time 1/16/2019 12:00	Medications Synthroid, Valtrex, Lysine, Wellbutrin, Liothyronine, Allertec, Selenium, Vitamin Supplements.
Gender F	Received Date and Time 1/9/2019 15:00	
Systolic blood pressure 83 mmHg	Specimen Collection Date and Time Blood Spot 1/9/2019 7:00	
Menopausal Status Postmenopausal	Hours of Fasting 7.00	Provider ID: 0000 Doctor T 17387 63rd Ave Lake Oswego, OR 97035 Ph: xxx-xxx-xxxx
	Family History of Heart Disease Yes Diabetes Yes Cancer Yes	

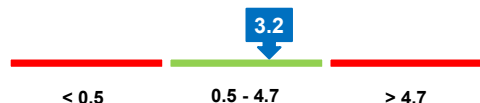
YOUR TEST RESULTS

TSH (μIU/mL)

Normal Range

Low or High Range

Your Levels



HbA1c (%)



hs-CRP (mg/L)



25- OH Vitamin D, Total (ng/mL)



What do your test results mean?

Thyroid-Stimulating Hormone (TSH):

In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels are elevated. In primary hyperthyroidism, TSH levels are low. The ability to quantitative circulating levels of TSH is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low or normal.

Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroidism, respectively.

Hemoglobin A1c (HbA1c), is a form of hemoglobin (a blood pigment that carries oxygen) that is bound to glucose. HbA1c levels are reflective of blood glucose levels over the past three months and do

not reflect daily ups and downs of blood glucose. High HbA1c levels indicate poorer control of diabetes than levels in the normal range. The normal range for HbA1c is less than 5.7%. Value between 5.7% and 6.4% signals prediabetes. For known diabetics, a value <7% indicates that their diabetes is well controlled.

HbA1c targets should be individualized based on duration of diabetes, age, comorbidities, and other considerations..

hs-C-Reactive Protein (hs-CRP): Blood measurements of hs-CRP are often performed to assess the risk of future heart disease. C-Reactive protein (CRP) is produced by the liver and elevated CRP levels can be measured in blood in response to inflammation. High-sensitivity CRP (hs-CRP) is more precise than standard CRP when measuring baseline (ie, normal) concentrations and enables a measure of chronic inflammation. Atherosclerosis is an inflammatory disease and hs-CRP is known as a biomarker of atherosclerotic cardiovascular disease risk.

25-OH Vitamin D, Total. Vitamin D is essential for bone strength as it helps in calcium absorption from diet. Traditionally, vitamin D deficiency has been known to cause rickets disease, but several studies have indicated that low vitamin D levels have also been associated with higher risk of cardiovascular disease, cognitive impairment in older adults, asthma in children and cancer. Adequate levels of vitamin D could play a role in the prevention and treatment of a number of different conditions, including type 1 and type 2 diabetes, hypertension, glucose intolerance, and multiple sclerosis.

Inflammation is involved in many chronic diseases and there is a concern that vitamin D deficiency has a role in activating the inflammatory processes. Research has shown that vitamin D is needed for optimal immune performance and lowers inflammation.

This report is only for information purpose and does not provide any diagnosis or treatment. There may be many other risk factors that must be considered for a complete assessment of your health. Please consult your healthcare provider to discuss your results and any questions you may have about your wellness. This test was developed and its performance characteristics determined by AYUMETRIX and Purity. It has not been cleared or approved by the FDA. The laboratory is regulated under CLIA as qualified to perform high-complexity testing.

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