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Accession # 12-eFHP

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DIAGNOS-TECHS, INC.
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Results For:
 FEMALE PATIENT

Age: 35

Gender: Female

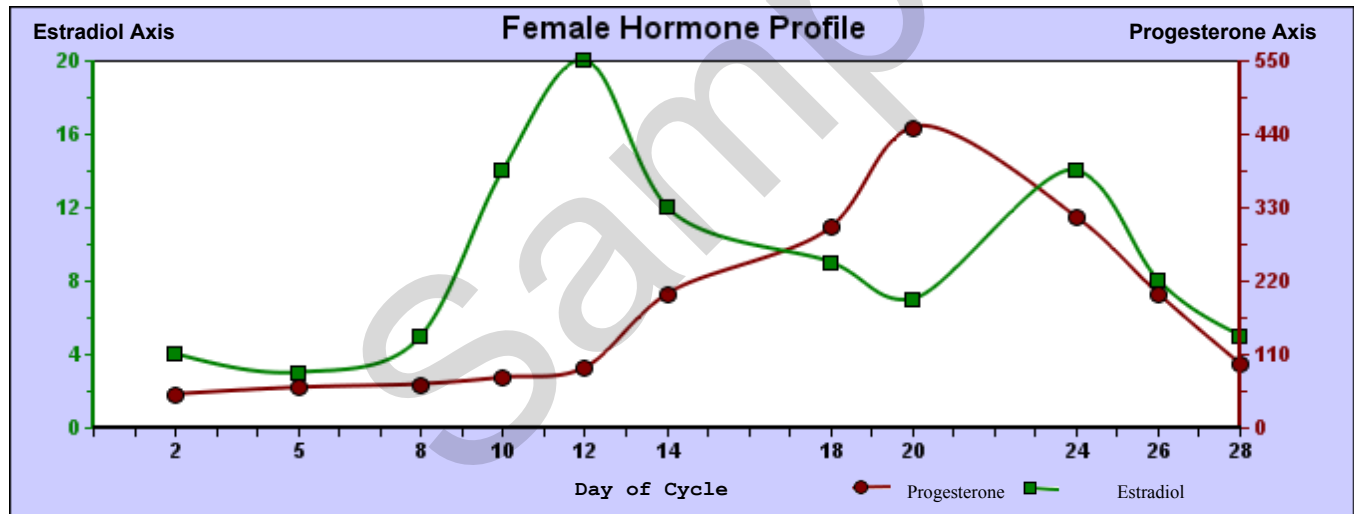
Patient's Tel:

Specimen Collected: 12/24/2012

eFHP Expanded Female Hormone Panel

Day of Cycle	Day	2	5	8	10	12	14	18	20	24	26	28
Estradiol	pg/ml	4	3	5	14	20	12	9	7	14	8	5
Progesterone	pg/ml	50	60	65	75	90	200	300	450	315	200	95

Cycle Information	Start	11/27/2011	Ranges	Phase	Estradiol	Progesterone
	End	12/24/2011		Follicular	2 - 10 pg/ml	20 - 100 pg/ml
	Length	27		Preovulatory	7 - 25 pg/ml	
			Luteal	3 - 16 pg/ml	65 - 500 pg/ml	

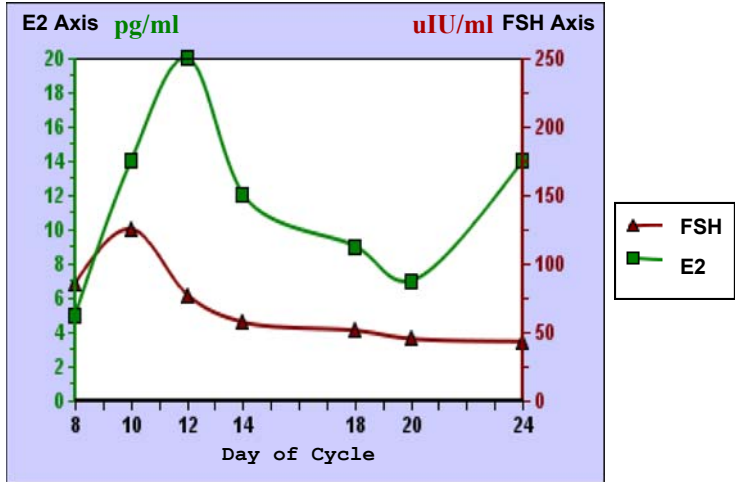


Test	Description	Result	Ref Values
DHEA	Dehydroepiandrosterone Free [DHEA + DHEA-S]	Pooled Value 10 Normal	Adults (M/F): 3-10 ng/ml
TTF	Free Testosterone	Cycle Average 68 Elevated	Borderline: 6-9 pg/ml Normal: 10-38 pg/ml

In the absence of exogenous hormone intake, elevated Testosterone in women is suggestive of ovarian cysts.

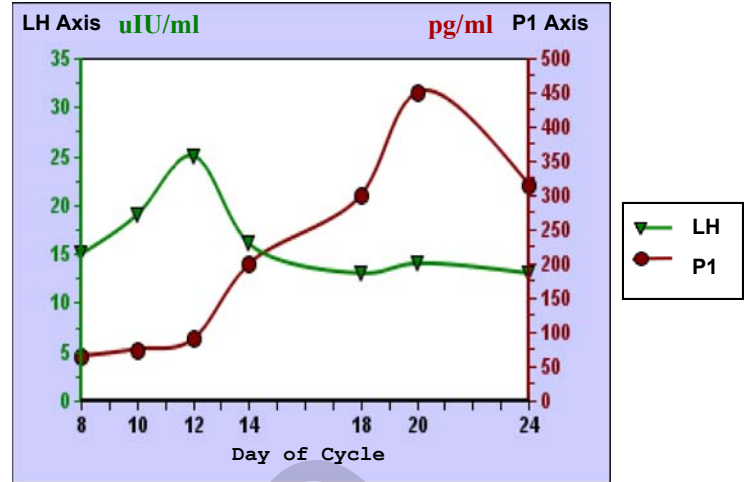
FSH and E2 Surge Analysis

Cycle Day	8	10	12	14	18	20	24
Estradiol	5	14	20	12	9	7	14
FSH	86	125	77	57	51	45	43



LH and P1 Surge Analysis

Day of cycle	8	10	12	14	18	20	24
Progesterone	65	75	90	200	300	450	315
LH	15	19	25	16	13	14	13



The FSH Surge must attain a certain level (amplitude) to mediate maturity and selection of the dominant follicle, and promote optimal conversion of androgen to estrogen.

Patient Value: **2.28** Range: 2.3 - 4.7

The FSH Output reflects the pituitary capacity to release FSH in the periovulatory time window. This biomarker is an index for the NET effect of all higher centers and other hormones combined on FSH production. The FSH output tends to increase with age and also varies with diet, stress level, hormone and medication use ...

Patient Value: **484.00** Range: Variable

The Follicle Response Index is a biomarker of the quality of follicular response to FSH stimulation. Lower values reflect reduced ovarian sensitivity to FSH. The lowest sensitivity occurs at menopause and on.

Patient Value: **1.35** Range: 0.5 - 2.3

The LH Surge must attain a certain threshold to induce, and trigger ovulation to stimulate the formation of a viable corpus luteum for progesterone production.

Patient Value: **1.76** Range: 3.3 - 6.6

The LH Output reflects the pituitary capacity to release LH at ovulation time and in the early luteal phase. The timing and output of LH reflects the net effect of all influences (diet, stress, hormones, age ... etc) on this gonadotropin.

Patient Value: **115.00** Range: Variable

The Corpus Luteum Response Index reflects the degree of corpus luteum responsiveness to LH measured as luteal progesterone output. Corpus size, differentiation + sensitivity determine the response. LH increases with age as ovarian response blunts.

Patient Value: **42.03** Range: 8 - 27

Please Note: Beginning August 28, 2010, Diagnos-Techs has updated reference ranges for testosterone and estradiol using more advanced salivary tests. New reference ranges have been established according to the latest CLSI guidelines.

Example of Restoration Plan:

CONSIDER USE OF GRADUATED PROGESTERONE SUPPLEMENTS FROM AROUND DAY 16 THROUGH END OF CYCLE.

TYPICAL EXAMPLE OF ORAL MICRONIZED PROGESTERONE AUGMENTATION - AM & PM

DAYS 16 TO 18 B.I.D. 50-75 MG

DAYS 19 TO 21 B.I.D. 75 MG

DAYS 22 TO 23 B.I.D. 50-75 MG

DAYS 24 TO 25 B.I.D. 35-50 MG

DAYS 26 TO 27 B.I.D. 25-35 MG

N.B. TRANSMUCOSAL (e.g. SUBLINGUAL) DOSING IS 1/2 TO 2/3 OF ORAL DOSING.

Diagnosis Code: Not Provided To The Lab.

Please Note: All examples of patient treatment or therapy are for illustrative and/or educational purpose. Use this report in context of the clinical picture and patient history before initiating hormone or other therapies or recommendations.

COURTESY INTERPRETATION of test and technical support are available upon request, to Physician Only

Diagnos-Techs, Inc.

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Accession # 12-eFHP

Cycling Female Hormone Panel

Qualitative Patient Report For: FEMALE PATIENT

This Report not Applicable in Cases of Deviation off Recommended Collection Schedule, or Hormone Overdosing.

Description:

This hormone panel maps the changes in estrogen and progesterone through out your cycle. It also provides your cycle average for both DHEA and Testosterone hormones. The expanded version of the panel, when ordered, will provide you with additional information on how well your brain hormones, FSH and LH, are regulating your ovaries.

What do my results tell me? Your results provide information about 3 important aspects of your hormone cycle.

I. Time Elements

- * Your cycle length was reported as 27 days.
- * The first part of the cycle before egg release was 13 days.
In this phase (Follicular) the egg matures and the various tissues are primed with estrogen from the ovary to prepare for progesterone exposure in the second half of the cycle.
- * Your estrogen priming is normal.
- * Ovulation: Your cycle showed an ovulation between days 12 and 14. Ovulation is the release of an egg
Your Luteal Phase, 2nd half of cycle, starts with ovulation
The luteal phase of your cycle was Normal with a duration of 14 days.

Notes: In the 2nd half of your cycle several things happen:

- The ovaries are prompted by the brain to produce progesterone.
- The uterus lining changes under the influence of progesterone.
- The recruitment of underdeveloped eggs for the next cycle takes place.
- The balance of progesterone to estrogen plays an important role in cognitive, mood, sleep and other functions.

II. Your Individual Hormones

Your Progesterone State

Following ovulation the amount of progesterone released in the second half of your cycle seems sufficient.

Your Estrogen State

The estrogen production by your ovaries is normal. The tissue exposure to estrogen in the first half of the cycle (Estrogen priming) appears normal thus allowing a more optimal progesterone effect to follow in the second half of your cycle.

Your DHEA Level

The DHEA value on your report is derived from several samples you submitted, and can be considered a cycle average. Your average DHEA value is 10 ng/ml. Reference Range: 3-10 ng/ml

Your Testosterone Level

The testosterone value reported reflects the average concentration of several specimens submitted.

Your average testosterone value is 68 pg/ml. The borderline range is 6-9 pg/ml, normal is 10-38 pg/ml.

III. Progesterone To Estrogen Balance

The balance of hormones in the luteal phase is acceptable.

Course of Action

Your health care provider may use the Data in the quantitative report section to construct your treatment plan.

Please note most hormone treatments have gradual and cumulative effects. Synchronizing the treatment plan with your hormone patterns as shown in this report helps insure a logical, gentle and body-harmonized approach.