



TEST RESULTS:  
**Comprehensive Hormone Plus Panel**



**Report Number:**  
09-999

**Provider:**  
Center for Acme Health  
76453 SW Hormone Ave  
Overland Park, KS 66212

**Patient Info:**  
David Sample

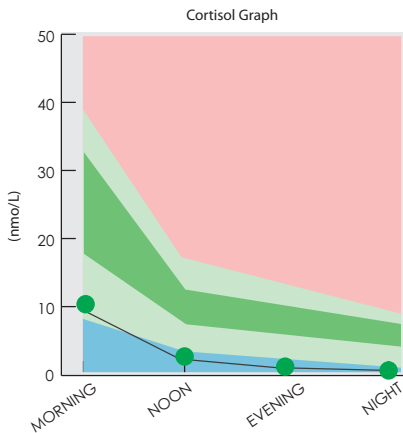
**Age:** 46    **Gender:** M

**Menopausal Status:**

2468 SW TESTING ST  
KANSAS CITY, MO 64515  
Phone: Not available

Sample Collection	Date/Time
Morning	06/18/2012 0730
Noon	06/18/2012 1130
Evening	06/18/2012 1500
Night	06/18/2012 1940
Samples Arrived	06/19/2012
Results Reported	06/21/2012

Test	Result	Units	L	WR	H	Reference Ranges
<b>HORMONES</b>						
Estrone [E1]		pg/ml				
Estradiol [E2]	<1.00	pg/ml		◆		<2.5
Estriol [E3]		pg/ml				
EQ (E3/(E1 + E2))						
Progesterone	42.92	pg/ml		◆		<94
Ratio of Pg/E2	42.92		↓			200-300
Testosterone	67.89	pg/ml		◆		30.1-142.5
<b>ADRENALS</b>						
DHEA	137.91	pg/ml		◆		137-336
Cortisol Morning	11.52	pg/ml		◆		5.1-40.2; Optimal Range: 18-35*
Cortisol Noon	3.91	pg/ml		◆		2.1-15.7; Optimal Range: 6-12*
Cortisol Evening	2.01	pg/ml		◆		1.8-12.; Optimal Range: 4-8*
Cortisol Night	1.15	pg/ml		◆		0.9-9.2; Optimal Range: 2-6*



**Hormone Interpretations:**

- The low Pg/E2 ratio and reported prostate gland related symptoms are consistent with estrogen dominance, which may increase the risk of prostate gland enlargement and cancer. Supplementation with topical progesterone to correct this relative deficiency is a consideration.
- The reported symptoms and suboptimal testosterone level are consistent with metabolic syndrome (insulin resistance) and androgen deficiency. Fasting blood sugar and insulin levels may be warranted. Boosting the testosterone level is a consideration.
- The suboptimal diurnal cortisol pattern and reported symptoms are consistent with evolving (Phase 2) adrenal gland fatigue (hypoadrenia).

Adrenal Phase: 2



**Notes:**

L=Low (below reference range)    WR=Within Range (within reference range)    H= High (above reference range)

\* DHEA, Testosterone and Estriol results are for investigational use only

\* Apply only when all four cortisols are measured. Clinical interpretations may override these generalized optimal reference ranges.

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Medical Director