

Accession: 25-AASI-5

Phone: 1-800-878-3787 Fax: 1-425-251-0637

> DIAGNOSTECHS, INC 840 S 333rd St Federal Way, WA 98003

Received: 4/16/2025 Completed: 4/30/2025 Reported: 4/30/2025

Results For: SAMPLE REPORT, FEMALE PATIE	NT -
Age: 37 DOB: 12/5/1987 Sex: F	
Patient's Tel:	
Ref. ID:	
Specimen Collected: 4/14/2025	

ASI - Adrenal Stress Index (Expanded) - Saliva

Test	Description	Result		Ref Values	Circadian Cortisol Profile
ТАР	Cortisol rhythm (saliva)			Adults:	
	06:00 - 08:00 AM	28	High	13-24 nM	30
	11:00 - 1:00 PM	11	High	5-10 nM	25
	04:00 - 05:00 PM	4	Normal	3-8 nM	
	10:00 - Midnight	5	High	1-4 nM	(¥ 20] 0 : : : : : : : : : : : : :
	02:00 – 04:00 AM	11	High	1-10 nM	
	Total Cortisol Output:	59		23-56 nM	
The Total Cortisol Output is the sum of all cortisol values. Elevated value indicate hypercortisolism or exogenous exposure, and low values suggest					ay 5
	indicate hypercortisolism o	or exogeno	0		

adrenal hypofunction.

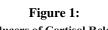
Figure 1:

The cortisol inducers fall into five broad categories shown in the adjacent flowchart. For optimization of the hypothalamic-pituitary-adrenal (HPA) axis, all cortisol inducers should be examined and addressed.

Remarks:

An elevated morning/night cortisol value may be associated with insomnia, and may be the result of a stress response to an emotional or mental situation, nocturnal hypoglycemia, or chronic pain/inflammation.

An elevated noon/afternoon cortisol value may be caused by emotional or mental stress, hypoglycemia, or chronic pain/inflammation.



4 PM

Noon

Patient's Results

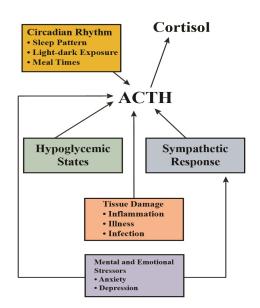
3 ÅM

Midnight

Reference Ranges

8 AM

Inducers of Cortisol Release Inducers below must be individually examined for successful restoration of adrenals



Accession: 25-AASI-5

Test	Description	Result	Ref Values
DHEA	Dehydroepiandrosterone [DHEA + DHEA-S] (saliva) Single Collection	2 Low	Adults: 3-10 ng/ml
	heory originally described by		

According to the general adaptation syndrome theory originally described by endocrinologist Hans Selye, there are three primary phases to the stress response: 1) alarm reaction, 2) resistance, and 3) exhaustion. Alternately, the stress response may be assessed as a series of stages (or "zones") according to the relative production of cortisol and DHEA. To assess this cortisol-DHEA correlation, the DHEA value is graphed against the average of the noon and afternoon cortisol values, allowing the patient to be characterized according to the zone into which he or she falls.

Figure 2 shows your Cortisol-DHEA correlation was in:

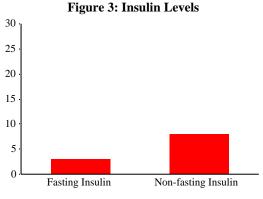
رلي Zone 4 - Depressed DHEA

Zone 4 reflects normal cortisol values with depressed DHEA values. In some cases, reduced DHEA production results from prolonged exposure to stressors. In these cases, the steroid precursor pregnenolone may be limited due to ongoing demand for adrenal hormone production. With continued exposure to stressors, adrenal hormone output may continue to decrease.

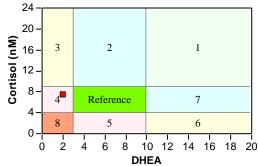
Test	Description	Result	Ref Values			
ISN	Insulin (saliva)					
	Fasting	3	Borderline Elevated: 3-11 uIU/mL Elevated: > 11 uIU/mL			
	Non-fasting	8	Borderline Elevated: 6-25 uIU/mL Elevated: > 25 uIU/mL			
	Insulin activity is affected by the stress response. Chronic stress with cortisol elevation may counteract the effects of insulin, and may lead to functional insulin resistance.					
	Fasting insulin levels may be elevated in cases of insulin resistance.					
	Non-fasting insulin levels vary with type of meal and time of sample collection. Non-fasting insulin levels may be elevated in cases of insulin resistance.					
	A normal (non-elevated) insulin test result does not rule out the possibility of					

insulin resistance or blood sugar dysregulation.

8. Adrenal hypofunction: low cort, DHEA



Insulin Levels



CORTISOL-DHEA CORRELATION SPECTRUM

1. Acute stress response: high cort, DHEA

2. Cortisol elevation

4. Depressed DHEA

5. Depressed cortisol

7. DHEA elevation

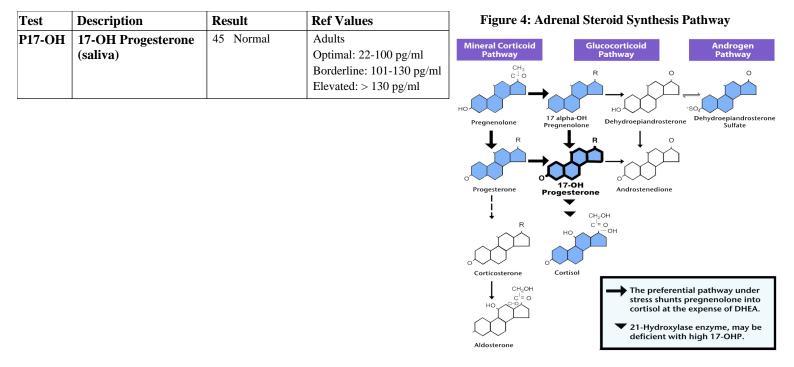
3. High cortisol, low DHEA

6. Low cortisol, high DHEA

DiagnosTechs, Inc.

Accession: 25-AASI-5

Continued Results For: SAMPLE REPORT, FEMALE PATIENT -



Test	Description	Result	Ref Values	General Information About sIgA
MB2S	Total salivary sIgA	tal salivary sIgA25 Borderline HighBorderline Low: 5-9 mg/dL Normal: 10-20 mg/dL Borderline High: 21-25 mg/dL		1. Secretory IgA (sIgA) is the predominant antibody found
				on mucosal membranes throughout the body. 2. sIgA exists as a dimer of two individual IgA combined
	Elevated sIgA may be as	ssociated with som	e autoimmune conditions,	with a secretory component that helps protect sIgA from
	diabetes, gingivitis, aphthous ulcers, and inflammatory conditions. In addition, acute physical or emotional stress can transiently raise values.			enzymatic degradation.
				3. One main function of sIgA is immune exclusion, binding
				to antigens and preventing their adherence and admittance
				into the body. Typically, sIgA moderates the mucosal

inflammatory response.

Test	Description	Result	Ref Values	Notes on Gliadin Ab Test
FI4	Gluten (gliadin) Ab,	16 Positive	Borderline: 13-15 U/ml	Gliadins and closely related proteins are found in wheat,
	sIgA (saliva)		Positive: > 15 U/ml	rye, barley and other grains. These proteins may trigger an
	A positive or borderline sIgA response to gliadin may warrant further			immune reaction in some individuals. Patients on a gluten-
diagnostic workup and/or dietary elimination trial in some individuals			•	free diet who have not been exposed to gluten for 3 months
			or longer should have a negative sIgA response to gliadin.	

Remarks: SAMPLE REPORT

Diagnosis Code(s): Not Provided To The Lab

Results and comments above are intended for informational purposes and should not be construed as medical advice. Use this report in context of the clinical picture and patient history before initiating any treatment.

For additional resources, including testing guidelines, result interpretation, and treatment protocols, please login to our website at www.diagnostechs.com and select Resources -> Provider Tools.

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