

SALIVA SPECIMENS: For any saliva tests, collect ALL 5 tubes.

Fax this page to 928-496-2050

Go to www.wellnesscenter.net for the form.

Content: 5 tubes for saliva collection.

What to avoid on collection day:

DO NOT EAT chocolate, onions, garlic, cabbage, cauliflower/ broccoli.

DO NOT DRINK coffee, tea, or caffeinated drinks (ex. coke, guarana)

DO NOT USE sublingual hormones or troches as of the night before collection. Avoid antacids, bismuth medications or mouth washes.

Consult with your physician for further instructions on continuing with your supplements & prescribed medications.

How to collect saliva: Menopause, Hormone & Lifestyle Monitor

Males:

Any day of the month.

Menstruating Women:

Start collecting specimens on any day from Day 19 to Day 22 of cycle (count from the first day of bleeding).

Non-Cycling Women:

If you are no longer cycling and in menopause, please take saliva specimen on any day from Day 1 to 3 of the new moon. (see calendar)

Collection Instructions:

- 30 minutes before collection, please do not eat or drink anything except water.
- Rinse mouth thoroughly with cold water 3-4 minutes prior to saliva collection.
- Following schedule below, collect saliva in each of the 5 blue cap tubes to fill 3/4 (three-quarters) or more excluding any foam. Take your time. Recap tubes and place in ziplock bag.

Collection Schedule:

Tubes are marked. DO NOT exchange.

PLEASE COMPLETE

Morning/Fasting.....7:00-9:00AM	Last Meal or Snack _____AM/PM
Noon.....11:00AM-1:00PM	Last Meal or Snack _____AM/PM
Afternoon.....3:00-5:00PM	Last Meal or Snack _____AM/PM
Evening.....7:00-9:00PM	Last Meal or Snack _____AM/PM
Midnight.....1:00-3:00AM	Last Meal or Snack _____AM/PM

- Mail same day or FREEZE specimen, and mail within 3 days. Follow express courier instructions

Date Collected: _____

Name: _____

- After filling out this document and *before enclosing with your specimens in the mailing kit*, please **FAX this second page only to 928-496-2050.**

PLEASE FILL CIRCLE IF

- You have gingivitis or bleeding gums.**
- Not on regular wake(day)/sleep(night) schedule.**

Potentially Interfering substances

Note: Use of Nizoral, Diflucan, or Progesterone and other hormone creams, gels and oral troches, may skew hormone results for 3-70 days depending on substance and preparation.

If you are already using any of the following substances, please note by checking the medication.

Sex Hormones:

- Progesterone
- Estrogens
- Testosterone
- DHEA

Steroids:

- Cortaid Cream
- Hydrocortisone
- Isocort
- Steroid Inhalants

Others: _____

Psychotropic Drugs:

- Antidepressants
- Anti-anxiety
- Amphetamines
- Lithium

Other Drugs:

- Botanicals
- B-Blockers
- Cold Medications
- Glandulars

Patient Remarks:

Check off the following that apply:

- Menopause Hysterectomy (Partial) Vasectomy

_____ Date of Last Period PMS Cancer

- I stopped using hormones for 10 days before this test
- I continued using hormones until the day before or during this test

Comments:

For quicker results, clearly print your e-mail address below:

MAILING INSTRUCTIONS FOR ALL SPECIMENS

In all States, Canada and Europe, ship specimens to our physical address shown to your right, using Postal Express mail, or any courier that will guarantee delivery within 2-3 days.

US Postal Priority mail is **not** a guaranteed 2-3 day delivery in all States of the Union.

EXPRESS COURIERS:

Diagnos-Techs, Inc.
Sample Processing
6620 South 192nd Pl. #J-106
Kent, WA 98032
Tel: 425-251-0596

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