

Patient Guide



**Estrogen Metabolism
Assessment #4213**



Abnormal kidney function or use of diuretics may influence test results.



Do not collect if there is blood in urine, including menstrual or other blood.

BEFORE YOU BEGIN

Activate This Test

Visit **gdx.net/activate** and enter the number found on the included activation label card.



STEP 1

Plan Your Collection

Use a calendar to plan your specimen collection. Ship Monday thru Friday and avoid US holidays which may cause delays.

Prior to Testing

Certain medications may influence results, however there are no known interfering medications. Do not change use of medications unless instructed to do so by your healthcare provider. Visit the test prep page for more detailed information on medications and supplements.

Day Before Testing

Consume no more than six 8-ounce glasses of fluid over the 24 hours before collection.

Premenopausal Women

If the goal is to evaluate ovulatory function, collect specimens between days 19 and 25 of the menstrual cycle.

Continued on next page

Plan Your Collection

Collect specimens on any day.

Synthetic, non-bioidentical hormones are not detected by the assays and testing is not recommended for these patients due to questionable clinical utility.

Specimen Collection

1. **Review** instructions and test prep information at **gdx.net/activate**.
2. Write your **date of birth** (DOB) and the **date of collection** on the labels provided. Attach completed labels to the urine tubes.

Activate Online and RETURN THIS CARD

download activation software or activate online
activation software available at www.gdn.net/activate

Activation Number
C442-660-880
See Your Activation Software

Activation Activation Number
0000-0000



Scan QR code or visit
gdn.net/activate

Below computerized lists in each question container

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Re-use this Activation Number for your words.

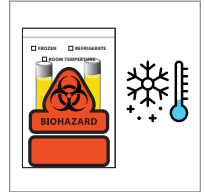
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Collect Urine

1. **Collect** your **first morning urination** in to a clean container (a large plastic cup works well). If you wake to urinate during the night, within 6 hours of when you typically wake for the day, collect your urine **in the cup**, refrigerate, then combine with your first morning urination collection.
2. **Stir**, then **transfer** urine from the cup to **each of the two tubes** using the pipette. Continue to add urine until each tube is nearly full.
3. **Recap** the tubes tightly and **shake**.
4. **Return** the tubes and absorbent pad to the biohazard bag and **freeze** for at least 24 hours. The freezer brick must be frozen at least 8 hours.



STEP 3

Return Collection Pack

1. Confirm that each tube has a **completed label attached** with **date of birth** and the **date of collection**. Place the **biohazard bag** with tubes inside the **collection box**.
2. Retain a copy of the **activation number** for future reference **using one of the three labels provided on the bottom of the activation label card**.
3. Visit **gdx.net/activate** to enter the date of your collection. When complete you will receive a **confirmation code**. Write the date of final collection and your confirmation code on the **activation label card** and place inside the box with the biohazard bags.
4. **Close the cardboard box** and place **inside the FedEx shipping bag**. Follow the shipping instructions provided.

