

# GENERAL INFORMATION

## COLLECTION INSTRUCTIONS

It is the **RESPONSIBILITY** of the physician to make sure all guidelines are met prior to patient receiving the test to ensure proper handling of sample.

Your consideration of these protocols will be greatly appreciated to ensure a timely return of the results to your office.

### NOTE:

The samples must be refrigerated until mailed. The day after the test is completed the sample must be priority mailed to Diagnos-Techs Inc. or given to your Doctor, to mail it out to the lab.

B A C K

#### ASI - Adrenal Stress Index or Insulin, and all other tests

#### 4 Saliva Specimens

Always complete all 4 saliva collections per instructions below for any single or test combination ordered.

Collect saliva in the tubes matching times below

Collect on a day that represents your typical & usual lifestyle.

Date I collected \_\_\_\_\_

Fill in

#### Saliva Collection

1. Rinse mouth with very cold water then wait for 3-5 minutes.
2. Remove cotton roll from tube, and place it under tongue for 2-5 minutes until it is saturated.
3. Return cotton roll to tube, cap tightly and place tube in zip lock bag with absorbent pad.
4. Refrigerate samples and mail within 3 days.
5. Refer to mailing instructions below.

Morning/Fasting sample 7:00 - 8:00 AM  
Noon sample ..... 11:00 - 1:00 PM Last Meal or Snack \_\_\_\_\_ am/pm  
Afternoon sample ..... 4:00 - 5:00 PM Last Meal or Snack \_\_\_\_\_ am/pm  
Midnight sample ..... 11:00 - 11:59 PM Last Meal or Snack \_\_\_\_\_ am/pm

**DO NOT EAT** chocolate, onions, garlic, cabbage, cauliflower or broccoli on day of collection. (It is not problematic if the above are condiments, less than 1 tablespoon, in food.)

**DO NOT DRINK** coffee, tea, or caffeine drinks on day of collection. For 30-60 minutes before collection; do not eat or drink anything except water, avoid use of antacids, bismuth preparations or mouth wash; and do not brush your teeth or smile.

Fill Circle if you have been diagnosed with gingivitis or bleeding gums.

Fill Circle if NOT on regular wake(day)/sleep(night) schedule.

If using any of the following potentially interfering substances, consult physician before collection. If continued use is necessary, check applicable box. For the record only.

- DHEA       Cortisol       Prednisone       Glaucoma drops       Other hormones  
 Prednisolone       Dexamethasone       Cortaid cream       Antihistamines  
 Antidepressants       Anti-anxiety       Steroid inhalers       Decongestants (Sudafed, etc.)

Patient Remarks:

Note: Following the use of Nizoral, Diflucan, Fluorouracil, Hydrocortisone cream and other hormone creams, gels & oral troches, your hormone results may be skewed from 1-2 weeks depending on substance or sublingual preparations. FOR MORE INFORMATION, PLEASE CONTACT US OR YOUR HEALTH CARE PROVIDER.

#### 2 Saliva Specimens

#### 1 Saliva Specimen

Only 2 saliva samples are required for this test. Morning and Afternoon.  
Refer to Saliva Collection instructions above.

Collect Saliva any time of day.  
Refer to Saliva Collection instructions above.

#### Common questions about the ASI test:

Please note for most of your questions, you will need to consult with your physician before calling our Lab. Thank You.

Q: How long does it take to process the test from the time received?  
A: An average of 5 business days.

Q: If I send the test in towards the end of the week, is that all right?  
A: Yes, if mailing for Saturday deliver, use Postal overnight to our PO Box, otherwise follow the Mailing instructions at the end of this page.

Q: How much is the test?  
A: For fee, please contact your physician.

Q: If I collect my sample(s) outside of the specified times, will that mess up the diagnosis?  
A: You can collect your samples for up to 1 hour, before or after, the specified times.

Q: What if I mix up my collection vials by accident?  
A: Results will be sent to your physician. If you send payment to us directly, we will send you a properly itemized insurance statement.

A: Simply change the labels on the vials in question to match to your corresponding collections.

Q: How and where do I mail my specimens?  
A: The instructions for mailing are located at the bottom of this page.

Q: If I accidentally have any of the restricted foods, will that mess up my test?  
A: As long as it was only a condiment (less than 1 tsp.) there is no problem. However, for non-condiment restricted foods, you will need to repeat the test.

Q: I am taking a certain drug - do I need to discontinue while doing the test?  
A: Call your physician and have them phone us for clarification.

Q: What if I brushed my teeth 30-60 minutes before collection?  
A: You will need to recollect. Simply discard the cotton roll of the sample in question and spit into the collection vial. (Repeat at the correct time.)

Q: Can you send me the test results? Or an itemized statement?  
A: Results will be sent to your physician. If you send payment to us directly, we will send you a properly itemized insurance statement.

#### STORAGE & MAILING INSTRUCTIONS FOR ALL SPECIMENS

If samples are not shipped on the same day of last sample collection, refrigerate up to 2 additional days only. Use provided box to mail samples. No ice bags are required during shipping.

In WA, OR and ID State, ship specimens to our P.O. Box address pre-printed on the provided box and label using first class postal service.

In all other 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 service in all States of the Union.

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

