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500 Chipeta Way, Salt Lake City, Utah 84108-1221 phone: 801-583-2787, toll free: 800-522-2787 Tracy I. George, MD, Chief Medical Officer

Patient Age/Sex: 51 years Female

Specimen Collected: 06-Dec-21 10:55				
Virilization Panel 2	Received	d: 06-Dec-21 10:55	Report/Verified: 14-Dec-21 13:22	
Procedure	Result	Units	Reference Interval	
17-	215.00 H f1 i1	ng/dL	<=206.00	
Hydroxyprogesterone,				
HPLC-MS/MS				
Androstenedione by T	'MS 0.925 H f2 i2	ng/mL	0.130-0.820	
Testosterone by Mass	60 H f3 i3	ng/dL	9-55	
Spec				
Dehydroepiandroster	one 5.200 H f4 i4	ng/mL	0.630-4.700	
by TMS				
Result Footnote				
fl: 17-Hydroxyprogest	erone, HPLC-MS/MS			
INTERPRETIVE INFORMATION for 17-Hydroxyprogesterone in females:				
Follicular	15 to 70 ng,	/dL		
Luteal	Luteal 35 to 290 ng/dL			
f2: Androstenedione b	y TMS			
INTERPRETIVE INFO	INTERPRETIVE INFORMATION: Androstenedione, Females 18 years and older			
Pre-menopausal: 0.26-2.14 ng/mL Post-menopausal: 0.13-0.82 ng/mL f3: Testosterone by Mass Spec REFERENCE INTERVAL: Testosterone by Mass Spec				
		5 5 <u>F</u> 20		
Females Premenopausal 9-55 ng/dL Postmenopausal 5-32 ng/dL f4: Dehydroepiandrosterone by TMS				
INTERPRETIVE INFORMATION: Dehydroepiandrosterone, Females 18 years and older:				
Postmenopausal:	0.60-5.73 ng/mL			
<u>Test Information</u>				
il: 17-Hydroxyprogest		rogesterone Qnt, HPL	C-MS/MS	
		or gender-specific : rectory (aruplab.com	reference intervals for this test ).	
Laboratories.	It has not been cl	leared or approved by	eristics determined by ARUP y the US Food and Drug ertified laboratory and is	

Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes. i2: Androstenedione by TMS

REFERENCE INTERVAL: Androstenedione by TMS

\*=Abnormal, #=Corrected, C=Critical, f=Result Footnote, H-High, i-Test Information, L-Low, t-Interpretive Text, @=Performing lab

Unless otherwise indicated, testing performed at: ARUP Laboratories 500 Chipeta Way, Salt Lake City, UT 84108 Laboratory Director: Tracy I. George, MD 
 ARUP Accession:
 21-340-900101

 Report Request ID:
 15067580

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Tracy I. George, MD, Chief Medical Officer

## Test Information

i2: Androstenedione by TMS

Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i3: Testosterone by Mass Spec

INTERPRETIVE INFORMATION: Testosterone by Mass Spec

Free or bioavailable testosterone measurements may provide supportive information.

For individuals on testosterone-suppressing hormone therapies (e.g., antiandrogens or estrogens), refer to cisgender female reference intervals. For a complete set of all established reference intervals, refer to ltd.aruplab.com/Tests/Pub/0081058.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

i4: Dehydroepiandrosterone by TMS REFERENCE INTERVAL: Dehydroepiandrosterone by TMS

Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

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