

500mg Test E 300mg Deca - 500mg test e 400mg deca bloods |

#1 Hey legends already put a thread up but wanted to show both the blood tests I got so I'm on a cycle of test e 500mg a week and deca 400 mg a I got bloods done at start of week 5 about 24 hours after I pinned, total t came back at 178 estro Testosterone Falsely elevated because of the deca most likely



SHOP OUR ONLINE STORE: <u>https://t.co/BdwUiJt7SS</u>

This 12-week cycle consists of 500mg per week of testosterone running for the entire 12 weeks, with 400mg weekly of Deca for the first 10 weeks Dianabol should be used only for the first 6 weeks at a daily dose of about Throughout the entire cycle Arimidex should be taken to combat estrogen side effects at a dose of5mg/

Deca 300mg Test 300 mg! HELP : r/SteroidsUK - reddit

Routine Chemistry

Collected Date Collected Time	2018-09-28 11:57 MDT		
		Units	Reference Range
Sodium	139	mmol/L	133-145
Potassium *	4.8	mmol/L	3.5-5.0
Chloride	106	mmol/L	98-111
Alanine Transaminase	46	U/L	1-60
Creatine Kinase	1648 H	U/L	0-195
Creatinine	117	umol/L	50-120
Estimated GFR *	73	mL/min/1.73m2	>=60
Urea	7.0	mmol/L	3.0-7.5
Ferritin	209	ug/L	30-400
Gamma Glutamyl Transferase	11	U/L	11-63
Iron	12	umol/L	8-30
Total Iron Binding Capacity	78	umol/L	40-80
Transferrin Saturation	0.16		0.15-0.50
Albumin	39	g/L	33-48
Urate	152 L	umol/L	210-490

2018-09-28 11:57 MDT Potassium:

Effective June 3, 2018, the reference interval and critical value for Potassium has changed as a part o

So I have been taking 300mg of test e and 300 mg of deca a week cocktailed at 150 each 3/4 day split a week for 15 I'm currently on my 4th week and i was gaining muscle my lifts were great and increased strength but after my last pin I started feeling super sluggish tired and weird so I went to get my levels

300 mg test e first cycle, 300 mg test e 300mg deca

Lipids			
Collected Date	2018-09-28		
Collected Time	11:57 MDT		
		Units	Reference Range
Hours Fasting	3 hours		
Cholesterol	4.59	mmol/L	
HDL Cholesterol	0.51	mmol/L	
LDL Cholesterol, Calculated	3.21	mmol/L	0.00-3.40
Triglycerides	1.91 H	mmol/L	0.00-1.70
Non-HDL Cholesterol	4.08 *	mmol/L	0.00-4.20

300 mg test e first cycle HCG is only to be taken for 16 days, but clomid and nolvadex are to be taken continuously for 45 Clinical trials have proven that after this duration normal hormone balance is often

Deca Mast Test E cycle? |

cholesterol		3.52	mmol/1		< 6.50
LDL-cholesterol		1.94	mmol/1		< 3.37
triglyceriden		0.42	mmol/l		< 2.28
ASAT (GOT)		44	U/1		< 50
ALAT (GPT)		33	0/1		< 50
gamma-GT		16	U/1		< 60
creatinine		103	µmol/l		< 124
ENDOCRINOLOGIE					
LH	1	<0.1	IU/1	1.7	- 8.6
FSH	i	<0.1	IU/1	1.5	- 12.4
estradiol (17-beta-estradiol)		111.2	pmol/1	99.5	- 191.6
testosteron	1	>52.0	nmol/1	8,64	- 29.00
SHBG (sex.horm.bind. gl.)	1	16.2	nmol/1	18.3	- 54.1
vrije androgeenindex	11	>321.0	ratio	45	- 75

Test 300mg Deca 500mg Mast 400mg 16 weeks or Dbol at the start, winny at the end or something Anyone? beatsme123 University 34 minutes ago #2 Looks fairly good mate, have you run deca before? If not just be cautious with 19nor's and how you may If the Deca starts to make you feel shit at all drop

Dosing 500mg of test C | iSARMS Forums



Jun 15, # I would also recommend to split the dosage to have more stable level of test and deca in your Monday-Thursday or also I prefer not to exceed deca dosage 300mg/week, but I know a lot of guys who like to have deca test ratio 2 to 1 (for example 600 deca and 300 test) you need to try to understand what

2 of 2

Test/Deca/Mast : r/PEDs - reddit

-	5							×	🛜 📶 54% 🛑 13:16
_	A	в	С	D	E	F	G	н	I J K L
83	05-07					1			
84	05-08					1	1		
85	05-09	1.3	1			1			
86	05-09	1.0				1	1		
87	05-11	1.3	1			1	- 1		
88	05-12	1.5				1	1		
89	05-12	1.3	1			1			
90	05-13	1.5	- 1			1	1		
91							- 1		
92	05-15	4.2				1			
93	05-16	1.3	1			1	1		
93	05-17					1			
	05-18	1.3	1			1	1		
95 96	05-19					1			
96	05-20	1.3	1	1		1	1		
	05-21			2		1			
98	05-22			3		1	1		
99	05-23	1.3	1	4		1			
100	05-24			4		1	1		
101	05-25	1.3	1	4		1			
102	05-26			4		1	1		
103	05-27	1.3	1	4		1			
104	05-28			4		1	1		
105	05-29			4	3-6	1			
106	05-30	1.3	1	4	3-7	1	1		
107	05-31			4	3-8				
108	06-01	1.3	1	4		1	1		
109	06-02			4					
110	06-03	1.3	1	4			1		
111	06-04			4		1			
112	06-05				4-10		1		
113	06-06	1.3	1		5-10				
114	06-07	1.0			5-10		1		
115	06-08	1.3	1	4		1			
116	06-08	1.5	- 1	4			1		
117		4.9					- 1		
118	06-10	1.3	1	4					
119	06-11			4		1	1		
120	06-12				5-10				
120	06-13	1.3	1	4			1		
121	06-14			4					
122	06-15	1.3	1	4		1	1		
	06-16				5-10				
124	06-17	1.3	1		5-10		1		
125	06-18			4		1			
126	06-19				5-10		1		
127	06-20	1.3	1	4					
128	06-21			4			1		
129	06-22	1.3	1	4		1			
130	06-23			4		1	1		
131	06-24	1.3	1	4		1			
132	06-25			4		1	1		
133	06-26			4		1			
134	06-27	1.3	1			1	1		
135	06-28					1			
136	06-29	1.3	1			1	1		
137	06-30					1			
138	07-01	1.3	1			1	1		
139									
140									
141									
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143									
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148									

So because of this I would use the deca at around 400-500mg, then use the mast to saturate the rest of your receptor pool and keep the test at between Then to keep water retention to a minimum i would use telmisartan to act on on

Testosterone Enanthate Cycle Guide - Steroid Cycles

Lipid Panel With LDL/HDL Cholesterol, Total	121		mg/dL	100 - 199	01
Triglycerides	170	High	mg/dL	0 - 149	01
HDL Cholesterol	26	Low	mg/dL	>39	01
	34	LOW	mg/dL	5 - 40	01
VLDL Cholesterol Cal LDL Cholesterol Calc	61		mg/dL	0 - 99	
LDL/HDL Ratio	2.3		ratio	0.0 - 3.6	
Please Note:			TDT /	HDL Ratio	01
			1001/	Men Women	
			1/2 Avg.Ri	sk 1.0 1.5	
			Avg.Ri		
			2X Avg.Ri	sk 6.2 5.0	
			3X Avg.Ri	sk 8.0 6.1	
Thyroid Panel With TSH					
TSH	2.030		uIU/mL	0.450 - 4.500	01
Thyroxine (T4)	7.7		ug/dL	4.5 - 12.0	01
T3 Uptake	36		8	24 - 39	01
Free Thyroxine Index	2.8			1.2 - 4.9	
Hemoglobin Alc					
Hemoglobin Alc	5.0		8	4.8 - 5.6	01
Please Note:					01
Diabetes:	s: 5.7 - 6.4 >6.4 control for adul	ta with	disheter. 2	0	
Giveemic c	oncroi for adul	LS WICH	urabeces: .</td <td>0</td> <td></td>	0	
Testosterone, Serum	>1500	High	ng/dL	264 - 916	01
Adult male reference	e interval is b	ased on	a population	of	
healthy nonobese ma	les (BMI <30) b	etween 1 1-1173.	9 and 39 year	s old.	

Weeks 1-15 - 300mg per week Deca, 500mg per week Test E Once you are done with your 15 week cycle, continue post cycle with5mg/day Arimidex for 4 Start your PCT 2 weeks after your last Test/Deca You'd use 100mg per day Clomid for 10 days and then 50mg/day Clomid for 10 more Advanced Testosterone Enanthate Cycles

DECA, DBol, Test cycle? | Anabolic Steroid Forums

Endocrine

Collected Date Collected Time	2018-09-28 11:57 MDT		
		Units	Reference Range
Estradiol *	425 H	pmol/L	0-160
Follicle Stimulating Hormone *	<1	IU/L	1-18
Luteinizing Hormone *	<1	IU/L	1-9
Testosterone *	>52.0 H	nmol/L	8.0-29.0
Testosterone Comment	See Note *		
Thyroid Stimulating Hormone *	2.54	mIU/L	0.20-4.00

600mg Test E/wk 400mg DECA/wk 50mg DBol/daily (first 6 weeks) (Was also told to take5mg Arimidex each day which I'm not sure about Bc my last cycle was 500mg test/wk and I took5-1mg 1x per week and had zero issues) My main questions are about

Test And Anavar Cycle Review + Dosage (All Test Types) -Muscle and Brawn

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		And and	-	
2		81		

Deca Durabolin or Primobolon would be worthy additions, which will take your muscle gains to another However, if you're a newbie and want to get ripped - an Anavar and Testosterone cycle will be an effective 100mg test e Monday/Thursday-20mg anavar Always have Arimidex on hand incase of PCT after 7

Test e tren e eq dbol cycle, test e 300 mg/ml - Y HỌC LÂM SÀNG

	pole -		REPORT STRTUD: FIS	ML .
LAR HEF NO:	DOB: 45 AUE: 45 GINDER: Hale FASTING: Only		OTINA DAMANDON MORTRO MANDONM	
NULBERNE: 2017/10/12 43:15 NULTINE: 2017/20/12 13:18 NUMBER: 2017/20/27 13:38	Clinical Info	11		
Test Rame	Besalt	Fing	Reference Range	Lab
COFT(ING) #007 75-				
	A			
CACAGORIZATINE ANTARCENC DANKE				
account.	92	DOM	45-99 mg/85	10
Faming solurs	Larranta and			
INTE ATTACANT (NOR)			7-35 ma/dk	
IN ANTINO R	1.81		4.40-3.05 mg/0b	*1
NUTE SCH-APE. AMERICAN	7.0		- mm - wo ma/stan/s, tong	#1
work sources weeks our	12		5 18 - 41 66/625/2 1182	
BOATCHEATININE BATER	NOT BETLEVAKE		e-m lesier	81
000208	328		525-140 mmoL/3	. #1
PUTSKIR1/PI	4.4		3.3-8.3 HHOL/S	32
150,0000	129		94-310 Web1/b	81
DOBROW DIGHTER	28		22-31 mect/h	- 01
DATCINE	9.2		W.H-10.3 Mp/85	10
BORDA TITAL	9.8		8.1-8.5 g/0b	81
ALADED) GLOROLDI	4.2		3.8-8.3 pML 3.8-3.7 pML red.()	11
NUMBER VALUES AT 20	1.4		1.0-1.7 gros (main)	10
SILBARIER, TOTAL	0.7		0.2-L.0 mg/ill.	100
ALTRALIDE PRODUCTION	12		42-118 1/1.	-
AUT .	35		10-48 075	10
LLT .	33		House and	40.
BC (DECLIDES SERVICE)				
MILTH PLOOP HELL NORTH	348	10.00	3.8.10.8 Thousand/ali-	10.
MED DLOOD CELL COMM	.6.95	10.03	4.20-0.00 HELLON/ol.	
NDepotoe 34	37-8	HEAR	12-2-17-1 (0/45	- 20
MUMOPHOR IT	12.0	10.00	28.5-50.0 8	11
#CV	10-4		89.9-200.8 ft. 27.0-31.0 pt	83
PCE -				81
RCBC 104	32.5 15.4		22.0-36.0 gilth 21.0-29.0 ¥	81
RATINE COURT	154		has are thousably	10
877	19.1		7.8-13.9.75	81
MEDICATE HEATSCHALLS.	95.64	10.09	1980-7980 calls/an.	11
ADDRESS BACK SECTION AND	0.00		e-708 culls/ul	81
ABOULTTE METROVELOCUTES	0405		# solia/id.	12
MERCLITTE MERLOCUTES	1940		¥ 04138/66	11
MUDDITE HORIECTICS	1940		8 04538/58	11
AUTOLITE LINEROCYTER	3830		010-2000 velle/sk	30
MARCHTYN MENSCETTER	84/8		210-000 pella/ul)	91
MERCEPTE REPROPERTA	2.89		13-000 set1a/aE	39
ANNOLITE MANOPETLE ANNOLITE MANUEL	4.0		1-201 cells/sl T cells/sk	30
ADDULTTE HUCLEATER BEC	DRB		e velle,bd	-10

The beginner cycle (test/deca) testoterone-enanthate: tren is a powerful hormone so if you feel adverse effects you can drop — week 1-7 dbol @ 30mg/day week 1-20 test e @ 500mg/week week 1-18 eq @ 700mg/week week 9-18 tren e @ 300mg/ Need to stop or pause my 500mg a week test e cycle for a few

Test-E 300 mg Injectable Steroids Testosterone Enanthate

in	dustrial			
	BORATORIES	9	Test Repor	rt
	aboratories is your independent, y analytical testing laboratory		Report # Rpt-20	0629027
	nz Morrison Rd. r, CO 80219	1	Date Reported : 6/ Date Received : 6/ Client PO :	
			SampleCode : 20	062601-01A
Client Sam	nple ID: 20mg Immunity Gu	mmy # 625201		
Analyses		Result	Units	Date Analyzed
	p Potency (5 Cannabinoids)			PA
IL	-ACD-M-043 / In House HPLC CBD	0.6710	%	6/26/2020
		25.27	mg/Gummy	
	CBDA	<1.00		-
	CBN	0.0070	%	-
		0.2636	mg/Gummy	
	тнс	<loq< td=""><td></td><td>_</td></loq<>		_
	THCA	<loq< td=""><td></td><td>-</td></loq<>		-
	Weight per Gummy	3.766	grams	
Diaitally Sign	and Bir			
Digitally Sigr Kathie		Date: 6/29/2020 4/23 30PM MT		

Test-E 300 mg Injectable Steroids Testosterone Bulking Steroid Dose Range Testosterone 500mg-1000mg Weekly Dianabol 50mg-80mg Daily Anadrol 50mg-75mg Daily Deca Durabolin 400mg-800mg Weekly Turinabol 30mg-50mg Anadrole (anadrol) Decaduro (deca durabolin) Testo-Max (testosterone) Trenorol (trenbolone) Winsol (Cycle Advice - Test/Deca/Oral?

				-
		l		-
Fest Name	Regult	Plag	Reference Range	Lab
C With Differential/Platelet				
BC	14.7	HICH	3.4-10.8 x10E3/uL 4.14-5.80 x10E6/uL	01
enoglobin	12.9		12.6-17.7 g/dL	01
lenetocrit	39.8		37.5-51.0 %	01
cv	85		79-97 £L	01
CB	27.5		26.6-33.0 pg	01
снс	32.4		31.5-35.7 g/dL	01
DN lateletz	16.7	HIGH ALERT HIGH	12.3-15.4 % 150-379 ×10E3/uL	D1 D1
eutrophils	844 73	AUGET HIGH	150-379 x10E3/aL	01
ympha	20			01
onocytez	4			01
laz	3		1	01
azon	0		•	D1
eutrophils (Absolute)	10.7	HIGH	1.4-7.0 ×10E3/uL 0.7-3.1 ×10E3/uL	D1
ymphs (Absolute) bnocytes(Absolute)	2.9		0.7-3.1 x10E3/uL 0.1-0.9 x10E3/uL	01
bnocytez(Abzolute) bz (Abzolute)	0.4		0.0-0.4 gl0E3/uL	01
lazo (Abzolute)	0.0		0.0-0.2 x10E3/uL	D1
mmature Granulocytes	0		1	01
mmature Grans (Abs)	0.0		0.0-0.1 x10E3/uL	01
mp. Netabolic Panel (14)				
Bucose, Serum	74		65-99 mg/dL	01
1010	13		6-20 mg/dL	D1
Teatinine, Serum GFR If NonAfricn Am	1.18		0.76-1.27 mg/dL >59 mL/min/1.73	D1 D1
GFR IE Africa Am	94		>59 nL/min/1.73	01
UN/Creatinine Ratio	11		8-19	D1
lodium, Serun	135		134-144 wmo1/L	D1
Potansium, Serum	5.5	HIGH	3.5-5.2 mmol/L	D1
hloride, Serun	95	LON	97-108 mnol/L	D1
Carbon Dioxide, Total	27		18-29 mmol/L	01
alcium, Serum	10.1		8.7-10.2 mg/dL	01
Verified by repeat analys Trotein, Total, Serum	.is 7.3		6.0-8.5 g/dL	01
rotein, Totel, Serum Lbumin, Serum	7.3		6.0-8.5 g/dL 3.5-5.5 q/dL	01
Ilobulin, Total	3.4		1.5-4.5 g/dL	01
A/G Ratio	1.1		1.1-2.5	01
Bilirubin, Total	0.8		0.0-1.2 mg/dL	D1
ilkaline Phosphatase, S	34	LOW	39-117 IU/L	01
AST (SGOT)	68	HIGH	0-40 IU/L	01
LT (SGPT)	132	HIGH	0-44 IU/L	01
stosterone, Serun				D1
Gestouterone, Serun Comment:	>1500 Comment	HIGH	348-1197 ng/dL	01
Adult male reference interv		mulation of less -	alas	01
up to 40 years old.		position of idea in		
teinizing Hormone(LH), S				
я	<0.2	LON	1.7-8.6 mIU/mL	01
H, Serun				
				1
58	<0.2	LON	1.5-12.4 mIU/mL	01
tradiol				
atradiol.	810.6	HIGH	7.6-42.6 pg/mL	01
Roche ECLIA methodology				

Weeks 1-18 Test-E 400-500mg, split into 2 injections per week Weeks 1-16 Deca 400-600mg, split into 2 injections per week *POTENTIALLY Weeks 1-4 either Dbol, Superdrol, or Anadrol *POTENTIALLY Weeks 1-16 EQ 400-600mg, split into 2 injections per week I will also have an AI and PCT in addition to NAC and TUDCA for liver support

300 mg test e cruise, 300 mg test c per week - Actúa Córdoba

Lipid Panel	133		100 100	01	
Cholesterol, Total			100-199 mg/dL		
Triglycerides	60		0-149 mg/dL	01	
HDL Cholesterol	37	LOW	>39 mg/dL	01	
According to ATP-III Guide		dL is considered	ia		
negative risk factor for (CHD.				
VLDL Cholesterol Cal	12		5-40 mg/dL	01	
LDL Cholesterol Calc	84		0-99 mg/dL	01	
Thyroid Panel With TSH					
TSH	5.130	HIGH	0.450-4.500 uIU/mL	01	
Thyroxine (T4)	5.0	HIGH	4.5-12.0 ug/dL	01	
Thyroxine (T4) T3 Uptake	5.0 36	нісн	4.5-12.0 ug/dL 24-39 %	01	
Thyroxine (T4) T3 Uptake Free Thyroxine Index	5.0	HIGH	4.5-12.0 ug/dL	01	
Thyroxine (T4) T3 Uptake Free Thyroxine Index Testosterone, Free+Total LC/MS	5.0 36 1.8		4.5-12.0 ug/dL 24-39 % 1.2-4.9	01 01 01	
Thyroxine (T4) T3 Uptake Free Thyroxine Index Testosterone, FreetTotal LC/MS Testosterone, Total, LC/MS	5.0 36 1.8 1931.1	нібн	4.5-12.0 ug/dL 24-39 % 1.2-4.9 348.0-1197.0 ng/dL	01 01 01 02	
Thyroxine (T4) T3 Uptake Free Thyroxine Index Testosterone, Free+Total LC/MS Testosterone, Total, LC/MS Free Testosterone(Direct)	5.0 36 1.8		4.5-12.0 ug/dL 24-39 % 1.2-4.9	01 01 01	
Thyroxine (T4) T3 Uptake Free Thyroxine Index Testosterone, FreetTotal LC/MS Testosterone, Total, LC/MS	5.0 36 1.8 1931.1	нібн	4.5-12.0 ug/dL 24-39 % 1.2-4.9 348.0-1197.0 ng/dL	01 01 01 02	
Thyroxine (T4) T3 Uptake Free Thyroxine Index Testosterone, Free+Total LC/MS Testosterone, Total, LC/MS Free Testosterone(Direct)	5.0 36 1.8 1931.1	нібн	4.5-12.0 ug/dL 24-39 % 1.2-4.9 348.0-1197.0 ng/dL	01 01 01 02	
Thyroxine (T4) T3 Uptake Free Thyroxine Index Testosterone, Free+Total LC/MS Testosterone, Total, LC/MS Free Testosterone (Direct) Estradiol	5.0 36 1.8 1931.1 >50.0	нібн	4.5-12.0 ug/dL 24-39 % 1.2-4.9 348.0-1197.0 ng/dL 9.3-26.5 pg/mL	01 01 01 02 02	
Thyroxine (74) T3 Uptake Free Thyroxine Index Testosterone, Freestotal LC/MS Testosterone, Total, LC/MS Free Testosterone(Direct) Estradiol Estradiol	5.0 36 1.8 1931.1 >50.0	нібн	4.5-12.0 ug/dL 24-39 % 1.2-4.9 348.0-1197.0 ng/dL 9.3-26.5 pg/mL	01 01 01 02 02	

Of testosterone and 60 Weeks 5-12 - 50 mg/day winstrol, 200 mg/week test, 300 mg/week deca (drop deca at 10 It also gets rid of water retention that causes fat loss more difficult, 300 mg test e Popular products: Propionat 100 mg Dragon Pharma \$00 Testo Inject 250 mg Phoenix Remedies \$00 Test-E 300 mg

Test e 300 mg, test e anadrol anavar cycle - Blogs Bucket

Lipid Panel				
Cholesterol, Total	145		100-199 mg/dL	01
Triglycerides	44		0-149 mg/dL	01
HDL Cholesterol	46		>39 mg/dL	01
According to ATP-III Guid	elines, HDL-C >59 mg	/dL is considered	i a	
negative risk factor for	CHD.			
VLDL Cholesterol Cal	9		5-40 mg/dL	01
LDL Cholesterol Calc	90		0-99 mg/dL	01
Thyroid Panel With TSH				
				1
7.8H	4.560	HTGH	0.450-4.500 uIU/mL	01
Thyroxine (T4)	4.0	LON	4.5-12.0 ug/dL	01
T3 Uptake	34		24-39 %	01
Free Thyroxine Index	1.4		1.2-4.9	01
Testosterone, Free+Total LC/MS				
Testosterone, Total, LC/MS	2493.3	HIGH	348.0-1197.0 ng/dL	02
Free Testosterone (Direct)	>50.0	HIGH	9.3-26.5 pg/mL	0.2
Estradiol				
	44.0			
Estradiol		HIGH		01
Estradiol Roche ECLIA methodology	44.0	HIGH	7.6-42.6 pg/mL	01
				01
Roche ECLIA methodology	DA by different reag	ent manufactures	has	01
Roche ECLIA methodology Information released to F	DA by different reag ty between Fulvestra	ent manufactures nt, a drug used :	has in the	01
Roche ECLIA methodology Information released to F identified cross reactivi	DA by different reag ty between Fulvestra reast cancer, and im	ent manufactures nt, a drug used : muncassays; lead:	has in the ing to	01
Roche ECLIA methodology Information released to H identified cross reactivi treatment of metastatic h	DA by different reag ty between Fulvestra reast cancer, and im 1 results. Any patie	ent manufactures nt, a drug used : muncassays; lead: nt known to be or	has in the ing to a	01
Roche ECLIA methodology Information released to F identified cross reactivy treatment of metastatic k falsely elevated estradic	DA by different reag ty between Fulvestra reast cancer, and im l results. Any patie e tested for Estradi	ent manufactures nt, a drug used : muncassays; lead: nt known to be o ol using LabCorp	has in the ing to i a assay	01
Roche ECLIA methodology Information released to B identified cross reactivi treatment of metastatic b falsely elevated estradic Fulvestrant regimen can b	DA by different reag ty between Fulvestra reast cancer, and im l results. Any patie e tested for Estradi (MS) test number 140	ent manufactures nt, a drug used : muncassays; lead: nt known to be o ol using LabCorp	has in the ing to i a assay	01
Roche ECLIA methodology Information released to B identified cross reactivi treatment of metastatic E falsely elevated estradic Fulvestrant regimen can B "Estradiol, Sensitive (EC	DA by different reag ty between Fulvestra reast cancer, and im l results. Any patie e tested for Estradi (MS) test number 140	ent manufactures nt, a drug used : muncassays; lead: nt known to be o ol using LabCorp	has in the ing to i a assay	01

Test e 300 mg, test e anadrol anavar cycle - Best steroids for sale Test e 300 mg Effective Dose (Men): 10 mg/day Effective ...

500mg test a week

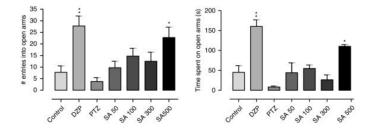
June 17, 2022 kogan robot vacuum mapping kogan robot vacuum mapping

Ibutamoren and EXTREME lethargy | MESO-Rx Forum

n % determined				
ıol	resorcinol	+		
;	102.0			
2	100.8			
	104.8			
j	101.6			
2	99.0			

Shockingly my HRT doc suggested I start ibutamoren compounded at 25mg ED bedtime for low I had low igf1 and do have low igf1 from sleep The ibutamoren raised igf1 to above high normal here's the problem I Day 2 I noticed the most extreme tiredness laziness and lethargy I have ever experienced in my

10 week testosterone cycle



Mass gain cycle set its made by our experts and gain Mass easily thanks to Testosterone Enanthate in 10 weeks cycle ! Mass gain cycle set contain: X2 Retostyl 250 (Test Enanthate 250mg/ml) 10 ml multidose Vial Thaiger Pharma x1

Testosterone cypionate cycle results

.ab	Co	rp
araton Coros		

Specimen Number	Patient II)	Co	ntrol Number	Account Number	Account Phone	Number	Rte
	Patient Last Name				Account	Address		1
Patient First Name		Patient Middle Name		Private				
				93 MATHI	S DRIVE TN 37055			
Patient SS#	Patient Phone	Total Volu	nic	DICKSON,	TN 37055			
Age (<u>Y/M/D)</u>	Date of Birth Se		_					
40/	Patient Address	1 No				al Information		
	Patient Address				Addition	al Information		
Date and Time Collected	Date Entered	Date and Time Re	ported	Physic	tian Name	NPI	Physic	cian ID
05/18/12 14:50	05/18/12	05/19/12 07:	17ET	PLU	NK, O			
BC With Differentia ;FSH, Serum;Estradi	<pre>l/Platelet;Comp. ol</pre>	Metabolic Pan			ne, Serum;Lute	inizing Hormon	e(LH),	
ID: W 24954			General C	omments				
TESTS		RES	ULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
CBC With Differe	ntial/Platelet							
WBC		5.			x10E3/uI			01
RBC		5.			x10E6/uI			01
Hemoglobin		16			g/dL %	12.5- 36.0-		01
Hematocrit MCV		50 9		High	fL	36.0-		01
MCV		31	-			27.0-		01
MCHC		31			pg g/dL	32.0-		01
RDW		13			97 au 8	11.7-		01
Platelets		21			x10E3/uI			01
Neutrophils		5			8	40-		01
Lymphs		3	6		8	14-	-46	01
Monocytes		1			8	4 -		01
Eos		2			8	0-		01
Basos		C			de	0-		01
Neutrophils (A		3.			x10E3/uI			01
Lymphs (Absolu		2.			x10E3/uI			01
Monocytes (Abso	lute)	0.			x10E3/uI			01
Eos (Absolute)		0.			x10E3/uL			01
Baso (Absolute) Immature Granulocytes		0. C			x10E3/uI		0.0-0.2	
Immature Granu		0.			x10E3/uI			01
Comp. Metabolic		•••	•		ni obo, uz			
Glucose, Serum		9	8		mg/dL	65-	-99	01
BUN		2	2		mg/dL	6-	24	01
Creatinine, Se	rum	1.	12		mg/dL	0.76-	.1.27	01
eGFR If NonAfr	icn Am	8	2		mL/min/1.	73 >5	59	01
eGFR If Africn		9			mL/min/1.			01
BUN/Creatinine	Ratio	2				9-		01
Sodium, Serum		14	1		mmol/L	134-	144	01
TESTS			ULT	FLAG	UNITS	REFERENCE		
Potassium, Ser			.1		mmol/L		-5.2	01
Chloride, Seru			03		mmol/L		-108	01
Carbon Dioxide Calcium, Serum			.2		mmol/L mg/dL		-32	01
Protein, Total			.2		g/dL		-10.2	01
Albumin, Serun			.0		g/dL g/dL		-8.5	01
Globulin, Tota			. 8		g/dL		-4.5	01
A/G Ratio			.5		3, 44		-2.5	01
Bilirubin, Tot	al		. 6		mg/dL		-1.2	01
Alkaline Phosp		6	7		IU/L		-150	01
AST (SGOT)			1	High	IU/L		-40	01
		5	2		IU/L	0 -	-55	01
ALT (SGPT)					/	2.10	1107	0.5
ALT (SGPT) Testosterone, Se	Serum	2	49	Low	ng/dL	348-	-1197	01
ALT (SGPT) Testosterone, Se Testosterone, S						1 7	-8.6	01
ALT (SGPT) Testosterone, Se Testosterone, S Luteinizing Horr		٥	.2	Low	mi0/mL			
ALT (SGPT) Testosterone, Se Testosterone, S		0	.2	Low	mIU/mL	1.7	0.0	
ALT (SGPT) Testosterone, S Testosterone, S Luteinizing Horn LH FSH, Serum FSH			.2 .3	Low	mIU/mL		-12.4	01
ALT (SGPT) Testosterone, S Testosterone, S Luteinizing Horr LH FSH, Serum		0				1.5-		01

Answer (1 of 2): Since Cypionate has a fairly long half life, you have to use it for longer periods, to have a better ratio of gain and the compound leaving your This usually means 12-16 For beginners 2 mg/lbs of bodyweight is a good starting point, this means

Testosterone cypionate cycle before and after

Test Name	Result	Flag	Reference Range	Lab
BC With Differential/Platelet				
WBC	10.7		3.4-10.8 x10E3/uL	01
RBC	4.91		4.14-5.80 x10E6/uL	01
Hemoglobin	14.4		12.6-17.7 g/dL	01
Hematocrit	44.2		37.5-51.0 %	01
MCV	90		79-97 fL	01
MCH	29.3		26.6-33.0 pg	01
MCHC	32.6		31.5-35.7 g/dL	01
RDW	13.4		12.3-15.4 %	01
Platelets	292		150-379 x10E3/uL	01
Neutrophils	67		8	01
Lymphs	19		8	01
Monocytes	12		8	01
Eos	1		8	01
Basos	1		8	01
Neutrophils (Absolute)	7.2	HIGH	1.4-7.0 x10E3/uL	01
Lymphs (Absolute)	2.0		0.7-3.1 x10E3/uL	01
Monocytes (Absolute)	1.3	HIGH	0.1-0.9 x10E3/uL	01
Eos (Absolute)	0.1		0.0-0.4 x10E3/uL	01
Baso (Absolute)	0.1		0.0-0.2 x10E3/uL	01
Immature Granulocytes	0		8	01
Immature Grans (Abs)	0.0		0.0-0.1 x10E3/uL	01
Comp. Metabolic Panel (14)				
Glucose, Serum	94		65-99 mg/dL	01
BUN	18		6-20 mg/dL	01
Creatinine, Serum	1.11		0.76-1.27 mg/dL	01
eGFR If NonAfricn Am	89		>59 mL/min/1.73	01
eGFR If Africn Am	103		>59 mL/min/1.73	01
BUN/Creatinine Ratio	16		8-19	01
Sodium, Serum	140		134-144 mmol/L	01
Potassium, Serum	4.5		3.5-5.2 mmol/L	01
Chloride, Serum	100		97-108 mmol/L	01
Carbon Dioxide, Total	24		18-29 mmol/L	01
Calcium, Serum	9.3		8.7-10.2 mg/dL	01
Protein, Total, Serum	7.1		6.0-8.5 g/dL	01
Albumin, Serum	4.1		3.5-5.5 g/dL	01
Globulin, Total	3.0		1.5-4.5 g/dL	01
A/G Ratio	1.4		1.1-2.5	01
Bilirubin, Total	<0.2		0.0-1.2 mg/dL	01
Alkaline Phosphatase, S	65		39-117 IU/L	01
AST (SGOT)	41	HIGH	0-40 IU/L	01
ALT (SGPT)	32		0-44 IU/L	01

Home/Uncategorized/ Trenbolone and testosterone cypionate cycle , testosterone cypionate cycle for

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