

How to incorporate the DUTCH test into a compounding or functional medicine pharmacy practice

A compounding or functional medicine pharmacy can use the **DUTCH (Dried Urine Test for Comprehensive Hormones)** test as part of a collaborative, pharmacist-led hormone optimization and wellness service. The key is to use it as **one piece of the clinical picture**, rather than as a standalone diagnostic tool. While the test is widely used in functional medicine, some of its applications remain an area of ongoing research, and conventional medical organizations do not universally recommend it for all hormone-related conditions.

Here are practical ways to integrate it into your practice.

1. Build a pharmacist consultation service

Rather than simply selling the test, offer a structured consultation that includes:

- Comprehensive medication review
- Symptom assessment
- Lifestyle evaluation
- Supplement review
- DUTCH test interpretation
- Personalized recommendations
- Follow-up visits (6–12 weeks)

Patients are often willing to pay for a comprehensive hormone wellness consultation instead of only purchasing the test.

2. Identify appropriate patients

Patients who may benefit from discussing DUTCH testing with their healthcare provider include those with:

- Menopause or perimenopause symptoms
- PMS or PMDD
- Fatigue
- Low libido
- Suspected adrenal dysfunction or chronic stress
- Sleep disturbances
- Thyroid symptoms despite treatment
- PMOS
- Hormone replacement therapy monitoring (depending on the prescriber's approach)
- Men's health

It is generally not appropriate as a substitute for standard diagnostic testing when evaluating serious endocrine disorders.

3. Use DUTCH results to guide compounding discussions

If collaborating with a prescribing clinician, DUTCH results may help inform conversations about:

Bioidentical hormone therapy

- Progesterone
- Estradiol
- Estriol
- Testosterone
- DHEA

Adrenal support

- Adaptogenic supplements
- Lifestyle interventions
- Sleep optimization
- Cortisol balancing/optimization

May guide supplement recommendations

- Magnesium
- Omega-3 fatty acids
- Phase 1 or 2 estrogen detox supports
- Adrenal nutrients or adaptogens
- B-complex vitamins
- DIM or calcium-D-glucarate (used cautiously and based on the overall clinical picture)
- Fiber and nutrition strategies
- Antioxidants

Medication changes or compounded hormone prescriptions should always be based on the patient's overall clinical evaluation and the prescriber's judgment, not solely on DUTCH results.

4. Develop standardized clinical protocols

Examples include:

Menopause Program

- Initial consultation
- DUTCH test
- Review visit
- Communication with prescriber (if not managing yourself)
- Compounded HRT if prescribed
- Follow-up every 3–6 months

Stress & Cortisol Program

- DUTCH cortisol profile (urine or saliva)
- Sleep assessment

- Lifestyle coaching
- Nutritional supplements
- Follow-up testing if clinically appropriate

PMOS Program

- DUTCH test
- Optimizing hormone metabolism
- Optimizing adrenal health
- Nutrition counseling
- Weight management support
- Supplement recommendations
- Collaboration with endocrinology or gynecology as needed

5. Create collaborative relationships

Partner with:

- Functional medicine physicians
- Nurse practitioners
- Physician assistants
- Gynecologists
- Integrative medicine clinics
- Chiropractors and naturopathic physicians (where permitted by state law)

Offer to provide:

- Test ordering logistics (if permitted)
 - **** You can have kits drop-shipped directly to your patients without having to keep a stock in office. Our internal data shows that patients have a higher return rate on their samples/kits if the kit was drop-shipped to their house.**
- Patient education
- Interpretation support
- Compounding services
- Follow-up monitoring

6. Develop cash-pay clinical packages

Many pharmacies bundle services, for example:

Service	Examples
Hormone Wellness Assessment	Consultation + DUTCH review
Perimenopause Program	Consultation + DUTCH review + supplement/medication plan
Men's Hormone Program	DUTCH + testosterone education + follow-up
Adrenal/Stress Health Program	DUTCH + cortisol review + lifestyle coaching

Pricing varies by region and scope of services.

7. Train pharmacy staff

Ensure pharmacists and technicians understand:

- Hormone physiology and the menstrual cycle
- DUTCH methodology and limitations
- Interpretation of cortisol and sex hormone metabolites
- Menopause care
- Nutrition basics
- Motivational interviewing
 - focuses on strengthening a person's own internal desire and commitment to change rather than forcing advice or confrontation
- Documentation and follow-up

8. Market educational services

Examples include:

- Menopause workshops
- "Understanding Your Hormones" seminars
- Stress and cortisol education
- Women's health events
- Provider lunch-and-learns
- Educational newsletters

Emphasize that the test provides information about factors associated with hormone and stress imbalances that may not be captured through serum or saliva testing, and that this information can be used as a tool to help guide personalized, actionable treatment plans aimed at supporting optimal health outcomes.

9. Document interventions

Record:

- Symptoms
- Goals
- Medication history
- DUTCH findings
- Clinical assessment
- Recommendations
- Provider communications
- Follow-up outcomes

Consistent documentation supports continuity of care and quality improvement.

10. Measure outcomes

Track metrics such as:

- Symptom improvement using validated questionnaires where possible
- Patient satisfaction
- Prescription retention
- Compounding revenue
- Supplement adherence
- Follow-up rates
- Referrals from healthcare providers

A sample patient workflow

1. Patient completes a hormone symptom questionnaire.
2. Pharmacist conducts a 45–60 minute consultation.
3. DUTCH test is ordered through an authorized provider if appropriate.
4. Patient completes the test at home.
5. Pharmacist reviews results alongside the patient's symptoms, medical history, and current medications.
6. Recommendations are shared with the patient's prescriber if applicable*.
7. If indicated and prescribed, compounded hormone therapy is prepared.
8. The patient returns for follow-up in 6–8 weeks to assess symptoms, adherence, and any needed adjustments.

For a compounding pharmacy, this approach shifts the focus from dispensing products to providing long-term clinical services. The greatest value typically comes from combining DUTCH testing with pharmacist expertise, collaborative care, individualized counseling, and ongoing follow-up rather than relying on the test alone. Before implementing such a program, ensure it aligns with your state's pharmacy practice act, collaborative practice agreements, and any regulations governing laboratory testing, test interpretation, and pharmacist scope of practice.