

The Midlife Lab Snapshot

10 Markers I Often Review Beyond A1c

"Normal" labs don't always tell the whole story.



Many women are told their labs are "normal" — yet still struggle with:

- Weight gain
- Low energy
- Increased cravings
- Rising cholesterol
- Brain fog
- Feeling unlike yourself

Labs are only one piece of the puzzle — but these are markers I often review when supporting women in midlife.

★ A Quick Note

Reference ranges are designed to **identify disease** — not always the same as the ranges used when *optimizing health, energy, and metabolic function.*

🔴 Blood Sugar & Metabolic Health

Fasting Insulin

Often one of the earliest clues that the body may be working harder to manage blood sugar — even when glucose and A1c still appear normal.

Optimal <8 μU/mL

Hemoglobin A1c

Reflects average blood sugar over 2–3 months. Think of it as a highlight reel, not the full movie.

Optimal <5.7%

❤️ Heart & Metabolic Health

Triglycerides

Provide insight into metabolic health and how efficiently the body processes and stores energy.

Optimal <100 mg/dL

Excellent 50–80 mg/dL

HDL Cholesterol

Associated with physical activity, metabolic health, and insulin sensitivity. Robust HDL is often seen in metabolically healthy individuals.

Optimal >60 mg/dL

Excellent 60–90 mg/dL

ApoB

Think of ApoB as a count of the vehicles in your bloodstream with potential to enter artery walls. Often a clearer picture of cardiovascular risk than LDL alone.

Optimal <80 mg/dL

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⚡ Energy & Iron Status

Ferritin

Low iron stores may contribute to fatigue, hair shedding, reduced exercise tolerance, feeling cold, and restless legs — symptoms that commonly overlap with perimenopause. *Note: inflammation can artificially elevate ferritin, masking true iron stores.*

Optimal 50–100 ng/mL

Iron Saturation

Shows how much iron is available for use right now — provides important context alongside ferritin.

Optimal 20–40%

🦋 Thyroid Health

TSH

Think of TSH as the brain's "Hey, thyroid!" signal. As TSH rises, the brain may be turning up the volume to encourage more hormone production.

Optimal 1.0–2.5 mIU/L

Free T3

The more metabolically active thyroid hormone — T4 must first be converted to T3. Provides context beyond TSH alone.

Target 3.0–3.5 pg/mL

Free T4

Helps assess the thyroid's output before conversion. Often reviewed alongside Free T3 for a fuller picture.

Target 1.0–1.5 ng/dL

🔥 Inflammation

hs-CRP

Think of hs-CRP as a smoke detector rather than the fire itself. It can be influenced by sleep, stress, illness, body composition, training, and chronic health conditions. Elevated inflammation can also raise ferritin — one reason I like reviewing these markers together.

Optimal <1.0 mg/L

✓ Also Worth Reviewing

- ✓ Fasting Glucose
- ✓ Vitamin D
- ✓ Vitamin B12
- ✓ CBC (Hgb + Hct)
- ✓ MCV
- ✓ LDL Cholesterol
- ✓ Non-HDL Cholesterol
- ✓ AST + ALT

♥ Remember

Labs are information.

Not a judgment. Not a grade. Not a measure of your willpower.

They're simply one tool to help us understand what's happening beneath the surface.

The goal is not perfect numbers.

The goal is understanding your body well enough to support it.

Disclaimer: These are common target ranges I often use as conversation starters with clients. Individual goals vary based on symptoms, medical history, medications, genetics, and discussions with your healthcare team. This resource is intended for educational purposes and is not medical advice.