SOULSCRIPT

PRESCRIPTIONS FOR YOUR SOUL

THYROID LAB INTERPRETATION GUIDE + TRACKER

by Elena Genik. Pharm.D



www.thyroidloveclub.com

www.thyroidloveclub.com

WELCOME

Hi! I'm Elena Genik, pharmacist turned functional practitioner, and I'm still on my healing journey. My Graves diagnosis came in December 2022 after months of feeling off. Labs later showed TSI 4.72 IU/L and TRAb 7.33 IU/L. Methimazole worked quickly, and for a while I felt like myself again.

Then Thyroid Eye Disease showed up. The physical changes were hard. The medical gaslighting was harder. My labs hovered in "acceptable" ranges while my body whispered for help. I heard, "You're fine," when I wasn't. I was told to choose between meds or "do nothing," and I left appointments in tears. I knew there had to be more than that.

I went all in on a root-cause approach. I tested my gut and found H. pylori, Blastocystis hominis, Enterococcus, Pseudomonas, plus leaky gut. I supported adrenals after a brutal flare and illness in early 2024. I corrected iron and vitamin D, added selenium and Brazil nuts, set real boundaries, stopped morning caffeine on an empty stomach, and finally listened to my body. Slowly, my eyes softened. My energy rose. My anxiety eased. I chose thriving, on purpose.

Here's what I learned and now teach:

- "In range" is not the same as "in balance." Population statistics don't equal personal wellbeing. We are all very unique.
- Optimal ranges often match how you actually feel and function.
- Patterns matter: labs, symptoms, triggers, and trends over time.
- Advocacy is a skill you can learn, and it changes everything.

This workbook is your companion. Clear explanations of TSH, Free T4, Free T3, Reverse T3, TPO Ab, Tg Ab, Vitamin D, Ferritin, Selenium, Zinc, Magnesium, and especially TRAb and TSI as separate markers. Simple trackers so you can see progress. Scripts so you can ask for the full panel without freezing up.

I built the guide I needed when I was scared, swollen, and told to accept "fine." I don't want you to settle for fine. I want you to feel informed, grounded, and hopeful, and to walk into your next appointment with receipts.

You can do this. I'm here with you.

Let's decode, track, and advocate together.

Elena



DISCLAIMER

This information is for your personal use ONLY. You cannot distribute, copy, reproduce, or otherwise sell this product or information in any form whatsoever, including but not limited to: electronic, or mechanical, including photocopying, recording, or by any informational storage or retrieval system without expressed written, dated and signed permission from the author. All copyrights are reserved.

The information, including but not limited to, text, graphics, images and other material contained in this guide are for informational purposes only. No material from this guide is intended to be a substitute for professional medical advice, diagnosis or treatment.

Always seek the advice of your physician or other qualified health care provider with any questions you may have regarding a medical condition or treatment and before undertaking a new health care regimen, and never disregard professional medical advice or delay in seeking it because of something you have read in this guide.

This is NOT medical advice. Strictly for informational purposes only.

This protocol serves as a general guideline and should be personalized based on individual health conditions and needs. Consultation with a functional health practitioner or qualified healthcare professional is essential before initiating any new supplement or lifestyle changes and to determine the personalized doses required for each person. Regular monitoring and adjustments may be necessary based on individual responses and evolving health status.

TABLE OF CONTENTS

QUICK THYROID DECODER CHART

DETAILED LAB MARKER DESCRIPTIONS

COMMON THYROID LAB UNIT CONVERSIONS

THYROID LAB TRACKER SHEET

SYMPTOM CHECK-IN SHEET

TRAB VS. TSI: UNDERSTANDING YOUR GRAVES' ANTIBODIES

FREE T3 : REVERSE T3 RATIO HOW TO CALCULATE AND CONVERT UNITS

ASK YOUR DOCTOR THIS

NEXT STEPS & CONCLUSION





HOW TO USE THIS WORKBOOK

Before you dive into the decoder chart, take a deep breath. This guide isn't about turning you into your own doctor. It's about helping you finally understand what your body has been trying to tell you through your labs and symptoms.

Start by locating your most recent thyroid results. If you don't have them, you can usually download a copy from your patient portal or ask your doctor's office to print them. As you move through each section, use this workbook like a conversation between you and your body. Look up each lab in the decoder chart, circle or highlight where your results fall, and make notes about how you've been feeling lately.

You might begin to notice patterns, like perhaps your fatigue worsens when Free T3 dips, or your anxiety spikes when your antibodies rise. That's valuable data, and it's the first step in connecting your labs to your lived experience.

If you feel uncertain or confused at any point, that's completely normal. This process is about awareness, not perfection. The goal is simply to leave this workbook feeling more confident, informed, and ready to advocate for yourself at your next appointment.

For educational purposes only. This guide is not intended to diagnose or treat medical conditions. Always consult your healthcare provider before making changes to your medications, supplements, or treatment plan. Affiliate links may be included at no cost to you.

QUICK THYROID DECODER CHART

Marker	Conventional Range	Functional Range	What It Means When Low	What It Means When High	Why It Matters
TSH	0.5–5.0	0.5–2.0	Brain not signaling enough; thyroid	Graves' disease, overmedicated, or adrenal	Brain's message to thyroid; slower or overactive
Free T4	0.8–1.8	1.2–1.6	Low thyroid hormone output	Graves', over-replacement	Raw thyroid hormone before conversion to T3
Free T3	2.3–4.2	3.2–3.8	Poor conversion, sluggish metabolism,	Overconversion, overstimulation	Active hormone that affects mood,
Reverse T3	8–25	10–18	Low metabolism or adrenal burnout	High stress, inflammation, infection	Inactive mirror form of T3; "brakes" on
TPO Antibodies	<35	<15	—	Autoimmune thyroid attack (Hashimoto's/Gra	Enzyme antibody that marks thyroid
Tg Antibodies	<1	<1	—	Autoimmune inflammation targeting stored	Complements TPO Ab in detecting
TRAb	<1.75 IU/L	<1.0 IU/L	—	Graves' activity: thyroid overstimulated	Autoantibody binding to TSH receptors; signals
TSI	<0.55 IU/L or <140% baseline	Within range	—	Graves' and TED activity; may rise before flare	Subtype of TRAb that directly stimulates
Vitamin D (25-OH)	30–100	60–80	Immune dysfunction, fatigue	—	Low D = higher antibody activity
Ferritin	15–150	70–120	Low iron storage → fatigue	Inflammation, overload	Iron is essential for T4 → T3 conversion
Selenium & Zinc	varies	optimal mid-upper range	Deficiency slows conversion	Excess can imbalance copper	Cofactors that reduce oxidative stress +
Magnesium (RBC)	1.7–2.2	2.0–2.2	Muscle cramps, anxiety, poor sleep	Rare	Needed for calm nerves + enzyme activation

Note: "Normal" does not always mean "optimal." Functional ranges reflect where the body often performs best.

Note: Many patients feel best within functional ranges. A Free T3:Reverse T3 ratio near 2:1 can suggest more balanced conversion and cellular use of thyroid hormone.

DETAILED LAB MARKER DESCRIPTIONS

5) TPO Antibodies (TPO Ab)

- What it is: Antibodies against thyroid peroxidase enzyme; hallmark of autoimmunity.
- Elevated (>35 IU/mL): Active thyroid autoimmunity; flares.
- Functional Goal: <15 IU/mL.
- Support: Gut repair, Vitamin D, Selenium, antioxidants, stress care.

6) Tg Antibodies (Thyroglobulin Ab)

- What it is: Antibodies against thyroglobulin (hormone storage protein).
- Why it matters: May be elevated even if TPO Ab is normal; complements autoimmune assessment.
- Functional Goal: <1 IU/mL.

7) TRAb = Thyrotropin Receptor Antibodies

- What it is: Antibodies that bind to TSH receptors; can stimulate, block, or neutralize.
- High (>1.75 IU/L): Graves' activity or flare risk; hyperthyroid symptoms.
- Functional Goal: <1.0 IU/L.
- Support: Inflammation calming, Selenium, Vitamin D, gut/liver support.

8) TSI = Thyroid Stimulating Immunoglobulins

- What it is: A stimulatory subset of TRAb that drives thyroid hormone output and can activate orbital tissues (TED).
- High (>0.55 IU/L or >140% baseline): Graves' + TED activity; useful for tracking remission/relapse.
- Goal: Fall and remain within reference for 6–12 months.

DETAILED LAB MARKER DESCRIPTIONS

9) Vitamin D (25-OH)

- Why it matters: Immune modulator; low D correlates with higher antibodies and fatigue.
- Functional Range: 60–80 ng/mL.

10) Ferritin (Iron Storage)

- Why it matters: Required for T4→T3 conversion and oxygen delivery.
- Low (<70 ng/mL): Fatigue, hair loss, poor conversion.
- Functional Range: 70–120 ng/mL.

11) Selenium & Zinc

- Selenium: Supports T4→T3 conversion; may reduce antibodies (~200 mcg/day commonly used, must personalize).
- Zinc: Supports receptor sensitivity and immune balance.

12) Magnesium (RBC or Serum)

- Why it matters: Calms the nervous system; supports hundreds of enzymatic reactions and medication responsiveness.
- Goal: Upper half of normal (serum ~2.0–2.2 mg/dL).

Root Area	Key Labs	What to Explore
Brain ↔ Thyroid	TSH, TRAb	Stress & pituitary feedback
Hormone Production	Free T4	Nutrients & thyroid integrity
Conversion & Metabolism	Free T3, Reverse T3, Ferritin	Gut / liver / adrenal balance
Autoimmunity	TPO, Tg, TRAb, TSI	Immune calming + anti-inflammatory focus
Eye Inflammation	TSI	Antioxidants + selenium + stress care

COMMON THYROID LAB UNIT CONVERSIONS

Marker	U.S. Unit	SI Unit	Conversion Formula	Example
TSH (Thyroid Stimulating	µIU/mL	mIU/L	1 µIU/mL = 1 mIU/L	No conversion needed
Free T4 (Thyroxine)	ng/dL	pmol/L	× 12.87	1.2 ng/dL × 12.87 = 15.4 pmol/L
Total T4	µg/dL	nmol/L	× 12.87	8.0 µg/dL × 12.87 = 103 nmol/L
Free T3 (Triiodothyronin	pg/mL	pmol/L	× 1.536	3.5 pg/mL × 1.536 = 5.38 pmol/L
Total T3	ng/dL	nmol/L	× 0.01536	120 ng/dL × 0.01536 = 1.84
Reverse T3	ng/dL	pmol/L	× 15.377	15 ng/dL × 15.377 = 230.7 pmol/L
Thyroglobulin (Tg)	ng/mL	µg/L	× 1	No conversion needed
Thyroid Antibodies (TPO,	IU/mL	kIU/L	× 1	No conversion needed

If you've ever compared your thyroid results online or to your friends, and felt confused because the numbers didn't match, you're not alone. Different labs use different measurement systems, most commonly U.S. conventional units and SI (International System) units. When you understand how to convert your results, you can compare labs more accurately, use international research, and interpret your progress over time.

Quick Conversion Tips

- If you're converting U.S. to SI, multiply by the number in the table.
- To convert SI to U.S., divide by the same number.
- Write both results in your tracker for future reference.

Example:

Your Free T4 is 16 pmol/L from an international lab.

To convert to U.S. units: 16 ÷ 12.87 = 1.24 ng/dL

THYROID LAB TRACKER

Date	TSH	F T4	F T3	rT3	TPO	Tg	TRAb	TSI	Supplements	Symptoms	Notes
sample	1.8	1.4	3.1	14	28	<1	1.2	120%	Selenium, Vit D	tired AM, puffy eyes	less bloated

SYMPTOM CHECK-IN

Energy + Metabolism:
- □ Low energy
- □ Afternoon crash
- □ Wired but tired
- □ Difficulty waking
- □ Feeling cold often
- □ Heat intolerance

Mood + Mental Health:
- □ Anxiety
- □ Depression
- □ Mood swings
- □ Brain fog
- □ Irritability
- □ Overwhelm
- □ Panic episodes

Sleep:
- □ Trouble falling asleep
- □ Waking at 2–3 AM
- □ Restless or light sleep
- □ Feeling unrefreshed
- □ Night sweats

Eyes + Face (TED-related):
- □ Dryness
- □ Grittiness
- □ Pressure behind eyes
- □ Puffiness or swelling
- □ Light sensitivity
- □ Double vision
- □ Changes in appearance

Digestive Function:
- □ Bloating
- □ Constipation
- □ Loose stools
- □ Heartburn or reflux
- □ Nausea
- □ Food sensitivities

Hormonal / Reproductive:
- □ PMS or irregular cycles
- □ Low libido
- □ Hot flashes or night sweats
- □ Acne or oily skin
- □ Hair loss or thinning

Musculoskeletal:
- □ Joint pain or stiffness
- □ Muscle weakness
- □ Tremors or shaking
- □ Restless legs

Skin + Hair:
- □ Dry skin
- □ Itchy skin
- □ Brittle nails
- □ Hair loss or shedding

General Wellbeing:
- □ Feeling “off”
- □ Easily overwhelmed
- □ Frequent illness or low immunity
- □ Slow recovery after stress
- □ Other:

Your symptoms are data too… track them alongside your labs for real clarity.

TRAB VS. TSI: UNDERSTANDING YOUR GRAVES' ANTIBODIES

One of the most confusing parts of a Graves' disease diagnosis is understanding the antibody tests. You may see both TRAb and TSI on your lab report, and while they're related, they measure different aspects of your autoimmune activity. Learning to read both helps you understand how active your Graves' disease or Thyroid Eye Disease (TED) truly is.

Think of TRAb as the total immune "noise," and TSI as the "volume knob" that controls how loud that noise is in your thyroid and eyes. Both tell you something valuable. TRAb reveals that autoimmune activity is present, while TSI shows how strong that activity currently is.

What TRAb Really Means

TRAb stands for Thyrotropin Receptor Antibody and measures the total amount of antibodies that attach to the thyroid's TSH receptor. It's like a broad snapshot of your immune system's activity against your thyroid. What makes TRAb unique is that it captures *all* types of TSH receptor antibodies: **stimulating, blocking, and neutral.**

This means your TRAb level can be elevated whether your thyroid is being pushed into overdrive or not. Even if your thyroid hormones are in the "normal" range or you're in a hypothyroid phase after treatment, TRAb can remain high because the immune system continues to make antibodies for some time.

A high TRAb result confirms that your body is still producing immune activity against the thyroid and its receptors. It can also cross-react with tissues behind the eyes, which is why it's relevant for Thyroid Eye Disease as well. If your TRAb levels are trending down, that's a great sign your immune system is calming down, even if they're not completely gone.

TRAB VS. TSI: UNDERSTANDING YOUR GRAVES' ANTIBODIES

What TSI Really Means

TSI stands for Thyroid-Stimulating Immunoglobulin and represents only one type of antibody: the **stimulating** kind that tells your thyroid to produce more hormones than it should. Think of it as the "on switch" that drives hyperthyroidism.

While TRAb captures the total number of antibodies, TSI focuses specifically on those that are actively causing stimulation. When your TSI is high, it means your immune system is still sending strong "make more hormone" signals, which often correlates with **hyperthyroid** symptoms like anxiety, palpitations, heat intolerance, and insomnia.

TSI is especially helpful for understanding disease activity and for monitoring progress over time. As your TSI level drops, it's often a sign that your Graves' disease is improving or entering remission. Persistent elevation, on the other hand, can suggest that stimulation is still active, especially if stress, gut imbalances, or inflammation haven't been fully addressed.

The Difference Between TRAb and TSI

The simplest way to think of it is that TRAb measures all thyroid antibodies that bind to the TSH receptor, while TSI measures only the stimulating ones. TRAb tells you there's immune activity, it's the presence of antibodies, while TSI tells you how active/hyper that immune stimulation is.

Both are important for different reasons. TRAb helps confirm an autoimmune thyroid condition and is often used to track overall immune activity. TSI, on the other hand, reflects the real-time intensity of Graves' stimulation and can be a more direct indicator of hyperthyroidism.

When you're newly diagnosed, both TRAb and TSI are usually high. As you begin treatment and your thyroid calms down, TSI tends to drop first, while TRAb may stay mildly elevated for months or even years before normalizing. For those with Thyroid Eye Disease, both antibodies matter: TRAb reflects ongoing immune signaling that can influence inflammation behind the eyes, while TSI can correlate with flare severity and progression.

TRAB VS. TSI: UNDERSTANDING YOUR GRAVES' ANTIBODIES

Typical Ranges and What They Mean
Labs vary slightly, but conventionally TRAb is considered normal below about 1.75 IU/L, while TSI is considered normal below about 1.3 IU/L. Functionally, the goal is to see both trending downward over time, ideally below 1.0 or at least steadily decreasing with each check.

Remember that numbers alone don't define your healing. Some people feel well long before their antibodies normalize, and others still experience symptoms even when their levels are technically "in range." Focus on the overall trends and how you're feeling, not just the individual data points.

How to Support Antibody Reduction Naturally
Reducing TRAb and TSI is about calming the immune system rather than just suppressing symptoms. Addressing gut health, nutrient deficiencies, and chronic inflammation are all key.

- Support gut balance: Rule out infections or dysbiosis with stool testing like GI-MAP or Gut Zoomer and prioritize nutrition.
- Optimize nutrients: Selenium (100–200 mcg/day), vitamin D, zinc, and omega-3s help lower antibodies and regulate immunity.
- Reduce inflammation: Eat an anti-inflammatory diet rich in colorful vegetables and antioxidants.
- Lower stress: Use daily tools like meditation, yoga, and breathwork to regulate your cortisol rhythm.
- Avoid excess iodine and toxins: Over-supplementing with iodine or exposure to mold, smoke, or heavy metals can trigger flares.

FREE T3 : REVERSE T3 RATIO
HOW TO CALCULATE AND CONVERT UNITS

The Free T3 : Reverse T3 (FT3:RT3) ratio gives valuable insight into how well your body is converting thyroid hormone into its active form versus its inactive form. A low ratio can indicate poor conversion, chronic stress, inflammation, or slowed metabolism, even when your thyroid hormones look "normal." The goal is to see whether your body is using thyroid hormones effectively, not just producing them.

Step 1 — Check Your Units

Labs report Free T3 and Reverse T3 in different systems.

To calculate your ratio correctly, both must be in the same unit (either pg/mL and ng/dL, or both pmol/L and pg/mL).

Here's how to align them:

- Free T3 conversion:
  - 1 pg/mL = 1.536 pmol/L
- Reverse T3 conversion:
  - 1 ng/dL = 15.377 pmol/L

If your lab reports:

- Free T3 in pg/mL and Reverse T3 in ng/dL, you can use this simplified formula:
- (Free T3 ÷ Reverse T3) × 100 = FT3:RT3 ratio

If your lab reports both in SI units (pmol/L), no conversion is needed — simply divide Free T3 by Reverse T3.

Step 2 — Calculate the Ratio

Use your actual numbers:

- Example: Free T3 = 3.5 pg/mL
- Reverse T3 = 15 ng/dL
- 3.5 ÷ 15 × 100 = 23.3

Your FT3:RT3 ratio = 23.3

Step 3 — Interpret the Ratio

There's no universal "normal," but most functional practitioners look for:

- **Above 20**: Generally good conversion and utilization
- **16–20**: May indicate mild sluggish conversion or adrenal stress
- **Below 15**: Often suggests poor conversion, inflammation, or cortisol imbalance

A low ratio means that even if your Free T3 appears fine, much of it may be getting diverted into Reverse T3 (the inactive form), especially during chronic stress, infection, or inflammation.

ASK YOUR DOCTOR THIS

Questions to Ask at Your Next Appointment

For Testing & Monitoring:

□ “Can we review my full thyroid panel, including Free T3, Free T4, Reverse T3, antibodies, TRAb, and TSI?”

□ “Would you be willing to check Vitamin D, Ferritin, Selenium, Zinc, and Magnesium?”

□ “Could we evaluate my liver function, lipid panel, and glucose/insulin for deeper insight?”

□ “If my Free T3 is low but TSH is normal, could we discuss conversion issues or adrenal factors?”

□ “Are there functional ranges you consider optimal for thyroid patients—or just the lab reference?”

□ “Would a stool test or GI-MAP be appropriate if I suspect gut triggers?”

□ “Could we screen for autoimmune comorbidities like celiac or type 1 diabetes (TPO, Tg, GAD, etc.)?”

For Medication Review:

□ “Can we talk about how my symptoms align with my medication dose?”

□ “If I switch from methimazole or levothyroxine, how should I monitor side effects or changes?”

□ “Can we taper carefully based on labs and how I feel, not just TSH alone?”

□ “Can you educate me about the Block & Replace Method?”

Functional Pharmacist Tip: Bring a printed or screenshot copy of your last two lab reports, highlight key markers (especially Free T3, TPO, TRAb, and TSI), and note how your symptoms match or differ. It helps the conversation stay clear, collaborative, and empowering.

ASK YOUR DOCTOR THIS

Questions to Ask at Your Next Appointment

For Thyroid Eye Disease Support:
□ "Do you collaborate with ophthalmologists familiar with functional or anti-inflammatory support for TED?"

□ "Can we check my Selenium levels, since research shows it may help eye inflammation?"

□ "Would antioxidant or omega-3 supplementation be appropriate?"

For Lifestyle and Root-Cause Exploration:

□ "Can we talk about stress, sleep, and blood sugar regulation in my thyroid plan?"

□ "What small daily changes could help reduce antibody activity or inflammation?"

□ "Can we review potential environmental triggers (mold, infections, toxins) if antibodies remain high?"

For Functional or Advanced Testing (if appropriate):
□ DUTCH test - to assess adrenal and hormonal balance
□ GI-MAP or Gut Zoomer or any other stool analysis - to identify gut infections and inflammation
□ OAT or Metabolomix+ - to evaluate nutrients, detox markers, and oxidative stress

If You Don't Feel Heard
If your doctor won't address nutrition, root causes, or functional testing, please know that you're not alone, and that there are other options.
You can work with me and our functional health team to look deeper and get the whole picture addressed. We combine clinical medicine with an integrative and functional, holistic lens to uncover what's driving your thyroid and immune imbalance, so you can finally move from surviving to thriving.
Learn more about working together at [functionalthyroid.com]

QUICK REFERENCE: LABS TO REQUEST

Bring this list to your appointment and highlight what applies to you.

Core Thyroid Panel
- □ TSH
- □ Free T4
- □ Free T3
- □ Reverse T3

Thyroid Antibodies
- □ TPO Antibodies
- □ Thyroglobulin (Tg) Antibodies
- □ TRAb (Thyrotropin Receptor Antibodies)
- □ TSI (Thyroid-Stimulating Immunoglobulin)

Foundational Nutrients for Thyroid Function
- □ Ferritin (not just iron)
- □ Vitamin D (25-OH)
- □ Vitamin B12
- □ Zinc
- □ Selenium (if available)
- □ Magnesium (RBC preferred)

Optional but Often Helpful
- □ Comprehensive Metabolic Panel
- □ Lipid Panel
- □ Fasting Insulin
- □ Hemoglobin A1C
- □ CRP (C-reactive protein)
- □ Cortisol (serum or salivary pattern if appropriate)

Functional & Advanced Testing (When Indicated)
- □ Comprehensive Stool Test (e.g., Gut Zoomer, GI Advanced by US Biotek, GI-MAP)
- □ DUTCH Test or Hormone Zoomer (Hormones + Cortisol Pattern)
- □ Organic Acids Test (OAT)
- □ Comprehensive Micronutrient Panel (NutrEval, Metabolomix+)
- □ Mycotoxin / Mold Testing
- □ Food Sensitivity Testing (MRT or similar)
- □ Heavy Metal Panel
- □ Adrenal Cortisol Awakening Response (CAR) - usually comes with Zoomer or DUTCH

Pro Tip:
If your provider feels this is “too much at once,” ask:
“Which of these would you prioritize based on my symptoms?”
That keeps the conversation collaborative while still advocating for a fuller picture.

WHAT IF YOUR DOCTOR SAYS NO?

If your doctor refuses to order the labs you're requesting, especially after you've explained your symptoms clearly, it can feel defeating. You may walk out of that appointment questioning yourself. You may wonder if you're overreacting. You may even start to doubt your own body.
Let me say this clearly: you are not crazy, dramatic, or difficult for wanting answers.
Medical gaslighting is real. It happens when symptoms are minimized because labs fall within broad population ranges, when your lived experience is dismissed in favor of a reference interval, or when curiosity is interpreted as confrontation. Being told "everything looks fine" when you feel anything but fine can be incredibly isolating.

If this happens, take a breath. This is not a reflection of your worth or intelligence. It is often a reflection of time constraints, rigid protocols, insurance limitations, or a system that prioritizes disease management over root-cause investigation.

You can respond calmly and confidently with:
"I understand these labs are technically within range, but I'm still experiencing significant symptoms. I would feel more comfortable ruling out these additional markers. Can we document that I requested them?"

That one sentence shifts the dynamic. It signals that you are informed and serious about your care.

If the answer is still no, you have options. You are allowed to seek a second opinion. You are allowed to work with a practitioner who looks at optimal ranges, patterns, and root causes. You are allowed to order labs independently when appropriate. And you are absolutely allowed to choose a care team that listens to you without making you feel small. Our team would be happy to work with you and help you get what you're looking for.

The right provider will not feel threatened by your questions. They will welcome them.

If you've ever left an appointment in tears, feeling unheard or blamed, I see you. I've been there. That experience can light a fire in you, not to fight your doctors, but to fight for yourself.
Advocacy is not aggression.
It's self-respect.
And you deserve care that honors both your numbers and your humanity.

HOW TO ORDER YOUR OWN LABS

1

Option 1: Order Standard Labs Yourself (In-Person Draw)
In most states, you can order thyroid and foundational labs directly through Ulta Lab Tests using our partner link:

Order labs here → https://www.ultalabtests.com/partners/pharmtotable

This platform allows you to purchase labs out of pocket and visit a local draw center near you. Results are typically available within a few days and can be downloaded directly to your portal. You can order core thyroid panels, antibodies, micronutrients, metabolic markers, and more — without needing a physician to place the order.

This can be especially helpful if:

- Your provider declined testing
- You want to monitor trends between appointments
- You prefer a more proactive approach
- You are between providers

2

Option 2: Order an At-Home Thyroid Test Kit
At-home kits can be a simple and accessible way to begin gathering data. As always, interpretation matters just as much as testing. If you prefer not to visit a lab, you can order a thyroid panel through Raena using our partner link:

Order at-home thyroid labs → https://raena.com/thyroidloveclub

Raena offers convenient at-home test kits, allowing you to collect your sample from the comfort of your home and mail it in for processing. No lab visit required.

This option may be ideal if:

- You have limited time
- You experience lab anxiety
- You prefer privacy and convenience
- You are traveling or unable to access a local draw center

3

Option 3: Order Labs Through the Functional Thyroid Care Program
If you're enrolled in the Functional Thyroid Care Program, we are able to order standard bloodwork directly through Labcorp as part of your care plan. Depending on your insurance and medical necessity, these labs may be covered in full or in part. We help determine which markers are appropriate based on your symptoms, stage of healing, and goals so you're not guessing or over-ordering. The goal is strategic testing, not more testing.

Sign up for the program here → functionalthyroid.com

This option can be ideal if:

- You prefer to use insurance
- You want testing integrated into a structured, personalized care plan
- You'd like guidance on exactly what to test and when

NEXT STEPS & CONCLUSION

If you've made it this far, take a moment to acknowledge yourself. You've just done something that most people never do, you took the time to understand your own body. That's powerful.

You've learned that lab results don't define you, but they can guide you. You've seen how "normal" ranges can still leave you feeling unwell, and that functional, optimal ranges often tell a more accurate story. Most importantly, you've started building the confidence to ask better questions and recognize that your symptoms are valid.

This workbook was designed to give you a taste of what's possible when you step into your own healing journey with knowledge, curiosity, and compassion. The next step is to deepen that awareness, to learn how to track your labs over time, connect them with your symptoms, and identify the root causes driving your thyroid imbalance.

If you're ready to continue, the Graves + TED Master Guide will take you further. It's a deeper dive into understanding your autoimmune triggers, calming inflammation, protecting your eyes, and finding clarity in your Graves' and Thyroid Eye Disease journey. It's everything I wish I had when I was first diagnosed, an empowering resource created to help you turn confusion into confidence and healing.

And if you're at the point where you want guidance that's completely personalized, someone to look at your labs, symptoms, lifestyle, and supplements as one cohesive story, I'd be honored to support you through 1:1 functional thyroid care.

Working together, we'll uncover the "why" behind your symptoms, address underlying imbalances, and create a plan that feels realistic, gentle, and effective. Whether you're managing Graves', Hashimoto's, or Thyroid Eye Disease, you don't have to do this alone. You are not too complex, too sensitive, or too much. You are simply a person whose body is asking to be understood, and now you have the tools to start listening.

Explore 1:1 functional medicine thyroid coaching or book a consultation → [functionalthyroid.com]



NEED MORE INSIGHT & SUPPORT?

THE THYROID CLARITY KIT

The strong, vibrant woman you remember being? She's still in there.
She's just buried under the racing heart, the 3am wake-ups, the exhaustion, the hair in the drain, and the eyes you don't recognize. And under every appointment that ended with "your labs look fine" and no real answers.

Your body is capable of so much more than you've been told. When you uncover what's driving your immune system, you can start getting back to her.

The Thyroid Clarity Kit finally makes Graves' and TED make sense. In The Graves + TED Functional Master Guide, you'll learn the root causes that can keep your immune system dysregulated, the functional medicine tests that uncover them, how every treatment option works, and the nutrition, gut, supplement, and lifestyle strategies to support your body and your eyes.
Also inside: the Complete Thyroid Lab Interpretation Guide + Tracker, Top Supplements for Graves + TED, The Hair Love Handbook, and 3 bonus guides.

Everything I wish I'd had, in one place, so you can stop guessing and start feeling like yourself again.

INSTANT DOWNLOAD



NEED PERSONALIZED RECOMMENDATIONS & SUPPORT?

THE FUNCTIONAL MEDICINE THYROID CARE PROGRAM

Your labs look “fine,” but you know your body. The exhaustion coffee can’t touch, the brain fog, the anxiety humming under everything, the hair in the drain, the weight that won’t budge. You’re not imagining it. You’re just missing the right team. If you’re tired of hearing “everything looks normal” when you still feel anything but, the Functional Thyroid Care Program is your next step. This exclusive, state-specific program brings together a functional medicine pharmacist, a thyroid health coach (hi its me) who has personally navigated Graves and Thyroid Eye Disease, and an optional integrative physician to create a truly collaborative care plan designed around you. Together, we look at your labs through the lens of optimal ranges, uncover what’s really keeping you stuck, from hidden gut imbalances and nutrient deficiencies to chronic stress and inflammation, and build a personalized protocol to guide you on your path toward remission.

Most people never get access to this level of personalized, root-cause care. If you’re ready to stop guessing and start healing with a team that actually listens, this is your moment. Imagine waking up with energy, thinking clearly, and recognizing yourself again. That woman isn’t gone, and you are more capable of healing than anyone has told you.
Spots are limited and state-specific. You’ve waited long enough to feel like you again.

JOIN YOUR CARE TEAM



Questions?

HELLO@THYROIDLOVECLUB.COM

WWW.THYROIDLOVECLUB.COM

@THYROIDLOVECLUB (INSTAGRAM)

@THYROIDLOVECLUB (TIKTOK)

SUPPLEMENT STORE

MONTHLY SUPPORT GROUP

BOOK 1:1

For educational purposes only. This guide is not intended to diagnose or treat medical conditions. Always consult your healthcare provider before making changes to your medications, supplements, or treatment plan. Affiliate links may be included at no cost to you.