

A group of five diverse women are smiling and standing together outdoors. From left to right: a woman with blonde hair in a pink lace top, a woman with blonde hair in a purple denim dress, a woman with long wavy brown hair in a white top, a woman with long dark hair and bangs in a white lace top, and a woman with blonde hair in a pink top. The background is a plain white wall with some greenery on the right.

Modern
Thyroid
Clinic

Thyroid Lab Guide

The labs you need
and what they mean

By McCall McPherson PA-C



WELCOME TO

Modern Thyroid Clinic!

Welcome from **Modern Thyroid Clinic**, where your journey to wellness begins with a compassionate team who's taken the same journey you are on.

Hi, I'm McCall McPherson, and I intimately understand your struggle. I, too, was a patient grappling with debilitating fatigue and confusion.

My personal quest to **reclaim my own health** turned into a mission, conceived from the urgent need to address the countless hours I, and other patients, have lost in search of answers for their hypothyroid symptoms.

We're not just a clinic; we're a movement, tirelessly working to train clinicians and help our patients in groundbreaking methods to broaden our reach, ensuring no one has to endure the uncertainty of unresolved thyroid issues.

Visit us, join our community, and reclaim the vibrant life you deserve.

McCall McPherson, PA-C
Founder, Modern Thyroid Clinic

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Introduction

More than any other question at Modern Thyroid Clinic, I get asked two things:

- What labs do I need to get to properly assess my thyroid?
- What are the ranges they should be in?

In this guide, we're going to dissect functional labs that tell you exactly how your thyroid or thyroid medication is working (or not working).

(We'll save Hashimoto's analysis for another time.)

So many people are suffering and confused because they have all the symptoms of hypothyroidism, but their doctor keeps telling them their results are in range and, therefore, do not have hypothyroidism.

Most of the time, this is because the labs ordered were insufficient to get to the root of the problem and get meds perfectly dialed in, resulting in patients who continue to feel terrible - especially when they are told their labs are in the "normal" range.

Here's what most clinicians don't tell you: normal isn't optimal.

Optimal is what we strive for - and our patients will tell you - it makes all the difference.

In this guide we'll introduce you to the tests and ranges that matter so that you can understand what should be ordered and what we look for to get your levels optimized.

Labs You Need

A proper workup for hypothyroidism include the following labs:

- TSH
- Free T4
- Free T3
- Reverse T3

To rule out Hashimoto's, these labs must be ordered:

- Thyroid Peroxidase Antibodies
- Thyroglobulin Antibodies

If your clinician will not order these labs, head here for deeply discounted cash pay prices: [CLICK HERE](#)

Normal Isn't Optimal

I get into this deeper in our thyroid course but, in short, regular lab ranges have expanded over the years and are simply way too wide. As a result, individuals can suffer for years (or decades) with thyroid symptoms before drifting outside of most lab's "normal" ranges.

So the lab ranges you'll find here are within optimal (not 'normal') ranges, developed after analyzing hundreds of thousand of pieces of data, and may be very different than the ones you'll see on your commercial lab report.

Some practitioners who are not specialists in thyroid care over rely on the reference ranges commercial labs use - leading some doctors to tell you your results are "normal".

But within these ranges, people thrive and are truly able to get their lives back.

Let's dig in...

Why It's Not All About The TSH

Regardless if you are on medication, have or haven't been diagnosed with hypothyroidism, your TSH should always be close to 1 and less than 2. Some people's symptoms don't resolve until it's less than 1.

It's important to note, TSH does not truly dictate your thyroid status, especially if you are on a T4 based medication like levothyroxine, Synthroid, Tirosint, Unithroid, et al. These medications disrupt the feedback mechanism of communication to your brain, rendering the TSH completely invalid.

Remember, the only job of the TSH is to tell your brain how hard it needs to work. Alone, it's simply not a good gauge to your thyroid status.

Free T4 - Your Inactive Hormone

Free T4

- Greater than 0.90 but less than 1.2.
- When Free T4 creeps above 1.2, it starts to signify a conversion problem, meaning you aren't converting the Free T4 to Free T3.

Free T3 - The Good Stuff

I like my patients' Free T3 to hang around 3.6 - 4.2 for the better part of the day. This often means they peak a little bit higher.

This is the most important thyroid lab ordered. It is what dictates the true status of thyroid function. If your doctor is telling you that your thyroid looks fine, but has not ordered Free T3, you certainly need a deeper look before ruling out a thyroid problem.

This lab value is influenced by the time of day you take your medicine if you are on desiccated thyroid - things like Armour, NP thyroid, etc., or on Cytomel (lithyronine).

Reverse T3 - Inhibition

Ideally below 15, usually around 8 - 12. The lower your Free T3, the lower Reverse T3 needs to be, as it is a competing enzyme that interferes with Free T3 absorption.

This can often be elevated in people on T4-based medications (see list above). This creates the need for a reduction in Free T4 to reduce Reverse T3.

Less isn't always better, 8 should be the lower end of this hormone.

In Closing

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Thank you. Becoming better educated is the fastest way to recovery and managing your thyroid symptoms.

Patients like you, who are reading and learning how their thyroid works, are leading the thyroid revolution.

Spread the word that
#ThereIsNoReasonToStillHaveThyroidSymptoms



Thank you!

McCall McPherson, PA-C
Founder
Modern Thyroid Clinic

Chief-Hope-Giver
Thyroid Nation

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what modern thyroid
care could do for you...

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