

# IRON LAB CHEAT SHEET

Know exactly which labs to request, what your numbers mean, and what **optimal** looks like, not just normal.

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## WHY FERRITIN MATTERS

Ferritin is your body's **iron storage protein**, the most commonly missed marker in women's health.

The lab reference range flags ferritin as low only when it drops below 12 ng/mL. But most women feel their best between **70 and 100 ng/mL**.

*That gap (between 12 and 70) is where most women are dismissed.*

## FERRITIN IS DIFFERENT FROM SERUM IRON

Serum iron shows what's circulating *right now*. Ferritin shows what's stored. You can have normal serum iron and depleted ferritin at the same time, which means your doctor can tell you your iron is fine while your ferritin tells a completely different story.

## SYMPTOM CHECKLIST

- Fatigue that doesn't improve with sleep
- Hair shedding more than usual
- Brain fog / word-finding issues
- Anxiety or restlessness
- Heavy or painful periods
- Cold hands and feet
- Shortness of breath with mild exertion
- Low mood or feeling flat
- Headaches
- Brittle nails

*If you checked 3 or more: ask your doctor to check your ferritin specifically.*

## LABS TO REQUEST

Print this and bring it to your appointment. Ask specifically. These are not always included in a standard panel.

Lab Test	Why It Matters	Lab 'Normal' Range	Optimal for Women
<b>Ferritin</b>	Your iron storage protein, the most important single number	12–300 ng/mL	<b>70–100 ng/mL</b>
<b>Serum Iron</b>	Iron currently circulating in your blood	60–170 mcg/dL	Upper half of range
<b>TIBC</b>	Total Iron Binding Capacity, how much iron your blood can carry	250–370 mcg/dL	Lower = better when iron is adequate
<b>Transferrin Saturation</b>	Percentage of iron-carrying capacity actually being used	20–50%	<b>25–35%</b>

Lab Test	Why It Matters	Lab 'Normal' Range	Optimal for Women
<b>CBC</b>	Complete Blood Count, rules out anemia, checks hemoglobin	Varies by lab	Hemoglobin >12 g/dL

#### ABSORPTION BLOCKERS

<b>Coffee &amp; tea</b>	Wait 1 hr before/after iron
<b>Calcium supplements</b>	Take at a different time of day
<b>Antacids / PPIs</b>	Speak to your doctor
<b>High-fiber foods</b>	Separate from iron dose by 1–2 hrs
<b>Dairy</b>	Take iron on an empty stomach

#### ABSORPTION ENHANCERS

<b>Vitamin C</b>	Take with your iron supplement
<b>Empty stomach</b>	Best absorption (if tolerated)
<b>Morning dose</b>	Levels naturally dip overnight

#### WHAT TO SAY AT YOUR APPOINTMENT

Copy and paste this, or just show your doctor:

*"I'd like to request a full iron panel that includes ferritin, serum iron, TIBC, and transferrin saturation, in addition to a CBC. I've been experiencing fatigue, hair loss, and [your symptoms]. I'd like to rule out iron depletion even if my hemoglobin is normal."*

#### IF THEY SAY YOUR LABS ARE NORMAL:

*"What is my actual ferritin number? I understand the reference range goes to 300, but I've read that many women feel symptomatic below 70. Can we discuss what my level means in the context of my symptoms?"*

#### IMPORTANT NOTE

You have the right to request specific labs and to understand your results. If you are dismissed without explanation, seek a second opinion.

#### WHAT TO EXPECT: FERRITIN RECOVERY TIMELINE

Weeks 1–4 Supplement starts	Months 1–2 Energy may improve slightly	<b>Months 2–4 Ferritin begins rising</b>	<b>Months 4–6 Hair shedding slows</b>	<b>6+ Months Optimal range reached</b>
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*Recovery takes time. Women who don't see results by week 6 often quit, but the number is still moving. Consistency is the protocol.*