

BEYOND "NORMAL":

THE FUNCTIONAL LAB GUIDE TO
HORMONAL VITALITY



WHY YOUR "PERFECT" BLOODWORK IS LYING TO YOU, AND
THE OPTIMAL RANGES YOU ACTUALLY NEED TO THRIVE.

THE RED FLAG CHECKLIST

01 | THE METABOLIC ENGINE (BLOOD SUGAR & INSULIN)

- ☐ Significant energy or brain fog after a high-carb meal.
- ☐ Carrying weight that's difficult to lose, especially around the midsection.
- ☐ Frequent hangry episodes or shakiness if a meal is missed.
- ☐ The 3 pm Wall: A non-negotiable need for caffeine or a sugary snack to get through the workday.
- ☐ Intense sugar or salt cravings in the evening.

02 | THE HORMONAL SYMPHONY (ENDOMETRIOSIS, POLYCYSTIC OVARIAN SYNDROME (PCOS) & SEX HORMONE IMBALANCE)

- ☐ Debilitating Pelvic Pain: Pain that disrupts your daily routine, forces you to miss work, or requires significant over-the-counter intervention.
- ☐ Irregular Bleeding: Experiencing heavy flow, unpredictable cycles, or spotting between your periods.
- ☐ Terrible Mood Swings: Feeling "out of control" emotionally, intense irritability, or a dark cloud that lifts once your period begins.
- ☐ Adult Acne or Hair Changes: Persistent breakouts along the jawline, increased hair growth on the face or nipples, thinning hair on head.
- ☐ Cycle Irregularity: Cycles that are consistently longer than 35 days or shorter than 21 days.
- ☐ Significant Breast Tenderness: Cyclical discomfort or migraines that track specifically with your hormonal shifts.

03 | THE METABOLIC SPARK (THYROID)

- ☐ The Internal Thermostat Glitch: Having chronically cold hands and feet, or feeling a chill you can't shake even in a warm room.
- ☐ The "Sign of Hertoghe": Noticing the outer third of your eyebrows is thinning or has disappeared.
- ☐ Morning Puffiness: Waking up with a puffy face or swollen eyelids that take hours to clear.
- ☐ The Brain Fog Blanket: Feeling like your mental processing speed has slowed down significantly.

04 | THE OXYGEN CARRIER (IRON & FERRITIN)

- ☐ Heavy Limbs: Feeling like your legs are made of lead when walking up stairs or hills.
- ☐ The Lusterless Look: Hair that has lost its shine, breaks easily, or sheds excessively in the shower.
- ☐ Restless Evenings: Fidgety or crawling sensations in your legs the moment you try to relax at night.
- ☐ Air Hunger: Feeling slightly breathless even during low-intensity activities or conversations.



05 | THE "CLEAN UP" CREW (LIVER & GUT)

- ☐ Environmental Sensitivity: Feeling overwhelmed or getting a headache from strong smells, heavy perfumes, or even a single cup of coffee.
- ☐ The 3 AM Wake-Up: Consistently waking up in the middle of the night feeling hot, itchy, or restless (often a sign of liver processing peak).
- ☐ The Balloon Effect: Experiencing significant abdominal bloating that worsens as the day goes on, regardless of what you eat.
- ☐ The Ghost Hangover: Feeling sluggish, foggy, or physically hungover in the morning despite not having a drop of alcohol the night before.
- ☐ Skin Signals: Noticing persistent redness, unexpected breakouts, hives, or skin that feels unusually reactive to your normal products.



THE MASTER LAB CHART

(NORMAL VS. OPTIMAL)

MARKER	STANDARD "NORMAL"	FUNCTIONAL "OPTIMAL"	THE CLINICAL WHY
FASTING INSULIN	< 170 pmol/L	20 – 50 pmol/L	The Master Hormone. High levels drive PCOS and inflammation.
HBA1C	< 6.0%	4.8 – 5.2%	A 3-month average of blood sugar. We want stable, not borderline.
FERRITIN	15 – 150 ng/mL	70 – 100 ng/mL	Iron stores. Low levels mimic thyroid issues and cause hair loss.
TSH (THYROID)	0.5 – 5.0 mIU/L	1.0 – 1.5 mIU/L	Standard labs miss subclinical hypothyroidism 50% of the time.
FREE T3	3.5 – 6.5 pmol/L	5.0 – 6.0 pmol/L	This is your <i>active</i> hormone. It dictates your actual metabolic speed.
HS-CRP	< 8.0 mg/L	< 1.0 mg/L	A high-sensitivity marker for systemic inflammation (crucial for Endometriosis).
GGT (LIVER)	5 – 50 U/L	10 – 20 U/L	An early marker of liver stress and difficulty clearing excess estrogen.
VITAMIN D	75 – 250 nmol/L	125 – 150 nmol/L	Acts as a pre-hormone for immune and reproductive health.

WHEN BLOODWORK ISN'T ENOUGH

Standard bloodwork provides a snapshot in time. However, for complex conditions like Endometriosis and PCOS, we often need a more complete picture. This is where functional diagnostics come in.



THE DUTCH TEST

Unlike a single blood draw, this dried urine test shows how your hormones are metabolized (broken down) by the liver. It's the gold standard for understanding estrogen dominance.

COMPREHENSIVE MICROBIOME MAPPING

Your gut bacteria play a massive role in recycling estrogen. If the gut is imbalanced, your hormones will be too.

ORGANIC ACID TESTING (OAT)

This looks at cellular energy production and neurotransmitter metabolites, helping us see why you feel "wired but tired."

MONTH-LONG CYCLE MAPPING

If you struggle with PMS, PMDD, or irregular cycles, a single Day 3 or Day 21 blood draw often misses the mark. We map your hormones throughout your entire cycle to see exactly where the dip or spike is happening.

ADRENAL & CORTISOL RHYTHM

We don't just check if you have cortisol; we check when you have it. By measuring your cortisol rhythm across four points in the day, we can see why you're "wired but tired" or crashing at 3 PM.

FROM DATA TO DESIGN

YOUR PERSONALIZED HEALTH STRATEGY

Having the right data is the first step. Knowing precisely what to do with it is where true transformation begins. In my practice, we go beyond analysis. We use these functional markers to craft a protocol that is uniquely yours—integrating potent botanical medicine, precision-targeted supplementation (like creatine or B vitamins), and clinical nutrition designed for YOUR body.



01

Download your labs from LifeLabs or Dynacare.

02

Highlight any markers that fall outside the Optimal column on Page 3.

03

Ready to uncover what your body's really telling you? Here's how to take the next step: **Book an Initial Consult.**



[SCHEDULE YOUR 15-MINUTE STRATEGY CALL](#)

THE PATIENT ADVOCATE SCRIPT

HOW TO TALK TO YOUR DOCTOR

It's a common experience: you feel off, but your lab results come back within the standard reference ranges, and you're told there's nothing wrong. Use this script to navigate that conversation and request the specific markers we need for a functional assessment.



THE OPENING: SETTING THE CONTEXT

"I've been tracking some persistent symptoms—specifically [mention your top 2 symptoms, e.g., extreme cycle pain and afternoon energy crashes]. While I'm glad my previous labs were 'in range,' I'm still not feeling like myself. I'm working on a comprehensive health strategy and would like to establish a more detailed baseline to look for subclinical trends."

THE SPECIFIC REQUESTS



FOR METABOLISM

"Can we add Fasting Insulin and hs-CRP to my next blood draw? I want to rule out low-grade systemic inflammation and check my insulin sensitivity."



FOR THYROID

"I'd like a full thyroid panel this time, including Free T3, Free T4, and Thyroid Antibodies, rather than just TSH. I want to ensure my body is actually converting and using the hormone efficiently."



FOR IRON/ENERGY

"Can we check my Ferritin levels specifically? I'm looking to see if my iron stores are optimal for hair health and energy, not just at the bottom of the 'normal' range."

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TIP: *If they ask why, focus on wanting to see the full picture of your metabolic and hormonal health.*



HANDLING THE "NO" (THE CLINICAL NOTE STRATEGY)

If your practitioner is hesitant to order a specific test because it's not "standard of care," stay calm and say:

"I understand it might not be the standard first step, but given my symptoms, it's important to me to have this critical data. If you aren't able to order it today, could you please make a note in my clinical file that the request for [Test Name] was made and declined?"

Why this works: Practitioners are often more willing to order a test once they realize they are officially documenting a refusal to investigate a patient's specific concern.



MEET YOUR HEALTH STRATEGIST: DR. NATALIE BOZINOVSKI ND, MSC.

I am a board-certified Naturopathic Doctor and Master of Nutritional Sciences with over a decade of experience bridging the gap between biomedical data and female physiology. After 20 years of managing Stage IV Endometriosis and defying the "impossible" to welcome my two children at 39 and 40, I founded the Natural Endo Movement.

My mission is to help ambitious women outsmart chronic pain and hormonal burnout by moving beyond "normal" and reclaiming their vitality.

[LEARN MORE ABOUT MY APPROACH](#)

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