



FERTILITY OPTIMAL GUIDELINES

The following is a guideline on fertility labs and optimal levels to aim for in both USA and CAN units of measurement. These guidelines are pulled from years of mentorship, clinical experience and research studies. Some values are different from the reference range that your care provider or fertility clinic may be going off of, but when it comes to fertility we want to aim for optimal, not normal.

Test	Impact	Optimal US Units	Optimal CAN Units
B12	Egg quality, miscarriage risk	>250	>500
Vitamin D	Egg quality, miscarriage risk, insulin resistance	50 - 60	120-150
Estradiol	Thickens lining, stimulates fertile mucous	30 - 50	100 - 120
Progesterone	Thickens lining, supports implantation	> 15	> 30
Fasting Insulin	Egg quality, androgens, miscarriage risk	< 7	<50
Fasting Glucose	Egg quality, androgens, miscarriage risk	< 90	< 5
HOMA-IR	Calculates insulin resistance	0.5-1.4	0.5 - 1.4
TSH	Egg quality, ovulation, miscarriage risk	<2.5	< 2.5
AntiTPO	Egg quality, ovulation, miscarriage risk	< 5	< 20
AntiTG	Egg quality, ovulation, miscarriage risk	< 1	< 20
FSH	Important for egg quality and follicular maturity	4-6	4-6



LH	Triggers ovulation	4-6	4-6
DHEAS	High with PCOS	80 - 120	4-8
Prolactin	If elevated can turn off ovulation	< 12	< 20
Free Testosterone	High with PCOS	0.3 - 1.9	4 - 8
Total Testosterone	High with PCOS	32 - 50	0.5 - 1