A CLINICAL REFERENCE FROM HORMONAL HUB

The Hormonal Bloods *Cheat Sheet.*

Every hormonal blood you might need — when to ask for it, where in your cycle, what the result means. Print this. Bring it.

TEST	WHEN IN CYCLE	NORMAL RANGE	WHAT IT TELLS YOU
TSH	Any day	0.4–4.0 mU/L	Thyroid function — *exclude before any other workup*
Free T4	Any day	12–22 pmol/L	Active thyroid hormone
FSH	Day 2–5	3–10 IU/L	Ovarian reserve · *≥30 × 2 = POI / menopause*
LH	Day 2–5	2–10 IU/L	LH:FSH ratio >2 suggests PMOS
Oestradiol	Day 2–5 baseline	110–180 pmol/L	Ovarian function · *target on HRT ≥250*
Progesterone	Day 21 (luteal)	>30 nmol/L = ovulated	Confirms ovulation that cycle
Prolactin	Any day (morning)	<500 mIU/L	Raised → galactorrhoea, missed periods, prolactinoma
Free testosterone	Day 2–5 (morning)	lab-specific	Raised in PMOS · *total >5 nmol/L = urgent*
SHBG	Any day	lab-specific	Low in PMOS (insulin resistance suppresses)
Free Androgen Index	Day 2–5	<5 typical	Best clinical measure of androgen excess
AMH	Any day	5–35 pmol/L	Ovarian reserve · ≥35 supports PMOS
17-OH progesterone	Day 2–5	<6 nmol/L	Raised → consider non-classical CAH
DHEAS	Any day	2.5–10 µmol/L	Adrenal androgens · raised in adrenal PMOS subtype
HbA1c	Any day (no fast)	<42 mmol/mol	3-month blood sugar · *42–47 pre-diabetes · ≥48 diabetes*
Fasting lipids	After 12h fast	TC<5 · HDL>1.2 · Trig<1.7	Cardiovascular risk · always with PMOS / peri
Ferritin	Any day	>30 µg/L (fnl >50)	Iron stores · inflammation can mask deficiency
25(OH) vitamin D	Any day	≥75 nmol/L	Bone, mood, hormone health
FBC	Any day	Hb ≥120 g/L	Anaemia from heavy bleeding

Cycle-dependent rule

Day 1 = first day of full bleeding. **"Day 2–5 bloods"** means within the first 5 days of your period. **"Day 21"** assumes a 28-day cycle — for longer cycles, count back 7 days from when you'd expect your next period.