
A PERFORMANCE HEALTH® GUIDE

How to Choose a Blood Test

Six questions to ask before you buy, in the order I'd ask them, so you end up with answers rather than a list of numbers.

- | | |
|--------------------------------------|---------------------------------|
| 01 What do I want to know? | 02 Which markers, not how many? |
| 03 How is the blood taken? | 04 What ranges are used? |
| 05 Read together, and in my context? | 06 What can I do with it? |

BEFORE YOU BUY

Every blood test is sold on two numbers. Neither tells you whether you'll get answers.

How many markers you get, and what it costs. I've spent 21 years with the complicated cases, and I've read a lot of blood results that people paid good money for. The ones that left them none the wiser had plenty of markers. What they didn't have was anyone reading those markers for that person, or telling them what to do first.

So here are six questions to ask before you pay for a blood test. **The order matters.** The first one decides what the others mean.

THE SIX QUESTIONS, IN ORDER

01 What do I want to know?

02 Which markers, not how many?

03 How is the blood taken?

04 What ranges are used?

05 Read together, and in my context?

06 What can I do with it?



ABOUT ME

I'm Lou Nicholettos, a physiotherapist with an MSc in pain science and 21 years in practice, and the founder of Performance Health®. I own Cornwall Physio, a multi award winning clinic, and I've spent my career with the complicated cases: people who do everything right and still don't feel well, whose standard bloods come back normal while they feel anything but. That work took me deep into functional bloodwork, and into building the Synergy Patterns® analysis I use with every client. I have two autoimmune conditions myself, so I know what it's like to be handed a set of numbers and no answers.

A detailed 3D illustration of various blood cells, including numerous red blood cells (erythrocytes) and a few white blood cells (leukocytes), set against a dark, textured background. The red blood cells are depicted as biconcave discs with a reddish-orange hue and a glowing center. The white blood cells are larger, more irregular in shape, and have a lighter, more translucent appearance. The overall composition is dense and dynamic, suggesting a microscopic view of blood flow.

THE TWO QUESTIONS

"Is there a disease here?"
"How well is my body working?"

Two different questions. Two different kinds of test. The first thing to decide is which one you're asking.

Ask what question you want answered

Two very different questions get asked of blood, and the tests built for one don't do the other well.

IS THERE A DISEASE HERE?

- A standard blood test through your GP.
- Built to find illness, and it does that job well.
- If you have symptoms that need medical attention, it's the right place to start.

HOW WELL IS MY BODY WORKING?

- A functional bloodwork analysis.
- Asks what to work on, not just what's wrong.
- You can sit inside every standard range and still feel far from your best.

FROM MY CLINIC

A woman in her fifties came to my clinic for physio on her knees. Twice her GP bloods had come back normal, which was true for the question those tests were asking. She'd never asked the second one.

DO THIS NOW

Write down your question in one sentence. If it's a disease question, see your GP. If it's the second one, keep reading.

Ask which markers, not how many

A long list of markers looks like value. A test is only as good as the markers that change what you'd do next. Some on the bigger panels have weak evidence behind them, or tell you nothing in a well person. They're cheap to run, and they make the number bigger.

THREE THAT LOOK IMPRESSIVE ON A LIST

A tumour marker the largest ovarian cancer screening trial ever run found didn't save lives, and that rises with a period.

A rheumatoid antibody where a low positive on its own rarely tells you much, and how high it is matters far more than whether it's flagged.

A titre for a recent strep throat.

And a fair share of the “markers” in a headline count aren't measured at all. They're ratios calculated from other results. Useful, but count them separately. **What you want is a set that describes your main body systems:**

- ☐ Red cells, iron including ferritin, and the full white cell picture
- ☐ Thyroid: TSH, free T4, free T3 and antibodies, not TSH on its own
- ☐ Blood sugar, liver, kidneys, cholesterol and fats, and an inflammation marker
- ☐ Core nutrients, and the hormones that matter for your age and sex

FROM MY CLINIC

A runner in his forties sent me results from a home test. Around fifty markers, and not one was a full thyroid picture or an iron study. The two things his symptoms pointed at weren't on the panel.

DO THIS NOW

Check for a full thyroid picture, a full iron study including ferritin, an inflammation marker and the core nutrients. If any are missing, the marker count is irrelevant.

Ask how the blood is taken

03



A finger-prick sample you collect at home, or a venous draw from your arm by a phlebotomist. It sounds like a detail. It decides whether the markers you've just asked for can be run properly at all.

FINGER-PRICK KIT

- Convenient, and for many markers the results agree well with a venous sample.
- A small sample, so the panel has to be short.
- More samples get damaged on the way, so some results come back unreliable or not at all.

VENOUS DRAW

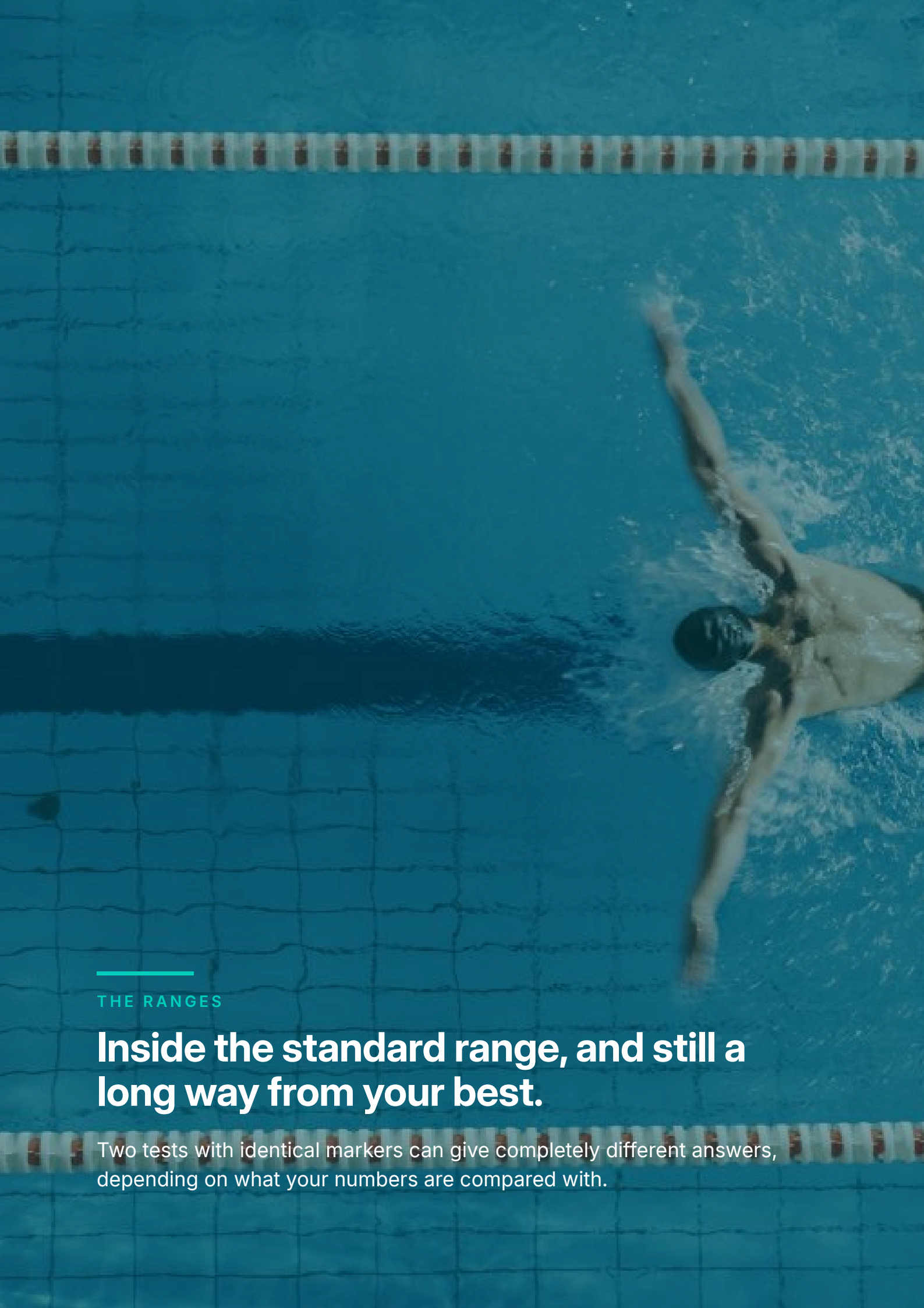
- Taken by a phlebotomist at a clinic near you.
- Enough clean blood to run a comprehensive panel in one go.
- The right choice for anything you'd call a full panel.

FROM MY CLINIC

A client in her late forties had done three home kits in two years. Two came back with results missing because the sample hadn't survived the post. She'd spent more on the kits than one venous panel would have cost.

DO THIS NOW

Choose a venous draw for anything you'd call a full panel. A finger-prick is fine for a few markers.

A high-angle, top-down view of a swimmer in a pool. The swimmer is positioned on the right side of the frame, moving towards the left. Their arms are extended forward, and their legs are also extended, creating a streamlined shape. The water is a deep blue, and the pool's lane lines are visible as a grid of light and dark blue squares. A white lane line with red and blue floats runs horizontally across the top of the image. The swimmer's shadow is cast onto the pool floor, appearing as a dark, elongated shape. The overall composition is clean and minimalist, focusing on the swimmer's form and movement.

THE RANGES

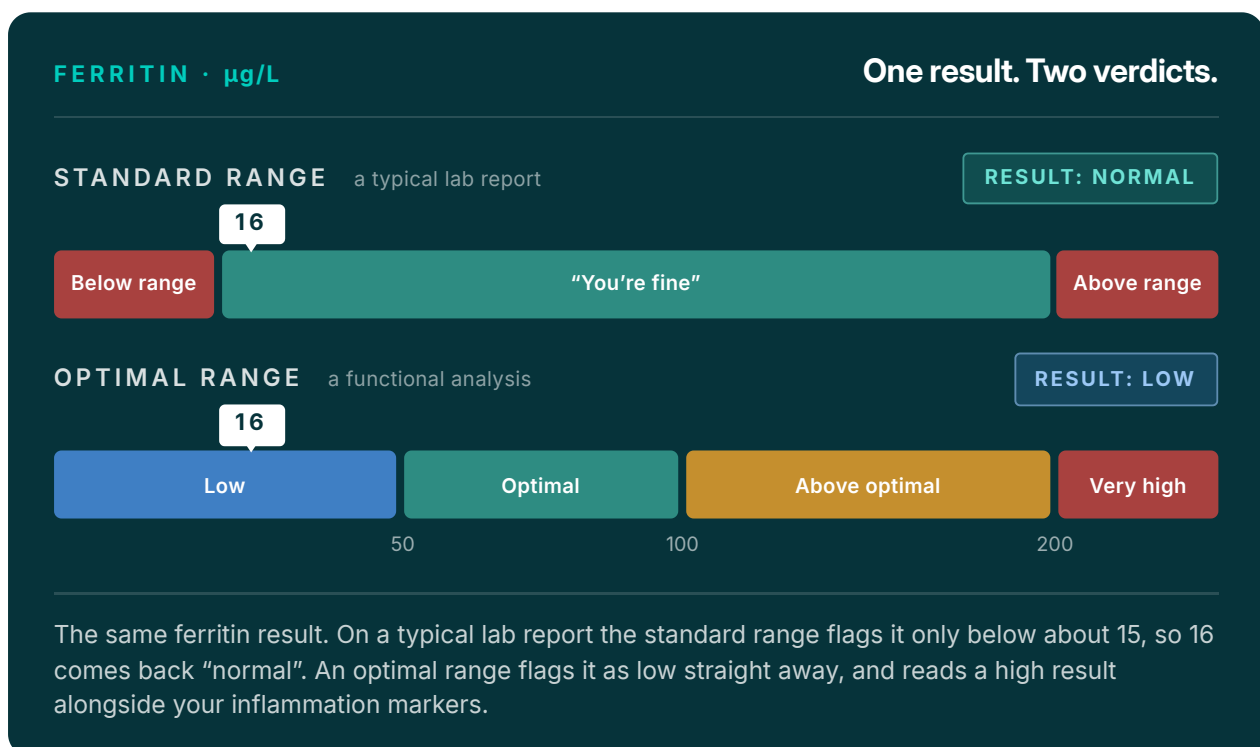
Inside the standard range, and still a long way from your best.

Two tests with identical markers can give completely different answers, depending on what your numbers are compared with.

Ask what ranges your results are read against

A standard reference range describes the middle of the people the lab tests, and flags results that sit well outside it. That's the right tool for a disease question.

An optimal range asks where the numbers sit in people who are well and functioning at their best. Often that band sits inside the standard range but well off centre. Ferritin is a good example.



FROM MY CLINIC

The couple who'd decided they were just getting old had bloods that were "normal" on every line. Read against optimal ranges, several results sat right at the edge. Lots of what they'd put down to age wasn't age.

DO THIS NOW

Ask the provider: are my results read against optimal ranges as well as the lab's, and will I see both?

Ask if the markers are read together, in your context

This is what separates a list of numbers from an analysis. Markers don't behave on their own, and relationships moving in the wrong direction while every number still looks fine is the picture I see most often in people told they're normal.

FERRITIN + INFLAMMATION

Raised ferritin looks like plenty of stored iron until it's read next to your inflammation markers. Then it can mean something else entirely.

NEUTROPHILS : LYMPHOCYTES

The relationship between the two can say more about immune load than either count by itself.

Then there's you. Your symptoms, your goals, what you eat and how you train change what I'd look for in the same results. If the analysis never asks about you, it can't read them in context.

That's the job of the Synergy Patterns® analysis, on the next page.

FROM MY CLINIC

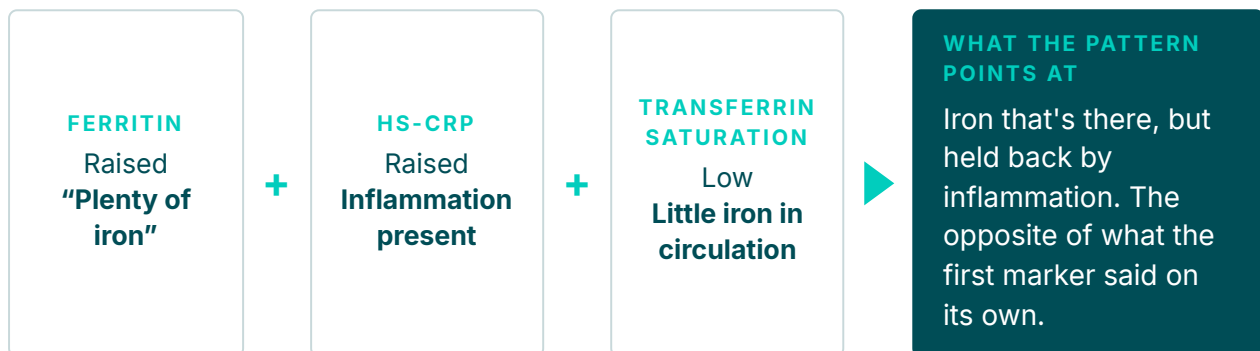
A woman in her forties had been told her thyroid was fine because her TSH was in range. Read with her free T3, free T4 and her symptoms, the question wasn't how loudly the gland was being asked to work. It was how much active thyroid hormone was reaching her tissues.

DO THIS NOW

Look at a sample report before you buy. You want ratios and named patterns on the page, and a questionnaire about you before anything is interpreted.

One marker on its own tells you very little

A marker is one reading from one system on one morning. On its own it can point the wrong way entirely. Read alongside the markers that move with it, the same number starts to mean something.



One example. Every result in a Benchmark report is read this way, never one marker at a time.

This is what Synergy Patterns® does. Each pattern is a group of markers that move together, mapped to the body system they describe: digestion, energy, clearance, immunity and recovery, circulation, hormones, sleep and stress. More than 180 of them, so the analysis can tell iron that's missing from iron that's held back.

They weren't invented for a brochure. The patterns are built on the published research into how markers move together, including ratios that medicine has relied on for decades, then refined over years in practice, reading bloods alongside the people they belonged to. That combination of research and experience is why the analysis is unique to Performance Health®.

WHY IT MATTERS TO YOU

A report that reads markers one at a time can send you chasing the wrong thing. A report that reads the pattern tells you what's driving the picture, and that's what you can act on.

Ask what you'll be able to do with the results

06



This is the question that matters most. The point of a blood test is information you can act on. A page of markers with a few flagged out of range tells you almost nothing about what to do next week.

I see this from the other side too. I now provide bloodwork analysis for clinics and practitioners across the UK, and this is exactly why they come to me. Plenty offer bloodwork. Far fewer know what to do with the results. Reading which markers are drifting high, which low, and what the pattern points at is what turns results into a plan:

LIVER AND CLEARANCE

That someone's liver and clearance pathways are the place to start.

STOMACH ACID AND DIGESTION

That their stomach acid and digestion need help, which can be why the nutrients they've been taking haven't shifted anything.

FROM MY CLINIC

A woman in her fifties, perimenopausal and exhausted, brought me a private report she'd paid for a year earlier. Forty pages, and she'd never read past page four, because nothing in it told her where to start.

DO THIS NOW

Ask before you pay whether the report will tell you what to work on first, in plain English, and who you'll talk it through with. If anything needs medical attention, it should say so and point you to your GP.

A woman with blonde hair, wearing a white long-sleeved shirt, patterned shorts, and reflective sunglasses, is running towards the camera on a paved road. The background features a vast, hilly landscape under a clear blue sky.

THE ORDER

Two facts among six.

Run the questions in order and the marker count and the price take their proper place.

WHY THIS ORDER WORKS

Each question depends on the one before it

01	What do I want to know? Decides which markers matter.
02	Which markers, not how many? Decides how the blood has to be collected.
03	How is the blood taken? Decides whether those markers can be run properly.
04	What ranges are the results read against? Decides what a number means.
05	Are the markers read together, and in my context? Decides whether it's an analysis or a list.
06	What will I be able to do with it? Everything above is worth nothing unless it ends in something you can do.

THE PERFORMANCE HEALTH BENCHMARK

Bloodwork Intelligence that gives you answers.

I built the Benchmark to be the most useful functional bloodwork assessment I could: the markers that matter, read together against optimal ranges and in the context of the person they belong to, and turned into information you can act on. It rests on published research and more than twenty years in practice, and it does the thing I could never find on a report I'd bought: it reads the markers together, against optimal ranges, in the context of the person they belong to. Clinics and practitioners across the UK now use it to guide the decisions they make with their own clients.

If it has passed your six questions, the next page shows exactly what you get.

NEXT STEP

The test I built to pass all six

01 Built to answer the second question

How well is your body working, and what should you work on first.

02 The markers that matter

A full thyroid picture, a full iron study, inflammation, blood sugar, liver and kidneys, cholesterol and fats, the core nutrients, and the hormones for your age and sex.

03 A venous draw, near you

At one of more than 270 partner clinics across the UK, analysed at a UKAS accredited lab.

04 Optimal ranges, and the standard ones

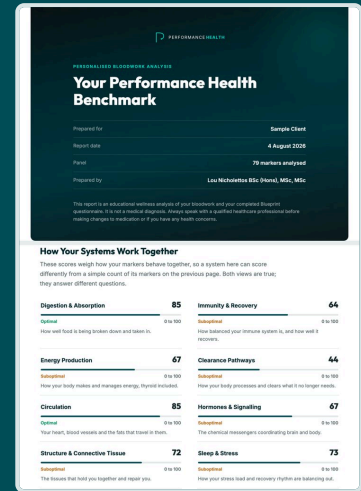
Every result shown against both, so you can see where you sit and why.

05 Read together, and in your context

Synergy Patterns® analysis, in the context of your Blueprint health assessment.

06 Information you can act on

Your Benchmark Score, a system by system view, your three priorities to work on first, and a 15 minute results call with me. Every report is checked and signed off by me.



FROM A REAL BENCHMARK
REPORT
(SAMPLE CLIENT)

The Performance Health Benchmark • £599, everything included

If anything in your results needs medical attention, your report says so clearly and points you to your GP.

Order the Benchmark

performancehealth.uk/benchmark

Hopefully that has got you thinking.

Lou

Educational only, not medical advice. Always discuss test results and any health concerns with a qualified healthcare professional. • Performance Health® • Bloodwork Intelligence to help you perform at your best.