



STARTER GUIDE

Gut Health STARTER CHEAT SHEET

Know your symptoms. Know your labs. Know what to ask for.



HOW YOUR GUT WORKS

1 • STOMACH

Acid breaks down protein, absorbs B12 & kills bugs



2 • SMALL INTESTINE

Enzymes & bile pull nutrients into your blood



3 • LARGE INTESTINE

Trillions of **bacteria** feed on fiber & calm inflammation



Gut lining = the gatekeeper (one cell thick)

Microbiome = your inner garden

UPPER GUT

Stomach & small intestine • digestion trouble

- Bloating within 1–2 hours of eating
- Heartburn or reflux
- Burping; full after small meals
- Nausea
- Worse with garlic, onion, beans or fiber
- Greasy or floating stools
- Undigested food in your stool
- Low iron or B12 despite eating well
- More food sensitivities over time
- Belly pain after meals
- Bad breath that won't go away

LOWER GUT & BEYOND

Colon, microbiome & whole-body signs

- Constipation (hard stools, not daily)
- Diarrhea or loose stools
- Swinging between the two
- Gas & cramping later in the day
- Mucus in your stool
- Acne, eczema or rosacea
- Brain fog
- Anxiety or low mood
- Joint aches
- Getting sick often
- Sugar cravings; hormone imbalance



Did you know? About 70% of your immune system lives in your gut, and your gut makes most of your body's serotonin. Gut trouble rarely stays in the gut.

BEFORE YOUR GUT TESTS

Ask for blood work: CBC, CMP, ferritin, B12, vitamin D, celiac screen (tTG-IgA + total IgA), hs-CRP

Stool test? Ask about pausing probiotics, antibiotics & antifungals beforehand

Track 1–2 weeks: food, symptoms & stool type (Bristol chart)

Celiac test? Keep eating gluten until the draw, or it can show falsely negative

Breath test? Follow the prep diet exactly and fast as directed

On acid blockers? Ask before stopping. Never stop a prescription on your own



YOUR GUT LABS, DECODED

Part 1 · Blood work: what it shows about your gut and what to consider

Optimal the range we aim for **Standard** typical lab range (varies by lab)

CELIAC SCREEN

tTG-IgA checks for an immune reaction to gluten. Total IgA makes sure the test can work.

Optimal: negative

Standard tTG-IgA <4 U/mL*

↑ IF POSITIVE

May mean: celiac disease, which damages the small intestine and blocks absorption.

Consider: GI referral to confirm before going gluten-free; check iron, B12, D & bone density.

↓ IF NEGATIVE

May mean: celiac is unlikely, IF you were eating gluten and total IgA is normal.

Consider: non-celiac gluten sensitivity is still possible; track symptoms.

FERRITIN

Your iron savings account. A common early sign of poor absorption.

Optimal 70-100+ ng/mL

Standard ~15-150 ng/mL*

↑ IF HIGH

May mean: inflammation (ferritin rises when inflamed), liver stress, or iron overload.

Consider: hs-CRP, iron panel, liver enzymes.

↓ IF LOW

May mean: poor absorption (celiac, low stomach acid, H. pylori, acid blockers), blood loss or heavy periods.

Consider: celiac screen, H. pylori; check for hidden blood loss.

VITAMIN B12

Needs stomach acid to absorb. Powers energy, nerves & mood.

Optimal >600 pg/mL

Standard ~200-900 pg/mL*

↑ IF HIGH

May mean: usually supplements; rarely a liver or blood issue.

Consider: supplement dose; recheck if not supplementing.

↓ IF LOW

May mean: low stomach acid, acid blockers, metformin, H. pylori, SIBO, plant-based diet, or pernicious anemia.

Consider: MMA & homocysteine; H. pylori; B12 form & route.

VITAMIN D (25-OH)

Supports your gut lining & immune system. Needs fat to absorb.

Optimal 50-80 ng/mL

Standard ~30-100 ng/mL

↑ IF HIGH

May mean: too much supplement.

Consider: lower the dose; check calcium.

↓ IF LOW

May mean: little sun, or poor fat absorption (celiac, low enzymes, low bile).

Consider: take with a meal containing fat; pair with K2; check elastase.

HS-CRP

A general inflammation marker. Not gut-specific, but a useful clue.

Optimal <1.0 mg/L

Standard <3.0 mg/L

↑ IF HIGH

May mean: gut inflammation, infection, IBD flare, belly fat or poor sleep; recent injury or illness.

Consider: recheck when well; stool calprotectin.

↓ IF LOW

May mean: low general inflammation. Great!

Consider: a normal CRP doesn't rule out gut issues; symptoms still matter.



YOUR GUT LABS, DECODED

Part 2 · Stool & breath tests, patterns and co-factors

CALPROTECTIN (STOOL)

Measures inflammation inside the intestines.

Optimal <50 µg/g

>120 µg/g elevated*

↑ IF HIGH

May mean: gut inflammation from IBD (Crohn's, ulcerative colitis), infection or NSAIDs. Usually normal in IBS.

Consider: GI referral; colonoscopy if persistent.

H. PYLORI (BREATH OR STOOL)

A stomach bacteria that can lower acid and irritate the lining.

Optimal: negative

↑ IF POSITIVE

May mean: reflux, ulcers, bloating, low B12 or iron.

Consider: treatment, then retest to confirm it's gone. Acid blockers can cause a false negative.

SIBO BREATH TEST

Bacteria overgrowing in the small intestine, where few should live.

Optimal: negative

H₂ rise ≥20 · CH₄ ≥10 ppm*

↑ IF POSITIVE

Hydrogen: bloating, gas, often diarrhea. **Methane (IMO):** bloating with constipation.

Consider: root causes like slow motility, low acid, past food poisoning.

PANCREATIC ELASTASE (STOOL)

Shows if your pancreas makes enough digestive enzymes.

Optimal >500 µg/g

Standard >200 µg/g*

↓ IF LOW

May mean: low enzymes: greasy stools, bloating, low vitamin D, A, E & K.

Consider: enzyme support; under 100 needs a pancreas work-up.

READING THE PATTERN

↑ high · ↓ low · + positive · N normal

Main symptoms	Key result	What it may point to
Bloating soon after meals	Hydrogen ↑	SIBO
Bloating + constipation	Methane ↑	IMO (methane overgrowth)
Reflux, low B12 or iron	H. pylori +	H. pylori infection
Fatigue, low iron, bloating	tTG-IgA +	Celiac disease
Greasy, floating stools	Elastase ↓	Low pancreatic enzymes
Diarrhea, mucus or blood	Calprotectin ↑	Gut inflammation (IBD or infection)
Bloating, irregular stools	All N	IBS or microbiome imbalance: stress & food triggers

GUT CO-FACTORS WORTH CHECKING

Zinc

RBC Magnesium 5.5–6.5 mg/dL

TSH 0.5–2.0 mIU/L + Free T3

Omega-3 index

CBC

Comprehensive stool test

See your provider promptly for: blood in your stool, black stools, weight loss without trying, trouble swallowing, ongoing vomiting, or diarrhea that wakes you at night. Age 45+? Ask about colon cancer screening.

*Reference ranges and test cutoffs vary by lab and testing method. Optimal ranges reflect Clarity for You Wellness's functional-medicine approach and are not diagnostic. Don't stop prescribed medications for testing without talking to your provider. For education only; always review your results with your healthcare provider.