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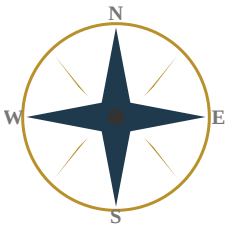
*Precision Medicine for Healthy Longevity*




# The Longevity Roadmap

A Precision Consultation Report, Prepared for Siobhan

**Prepared by Siobhan Gray, MD**

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**SAMPLE ROADMAP · DR. GRAY'S OWN STORY**

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## A Letter to You

Siobhan,

One of the things that becomes clear when I look at where you started is that you were not someone who had neglected her health. You were, if anything, exhausted from how much you gave everyone else. Nineteen years in emergency medicine will do that. So will being a wife and a mother of three, and running a business on top of both.

On paper, nothing looked catastrophic in your mid-40s. Your labs were only mildly out of range. Your blood pressure was creeping up, not alarming. But you were carrying 196 pounds you didn't want to carry, foot pain was making exercise harder every year, and you had stopped recognizing the version of yourself who used to feel strong.

You didn't come to this looking for a diet. You came to it because you wanted to hike mountains, travel with your family, run trails, build something meaningful, and still have energy left at the end of the day to actually enjoy your life. Those are not small requests, and they are not vanity either. They are a description of the life you were trying to protect.

I don't want this next chapter of your health to become another job stacked on everything else you already do. You don't need more rules, or someone telling you to try harder. You need to understand what's actually happening in your body, and a small number of changes likely to make a real difference, in service of the life you're building, not instead of it.

When I listened to what you actually wanted, the answer became clear: strong enough for the life you want. That is your North, and it is the organizing idea behind everything in this report.

## Longevity Snapshot

A high-level overview of each domain covered in this report. Use this page as a quick reference, and turn to the full sections for the reasoning and detail behind each recommendation.

| Domain | Assessment | Top Priorities |
|---|---|---|
| **Purpose & Direction** | "Strong enough for the life I want" is the organizing goal: adventure, family travel and meaningful work, not weight loss for its own sake. | Keep every decision tethered to that North statement. |
| **Weight & Body Composition** | 196 lbs at the starting point, deconditioned, foot pain limiting movement. | Fat loss with muscle protected, starting with walking and progressive strength work. |
| **Cardiovascular & Metabolic Health** | Blood pressure 132/84 and creeping upward; triglycerides 168 mg/dL and total cholesterol 218 mg/dL, both mildly elevated; A1c 5.6%. | Normalize metabolic risk before it becomes a bigger problem; retest on a regular cadence. |
| **Movement & Musculoskeletal Health** | Walking occasionally, not running; chronic foot pain interfering with exercise. | Address the foot pain directly, then progress walk → hike → run/walk → run. |
| **Mind & Nervous System** | Years of being excellent at doing (medicine, night | Protect sleep, time outside and |

| Domain | Assessment | Top Priorities |
| --- | --- | --- |
| | shifts, parenting) with little built-in room for restoration. | unstructured recovery, not just another item on the list. |
| **Connection & Belonging** | Family, friendships and community were often the first things sacrificed to a full schedule. | Build routines and adventures that include the people who matter, not around them. |

N

# NORTH

*Purpose & Alignment*

Where am I going?

### ASSESSMENT

At your starting point, nothing about your labs or your exam looked catastrophic. But you didn't feel like the person you wanted to become. You wanted to be strong, adventurous and capable: to hike mountains, travel with your family, run trails, build something meaningful, and still have energy left over to enjoy your life.

### WHY THIS MATTERS

The number on the scale was never going to tell us whether you were living the life you actually wanted. Your goal wasn't simply to lose weight. It was to create a body, and a life, that gave you freedom: the ability to say yes to adventure, travel, meaningful work, time outside, creativity and the people you love.

### PLAN

**Your North Statement:** Strong enough for the life I want. Not chasing perfection. Not trying to become younger. Building the physical and emotional capacity to keep doing the things that make me feel most alive.

**Values:**

Curiosity | Adventure | Joy | Presence | Connection | Courage | Creativity

**Long-range vision:**

**10 YEARS**

Running, hiking, traveling, exploring and doing meaningful work.

**20 YEARS**

Strong enough to carry my own bags, climb mountains, get off the floor easily and keep saying yes to adventure.

**30+ YEARS**

Independent, curious, connected and engaged with life.

***Your North:*** *The goal isn't simply more years. It's more life in those years.*

S

# SOUTH

*Building the Foundation*

Where am I starting physiologically?

You are already doing more right than wrong. But your body was beginning to send signals that the trajectory needed to change, and those signals only make sense in the context of what you actually want your life to look like.

## Metabolic Health & Body Composition

**ASSESSMENT**

Starting weight of 196 lbs, with mildly elevated triglycerides (168 mg/dL) and total cholesterol (218 mg/dL), and an A1c of 5.6%. None of these numbers, on their own, cross into disease. Together, they describe a trajectory.

**WHY THIS MATTERS**

Even mild elevations, carried for decades, are the trajectory that eventually becomes real cardiometabolic disease. Catching it here, while it's still easy to reverse, is the point. This isn't

about chasing a number on a chart. It's about changing direction while changing direction is still simple.

**PLAN**

Improve body composition and insulin sensitivity while building a way of eating that is sustainable in real life, not another temporary diet.

- Establish baseline labs and body composition.
- Prioritize protein and whole foods over restriction.
- Retest triglycerides, cholesterol and A1c on a regular cadence, and let the trend, not any single value, guide the next step.

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## Muscle & Strength

**ASSESSMENT**

Deconditioned relative to earlier years, with minimal resistance training in place.

**WHY THIS MATTERS**

Weight loss alone was never the goal. Muscle is one of the strongest predictors we have of long-term function, metabolic health and the ability to recover from a bad fall, a hard flight, a rough trail. It's also the thing people lose first and notice last.

**PLAN**

- Begin consistent, progressive resistance training.
- Prioritize adequate protein and real recovery, not just more workouts.
- Track strength over time, not just the scale.

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## Exercise for Longevity

**ASSESSMENT**

Walking occasionally, not running; fitness deconditioned compared with earlier years, with no structured plan behind the movement that was happening.

**WHY THIS MATTERS**

The question I ask isn't "how do I exercise more." It's "what am I exercising for." So we backcast: name the specific things you still want to be able to do, at 55, at 65, at 75, and build backward from those targets now, instead of training for a single race and stopping. For you, that list includes carrying your own pack up a mountain, keeping pace with your daughters on a trail, and still being the one who says yes to the trip. Training toward a list like that builds a different kind of fitness than training toward a finish line, and it's the fitness that actually lasts.

**PLAN**

Start where you are, and build deliberately toward your list.

- Write down your own list: the specific tasks and adventures you want to still be doing decades from now.
- Walk daily, and progress from walk to hike to run/walk to run.
- Build a Zone 2 aerobic base before adding intensity.
- Get a baseline cardiovascular fitness reading, and revisit it periodically, not obsessively.

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## Musculoskeletal Durability

**ASSESSMENT**

Chronic foot pain made exercise increasingly difficult.

**WHY THIS MATTERS**

Pain you push through instead of address becomes the reason you stop moving altogether. Durability, not just fitness, is what keeps a plan going for decades. Being fit enough to perform and being durable enough to keep going are two different things, and we need both.

**PLAN**

Address foot and musculoskeletal pain directly rather than working around it: mobility work, strength, balance, tendon health and real recovery, built into the plan rather than added after something breaks.

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## Long-Term Risk Reduction

**ASSESSMENT**

Blood pressure beginning to creep upward, worth tracking closely against personal and family history over time.

**WHY THIS MATTERS**

We're not only treating today's numbers. We're changing the trajectory of the next 10, 20 and 30 years.

**PLAN**

Follow cardiovascular risk, metabolic health, bone density, muscle mass and fitness longitudinally, and adjust the plan as the trend, not any single number, tells us to.

E

# EAST

*Mind & Presence*

How am I moving through my life?

### ASSESSMENT

Years of being extraordinarily good at doing: medicine, night shifts, parenting, achievement, with very little built-in room for restoration.

### WHY THIS MATTERS

The work here isn't another health checklist. It's learning to notice what actually makes you feel alive, and creating room for it. Presence over perfection. Awe over achievement. The nervous system matters. Joy matters. A life you actually enjoy living matters.

### PLAN

- Move outside. Spend time in nature.
- Create.
- Protect sleep and recovery.
- Notice stress before automatically pushing harder.
- Allow seasons of intensity and seasons of restoration.
- Choose consistency over perfection.

W

# WEST

*Connection & Belonging*

Who and what surrounds me?

### ASSESSMENT

Family, friendships and community were often the first things sacrificed to a demanding schedule.

#### WHY THIS MATTERS

Longevity doesn't happen in isolation. A health plan that doesn't support your relationships isn't a good plan, no matter how well it's built on paper.

#### PLAN

- Protect time with my husband and daughters.
- Build adventure into family life.
- Maintain meaningful friendships.
- Spend time outside and in community.
- Create an environment where movement is normal.
- Ask for help instead of carrying everything myself.
- Build routines that work in the middle of a complicated life, not only during perfect weeks.

## Recommended Testing & Referrals

The goal of testing isn't simply to collect more information. It's to replace guesswork with a real starting point.

### Metabolic & Cardiovascular Health

- Fasting lipid panel (total cholesterol, triglycerides)
- Fasting glucose and HbA1c
- High-sensitivity CRP
- Blood pressure, tracked over time rather than a single reading

### Hormonal & Midlife Health

- Thyroid panel (TSH, free T4)
- Reproductive hormone labs if perimenopausal symptoms are present, with a conversation about timing and options

### Body Composition & Fitness

- Baseline body composition assessment
- Cardiovascular fitness / $VO_2$ max baseline

### Referrals

A podiatry or physical therapy evaluation for the foot pain limiting movement, and a strength coach or trainer to build a safe, progressive resistance program from the ground up.

#### What We're Intentionally Not Ordering

We are not routinely running every longevity panel on the market. A test earns a place in this plan because the answer is likely to change what we do, not because it exists. If something in your history or your trend lines points somewhere specific, we'll add it then.

## Your Personalized Action Plan

A Precision Roadmap isn't a single to-do list. It's three horizons at once: what to start now, what to keep building for years, and what it's all protecting, decades down the trail.

SHORT-TERM PRIORITIES

### Build the Foundation

*What to start right away*

- Normalize metabolic risk.
- Lose excess fat while protecting muscle.
- Begin consistent strength training.
- Walk daily.
- Address foot pain and movement limitations.
- Prioritize protein, whole foods, sleep and recovery.
- Establish baseline cardiovascular, metabolic and body-composition markers.

LONG-TERM PRIORITIES

### Build Capacity

*What to keep building, over months and years*

- Progress walking into running.
- Develop aerobic capacity and $VO_2$ max.

- Build strength and lean mass.
- Improve mobility and durability.
- Train toward meaningful physical goals, from your own list.
- Continue monitoring blood pressure, lipids, glucose and body composition.
- Move from "I should exercise" to "I am someone who moves."

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LAST-DECADE PRIORITIES

### Protect the Future

*What every earlier decision is ultimately for*

- Run half marathons. Hike mountains. Travel.
- Stay metabolically healthy.
- Maintain muscle, bone and cardiovascular fitness through menopause and beyond.
- Continue periodic testing, not because every number needs optimizing, but because trends show us when the trajectory is changing.
- Adapt the plan as life changes.

## For Further Exploration

A few books, each chosen for a specific piece of this plan rather than as a general reading list.

***Outlive*** **— Peter Attia, MD**

The clinical case for acting early, in more depth than a single consultation allows. This is the "why" behind the testing and the trajectory-thinking in this report.

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***The New Menopause*** **— Mary Claire Haver, MD**

A clear, current guide to the hormonal transition sitting underneath so much of the Long-Term Risk Reduction section: what's happening, what's option, what's myth.

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***Wintering*** **— Katherine May**

Permission for the seasons of restoration named in the East section. Not every season is for pushing harder, and this book makes the case for the ones that aren't.

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***The Comfort Crisis*** **— Michael Easter**

On deliberately choosing discomfort and nature and adventure, the same instinct behind the North statement in this report.

**If you only read one:** Outlive. It's the framework behind most of the numbers in this report.

## How to Work With Me

You don't need someone telling you to eat vegetables and exercise more. You need a plan that fits an already full life, and the right amount of support putting it into action.

### Precision Consultation

This report is what a Precision Consultation produces: a 90-minute, physician-led visit to review your health history, labs, imaging and goals, and build a personalized Precision Roadmap from the North Framework. It stands on its own, with no ongoing commitment required, and it's available again any time you want a fresh look at where things stand.

| | |
|---|---|
| 90-minute Precision Consultation · through 12/31/26 | **$495** |
| Repeat Precision Consultation, any time | **$495** |

### Precision Plus

For putting the plan into action, not just receiving it: three months of structured health coaching with physician reassessment along the way, to help implement, measure and adjust as we go.

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|---|---|
| Three months, structured coaching & physician reassessment | **$1,995** |

### Stewardship Membership

Long-term, ongoing physician guidance for staying on track once the foundation is in place, and adjusting the plan as life changes.

| | |
|---|---|
| Stewardship Core · Daybreak membership, quarterly 45-min visits, refill & monitoring, secure messaging (2-business-day response) · 3-month minimum | **$295/mo** |
| Stewardship Plus · Everything in Core, plus up to one monthly 45-min visit, ongoing health & wellness coaching, unlimited Daybreak Recovery Spa access | **$595/mo** |

### Daybreak Recovery Spa Membership

For the recovery side of the plan on its own: infrared sauna, cold plunge, red light therapy, PEMF, compression boots, vibroacoustic bed and brain tap, plus a member protocol library and priority scheduling.

| | |
|---|---|
| Standard membership · no contract, cancel anytime | **$99/mo** |

Current pricing and program details are always kept up to date at peakmdhealth.com.

## Thank You

There will always be another lab test, another supplement, another wearable or expert telling you what you should be doing. I don't want that to become your life. Your health is supposed to support your life, not consume it.

Somewhere along the way, building this became the work I do for other people too: helping them ask the same question I had to ask myself. What are you getting healthy for?

Because the destination was never a number on the scale. It was strength for adventure, energy for meaningful work, presence for the people I love, and enough health to keep saying yes to life.

*Stay North,*

**Siobhan Gray, MD**

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## Where the Roadmap Has Taken Me

This part isn't in a first consultation. It's what following the plan above actually produced, over time.

| | | |
|---|---|---|
| 196 lbs ↓ **142 lbs today** | 132/84 ↓ **~110–120/70s** | Cholesterol 218, Triglycerides 168 ↓ **Cholesterol 178, Triglycerides 88** |
| A1c 5.6% ↓ **A1c 5.1%** | Not running ↓ **Running half marathons** | Foot pain limiting movement ↓ **Trail running and hiking** |

This sample uses Dr. Gray's own health history to show exactly what a PEAKMD Precision Roadmap looks like, start to finish, before your first consultation.