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| For USF Health Integrated Pituitary Disorders Center | | | | | | |
| Date: |  | | |  | | |
| Presenter: | |  | | | |  |
| Organization: | | |  | |  | |

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| --- | --- | --- | --- | --- |
| Patient Information: | | | | |
| Patient Age: |  | |  | |
| Patient Gender: | |  | |  |

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| Questions for the network? |
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| Patient History | | | |
| General status: |  | | |
| Any pituitary hormonal deficiencies? | | |  |
| Visual disturbances? | |  | |

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| Physical Exam | | |
| Height: |  |  |
| Weight: |  |  |
| BMI: |  |  |

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| Family and Medical History | | | | |
| Family history: | |  | | |
| Any family history with pituitary problems? | | |  | |
|  | | | | |
| Any family history with parathyroid or pancreatic problems? | | | |  |
|  | | | | |
| Hereditary syndromes: | | | | |
| **MEN-4**: parathyroid/hypercalcemia, reproductive organ tumors – testicular cancer, neuroendocrine cervical carcinoma; adrenal and renal tumors  Yes  No | | | | |
| **MEN-1**: parathyroid/hypercalcemia, entero-pancreatic tumors, adrenal tumors  Yes  No | | | | |
| **McCune Albright syndrome**: hyperthyroidism, skin changes, hypercortisolemia, history of precocious puberty, ovarian cysts, history of low phosphate  Yes  No | | | | |
| **Carney complex**: – Myxomas any location, primary pigmented nodular adrenocortical disease, schwannomas, testicular Sertoli-cell tumors  Yes  No | | | | |
| Medical History | | | | |
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| Medications |
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| Images | | |
| Pituitary MRI or CT scan of the head |  |  |

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| Biochemical Workup | | | | | | | | | | | | | | |
| ACTH | |  | |  | | | | | |  | Cortisol | |  |  |
| IGF-1 | |  | |  | | | | | |  | Testosterone panel | |  |  |
| Estradiol | |  | |  | | | | | |  | FS & LH | |  |  |
| TSH | |  | |  | | | | | |  | Free T4 | |  |  |
| Plasma osmolarity | | | |  | |  | | | |  | Urine osmolarity | |  |  |
| CMP | |  | |  | | | | | |  | CBC | |  |  |
| Alpha-subunit | | |  | |  | | | | |  | 24-hour urine cortisol | |  |  |
| 1 mg overnight dexamethasone test | | | | | | |  |  | | | Midnight salivary cortisol test | |  |  |
| Oral glucose tolerance test [OGTT] for Acromegaly | | | | | | | | |  |  |  |  | | |
| Other: |  | | | | | | | | |  | | | | |

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| Additional comments: |
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