

**Endocrinology Clinic**

**Fax: 504.903.1605**

**Fax this form with the Endocrinology Master Referral form when requesting an appointment.**



**Appendix: PITUITARY DISORDERS**

Includes pituitary tumors, hormone overproduction or deficiency, Empty Sella Syndrome, macroadenoma with impingement on the optic nerve [Based on MRI—See below\*\*\*]

The following test results (current within the past 6 months) are required for this referral: serum TSH, free T4 (or total T4), prolactin, FSH, LH, and cortisol levels. Include for females: serum estradiol, and for males: serum testosterone. An MRI of the pituitary (current within the last 24 months) is required for this referral. If not available in LIH’s PACS system, please have the patient bring images and reports to the appointment.

**Please indicate test results on this form and fax it with the Endocrine Clinic Referral Form if the results are not available in CLIQ.** Please have the patient bring a copy of the test results and the MR Imaging studies to their appointment if they are not available at MCL.

Patient Name: \_\_\_\_\_ Date of Referral: \_\_\_/\_\_\_/\_\_\_  
Date of Birth: \_\_\_/\_\_\_/\_\_\_ LIH Medical Record Number: \_\_\_\_\_

- 1. Serum TSH \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_
- 2. Serum Free T4 \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_
- 3. Serum Prolactin \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_
- 4. Serum Cortisol (8 am) \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Time: \_\_:\_\_ am/pm
- 5. IGF-1 \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

The following may be considered if clinically indicated: Serum FSH & LH, testosterone for males and estradiol for females, and ACTH stimulation testing for adrenal insufficiency:

- 6. Serum FSH \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_
- 7. Serum LH \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_
- 8. Serum Testosterone if male \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Time: \_\_:\_\_ am/pm
- 9. Serum Estradiol if female \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

**\*\*\*An MRI of the Pituitary (within the last 24 months) is required for this referral. If results are NOT available in the LIH radiologic PACS, please provide the MRI study (images) to the patient to bring to the consultation.**