Follow-u	p Plan
Today's Vi	sit:
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Others:	
Changes:	
Medication	n Changes:
Notes/Que 	
Next Visit	
	MRI
	Visual Field
	Blood work
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Vancouver Neuropituitary Program







Acromegaly Record Book

Name.

Also ask us for these materials:

- Acromegaly Informational pamphlet
- The Acromegaly DVD
- Medication Guidelines & coverage
- Adrenal insufficiency book
- Acromegaly lab tests
- Transsphenoidal Surgery
- Endocrine links & support groups
- Travel letter

If found please return to:

Neuropituitary Clinics:

Room 467, Comox Bldg, St. Paul's Hospital, Vancouver, BC PH: (604) 806-9156 Fax: (604) 806-8594

Vancouver General Hospital (VGH)
Gordon and Leslie Diamond Health Care Centre
2775 Laurel Street, Vancouver, B.C
PH: 604.875.5929
Fax: 604.875.5925

Pituitary Nurse: Crystal Gagnon

Ph: 604-682-2344 ext. 62413 Pager: 604-252-4832

cgagnon2@providencehealth.bc.ca

Follow-up Plan Today's Visit:
MRI:
Visual Field:
Others:
Changes:
Medication Changes:
Notes/Questions:
Next Visit: Ordered Tests: O MRI
O Visual Field
 Blood work

0 Others

Follow-up Plan	My Contacts:				
Today's Visit:					
MRI:	Doctors:Endocrinologist				
Visual Field:	Endocrinologist				
Others:	Neurosurgeon				
Changes:	Otolaryngologist				
Medication Changes:	Radiation Oncologist				
Notes/Questions:	Family Doctor				
Next Visit:					
Ordered Tests:					
 MRI Visual Field Blood work Others 	Nurse(s): Crystal Gagnon Ph: 604-682-2344 ext. 62413 Pager: 604-252-4832 cgagnon2@providencehealth.bc.ca				

Clinic Coordinator:

My Medical History:	Follow-up Plan Today's Visit:
Allergies:	$\mathcal{MR}I$:
	Visual Field:
Surgeries:	Others:
	Changes:
	Medication Changes:
Other conditions:	
	Notes/Questions:
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Follow-up	Plan
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Effects of acromegaly on my body:

- ➤ Vision: Pituitary tumour can press on the surrounding areas of the brain, blood vessels, and nerves. For example, they can press on the optic nerve, causing vision problems.
- ➤ **Heart:** Acromegaly can cause enlargement of the heart which can lead to heart disease, high blood pressure, and heart rhythm disorders if left untreated.
- Colon: The occurrence of colon polyps is much higher in patients with acromegaly, which may put them at risk for colon cancer. Regular colonoscopy exams are highly recommended.
- ➤ Gallbladder & Prostate: Similar to colon polyps, acromegalic patients are also at risk for developing gallbladder polyps. In addition, certain medications for acromegaly can cause gallstones. Acromegalic patients are also at risk for prostate enlargement so regular prostate exams are recommended.
- > **Bones:** High levels of growth hormone (GH) in acromegalics may put them at risk for developing osteoarthritis due to bone resorption & deformities.
- > Sleep apnea: Enlarged tongue and tissues at the back of the throat may obstruct the airway during sleep.

- > Other hormones: Sometimes after treatment with surgery and/or radiation treatment, the body becomes deficient in hormones other than GH such as thyroid, prolactin, cortisol, testosterone or estradiol. These hormones must be monitored regularly.
- > Blood Sugar: Certain medications for acromegaly inhibit insulin which can put you at risk for developing diabetes or glucose intolerance.

 You may develop hypo- or hyperglycemia. Regular monitoring of your blood sugar is important.

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		Date	Result
✓	$\mathcal{MR}I$		
✓	Visual Field		
✓	2hr OGTT:	Glucose 0 hr	
		1hr	
		2hrs	
✓	IGF-1:	GН 0hr	
		1hr	
		2 hrs	

Luteal 200-790pmol/L	
Post-menopausal < 120 pmol/L	

LH- 2-18 U/L FSH- <10 IU/L FBS- 3.3-5.5 mmol/L HA1c - <= 7%

Follow-up Plan
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Others

Lab Results

Ranges												
Date	IGF- 1	GН	PL	Cortisol	FT4	ТЅН	Test.	Estradiol	FSH	LН	FBS	Я1с

Ranges:

IGF-1 (dependent on age and gender)-

GH->3-5ng/mL

 $PL \cdot < 15 \text{ ug/L}$

Am cortisol -171-875 nmol/L

TSH -0.5-5.5 mU/L

FT4-11-22pmol/L

Bioavail test. -5-12 nmol/L

Estradiol-

Follicular: 70-530pmol/L Mid-cycle 230-1310pmol/L

√	\mathcal{GH}	Date	Result
	951		
✓	Echo:		
	Repeat		
✓	Colonoscopy:		
	Repeat		
✓	Gallbladder Ultrasound:		
	Repeat		
✓	Bone Density:		
	Repeat		
✓	Sleep Apnea:		
✓	\mathcal{BP} :		
✓	Weight:		
✓	Height:		

Baseline Other Tests (if needed):

	Date	Result
✓ ACTH Sti	m test: Cortisol	
0	mins	
3	0 mins	
60	0 mins	
✓ LH, FS	H, Estradiol or Testc	osterone Test:
L	.H	
${\mathcal F}$	SH	
${\mathcal E}$	strogen	
\mathcal{T}_{0}	estosterone	
✓ Prolactin	Test:	
\mathcal{R}	epeat	
✓ TSH Test:		
√ 474.		

Reminders:

- ✓ Please bring an updated list of medications to every appointment.
- ✓ If you are Cortisol deficient and require Cortef, make sure you have received Adrenal Insufficiency Teaching and are aware of the importance of wearing a Medical Alert Bracelet.

Reminders:

- ✓ All follow-up testing and appointments are very important.
- ✓ Please have blood work completed at least 1-2 weeks before appointment.

 Failure to complete blood work on time will result in appointment cancellation and a longer wait time to see the Doctor(s).

Lab Results

Ranges												
Date	IGF- 1	GН	PL	Cortisol	FT4	ТЅН	Test.	Estradiol	FSH	LН	$\mathcal{F}\mathcal{B}\mathcal{S}$	Я1с

Date of	Dose	Given	Site:	Meds/comments	Date next
injection	(mg)	бу:			visit:

- ✓ Remember to get your yearly flu shot and ask about pneumococcal vaccinations.
- ✓ If you are taking Synthroid make sure you take your pill first thing in the morning with a sip of water and wait 1 hour before eating your breakfast.

Current Medications (plse keep up to date)				
Medications	Dose	Date		

Medications	Dose	Date

Note to patient: Please show this card each time you visit your doctor or nurse. You can use a calendar to plan when your next injection is due.

Date of	Dose	Given	Site:	Meds/comments	Date next
injection	(mg)	бу:			visit:
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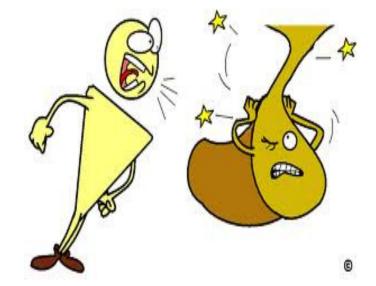
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Prepared by:

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Vancouver General Hospital, June 2012.