

Please note appointment will not be scheduled until we have received all of the following information.

We must have this form filled out completely, along with a copy of the patient demographics/face sheet, growth charts with height and weight, and any pertinent labs and imaging associated with diagnosis, ICD-10 Code and explanation of the reason for consult.

Cook Children's Endocrinology locations:

Abilene • Alliance • Denton • Fort Worth • Hurst • Lewisville • Mansfield • Midland • Prosper • San Angelo • Southlake • Waco

Narrative reason for consult: _____

Please note, we are not able to accommodate new patient referrals for the following:

- Isolated Obesity referrals
- Patients with a TSH of 4-10 unless associated with a disease aged >2 years
- Patients with vitamin D insufficiency

Diagnoses required for referral (Please check box for referral diagnosis)

- | | | |
|---|--|--|
| <input type="radio"/> Acquired hypothyroidism | <input type="radio"/> Hypocalcemia/Hypercalcemia | <input type="radio"/> Panhypopituitarism |
| <input type="radio"/> Adrenal insufficiency | <input type="radio"/> Hypoglycemia | <input type="radio"/> Pituitary tumors |
| <input type="radio"/> Adrenal tumors | <input type="radio"/> Klinefelter Syndrome | <input type="radio"/> Positive diabetes antibodies |
| <input type="radio"/> Androgen insensitivity (CAIS/PAIS) | <input type="radio"/> Medication-induced diabetes | <input type="radio"/> Prader-Willi Syndrome |
| <input type="radio"/> Clinical hypothyroidism | <input type="radio"/> McCune-Albright Syndrome | <input type="radio"/> Precocious puberty |
| <input type="radio"/> Congenital hypothyroidism | <input type="radio"/> BMI >95% AND: | <input type="radio"/> Premature adrenarche |
| <input type="radio"/> Cushing Syndrome | <input type="radio"/> A1c greater than 6.5% | <input type="radio"/> Rickets |
| <input type="radio"/> Delayed puberty | <input type="radio"/> Fasting glucose 100 or above;
or non-fasting glucose >140 | <input type="radio"/> Russell-Silver Syndrome |
| <input type="radio"/> Disorders of Sex Development | <input type="radio"/> Fasting triglycerides 500 or above | <input type="radio"/> Septo-optic dysplasia |
| <input type="radio"/> Endocrine disorders in Down Syndrome | <input type="radio"/> Fasting LDL greater than 160 | <input type="radio"/> Short stature/Growth failure |
| <input type="radio"/> Endocrine disorders with chemotherapy | <input type="radio"/> Non-HDL greater than 190 | <input type="radio"/> Thyroid nodule/cancer |
| <input type="radio"/> Growth hormone deficiency | <input type="radio"/> Metabolic bone disease | <input type="radio"/> Transplant-related diabetes |
| <input type="radio"/> Gynecomastia | <input type="radio"/> Noonan Syndrome | <input type="radio"/> Turner Syndrome |
| <input type="radio"/> Hyperparathyroidism | <input type="radio"/> Osteogenesis imperfecta | <input type="radio"/> Positive diabetes antibodies |
| <input type="radio"/> Hyperthyroidism | <input type="radio"/> Osteoporosis | <input type="radio"/> Type 1 diabetes |
| <input type="radio"/> Hypoparathyroidism | | <input type="radio"/> Type 2 diabetes |
| | | <input type="radio"/> Other diagnosis not listed:
_____ |

Below is the criteria for an URGENT referral

- | | |
|---|---|
| <input type="radio"/> TSH and/or FT4 is abnormal in patient ≤ 2years of age | <input type="radio"/> Prolactin level > 50ng/mL |
| <input type="radio"/> TSH >100mIU in patient >2 years of age | <input type="radio"/> Calcium >13mg/dL OR iCa (ionized calcium) > 1.5mmol/L |
| <input type="radio"/> TSH lower than normal with an elevated FT4 (any age) | <input type="radio"/> Hemoglobin A1c ≥ 7% |
| <input type="radio"/> Abnormal newborn screen (CAH or thyroid) | |

If you have questions or need further discussion about a patient not meeting the urgent criteria, contact the on call endocrinologist through Cook Direct Connect at **682-885-1940**. For more information call **682-885-7960** or visit cookchildrens.org/endocrinology.