

Planned Investigations Unit – 8 South CXH

Please complete all fields, omissions will delay your request

Patient Name, Address AND Date of Birth (or affix addressograph label)			
	Male	Female	
Hospital No.		Consultant	
Pt Tel No.	Home		Work

Transport Interpreter	Yes/No	Pre – admission Tests	Yes/No
	Yes/No	If required, please attach relevant forms with this referral.	
Any Mobility Issues	Yes/No		
Special Diet Required	Yes/No		
Pt currently taking anti-coagulant meds	Yes/No		
Diabetes	Yes/No		
Any other requirements	Yes/No		

Diagnosis	
Investigation/Procedure	
Sequenced?	
Date of investigation	
Time of investigation	

Admit date	/	/	
Admit time	:		
Discharge date	/	/	
Discharge Time	:		
		Own Transport	
		Hospital Transport	
Date	/	/	
Referring Clinician(please print)	Bleep:	Sign:	

Please complete and return to Nurses station on 8 South, with any pre-admission test forms attached.

Requests within 24 hours of admission to be discussed with Senior Sister on 1939.

Completed drug charts need to be in the unit 48 hours before admission.

Patient to be salt loaded eg sodium chloride tablets 2g tds on the day before hormone measurements plus K supplements if $K < 3.5$ on urgent U+E after salt loading. Ensure not on interfering drugs (see bible)

Day 1: Start NaCl 2g tds, Check K^+ > 3.5mmol/L
Day 2: 0700h cannulate, pt to stay in bed; 0800h bloods for U+E, cortisol, aldosterone
Plasma renin activity and ACTH. THEN pt to mobilise. Must be upright 11:30 to noon
Noon: blood for aldosterone and plasma renin activity

Dear Dr.....

Your patient was admitted for: Postural studies for ?Conn's syndrome

Date of test:

Name:

Hospital Number:

Date of Birth:

Address:

Telephone Number(s):

Diagnosis:

Drugs:

Results

24h Urinary Aldosterone:

Sample	Aldosterone	Renin	Cortisol
Supine			
Upright			

Interpretation

Next OPA

Signed (Consultant/SpR):

Name:

Date:

Endocrine Unit

Charing Cross Hospital

Fulham Palace Road

London W6 8RF

Tel: 020 8846 1065/1067, Fax 020 8846 1862