

July 2022

All GPs
All Practice Managers

Department of Clinical Biochemistry

Royal United Hospital
Combe Park
Bath
BA1 3NG

Tel: 01225 824713

beverleyharris1@nhs.net
www.ruh.nhs.uk

Dear Colleague

Endocrinology profiles in ICE

As of Monday 11 July 2022, we are introducing changes to the endocrinology/hormone profiles on ICE. The tests in the updated profiles reflect current best practice and guidelines and give more guidance to the requestor to ensure the most appropriate tests are requested at the right time. They will be on a new tab called Endo P Care. The current Sex Hormones [N] tab will be removed.

The hormone profiles are split into eight sections: Thyroid, Parathyroid, Adrenal, Reproductive hormones (female), Reproductive hormones (male), Gender Reassignment, Neuroendocrine and Diabetes. Most of these are self-explanatory, but there are four areas to highlight.

TSH: the laboratory operates a frontline TSH testing protocol, with additional tests being added according to clinical details and the TSH result. We have had a significant increase in the number of free T4 and free T3 requests generated frontline from primary care. Many of these are completely normal, and not indicated from the normal TSH. Please do not request free T3 or free T4 frontline – it is not necessary and triples the cost of providing the thyroid function test. As always, if there is a particular case where you believe FT3/FT4 are indicated, please contact the duty biochemist to discuss (01225 824050).

Cortisol: it is essential that the correct clinical information regarding cortisol requests is communicated to the laboratory using the clinical details drop down options. In particular, if the request is for an overnight dexamethasone suppression test, **please ensure these details are supplied** in order to prevent unnecessary telephoning of low results to the out of hours services. We are aware of at least one patient who was called by the OOH team and brought into ED unnecessarily overnight because these details were not given on the request.

Oestradiol: this is a rarely indicated test. Its utility is limited to fertility treatment, investigation of precocious puberty, adrenal tumours, or gonadal dysgenesis, transgender treatment (please use the gender reassignment profiles), and very occasionally for assessment of absorption of



transdermal HRT (at the request of the menopause clinic). However, we are aware that following increased publicity surrounding the menopause, many patients are requesting oestradiol levels. If you wish to order this test in any situation outside of the clinical scenarios outlined above, please contact the duty biochemist to discuss first.

Testosterone (female): this profile includes SHBG and a calculated free androgen index

We welcome any feedback you may have on these changes and are always happy to provide support with requesting the most appropriate profiles. Please contact me or my colleagues (Dr Moya O'Doherty: moya.o'doherty@nhs.net, Dr Nicola Pullan: nicola.pullan@nhs.net and Francesca Mills: francesca.mills@nhs.net) if you wish to discuss further. More information and guidelines are on our pathology website <https://www.ruh.nhs.uk/pathology/> and the duty biochemist is available Monday-Friday, 9am-5pm on 01225 824050 for clinical queries.

For IT queries regarding ICE, please contact ruh-tr.ClinicalComms@nhs.net. Please note any changes to the profile contents should be directed to the clinical biochemists.

Yours sincerely



Beverley Harris MSc FRCPath
Consultant Clinical Scientist in Clinical Biochemistry