

# HORMONE MONITORING SUMMARY FOR TRANS WOMEN

**BASELINE**

MONTH  
**1**

MONTH  
**3**

MONTH  
**6**

<b>REVIEW</b>	Contraindications and precautions, old records, mental health education/lifestyle counselling, psychosocial, bone health, health maintenance	Hormone effects, spontaneous erections, mental health, education/lifestyle counselling, psychosocial	Review of hormone effects, spontaneous erections, mental health, education/lifestyle counselling, psychosocial
<b>EXAM/ INVESTIGATION</b>	Full Physical Exam, measure: height, weight, waist & abdo circ., +/- breast, hips as per client preference, EKG if over 40, EKG + cardiac stress test if additional risk factors	BP, weight, waist & abdo circ., abdominal exam including liver palpation, extremity exam	BP, weight, waist & abdo circ., abdominal exam including liver palpation, extremity exam, measure breast and hips as per client preference

## BLOODWORK

<b>CBC</b>	✓	✓	✓	✓
<b>ALT/AST<sup>a</sup></b>	✓	✓	✓	✓
<b>Creatinine/Lytes/Urea<sup>b</sup></b>	✓	✓	✓	
<b>Fasting Glucose</b>	✓			
<b>LDL/HDL/TG</b>	✓			
<b>Testosterone (+/- Estradiol)</b>	✓	✓	✓	✓
<b>Prolactin<sup>c</sup></b>	✓	✓	✓	✓
<b>LH<sup>d</sup></b>	✓	✓	✓	✓
<b>Other</b>	Hep A, B, C			

- a) for Ontario providers who may be restricted in ordering OHIP- covered AST levels, ALT alone may be used to screen for liver dysfunction
- b) Elevated LH post-gonadectomy may have implications regarding bone mineral density (See Osteoporosis and BMD Screening in Protocols)
- c) Prolactin should be monitored at least yearly, and more frequently if elevation noted
- d) Elevated LH post-gonadectomy may have implications regarding bone mineral density (See Osteoporosis and BMD Screening in Protocols)