**Discharge Letter**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear XXX,

You were referred to our Endocrinology Clinic for assessment of **normocalcemic primary hyperparathyroidism** (normal calcium with a high parathyroid hormone - PTH). At this time, you no longer need follow-up at our clinic, as you do not have any kidney or bone complications at this time.

This letter includes your care instructions and test results. Your primary care provider will also receive a report with this information.

Care Instructions

* Make sure you drink plenty of fluids each day (more than 2 Litres per day)
* Make sure you get 1000 mg of calcium per day through diet
* Continue taking your current dose of Vitamin D: \_\_\_\_\_ IU/day

Please ask your family doctor to:

* Check your blood work once per year
* Total calcium/albumin and ionized calcium
* Creatinine, Vitamin D, Parathyroid Hormone (PTH)
* Arrange a Bone Mineral Density test (BMD) every 1-2 years
* 3-site, including distal radius
* Renal imaging and urinary calcium collection, as needed

Please have your family doctor to refer you back to our clinic or another endocrinologist if:

* Your levels of calcium is elevated
* You have a new fracture or decline in bone mineral density
* You have a new kidney stone that is likely calcium based

**Blood work:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Date** | **Most recent total/ionized Calcium** | **Most recent Parathyroid Hormone (PTH)** | **Most recent Creatinine** | **Most recent 25-hydroxyvitamin D** | **24 hour urine collection for Calcium/creatinine** |
|  |  |  |  |  |  |

**Imaging:**

|  |  |  |
| --- | --- | --- |
| **Test** | **Date** | **Result** |
| **Bone Mineral Density** |  | Lumbar Spine T-score: \_\_\_\_\_\_\_\_\_  Femoral Neck T-score:\_\_\_\_\_\_\_\_\_  Total Hip T-score: \_\_\_\_\_\_\_\_ |
| **Spine imaging** |  |  |
| **Abdominal ultrasound** |  |  |