

Testing Standards for Psychotropic Medication Usage

LABORATORY TESTING

The following minimal laboratory monitoring requirements for psychotropic medications are listed by classes or in some instances individual drugs. These are the minimum requirements. Additional testing may be done at the clinician's discretion.

- A. Required Tests For Antipsychotic Agents
 - 1. Baseline: Assessment of movement disorders documented, including AIMS.
 - a. Document assessment of movement disorders with Abnormal Involuntary Movement Scale (AIMS)
 - b. FBS, lipid profile
 - c. EKG only if to begin Geodon (Do not start if QTc > 500 ms.)
 - 2. Follow-Up
 - a. FBS, lipid profile at three (3) months, then every year
 - b. AIMS every 3 months if Tardive Dyskinesia (TD); every 6 months if no TD

- B. Required Tests For Antidepressant Agents: SSRI's, NDRI (Wellbutrin), NaSSA (Remeron), SRNI's (Effexor, Cymbalta)
 - 1. Baseline

Thyroid profile if none within a year
 - 2. Follow-Up

Only if clinically indicated

- C. Required Tests for Lithium
 - 1. Baseline
 - a. CBC, Renal profile (BUN, CR, Electrolytes)
 - b. Urine dipstick
 - c. Thyroid profile
 - d. Pregnancy status

2. Follow-Up
 - a. Yearly renal and thyroid profile

3. Assessing Lithium Serum Levels

After 10 days, after each dose adjustment, and every 12 months once stabilized

D. Required Tests for Carbamazepine (Tegretol)

1. Baseline:
 - a. CBC, SMAC (BUN, CR, Electrolytes, LFT's)
 - b. Pregnancy status

2. Follow-Up
 - a. CBC and LFT's every three (3) months

3. Medication Blood Levels:

After each dose adjustment and every six (6) months once stabilized

E. Valproic Acid

1. Baseline:
 - a. CBC
 - b. SMAC
 - c. Pregnancy status

2. Follow-Up
 - a. CBC and LFT's every six (6) months

3. Levels:

After each dose change and every six (6) months once stabilized