



Dr. Techy says,
"Hormone testing is as simple as ordering a CBC or liver panel."

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BULLETIN 16

COMMON QUESTIONS
SERIES NO. 6

HOW FREQUENTLY SHOULD HORMONE TESTING BE DONE?

✓ **SCREENING OF PATIENTS WITH CENTRALIZED PAIN AND/OR DAILY OPIOID ADMINISTRATION SHOULD BE**



**TWICE
A YEAR**

✓ **ONCE A HORMONE IMBALANCE—TOO HIGH OR TOO LOW—IS DETECTED, TESTING SHOULD BE EVERY 1 TO 3 MONTHS.**

SPECIFIC SITUATIONS

Some pain patients may show a hormone level below the bottom level or lowest level reported by your laboratory.

THESE ARE THE MOST COMMON TO BE BELOW RANGE:

CORTISOL	TESTOSTERONE	PREGNENOLONE
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Immediately replace these hormones and follow monthly.

SPECIAL SITUATION: Cortisol levels below 1.0 mcg/dl

Replace cortisol by giving plain hydrocortisone. Recommended starting dosage is 5 mg BTD or TTD. Use compounded cortisol, 7 mg BTD if hydrocortisone doesn't raise cortisol levels. Follow every 1 to 2 weeks until normal serum levels are achieved. Raise the starting dose if necessary.

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**Information
Network**

Dr. Hormone says,
"Centralized pain and opioid administration require twice a year screening."

