Aviation Medicine Center

FAA Hypothyroidism Status Report

PI Number _____

Patient Information

Patient's Name				
	First	Last	Middle	Date of Birth / /

Laboratory Values

T4:		T3:	
Free T4:		TSH:	

Vital Signs

1.	BP: (/)	Pulse:	Temperature:
2.	Height:	Weight:	BMI:

Acceptable Medications

- Levothyroxine sodium
  1. Synthroid
  2. Levothyroid
- Liothyronine sodium
  1. Cytomel
- Porcine thyroid Calcium Channel Blockers
  1. Armour
- Liotrix
  1. Thyrolar

	Medication	Dosage	Frequency	NA
1.				❑
2.				❑
3.				❑

Patient History

	YES	NO	NA
Are there any complaints of temperature intolerance?	❑	❑	❑
Are there any complaints of excessive fatigue?	❑	❑	❑
Is there any evidence of somnolence?	❑	❑	❑
Is there any evidence of alteration of intellectual functioning (mental status impairment)?	❑	❑	❑
Is there any evidence of a problem with emotional control?	❑	❑	❑
Have there been any recent unusual visual symptoms?	❑	❑	❑
Are there any long term complications such as atherosclerosis?	❑	❑	❑
Have there been any recent unusual pulmonary symptoms?	❑	❑	❑
Does the patient take thyroid medication?	❑	❑	❑
Is the patient considered to be euthyroid?	❑	❑	❑
Overall health has essentially remained unchanged?	❑	❑	❑
The patient's condition is stable on the current regimen and no changes are recommended?	❑	❑	❑

Physician Name (Printed)	Physician Signature	Date / /