



Diabetes & Endocrinology

1600 Steeles Ave. W, Unit 5
Vaughan, ON L4K 3B9
P (905) 763-8660
F (905) 763-0708

09-Dec-2020

Dr. Lo Fax: (905) 480-0898

Patient: Ms. Vivian Liu
PHN: 4927 772 782JH **Birthdate:** 15-Nov-1964
Problem History: hypertension
Active Medications: None Recorded
External Medications: COVERSYL 4 MG TABLET
Past Medical History: - Pituitary Microadenoma

Dear Dr. Lo,
Thank you for the opportunity of seeing your 56 year old female patient in consultation.

HPI

Menopausal status: Perimenopausal up to 6 months apart
Vasomotor symptoms (flushes) - took HRT earlier this year x 3 months
History of prior pregnancies: 1 (age 20)

Pituitary compressive features: no headache and no vision change or field loss
Galactorrhea: none
MRI Brain/Sella: Incidental pituitary microadenoma 3 mm with possible microhemorrhage
Imaging done for intermittent left arm numbness. Cervical spine MRI reports DDD.

HTN - controlled with Coversyl. No diabetes or CVD.

Lab results:

A1c:	09-Apr-2020	5.6 %	29-Mar-2019	5.7 %
TSH:	09-Apr-2020	1.76 mIU/L	06-Jan-2020	1.74 mIU/L
TC:	09-Apr-2020	4.89 mmol/L	29-Mar-2019	5.18 mmol/L
LDL:	09-Apr-2020	2.54 mmol/L	29-Mar-2019	2.93 mmol/L
HDL:	09-Apr-2020	1.73 mmol/L	29-Mar-2019	1.85 mmol/L
TG:	09-Apr-2020	1.36 mmol/L	29-Mar-2019	0.89 mmol/L

Vitals

Height:	09-Dec-2020	164.5 cm
Weight:	09-Dec-2020	62.9 kg
BMI:	09-Dec-2020	23.2
Systolic:	09-Dec-2020	134
Diastolic:	09-Dec-2020	80

Physical Exam

The head and neck exam was unremarkable with no cervical adenopathy.
Acanthosis nigricans and skin tags were absent noted. Visual fields were grossly intact.
Cushing's features were absent.
The patient was euthyroid to physical exam. The thyroid was normal and non-tender with no nodularity.
The chest was clear to auscultation.
Cardiovascular examination showed normal heart sounds, with no audible murmurs or bruits.
There was no peripheral edema.
The abdomen was soft with no palpable organomegaly.

Assessment and Plan

Incidental 3 mm pituitary microadenoma - likely of no clinical significance in a perimenopausal woman.

Further investigations: Prolactin, am cortisol, TSH with free T4, LH & FSH (expected to be elevated).

No follow up MRI imaging required.

Follow up: patient will be contacted for follow-up if blood tests indicate a need for further endocrine investigations.

Thank you very much for the opportunity to see your patient and share in their care.

Sincerely,

A handwritten signature in black ink, appearing to read 'RS', with a long horizontal flourish extending to the right.

Robert Schlosser MD, FRCPC

*medical services provided by Dr. Robert Schlosser Medicine Professional Corporation

Electronically Reviewed to Expedite Delivery