

Monitoring Parameters for Behavioral Health Medications

Monitoring Parameters – Second Generation Antipsychotics							
	Baseline	Week 4	Week 8	Week 12	Quarterly	Annually	As Clinically Indicated
Personal Family History	✓					✓	
Medication Review	✓					✓	
Fasting Plasma Glucose	✓			✓		✓	✓
Fasting Lipid Profile	✓	*		✓		✓	✓
Blood Pressure/Pulse	✓			✓		✓	✓
Waist circumference	✓			✓		✓	
Weight/BMI	✓	✓	✓	✓	✓		
Tardive Dyskinesia	✓			✓		✓	✓
EPS	✓						✓
Sexual function	✓						✓
Pregnancy status	✓						✓
Prolactin Level (risperidone and paliperidone; or if symptomatic)							✓
Cardiac Monitoring (EKG: chlorpromazine, haloperidol, thioridazine, ziprasidone, quetiapine, risperidone, olanzapine)	✓						✓
Ocular Evaluations (chlorpromazine, quetiapine)	✓						✓

*For patients taking olanzapine, quetiapine, clozapine

Monitoring Parameters - Antidepressants				
	Baseline	During dose titration	Annually	As Clinically Indicated
Blood pressure/pulse	✓	✓	✓	✓
Weight/waist circumference	✓		✓	
Pregnancy status	✓			✓
Suicidal ideation or behavior	✓	✓		✓
Liver function tests (bupropion, Cymbalta, fluvoxamine, MAOIs, nefazodone, mirtazapine, TCAs, venlafaxine)	✓			✓
Cardiac Monitoring (ECG: TCAs, escitalopram, citalopram)	✓			✓
Renal function (bupropion, MAOIs, mirtazapine, venlafaxine)	✓		✓	
Seizure risk (bupropion, maprotiline)	✓		✓	
Plasma levels (TCAs)				✓
Sexual dysfunction	✓			✓
Medication Review	✓		✓	

Monitoring Parameters – Mood stabilizers							
	Baseline	1 Week	3 Months	6 Months	At Dosage Change	Annually	As Clinically Indicated
General physical assessment (BP, pulse, height, weight)	✓					✓	
Pregnancy status	✓						✓
Suicidal behavior and ideation	✓						✓

Therapeutic Drug Levels – Mood Stabilizers and Anticonvulsants	
Lithium	0.6-1.2 mEq/L
Carbamazepine	4-12 mcg/mL (Steady state: 2-5 days)
Valproic acid, total	50-125 mcg/mL (Steady state: 2-4 days)
Valproic acid, free	5-15 mcg/ml
Ethosuximide	40-100 mcg/mL
Phenytoin	10-20 mcg/mL
Phenobarbital	10-40 mcg/mL (Steady state: 20-30 days)
Primidone	4-12 mcg/mL

Lithium							
	Baseline	1 Week	3 Months	6 Months	At Dosage Change	Annually	As Clinically Indicated
Plasma level	✓			✓	✓ (5-7 days after dose increase)	✓	✓
CBC	✓					✓	✓
Pregnancy status	✓						✓
TSH	✓			✓	✓	✓	✓
BUN/CrCl	✓		✓	✓	✓	✓	✓
EKG (if age 40+ or high risk)	✓						✓

Valproic Acid							
	Baseline	1 Week	3 Months	6 Months	At Dosage Change	Annually	As Clinically Indicated
Plasma level	✓				✓	✓	✓
CBC with platelets	✓				✓	✓	✓
Pregnancy status	✓						✓
Liver function tests	✓				✓	✓	
Carbamazepine							
	Baseline	1 Week	Every 2 weeks	3 months	At Dosage Change	Annually	As Clinically Indicated
Plasma level		✓			✓	✓	✓
Liver and renal function tests	✓					✓	✓
CBC	✓				✓	✓	✓
Ophthalmic exam	✓					✓	✓
Lamotrigine							
	Baseline	1 Week	3 Months	6 Months	At Dosage Change	Annually	As Clinically Indicated
BUN/CrCl	✓						✓
Liver function tests	✓						✓
Rash assessment and education	✓						✓

References:

1. American Psychiatric Association Practice Guidelines. Resource Document on QTc Prolongation and Psychotropic Medications. Updated 3/2020.
2. <https://crediblemeds.org/healthcare-providers/>
3. https://www.uptodate.com/contents/second-generation-antipsychotic-medications-pharmacology-administration-and-side-effects?search=monitor%20parameters%20for%20antipsychotics&source=search_result&selectedTitle=1~150&usage_type=default&display_rank=1 Accessed August 31, 2021
4. Walkup J et al, *Practice parameter on the Use of Psychotropic Medication in Children and Adolescents*. American Academy of Child and Adolescent Psychiatry. J Am Acad Child Adolesc Psychiatry, 2009. 48:9: p. 961-973.
5. American Academy of Child and Adolescent Psychiatry. Recommendations about the Use of Psychotropic Medications for Children and Adolescents Involved in Child-Serving Systems. 2015.