



Psychotropic Monitoring Inpatient Guidelines

Baseline pregnancy test in females before starting

Atypical Antipsychotics

Aripiprazole (Abilify®, Abilify Maintena™, Aristada®), Asenapine (Saphris®), brexpiprazole (Result®), cariprazine (Vraylar®), Clozapine (Clozaril®, Fazaclo®, Versacloz®), iloperidone (Fanapt®), Lurasidone (Latuda®), Olanzapine (Zyprexa®, Zyprexa Relprevv®), Paliperidone (Invega®, Invega Sustenna®, Invega Trinza®), Quetiapine (Seroquel®), Risperidone (Risperdal® Risperdal Consta®, Perseris™), Ziprasidone (Geodon®)

Baseline

- CBC (clozapine, cariprazine)
- Waist circumference and BMI (weight in lbs x 703)/height² in inches
- FPG or HbgA1c
- Fasting lipid profile within 30 days of initiation if not done within last year
- EPS evaluation (exam for rigidity, tremor, akathisia)
- TD assessment
- EKG for clozapine and iloperidone, ziprasidone only if risk factors present for QT prolongation (e.g. known heart disease, history of syncope, FH early sudden death)
- Serum potassium and magnesium for iloperidone if at risk for electrolyte disturbance
- Troponin and C-reactive protein (clozapine)

Ongoing

- CBC as indicated by manufacturer and as clinically indicated (clozapine only): cariprazine as clinically indicated
- BMI and waist circumference monthly for 6 months then quarterly when dose is stable
- FPG or HbgA1c every 6 months
- Fasting lipid panel at least every year if lipid levels are in normal range
- Fasting lipid panel every 6 months if LDL is > 130 mg/dL
- Inquiry for symptomatic prolactin elevation yearly (quarterly during 1st year for antipsychotics associated with increased prolactin)
- Prolactin level yearly if symptoms of prolactin elevation (e.g. gynecomastia, amenorrhea)
- EPS evaluation weekly after initiation & dose increases, continue 2 weeks after last increase
- TD assessment every 3 months and as clinically indicated
- Vision questionnaire and ocular evaluation yearly, ocular eval. every 2 years if ≤ 40 years old
- EKG annually for clozapine and as clinically indicated; ziprasidone if patient has symptoms of QT prolongation (e.g. syncope)
- Troponin and C-reactive protein weekly for 4 weeks for clozapine and as clinically indicated for suspected myocarditis
- BNP as clinically indicated based on cardiac risk factors (clozapine)
- Serum potassium and magnesium periodically for iloperidone if at risk for electrolyte disturbance
- Olanzapine palmitate injection requires continuous observation for at least 3 hrs after injection

Other Psychotropics

The following psychotropics only require a pregnancy test at baseline and as clinically indicated:

- Benzodiazepines
- Buspirone (BuSpar®)
- Sedating Antihistamines
- Zaleplon (Sonata®)
- Zolpidem (Ambien®)

psychotropic medication & as clinically indicated

Typical Antipsychotics

Chlorpromazine (Thorazine®), Fluphenazine (Prolixin®, Prolixin Decanoate®), Haloperidol (Haldol®, Haldol Decanoate®), Loxapine (Loxitane®), Perphenazine (Trilafon®), Thiothixene (Navane®), Thioridazine (Mellaril®), Trifluoperazine (Stelazine®)

Baseline

- Waist circumference and BMI (weight in lbs x 703)/height² in inches
- FPG or HbgA1c
- Fasting lipid profile within 30 days of initiation if not done within last year
- EPS evaluation (exam for rigidity, tremor, akathisia)
- TD assessment
- EKG prior to initiation of thioridazine
- Serum potassium and magnesium prior to initiating thioridazine

Ongoing

- BMI and waist circumference monthly for 6 months then quarterly when dose is stable
- FPG or HbgA1c every 6 months
- Fasting lipid panel at least every year if lipid levels are in normal range
- Fasting lipid panel every 6 months if LDL is > 130 mg/dL
- Inquiry for symptomatic prolactin elevation yearly (quarterly during 1st year for antipsychotics associated with increased prolactin)
- Prolactin level yearly if symptoms of prolactin elevation (e.g. gynecomastia, amenorrhea)
- EPS evaluation weekly after initiation & dose increases, continue 2 weeks after last increase
- TD assessment every 3 months and as clinically indicated
- Vision questionnaire and ocular evaluation yearly, ocular eval. every 2 years if ≤ 40 years old
- EKG for thioridazine 7-14 days after dose change or change of med impairing metabolism or cardiac effects of thioridazine, every 6 months thereafter and as clinically indicated
- Serum potassium every 6 months and as clinically indicated and magnesium as clinically indicated (especially if potassium level is low)

Antihypertensives

Beta-Blockers- Atenolol (Tenormin®), Metoprolol (Lopressor®), Nadolol (Corgard®), Propranolol (Inderal®)

Baseline

- EKG (age 45 and over)
- Blood pressure and pulse rate

Ongoing

- Blood pressure and pulse rate prior to each dose increase and quarterly

Optional ongoing tests if clinically indicated

- EKG (age 45 and over) and Blood pressure and pulse rate

Clonidine (Catapres®), Guanfacine (Tenex®, Intuniv®)

Baseline

- Blood pressure

Ongoing

- Blood pressure daily x4 days after initiation or dose increase

Optional ongoing if clinically indicated

- Blood pressure

Anticonvulsants

Monitor all treated with anticonvulsants periodically for emergence of suicidal ideation or behavior

Carbamazepine (Tegretol®)

Baseline

- CBC with differential
- Hepatic function
- Electrolytes
- HLA-B*1502 test prior to initiation for those of Asian descent (includes South Asians)
- Consider HLA-A*3101 if high risk (Asian, Native Am, European, Latin Am)

Ongoing

- CBC with differential 1 to 2 weeks after each dose increase, annually & as clinically indicated
- Electrolytes 1 to 2 weeks after each dose increase, annually & as clinically indicated
- Hepatic function monthly for the first 3 months, annually & as clinically indicated
- Carbamazepine level 1 week after start, 3-4 weeks after dose change & as clinically indicated

Gabapentin (Neurontin®)

Baseline

- Renal function (such as serum creatinine)
- Optional ongoing test if clinically indicated
- Renal function (such as serum creatinine)

Lamotrigine (Lamictal®)

Baseline

- Renal function (such as serum creatinine)
- Hepatic function
- CBC

Ongoing

- Monitor for rash, especially during the first 2 months of therapy

Optional ongoing tests if clinically indicated

- Renal function, Hepatic function, and CBC

Oxcarbazepine (Trileptal®)

Baseline

- CBC with differential
- Electrolytes
- Hepatic function
- HLA-B*1502 test prior to initiation for those of Asian descent (includes South Asians)

Ongoing

- CBC with differential 1 to 2 weeks after each dose increase, annually & as clinically indicated
- Electrolytes 1 to 2 weeks after each dose increase, annually & as clinically indicated
- Hepatic function annually

Topiramate (Topamax®)

Baseline

- CMP (evaluate renal function, hepatic function, and serum bicarbonate)
- Eye exam
- Weight if topiramate is being used for weight loss

Ongoing

- CMP at 3 months, annually and as clinically indicated
- Eye exam annually
- Weight every 3 months and as clinically indicated if used for weight loss

Valproic Acid (Depakene®), Divalproex Sodium (Depakote®, Depakote ER®)

Baseline

- CBC with differential and platelet count
- CMP (evaluate hepatic function, serum creatinine, BUN and electrolytes)
- Weight

Ongoing

- CBC with differential and platelet count 1-2 weeks after each dose increase, every 3 months for the first year of treatment, annually and as clinically indicated
- CMP every 3 months for the first year, annually and as clinically indicated
- VPA level 1-2 weeks after initiation, after each dosage change & as clinically indicated
- Weight every 3 months for the first year of treatment, then annually and as clinically indicated

Chemical Dependence Adjunct

Acamprosate (Campral®)

Baseline

- CMP (renal)
- Eye exam

Ongoing

- Eye exam annually
- Monitor for worsening depression, suicidal ideation, or suicidal behavior

Optional ongoing tests if clinically indicated

- CMP

Buprenorphine (Subutex®), buprenorphine/naloxone (Suboxone®)

Baseline

- Liver function tests

Ongoing

- Respiratory status
- CNS depression/mental status
- Blood pressure
- Withdrawal symptoms
- Signs of addiction, abuse, or misuse
- Signs or symptoms of hypogonadism or hypoadrenalism
- Signs or symptoms of toxicity or overdose (especially with hepatic impairment)

Optional ongoing tests if clinically indicated

- Liver function tests (periodically)

Disulfiram (Antabuse®)

Baseline

- CMP (hepatic function, serum chemistries)
- CBC

Ongoing

- CMP within 2 weeks of initiation

Optional ongoing tests if clinically indicated

- CBC, CMP, Eye Exam

Naltrexone (ReVia®, Vivitrol®)

Baseline

- Liver function tests

Ongoing

- Opioid withdrawal
- Depression and suicidal thinking
- Injection site reactions (Vivitrol®)

Optional ongoing tests if clinically indicated

- Liver function tests (periodically)

Topiramate (Topamax®)

See Anticonvulsants

Stimulants

Dextroamphetamine (Dexedrine®), Methylphenidate (Ritalin®, Concerta®, Metadate CD®), Dextroamphetamine/Amphetamine (Adderall®, Adderall XR®)

Baseline

- Height and Weight (children)

Optional ongoing tests if clinically indicated

- Height and Weight (children)

Miscellaneous

Lithium (Eskalith®, Lithobid®, Eskalith CR®)

Baseline

- EKG
- CBC
- Thyroid studies
- CMP (evaluate BUN, creatinine, glucose, calcium and electrolytes)
- UA
- Weight

Ongoing

- EKG yearly and as clinically indicated
- CBC yearly and as clinically indicated
- TSH every 6 months and as clinically indicated
- CMP at 3 months, annually and as clinically indicated
- Lithium level 5 to 7 days after initiation or dose change, 3 months after initiation and every 6 months during maintenance treatment and as clinically indicated
- Weight every 6 months and as clinically indicated

Optional ongoing test if clinically indicated

- UA

Antidepressants

Monitor all treated with antidepressants periodically for emergence of suicidal ideation or behavior

Amoxapine (Asendin®)

Baseline

- EKG
- TD assessment
- EPS evaluation (exam for rigidity, tremor, akathisia)
- Sodium level (high risk patients)

Ongoing

- TD assessment every 3 months and as clinically indicated
- EPS evaluation weekly after initiation & dose increases, continue 2 weeks after last increase
- Sodium level (high risk patients) at 4 weeks and as clinically indicated

Optional ongoing tests if clinically indicated

- EKG
- Prolactin level if symptoms of prolactin elevation (e.g. gynecomastia, amenorrhea, menstrual disturbance, erectile/ejaculatory disturbances)

Bupropion (Wellbutrin®, Budeprion®, Zyban®)

Baseline

- Blood pressure
- CBC
- Hepatic function panel
- Renal function test

Ongoing

- Neuropsychiatric reactions (smoking cessation)

Optional ongoing tests if clinically indicated

- Blood pressure
- CBC
- EKG
- Hepatic function panel
- Renal Function test

Esketamine (Spravato®)

Baseline

- Blood pressure prior to each dose administration
- Montgomery-Asberg Depression Rating Scale (MADRS)

Ongoing

- Blood pressure 40 minutes post-dose
- MADRS weekly
- Sedation & dissociation at least for 2 hours post dose

Optional ongoing tests if clinically indicated

- Blood pressure as clinically indicated for 2 hours post-dose

Mirtazapine (Remeron®)

Baseline

- CBC
- Fasting lipid profile within 30 days of initiation if not done within last year (children & adolescents)
- Height & weight (children & adolescents)
- Sodium level (high risk patients)

Ongoing

- Blood pressure during titration (children & adolescents)
- Height & weight (children & adolescents) monthly
- Sodium level (high risk patients) at 4 weeks

Optional ongoing tests if clinically indicated

- Blood pressure (children & adolescents)
- CBC
- Height & weight (children & adolescents)
- Fasting lipid profile (children & adolescents)
- Sodium level (high risk patients)

Monoamine Oxidase Inhibitors- Phenzelzine (Nardil®), Tranylcypromine (Parnate®)

Baseline

- Hepatic function panel
- Renal function test (such as serum creatinine)
- Blood pressure
- Sodium level (high risk patients)

Ongoing

- Hepatic function panel yearly and as clinically indicated
- Renal function test yearly and as clinically indicated
- Blood pressure during dosage adjustments and as clinically indicated
- Sodium level (high risk patients) at 4 weeks and as clinically indicated

Nefazodone (Serzone®)

Baseline

- ALT, AST
- EKG

Ongoing

- ALT, AST – 1, 2, 4, 6, 12 months, then annually. Stop drug if 3 X upper normal limit

Optional ongoing tests if clinically indicated

- ALT, AST
- EKG

SNRIs- Duloxetine (Cymbalta®), Venlafaxine (Effexor®, Effexor XR®)

Baseline

- Blood pressure (duloxetine)
- Hepatic function test
- Height & weight (children & adolescents)
- Sodium level (high risk patients)
- Fasting lipid profile within 30 days of initiation if not done within last year (venlafaxine)

Ongoing

- Blood pressure during dose titration (venlafaxine)
- Height & weight (children & adolescents) monthly
- Sodium level (high risk patients) at 4 weeks
- Fasting lipid panel at least every year if lipid levels are in normal range (venlafaxine)
- Fasting lipid panel every 6 months if LDL is > 130 mg/dL

Optional ongoing tests if clinically indicated

- Blood pressure
- Hepatic function test
- Height & weight (children & adolescents)
- Sodium level (high risk patients)

SSRIs- Citalopram (Celexa®), Escitalopram (Lexapro®), Fluoxetine (Prozac®), Paroxetine (Paxil®), Sertraline (Zoloft®)

Baseline

- EKG (citalopram, escitalopram)
- Electrolytes (high risk patients)
- Height & weight (children & adolescents)

Ongoing

- Electrolytes (high risk patients) at 4 weeks
- Height & weight (children & adolescents) monthly

Optional ongoing test if clinically indicated

- EKG (citalopram, escitalopram, fluoxetine, sertraline)
- Electrolytes (high risk patients)
- Height & weight (children & adolescents)

Tricyclic Antidepressants- Amitriptyline (Elavil®), Clomipramine (Anafranil®), Desipramine (Norpramin®, Pertofrane®), Doxepin (Sinequan®), Imipramine (Tofranil®), Maprotiline (Ludiomil®), Nortriptyline (Pamelor®, Aventyl®), Protriptyline (Vivactil®), Trimipramine (Surmontil®)

Baseline

- CBC (children & adolescents) (clomipramine)
- EKG
- Height & weight (children & adolescents) (clomipramine)
- Hepatic function panel (clomipramine)
- Sodium level (high risk patients)

Ongoing

- Blood pressure during titration
- Height & weight (children & adolescents) monthly (clomipramine)

Optional ongoing tests if clinically indicated

- Sodium level (high risk patients) at 4 weeks
- CBC (children & adolescents) (clomipramine)
- EKG
- Blood levels (not clomipramine)
- Blood pressure
- Height & weight (children & adolescents) (clomipramine)
- Hepatic function panel (clomipramine)
- Sodium level (high risk patients)

Trazodone (Desyrel®)

Baseline

- CBC

Optional ongoing test if clinically indicated

- CBC
- EKG