

**Table 7: Follow-up Laboratory Testing**

<b>Laboratory Test</b>	<b>Baseline</b>	<b>Testosterone Titration Phase</b>	<b>Stable Phase</b>
Total Testosterone	Recommendation: Measure at the same lab using the same assay on two separate occasions in an early morning fashion	Recommendation: Measure two to four weeks after initiation of testosterone therapy (depending on type of therapy)	Recommendation: Measure every 6-12 months
Luteinizing Hormone	Recommendation: Measure with repeat total testosterone level if first level low	Recommendation: Measure four weeks after initiation of SERM therapy in men with persistently low testosterone levels	Recommendation: Measure in men on SERMs who cease responding (decrease in testosterone level after initial response - tachyphylaxis)
Follicle-Stimulating Hormone	Optional: Measure with repeat total testosterone level in men interested in fertility	Not Recommended	Not Recommended
Prolactin	Recommendation: Measure in men with testosterone deficiency who also have a low or low/normal LH level	Not Recommended	Recommendation: Measure every 6-12 months, only in patients being treated pharmacologically for hyperprolactinemia
Estradiol	Recommendation: Measure in testosterone deficient patients with baseline gynecomastia  Optional: Measure in all patients with testosterone deficiency at baseline to assess pre-testosterone therapy level	Optional: Measure when checking total testosterone	Recommendation: Measure in patients developing breast symptoms or gynecomastia while on testosterone therapy and in all patients on AIs  Optional: Measure in all patients on SERMs

Hemoglobin / Hematocrit	<p><b>Recommendation:</b></p> <p>Measure baseline levels to ensure pre-treatment level is &lt;50%</p>	<p><b>Optional:</b></p> <p>Clinical judgment is recommended to determine need for hemoglobin/ hematocrit monitoring depending on baseline levels and the duration of time required to reach therapeutic target levels</p>	<p><b>Recommendation:</b></p> <p>Measure every 6-12 months, or sooner depending on prior values, to maintain hematocrit levels below 54%</p>
PSA	<p><b>Recommendation:</b></p> <p>Measure in testosterone deficient patients over 40 years of age and in those testosterone deficient patients with a history of prostate cancer</p>	Not Recommended	<p><b>Recommendation:</b></p> <p>In men without a history of prostate cancer, testing should be conducted utilizing a shared decision-making approach, in accordance with the AUA Early Detection of Prostate Cancer Guideline</p> <p>Prostate cancer patients on testosterone therapy should have their PSA levels monitored on the same schedule as men without testosterone deficiency; however, clinicians may choose to increase the frequency of testing</p>
<p>AI: aromatase inhibitor, LH: luteinizing hormone, SERM: selective estrogen receptor modulator</p>			