



## Amenorrhea

### Pre-Referral Considerations:

1. First rule out pregnancy
2. Primary amenorrhea age 16 careful exam and consider karyotyping (Mullerian anomalies)
3. Then FSH, LH, Estradiol, Prolactin and TSH to evaluate for Premature Ovarian Insufficiency (POI), Hyperprolactinemia and Thyroid disorders
4. If see hirsutism, acne, scalp hair loss check level, Dehydroepiandrosterone Sulfate DHEAS (polycystic ovarian syndrome usually normal levels, adrenal tumor very high levels)
5. If labs are normal check history of uterine instrumentation
6. Progesterone withdrawal challenge test to evaluate outflow tract and estrogen sufficiency

### Red Flags:

1. Pregnancy

### Lab Studies:

1. Follicle Stimulating Hormone (FSH), Prolactin and Thyroid Stimulating Hormone (TSH), Serum estradiol, perhaps DHEAS or karyotyping

### Imaging Studies:

None

### What to Avoid Ordering:

1. Ultrasound for endometrial stripe in premenopausal women