

Lab Monitoring for Psychiatric Medications		
Medications	Labs Before Prescribing	Labs After Prescribing
Antipsychotics, second generation (primarily clozapine, olanzapine, quetiapine, paliperidone, risperidone ¹)	BP, BMI, fasting glucose and lipids	BMI monthly x 3 months, then quarterly; BP at 3 months, then annually; fasting glucose at 12 weeks, then annually; fasting lipids at 12 weeks and 1 year, then every 5 years if normal
Atomoxetine	LFTs	LFTs at the first sign of possible liver dysfunction
Carbamazepine	CBC, electrolytes (for sodium), LFTs, pregnancy test ² , HLA-B*1502 ³ in Asians	CBC monthly x 2 months, then every 3–6 months, then yearly; electrolytes, LFTs every 6–12 months; CBZ level 1 week after dose changes, every 6–12 months otherwise
Citalopram	ECG for those at risk for cardiac disease, esp. at doses > 30 mg	ECG if cardiovascular symptoms appear
Clozapine	Fasting glucose and lipids, CBC	ANC weekly x 6 months, every 2 weeks in months 6–12, then monthly; for BMI, glucose, lipids, see “Antipsychotics”
Desvenlafaxine	BP	Periodic BP
Duloxetine	BP LFTs if suspect liver disease ⁴	Periodic BP LFTs if suspect liver disease
Iloperidone	ECG if cardiac disease	In high-risk patients, ECG shortly after reaching full dose
Levomilnacipran	BP, pulse rate	Periodic BP, pulse rate
Lithium	TSH, BUN/creatinine ⁵ , pregnancy test, ECG if cardiac disease or older patient	BUN/creatinine every 6–12 months; Li level one week after dose changes, every 6–12 months; TSH 2 weeks, 6 months, then annually
Mirtazapine	BMI, fasting lipids	BMI periodically, fasting lipids after 1 year, then every 5 years if normal
Naltrexone	LFTs, viral hepatitis panel if higher risk for hepatitis	LFTs if clinical signs of liver dysfunction appear
Oxcarbazepine	Sodium	Sodium at 1–3 months, then if symptoms of hyponatremia appear
Paliperidone	Prolactin, fasting glucose and lipids	Prolactin if clinically indicated; for BMI, glucose, lipids, see “Antipsychotics”
Phenelzine	LFTs	LFTs after 6–12 months, then if clinical signs of liver dysfunction appear
Risperidone	Fasting glucose and lipids	Prolactin if clinically indicated; for BMI, glucose, lipids, see “Antipsychotics”
SSRIs	Sodium in high-risk patients (elderly, underweight, on diuretic)	Sodium if unexplained fatigue, dizziness, or confusion appear; consider periodic BMI for paroxetine
Stimulants	ECG if cardiac disease	Periodic BP, pulse rate; height/weight in children periodically
Topiramate	Bicarbonate	Bicarbonate annually
Tricyclic antidepressants	ECG if cardiac disease, or if over age 50	ECG annually if cardiac disease or over age 50
Valproic acid	LFTs, CBC for platelets, pregnancy test	LFTs at 2 weeks, 6 months, then annually; CBC/platelets annually; LFTs at 2 weeks, 6 months, then annually; CBC/platelets annually; VPA levels 1 week after dose change, every 6–12 months thereafter
Venlafaxine	Periodic BP	Periodic BP
Ziprasidone	ECG if cardiac disease	In high-risk patients, ECG shortly after reaching full dose

Abbreviations: ANC=absolute neutrophil count, BP=blood pressure, BMI=body mass index, BUN=blood urea nitrogen, CBC=complete blood count, CBZ=carbamazepine, ECG=electrocardiogram, LFTs=liver function tests, SGA=second-generation antipsychotic, SOB=shortness of breath, VPA=valproic acid