

Shared care Proforma for the prescribing of Cinacalcet in Primary Hyperparathyroidism

Dear Prescriber..... (Patient' s GP)

Patients Name: **DOB:** **NHS No.**

Address:

Your patient has been started on treatment with **Cinacalcet.**

dose..... **route**..... **Date initiated by specialist**.....

This treatment can be prescribed by primary care prescribers under the Traffic Light System under the “shared care” arrangements. This shared care guideline has been approved by the Doncaster and Bassetlaw Area Prescribing Committee and Doncaster Medicines Optimisation Group.

Ongoing monitoring requirements to be undertaken by primary care.

See [section 10](#) of the SCP document for further guidance on management of adverse effects/responding to monitoring results.

Monitoring	Frequency
Serum bone profile, renal function, serum magnesium, PTH and vitamin D	Every 6 months (unstable patients may need more frequent monitoring which will be directed by the specialist)
Bone DEXA scan (where appropriate; not appropriate in age >84 years)	Every 3 years (every 2 years in osteopenia)
Renal US scan	If symptomatic of renal stone

Please acknowledge you are happy to take on shared care by completing and returning the slip below to above address or by secure email to the specialist named on this letter.

Do not hesitate to contact us if you have any concerns.

Contacts for Support, education, and information

DBTH Consultant Endocrinologists can be contacted via dbth.diabsec@nhs.net or via telephone on 01302 642608 (DRI) or 01909 572711 (BDGH)

Clinician's Name.....**Clinician's Title**

Hospital / Dept

Please complete and return to specialist – tick a box to indicate agreement / disagreement,

I AGREE to take on shared care of this patient .

I DO NOT AGREE to take on shared care of this patient .

Signed by GP

Print name

Practice.....Date.....

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