Fact sheet

Central Adelaide Gastroenterology and Hepatology Services

Clinical Information Sheet

Chronically Deranged LFTs	Clinical Presentation/syndrome
Eligibility	Those with abnormal liver functions of uncertain aetiology and of > 3 month duration
Priority and how to access services	 Urgent referral should be considered in these patients About to undergo immunosuppression for autoimmune disorders Those about to undergo chemotherapy Pregnancy Recent potential exposure to blood borne virus Marked change of LFT test from baseline or > 5x upper limit of normal Synthetic liver dysfunction suggestive of cirrhosis Persistent/ refractory symptoms of liver failure (Ascites/encephalopathy/ jaundice) Suspicion of hepatocellular carcinoma Recent GI bleed
Information required with referral	 Alcohol history (past and present) BMI Past medical history and Medication list (past and present) Family history Previous blood tests to assess trend and duration of liver function derangement
Investigations required with referral	CBE, LFTs, INR Alpha-fetoprotein Hepatitis serology (HBV S Ag, HCV A/B) Ceruloplasmin/ A1 Antitrypsin/ Iron studies/ ANA/ Total IgG level/ Fasting lipids and BSL Liver/biliary tree ultrasound (within 6 months)

For more information

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