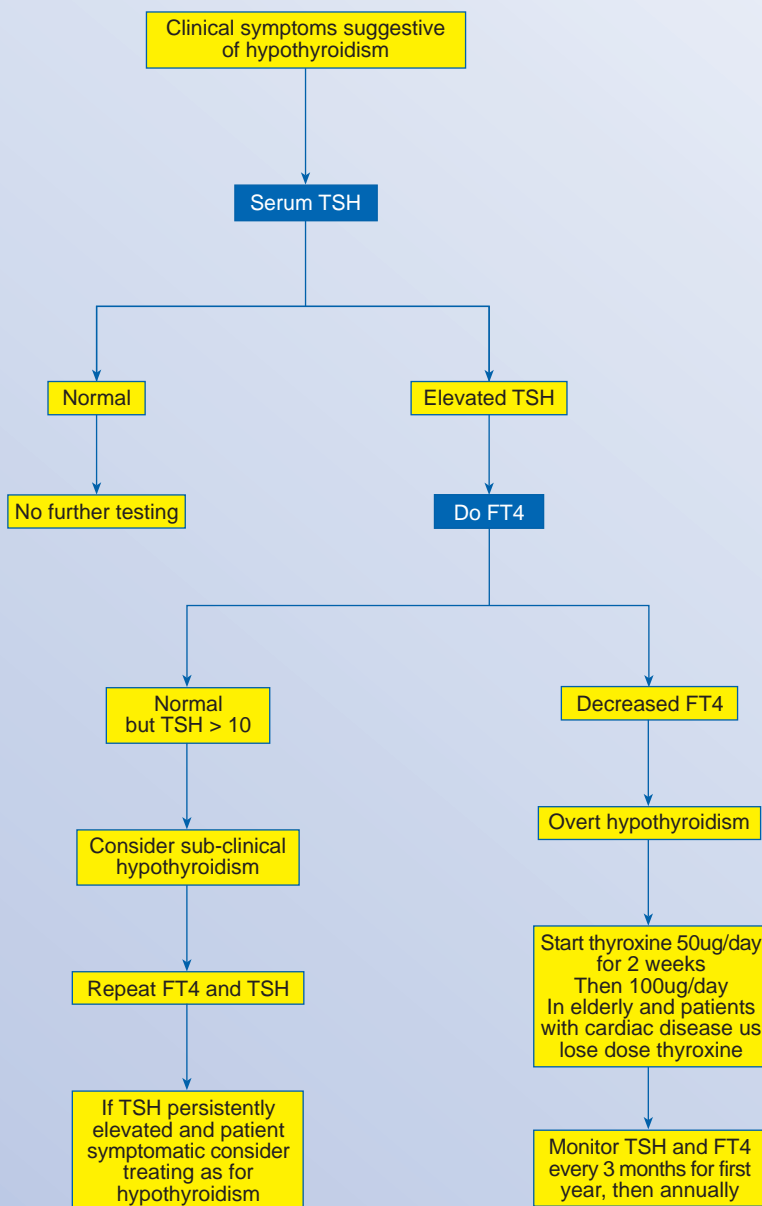


## HYPOTHYROIDISM



### Chronic disease list algorithms

The new Medical Schemes Act requires that chronic diseases be diagnosed and managed according to the prescribed therapeutic algorithms for the condition, published by the Minister of Health.

Algorithms for the 25 conditions on the chronic disease list are available at <http://www.medicalschemes.com>.

This algorithm is reproduced with the kind permission of the Council for Medical Schemes.

### Glossary

- TSH – Thyroid stimulating hormone
- FT4 – Free thyroxine

### Applicable ICD 10 Coding:

- E01.8 Other iodine-deficiency-related thyroid disorders and allied conditions
- E02 Subclinical iodine-deficiency hypothyroidism
- E03 Other hypothyroidism
- E03.0 Congenital hypothyroidism with diffuse goitre
- E03.1 Congenital hypothyroidism without goitre
- E03.2 Hypothyroidism due to medicaments and other exogenous substances
- E03.3 Postinfectious hypothyroidism
- E03.4 Atrophy of thyroid (acquired)
- E03.5 Myxoedema coma
- E03.8 Other specified hypothyroidism
- E03.9 Hypothyroidism, unspecified
- E89.0 Postprocedural hypothyroidism

### Note:

1. Medical management reasonably necessary for the delivery of treatment described in this algorithm is included within this benefit, subject to the application of managed health care interventions by the relevant medical scheme.
2. To the extent that a medical scheme applies managed health care intervention in respect of this benefit, for example clinical protocols for diagnostic procedures or medical management, such interventions must –
  - a. not be inconsistent with this algorithm
  - b. be developed on the basis of evidence-based medicine, taking into account considerations of cost-effectiveness and affordability; and
  - c. comply with all other applicable regulations made in terms of the Medical Schemes Act, 131 of 1998.
3. This algorithm may not necessarily always be clinically appropriate for the treatment of children. If this is the case, alternative paediatric clinical management is included within this benefit if it is supported by evidence-based medicine, taking into account considerations of cost-effectiveness and affordability.