

Endocrinology Cheat Sheet by swadmasud via cheatography.com/212185/cs/46091/

Endocrinology is understood based on feedback loops

Example: Hypothalamus \rightarrow Pituitary \rightarrow Target Gland \rightarrow Hormone \rightarrow Feedback

Systems Review History				
Thyroid	Diabetes	Adrenal	Pituitary	Past History
Weight loss/gain	Polyuria, polydipsia	Fatigue, dizziness	Headache, vision	Endocrine/autoimmune disorders
Heat/cold intolerance	Fatigue	Pigmentation	Libido/fertility	Surgeries, radiation
Palpitations, tremor	Infections	Nausea, salt craving	Galactorrhea	
Neck swelling	Neuropathy, vision		Growth changes	
Hair/skin/mood changes				

Systems Review Physical							
General Inspection	Vitals	Hands/Arms	Face & Neck	Chest	Abdomen	Legs	Neuro
Body habitus	BP (± orthostatic)	Tremor	Eye signs (lid lag, exopht- halmos)	Gyneco- mastia	Central obesity	Myopathy	Visual fields
Skin/hair/voice	HR	Palmar erythema	Eye signs (lid lag, exopht- halmos)	Hair distri- bution	Striae	Reflexes	CN exam (pituitary)
Scars, pigmentation, striae	Blood glucose	Myopathy	Thyroid: inspect, palpate, auscultate		Masses	Neuropathy	/
	Temp	Reflexes				Edema	
		Skin changes					

The Five Systems and Their Common Disorders		
Thyroid	Hypo-/Hyperthyroidism, Nodules, Goiter, Thyroiditis	
Adrenal	Addison's, Cushing's, Conn's (Hyperaldosteronism), Pheochromocytoma	
Pituitary	Prolactinoma, Acromegaly, Hypopituitarism, Diabetes Insipidus	
Pancreas	Diabetes Mellitus (Type 1 & 2), Hypoglycemia	
Gonadal	PCOS, Hypogonadism, Menstrual disorders	

Key Symptoms	
□ Нуро	☐ Hyper
Weight Gain	Weight Loss
Fatigue	Sweating/Palpitations
Cold Intolerance	Anxiety, Tremors
Constipation	Diarrhea
Depression	Heat Intolerance
Amenorrhea	Irregular Periods

Symptom-Based Differentials		
Symptom	Possible Differential	
Weight loss	Hyperthyroid, diabetes, Addison's, cancer	
Weight gain	Hypothyroid, Cushing's, insulin therapy	
Amenorrhea	PCOS, prolactinoma, hypothalamic causes	
Polyuria/pol- ydipsia	Diabetes mellitus, diabetes insipidus, hypercalcemia	
Fatigue	Hypothyroid, Addison's, diabetes, anemia	

Considerations		
Hormone excess/deficiency		
Primary/secondary gland problem		
Mass effects (compression, vision)		
Systemic effects (metabolic, menstrual, growth)		
Timeline (acute, chronic, fluctuating		

Labs	
Lab	Indication
TSH + Free T4	Thyroid function (hypo/hyper)
Cortisol ± ACTH	Adrenal function (Addison's/Cushing's)
OGTT + HbA1c	Glucose tolerance & diabetes control
Prolactin	Pituitary tumors, galactorrhea, amenorrhea
PTH + Calcium	Hyper-/Hypoparathyroidism
LH/FSH + Sex hormones	Gonadal axis function
Insulin/C-peptide	Differentiating type 1/2 diabetes, insulinomas

Common Syndromes		
Syndrome	Key Features	
Cushing's	Central obesity, moon face, purple striae, HTN, glucose intolerance	
Addison's	Hyperpigmentation, fatigue, hypotension, salt craving, weight loss	
Graves'	Hyperthyroid + eye signs (exophthalmos, lid lag), diffuse goiter	
Hypoth- yroid	Cold intolerance, dry skin, weight gain, fatigue, slow reflexes	
Acromegaly	Enlarged hands/feet, coarse features, diabetes, spacing of teeth	
Prolac- tinoma	Galactorrhea, amenorrhea, reduced libido, visual changes	



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Common Syndromes (cont)

PCOS Irregular menses, hirsutism, acne, insulin resistance,

Clinical Skills

Glucose (pin prick)

Visual field via confrontation

Thyroid exam (palpate, swallow, auscultate)

Visual signs (Cushingoid features, tremor, myxedema)

Diabetic foot exam (vibration, pinprick, monofilament)



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