

**Michigan**  
**General Procedures**  
**ADRENAL CRISIS**

Date: May 31, 2012

Page 1 of 1

### ***Adrenal Crisis***

Purpose: This protocol is intended for the management of patients with a known history of adrenal insufficiency, experiencing signs of crisis, and where the medication is readily available.

#### **Indications:**

1. Patient has a known history of adrenal insufficiency or Addison's disease.
2. Presents with signs and symptoms of adrenal crisis including:
  - a. Pallor, headache, weakness, dizziness, nausea and vomiting, hypotension, hypoglycemia, heart failure, decreased mental status, or abdominal pain.
3. Medication is available.

#### **Pre-Medical Control**

##### **PARAMEDIC**

1. Follow **General Pre-hospital Care Protocol**.

#### **Post-Medical Control**

2. Administer fluid bolus NS.
3. Assist with administration of patient's own hydrocortisone sodium succinate (Solu-Cortef)
  - a. Adult: 100 mg IVP
  - b. Pediatric: <5 ft. tall (<35kg/75lbs) 1-2 mg/kg IVP
4. Transport
5. Notify Medical Control of patient's medical history.
6. Refer to **Hypoglycemia Protocol**.

MCA Name Detroit East Medical Control Authority  
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**Section 5-3**