

## DIAGNOSTIC TESTS FOR ADRENAL INSUFFICIENCY

**For Chronic Signs and Symptoms:** hyperpigmentation of exposed and non-exposed parts of the body, extreme weakness, salt craving, unintentional weight loss, loss of appetite, chronic diarrhea, nausea/vomiting Schedule following tests:

- Morning fasting cortisol with plasma ACTH level
- CBC
- Electrolytes
- BUN
- Creatinine
- 21-OH adrenal antibody

## If not conclusive:

ACTH (Cortrosyn) stimulation test

**For Acute Adrenal Failure Signs and Symptoms**: orthostatic hypotension, severe vomiting/diarrhea, severe dehydration, sudden penetrating pain in lower back, abdomen and legs, loss of consciousness. Initiate treatment immediately:

- 1. Start IV, hydrate with isotonic saline solution and draw blood samples for the lab.
- 2. Administer hydrocortisone 100 mg IV bolus. Hydrocortisone will not cause harm to the body if given unnecessarily but can save a life if a person is experiencing an adrenal crisis. Do not delay treatment.
  - a. Low cortisol and high ACTH are enough to make a preliminary diagnosis.
  - b. Low serum sodium and glucose and high potassium are usually present during crisis.

If preliminary diagnosis is confirmed, continue hydrocortisone 200 mg over 24 hours, with either continuous IV infusion, or with 50 mg boluses IV, IM or SC every 6-8 hours until oral medication is tolerated

The National Adrenal Diseases Foundation

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