Initial Date: 05/31/2012
Revised Date: 05/08/2023 Section 1-7

Adrenal Crisis

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

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.

Treatment:

1. Follow **General Pre-hospital Care-Treatment Protocol.**
2. Pediatric patients (≤ 14 years of age) utilize MI MEDIC cards for appropriate medication dosage. When unavailable utilize pediatric dosing listed within protocol.

Contact Medical Control for all adrenal crisis patients prior to treatment**:**

1. Administer fluid bolus **NS** or **LR** IV/IO (refer to **Vascular Access and IV Fluid Therapy-Procedure Protocol**)
    a. Adults: up to 1 liter.
    b. Pediatrics: up to 20 ml/kg
2. Assist with administration of patient's own hydrocortisone sodium succinate (Solu-Cortef)
    a. Adult: 100 mg IV/IM
    b. Pediatric: 1-2 mg/kg IV/IM
3. If patient does not have their own hydrocortisone, administer **prednisone** tablet 50 mg PO to adults and children > 6 years of age (if available per MCA selection)

Additional Medication Option:

Prednisone 50 mg tablet PO
(Adults and Children > 6 y/o)

    a. If **prednisone** is not available, patient is ≤ 6 years of age, or patient is unable to receive medication PO, administer **methylprednisolone** IV/IO/IM:
        i. Adults: 125 mg
        ii. Pediatrics: 2mg/kg (max 125 mg)
4. Transport
5. Notify Medical Control of patient's medical history.
6. Refer to Adult or Pediatric **Altered Mental Status-Treatment Protocol.**

Medication Protocols
Methylprednisolone
Prednisone