

HEMS
General Procedures
ADRENAL CRISIS

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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: 1-2 mg/kg IVP up to 100mg
4. If Patient's own hydrocortisone sodium succinate (Solu-Cortef) is not available, administer Methylprednisolone
 - a. Adult: 125 mg IV
 - b. Pediatric: 2 mg/kg IV/IO, (maximum dose 125 mg) {Refer to MI-MEDIC Cards}
5. Transport
6. Notify Medical Control of patient's medical history.
7. Refer to **Hypoglycemia Protocol**.