



Date:

Re: _____

Date of Birth _____

To Whom it May Concern:

_____, date of birth _____ is a patient followed by the Pediatric Endocrinology Clinic at Lucile Packard Children's Hospital. He/She has adrenal insufficiency due to _____. Adrenal insufficiency can be a life-threatening condition if not treated appropriately. He/She is dependent on steroids and takes hydrocortisone on a daily basis.

_____ must be seen by a physician **IMMEDIATELY** because life threatening electrolyte disturbances/adrenal crisis are highly possible with febrile illnesses, fluid depletion from vomiting and diarrhea, surgery and serious injuries/broken bones. Time in the waiting area or triage situation is not appropriate.

Treatment should include:

-STAT basic metabolic panel

-Initial Solu-Cortef IV bolus (can be administered IM if IV access not possible):

- 25 mg for children under 3 years of age

-50 mg for children 3-10 years of age

-100mg for children older than 10 years of age

-Solu-Cortef in 4 divided doses 6 hours apart

-50mg/day for 0-3 years of age

-75mg/day for 3-10 years of age

-100mg/day for children greater than 10 years of age

_____ 's stress dose of hydrocortisone is at least _____ mg hydrocortisone by mouth or IV every 6 hours for a minimum of 24 hours.

Please contact his/her Pediatric Endocrinologist on-call at Lucile Packard @ 650-479-8000 as soon as possible for any questions or concerns.

Sincerely,

Pediatric Endocrinology at Lucile Packard Children's Hospital