

## Supporting safe use of adrenal crisis emergency management kits

Adrenal insufficiency can lead to adrenal crisis if not identified and treated. This is a medical emergency. To prevent delayed treatment, patients should have access to two adrenal crisis emergency management kits. This allows hydrocortisone to be administered via an intramuscular injection in the community and for the patient to have backup supplies if required. This document has been produced by the medicine's optimisation team in conjunction with Esther Burrows and Gina Twine, Endocrine Specialist Nurses from RCHT and UHP respectively, to clarify the supply of these kits.

### Initial supply and education for RCHT and UHP patients

Newly diagnosed patients will be seen by the specialist endocrine nurse via secondary care. They will be provided with comprehensive education and an initial supply of the components for two emergency management kits.

### Kit components and ongoing route for supply

**Each patient will require TWO kits.**

- Hydrocortisone injection (see section below)– to be prescribed by the GP surgery.
- Water for injections – to be supplied by GP surgery
- Blue 23g (IM) needles x 2 - to be supplied by the GP surgery.
- Patients with a high body fat mass may request green 21g needles.
- 2mL syringes x 2 – to be supplied by the GP surgery.
- Written instructions and training videos for patients on preparation, administration, and safe disposal of syringes and needles are available from the [Addison's Disease website](#).
- Steroid emergency cards – These can be [downloaded as a PDF](#) and printed and/or saved as a lock screen on mobile devices. Patients can obtain a physical card from a community pharmacy, from their GP surgery, or from the hospital team at their next routine appointment.
- 1L Sharps bin – to be prescribed by the GP surgery.

### Further components for children and ongoing route for supply

- [Glucose gel](#) (only for people under 16 years old) – to be prescribed by the GP surgery.
- An orange needle and 1mL syringe (only for babies under 1 year old) – to be supplied by the GP surgery
- [Great Ormond Street Hospital](#) have produced specific leaflets for paediatric patients.

## Hydrocortisone injection

- Hydrocortisone sodium succinate 100mg powder for solution for injection (requires reconstitution with at least 2ml of water for injection before administration).

Water for injection is required for reconstitution if hydrocortisone sodium succinate powder is supplied. Reconstitution adds an additional step for the user. Some formulations of hydrocortisone sodium succinate include the diluent in the pack, while others require the additional supply of diluent.

Patients may request an additional needle to use for reconstitution; a suitable option is a 18g 36mm blunt fill needle. However, it is acceptable to use the needle provided in the kit for reconstitution and administration, as per the [SPC](#).

Following notification of the [discontinuation](#) of hydrocortisone sodium phosphate in February 2026, there is now only one formulation of hydrocortisone available to prescribe for use in an emergency. Patients currently prescribed the discontinued preparation will need to be counselled on the difference between the administration techniques and provided with hydrocortisone sodium succinate when their current supply is exhausted.

## Ordering via PCSE

General practice can order needles, syringes, and steroid cards free of charge from [PCSE](#).

## Further resources

- [Addison's Disease Self-Help Group](#)
- [Adrenal crisis | Society for Endocrinology](#)
- [Supporting safe use of adrenal crisis emergency management kits – SPS - Specialist Pharmacy Service – The first stop for professional medicines advice](#)
- [Adrenal insufficiency | Treatment summaries | BNF | NICE](#)
- [Overview | Adrenal insufficiency: identification and management | Guidance | NICE](#)

## Local contact details

Hospital	Contact details
Royal Cornwall Hospital	<ul style="list-style-type: none"> <li>• Endocrinologist on-call (weekdays 9am-5pm / weekends 9am – 1pm): 01872 250000 (switch board)</li> <li>• On-call medical team out of hours: 01872 250000 (switch board)</li> <li>• Endocrinology clinical nurse specialist (routine queries only): <a href="mailto:rcht.endocrinenurses@nhs.net">rcht.endocrinenurses@nhs.net</a></li> </ul>
University Hospital Plymouth	<ul style="list-style-type: none"> <li>• Endocrinologist on call (weekdays 9am-5pm / Weekends 9am – 1pm): 01752 202082 bleep 81444</li> <li>• On-call medical team out of hours: (switch board) 01752 202082</li> <li>• Endocrinology clinical nurse specialist (routine queries only): 01752 439812. <a href="mailto:Gina.twine@nhs.net">Gina.twine@nhs.net</a> <a href="mailto:leann.sherlock@nhs.net">leann.sherlock@nhs.net</a>.</li> </ul>

## Version control

Version number	Revision date	Revision by	Nature of revisions
1.0	June 2025	Stacie Tregonning	First edition
1.1	April 2026	Medicines Optimisation Team	Removed Hydrocortisone sodium phosphate injection following discontinuation notification