|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | |  | | --- | |  | |  | |  | |  | |  | | NAW | | |  | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Datum |  | Ons kenmerk |  | Pagina |  | | | |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  |  |  | 1 van 1 |  | | | |  | | --- | | Naam Medisch Centrum | | x | | x | |  | | Adresgegevens | | x | | x | | x | | T x | | F x | |  | | Afdelingshoofd | |  | |  | |  | |  | | | |
| Onderwerp | |
| Naam, geb. datum, gesl. vrouw, reg.nr. , BSN | |
| Adres incl postcode, telefoon | |
|  | |
| Dear Sir / Madam, |
|  |
| This patient is treated with glucocorticoids because of adrenal insufficiency.  This patient is travelling with needles and syringes needed for emergency treatment with glucocorticoids.  Current medication:  Tablets: *including hydrocortisone and fludrocortisone.*  Injections: *Hydrocortisone solucortef act-o-vial 100 mg i.m.*  For further information see medication review.  In case of fever or significant physical or emotional stress the dose of glucocorticoids needs to be increased.  In case of unconsciousness, vomiting or severe diarrhoea, please administer a glucocorticoid, e.g. 100 mg hydrocortisone, 25 mg Diadreson-F or 2,5 mg dexamethasone intramuscularly or intravenously, and send the patient to the emergency room of a hospital.  Please feel free to contact our department for more information at +31 telefoonnummer (office hours) or +31 telefoonnummer (outside office hours). |
|  |
| Sincerely yours, |
|  |
|  |
|  |
| |  |  | | --- | --- | | Xxx, endocrine nurse specialist |  | |