



**PRESCRIBER'S ORDERS  
FOR ENDOCRINE TESTS FOR  
MEDICAL INVESTIGATION FACILITY  
INPATIENT AND OUTPATIENT**

DATE    /   /     
DD MM YYYY

TIME:    :    HOURS  
HH MM

WEIGHT        kilograms

HEIGHT        centimetres

ALLERGY CAUTION sheet reviewed

Pharmacy  
Use Only

WRITE FIRMLY WITH A BALLPOINT PEN WITH BLUE OR BLACK INK

Noted by  
RN/UC

Body Surface Area:        m<sup>2</sup> ( $\sqrt{H \times W/3600}$ )

NPO from \_\_\_\_\_

Start intravenous 0.9% saline at rate to maintain cannula patency, maximum 30 mL/hour. May give maximum two 10 mL/kilogram boluses of 0.9% saline over 20 minutes PRN for poor blood return or hypotension.

**1. Growth Hormone Stimulation Tests** (send for GH): also  cortisol w/ glucagon  
patient  not primed  pre-treated with micronized 17 $\beta$ -estradiol (Estrace®)        milligrams orally at bedtime for 2 doses (2 milligrams/dose for  $\geq$ 20 kg, 1 milligram/dose for <20 kg body weight)

arginine hydrochloride        grams intravenously over 30 minutes  
(0.5 grams/kilogram, maximum 22.5 grams)

clonidine        milligrams orally (0.15 milligrams/m<sup>2</sup> body-surface area, max 0.25 milligrams)

glucagon        milligrams intramuscularly (0.03 milligrams/kilogram, maximum 1 milligram)

Arginine extravasation: Page attending endocrinologist STAT. Order a 1500-unit vial of hyaluronidase to MIF STAT. Initiate the C&W Policy & Procedure *Prevention and Management of Infiltration and Extravasation - Guidelines for Antidote Administration*.

**2. GnRH Stimulation Test** (send for LH/FSH):  baseline  testosterone  estradiol  
 4-hour  testosterone  estradiol  
 gonadorelin (GnRH) 100 micrograms intravenous bolus

leuprolide acetate (Lupron Depot®)        milligrams intramuscularly after GnRH test

**3. ACTH Stimulation Tests** (send for cortisol): also  17-OHP  11-deoxycortisol

low-dose: cosyntropin 1 microgram intravenous bolus (or intramuscular if no venous access)

high-dose: cosyntropin 250 micrograms intravenous bolus (or intramuscular if no venous access)

also check \_\_\_\_\_

**4. Oral Glucose Tolerance Tests, 2-hour** (send for glucose):

diabetes testing: glucose        grams orally over 10 minutes also  insulin  C-peptide  
(1.75 grams/kilogram, max 75 grams)

GH suppression: glucose        grams (2.35 grams/kilogram, max 100 grams)  GH

**5. Intravenous Glucose Tolerance Test** (send for glucose, insulin): also  C-peptide

glucose        grams intravenous bolus over 3 minutes (0.05 grams/kilogram, max 35 grams)

**6.  Ondansetron**        milligrams orally PRN nausea/vomiting (0.2 milligrams/kilogram, max 8 mg)

**7. Other baseline bloodwork, tests or medications:** \_\_\_\_\_

Print Name: \_\_\_\_\_ Pager #: \_\_\_\_\_

Signature: \_\_\_\_\_ College ID#: \_\_\_\_\_