

# Dexamethasone Suppression Test (DST) Protocol

## Patient Information

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sex: \_\_\_\_\_

Medical History: \_\_\_\_\_

Current Medications: \_\_\_\_\_

Allergies: \_\_\_\_\_

## Indication for DST

- Rule out Cushing's syndrome
- Investigate adrenal function
- Other (please specify): \_\_\_\_\_

## Pre-Test Instructions

1. Dexamethasone Dosage:

\_\_\_\_\_

2. Baseline Cortisol Measurement:

\_\_\_\_\_

## Instructions for Patient

Fasting Requirements:

\_\_\_\_\_

Activity Restrictions:

\_\_\_\_\_

Record Any Disruptions:

\_\_\_\_\_

## Sample Collection:

1. Baseline Cortisol: Collected blood for baseline cortisol measurement at \_\_\_\_\_ on the following day.
2. Post-Dexamethasone Cortisol: Collected blood for post-dexamethasone cortisol measurement at \_\_\_\_\_ on the following day.

## Interpretation of Results

**Normal suppression:** Cortisol levels should be significantly lower in the post-dexamethasone sample compared to baseline.

**Lack of suppression:** Elevated cortisol levels post-dexamethasone may indicate adrenal dysfunction or Cushing's syndrome.

### Interpretation Notes

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### Reporting:

**Results Interpretation:**

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**Clinical Implications:**

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### Follow-Up

### Notes