ELEVATED 17-OHP
CONGENITAL ADRENAL HYPERPLASIA (CAH)

Elevated 17-OHP

Borderline Risk
Clinical suspicion: Low
Repeat newborn screening test
- Normal
  - No further action
  - Borderline or High
     - Follow actions for high risk elevation
- Normal
  - No further action

High Risk
Clinical suspicion: High
Serum 17-OHP, Lytes, glucose
- Normal
  - No further action
- Moderately high 17-OHP, normal Lytes, glucose
  - Confirmatory tests for 21-OHD; ACTH stim, steroid profile, genotype
    - Normal
      - No further action
    - Non-classic 21-OHD
      - Discretionary treatment
    - Classic 21-OHD
      - Replacement therapy
    - Severely high 17-OHP, Low Na, High K, Low glucose
      - Replacement therapy
    - Other enzyme detect
      - Replacement therapy

Action steps are shown in gold (shaded) boxes; results are in plain boxes.

**Abbreviations/Key**
- 17-OHP = 17-hydroxyprogesterone
- Lytes = Serum electrolytes
- ACTH stim = Adrenocorticotropic hormone stimulation test
- 21-OHD = 21-hydroxylase deficiency
- Steroid profile = Complete adrenal cortical hormone profile, e.g. by MS/MS
- Discretionary treatment = Consult pediatric endocrinologist to determine if hydrocortisone therapy is necessary

**DISCLAIMER:** These algorithms and guidelines were adapted from the American College of Medical Genetics algorithm sheets. They are designed primarily as an educational resource for physicians to help them provide quality medical services. Adherence to these standards and guidelines does not necessarily ensure a successful medical outcome. These standards and guidelines should not be considered inclusive of all proper procedures and tests or exclusive of other procedures and tests that are reasonable directed to obtaining the same results. In determining the propriety of any specific procedure or test, the healthcare provider should apply his or her own professional judgment to the specific clinical circumstances presented by the individual patient or specimen. It may be prudent, however, to document in the patient’s record the rationale for any significant deviation from these standards and guidelines.