

# Adrenal Hyperfunction (Cushing Syndrome) Testing

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**INDICATIONS FOR TESTING**

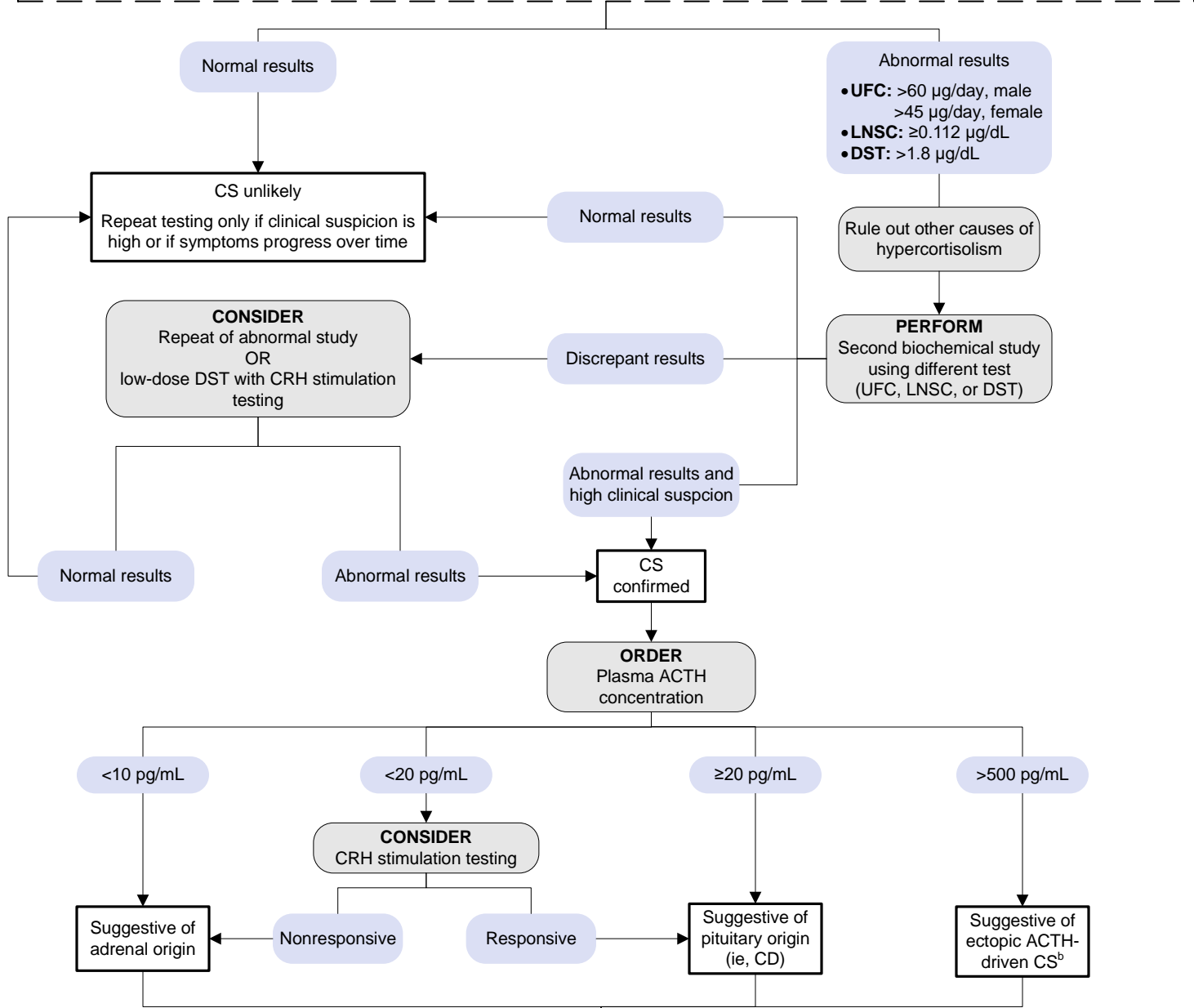
- Multiple features of Cushing syndrome (after ruling out exogenous glucocorticoid use)
- Presence of adrenal incidentaloma

Select one of the following biochemical tests<sup>a</sup>:

**PERFORM**  
24-hr urinary free cortisol test

**PERFORM**  
Late-night salivary cortisol test

**PERFORM**  
Dexamethasone suppression testing



<sup>a</sup>For details on test protocol, see ARUP Consult [Adrenal Hyperfunction - Cushing Syndrome](#) topic.  
<sup>b</sup>May consider high-dose DST to differentiate between ectopic ACTH-driven CS and CD; cortisol suppression of >50% is suggestive of pituitary origin.

- Nieman LK, Findling JW, Newell-Price J, et al. The diagnosis of Cushing's syndrome: an Endocrine Society clinical practice guideline. *J Clin Endocrinol Metab.* 2008;93(50):1526-1540.
- Pappachan JM, Hariman C, Edavalath M, et al. Cushing's syndrome: a practical approach to diagnosis and differential diagnoses. *J Clin Pathol.* 2017;70(4):350-359.

**Abbreviations**

ACTH	Adrenocorticotropic hormone
AVS	Adrenal venous sampling
BIPPS	Bilateral inferior petrosal sinus sampling
CD	Cushing disease
CRH	Corticotropin-releasing hormone
CS	Cushing syndrome
DST	Dexamethasone suppression testing
LNSC	Late-night salivary cortisol
UFC	Urinary free cortisol