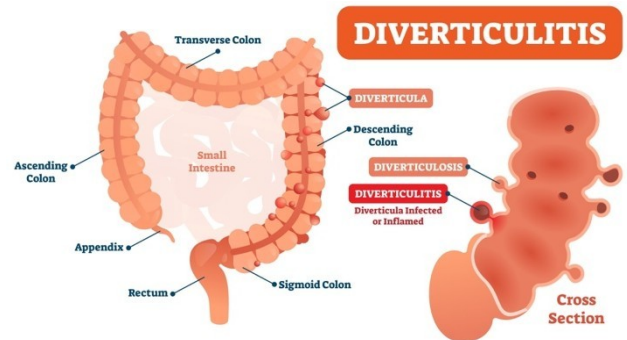


Week 2 Case Study: Lower GI

Required Resources

Read/review the following resources for this activity:

- 📖 Textbook
- 📖 Weekly Concepts
- 📖 Minimum of 1 scholarly source



Scenario/Summary

History:

Mr. D is a 60 yr. old with fever, abdominal pain, decreased appetite, and nausea for the past 24 hrs. There are no new foods in his diet, and he has not been travelling or eating out. He had a screening colonoscopy 5 years ago that showed diverticula in his colon, but he never had any problem with them.

Physical: Mr. D appears tired and in pain. Exam is significant for abdominal tenderness to touch.

Labs/Tests:

White blood count is elevated on CBC

Amylase, lipase and liver function tests are normal

Abdominal CT scan shows diverticulitis

Assessment/Plan:

Diverticulitis- this occurs when diverticula (thin areas in the wall of the intestine that form "outpocketing") become inflamed. Risk factors include a low fiber diet and constipation. Treatment for diverticulitis includes avoiding solid foods, hydration, and antibiotics.

Deliverables

Answer the following questions and save your responses in a Microsoft Word document. Provide a scholarly resource in APA format to support your answers.

1. Provide a detailed description of the path of chyme, and later feces, from the duodenum to the anus, identifying the different portions of the small and large intestines.

To move into the small intestine, chyme must pass through the pyloric sphincter. From here it enters the duodenum, the first part of the small intestine. The liver mixes in bile, which helps break down fats in the food. The pancreas also secretes digestive enzymes that aid in digestion. Most of the nutrients are absorbed from the small intestine and moved into the blood stream via a system