

Performance Overview for Katlyn Bolf on case Jose Gonzalez



The following table summarizes your performance on each section of the case, whether you completed that section or not.

Time spent: 2hr 59min 29sec

Status: Submitted

Case Section	Status	Your Score	Time spent	Performance Details
Total Score		82%		
History	Done	84%	27min 22sec	120 questions asked, 31 correct, 6 missed relative to the case's list
Physical exams	Done	78%	23min 43sec	42 exams performed, 11 correct, 2 partially correct, 2 missed relative to the case's list
Key findings organization	Done		29sec	13 findings listed; 10 listed by the case
Problem statement	Done		2min 53sec	45 words long; the case's was 53 words
Diagnosis	Done	100%	24sec	
Management plan	Done		1hr 3min 11sec	225 words long; the case's was 259 words
Exercises	Done	29% (of scored items only)	22min 17sec	4 of 14 correct (of scored items only)

Attempt: 2653574

Report generated on 2/12/2023, 10:21:02 AM America/Denver

History Notecard by Katlyn Bolf on case Jose Gonzalez



Use this worksheet to organize your thoughts before developing a differential diagnosis list.

1. Indicate key symptoms (**Sx**) you have identified from the history. Start with the patient's reason(s) for the encounter and add additional symptoms obtained from further questioning.
2. Characterize the attributes of each symptom using "**OLD CARTS**". Capture the details in the appropriate column and row.
3. Review your findings and consider possible diagnoses that may correlate with these symptoms. (Remember to consider the patient's age and risk factors.) Use your ideas to help guide your physical examination in the next section of the case.

HPI	Sx = diarrhea	Sx = headache	Sx = dry mouth	Sx = abdominal pain	Sx = fatigue
Onset	sudden	sudden		sudden	sudden
Location	rectum	head	mouth	mid abdomen	general
Duration	3 days	3 days		3 days	3 days
Characteristics	bloody	like a headache	like cotton	sore and crampy	wipe out
Aggravating	denies	denies		denies	denies
Relieving	denies	denies		denies	denies
Timing / Treatments	kaopectate	denies		denies	denies
Severity	severe	mild		4 at rest, 7-8 before BM	moderate

Problem Statement by Katlyn Bolf on case Jose Gonzalez



This 42-year-old male patient presents with diarrhea for 3 days and associated abdominal pain, blood in stool, mild nausea, chills, dry mouth, headache, and lightheadedness. The physical exam is notable for a fever of 101.5, tachycardia of 104 bpm, orthostatic hypotension, and reduced skin turgor.

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Management Plan by Katlyn Bolf on case Jose Gonzalez



Diagnostic Tests:

Multiplex PCR and stool culture with clostridial toxin assay (Iqbal & DuPont, 2020).

Complete blood count with differential and basic metabolic panel (Meisenheimer et al., 2022).

Pharmacologic Care:

Stop taking kapectate (Meisenheimer et al., 2022).

Start taking ciprofloxacin 500 mg oral tablets every 12 hours for 72 hours. 6 tablets prescribed for 3 days of treatment (Prescribers' Digital Reference, 2023).

Patient Education:

Rehydrate with noncaffeinated and nonalcoholic beverages (Iqbal & DuPont, 2020).

Consume broths and soups (Iqbal & DuPont, 2020).

Reintroduce solid foods as tolerated (Meisenheimer et al., 2022).

Oral rehydration solutions at home can be made with 32 oz Gatorade and 3/4 teaspoon of salt, or 1 quart of water with 1/4 teaspoon of salt and 2 tablespoons of sugar (Meisenheimer et al., 2022).

Adequate handwashing with soap and water for 20 seconds before meals (Meisenheimer et al., 2022).

Follow Up:

No external referrals needed at this time (Iqbal & DuPont, 2020).

Follow up if symptoms worsen or do not resolve within 72 hours (Meisenheimer et al., 2022).

References:

Iqbal, T., & DuPont, H. L. (2020). Approach to the patient with infectious colitis: Clinical features, work-up and treatment. *Current Opinion in Gastroenterology*, 37(1), 66-75. <https://doi.org/10.1097/mog.0000000000000693>

Meisenheimer, E. S., Epstein, C., & Thiel, D. (2022). Acute diarrhea in adults. *American Family Physician*, 106(1), 72-80. <https://www.aafp.org/pubs/afp/issues/2022/0700/acute-diarrhea.html>

Prescribers' Digital Reference. (2023). Ciprofloxacin tablets. <https://www.pdr.net/drug-summary/Ciprofloxacin-Tablets-ciprofloxacin-3144.8265>

Electronic Health Record by Katlyn Bolf on case Jose Gonzalez



History of Present Illness

Category	Data entered by Katlyn Bolf
Reason for Encounter	Diarrhea
History of present illness	Patient traveled to Chicago and on return has had diarrhea, fatigue, lightheadedness, headache, and dry mouth for 3 days. Patient denies any aggravating or relieving factors for associated symptoms. Patient is taking kaopectate to manage the diarrhea.

Past Medical History

Category	Data entered by Katlyn Bolf
Past Medical History	No changes in patient medical history since last exam.
Hospitalizations / Surgeries	No changes in patient surgical history since last exam.

Medications

Category	Data entered by Katlyn Bolf
Medications	Patient is taking OTC Kaopectate for diarrhea.

Allergies

Category	Data entered by Katlyn Bolf
Allergies	NKDA

Preventive Health

Category	Data entered by Katlyn Bolf
Preventive health	No changes in immunizations since last exam.

Family History

Category	Data entered by Katlyn Bolf
Family History	No changes in family history since last exam. Paternal: father has hypertension.

Social History

Category	Data entered by Katlyn Bolf
Social History	Patient recently traveled to Chicago for a business trip and ate rare steak and burger. Alcohol: 3-4 glasses of wine/week. Denies recreational drug use.

Review of Systems

Category	Data entered by Katlyn Bolf
General	Patient reports fatigue.
Integumentary / Breast	Patient denies any rashes or skin issues.
HEENT / Neck	Patient reports mild headache.
Cardiovascular	Patient denies chest pain, pressure, and palpitations.
Respiratory	Patient denies shortness of breath, wheezing, or cough.
Gastrointestinal	Patient reports diarrhea every 2 hours. Patient reports streaks of blood in diarrhea. Patient reports mild nausea, denies emesis.
Genitourinary	Patient denies urgency, hesitancy, burning, or painful urination.
Musculoskeletal	Patient reports mid-abdominal pain which is a constant 4/10 but escalates to 7-8/10 before bowel movements.
Allergic / Immunologic	Patient denies history of allergies.
Endocrine	Omitted.
Hematologic / Lymphatic	Patient denies any issues with bruising or bleeding.
Neurologic	Patient denies tingling, dizziness, weakness, or fainting. Patient reports lightheadedness that worsens with standing. Patient reports feeling unsteady when walking today.
Psychiatric	Patient denies anxiety, depression, or mood changes.

Physical Exams

Category	Data entered by Katlyn Bolf
General	Patient is alert and oriented x4. Patient is febrile 101.5 degrees F.
Skin	Skin is warm and diaphoretic. Mild/moderate reduction in skin turgor.
HEENT / Neck	No enlarged cervical lymph nodes.
Cardiovascular	Blood pressure 112/62 while lying, and 92/50 while standing. Positive orthostatic hypotension. Tachycardia of 104 bpm with regular rhythm and normal strength. Normal capillary refill bilaterally in upper and lower extremities.
Chest / Respiratory	Regular unlabored breathing, 14 respirations per minute. Oxygen saturation 94%. Normal breath sounds.
Abdomen	Normoactive bowel sounds. Palpable spleen tip with inspiration. Liver 12 cm at MCL. No rebound tenderness or guarding. Tenderness throughout abdomen with palpitation. No herniations. Abdomen in symmetrical.
Genitourinary / Rectal	No masses, fissures, or lesions.
Musculoskeletal / Osteopathic Structural Examination	Bilateral strength 5/5. Normal posture and gait.
Neurologic	No signs of involuntary movements.
Psychiatric	Patient is cooperative with exam.
Lymphatic	No enlarged lymph nodes or edema.