1. **Question:** Would you give the HZ vaccine to an older adult patient who has recovered from a herpeszoster ophthalmicus outbreak?

Answer: Yes. HZ vaccine is effective for reducing the risk of herpes zoster ophthalmicus. CDCrecommends a single dose of HZ vaccine for people 60 years and older (Grupping et al.,2017). The vaccine is effective in decreasing morbidity

2. **Question:** What are some of the differential diagnoses of suspected lymphedema? List three.

Answer: Venous disease, lipedema, and adverse reaction to ipsilateral limb surgery

The differential diagnosis for lymphedema include venous disease, lipedema, and adversereaction to ipsilateral limb surgery. The diseases present similar symptoms such asswelling legs, recurrent infections, hardening or thickening of the skin (Park et al., 2017). Diagnosis involves doppler ultrasound and lymphoscintigraphy tests.

3. **Question:** Identify three common causes of lymphedema.

Answer: Cancer, radiation, surgery

Cancer is one of the causes of lymphedema since it can block lymph vessels leading toswelling. Radiation causes scarring and inflammation of the lymph nodes (Grada &Phillips, 2017). Parasites can cause clogging in the lymph nodes causing lymphedema

4. **Question:** Your 82-year-old patient comes in for a routine checkup and mentions that she is worried about a skin lesion on her back. She is concerned that it might be "cancer" because it looks ugly, warty, and is getting bigger over 5 years. You examine it and determine it to be a seborrheic keratosis. What would your differential diagnoses include?



Answer: Malignant melanoma, actinic keratosis, lentigo maligna

The overall differential diagnosis for seborrheic keratosis is broad and should includemalignant melanoma, actinic keratosis, and lentigo maligna. Seborrheic keratosisinvolves a non-cancerous skin growth. It forms a black, light tan, or brown growth(Papageorgiou et al., 2021). The growth occurs on the back, neck, and chest, or head.