Dead & Buried

### Prompt:  
  
"I have a 14-year-old female patient presenting with a range of concerning symptoms that initially appeared to be related to adolescent behavioral issues. The patient has a history of extreme mood swings and reports feelings of detachment from reality, which have been escalating recently. She denies any involvement in substance abuse, but her mother has been administering diazepam, believing they are merely vitamins to help stabilize her moods.   
  
Recently, the patient has shown signs of bruising on her arms, which she initially dismissed as minor injuries. However, she also presents with alarming symptoms like vomiting and loss of sensation in her limbs. During physical examination, the patient is disoriented and mentions feeling as though she has different identities, suggesting possible psychological fragmentation.   
  
Despite the initial impression of typical teenage angst, the team's concern has increased due to the patient's unexpected physical symptoms.   
  
Initial workup included:  
- Blood tests: Showed HCG levels significantly elevated despite negative pregnancy tests.  
- MRI Scan: Indicated no tumors or anatomical abnormalities.  
  
Given these findings and her complex presentation, what differential diagnoses should be considered, and what further testing would you recommend to clarify the underlying cause of her symptoms?"  
  
### Expected LLM Response:  
  
"In this case, the 14-year-old female patient presents with a confusing combination of psychological and physical symptoms, which raises several differential diagnoses.  
  
Differential Diagnoses:  
  
1. \*\*Choriocarcinoma\*\*: Although very rare in adolescents who are not pregnant, elevated HCG levels can be indicative of this type of cancer, which may not show on standard ultrasounds and could explain the physical symptoms including bruising and potential bleeding.  
  
2. \*\*Dissociative Identity Disorder (DID)\*\*: The reported feelings of detachment and the presence of multiple identities suggest that this could be a physiological response to severe trauma, possibly linked to the psychological impact of early childhood events, such as a traumatic car accident at the age of two.  
  
3. \*\*Preeclampsia or Ectopic Pregnancy\*\*: The elevated HCG levels warrant investigation into these conditions despite the absence of pregnancy symptoms commonly associated with visible fetal development.   
  
4. \*\*Heavy Metal Poisoning\*\*: Although less common, exposure to heavy metals can cause neurological symptoms and may correlate with physical signs like bruising if the patient has experienced any form of abuse.  
  
Recommended Diagnostic Tests:  
  
1. \*\*Ultrasound\*\*: To rule out ectopic pregnancy or confirm the absence of ovarian tumors.   
  
2. \*\*More Comprehensive Serological Tests\*\*: To check for tumor markers versus normal pregnancy markers to assess for potential choriocarcinoma shortcomings in detection.  
  
3. \*\*Psychiatric Evaluation\*\*: To further assess the patient for DID and understand the extent of her dissociative symptoms.  
  
4. \*\*Heavy Metal Testing\*\*: Blood tests to check for toxic metals as potential culprits for her neurological symptoms.  
  
Overall, the complex interplay of psychological trauma and potential acute medical conditions necessitates a multidisciplinary approach, including both oncological and psychiatric evaluations, to provide the patient with the most accurate diagnosis and appropriate treatment plan."  
  
### DISEASE:  
Choriocarcinoma