

# Electronic Medical Record (EMR) Summary

Patient ID: PID18636310

Name: Anil Varma

Age: 45, Sex: Male

Visit ID: VISIT13871526

Date: 2025-05-17 14:31

## Clinical Reasoning Summary

### **\*\*Definition & Key Concerns\*\***

The patient's presentation of ascending paralysis following a diarrheal illness is suggestive of Guillain-Barré Syndrome (GBS), a post-infectious immune-mediated polyneuropathy. The key concerns are rapid progression of weakness that may involve respiratory muscles, autonomic dysfunction, and severe pain.

### **\*\*Differential Diagnosis\*\***

1. Guillain-Barré Syndrome: The most likely given the acute onset of ascending paralysis following an infection, with absent deep tendon reflexes.
2. Transverse Myelitis: Could present with similar symptoms but usually involves sensory level and bowel/bladder dysfunction.
3. Botulism: Can present with descending paralysis but is less likely given the absence of cranial nerve involvement.
4. Poliomyelitis: Rare, but could present with acute flaccid paralysis. However, it is usually asymmetric and associated with fever.

### **\*\*Can't-Miss Diagnosis\*\***

Guillain-Barré Syndrome is the critical high-risk condition that must be ruled out given its potential to rapidly progress to respiratory failure.

### **\*\*Suggested Investigations\*\***

1. Lumbar puncture: To assess for albuminocytologic dissociation (high protein with normal cell count), characteristic of GBS.
2. Nerve conduction studies and electromyography: To confirm the diagnosis and subtype of GBS.

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3. Basic blood tests: CBC, electrolytes, renal and liver function tests to assess overall health status.
4. Respiratory function tests: Vital capacity and negative inspiratory force to assess for impending respiratory failure.

### **\*\*Management Plan\*\***

1. Admit to hospital for close monitoring of respiratory and autonomic function.
2. Initiate treatment with intravenous immunoglobulin (IVIG) 0.4g/kg/day for 5 days or plasmapheresis, depending on availability and patient's condition.
3. Pain management with medications like gabapentin or carbamazepine.
4. Physical and occupational therapy to maintain muscle function and prevent complications.

### **\*\*Reference Insight\*\***

According to UpToDate 2023, early recognition and treatment of Guillain-Barré Syndrome is crucial to prevent complications, including respiratory failure. Both IVIG and plasmapheresis have been shown to reduce the severity and duration of GBS.

### **Rare Disease Alerts**

None triggered

### **Prescription**

None provided