# **MEDLEY Clinical Decision Report**

## Case tmp330njue2: Medical Case from tmp330njue2.txt

### **Case Overview**

Presentation:	28-year-old woman, recent immigrant from Somalia, presents to emergency department with recurrent episodes of severe abdominal pain, fever spikes to
	39.5°C, and arthritis affecting knees and ankles. Episodes last 2-3 days and resolve spontaneously. She reports similar episodes in family members "

## **Diagnostic Landscape**

PRIMARY DIAGNOSIS	Reactive Arthritis	17% Agreement	
Minority Opinion	Reactive Arthritis	By Llama 3.2 3B, Llama 3.2 3B	
Minority Opinion	Inflammatory Bowel Disease	By Llama 3.2 3B	

### **Management Strategies**

#### **Critical Decision Points**

■■ Geographic variation in diagnoses - consider regional disease patterns

				4
Models: 8	Responded: 6	Unique Diagnoses: 2	Consensus: Strong	4
		- 1	3	41

# **Model Diversity & Bias Analysis**

### **Model Response Patterns**

Model	Origin	Release	Primary Diagnosis	Confidence
Mistral 7B	France	2023-09	Unknown	Varied
Gemma 2 9B	USA	2024-06	No diagnosis	Varied
Llama 3.2 3B	USA	2024-09	Inflammatory Bowel Disease	Varied
Qwen 2.5 32B	China	2024-11	Unknown	Varied
Gemini 2.0 Flash	USA	2024-12	Unknown	Varied
DeepSeek V3	China	2024-03	Unknown	Varied

### **Identified Bias Sources**

Geographic	France vs USA	Divergent diagnoses based on regional training	
Geographic	USA vs China	Divergent diagnoses based on regional training	
Temporal	Release dates vary	Model release dates span from 2023-09 to 2024-12, potential	ly affecting knowle
Training Data	Multilingual web data	Broad knowledge but variable quality	
Training Data	Curated datasets	Standard medical training data	

### **Unique Model Perspectives**

Model	Unique Diagnosis	Reasoning	
Llama 3.2 3B	Inflammatory Bowel Disease	ndings" }, { "name": , "confidence": 0.1, "icd_code": "K50-K59", "reason	ning":

### **Diagnostic Categories**

• Autoimmune/Inflammatory: Inflammatory Bowel Disease, Reactive Arthritis

### **Detailed Model Responses**

#### Mistral 7B (France)

Unknown Recurrent abdominal pain and fever could be indicative of IBD.

However, the absence of diarrhea and weight loss in this case reduces

its likelihood.

2. Unknown Fever and arthritis are symptoms of Septic Arthritis, but the response

to standard analogsics and the peritoneal signs suggest an

inflammatory rather than infectious process.

3. Although the patient's age is within the range for Rheumatoid Arthritis, Unknown

the recurrent abdominal pain and fever are not typical symptoms, and

the absence of morning stiffness and symmetrical joint ...

#### Llama 3.2 3B (USA)

Inflammatory Bowel ndings" }, { "name": , "confidence": 0.1, "icd\_code": "K50-K59", Disease

"reasoning": "Rare in young adults, but possible consideration based

2. Reactive Arthritis primary\_diagnosis": { "name": , "confidence": 0.8, "icd\_code": "M35.9",

"reasoning": "Clinical presentation of recurrent episodes of severe

abdominal pain, fever, art

3. reactive arthritis primary\_diagnosis": { "name": "Reactive Arthritis", "confidence": 0.8,

"icd\_code": "M35.9", "reasoning": "Clinical presentation of recurrent

episodes of severe abdomina

#### Qwen 2.5 32B (China)

Unknown Arthritis affecting knees and ankles and family history of similar

episodes, but usually presents with back pain which is not mentioned

here.

2. Unknown Abdominal pain and fever can suggest an infectious etiology, but no

specific infection source is evident from the history.

Abdominal pain and fever can be associated with inflammatory bowel Unknown

diseases, but arthritis affecting knees and ankles is less common.

#### Gemini 2.0 Flash (USA)

Unknown While FMF is most likely given the ethnicity, other autoinflammatory

syndromes can present with similar symptoms. Further genetic testing

is needed to rule them out definitively.

Unknown SLE can present with fever, arthritis, and abdominal pain. However, the

recurrent, self-limiting nature of the episodes is less typical of SLE.

Autoantibody testing is needed to rule this out.

Given the patient's recent immigration from Somalia, infectious Unknown

diseases common in that region should be considered, although the recurrent and self-limiting nature of the episodes makes infection ...

#### DeepSeek V3 (China)

Unknown Peritoneal signs and abdominal pain could suggest appendicitis, but the recurrent nature and spontaneous resolution make this less likely. lack of other systemic symptoms make this less likely.

3. Unknown

Abdominal pain and elevated inflammatory markers could suggest IBD, but the absence of chronic diarrhea or weight loss makes this less likely.

Arthritis and fever could be seen in SLE, but the episodic nature and

2.

Unknown