

Patient Evaluation

Key Words no appetite, slight fever, chills, sweats, tired, thirsty, lying in bed

Transcript Summary The patient presents with symptoms including no appetite, a slight fever, chills, sweats, fatigue, and increased thirst. The clinical picture suggests a systemic response possibly related to an infectious or inflammatory process.

Patient Summary

The patient's clinical presentation of no appetite, slight fever, chills, sweats, and fatigue is suggestive of an underlying systemic process. The symptoms can align with several conditions including infections such as viral-like illnesses or autoimmune responses. Notably, the presence of both chills and sweats indicates an active phase of an illness that typically involves an immune response. Comprehensive exploration of the patient's medication history is crucial since drug-induced conditions, such as pancreatitis, though rare, could present with fever and fatigue. The provided medical literature highlights the importance of ruling out less common causes like drug-induced pancreatitis due to the rise in such cases. Clinicians should consider a broad differential, taking into account the possibility of medication-related effects, especially for patients using over-the-counter or non-prescription drugs. Monitoring key physiological markers and possibly imaging might help in narrowing down the diagnosis. The patient's symptoms align with known patterns of systemic inflammatory response seen in mild to moderate infections.

SOAP:

Subjective: Patient reports no appetite, slight fever, chills, sweats, tiredness, and thirst.

Objective: Approximately 100,000 hospital admissions per annum are due to acute pancreatitis, highlighting the need for evaluation of such symptoms.

Assessment: The symptoms suggest a possible systemic infection or inflammatory process. Acute pancreatitis due to drugs should be considered given the growing number of cases associated with medication use.

Plan: Comprehensive medical history review, including recent drug exposure; laboratory tests including CBC and inflammatory markers; consider imaging if symptoms persist or escalate.

Related Healthcare Fields:

- Gastroenterology: Evaluation for possible drug-induced pancreatitis or other gastrointestinal causes.
- Infectious Diseases: Assessment for underlying infectious causes leading to systemic symptoms.
- Internal Medicine: Overall management and integration of findings from various diagnostic evaluations.
- Pharmacology: Review and analyze potential drug-related contributions to the patient's symptoms.

Devices needed:

- CBC (Complete Blood Count): To evaluate infection or inflammation by checking white blood cell count.
- CRP (C-Reactive Protein) Test: To detect inflammation levels in the body.
- Abdominal Ultrasound: To check for any abnormalities in the abdominal organs, especially the pancreas.
- CT Scan: For detailed imaging of abdominal structures to rule out conditions such as pancreatitis.

Urgency Level:

Level: Medium

Justification: The presence of systemic symptoms warrants timely diagnostic evaluation to rule out potentially serious conditions like pancreatitis or infections.

Recommended Action: Schedule a comprehensive diagnostic workup within the next 48 hours to determine the underlying cause.

Move to requests to **Accept** or **Decline** patient