



# Patient Evaluation

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**Key Words** musculoskeletal, chills, sweats, appetite, fever

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**Transcript Summary** The patient presents with a lack of appetite and slight fever, accompanied by symptoms suggestive of a systemic condition such as chills and sweats. Given the context of the symptoms, a musculoskeletal disorder or an infectious process might be considered.

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## Patient Summary

The patient's presentation with chills, sweats, a slight fever, and no appetite suggests a systemic response, possibly indicative of an infection or an inflammatory process. The symptoms align with conditions such as viral infections or even drug-induced reactions as suggested in Source 1, which highlights the prevalence of drug-induced pancreatitis and its associated systemic symptoms. While the exact link to a musculoskeletal condition is less clear, inflammatory diseases like osteomyelitis could present similarly, particularly if systemic involvement is present. The importance of a thorough medication history is underscored by the potential for drug-induced symptoms mimicking more common infectious or inflammatory etiologies. Understanding the diversity of potential causes and utilizing a comprehensive diagnostic approach are paramount for appropriate management.

## SOAP:

*Subjective:* The patient reports chills, sweats, loss of appetite, and a slight fever.

*Objective:* Source analysis suggests systemic indicators that could point toward an inflammatory or infectious process, with an emphasis on drug-induced possibilities.

*Assessment:* Consideration of a systemic inflammatory condition or infection, potentially drug-induced. Diagnostic exploration of viral syndromes or drug reactions is advised.

*Plan:* Initiate diagnostic testing including viral panels, complete blood count, and a comprehensive medication review. Consider empiric management based on the most probable cause while awaiting results.

## Related Healthcare Fields:

- Internal Medicine: To manage systemic symptoms and coordinate further diagnostic workups.
- Infectious Disease: To evaluate and manage potential systemic infections or inflammatory causes.
- Gastroenterology: Given the systemic symptoms, consultation may be necessary if drug-induced pancreatitis is suspected.
- Rheumatology: For potential consideration of inflammatory or autoimmune conditions mimicking infectious processes.

## Devices needed:

- Complete Blood Count (CBC): To assess for possible infection or anemia as a cause of symptoms.
- Viral Panel: To identify any viral infection that could explain the systemic symptoms.
- Medication Review: To evaluate possible drug-induced causes of the systemic symptoms.

## Urgency Level:

Level: Medium

Justification: While symptoms are systemic and concerning, they are not immediately life-threatening. Prompt investigation can prevent possible complications.

Recommended Action: Arrange for lab tests and diagnostics within the next 48 to 72 hours to ensure timely management.

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