

# Medicine Red Morning Report

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# Initial Presentation

- ▶ Called to admit a patient sent to the ER by a local private neurologist
- ▶ Mr. X is a pleasant 60-year old black male whose only past medical history is well-controlled hypertension and the occasional asthma attack (“once or twice per year”) that is controlled with albuterol.
- ▶ Previously worked as a school principal, but most recently has been working in computer information security.
- ▶ The patient has been followed by the neurologist since January for dizziness.
  - ▶ He describes the dizziness as “the room is spinning all the time”
  - ▶ It was initially “off and on” in late December, but by early January it was 24/7
  - ▶ The only thing that improves his symptoms is sitting in a dark room with the TV on
  - ▶ The patient has been nocturnal since early January and has lost his job as a result
- ▶ The patient also complains of near total hearing loss in his left ear, and a “rim of light” around his left peripheral vision with no notable loss in acuity

# Would you like to know more?

SOCIAL AND SEXUAL HISTORY

TRAVEL AND CONTACTS HISTORY

“ALL THOSE INFECTIOUS DISEASE QUESTIONS”

REVIEW OF SYSTEMS

EXAM

IMAGING



# Los Laboratorios

## CMP

Na 139

K 3.8

Cl 104

CO2 27

BUN 18

Cr 1.1

Glu 97

Tbili 0.6

AlkPhos 99

AST 23

ALT 20

## CBC

WBC 4.5

Hgb 12.4

Hct 38.5

Plt 273

## Diff

Lymphos 34.1 %

Mono 9.5%

Eos 0.8%

Baso 0.4%

PMNs 55.2%

## Immuno/Inflam

ESR 80

CRP 4.96

IgG (s) 2410

IgA 305

IgM 189

M Protein 0.0

G-Fraction 2.37

A1-Fraction 0.2

A2-Fraction 0.9

B-Fraction 0.86

## CSF

Glucose 49

Protein 114

WBC 21

L - 76%

M - 24%

RBC 9

VDRL 1:4

Viral Cx -

Fungal Cx -

Crypto Ag -

Herpes PCR -

WNV -

CMV -

YOU get a differential! And YOU get a differential!  
differential! And YOU get a differential!





- ▶ After interviewing and examining the patient, we ordered labs to dig a bit deeper into a possible cause:
  - ▶ HIV +
  - ▶ RPR 1:512
- ▶ Luckily, our intrepid medicine team had already started the patient on PCN G and consulted ID, because this patient has....

NEUROSYPHILIS!