



# 3/24/20 Morning Report with @CPSolvers



<p><b>CC:</b> 52 M p/w 1 day of disorientation  <b>HPI:</b>  Progressive confusion, baseline AAOx3, first time episode  ROS: +diarrhea, 10 episodes, non-bloody. No abd pain, vomiting, no fever/chills  -----  Admitted. Bicarb drip, IVF, Cr did not improve → hospice.</p>		<p><b>Vitals:</b> BP 92/48, HR 85, RR 16, 97% RA, Temp 36.8 C</p> <p><b>Exam:</b>  Alert, NAD, dehydrated, Non-purposeful movements  HEENT: normal  Cards: RRR no m/r/g  Lungs: CTAB  Abd: normal  Extremities: no peripheral edema, no rash</p>	<p><b>Problem Representation:</b> 52M with CRC on FOLFOX p/w acute onset AMS in the setting of diarrhea and found to have an AKI and a non-anion gap metabolic acidosis.</p> <p><b>Differential Diagnosis: MIST</b>  <u>M</u>etabolic  <u>I</u>nfection  <u>S</u>tructural  <u>T</u>oxin</p>
<p><b>PMH:</b>  CRC on FOLFOX  GERD  Depression/Anxiety</p> <p><b>Meds:</b>  Diflucan</p>	<p><b>Fam Hx:</b></p> <p><b>Soc Hx:</b>  No EtOH, drugs, tobacco</p>	<p><b>Notable Labs &amp; Imaging:</b>  WBC 7.6 ,Hg 13.2 (MCV 104), Plt: 246  Na: 137, K 5.4, Cl 122, Bicarb 9, gluc 96, BUN 58, Cr 8.9, Tbili 0.4, albumin 3.1, AST 19, ALT 13, Alk Phos 150, Lactic acid 1.5, Coags normal, ABG 7.04/29/98/7.7  U/A: hyaline casts, otherwise normal, urine anion gap negative  CXR: normal. CT: normal  Kidney U/S: no hydro</p>	<p><b>Teaching Points:</b></p> <ol style="list-style-type: none"> <li>1. Think about <b>DONT</b> miss Tx before Dx in AMS: Dextrose, Oxygen, Naloxone, Thiamine</li> <li>2.. <b>Localizing the AMS:</b> AMS + X; X is a localizing process (e.g., electrolyte abnormality or focal neurologic deficit)</li> <li>3. <b>AMS in patients with cancer:</b> (1) CNS involvement (2) chemo toxicity, (3) infection due to immunosuppression (4) electrolyte abnormalities due to chemo</li> <li>4. <b>AKI in patients with Cancer:</b> (1) Nephrotoxicity (2) TLS (3) Malignant obstruction</li> <li>5. An elevated Cr is acute until proven otherwise</li> <li>6. Cr rise by &gt; 1/day is rare for AKI. Consider rhabdo.</li> <li>7. ~5% of post-renal AKI doesn't have hydro. Think acute obstruction vs. diffuse diffuse obstruction (exp: RP fibrosis)</li> </ol>