6/8/25 Morning Report with @CPSolvers

"One life, so many dreams" Case Presenter: (Lera@LNovotnaya) Case Discussants: (Maddy@MadellenaC) and (Andrew@ASanchez_PS)

Scribing (SEEME)

CC: 45 y old FM with jaw pain

HPI: Pain started 2 days ago, it is unilateral and localized to the left jaw pain. She also noticed that pain worsens with eating or even drinking and is associated with sensation of fullness and mild pain on the left side under the tongue.

ROS: Denies dry mouth, dry eyes, vaginal dryness, arthralgias, fever, weight loss, chest pain

–Last clinic visit was 1 month prior, when the patient was dealing with sinus congestion and ear pain. She was treated conservatively for URI with OTC antihistamine with decongestant and sinus washes. Improved ~10 days prior to today's presentation

PMH:
Vasospastic angina
Raynaud
GERD
Anxiety
Overactive bladder
Cholecystectomy

Meds:
Omeprazole
Famotidine
Buspirone
Amlodipine
Nitroglycerin
Loratadine

Fam Hx:
Mother RA
Sudden cardiac death (sister and brother in 30s)

Social Hx:
No smoking, drinks alcohol socially

Health-Related Behaviors:

Allergies:NKDA

Vitals: T: 99.5 **BP:** 102/ 49 **HR**: 74 **RR:** 18 **Sat: 100 BMI:** 26
Exam: Gen: no acute distress, alert and oriented
HEENT:left submandibular area tender to palpation, firm, enlarged, indurated, oropharynx and teeth normal.Swelling+tenderness below tongue. No obvious cervical or generalized lymphadenopathy
CV: regular rate and rhythm, no murmurs
Pulm: nl
Abd: soft, non-tender, no HSM
Neuro: nl
MSK: no edema or tenderness

Notable Labs & Imaging:
Hematology:
WBC: nl Hgb:nl Plt:nl MCV:nl

Chemistry
Normal Labs
Imaging:

POCUS:
On left: swollen, hypo/anechoic area which is the duct(meaning it is dilated as cannot be seen on US unless it is dilated)
On right : normal

Dx: left submandibular Sialolithiasis with sialadenitis (early)

Problem Representation: 45 y old FM with acute unilateral jaw pain worse with eating and drinking associated with sensation of fullness under tongue. Dilated duct seen on POCUS.

Teaching Points (Masah):
Jaw pain: localized or referred? Dental (abscess, tooth infection), Skin & soft tissue infection, trauma, enlarged LN
Postprandial pain, Localized to 1 side under tongue → think of something blocking the salivary glands (sialolithiasis)
Pain with liquids (too sensitive) → can be due to pathology irritating the root canal (infection or abscess)
Sjogren's disease -> dry mouth -> predisposition to dental dz
Raynaud/ vasospastic angina -> vessel problem/inflammation also in the head and neck area -> ***GPA?*** vs **Sensation of fullness** - mass? LDA?
Tender, indurated - abscess? Enlarging infection? → CT with contrast can be helpful
Recent URI & dehydration → reduces salivary flow → predisposes to stone formation
Lemon drops or sour candy can stimulate salivation and improve flow + hydration → can help pass the stone