

CASE 3

CASE STEM:

46yo F presents to ED with fever and abdominal pain x2d. She also reports vomiting and diarrhea which started today. She states that she feels very weak and could barely get out of bed. She has recently returned from visiting relatives in India.

HISTORY:

PMHx: Asthma, HTN. immunizations UTD.

Meds: Ventolin, Flovent, HCTZ

Allergies: None

SHx: Non-smoker, no drugs/EtOH

HPI: States fever started 3 days ago and she can been having crampy abdominal pain for the last two days. Vomiting and diarrhea started today, states neither is bloody. She has chills and myalgias. On review of systems , there are no CNS complaints, no cough, chest pain or shortness of breath, no sore throat, no upper respiratory symptoms, last period was 3 yrs ago. No sick contacts at home.

Travel history: Visiting a smaller city in India for two weeks, staying with relatives. Ate and drank with her relatives. No swimming/rural activities. No bites/encounters with animals, no medical treatments/ tattoos etc. No sexual contacts. Was born in India but moved to Canada about 5 years ago.

Pre-travel: Did not visit a travel specialist. Has not previously received Hepatitis A vaccination. No chemoprophylaxis.

PHYSICAL EXAM:

HR: 70, BP 125/70, RR 20, Temp 39.1, SpO2 98% RA

General Appearance: patient appears exhausted

CNS: PERL, no focal deficits, oriented x3

HEENT: Normal conjunctiva, neck supple, no lymphadenopathy, mucous membranes slightly dry

CVS: Normal heart sounds

RESP: good air entry bilaterally no crackles/wheezes

GI: Mild generalized tenderness, no focal, no rebound/guarding, ?Splnomegally

GU: nil

MSK: no rash, no hot joints

QUESTIONS:

1) What is your differential diagnosis for this patient? What is most likely?

2) What is your initial management?

3) What investigations would you order?

INVESTIGATIONS:

CBC: Hb 145, Plts 398 WBC 3.4

Lytes: normal Cr: 117, BUN 12

AST 89, ALT 72, INR 1.1, Bili normal ALP normal

VBG: normal, Lactate 1.1

Urine: normal

QUESTIONS:

1) **What is the best way to confirm your suspected diagnosis? Are there other tests available? What are their characteristics?**

2) **What would you treat this patient with?**

3) **How would your management change in they had symptoms of meningitis?**

Please come up with 3-4 key points you learned about the diagnosis and management of typhoid to share with the group.

Learning Objectives:

1. Approach to fever in returning traveller
2. Diagnosis of typhoid fever
3. Management of typhoid fever
4. Differentiate typhoid from typhus (bonus objective)