***ENGLISH CLASS 3 MODULE FOR STUDENTS***

A 42-year-old femalepatientwasadmittedtotheemergencydepartmentwiththecomplaintofabdominalpainthatstartedfromtheepigastricregionandspreadto her back in a generousmanner. She had similarpainepisodes in thepastespeciallyafterheavyandfattyeveningmealswhichspontaneouslyresolvedafteroneortwohours.This time, thepainwasmore severe thanusual, did not resolvespontaneouslyandspreadaround her bellyandradiatedto her backatthe time shewasadmittedtotheemergencydepartment.Her historydid not revealanyregularoroccasionaluse of anymedicationsthatshemight be on. He is marriedand has threechildren. She has notobaccooralcoholaddiction.

Inphysicalexaminationshewassleepyandwasrespondingratherslowlytoquestions. Her body temperaturerevealed a fever of 38.30 C, pulse rate of 104 / min, bloodpressure of 109/55 mmHg. Shewasstrugglingwhilerespirationsitting in an uprightposition, seemingshort of breathandrespiration rate wascounted as 22 / min. Intheroomair her oxygensaturationwasmeasured as sO2: 99% andarterial PaCO2 was 30 mmHg. She had diminishedbronchovesicularsounds in her lungs on auscultation. Her skin waswarmandsweaty, andthescleraswereicteric.The abdomen wasslightlydistendedandbowelsoundsdecreasedduringauscultation. Withsuperficialpalpation, the abdomen wassoftbut therewassignificantpain in deeppalpation of therightupperquadrantandepigastricsurface. No abdominalmassororganomegalywasdetected.

**Laboratoryworkup:**

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| **Hemogram Normal values** | **Biochemistry Normal values** |  |
| HGB: 12,4 g/dl(13,7-17,5) | Glucose: 155 mg/dL(70-100) | HBsAg (-) |
| HTC: 38 (40,1-51) | BUN: 34 mg/dL(5-20) | Anti HBS (-) |
| MCV: 85/fL(79-92,2) | Cr: 0,6 mg/dL(0,7-1,2) | Anti HCV (-) |
| MCH: 27/pg(25,7-32,2) | Na: 141 mmol/l(136-145) |  |
| WBC: 16500/mm3(4230-9070) | K: 4,78 mmol/l(3,5-5,1) | PTZ: 11,8sn (Ref: 12.5) |
| Neutropyl:%82 (34-67) | Albumin: 2,48 g/dL(3,5-5,2) | INR: 1,02 (0,85-1,2) |
| Lymphocyte:%16 (21-53) | ALT: 459 U/L (5-41) |  |
| Thrombocyte:245.000/mm3(163-337) | AST: 593 U/L(5-40) |  |
| ESR: 82 mm/hour(1-30) | ALP: 189 U/L(40-129) |  |
| CRP: 220 mg/l(0-5) | GGT: 371 U/L(10-71) |  |
|  | Tot. Bilirubin: 3,5 mg/dL(0,1-1,2) |  |
|  | D. Bilirubin: 2,3 mg/dL(0,1-0,3) |  |
|  | Amilase: 2548U/L (28-100) |  |
|  | Lipase: 3480 U/L (0-60) |  |
|  | LDH: 270 U/L (135-225) |  |
|  | Triglyceryde:160mg/dL(40-150) |  |
|  | Ca: 9,5 mg/dL(9,1-9,7) |  |

**IN IMAGING TESTS;**

**P.A. Chest X-ray: (Interpretation)**Posterior-anteriorchest X-ray taken in normal exposureanddosage, in appropriatetechnique in theinspiration. No pathologicalappearancewasobserved in thesofttissuesandbones. Cardiothoracicratiowas normal. Therewasnofullness in thebilateralhilus.Infiltrationandmassappearancewere not observed in thelungparenchyma.Bilateralpleuralfluidwasobserved. **Diagnosis:**   Bilateralpleuraleffusion.

**Abdominalultrasonography:**Theliver normalin size andlocalization, theparenchymalecho is homogeneous. Thegallbladderwallwas of normal thickness,withoutanyfluidcollectionaroundgallbladder, withsludgeandnumerous 2-3 cm largestones in thelumen. Theintrahepatic bile ductsweremarkedlydilated. Thecommon bile ductwasmarkedlydilatedandwasapproximately 11 mm wide. Distalcholedochalsegmentcould not be evaluatedclearlyduetogas, but stone-likeappearancewas not observed in theevaluatedareas.   **Diagnosis:**Cholelithiasis, intrahepatic bile ductdilatationandcommon bile ductdilation.