#### **Time Remaining:**

Times Up!

#### **History:**

54 y/o F c/o SOB since 1 hour. It started all of a sudden, is constant, progressive and is accompanied by 8/10 severity of chest pain which is localized to the center of the chest and is non radiating. Patient admits that she took a long 17 hours flight recently and has also noticed edema of her right calf associated with local calf pain as well. Patient also complains of productive cough. She brings up non bloody green color sputum and she has also noticed fever.

Patient denies any sick contacts/recent trauma/trouble with sleeping/smoking hx/hx of asthma and any recent LOC.

ROS: Normal except above PMH: N/C except above

Medications: None Hospitalization: None

FH: N/C Ob/Gyn: N/C

SSH: Sexually non active, non smoker and does not consume alcohol and illicit drugs.

### **Physical Examination:**

Patient is in acute distress.

Lungs: Decreased breath sounds on the right, no wheezing, ronchi, no visible pulsations or scars or

signs of trauma

Heart: Normal S1 and S2, No added soun

### Diagnosis 1:

Pulmonary embolism

#### **History Findings**

- 1) SOB since 1 hour
- 2) 8/10 severity of non radiating chest pain
- 3) took a long 17 hours flight recently
- 4) edema of her right calf associated with local calf pain

#### **Physical Exam Findings**

- 1) Decreased breath sounds on the right
- 2) edema of her right calf associated with local calf pain
- 3) + Homan's sign

#### Diagnosis 2:

Pneumonia

#### **History Findings**

- 1) SOB since 1 hour
- 2) 8/10 severity of non radiating chest pain
- 3) productive cough
- 4) non bloody green color sputum
- 5) Fever

#### **Physical Exam Findings**

### Diagnosis 3:

# **History Findings**

# **Physical Exam Findings**

# **Diagnostic Study/Studies - Labs**

- 1) CXR
- 2) Spiral Chest CT
- 3) D-Dimer test
- 4) USG lower limbs
- 5) CBC with differential
- 6) Sputum C/S
- 7) ESR, CRP
- 8) CMP