
NR576 Midterm Study Guide for Weeks 1-4

If you understand that clinical reasoning and decision-making involve examining the patient's presentation, clinical data, and diagnostic test results to distinguish one disease from another and arrive at the correct diagnosis. In that case, you will be successful on the midterm exam.

Week 1: Foundations in Differential Diagnosis Formulation

- Clinical Reasoning and Decision-Making
 1. Algorithms
 2. Evidence-Base Research
 3. Clinical Practice Guidelines
- History of Present Illness (HPI)
 1. OLD CARTS mnemonic
- Sensitivity
- Specificity
- Pretest Probability

Week 2: Skin Rashes and Pain, Nail Changes

- Be able to differentiate the following rashes from each other:
 1. Rubella
 2. Varicella
 3. Pityriasis Rosea
 4. Impetigo
 5. Psoriasis
 6. Contact Dermatitis
 7. Atopic Dermatitis (Eczema)
 8. Hidradenitis Suppurativa
 9. Folliculitis
 10. Cellulitis
 11. MRSA
 12. Herpes Simplex
 13. Herpes Zoster
 14. Dermatitis Herpetiformis
 15. Candidiasis Albicans
 16. Tinea Corporis
 17. Erythema Multiforme
- Be able to differentiate skin cancer/lesions from each other:
 1. Actinic Keratosis
 2. Basal Cell Carcinoma
 3. Squamous Cell Carcinoma
 4. Melanoma
- Acne Vulgaris
- Furuncle
- Epidermoid Cyst
- Sialadenitis

- Treatment Onychomycosis

Week 3: Ear Pain, Sore Throat and Nasal Drainage, Changes in Hearing

- Differentiate hearing loss
 1. Presbycusis
 2. High-Frequency Hearing Loss
 3. Conductive Hearing Loss
 - a. Cerumen Impaction
 4. Sensorineural Hearing Loss
 - a. Tests for hearing loss
 - 1) Schwabach Test
 - 2) Pneumatic Otoscope
 - 3) Audiometry
 - 4) Whisper Test
- Ear Pain
 1. Acute Otitis Media (AOM)
 - a. Know the clinical presentation of AOM
 - b. Most common organisms responsible for AOM
 - 1) Streptococcus pneumoniae
 - 2) Haemophilus influenzae
 - 3) Moraxella catarrhalis
 2. Acute Otitis Externa (AOE)
 - a. Know the clinical presentation of AOM
 - b. Most common organism responsible for AOE
 - 1) Pseudomonas aeruginosa
 - 2) Staphylococcus aureus
 3. Serous Otitis Media
- Meniere's Disease (triad symptoms)
- Allergic Rhinitis
- Allergic Bacterial Rhinosinusitis (ABRS)
- Acute Viral Rhinosinusitis (AVRS)
 1. Know what you would teach your patient (anticipatory guidance)
- Pharyngitis vs. Strep Pharyngitis (Sore Throat)
 1. Organism associated with a sore throat (infections)
 - a. Group A Beta hemolytic streptococcus
 - a. Streptococcus pneumoniae
 - b. Epstein-Barr Virus
 2. Diagnostic Tests
 - a. Rapid Strep
 - a. Throat Cultures
 - b. Mono Spot
 3. Treatment of Strep Pharyngitis (first-line treatment)

Week 4: Eye Discharge and Pain, Changes in Vision

- Differentiate Eye Drainage/Discharge
 1. Conjunctivitis
 - a. Allergic conjunctivitis
 - b. Bacterial conjunctivitis
 - c. Viral conjunctivitis
 - d. Chemical conjunctivitis
- Differentiate Eye Pain/Infectious Processes
 1. Chalazion
 2. Hordeolum (stye)
 3. Blepharitis
 4. Dacryocystitis
 5. Corneal Abrasion
- Differentiate Changes in Vision
 1. Cataracts
 2. Glaucoma
 - a. Open Angle
 - 1) Know what to ask in the history and how to examine the patient
 - b. Closed Angle/Angle Closure
 3. Retinal Detachment
 4. Macular Degeneration
 5. Diabetic Retinopathy
 6. Amaurosis fugax
 7. Diplopia
 8. Ptosis
 9. Strabismus
 10. Nystagmus