Week 3 ihuman problem statement

JA is a 65 y/o recently retired high school science teacher presenting with trouble sleeping, daytime fatigue, jitters, nervousness for the last 3-4 months. Patient reports more frequent loose stools, heat intolerance during activity, weight loss despite increased appetite and hunger. Physical exam is remarkable for tachycardia, thyroid enlargement, hyperreflexia, hand tremor, and mild lid lag. No other significant medical problems noted. Family history significant for maternal grandmother with “lazy thyroid”.

Management Plan

Diagnostic

Free Thyroxine (FT4): 2.8 (elevated)

Thyroid scan: 131 -Iodine scan shows 65% homogenous uptake bilaterally, right slightly greater than left with prominent isthmus (increased uptake and distribution consistent with Grave’s Disease)

Thyroid-stimulating hormone (TSH): 0.02 (suppressed below normal)

Thyroid stimulating immunoglobulin (TSI; IgG): >2.0 (elevated levels of TSI (Thyroid stimulating immunoglobulin concentration is associated with disease activity)

(Hotte et al., 2024)

Medication

Atenolol 50 mg by mouth once daily. Dispense #30.

Take your medication exactly as prescribed and do not skip doses or stop suddenly without consulting your provider. Schedule a follow-up appointment within 1 to 2 weeks to check your heart rate and blood pressure, assess for side effects, and adjust the medication if needed.

Call your provider sooner if you notice your heart rate consistently below 55 beats per minute, blood pressure lower than 100/60 mmHg, persistent dizziness, lightheadedness, weakness, worsening fatigue, or swelling in your legs.