



Below is the template you are to follow when developing your management plan. Also, always be sure to complete the EMR on the case. Use this template with each case. It is not a SOAP format as that is not required. Points will be deducted for not utilizing the template.

i-Human Case Study: Evaluation and Management of Neurologic Conditions

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Primary Diagnosis and [ICD-10 code](#)

- Depressive Disorder (ICD-10 F32.9) – Depressive disorder is a mental health issue that is characterized by fatigue, poor concentration, anhedonia, depressed mood, agitation, and appetite changes, much like the symptoms the patient in this case is experiencing. Other symptoms can include suicidal thoughts, sleep disturbances, and feelings of guilt or worthlessness. According to Bains (2023), in about 50% of cases of depressive disorder, patients deny feeling depressed, and they are referred to treatment by family members to be screened for social disengagement and decreased activity. The patient in this case did deny being depressed and she was brought in by her mother for evaluation. Given the patient's signs, symptoms, clinical presentation, and negative test results, this is the most likely primary diagnosis for this patient. The clinical guidelines used to formulate this diagnosis are from the American Psychological Association (n.d.).

Differential Diagnoses:

- Hypothyroidism (ICD-10 E03.9) – Hypothyroidism is when the thyroid gland becomes underactive and does not produce sufficient thyroid hormone for the body to function (American Thyroid Association, 2020). Patients with hypothyroidism typically become fatigued, lose concentration, gain weight, and have symptoms of depression due to the slowing of the body's processes. The patient in this case has symptoms similar to hypothyroidism, making this a potential differential diagnosis. However, her TSH and T4 levels were normal, ruling this diagnosis out.