

Tasks for self-control

Task 1

Patient P., 50 years old, complaints of severe weakness, fatigue, decreased ability to work, irritability, sleep disorder, sweating. The patient noted the inability to perform his work in the presence of others, accompanied by a strong anxiety, reddening of the face, sweating. Patient worked as a master of a mercury shop for 25 years under the influence of mercury vapor (confirmed by records in the work book). During the examination: the skin is wet, poured persistent red dermographism, abdominal pain.

1. Formulate and confirm the diagnosis. Plan of treatment.

Task 2

The patient 45 years old, irrigated fruit trees and grain crops with pesticides. Previously, nothing was sick. Do not smoke. After some time eyes were swollen, headache. there was a runny nose with a clear discharge from the nose, sneezing. Soon joined a dry cough, periodically difficult exhalation, headache, dizziness, increased fatigue, worsening of sleep, decreased memory, irritability. With objective examination: hyperemia of the mucous membranes of the eyes and nose, in the lungs hears the dry wheezing. Hyperhidrosis, a slight tremor of fingers, pain in the course of nerve trunks, and the liver is palpated 2 cm below the costal arc.

1. Formulate and confirm the diagnosis. Plan of treatment.

Task 3

Patient M., a battery-charger, entered the department of occupational pathology after periodical medical examination, where, against the background of complaints of weakness and fatigue in the analysis of urine, an elevated level of coproporphyrin (+++) was detected. When he arrived in the hospital, he complained of pain, numbness in the limbs, weakness, fatigue, headache, sweating, cramps of the calf muscles. During the examination, the earth color of the skin was revealed, a narrow lilac-gray strip, hyperhidrosis, hypothermia, muscular hypotension, retardation of dermographism, and decreased sensitivity of the distal limbs of the polyneuritic type were revealed on the edge of the gums of the forearms. General blood test: hypochromic anemia, reticulocytosis.

Formulate the diagnosis. Plan of treatment.

Task 4

Patient K. worked for 15 years in the production of high quality electrodes. During the annual medical examination, he complaints of increased fatigue, drowsiness,

paresthesia, some decrease in limb strength, sweating, salivation. At examination and communication with the patient there is drowsiness, apathy, lack of critical attitude to his condition. The position of the patient: the head and trunk are inclined forward, the chin collides with the breast. Hypomimia, monotonous speech, micrography, limb tremor, bradykinesia, pro- and retro pulse. In the psychological study revealed a decrease in the range of interests, disorganization of mental processes.

1. Formulate and confirm the diagnosis.
2. How to treat this intoxication.

Task 5

Patient T., 43 years old, complains of dry cough, occasionally with small amount of mucosal sputum, which disturbs the patient for about 3 years. For medical help did not address. In the anamnesis of rare respiratory diseases (on average 1 time in three years). Do not smoke. Objectively: the chest of the usual form, the percussion sound in the lower parts of the lung with a box tint. Breathing vesicular, diffusely weakened, periodically heeded scattered dry wheezing. On the x-ray of the lungs is a slight increase in pulmonary pattern. The function of external respiration is within normal limits. According to the patient, he worked for 15 years as a cutter in the foundry workshop at the machine-tool enterprise.

1. Preliminary diagnosis. What information is required to confirm the diagnosis?
Plan of treatment.

Task 6

Patient K. was delivered to the resuscitation department by an ambulance team with complaints of a feeling of compression in the chest and a lack of air, a cough with the withdrawal of a large amount of foam sputum. From the anamnesis it is known that the patient works at the enterprise for the production of plastic windows and other products from polymers. On the day of receipt at the plant in the workshop, where the patient worked, there was a burning of products and output polymer components. The patient was subjected to the effects of combustion products (thermal destruction of polymers) within half an hour. After inhaling the combustion products, patient felt burning in the nasal cavity, nasopharynx, behind the sternum. After inhaling the combustion products, the patient experienced burning in the nasal cavity, nasopharynx, and the sternum. After 4 hours there was shortness of breath, dry cough. When examined in the hospital, the patient is excited, acrocyanosis, respiration - 30 per minute. When auscultation against the background of weakened breathing, a large number of small- and medium-rusty wheezes are heeded. In the foam sputum - the impurities of the blood, breathing swirling. On the x-ray of the

chest visible fuzzy blurred pulmonary pattern, against which small, non-intense spotted shadows are found, located in the lower and middle lung parts (flakes of snow that melts).

1. Formulate the diagnosis. Plan of treatment.

Task 7

The patient G., 40 years old, was taken to a pulmonologic department with complaints of intense coughing with mucosal sputum excretion with an admixture of blood, dyspnea of mixed nature, burning in the nasal cavity, pharynx, breast, lacrimation, vassile voices. From the anamnesis it became known that the patient worked as a specialist in chlorination of water in the pool. On this day in the pool the water had a green color and a sharp smell of chlorine. Objective examination revealed: hyperthermia, hyperemia of the mucous membrane of the eye, nasal cavity, pharynx, vocal cords. In the lungs hears the rigid vesicular respiration, a small amount of scattered dry wheezing. On the x-ray of the chest - a small extension of the roots of the lungs and a slight increase in pulmonary pattern.

1. Formulate the diagnosis. Plan of treatment.

Task 8

Patient J., 45 years old, while undergoing a medical examination, complains about headaches, dizziness, memory loss, the appearance of bruises on the torso and limbs that arise without any apparent reason. Given that the patient for 24 years working as a radiologist in the rayon hospital has not always used the means of protection, the probability of exposure to radiation is likely. The patient was sent to the in-patient examination in the department of occupational pathology. At examination in the department osteoporosis, fragility of nails, dryness of a skin, hair loss have been revealed. There were rashes on the skin of the back and extremities, paroxysmal tachycardia. Blood pressure - 110/50 mm Hg, red blood cells - $3,1 \times 10^{12} / l$, leukocytes - $2,1 \times 10^9 / l$, platelets - $60 \times 10^9 / l$, ESR - 23 mm / h.

1. Formulate the diagnosis. Plan of treatment.

Task 9

Patient L., 45 years old, works as a painter at a combine plant, turned to a doctor at the end of the day with complaints of headaches, dizziness, ear cramps, nausea, vomiting, and weakness. When collecting anamnesis, it was found that he initially repaired a small isolated production room (12 m²). In repair, L. used a solvent taken

on the main production (painting plant of the plant). After 4 hours there was weakness, nausea, headache. Continued to work. Within the next two hours, the symptoms intensified. Glistening, noise in the ears joined, there was repeated vomiting. At examination: skin of normal color, pulse of weak filling, tachycardia. When walking is a stumbling block.

1. Formulate a preliminary diagnosis. How to confirm the diagnosis?
2. Plan of treatment.

Task 10

Patient B. 42 years old, farmer. 3 hours ago worked in a warehouse with poison chemicals. Complaints about nausea, vomiting, severe pain throughout the abdomen, tears and salivation, diarrhea. The general condition of the patient is difficult, is inaccurate. Sharp narrowing of the pupils with no reaction to light. Sharp tremor and muscle cramps of the entire body, disorder of the sphincter function. Pronounced bradycardia. The tones of the heart are weakened. Arterial hypotension. When palpation of the abdomen is determined by pain in the epigastric region and right hypochondrium. Blood test: reduction of cholinesterase activity by 50%.

1. Formulate the diagnosis. Plan of treatment.

Task 11

In the clinic of the medical-sanitary part, the patient turned to complaints about aching pain in the forearms, a decrease in the strength of the hands, a feeling of "crawling ants" in the hands and arms of the forearms. From the anamnesis it became clear that the patient for 6 years worked as a cutter of cast-iron casting in the foundry workshop of the machine tool factory. For work uses a pneumatic hammer weighing 6.5 kg with a shock frequency of 1200 per minute. At inspection: brushes of "marble" color, hyperhidrosis of palms.

1. Preliminary diagnosis. Plan of treatment.

Task 12

Patient A. 40 years old for 20 years, working as a worker of the company, which produces slate, contacts with dust containing asbest. The patient complains of shortness of breath during work, cough with discharge of mucous membranes, chest pain, weakness. The general condition of the patient is satisfactory. Skin covers are pale with earthy tint. On the arms and legs – warts. The limits of cardiac dullness are enlarged to the right, the tones are weakened. Percussion over the lungs is a lung sound with a boxed tint. The mobility of the lower limits of the lungs is reduced. Breath is rigid, single scattered wheezing is heard. The vital capacity of the lungs is reduced. Radiologically: uniform fibrous-heavier eclipse, more in the middle and

lower lung departments, emphysema. The roots of the lungs are dilated, weighty. Pleurodiaphragmatic joints are determined.

1. Preliminary diagnosis. Plan of treatment.

Task 12

1. Asbestosis, stage II, interstitial form, emphysema of the lungs.
2. Complications of asbestosis: chronic nonspecific lung diseases, bronchiectasis, lung cancer, pleural mesothelioma.

Task 13

Patient K., 35 years old, works as a cutter of cast-iron casting at a machine-building plant. His duty includes the cutting of large-sized parts, using a pneumatic hammer weighing 6,5 kg. The hammer generates vibration and noise. After 5 years after the start of work, he began to disturb the pain in the forearms, reduced strength in the hands and the severity of hearing on both ears. There was a rhythm of sleep, there was increased irritability and fatigue. Objectively: brushes are dry, normal color, sensitive and trophic lesions are not determined. Vibration sensitivity is not disturbed; cold test negative: capillaroscopy: tendency to venous stasis. At audiometry noted hearing loss. When palpation of the shoulder muscles is noted for pain and sealing areas in them is more right. The pain is aggravated when the physical load on the muscles of the shoulder. From the internal organs of the pathology is not revealed.

1. Establish and justify the diagnosis.

Task 13:

1. Vibrational disease from local vibration. Vegetomyophysicitis syndrome. Professional myositis. Noise sickness.

Task 14

A diver who quickly rose to the surface after 10 minutes of headache, expressed general weakness, pain in the ears, severe shortness of breath, chest pain, feeling of torsion in the abdominal cavity. At examination: skin is pale, palpation pain in the knee joints, pain intensifies when active and passive movements, breathing accelerated superficial, tachycardia, arterial hypotension.

1. Formulate diagnosis. How to confirm the diagnosis?