

QUESTION
 A patient with a long history of alcohol abuse presents with a 2-week history of weight loss, anorexia, and weakness. The patient has a history of chronic liver disease and is currently on a low-fat diet. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

WBC	12,000	Hgb	10.5
Hct	32	Hct	32
Platelets	150,000	PT	15
ALT	150	PTT	35
AST	180	INR	1.8
ALP	300	BUN	15
Gamma-GT	400	Cr	1.5
Bilirubin	3.5		

The patient's abdominal ultrasound shows a cirrhotic liver with a splenomegaly and a small amount of ascites. The patient's chest X-ray is normal. The patient's electrocardiogram (ECG) is normal. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

ANSWER
 The patient's clinical presentation and laboratory studies are consistent with alcoholic liver disease. The patient's weight loss, anorexia, and weakness are common symptoms of liver disease. The patient's jaundice, ascites, and positive Brinkman's test are also consistent with liver disease. The patient's laboratory studies show a cirrhotic liver with a splenomegaly and a small amount of ascites. The patient's chest X-ray is normal. The patient's electrocardiogram (ECG) is normal. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

WBC	12,000	Hgb	10.5
Hct	32	Hct	32
Platelets	150,000	PT	15
ALT	150	PTT	35
AST	180	INR	1.8
ALP	300	BUN	15
Gamma-GT	400	Cr	1.5
Bilirubin	3.5		

The patient's abdominal ultrasound shows a cirrhotic liver with a splenomegaly and a small amount of ascites. The patient's chest X-ray is normal. The patient's electrocardiogram (ECG) is normal. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

QUESTION

A patient with a long history of alcohol abuse presents with a 2-week history of weight loss, anorexia, and weakness. The patient has a history of chronic liver disease and is currently on a low-fat diet. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

WBC	12,000	Hgb	10.5
Hct	32	Hct	32
Platelets	150,000	PT	15
ALT	150	PTT	35
AST	180	INR	1.8
ALP	300	BUN	15
Gamma-GT	400	Cr	1.5
Bilirubin	3.5		

The patient's abdominal ultrasound shows a cirrhotic liver with a splenomegaly and a small amount of ascites. The patient's chest X-ray is normal. The patient's electrocardiogram (ECG) is normal. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

ANSWER
 The patient's clinical presentation and laboratory studies are consistent with alcoholic liver disease. The patient's weight loss, anorexia, and weakness are common symptoms of liver disease. The patient's jaundice, ascites, and positive Brinkman's test are also consistent with liver disease. The patient's laboratory studies show a cirrhotic liver with a splenomegaly and a small amount of ascites. The patient's chest X-ray is normal. The patient's electrocardiogram (ECG) is normal. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows:

WBC	12,000	Hgb	10.5
Hct	32	Hct	32
Platelets	150,000	PT	15
ALT	150	PTT	35
AST	180	INR	1.8
ALP	300	BUN	15
Gamma-GT	400	Cr	1.5
Bilirubin	3.5		

The patient's abdominal ultrasound shows a cirrhotic liver with a splenomegaly and a small amount of ascites. The patient's chest X-ray is normal. The patient's electrocardiogram (ECG) is normal. The patient's physical examination is notable for jaundice, ascites, and a positive Brinkman's test. The patient's laboratory studies are as follows: