

I. Final text (11.42)

**From: Dr. Merinstein
To: Dr. Lisa Cuddy
Subject: Patient Jessica**

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Dear Mrs. Dr. Lisa Cuddy,

as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.

She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had amenorrhea for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.

When talking about her physical activity she mentioned the pain in her right knee, the pain can be treated with ice after the training and occurs after longer runs.

Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.

Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. She hasn't been protecting herself adequately in the past, so it would be great if you could deal with that as well, communicating woman to woman.

According to the patient, she and her friends do not take drugs or smoke, but some of her friends also purge after eating, which could be part of what causes her to do so as well.

Suspected Diagnosis: *Bulimia nervosa*

- Binge eating
- Overexertion
- Loss of weight recently
- Amenorrhea for three months
- Fainting
- Irregular heartbeat

Possible treatment and further procedure:


- Dental check for loss of enamel etc. (due to throwing up and tongue piercing)
- Talk to her parents and friends about her recent weight loss
- Check her knee, possibly due to overexertion
- Run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis)
- If the diagnosis is confirmed: psychiatric treatment should be considered


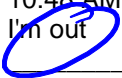
Thank you for taking over my patients during my vacation!

Yours sincerely,

Dr. Merinstein

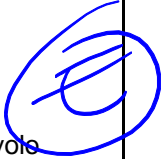
II. Collaborative process

Time	Chat	Text	Comments
10.43		Start writing after the horizontal line: <hr/> From: Group4 To: Subject: --	
10.45	ST 	From: Group4 To: Dr. Lisa Cuddy Subject: -- Hi sweetie :P	
10.46	ST	From: Group4 To: Dr. Lisa Cuddy Subject: -- Hi sweetie :P, i got aproblem called Jessica	
10.46		From: Dr. Merinstein-Group4 To: Dr. Lisa Cuddy	

		Subject: -- Hi sweetie :P, i got aproblem called Jessica	
10.47	ST 	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: -- Hi sweetie, -P, Ii got a problem called Jessic . #fatchicka	
10.48	Markus Schwarz 10:48 AM I'm out 	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: -- Hi sweetie, I got a problem called Jessie - #fatchick	
10.49		From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica --	
10.50		Objective: Write an email (300-400 words max.) to Dr. Lisa Cuddy in which you introduce the patient, describe the presenting symptoms (complaints), provide a diagnosis and	Markus Schwarz

		recommend a treatment plan for her. Be factual and unbiased in your professional judgement. <ul style="list-style-type: none"> • Style: It is a business email. • Time: 45 minutes. 	10.50 AM got to hurry
10.51	Joseph Lehmuss 10:51 AM is it about the patient we watched the vid of? _____	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica --	
10.51		From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica --	
10.52	Karina Durman 10:52 AM yes.. _____ Markus Schwarz 10:52 AM yeah bro _____ Joseph Lehmuss 10:52 AM		

WH

C ST ST	<p>I dunno much about her anymore</p> <hr/> <p>Karina Durman 10:52 AM where are you sitting markus?</p> <hr/> <p>Markus Schwarz 10:52 AM you not know you no goog</p> <hr/> <p>Joseph Lehmuss 10:52 AM next to me</p> <hr/>		
10.53 C ST WM	<p>Karina Durman 10:53 AM so what disease does she have?</p> <hr/> <p>Markus Schwarz 10:53 AM the coolest guy in place #yolo lets be serious Hello,</p> <hr/> <p>Karina Durman 10:53 AM markus can you open the notes</p>		

WM	<p>you uploaded? about the eating disorders</p> <hr/> <p>Markus Schwarz 10:53 AM in progress :)</p> <hr/> <p>Joseph Lehmuss 10:53 AM she came with this irregular heartbeat didnt she?</p> <hr/>		
WM	<p>10:54 Markus Schwarz 10:54 AM Who akes the first part?</p> <hr/> <p>Joseph Lehmuss 10:54 AM and her leg hurt apparently</p> <hr/> <p>Markus Schwarz 10:54 AM nearly deasd '</p> <hr/> <p>Karina Durman 10:54 AM yes and she doesnt eat enough,</p> <hr/>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>-- Dear Mrs. Dr. Lisa Cuddy,</p>	


	faints, and throws up after eating sometimes _____		
10.55		From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica -- Dear Mrs. Dr. Lisa Cuddy, My Patient Jessica Boyde presented with	
10.56	<p>Joseph Lehmuss 10:56 AM alrightg got my notes from last time imo we should go for a sentence like "as u know I'll be on holiday, so I wanted to inform u about important patients" or sth like that _____</p> <p>Karina Durman 10:56 AM go for it _____</p> <p>Joseph Lehmuss 10:56 AM I'll just fill it in before then _____</p>	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica -- Dear Mrs. Dr. Lisa Cuddy, My Patient Jessica Boyde presented with dizziness, passing out, and pain in her right leg. On examination	

WM

CS

WM

CS



		<ul style="list-style-type: none"> * Serious disturbance in eating and distress about body shape or body weight * Prevalence mostly amongst adolescent girls or young women * Cause: combination of genetic, neurochemical, psychodevelopmental, and sociocultural factors <p>Medical Assessment:</p> <ul style="list-style-type: none"> * Careful history of weight changes, purging behavior, and dietary patterns * Measurement of patient's weight and height * Physical examination * Measurement of serum electrolyte and serum glucose levels; complete blood count * Electrocardiogram <p>Symptoms: hypotension, bradycardia, hypothermia, dry skin, atrophy of the breasts, abnormal dentition, prolonged QT interval, reduced left ventricular mass, intestinal dilatation, amenorrhea, bone loss</p> <p>Psychiatric Assessment:</p> <ul style="list-style-type: none"> * Establishing a diagnosis * Identifying any concurrent psychiatric illness * Evaluating the risk of suicide * Exploring the psychosocial context of the symptoms <p>Goals:</p> <ul style="list-style-type: none"> * Stabilization of medical and nutritional status * Identification and resolution of psychosocial precipitants of the disorder * Reestablishment of healthful patterns of eating 	
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		<p>*</p> <p>Medical Treatment:</p> <ul style="list-style-type: none"> * Education about nutrition * Close medical supervision * Alleviation of the severe constipation associated with long-term use of laxatives may require stool softeners * Vitamin supplementation <p>Psychiatric Treatment:</p> <ul style="list-style-type: none"> * Combination of individual, group and family treatment is often beneficial * Cognitive-behavioral therapy * Interpersonal psychotherapy * Psychodynamic psychotherapy * Medication: Fluoxetine, Desipramine, Imipramine <p>Bulimia nervosa (2)</p> <p>The clinical problem:</p> <ul style="list-style-type: none"> * Bulimia nervosa = binge eating and purging; still normal weight * Prevalence mostly amongst adolescents, female more often than male * Affected by personality disorders * Role of genetic factors as possible cause (serotonergic system) * Modes of purging: vomiting, abuse of laxatives, misuse of diuretics <p>Medical complications:</p> <ul style="list-style-type: none"> * Oral: pharyngeal soreness, loss of enamel due to gastric acids, sialadenosis 	
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		<p>* Gastrointestinal: vomiting → gastroesophageal reflux, dyspepsia; laxatives → damage to myenteric plexus</p> <p>* Electrolyte: vomiting → metabolic alkalosis; laxatives → hyperchloremic metabolic acidosis; diuretics → hypochloremic metabolic alkalosis hypokalemia in otherwise healthy people → specific for bulimia nervosa</p> <p>Pseudo-Bartter's syndrome: hyperaldosteronism (due to volume depletion) → edema</p> <p>* Endocrine: rarely; irregular menses</p> <p>* Other: cardiomyopathy, muscle weakness caused by use of ipecac</p> <p>Treatment of medical complications:</p> <p>* Use of fluoride to prevent caries</p> <p>* Oral pilocarpine → reduction of sialadenosis</p> <p>* Proton-pump inhibitors; metoclopramide → increasing tone of lower esophageal sphincter</p> <p>* Difficulty of treating laxative dependence</p> <p>* Persuading patients of laxatives ineffectiveness for weight loss</p> <p>* Ample hydration, high-fiber diet, encouragement of exercises</p> <p>* Salt restrictions against edema (Pseudo-Bartter)</p> <p>* Calcium , Vitamin D for patients with anorexia history</p> <p>* Hypokalemic metabolic alkalosis: volume repletion and potassium repletion (e.g. KCl)</p> <p>Psychiatric treatment:</p> <p>* Cognitive-behavioral therapy: education in coping with feelings; more useful than intrapersonal psychotherapy</p>	
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		<ul style="list-style-type: none"> * Pharmacotherapy: antidepressants (Fluoxetine = only approved medication) * Combination of both therapies for higher effectiveness <p>Other</p> <ul style="list-style-type: none"> * Treatment as outpatients or hospitalization depending on severity of bulimia nervosa * Prevention programs for adolescents <p>Anorexia Nervosa (3)</p> <ul style="list-style-type: none"> * begins adolescence * dieting accompanied with compulsive exercise * food restriction (Type 1) * (purging and binge eating (Type 2) * disturbed body image, desire to lose more weight, fear of fatness <p>Causes:</p> <ul style="list-style-type: none"> * genetic influences * traits of perfectionism * anxiety disorders * family history of depression and obesity * social influence <p>Diagnosis:</p> <ul style="list-style-type: none"> * questioning friends and family * refusal to maintain body weight (less than 85 percent of expected body weight) * fear of gaining weight * disturbance in the way body shape and weight is experienced * postmenarchal girls and women: amenorrhea 	
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		<ul style="list-style-type: none"> * eroded dental enamel <p>Symptoms:</p> <ul style="list-style-type: none"> * loss of subcutaneous fat tissue * orthostatic hypotension * bradycardia * hypothermia * hair loss * impaired menstrual function <p>Longterm effects:</p> <ul style="list-style-type: none"> * osteopenia/ osteoporosis * loss of gray and white brain matter <p>higher rates of miscarriage</p> <p>Treatment:</p> <ul style="list-style-type: none"> * weight restoration * supervision by primary care physician, psychologist and psychiatrist, dietitian * motivation * engaging the family * education of patient and family * weight checks and other physical and laboratory indicators (blood count, urinalysis, serum electrolytes, Dual energy x-ray) * psychotherapy 	
10.57		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p>	

		<p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She -presented with dizziness, passing out, and pain in her right leg.</p> <p>...</p>	
10.58 <i>ST</i> <i>C</i> <i>WM</i>	<p>Joseph Lehmuss 10:58 AM well tghats a good start for now</p> <hr/> <p>Karina Durman 10:58 AM ah thanks which eating disorder does she have?</p> <hr/> <p>Joseph Lehmuss 10:58 AM I just type in my notes form last time like what the doc asked her then we know what we gotta write about</p> <hr/>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg.</p> <p>...</p>	
10.58		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p>	

		<p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg.</p> <p>...</p>	
<p>11.00</p> <p>C</p> <p>WM</p>	<p>Markus Schwarz 11:00 AM she is binge eating, losing weight, but still normal, overexercising or at least doing sports but she still has normal weight right?</p> <hr/> <p>Karina Durman 11:00 AM i think so</p> <hr/> <p>Joseph Lehmuss 11:00 AM just check up just far down there the question dr. merinstein asked her like summed up</p> <hr/>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she doesn't eat very much (mostly she just drinks soda) and</p>	

		<p>Eating Disorders (1)</p> <ul style="list-style-type: none"> * E.g. anorexia nervosa, bulimia nervosa, binge/eating disorder * Serious disturbance in eating and distress about body shape or body weight * Prevalence mostly amongst adolescent girls or young women * Cause: combination of genetic, neurochemical, psychodevelopmental, and sociocultural factors <p>Medical Assessment:</p> <ul style="list-style-type: none"> * Careful history of weight changes, purging behavior, and dietary patterns * Measurement of patient's weight and height * Physical examination * Measurement of serum electrolyte and serum glucose levels; complete blood count * Electrocardiogram <p>Symptoms: hypotension, bradycardia, hyptothermiaa, dry skin, atrophy of the breasts, abnormal dentition, prolonged QT interval, reduced left ventricular mass, intestinal dilatation, amenorrhea, bone loss</p> <p>Psychiatric Assessment:</p> <ul style="list-style-type: none"> * Establishing a diagnosis 	
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		<ul style="list-style-type: none"> * Identifying any concurrent psychiatric illness * Evaluating the risk of suicide * Exploring the psychosocial context of the symptoms <p>Goals:</p> <ul style="list-style-type: none"> * Stabilization of medical and nutritional status * Identification and resolution of psychosocial precipitants of the disorder * Reestablishment of healthful patterns of eating * <p>Medical Treatment:</p> <ul style="list-style-type: none"> * Education about nutrition * Close medical supervision * Alleviation of the severe constipation associated with long-term use of laxatives may require stool softeners * Vitamin supplementation <p>Psychiatric Treatment:</p> <ul style="list-style-type: none"> * Combination of individual, group and family treatment is often beneficial * Cognitive-behavioral therapy * Interpersonal psychotherapy * Psychodynamic psychotherapy * Medication: Fluoxetine, Desipramine, Imipramine <p>Bulimia nervosa (2)</p> <p>The clinical problem:</p> <ul style="list-style-type: none"> * Bulimia nervosa = binge eating and purging; still normal weight * Prevalence mostly amongst adolescents, female more often than male 	
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		<ul style="list-style-type: none"> * Affected by personality disorders * Role of genetic factors as possible cause (serotonergic system) * Modes of purging: vomiting, abuse of laxatives, misuse of diuretics Medical complications: * Oral: pharyngeal soreness, loss of enamel due to gastric acids, sialadenosis * Gastrointestinal: vomiting → gastroesophageal reflux, dyspepsia; laxatives → damage to myenteric plexus * Electrolyte: vomiting → metabolic alkalosis; laxatives → hyperchloremic metabolic acidosis; diuretics → hypochloremic metabolic alkalosis hypokalemia in otherwise healthy people → specific for bulimia nervosa Pseudo-Bartter's syndrome: hyperaldosteronism (due to volume depletion) → edema * Endocrine: rarely; irregular menses * Other: cardiomyopathy, muscle weakness caused by use of ipecac Treatment of medical complications: * Use of fluoride to prevent caries * Oral pilocarpine → reduction of sialadenosis * Proton-pump inhibitors; metoclopramide → increasing tone of lower esophageal sphincter * Difficulty of treating laxative dependence * Persuading patients of laxatives ineffectiveness for weight loss * Ample hydration, high-fiber diet, encouragement of 	
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		<p>exercises</p> <ul style="list-style-type: none"> * Salt restrictions against edema (Pseudo-Bartter) * Calcium , Vitamin D for patients with anorexia history * Hypokalemic metabolic alkalosis: volume repletion and potassium repletion (e.g. KCl) <p>Psychiatric treatment:</p> <ul style="list-style-type: none"> * Cognitive-behavioral therapy: education in coping with feelings; more useful than intrapersonal psychotherapy * Pharmacotherapy: antidepressants (Fluoxetine = only approved medication) * Combination of both therapies for higher effectiveness <p>Other</p> <ul style="list-style-type: none"> * Treatment as outpatients or hospitalization depending on severity of bulimia nervosa * Prevention programs for adolescents <p>Anorexia Nervosa (3)</p> <ul style="list-style-type: none"> * begins adolescence * dieting accompanied with compulsive exercise * food restriction (Type 1) * (purging and binge eating (Type 2) * disturbed body image, desire to lose more weight, fear of fatness <p>Causes:</p> <ul style="list-style-type: none"> * genetic influences 	
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		<ul style="list-style-type: none"> * traits of perfectionism * anxiety disorders * family history of depression and obesity * social influence <p>Diagnosis:</p> <ul style="list-style-type: none"> * questioning friends and family * refusal to maintain body weight (less than 85 percent of expected body weight) * fear of gaining weight * disturbance in the way body shape and weight is experienced * postmenarchal girls and women: amenorrhea * eroded dental enamel <p>Symptoms:</p> <ul style="list-style-type: none"> * loss of subcutaneous fat tissue * orthostatic hypotension * bradycardia * hypothermia * hair loss * impaired menstrual function <p>Longterm effects:</p> <ul style="list-style-type: none"> * osteopenia/ osteoporosis * loss of gray and white brain matter <p>higher rates of miscarriage</p> <p>Treatment:</p> <ul style="list-style-type: none"> * weight restoration * supervision by primary care physician, psychologist and psychiatrist, dietitian 	
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		<ul style="list-style-type: none"> * motivation * engaging the family * education of patient and family * weight checks and other physical and laboratory indicators (blood count, urinalysis, serum electrolytes, Dual energy x-ray) * psychotherapy diet → usual day (nutricion) weight loss? → medication taken? eating disorders/ throwing up physical activity knee pain mentruation sexual activity birth control/ condoms drugs 	
11.00		<p>...</p> <p>Treatment:</p> <ul style="list-style-type: none"> * weight restoration * supervision by primary care physician, psychologist and psychiatrist, dietitian * motivation * engaging the family * education of patient and family * weight checks and other physical and laboratory indicators (blood count, urinalysis, serum electrolytes, 	

		<p>Dual energy x-ray) * psychotherapy</p> <p>diet → usual day (nutricion) weight loss? → medication taken? eating disorders/ throwing up physical activity knee pain</p> <p>mentruation sexual activity birth control/ condoms drugs/smoking social life, peers, family etc.</p>	
51	<p>11.01 Karina Durman 11:01 AM haha menopause</p> 	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she doesn't eat very much (mostly she just drinks soda) and she is dieting and trying to</p>	


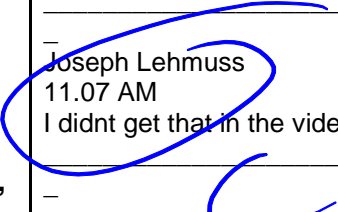
		lose weight. She is doing sports regua	
		...	
WM	11.02 Joseph Lehmuss 11:02 AM did u check out my small notes	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica	
WM	Karina Durman 11:02 AM yes	-- Dear Mrs. Dr. Lisa Cuddy,	
WM	Joseph Lehmuss 11:02 AM I think we should stick to that	as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.	
WM	Markus Schwarz 11:02 AM yes	She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde and she is dieting and trying to lose weight while s. She is doing intensive sports regularly (2h every day). It came out that she has had a menopause for three months now.	
WM	Joseph Lehmuss 11:02 AM like as some kinda order	...	
CS	11.03 Karina Durman 11:03 AM then this is all thats missing sexual activity	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica	


<p>CS</p>	<p>birth control/ condoms drugs/smoking social life, peers, family etc.</p> <hr/> <p>Joseph Lehmuss 11:03 AM should we write about the thing dr. merinstein did and then like some kind of diagnosis (proposed)</p> <hr/>	<p>-- Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now.</p> <p>...</p>	
<p>11.04 CS</p>	<p>Markus Schwarz 11:04 AM normal way of asking , is thatt all essential?</p> <hr/>		
<p>11.05 CS</p>	<p>Karina Durman 11:05 AM the sexual activity thing is important</p> <hr/> <p>Markus Schwarz 11:05 AM</p>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>-- Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks,</p>	

	<p>i agree</p> <hr/> <p>Karina Durman 11:05 AM and we should say something about her family/friends</p> <hr/>	<p>therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently)</p> <p>...</p>	
11.06	<p>Karina Durman 11:05 AM the sexual activity thing is important</p> <hr/> <p>Markus Schwarz 11:05 AM i agree</p> <hr/> <p>Karina Durman 11:05 AM and we should say something</p>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde. She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks</p>	

	<p>about her family/friends</p> <hr/>	<p>soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee,.</p> <p>Her father came to the appointment with her, but I</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently)</p> <p>...</p>	
11.06		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks</p>	<p>Joseph Lehmuss 11.06 AM proposed diagnosis?</p> <hr/> <p>—</p> <p>C</p>

		<p>soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with iceing after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without h</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently)</p> <p>...</p>	
11.06		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p>	

		<p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with iceing aftzer the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without h</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently) ...</p>	
11.07 	Karina Durman 11:07 AM what sport does she do? cross country? track and field? <hr/>	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica -- Dear Mrs. Dr. Lisa Cuddy, as you know I will be on holiday for the next four weeks,	Joseph Lehmuss 11.06 AM proposed diagnosis? <hr/> -- Joseph Lehmuss 11.07 AM I didnt get that in the video <hr/> -- 

		<p>therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with iceing after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently)</p> <p>...</p>	
11.08 	Joseph Lehmuss 11:08 AM dunno <hr/>	From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica	Joseph Lehmuss 11.06 AM proposed diagnosis? <hr/>

	<p>Markus Schwarz 11:08 AM track and field or just running like mararthons as far as i can remember</p> <hr/>	<p>-- Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with iceing after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. he doesn't know anything about her relationships to her b</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing)</p>	<p>Joseph Lehmuss 11.07 AM I didnt get that in the video</p> <hr/> <p>Karina Durman 11.08 AM he didnt propose a diagnose</p> <hr/> <p>Karina Durman 11.08 AM he said he'll look at it during the exam</p>
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		<p>talk to parents or friends (weight loss recently)</p> <p>...</p>	
11.08		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with iceing after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also,</p>	

		<p>her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationships to her b○</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently)</p> <p>...</p>	
11.08		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p>	

		<p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with iceing after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationships to her boyfriend</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently) ... </p>	
11.08		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>-- Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight</p>	

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11.08		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks,</p>	

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11.09	Karina Durman 11:09 AM	...	Joseph Lehmuss 11.06 AM


C	<p>then i think its cross country</p> <hr/>	<p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently)</p> <p>...</p>	<p>proposed diagnosis?</p> <hr/> <p>Joseph Lehmuss 11.07 AM I didnt get that in the video</p> <hr/> <p>Karina Durman 11.08 AM he didnt propose a diagnose</p> <hr/> <p>Karina Durman 11.08 AM he said he'll look at it during the exam</p> <hr/> <p>Joseph Lehmuss 11.09 AM then we should mention that in fact</p>
11.10		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p>	


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		<p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend</p> <p>Treatment plan: Dentist check teeth (also because of a tongue piercing) talk to parents or friends (weight loss recently) check her knee, maybe results of overexercising maybe run a bloodcheck</p> <p>...</p>	
11.10		From: Dr. Merinstein	

		<p>To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend or her</p> <p>trh</p>	
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		<p>Treatment plan: Dentist check teeth (also because of a tongue piercing)</p> <p>talk to parents or friends (weight loss recently)</p> <p>check her knee, maybe results of overexercising</p> <p>maybe run a bloodcheck</p> <p>...</p>	
11.11		<p>From: Dr. Merinstein</p> <p>To: Dr. Lisa Cuddy</p> <p>Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with</p>	

		<p>ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Diagnose:</p> <ul style="list-style-type: none"> • fh <p>Treatment plan:</p> <ul style="list-style-type: none"> • Check up at dentist's Dentist check teeth (due to throwing up and tongue piercing also because of a tongue piercing) • ——— talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis check <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
<p>11.12</p> 	<p>Markus Schwarz 11:12 AM agree</p> <p>_____</p>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p>	

	<p>Karina Durman 11:12 AM so is our diagnosis bulimia nervosa?</p> <hr/>	<p>-- Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Diagnose:</p>	
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		<ul style="list-style-type: none"> • <p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check upCheck up at dentist's (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
11.12		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a</p>	

		<p>menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Diagnose:</p> <p>Treatment plan:</p> <ul style="list-style-type: none">• Dental check up (due to throwing up and tongue piercing)• talk to parents or friends (weight loss recently)• check her knee, maybe results of overexercising• maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
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<p>11.13 CS</p> 	<p>Markus Schwarz 11:13 AM Can you really say that you can already make a diagnose</p> <hr/>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports , therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend or her</p>	<p>Joseph Lehmuss 11.13 AM could u say counsil?</p> <hr/> <p>Joseph Lehmuss 11.13 AM or is it more likely to be used in hospital</p> <p>Ho-UE Ho-UE</p>
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		<p>throwing up after eating a lot.</p> <p>Diagnosis</p> <p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein ...</p>	
<p>CS</p> <p>Ho-Int</p> <p>9</p> <p>CS</p>	<p>11.14 Joseph Lehmuss 11:14 AM we still did not write about sexual activity</p> <hr/> <p>Karina Durman 11:14 AM verdachtsdiagnose</p> <hr/> <p>Joseph Lehmuss 11:14 AM and birth control information</p> <hr/>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross</p>	

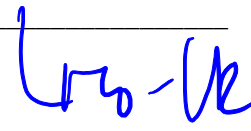
	<p>Markus Schwarz 11:14 AM yes, probably the symptoms fit well, She still has a normal weight and all the other symptoms</p> <hr/> <p>Ho-UE</p> <hr/>	<p>country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, therefore he is also her coach. He doesn't know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Suspected Diagnosis</p> <p>Treatment plan:</p> <ul style="list-style-type: none">• Dental check up (due to throwing up and tongue piercing)• talk to parents or friends (weight loss recently)• check her knee, maybe results of overexercising• maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein ...</p>	
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11.15		<p>...</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
11.16	<p>Karina Durman 11:16 AM we should right a little bit more about why we think it is bulimia nervosa</p> <hr/> <p>Markus Schwarz 11:16 AM maybe assumed diagnosis?</p> <hr/>	<p>...</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, therefore he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexercising • loss of weight recently • menopause 	<p>Joseph Lehmuss 11.13 AM could u say counsil?</p> <hr/> <p>Joseph Lehmuss 11.13 AM or is it more likely to be used in hospital</p> <hr/> <p>Karina Durman 11.16 AM i googled it and it said check up</p> <hr/> <p>Joseph Lehmuss 11.16 AM alright</p> <hr/>

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LKE

		<p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein ...</p>	<p>----- -----</p> <p>Joseph Lehmuss 11.16 AM does that fit in here? I'd say "in fact"</p> <p>— </p>
11.17		<p>...</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, therefore he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexercising • loss of weight recently • menopause • fainting • irregular heartbeat • 	<p>Joseph Lehmuss 11.13 AM could u say counsil?</p> <p>—</p> <p>Joseph Lehmuss 11.13 AM or is it more likely to be used in hospital</p> <p>—</p> <p>Karina Durman 11.16 AM i googled it and it said check up</p> <p>—</p> <p>Joseph Lehmuss 11.16 AM alright</p> <p>—</p> <p>Joseph Lehmuss 11.17 AM -resolved-</p>

		<p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis <p>Yours sincerely, Dr. Merinstein ...</p>	<p>----- ----- -----</p> <p>Joseph Lehmuss 11.16 AM does that fit in here? I'd say "in fact"</p> <hr/> <p>Karina Durman 11.17 AM yeah thats better</p>
11.17		<p>...</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact therefore he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexercising • loss of weight recently • menopause • fainting • irregular heartbeat 	

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		...	
<p>11.18</p> <p>Two-Link</p> <p>Joseph Lehmuss</p> <p>11:18 AM</p> <p>:D</p> <p>St</p>	<p>Karina Durman</p> <p>11:18 AM</p> <p>Menopause is when a woman's menstrual period stops permanently. Periods can stop for a while and then start again, so a woman is considered to have been through menopause only after one year without periods</p> <hr/> <p>Joseph Lehmuss</p> <p>11:18 AM</p> <p>:D</p> <hr/>	<p>From: Dr. Merinstein</p> <p>To: Dr. Lisa Cuddy</p> <p>Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had a menopause for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in</p>	

		<p>fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have strated to talk to her about her se</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexercising • loss of weight recently • menopause • fainting • irregular heartbeat <p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis (check out electrolytes) <p>Yours sincerely, Dr. Merinstein ...</p>	
11.19	Karina Durman 11:19 AM thats what google says _____	<p>...</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like</p>	

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<p>Mo - (Mk)</p> <p>Mo - (Mk)</p> <p>Mo - (Mk)</p>	<p>Joseph Lehmuss 11:19 AM ye it is</p> <hr/> <p>Karina Durman 11:19 AM we should change the menopause thing</p> <hr/> <p>Joseph Lehmuss 11:19 AM imo</p> <hr/>	<p>Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have strated to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. Maybe you could deal with that as well, as</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexercising • loss of weight recently • menopause • fainting • irregular heartbeat <p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis (check out electrolytes) <p>Yours sincerely,</p>	
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		Dr. Merinstein ...	
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		<p>Eating Disorders (1)</p> <ul style="list-style-type: none"> * E.g. anorexia nervosa, bulimia nervosa, binge/eating disorder * Serious disturbance in eating and distress about body shape or body weight * Prevalence mostly amongst adolescent girls or young women * Cause: combination of genetic, neurochemical, psychodevelopmental, and sociocultural factors <p>Medical Assessment:</p> <ul style="list-style-type: none"> * Careful history of weight changes, purging behavior, and dietary patterns * Measurement of patient's weight and height * Physical examination * Measurement of serum electrolyte and serum glucose levels; complete blood count * Electrocardiogram <p>Symptoms: hypotension, bradycardia, hyptothermiaa, dry skin, atrophy of the breasts, abnormal dentition, prolonged QT interval, reduced left ventricular mass, intestinal dilatation, amenorrhea, bone loss</p> <p>Psychiatric Assessment:</p> <ul style="list-style-type: none"> * Establishing a diagnosis * Identifying any concurrent psychiatric illness * Evaluating the risk of suicide * Exploring the psychosocial context of the symptoms <p>Goals:</p>	
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		<p>* Stabilization of medical and nutritional status * Identification and resolution of psychosocial precipitants of the disorder * Reestablishment of healthful patterns of eating *</p> <p>Medical Treatment:</p> <p>* Education about nutrition * Close medical supervision * Alleviation of the severe constipation associated with long-term use of laxatives may require stool softeners * Vitamin supplementation</p> <p>Psychiatric Treatment:</p> <p>* Combination of individual, group and family treatment is often beneficial * Cognitive-behavioral therapy * Interpersonal psychotherapy * Psychodynamic psychotherapy * Medication: Fluoxetine, Desipramine, Imipramine</p> <p>Bulimia nervosa (2) The clinical problem:</p> <p>* Bulimia nervosa = binge eating and purging; still normal weight * Prevalence mostly amongst adolescents, female more often than male * Affected by personality disorders * Role of genetic factors as possible cause (serotonergic system) * Modes of purging: vomiting, abuse of laxatives,</p>	
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		<p>misuse of diuretics</p> <p>Medical complications:</p> <ul style="list-style-type: none"> * Oral: pharyngeal soreness, loss of enamel due to gastric acids, sialadenosis * Gastrointestinal: vomiting → gastroesophageal reflux, dyspepsia; laxatives → damage to myenteric plexus * Electrolyte: vomiting → metabolic alkalosis; laxatives → hyperchloremic metabolic acidosis; diuretics → hypochloremic metabolic alkalosis hypokalemia in otherwise healthy people → specific for bulimia nervosa <p>Pseudo-Bartter's syndrome: hyperaldosteronism (due to volume depletion) → edema</p> <ul style="list-style-type: none"> * Endocrine: rarely; irregular menses * Other: cardiomyopathy, muscle weakness caused by use of ipecac <p>Treatment of medical complications:</p> <ul style="list-style-type: none"> * Use of fluoride to prevent caries * Oral pilocarpine → reduction of sialadenosis * Proton-pump inhibitors; metoclopramide → increasing tone of lower esophageal sphincter * Difficulty of treating laxative dependence * Persuading patients of laxatives ineffectiveness for weight loss * Ample hydration, high-fiber diet, encouragement of exercises * Salt restrictions against edema (Pseudo-Bartter) * Calcium, Vitamin D for patients with anorexia history * Hypokalemic metabolic alkalosis: volume repletion 	
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		<p>and potassium repletion (e.g. KCl)</p> <p>Psychiatric treatment:</p> <ul style="list-style-type: none"> * Cognitive-behavioral therapy: education in coping with feelings; more useful than intrapersonal psychotherapy * Pharmacotherapy: antidepressants (Fluoxetine = only approved medication) * Combination of both therapies for higher effectiveness <p>Other</p> <ul style="list-style-type: none"> * Treatment as outpatients or hospitalization depending on severity of bulimia nervosa * Prevention programs for adolescents <p>Anorexia Nervosa (3)</p> <ul style="list-style-type: none"> * begins adolescence * dieting accompanied with compulsive exercise * food restriction (Type 1) * (purging and binge eating (Type 2) * disturbed body image, desire to lose more weight, fear of fatness <p>Causes:</p> <ul style="list-style-type: none"> * genetic influences * traits of perfectionism * anxiety disorders * family history of depression and obesity * social influence 	
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		<p><u>Diagnosis:</u></p> <ul style="list-style-type: none"> * <u>questioning friends and family</u> * <u>refusal to maintain body weight (less than 85 percent of expected body weight)</u> * <u>fair of gaining weight</u> * <u>disturbance in the way body shape and weight is experienced</u> * <u>postmenarchal girls and women: amenorrhea</u> * <u>eroded dental enamel</u> <p><u>Symptoms:</u></p> <ul style="list-style-type: none"> * <u>loss of subcutaneous fat tissue</u> * <u>orthostatic hypotension</u> * <u>bradycardia</u> * <u>hypothermia</u> * <u>hair loss</u> * <u>impaired menstrual function</u> <p><u>Longterm effects:</u></p> <ul style="list-style-type: none"> * <u>osteopenia/ osteoporosis</u> * <u>loss of gray and white brain matter</u> * <u>higher rates of miscarriage</u> <p><u>Treatment:</u></p> <ul style="list-style-type: none"> * <u>weight restoration</u> * <u>supervision by primary care physician, psychologist and psychiatrist, dietitian</u> * <u>motivation</u> * <u>engaging the family</u> * <u>education of patient and family</u> * <u>weight checks and other physical and laboratory</u> 	
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		<p>indicators (blood count, urinalysis, serum electrolytes, Dual energy x-ray) * psychotherapy</p> <p>diet → usual day (nutricion) weight loss? → medication taken? eating disorders/ throwing up physical activity knee pain</p> <p>menstruation sexual activity birth control/ condoms drugs/smoking social life, peers, family etc.</p>	
11.21		<p>...</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit</p>	<p>Joseph Lehmuss 11.21 AM Überasntrengung?</p> <hr/> <p>—</p> <p><i>no URE/9</i></p>

		<p>about birth control. She hasn't been protecting herself adequately in the past, so it would be great if Maybe you could deal with that as well, communicating woman to woman.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexercising • loss of weight recently • amenorrhea for three months • fainting • irregular heartbeat <p>...</p>	
<p>CS</p>	<p>11.22 Markus Schwarz 11:22 AM still about 10min to go I think we can leave the diagnose and treatments in keywords</p>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight</p>	<p>Joseph Lehmuss 11.21 AM Überrasntrengung?</p> <p>-----</p> <p>Karina Durman 11.22 AM -resolved-</p> <p>-----</p> <p>-----</p> <p>Karina Durman 11.22 AM overxhaustion?</p> <p>-----</p>

	<p>while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had amenorrhea for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain could be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. She hasn't been protecting herself adequately in the past, so it would be great if you could deal with that as well, communicating woman to woman.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none">• binge eating• overexercising• loss of weight recently• amenorrhea for three months	<p>Joseph Lehmuss 11.22 AM overexertion?</p> <p>70- URF</p>
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<p>11.23</p> <p>cs [</p>	<p>Karina Durman 11:23 AM yes at least i hope so but the diagnosis is just a summary of what we already said so i think thats fine</p> <hr/>	<p>...</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit</p>	

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		<p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
<p>11.25</p> <p>WM</p>	<p>Joseph Lehmuss 11:25 AM we shoukld run over treatment plan again just improving it</p> <hr/>	<p>...</p> <p>Treatment plan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) • talk to parents or friends (weight loss recently) • check her knee, maybe results of overexercising • maybe run a blood analysis (check out electrolytes and hormone status in order to partly confirm the suspected diagnosis) • if the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
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<p>CS</p> <p>11.26</p>	<p>Markus Schwarz 11:26 AM i think thats fine, she is a doctor so she should know what to do if the diagnose turns out to be true</p> <hr/>	<p>...</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. She hasn't been protecting herself adequately in the past, so it would be great if you could deal with that as well, communicating woman to woman.</p> <p>According to the patient, she does not take drugs or smoke nor is she smoking. According to her her friends don't as well.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexertion • loss of weight recently • amenorrhea for three months • fainting • irregular heartbeat <p>...</p>	
<p>WJ</p> <p>11.27</p>	<p>Joseph Lehmuss 11:27 AM i think we wrote lot too much its like 400 words but could be alright</p> <hr/>	<p>...</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. She hasn't been protecting herself adequately in the past, so it would be great if you could</p>	

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<p>11.28</p> <p>Wkm</p> <p>Mo -</p> <p>UNE</p>	<p>Markus Schwarz 11:28 AM absolutely</p> <hr/> <p>Joseph Lehmuss 11:28 AM treatment plan!? not that well written imo</p> <hr/>	<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had amenorrhea for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain can be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in</p>	<p>Joseph Lehmuss 11.06 AM proposed diagnosis?</p> <hr/> <p>Joseph Lehmuss 11.07 AM I didnt get that in the video</p> <hr/> <p>Karina Durman 11.08 AM he didnt propose a diagnose</p> <hr/> <p>Karina Durman 11.08 AM he said he'll look at it during the exam</p> <hr/> <p>Joseph Lehmuss 11.09 AM then we should mention that in fact</p> <hr/> <p>Karina Durman 11.29 AM -resolved-</p>
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		<p>fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. She hasn't been protecting herself adequately in the past, so it would be great if you could deal with that as well, communicating woman to woman.</p> <p>According to the patient, she and her friends do not take drugs or smoke, but some of her friends also purge after eating, which could be part of what causes her to do so as well.</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none">• binge eating• overexertion• loss of weight recently• amenorrhea for three months• fainting• irregular heartbeat <p>Treatment plan:</p> <ul style="list-style-type: none">• Dental check up (due to throwing up and tongue piercing),• talk to her parents and friends about her recent weight loss• check her knee, maybe results of overexertion	
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11.29		<p>...</p> <p>Suspected Diagnosis: Bulimia nervosa</p> <ul style="list-style-type: none"> • binge eating • overexertion • loss of weight recently • amenorrhea for three months • fainting • irregular heartbeat <p>Possible Treatment and futherplan:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing), • talk to her parents and friends about her recent weight loss • check her knee, maybe results of overexertion • maybe run a blood analysis (check-out 	<p>Joseph Lehmuss 11.29 AM dont like it</p> <hr/> <p>Karina Durman 11.29 AM take it out completely?</p> <hr/> <p>Joseph Lehmuss 11.29 AM yep, I'd say</p>

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11.29		<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing), • talk to her parents and friends about her recent weight loss • check her knee, maybe results of overexertion • run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • if the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p>	

		<p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
11.30		<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing), loss of enamel etc. • talk to her parents and friends about her recent weight loss • check her knee, maybe results of overexertion • run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • if the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	<p>Markus Schwarz 11.30 AM possibility of overexertion</p> <hr/> <p>- <i>Mo - Urf</i></p>
11.31		<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing), loss of enamel etc. 	<p>Markus Schwarz 11.30 AM possibility of overexertion</p> <hr/> <p>- Karina Durman <i>Mo - Urf</i></p>

		<ul style="list-style-type: none"> • talk to her parents and friends about her recent weight loss • check her knee, maybe results of overexertion • run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • if the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	<p>11.31 AM possibly due to overexertion</p> <p>----- ----- -----</p> <p>Markus Schwarz 11.31 AM thats fine</p> <p>no - UNE</p>
11.32		<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) for loss of enamel etc. • talk to her parents and friends about her recent weight loss • check her knee, possibly due to maybe results of overexertion • run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • if the diagnosis is confirmed: psychiatric treatment should be considered 	<p>Karina Durman 11.32 AM check up for loss of enamel? can you say that? or should it be dental check for loss of enamel? without the up?</p> <p>-----</p> <p>Markus Schwarz 11.32 AM -resolved-</p> <p>no - UNE</p>

		<p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	
<p>MEC, UKE MEC, UKE</p>	<p>11.33 Joseph Lehmuss 11:33 AM is it capital letters after these bullets?</p> <hr/> <p>Karina Durman 11:33 AM thinks so think</p> <hr/>	<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check up (due to throwing up and tongue piercing) for loss of enamel etc. (due to throwing up and tongue piercing) • talk to her parents and friends about her recent weight loss • check her knee, possibly due to overexertion • run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • if the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	

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11.34	<p>Joseph Lehmuss 11:34 AM then I just correct it or markusi does we wrote everythin in bolt</p> <hr/>	<p>...</p> <p>Suspected Diagnosis: <i>Bulimia nervosa</i></p> <ul style="list-style-type: none"> • Bbinge eating • Overexertion • Loss of weight recently • Amenorrhea for three months • Ffainting • Irrregular heartbeat <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check up for loss of enamel etc. (due to throwing up and tongue piercing) • Talk to her parents and friends about her recent weight loss • Check her knee, possibly due to overexertion • Run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • If the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>...</p>	<p>Joseph Lehmuss 11.29 AM dont like it</p> <hr/> <p>Karina Durman 11.29 AM take it out completely?</p> <hr/> <p>Joseph Lehmuss 11.29 AM yep, I'd say</p> <hr/> <p>Karina Durman 11.34 AM -resolved-</p> <p>----- --- ----- ---</p> <p>Markus Schwarz 11.30 AM possibility of overexertion</p> <hr/> <p>Karina Durman 11.31 AM possibly due to overexertion</p> <hr/> <p>Karina Durman 11.34 AM -resolved-</p>
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11.34		<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check-up for loss of enamel etc. (due to throwing up and tongue piercing) • Talk to her parents and friends about her recent weight loss • Check her knee, possibly due to overexertion • Run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • If the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p>	

		Dr. Merinstein ...	
11.35	<p>Karina Durman 11:35 AM everyone is i think its supposed to be that way _____</p> <p>Joseph Lehmuss 11:35 AM jsut wanted to like highlight diagnosis etc. and noticed wondered about it but never mind its no prob _____</p>	<p>...</p> <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none"> • Dental check for loss of enamel etc. (due to throwing up and tongue piercing) • Talk to her parents and friends about her recent weight loss • Check her knee, possibly due to overexertion • Run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis) • If the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely, Dr. Merinstein</p> <p>Dr. Merinstein</p> <p>...</p>	
11.36	<p>Karina Durman 11:36 AM why is dr merinstein blue? because we sign itg? ti it</p>	<p>...</p> <p>Thank you for taking over my patients during my vacation!</p>	

<p>ST</p> <p>ⓔ</p> <p>ST</p> <p>ST</p> <p>ⓔ</p>	<p>L</p> <hr/> <p>Joseph Lehmuss 11:36 AM would not do taht in a mail</p> <hr/> <p>Karina Durman 11:36 AM haha</p> <hr/> <p>L</p> <hr/> <p>Markus Schwarz 11:36 AM its the signature ;)</p> <hr/> <p>Karina Durman 11:36 AM hahahahaa</p> <hr/> <p>Joseph Lehmuss 11:36 AM facepalm</p>	<p>Yours sincerely,</p> <p>Dr. Merinstein</p> <p>...</p>	
<p>11.40</p>		<p>...</p> <p>Bulimia nervosa (2)</p> <p>The clinical problem:</p> <p>* Bulimia nervosa = binge eating and purging; still normal weight</p>	

		<p>* Prevalance mostly amongst adolescents, female more often than male</p> <p>* Affected by personality disorders</p> <p>* Role of genetic factors as possible cause (serotonergic system)</p> <p>* Modes of purging: vomiting, abuse of laxatives, misuse of diuretics</p> <p>Medical complications:</p> <p>* Oral: pharyngeal soreness, loss of enamel due to gastric acids, sialadenosis</p> <p>* Gastrointestinal: vomiting → gastroesophageal reflux, dyspepsia; laxatives → damage to myenteric plexus</p> <p>* Electrolyte: vomiting → metabolic alkalosis; laxatives → hyperchloremic metabolic acidosis; diuretics → hypochloremic metabolic alkalosis hypokalemia in otherwise healthy people → specific for bulimia nervosa</p> <p>Pseudo-Bartter's syndrome: hyperaldosteronism (due to volume depletion) → edema</p> <p>* Endocrine: rarely; irregular menses</p> <p>* Other: cardiomyopathy, muscle weakness caused by use of ipecac</p> <p>Treatment of medical complications:</p> <p>* Use of fluoride to prevent caries</p> <p>* Oral pilocardine → reduction of sialadenosis</p> <p>* Proton-pump inhibitors; metoclopramide → increasing tone of lower esophageal sphincter</p> <p>* Difficulty of treating laxative dependence</p> <p>* Persuading patients of laxatives ineffectiveness for</p>	
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		<p>weight loss</p> <ul style="list-style-type: none"> * Ample hydration, high-fiber diet, encouragement of exercises * Salt restrictions against edema (Pseudo-Bartter) * Calcium , Vitamin D for patients with anorexia history * Hypokalemic metabolic alkalosis: volume repletion and potassium repletion (e.g. KCl) <p>Psychiatric treatment:</p> <ul style="list-style-type: none"> * Cognitive-behavioral therapy: education in coping with feelings; more useful than intrapersonal psychotherapy * Pharmacotherapy: antidepressants (Fluoxetine = only approved medication) * Combination of both therapies for higher effectiveness <p>Other</p> <ul style="list-style-type: none"> * Treatment as outpatients or hospitalization depending on severity of bulimia nervosa * Prevention programs for adolescents <p>diet → usual day (nutricion)</p> <p>weight loss? → medication taken?</p> <p>eating disorders/ throwing up</p> <p>physical activity</p> <p>knee pain</p>	
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		<p>menstruation sexual activity birth control/ condoms drugs/smoking social life, peers, family etc.</p>	
11.40		<p>... Yours sincerely, Dr. Merinstein</p>	
11.42		<p>From: Dr. Merinstein To: Dr. Lisa Cuddy Subject: Patient Jessica</p> <p>--</p> <p>Dear Mrs. Dr. Lisa Cuddy,</p> <p>as you know I will be on holiday for the next four weeks, therefore I would like to inform you about my Patient Jessica Boyde.</p> <p>She presented with dizziness, passing out, and pain in her right leg. During the conversation it became clear that she does not eat very much (mostly she just drinks soda). Jessica Boyde is dieting and trying to lose weight</p>	

		<p>while she is doing intensive sports regularly (cross country, 2h every day). Sometimes she throws up after binge eating and it came out that she has had amenorrhea for three months now. According to her own statement, she does not take laxatives or any other medication in order to lose weight.</p> <p>When talking about her physical activity she mentioned the pain in her right knee, the pain can be treated with ice after the training and occurs after longer runs.</p> <p>Her father came to the appointment with her, but I let him wait outside during the exam because I felt like Jessica would talk more without him in the room. Also, her father might be putting some pressure on her because he wants her to perform really well at sports, in fact he is also her coach. He does not know anything about her relationship to her boyfriend or her throwing up after eating a lot.</p> <p>Furthermore I have started to talk to her about her sexual activities with her boyfriend and also a little bit about birth control. She hasn't been protecting herself adequately in the past, so it would be great if you could deal with that as well, communicating woman to woman.</p> <p>According to the patient, she and her friends do not take drugs or smoke, but some of her friends also purge after eating, which could be part of what causes her to do so as well.</p>	
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		<p>Suspected Diagnosis: <i>Bulimia nervosa</i></p> <ul style="list-style-type: none">• Binge eating• Overexertion• Loss of weight recently• Amenorrhea for three months• Fainting• Irregular heartbeat <p>Possible treatment and further procedure:</p> <ul style="list-style-type: none">• Dental check for loss of enamel etc. (due to throwing up and tongue piercing)• Talk to her parents and friends about her recent weight loss• Check her knee, possibly due to overexertion• Run a blood analysis (check electrolyte and hormone status in order to partly confirm the suspected diagnosis)• If the diagnosis is confirmed: psychiatric treatment should be considered <p>Thank you for taking over my patients during my vacation!</p> <p>Yours sincerely,</p> <p>Dr. Merinstein</p>	
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