

A 67-year-old African American male is admitted to the hospital with chief complaint of generalized weakness and with potassium level of 6.5 mEq/L. His laboratory results show acute renal failure (ARF). The patient has severe osteoarthritis and takes high-dose nonsteroidal anti-inflammatory drugs (NSAIDs). In the recent heat wave, he noticed that he did not go to the bathroom as often as he used to for the last 2-3 days.

Past medical history (PMH)

Obesity, obstructive sleep apnea (OSA), hypertension (HTN), osteoarthritis (OA)

Medications

Motrin (ibuprofen), Percocet (oxycodone with acetaminophen), oxycodone, lisinopril

Physical Examination

VSS (Vital Signs stable)

HEENT: Dry mucosal membranes (MM).

Chest: CTA (B).

CVS: Clear S1S2.

Abdomen: Soft, NT, ND, +BS.

Extremities: no c/c/e.

Laboratory results

BMP shows acute renal failure. BUN/Cr were normal several months ago.

BMP in pre-renal ARF. Baseline labs are shown on the right

GENERAL CHEMISTRY						
Protein, Total		6.8				6.5
Albumin		4.0				3.4 ▼
Calcium	8.8	9.3				9.2
Bilirubin, Total		0.2				0.3
Alkaline Phosph...		118				112
ALT		12				7
AST		14				13
Glucose	66	105 ▲	141 * !		146 !	106 ▲
BUN	79 ▲	79 ▲				21
Creatinine	2.3 ▲	2.4 ▲				1.0
Sodium	144	140				144
Potassium	5.2 ▲	6.5 * c ▲				4.6
Chloride	109	108				105
CO2	23	24				27
Anion Gap	12	8				12

What is the most likely diagnosis?

How are you going to confirm the diagnosis?

What other tests would you order to be certain?

What treatment would you start for this patient?

What do you think will the final diagnosis be?

What did you learn from this case?