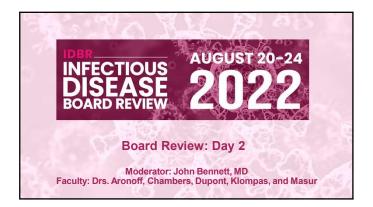
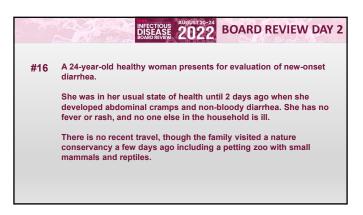
Moderator: John Bennett, MD





#16 She is HIV negative.

No therapy is initiated based on your initial consultation but Stool testing was performed.

One day after your initial consultation, the patient's clinical syndrome is unchanged, but the culture yields Salmonella enterica serotype typhimurium.

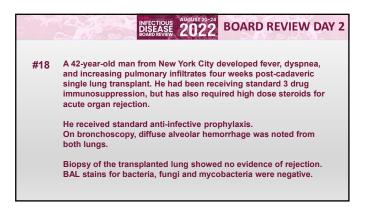
#16 How should this patient be managed?

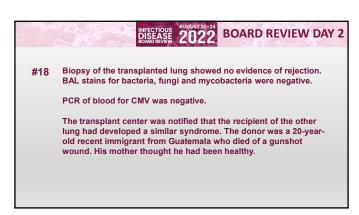
A) Ciprofloxacin
B) Azithromycin
C) Supportive care (no antibiotics)
D) Amoxicillin
E) Rifaximin

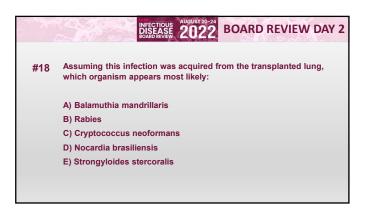


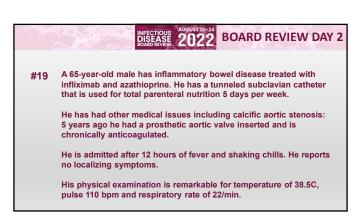
#17 The most likely organism is:

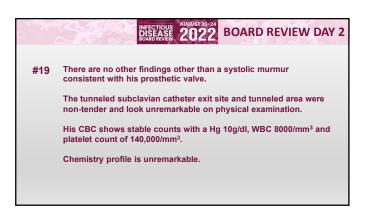
A) Blastomyces dermatitidis
B) Histoplasma capsulatum
C) Paracoccidioides brasiliensis
D) Cryptococcus neoformans/gattii
E) Histoplasma duboisii

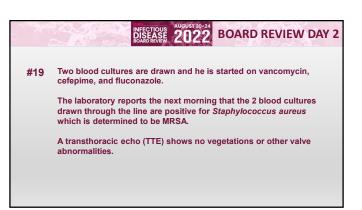


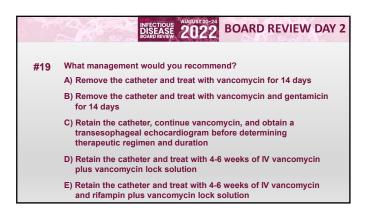


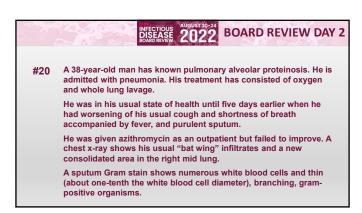




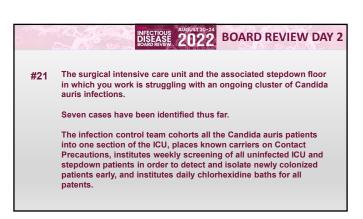


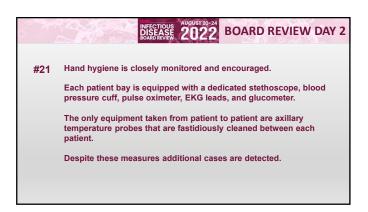


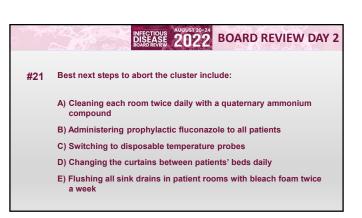


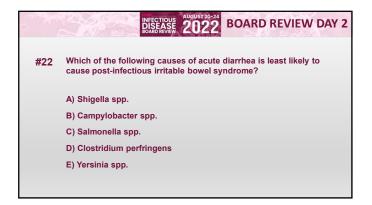


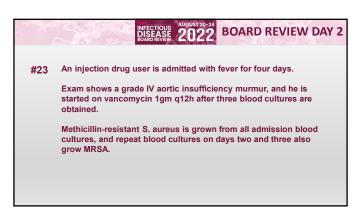


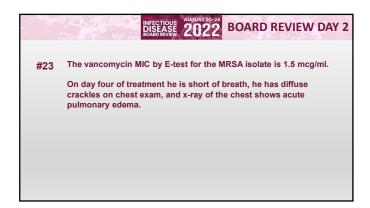




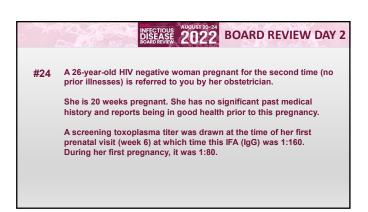






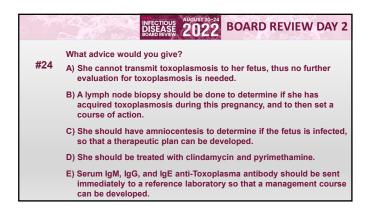


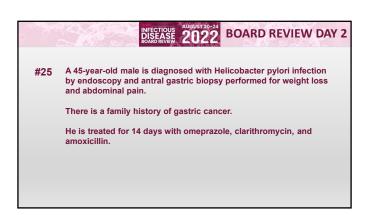






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What would be best option to evaluate this patient regarding Helicobacter infection/disease after completing antibiotic therapy?

A) No further testing is necessary for one year
B) Perform the stool Helicobacter pylori antigen test 8 weeks after treatment
C) Perform the urea breath test 3 weeks after treatment
D) Repeat endoscopy, biopsy and rapid urease test (RUT) 6 weeks after treatment

#26 A 50-year-old Hispanic woman underwent heart transplant for nonischemic cardiomyopathy.

A month later she has multiple nodules in several organs involved, including brain, and lung.

Skin biopsy culture grew Exophiala attenuata, susceptible to all antifungal agents tested.

She was initially treated with Ambisome and was recently converted to voriconazole.

#26 She calls to report that she developed photophobia and the sensation of lights flashing.

She comes to your clinic: Ophthalmologic examination by an ophthalmology consult is unrevealing.

She has no other new symptoms or findings

#26 What is the most likely cause of her visual symptoms?

A) Fungal chorioretinitis
B) CMV retinitis
C) Elevated Fluoride level
D) Voriconazole
E) Hypercortisolemia

