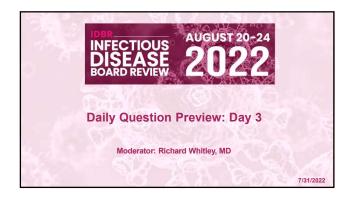
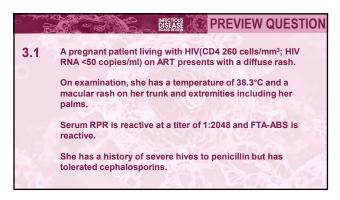
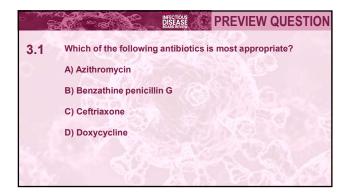
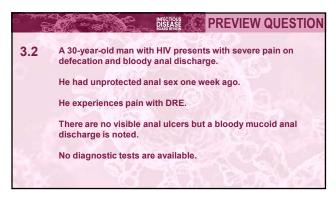
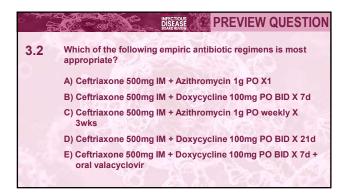
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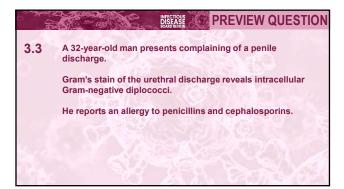




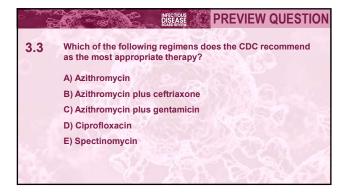


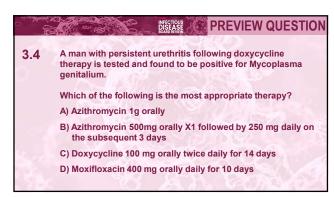


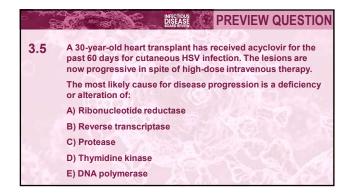




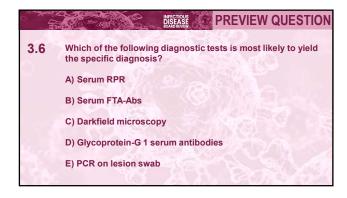
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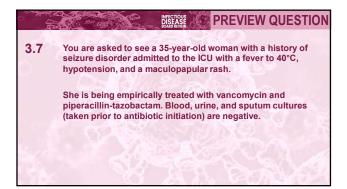




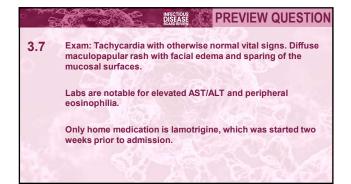


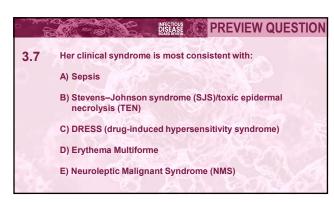






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A 37-year-old man recently diagnosed with HIV presents to clinic for routine care after starting antiretroviral therapy 3 months ago. He has not received pneumococcal vaccination.

Which of the following is most accurate?

A) He does not need pneumococcal vaccination as he is under 65

B) He needs a PCV13 alone

C) He needs a PCV20 alone

A 62-year-old woman with a self-reported history of shingles 10 years ago and type II diabetes presents to clinic. She received the live-attenuated zoster vaccine (ZVL) 2 years ago.

What do you recommend regarding the zoster vaccine?

A) Vaccine not indicated given her history of zoster

B) Vaccine not indicated as she has received ZVL

C) Check VZV titer to confirm history. If negative, proceed with vaccination

D) Recommend recombinant zoster vaccine

3.10

42-year-old female has malaise and RUQ pain; she just returned from 2 months working at an IDP camp in north Uganda.

She endorses tick and other 'bug' bites and swam in the Nile. 1st HAV vaccine 2 days before departure. Prior HBV vaccine series.

Exam shows no fever, vitals are normal. RUQ tender. Mild icteric. ALT 1245 IU/ml; Hb 13.4 g/dl; TB 3.2 mg/dl; WBC 3.2k nl differential.

3.10 Which test result is most likely positive?

A) Ebola PCR

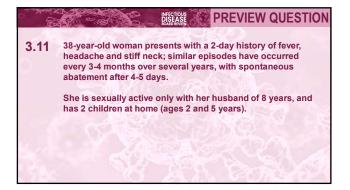
B) IgM anti-HEV

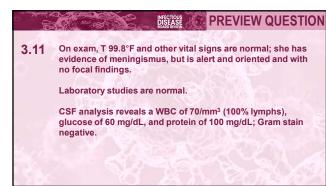
C) IgM anti-HAV

D) Schistosomiasis "liver" antigen

E) 16S RNA for Rickettsial organism

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3.11 Which of the following is the most likely etiology of this patient's meningitis?

A) Coxsackie A virus

B) Coxsackie B virus

C) Human immunodeficiency virus

D) Herpes simplex virus type 2

E) Human herpesvirus 6

PREVIEW QUESTION

3.12 A 35-year-old woman presents to the hospital with a 2-day history of fever, chills, headache, and mild confusion. She had head trauma several weeks earlier, associated with clear fluid draining out of her nose.

T 40.5°C, P 140, RR 32, BP 90/60 mmHg.

Obtunded, stiff neck.

WBC 30,000/mm³ (40% bands), platelets 20,000/mm³.

Lumbar puncture revealed an opening pressure of 400 mm H2O, WBC 2500/mm³ (99% segs), glucose 20 mg/dL, and protein 400 mg/dL

Which of the following empiric antimicrobial regimens should be initiated?

A) Ampicillin

B) Ceftriaxone

C) Vancomycin + ampicillin

D) Vancomycin + ceftriaxone

E) Vancomycin + ciprofloxacin

3.13 54-year-old man was anti-HCV pos after elevated ALT noted by primary.

Brief IDU when 20-21; moderate ETOH; otherwise well.

HCV RNA 4 million IU/L; Genotype 1a; ALT 42 IU/ml; AST 65 IU/ml; TB 1.6 mg/dl; Alb 3.9 mg/dl; Hb – 13.4 mg/dl; creatinine 1.2 mg/dl; HBsAg pos; anti-HBc pos.

HIV neg.

Moderator: Richard Whitley, MD

