An 80-year-old man presents with a complaint of acute shortness of breath. He says he has had difficulty breathing for the past two months, but the problem has worsened in the past two days. He reports experiencing dyspnea on exertion and denies fever or chills. He says he has had no appetite lately, adding that he’s lost about 20 to 30 lb in the past couple of months.

Medical history is significant for atrial fibrillation, hypothyroidism, hyperlipidemia, and remote bladder cancer. He is a former heavy smoker who quit about 30 years ago.

On initial assessment, you note an elderly male in mild respiratory distress. His vital signs are stable, except for his O₂ saturation, which is 90% on room air. On auscultation, you note decreased breath sounds on the right and occasional wheezing.

You order some preliminary lab work, as well as a chest radiograph. What is your impression?

see answer on page 28 >>

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ANSWER
The radiograph shows several abnormalities: There is a moderate to large right pleural effusion, as well as a parenchymal density within the right lower lobe. In addition, several of the ribs have a mottled appearance.

All of these findings are highly suspicious for primary as well as metastatic carcinoma. The patient was admitted to the hospital for further workup.