

**Case Records of the  
Rhode Island Hospital Emergency Department**

**Case 6  
22 year old woman with back pain**

A 22 yo F presents to the ED complaining of back pain since the previous night. The back pain is dull and not localized to any particular area. She also complains of nausea (no vomiting), neck pain and headache. She has had similar back pain intermittently for months, but it is worse today. Her ROS is positive for photophobia, subjective fevers and generalized weakness. She denies dysuria, frequency, urgency, hematuria, visual changes or focal weakness or numbness.

PMH is negative except for “neck surgery” for cancer, which she had several months ago. She takes some medicines but she doesn’t remember what they are, and she didn’t bring them with her. She is allergic to penicillin (“it makes me swell up”). □ □ FH is unremarkable. □ □ SH She lives with her husband. She does not drink or smoke. □ □ ROS is as in the HPI. She has felt fairly tired with intermittent back pain for months. She thinks her LMP was about a month ago. □

**PE:**

***T 101.8 po HR 109 RR 22 BP 88/49***

**General Appearance:** she is a flushed uncomfortable female appearing moderately ill. □ □

**HEENT** was normal, with a normal fundoscopic examination.

**Neck:** supple, with a well-healed thyroidectomy scar. □ □

**Lungs** were clear to auscultation. □ □

**Cardiac** examination revealed a regular tachycardic rhythm, without murmurs or gallops. □ □

**Abdominal examination** was normal, with a normal OB negative rectal examination. There was normal rectal tone. □ □

**Extremities** revealed some back pain with straight leg raise on the left, full pulses and no evidence of arthropathy. □ □

**Skin** was flushed but there were no rashes. □ □

**Neurologic examination** revealed normal mental state (although s/w agitated), fluent Spanish, intact cranial nerves and normal motor examination.

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**Labs:**

**CBC:** WBC 5.2, Hgb 12.3, Hct 37.1, Plt 198 □ Diff: 81% segs, 12% lymphs, 5% monos □ □

**Chem7:** Na 140 Cl 100 BUN 8 glc 86 □ K 3.5 C02 24 Cr 0.7 □ □

**PT 12.6 PTT 29** □ □

**U/A** negative □

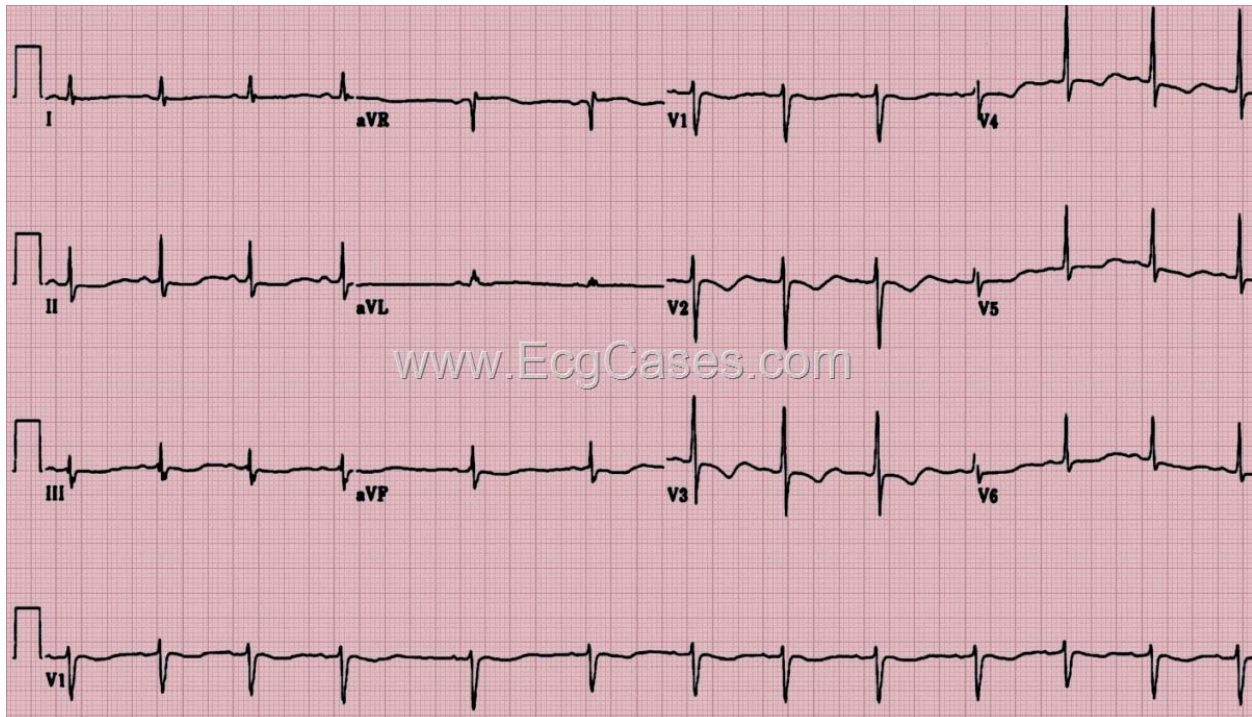
**UCG** negative □ □

**CXR:** normal

**CTLS spine series** normal □ □

**CSF** no wbc, no rbc, protein 11, glucose 57

**EKG:**



**What happened next?**

The patient received IV ketorolac with good relief of her back pain. She fell asleep, but was easily arousable, while awaiting her lab test results. While she was sleeping, her BP was noted to fall to 71/39, with a HR of 58. The patient was awakened at that time and felt fine; IVF were administered. A repeat BP was 74/42 with a HR of 62. □ □ What's wrong with this patient?