

BIO 26 PAL Worksheet

Week 13 (#2): Accessory Organs – Case Studies

1. A patient in your group's examination room complains about severe pain in the right upper quadrant. The patient also mentions severe diarrhea after eating fatty foods. An examination of the patient's stools reveals the presence of large amounts of fats.
 - a) What is the most likely problem, considering the location of the pain and lack of fat digestion?
 - b) How would you treat this condition?
 - c) Assume your group decided that the presented case may be severe enough to warrant surgery to remove the entire structure. You inform your patient that he/she, just like most people, will likely not experience digestive problems after this surgery. Your patient does not believe you. You draw a small diagram to visualize how things will still work after surgery.

2. Your patient starts feeling a little better during your evaluation and, against your recommendation, leaves for home – without any treatment. Just a few days later your patient returns. The pain has shifted and is now a severe, sharp epigastric abdominal pain radiating to the back and associated with nausea and vomiting. Your group's diagnostic medical sonographer performs an abdominal ultrasound and says "I knew it, it has moved!"
 - a) Using the diagram you kept on your whiteboard, show your patient what has moved where.
 - b) What structure/organ is affected now? Hint: the pain has shifted medially.
 - c) Your patient is still worried about surgery, and you try to explain the severity of this condition. Explain what consequences the loss of the inflamed structure/organ would have for the patient. Hint: include exocrine and endocrine functions here.