

**SOAP #10****S:**

AK is a 57 y/o F current smoker with pmh of inoperable RT carotid plaques and HLD presenting with intermittent vision changes in RT eye. Episodes have occurred 7-10x over the past 2 weeks. She states that her vision "turns grey" in her whole right eye during the episodes.

Denies headache, dizziness, weakness, numbness, tingling, h/o seizures, hearing changes, unintended weight loss, CP, SOB, lacrimation, pruritus, other visual disturbances, photophobia, pain with eye movement, h/o similar episodes, contacts or glasses use. Last eye exam was in January 2020, visual acuity was 20/20. Last carotid ultrasound was in 2016.

Denies headache,

PMH: HLD, RT carotid plaque (2016)

PSH: Denies any

Allergies: NKDA

Medications: Denies intake of any medications

FHx: Non-contributory

SHx: Current smoker 17 pack years, denies past or present EtOH use or drug use

**O:**

T 37.1C | BP 134/75mmHg | P 80BPM, regular | RR 16 breaths/min, unlabored | SpO2 98% RA  
H 65in | W 175 lbs | BMI 29.1

**Gen:** Overweight, well groomed, looks of stated age of 57 years. AxO x3. Appears in no acute distress.

**Skin:** Warm, dry, non-icteric, intact, no rashes no lesions, no erythema

**Eyes:** Symmetrical OU. No strabismus, exophthalmos, or ptosis. Sclera white, cornea clear, conjunctiva pink. Visual fields full OU. PEERL, EOMI, visual acuity 20/20 OD/OS/OU

**HENT:** NC/AT, nares patent, mucous membranes moist

**Neck:** Supple, no lymphadenopathy, normal ROM, no JVD, no bruits, no palpable mass

**CV:** RRR. No murmurs, friction rubs, no gallops

**Pulm:** Clear to auscultation and percussion bilaterally. Chest expansion symmetrical. No wheezing, rhonchi, rales, dullness.

**Abdomen:** Soft, non distended, non tender, normoactive bowel sounds, negative murphy's, no mcburney's point tenderness, no pulsatile masses

**Extremities:** Normal tone and ROM, cap refill <2s, no edema

**Neurological:** Cranial nerves II to XII intact, sensation intact throughout, no gait abnormalities, cerebellar testing normal, strength 5/5 in UE&LE, Full active/passive ROM

**A:**

57 yo F with current smoker with pmh of inoperable RT carotid plaques and HLD presenting with acute intermittent vision changes. Likely amaurosis fugax.

Differential Diagnosis:

- Stroke
- Carotid artery stenosis
- Amaurosis fugax
- Retinal detachment
- Central retinal artery occlusion
- Central retinal vein occlusion

**P:**

Labs: CBC, BMP, aPTT, POC glucose, Troponin, T&S

Imaging/Tests: ECG, CT head non contrast, CTA head and neck, carotid ultrasound, ocular ultrasound, slit lamp exam

Vision change → consult ophthalmology

Initial DDx Based on CC:

- Arteritic anterior ischemic optic neuropathy
- Amaurosis fugax
- Central retinal artery occlusion
- Central retinal vein occlusion
- High altitude retinopathy
- Open-angle glaucoma
- Optic neuritis
- Posterior Reversible Encephalopathy Syndrome (PRES)
- Retinal detachment
- Temporal arteritis
- Traumatic optic neuropathy
- Vitreous hemorrhage
- Stroke

Adjusted DDx After H&P:

- Stroke
- Carotid artery stenosis
- Amaurosis fugax
- Retinal detachment
- Central retinal artery occlusion
- Central retinal vein occlusion