INTOXICATIONS AND INFECTIONS

Date:  
February 6, 2019

Resources:  
Intoxications and Infections - Handout (Gruener)  
Intoxications and Infections - PowerPoint (Gruener)

KEY CONCEPTS & LEARNING OBJECTIVES (What you need to demonstrate on an exam in order to pass the test!)
I. Demonstrate the ability to:
   a. Contrast the clinical features and pathophysiology of tetanus versus botulism.
   b. List the neurotoxic effects of: carbon monoxide, lead poisoning (adults versus children), and stimulant drugs like cocaine.
   c. Define the neurological syndromes caused by alcohol and how to treat them: acute intoxication, alcohol withdrawal, and Wernicke-Korsakoff syndrome.
   d. Contrast acute meningitis, chronic meningitis, and encephalitis with regards to: typical signs and symptoms, cerebrospinal fluid (CSF) abnormalities, CT or MRI brain scan results, and initial empirical antibiotic or antiviral treatment.
   e. Recognize that CSF abnormalities most suggestive of acute bacterial meningitis are increased polymorphonuclear WBCs and decreased glucose and circumstances where a brain CT scan should be performed prior to LP.
   f. Define and provide clinical characteristics: Herpes simplex encephalitis, West Nile virus infection, post-polio muscular atrophy, Zika virus infection (and congenital Zika syndrome), Herpes zoster and Progressive multifocal leukoencephalopathy.
   g. List the neurological syndromes involving peripheral nerve, muscle, spinal cord, and brain in patients with acquired immunodeficiency syndrome (AIDS).
   h. Explain how an abscess can adversely affect the nervous system.
   i. Define a prion disease, list signs/symptoms of Creutzfeldt-Jakob dementia.

II. As your education progresses you will begin to demonstrate the integration of your knowledge by:
   a.) Suggest a site of dysfunction that would explain signs and symptoms in a clinical case presentation
   b.) Based on a clinical presentation identify the (expected) site of abnormality on an MRI (or CT) scan of the brain
   c.) Develop 2-3 potential diagnoses, appropriate to the patients’ clinical scenario, course and medical history, which would explain the etiology of their difficulty.

Additional resources for those who are really (we mean really) interested!