

DYNAMIC LEARNING EXERCISE

INSTRUCTOR KEY

Altered Mental Status Differentials

Instructor Notes:

This is an exercise in developing a differential diagnosis. Don't tell the students this until they have completed question 1.

After they have completed question 1, explain this is how seasoned EMS and medical providers think. They will have treatments for diabetes and possibly overdose (naloxone). Identification of stroke is important to transport to an appropriate facility and make notifications.

You may have to help focus some of the things students say. For example, stroke, seizures, and overdose are very likely. Anaphylaxis is less likely because respiratory or skin signs would likely be present (although hypoxia can cause an altered mental status). Differentiating the zebras from the horses may be necessary.

[A blank student copy of this exercise is included at the end of this packet.](#)

You are called to the scene of a "man down." You arrive to find a man on the ground outside a local supermarket. The man appears to be responsive but a little confused. He can follow directions and answer basic questions. He is in his 40s-50s. He shows no signs of injury or trauma (e.g. getting assaulted or hit by a car).

1. List at least 5 medical conditions that may be causing the patient's altered mental status.

Students may choose stroke, seizure, alcohol overdose, and diabetic conditions. Sepsis, dementia, disability, developing SDH from prior injury and others are less likely, but may be chosen. And there are many others. It is your job to facilitate.

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2. For each of the conditions above, list two or three things that might help you confirm that diagnosis on scene.

Have the students come up with these. They may include BG monitoring, medical history, stroke scale, odors, things found on scene, bystander or family information, etc.

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