

Is It More Than a Cold?

Nandan R. Hichkad, PA-C, MMSc

A 70-year-old woman presents to the urgent care clinic with a week-long history of cold and cough that she feels is getting worse. She reports subjective fever and chills, as well as an occasional pain in the right side of her chest when she breathes. She has been taking OTC products with limited relief.

Her medical history is significant for mild hypertension. She denies smoking. On physical exam, you note an elderly female in no obvious distress. She is afebrile, with normal vital signs. Pulse oximetry reveals an O₂ saturation of 98% on room air. Auscultation of her lungs demonstrates a little bit of mid bronchial congestion and perhaps some bibasilar crackles.

You order a complete blood count as well as a chest radiograph (shown). What is your impression?



Nandan R. Hichkad, PA-C, MMSc, practices at the Georgia Neurosurgical Institute in Macon and is a clinical instructor at the Mercer University School of Medicine, Macon.

ANSWER

The radiograph does not demonstrate any evidence of infiltrate or pleural effusion. However, of note is a rather large lytic lesion involving the posterior aspect of the right fourth rib. This finding is very concerning for either a primary bone neoplasm or (more likely) a metastatic one.

The patient denied any history of cancer. She was promptly referred to Hematology/Oncology for further evaluation and workup. At last update, she had undergone a bone marrow biopsy, with preliminary pathology results suggestive of a plasma cell neoplasm. **CR**

