

**QUESTION**  
 A 65-year-old male patient with a long history of hypertension and a recent diagnosis of type 2 diabetes mellitus is being treated with lisinopril and metformin. He reports feeling increasingly fatigued and has noticed some swelling in his lower extremities. His blood pressure is 150/95 mmHg, heart rate is 78 bpm, and oxygen saturation is 96% on room air. Physical examination reveals bilateral lower-extremity edema and a clear lung field. Laboratory tests show a serum sodium of 132 mEq/L, potassium of 3.8 mEq/L, and a creatinine of 1.2 mg/dL.

**ANSWER**  
 The patient's symptoms and physical findings are consistent with fluid overload, likely due to the combination of hypertension and heart failure. The elevated blood pressure and lower-extremity edema suggest a volume overload state. The clear lung field and normal oxygen saturation indicate that there is no acute pulmonary edema at this time. The patient's electrolyte levels are within normal limits, and the creatinine level is stable.

## KEY POINTS



**CLINICAL CORRELATION**  
 The patient's symptoms and physical findings are consistent with fluid overload, likely due to the combination of hypertension and heart failure. The elevated blood pressure and lower-extremity edema suggest a volume overload state. The clear lung field and normal oxygen saturation indicate that there is no acute pulmonary edema at this time. The patient's electrolyte levels are within normal limits, and the creatinine level is stable.