

### QUESTION

1. A patient with a long history of alcohol abuse presents with a 2-week history of weight loss, weakness, and confusion. On admission, the patient is found to have a serum sodium level of 125 mEq/L, a serum glucose level of 100 mg/dL, and a serum urea nitrogen level of 18 mg/dL. The patient's physical examination is unremarkable. The patient's medical history is significant for chronic alcohol abuse, hypertension, and type 2 diabetes mellitus. The patient is currently taking lisinopril, metoprolol, and insulin. The patient's laboratory studies are as follows:

Test	Result
Serum sodium	125 mEq/L
Serum glucose	100 mg/dL
Serum urea nitrogen	18 mg/dL
Serum creatinine	1.2 mg/dL
Serum albumin	3.5 g/dL
Serum total bilirubin	1.5 mg/dL
Serum aspartate aminotransferase (AST)	45 U/L
Serum alanine aminotransferase (ALT)	35 U/L
Serum gamma-glutamyl transaminase (GGT)	120 U/L
Serum lactate dehydrogenase (LDH)	250 U/L
Serum ferritin	100 ng/mL
Serum ferritin (reference range)	50-200 ng/mL

2. A 65-year-old male patient with a long history of alcohol abuse presents with a 2-week history of weight loss, weakness, and confusion. On admission, the patient is found to have a serum sodium level of 125 mEq/L, a serum glucose level of 100 mg/dL, and a serum urea nitrogen level of 18 mg/dL. The patient's physical examination is unremarkable. The patient's medical history is significant for chronic alcohol abuse, hypertension, and type 2 diabetes mellitus. The patient is currently taking lisinopril, metoprolol, and insulin. The patient's laboratory studies are as follows:

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### ANSWERS



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