

January 10, 2017 AHD Objectives

Hypertension:

1. Define normal blood pressure, pre-hypertension, stage 1 and stage 2 hypertension. Describe the end-organ injuries that occur due to long-standing hypertension.
2. Describe the patient(s) who should be evaluated for secondary causes of hypertension and the preferred diagnostic strategy for each identifiable cause.
3. Identify the medications which are first-line anti-hypertensives for non-black patients and black patients *without* DM and CKD and *with* DM and CKD.
4. Identify the BP targets for patients aged ≥ 60 years old, < 60 years old, patients with chronic kidney disease and patients with diabetes.
5. Define hypertensive urgency and emergency and the indications for admission to the hospital and ICU treatments.

Hyperkalemia:

1. Describe the laboratory evaluation that must be obtained to work up the hyperkalemic patient. (Comment on pseudohyperkalemia, EKG findings and sensitivity, and the required urine studies.)
2. Describe the acute management of the hyperkalemic patient including steps to stabilize the myocardial membrane, shift potassium into the cells, and lower the total body potassium. Know the appropriate doses, methods of delivery, and contraindications to calcium gluconate, insulin and glucose, beta-agonists, and kayexalate.

Hematuria and Stones:

1. Define asymptomatic microscopic hematuria and give a differential diagnosis.
2. Know the percentage of patients with **microscopic** hematuria and **gross** hematuria that have urinary tract malignancy.
3. Explain why a urine dipstick positive for blood is inadequate to diagnose hematuria and why a microscopic analysis is essential. Describe reasons for a false negative dipstick test and a false positive dipstick test.
4. Describe the five categories of kidney stones and their prevalence.
5. Know the clinical presentation and evaluation of the patient with suspected kidney stone, and its medical management and role of the urology consultant in the management of kidney stones.