**Academic Half Day Objectives – November 12, 2019**

**Adrenal Insufficiency:**

1. Describe the clinical symptoms, physical exam findings, and laboratory findings that should prompt an internist to suspect adrenal insufficiency.
2. List and describe several genetic disorders, drugs, and disease states that are associated with adrenal insufficiency (at least 3 of each.)
3. Describe the appropriate testing to diagnose adrenal insufficiency in a patient who is stable and a patient who is unstable.
4. Describe the appropriate management of patients with primary adrenal insufficiency who are stable, mildly sick, and critically ill.
5. Know the equivalent doses of prednisone, methylprednisolone, hydrocortisone, and decadron.

**Adrenal Excess:**

1. Describe the clinical symptoms, exam findings, and lab findings that would prompt an internist to suspect Cushing’s syndrome.
2. List several associated diseases.
3. Describe the appropriate testing to confirm the diagnosis.
4. Describe the two main treatment modalities.

**Adrenal Nodules:**

1. Know the appropriate serological tests to perform on an adrenal nodule.
2. List the radiologic features that can indicate a nodule is higher or lower risk.

**Thyroid Nodules:**

1. Know the rate of malignancy in thyroid nodules that are detected on imaging performed for a non-thyroid related reason.
2. List and describe several risk factors for thyroid cancer.
3. Know the first test(s) to order in the step-wise evaluation of a thyroid nodule.
4. Know the next test to order in a patient who has a low (suppressed) TSH.
5. Know the indications for FNA in patients with a thyroid nodule less than 1 cm in diameter whose TSH is normal or high. (4 indications)
6. Know the 4 possible pathologic results of a thyroid nodule FNA and the correct clinical management of each of these results.