An otherwise healthy 20-year-old male presents with a 3-month history of generalized pruritus. On further questioning, he states that he has been more tired lately and has lost some weight, though he attributes both of these changes to his recent college final exams. He has not taken any medications or over-the-counter supplements, has not travelled in the last 6 months, and is not aware of any family or friends who are itchy. The skin examination is remarkable only for generalized, slightly dry skin. While you are examining the patient, he recalls having noticed a painful “bump” on his neck the day after a post-finals party. Palpation of the neck reveals bilateral, enlarged cervical lymph nodes.

Which next step(s) should you take?

(A) Send him home and recommend he get some sleep

(B) Order a complete blood count with differential

(C) Give a trial of emollients and topical steroid

(D) Order a heterophile test for mononucleosis
Both (B), order a complete blood count with differential, and (D), order a heterophile test for mononucleosis, are appropriate.

The duration of the patient’s pruritus along with his systemic symptoms warrant further evaluation. The scenario could be consistent with both Hodgkin’s lymphoma and mononucleosis, though patients with mononucleosis are less commonly pruritic unless they have been treated with amoxicillin (which is associated with a pruritic rash in patients with mononucleosis).