Weekly Calendar

7/28: Noon Report—Green Medicine
7/29: Senior Change Day—No Noon Report Master Teacher Program—5PM, MSB 3351
7/30: Medical Grand Rounds: Marta Render—”Update: Lung Cancer Screening” Intern Change Day
7/31: Academic Half Day—Liver Disease Weesner Prep—CHF
8/1: Intern Report—Cogorno/Northcutt Senior Report—Hani Alkhatib
8/2: Resident-Faculty Soccer Game—4PM

Resident-Faculty Soccer Game

Resident/Faculty Co-Ed Soccer Game on Saturday, August 2nd at 4 PM.
Where: Amberley Park: 7149 Ridge Rd Cincinnati 45237—Across from French Park
Juice Boxes and Orange Slices? Yes! Provided by Cory Lucas, Soccer Aficionado

Anonymous Feedback

Our website has a section for anonymous feedback. Think of this like an electronic suggestion box that you can use at any time. The message will be sent directly to Dr. Warm, and is completely anonymous. If you have constructive feedback that you would like to share, please use this tool. The link is: http://intmed.uc.edu/education/residency/feedback.aspx
Solitary Pulmonary Nodule

Merranda Holmes and Nida Hussain presented a patient with a solitary pulmonary nodule that had significantly increased in size. This brought up the question—*How do I monitor a solitary pulmonary nodule?*

**Determine Risk:**

<table>
<thead>
<tr>
<th>Factors</th>
<th>Low</th>
<th>Middle</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>Size of pulmonary nodules (mm, in diameter)</td>
<td>&lt;8</td>
<td>8-20</td>
<td>&gt;20</td>
</tr>
<tr>
<td>Age (years)</td>
<td>&lt;45</td>
<td>45-60</td>
<td>&gt;60</td>
</tr>
<tr>
<td>Tumor history</td>
<td>No tumor history</td>
<td>With tumor history</td>
<td></td>
</tr>
<tr>
<td>Smoking history</td>
<td>Never</td>
<td>Smoking, &lt;1 pack per day</td>
<td>Smoking, ≥1 pack per day</td>
</tr>
<tr>
<td>History of smoking cessation</td>
<td>Having quit smoking for ≥7 years</td>
<td>Having quit smoking for &lt;7 years</td>
<td>Never quit smoking</td>
</tr>
<tr>
<td>History of asbestos exposure</td>
<td>No</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>Nodule characteristics</td>
<td>Smooth</td>
<td>Lobulated</td>
<td>Burn-like</td>
</tr>
</tbody>
</table>

**Monitor Appropriately:**

<table>
<thead>
<tr>
<th>Nodule size Without risk factors for lung cancer</th>
<th>With risk factors for lung cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td>≤4 mm</td>
<td>Selective follow-up</td>
</tr>
<tr>
<td>&gt;4-6 mm</td>
<td>First follow-up within 12-24 months, and a further follow-up should be arranged within 18-24 months if the condition is stable</td>
</tr>
<tr>
<td>&gt;6-8 mm</td>
<td>First follow-up within 6-12 months, and a further follow-up should be arranged within 18-24 months if the condition is stable</td>
</tr>
<tr>
<td>&gt;8 mm</td>
<td>First follow-up within 3-6 months, and the second follow-up within 9-12 months; and a further follow-up should be arranged within 24 months if the condition is stable</td>
</tr>
</tbody>
</table>

More info on Solitary Pulmonary Nodules:


Drug Induced Liver Injury

Rita Schlanger presented a patient with fulminant liver failure thought to be secondary to Drug Induced Liver Failure. A few highlights of Drug Induced Liver Failure

- Antibiotics are the class of medications most commonly involved in drug induced liver injury. The most common drug is Amoxacillin/Clavulonate, followed by isoniazid, TMP-SMX, and nitrofurantoin.
- Drug Induced Autoimmune-like Hepatitis responds to steroids and generally does not recur after a steroid taper.
- Drug induced liver injury with a hepatocellular pattern and jaundice has a mortality of approximately 10%.
- N-Acetylcystine should be considered for those with non-acetaminophen drug induced liver failure as it has been shown to improve transplant free mortality.

More info on Drug Induced Liver Injury:

July Curriculum Test

DUE NOW!

Congratulations to the Intern class for their early performance on the Blackboard Curriculum test. Seniors have until Monday to complete the test. Anyone with an incomplete test on change day will be sent to the Neurology Floor team.

Master Teacher Pathway

The master teacher pathway starts the year next Tuesday July 29th at 5PM in MSB Room 3351.

“No matter how highly trained people are, few can sustain performance on their own. That’s where coaching comes in.”

PNC Pavilion Riverbend Summer Concert Schedule:

- John Fogerty—Friday July 25th
- Sara Barielles with Lucius and Emily King—Tuesday July 29th
- Keith Urban—Thursday July 31st
- Luminocity 2014 Live Simulcast—Sunday August 3rd
- Onerepublic with The Script and American Authors—Tuesday August 5th
- Toby Keith—Friday August 8th
- Panic! Ath the Disco—Tuesday August 12th
- Drake vs Lil Wayne—Friday August 5th
- David Gray—Saturday August 15th
- Kings of Leon—Friday August 22nd
- Rascal Flatts with Sheryl Crow—Friday September 5th
- Edward Sharpe & Magnetic Zeros—Sat September 6th
**Cognitive Errors in Diagnosis and How to Minimize Them**

In today’s Morbidity, Mortality and Impovement, Steve Gay discussed how we can minimize Errors in Diagnosis highlighting cases of Diagnosis Momentum, Framing Effect, and and Premature Closure. One of the first tips to avoid cognitive errors is to understand how we make mistakes.

**Cognitive Error of the Week:** **Psych-Out Error:** Psychiatric patients are vulnerable to Diagnosis Error because medical conditions—hypoxia, delirium, metabolic abnormalities, infections—may exacerbate psychiatric illness and be misdiagnosed as psychiatric disease.


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**Duty Hours!**

Please make sure to document your duty hours on Medhub each week. If there are duty hours issues this helps us address any systems issues!

**Interns**—We want you out for 10 hours, but you must be out for at least 8 hours! You can work up to 16 hours—you can stay past 16 hours only if you have handed off and are stabilizing one patient!

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**Academic Half Day!**

Michael “Goose” Sabbah mulls over interesting thoughts about ACS.

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**SHOUT OUTS!!! (Let us know who Rocks)**

- **Ashley Jenkins, Li’ Rowley, and Maggie Benjamin** for doing an amazing job running all of the codes and rapids in July!

- **Danielle Clark, Kristine Dematta, and Avanti Jakatdar** for brainstorming resident activities and getting nominated for social chairs! Let us know if you or someone you know would like to organize social events this year.

- **Keaton Jones**—He reportedly has the highest flu vaccination rate of his long-block patients and is the first resident to surpass Dr. Warm’s flu vaccination rate!

**Redaction:** It has come down from above that Dr. Warm and Dr. Mathis in fact won 2 out of 3 foosball matches against Tim Williams and Samer Alsidawi. Apologies to those who got their feelings hurt.