Weekly Calendar

7/20: Noon Report: Green Team
7/21: Noon Report: Red Team
7/23: Weesner Prep: Syncope with Li’
   Academic Half-Day: Pneumonia with Elise and Dr. Hebbeler-Clark
7/24: Intern and Senior Noon Reports: Yellow Team

Med vs. Peds Part 1: Kickball!

The Pediatrics Residents have challenged us to a series of athletic competitions to occur over the course of this year. The first will be a kickball game TOMORROW. ALL residents are welcome!

Saturday, July 18th 3pm
1501 Sherman Avenue (Corner of Victory Parkway)

There was vigorous disagreement over the final score of last year’s flag football match.

No mercy this year!

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
Electrolytes by Brigadier General Bensman:

Management of abnormal electrolytes:
1. Is it a good sample? Repeat it
2. Is the patient symptomatic? History, EKG
3. Give emergent treatment if needed
4. Determine the state:
   • Electrolyte shift OR
   • Intake and output do not match
5. Determine the etiology
   • Normal renal physiology: if lyte is LOW in plasma, it should be LOW in urine (low FENA, low TTKG)
   • If it is not, kidney is inappropriately dumping (Dysfunction? Abnormal hormonal control?)
6. Give definitive treatment. Determine:
   • The safest mode of correction
   • The safest rate of correction

Hypotension by Lieutenant Li’:

1. Shock is a mismatch in the supply of oxygen and tissue demand
2. 3 types of shock: Hypovolemic, Cardiogenic and Distributive
3. Mean Arterial Pressure relies on 2 parameters: Cardiac Output and Systemic Vascular Resistance

- The easiest physical exam finding to help determine type of shock: What is the temperature of their extremities?
  ⇒ Warm=Distributive Shock
  ⇒ Cool=Hypovolemic or Cardiogenic
- When waiting to determine the cause of hypotension it is ok to give a little bit of fluid to help support perfusion

Don’t look so SHOCKed
2014 NSTEMI Guidelines...in Mnemonic form

Forget MONA-B. In ACS, go BANANAS!

B.A.N.A.N.A.S.
B. Beta Blocker within 24 hours
A. Aspirin 325mg chewed
N. Nitrates 0.4mg SL Q5min x3
A. Antiplatelet Plavix or ticagrelor
N. uNfractionated heparin (or LMWH)
A. Atorvastatin 80mg once, then daily

Risk Stratify with the TIMI score #AMERICA

A. Age (>65 years)
M. Markers (troponin)
E. EKG changes
R. Risk factors (3+)
I. Ischemic events (2/24H)
C. CAD, previously known
A. ASA use in last 7 days

Vulnerable Populations Update!

Great meeting on Monday! Lots of exciting ideas for this upcoming year. If you could not attend, email Caroline at leecn@ucmail.uc.edu for info. Here’s the recap:
- lots of interest in immigrant, Latino, urban, and global health
- Drop Inn Clinic open! Contact Houman at varghah@ucmail.uc.edu to sign up
- Coming soon: Dropbox folder "Vulnerable Populations" for convenient info
- how to go abroad and reports of past residents, opportunities in Cincinnati
- First pathway noon report in August

Future meetings: 2nd Monday of month at 5:30pm
BOARD REVIEW WITH THE CHIEFS

DUST OFF THOSE OLD STETHOSCOPES, FOLKS. IT’S TIME TO START GEARING UP FOR BOARDS. HERE IS A QUICK PEARL WE LEARNED THIS WEEK:

Q: Pt with sepsis and DIC. He is intubated in the ICU for ARDS. and his AM labs reveal: Hgb 7.6, Platelets of 12,000, WBC of 18. PT of 20s, INR 1.7, aPTT of 44. PBS reveals occasional schistocytes and thrombocytopenia. You order 2U PRBCs and 6 units of pooled donor platelets. 1 hour after platelet transfusion, the count is now 18,000 with copious bloody aspirate from the NG tube. Repeat transfusion of 6 units of platelets, and another hour–repeat count of 21,000. What is the cause for the persistent thrombocytopenia?

A: Alloimmunization. Transfusion of a 6 unit platelet concentrate or 1 apheresis concentrate should raise platelet count by 30,000 10 minutes to 1 hour after transfusion. If there is adequate increment within one hour following transfusion, but a return to baseline within 24 hours, suspect reduced platelet survival: sepsis, DIC, medication induced. Alloimmunization results in little to no increment in the platelet count 10 minutes to one hour after transfusion. Alloimmunization = presence of antibodies which react with foreign antigens on the surfaces of transfused platelets causing their rapid destruction. Dx confirmed by screening patient for HLA antibodies or platelet specific antigens if HLA antibodies are negative. In the interim: cross-match and administer compatible or HLA-matched platelets (if available).

VA Updates from Li’ and Adam

Kudos to the VA residents for filing incident reports despite very busy work days!

- Result: An antibiotic order has changed so that the expiration date default is now after 30 days.
- Result: The lab is now calling physicians with ALL positive sterile body fluid cultures (previously just blood cultures).

Your commitment to patient safety is the impetus for these changes. Thank you for your energy!

Sports on Sundays

Saturday

Sport: Kickball—Med vs. Peds game
Location: 1501 Sherman Avenue (Corner of Victory Parkway)
Time: 3pm tomorrow, Saturday July 18th
Weekend To-Do:

**July 18: The Crazy Cardboard Boat Regatta**, 11 a.m.-3 p.m., Voice of America MetroPark, 7850 Voice of America Park Drive, **West Chester Township**. Participants design and build human-powered boat, made of cardboard. Music, food and drinks. Benefits MetroParks of Butler County. Free for spectators; parking pass required, free to Butler County residents. 513-867-5835; [www.yourmetroparks.net](http://www.yourmetroparks.net).


Through **July 19: US Rowing Club National Championships**, 8 a.m.-6 p.m. Friday-Saturday, 8 a.m.-3 p.m. Sunday, East Fork State Park, Ohio 125, **Bethel**. Beach Area. Five-day regatta features national champions being crowned in more than 70 events across under 17, under 19, intermediate and senior categories. Free for spectators. 800-314-4769; [www.usrowing.org](http://www.usrowing.org).

**July 18th: Adult Down-Hill Big-Wheel Racing.** Clear your calendar - It's going down-hill fast! DANGER WHEEL kicks off on July 18th, and you're invited to take part in the festivities. PENDLETON - East 12th Street (378 E 12th St) is our starting line for a day of crash-course racing, food trucks and brews. Come one, come all, bring a guest, and hang loose. This is going to be epic!

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**TRIVIA**

Patients diagnosed with the condition seen on this xray are at an increased risk of what cardiac pathology?

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

- Shout out to the intern trivia team the Hoosker Doos (or Don’ts?) for winning pub trivia AGAIN! I don’t know how long I can keep these trivia stars on here...
- Shout out to **Caitlin Richter** from Hani for helping him with his fellowship application
- BIG FAT shout out to **Malini Reddy** for going the extra mile to cover for fellow residents
- Shout out to **Katie Donnelly** for being a rockstar AOD and helping out her colleagues with some difficult patients.
- Shout out to **Thomas Getreu** for doing his best Ocean’s Eleven impression in Las Vegas.
- Shout out to the entire VA Ward Team squad who is raging against the machine of a busy Always-Be-Admitting VA Hospital—with smiles on their faces.

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Congrats to Leslie Applegate for correctly identifying Polio in last week’s trivia!