Weekly Calendar

12/7: Yellow Team Noon Report in noon report room
12/8: Purple Team Noon Report with CANDIDATES in MSB 5051
   ***note location change for recruitment season***
12/9: Grand Rounds: Donald Lynch, MD: “Transcutaneous Interventions for Aortic Disease”
12/10: AHD: Patient Safety with Adam
       Weesner Prep: Adrenal and Pituitary with Li’
12/11: Blue Team Noon Report with CANDIDATES in MSB 6051
   ***note another location change for recruitment season***

iCOMPARE

Next iCOMPARE consent is Monday at 12:45pm in the noon report room. Interns, if you have not yet been consented and you want to wear a super cool gadget and make over $100, please be sure to attend.

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
Cerebral Venous Thrombosis

Risk factors:
- Thrombophilia
- Hyperestrogenemia
- Trauma
- Infection
- Chronic inflammatory disease
- Hematologic disorders
- Cancer
- Nephrotic syndrome

Common presenting signs:
- Headache (90%)
- Diffuse, often progressive
- Can be thunderclap or migrainous
- Blurry vision or diplopia

Sequelae:
- Intracranial hemorrhage
- Intracranial hypertension
- Hydrocephalus
- Seizures

**Headache RED FLAGS**

<table>
<thead>
<tr>
<th>Sudden Onset</th>
<th>mass, temporal arteritis</th>
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</thead>
<tbody>
<tr>
<td>Different or New Headache (&gt;50yo)</td>
<td>bleed, mass, infection</td>
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<tr>
<td>AMS/Seizure</td>
<td>infection, malignancy</td>
</tr>
<tr>
<td>Immunosuppression</td>
<td>eclampsia, thrombosis</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>glaucoma, temporal arteritis</td>
</tr>
<tr>
<td>Vision Changes</td>
<td>meningitis, SAH</td>
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<tr>
<td>Positional</td>
<td>worse flat = concern for mass</td>
</tr>
<tr>
<td>Meningeal Signs</td>
<td>anticoagulation (new generation)</td>
</tr>
<tr>
<td>Medications</td>
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</table>

**GOT HEADACHE?**

When do I consult Neurology?
- In the presence of a red flag
- Intractable over several days

**In-hospital Headache Treatment**
- Acetaminophen 1,000mg
- Toradol 30mg or ibuprofen 600mg
- Metoclopramide 10mg IV or PO
- Prochlorperazine 25mg IV or PO
- Treat nausea
- Narcotics should be second line
Fleeces on Fleek

Brrrrrrrr! It’s finally cold out there. Several residents have been working hard to plan for this year’s fleeces order. The consensus is full zip Columbia fleeces in Mens or Womens cut. Logo shown below with an option to add your name.

Price will be about $30 (+ $15 for optional name embroidery), less if a higher quantity are ordered.

Please sign up on this google doc by next Friday, December 11th:
https://docs.google.com/spreadsheets/d/1_RgCvb23F-P2o1RrxojiTxSiGxgqPjiwm3hqL90D0OIQ/edit#gid=0&vpid=A1

Please direct questions to Javier Baez.

Q: A 37-year-old woman is evaluated for a 1-week history of headache. She describes the headache as constant, worse when she first awakens, and characterized by a feeling of increased pressure. She reports no other focal neurologic symptoms. The patient has a 10-pack-year history of tobacco use. Her only medication is a low-dose estrogen oral contraceptive. PE: AF, BP is 112/78, pulse is 62 and regular, and RR is 16/min; BMI is 37. Bilateral papilledema is noted. The Valsalva maneuver increases the headache pain. All other general and neurologic examination findings are unremarkable. What is the next best diagnostic test?

A: Magnetic Resonance Venography. Her headache, which is worse in the morning and with performing the Valsalva maneuver, is consistent with one caused by elevated intracranial pressure. Given the headache characteristics, her history of tobacco and oral contraceptive use, and the presence of papilledema, she most likely has dural sinus venous thrombosis. Dural sinus venous thrombosis may present with signs and symptoms of intracranial hypertension (headache, papilledema, and visual problems; focal neurologic findings or seizures; and mental status changes: stupor and coma) Major risk factors in adults include conditions that predispose to spontaneous thromboses, such as inherited or acquired thrombophilia, pregnancy, oral contraceptive use, malignancy, sepsis, and head trauma. Other diagnostic possibilities include pseudotumor cerebri and viral or bacterial meningitis. PMID: 15858188

normal leukocyte count
a platelet count of 322,000/µL
INR of 1.1
aptt of 36s
MRI brain without contrast is normal

Team GRIT
Next resiliency large group session is this week! We will be reviewing the work groups on each of our initiatives:
• Peer Support and Surveillance
• Finding Meaning in Medicine
• Wellness Activities
• Positive Messaging
• Mindfulness and Appreciation in Practice
Time: 5:30pm December 9th
Location: UH 7104 (Noon Report Room)
If you have any interest in being a part of our resiliency group, please come to the meeting!

Master Teacher Program
Congratulations to the new resident members of the Master Teacher Program!
Casey Philipsborn   Leslie Applegate
Marc Guerini        Greg Mott
Betsy Larder        Matt Lambert
Greg Wigger         Elyse Harris
Erin Connolly       Rita Schlanger
Joseph Cooley       Leila Borders
Jon Janiczek        Jessica Scott
Weekend to-do!

Dec. 4-5: Redsfest, 3-10:30 p.m. Friday, 11 a.m.-6:30 p.m. Saturday, Duke Energy Convention Center, 525 Elm St., Downtown. Meet players and coaches, kids fun zone, Reds Hall of Fame exhibit; www.reds.com/redsfest.


Dec. 5: Macy’s Downtown Dazzle, 6:30 p.m., Fountain Square, Fifth and Vine streets, Downtown. Santa rappels down the side of the 525 Vine Building office tower to the Macy’s rooftop at Fountain Square to kick off holiday fireworks display. The 20-minute family-friendly program also features holiday music. Theme: Give Back for the Holidays (Choir begins 5:45p) Free. 513-421-4440.


TRIVIA

Physicians routinely use “Normal Saline” as their intravenous fluid of choice. Why is it called "normal"?

 First correct answer to Stephen wins a $5 Copper Moon gift card!

Long Davalos won last week’s trivia, which was everyone’s favorite Abx: Vancomycin!

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

-to the resident teams who rocked this week’s applicant noon reports: Perry Lin, Ashley Jenkins, Clay Turner. And to ALL of you who were there to contribute to the awesome stimulating discussion!

-to Mike Sabbah for proactively recommending that we change our patients’ blood pressure goals to follow SPRINT, “1 month before UpToDate”.

-to Kantha Medepalli, who is earning enormous praise from her supervisors in the ED, kicking butt and taking names in the B Pod.

-to Jeremy Sorkin, Pankti Shah, Michael Sabbah, Dorothy Jung, and Megan Caroway for rocking a busy CVICU last month.

-to all of our third years headed to fellowship next year. What an exciting match! We are especially excited for those of you we get to hold onto here.