**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://www.med.uc.edu/intmed/residency/internal-medicine/residency-feedback](http://www.med.uc.edu/intmed/residency/internal-medicine/residency-feedback)
NR Review w/the Co-chief: Happy SWEETest Day!

Blue team presented a case of Sweet syndrome. Acute febrile neutrophilic dermatosis is an uncommon inflammatory disorder characterized by the presence of inflammatory papules, plaques, or nodules on the skin, systemic symptoms, and neutrophilic infiltration of the skin. Sweet syndrome is often divided into three categories based on etiology: classical Sweet syndrome, malignancy-associated Sweet syndrome, and drug-induced Sweet syndrome. Classical Sweet syndrome may occur in the setting of a variety of medical conditions but most frequently associated with infections (e.g., URI and gastroenteritis) with an incubation period of 1-3 weeks postinfection, inflammatory bowel disease, and pregnancy. The most common causes of malignancy-associated Sweet syndrome and drug-induced Sweet syndrome are acute myelogenous leukemia and granulocyte-colony stimulating factor (G-CSF), respectively. The cutaneous lesions of Sweet syndrome are typically painful, erythematous to violaceous papules and plaques. Pseudovesiculation and pustule formation are often present. Fever, malaise, joint pain, and muscle pain often accompany the cutaneous lesions. Involvement of internal organs may also occur. Leukocytosis and elevations in ESR and CRP levels are common. The differential diagnosis includes vasculitis (usually medium-vessel like PAN), pyoderma gangrenosum, Behçet’s, cutaneous manifestations of IBD, autoimmune bullous diseases, bullous leukocytoclastic vasculitis, IgA bullous dermatosis, drug eruption, and infectious processes. Diagnosis with biopsy reveals papillary dermal edema and perivascular and interstitial lymphohistiocytic and neutrophilic infiltration. Treatment of mild Sweet syndrome (e.g.,<5 % BSA involvement and lack of significant systemic symptoms), high potency topical corticosteroids or intralesional corticosteroid injections (Grade 2C). For more extensive involvement and/or systemic symptoms, suggested treatment is with systemic glucocorticoid therapy (Grade 2C). If systemic glucocorticoids are contraindicated or cannot be tolerated, treatment w/colchicine or dapsone is suggested (Grade 2C).

Click here to read the following review article! Cohen, Philip R. “Sweet’s Syndrome – a Comprehensive Review of an Acute Febrile Neutrophilic Dermatosis.” Orphanet Journal of Rare Diseases, BioMed Central, 26 July 2007.

GRAND ROUNDS ROUNDUP

Amy Herman, an art historian and attorney, trains members of the FBI, NYPD, Navy SEALs, and now UC while at Grand Rounds! She discussed “The Art of Perception” and how honing this skill and correctly communicating our experiences can impact our careers and patients’ lives. Here are some links to learn more!

Book/Author Website  TEDEdTalk

Ridgeway Low-Acuity Unit

Is your patient ready for discharge but will be waiting all weekend for Pre-cert? Is your patient ready for SNF but is unable to be placed? Consider Ridgeway! If you think your patient might be a candidate, place a Consult order for a Ridgeway Medicine Transfer and call the GIM Consult Attending listed in Amion. They will assess whether your patient is appropriate candidates for Ridgeway. Please make sure to share a Discharge Summary. And remember, this is a TRANSFER and NOT a Discharge.

Patient Requirements:
• Minimal medical needs
• On Internal Medicine team OR
• On Subspecialty team
• Potential complex barriers to discharge

Not eligible:
• Hospice
• Observation < 3 days
• From MSD or ICU
• Needs sitter or telesitter

T H E  S T E T H O S C O O P
On Osmosis you can find 17 questions written by our residents.

1) Open the app, 2) Click on School at the top to join the UC Internal Medicine Group or copy/paste the link.
November Election

There are many health-related issues on the ballot this fall, so make sure you get out to vote—as soon as today!

The Hamilton County Indigent Care Levy is one of them; it provides funding to UCMC and Children’s Hospital to pay for medical services for people who are unable to afford them. Read a simplified explanation here, or find the most recent detailed report here.

Need to register to vote in Hamilton County? Have you recently moved and need to update your info? CLICK HERE

Medical Trivia

A 38yo male presents to an infertility clinic with the following CXR. What do you see in the CXR and what is his Dx?

Congrats to Max Cruz for IDing Peutz-Jeghers syndrome, the hamartomatous polyp that caused intussusception, and the patient’s increased risk of malignancy! Suhas, Nikki, Rachel, Joanna, Julie Broderick-Gomez, and Matt Lambert were just a few minutes behind!
Weekend To-Do!

Friday: **Foo Fighters**, 8 p.m., U.S. Bank Arena, 100 Broadway, Downtown. With the Struts. 800-745-3000; ticketmaster.com.
- **The Zombie Odyssey**, 9 p.m. Friday, 3 and 9 p.m. Saturday, 3 and 5 p.m. Sunday, Know Theatre of Cincinnati, 1120 Jackson St., Over-the-Rhine. Unexpected story about humanity of zombie is unique blend of physical theater and radio drama and unfolds in 3 episodes. Through Nov. 4. $15. 513-300-5669; www.knowtheatre.com.

- **Halloween Bar Crawl**, noon-9 p.m., Downtown Cincinnati. Put on your coolest or scariest costume and drink your way through OTR and The Banks. $25.99. 513-745-9893; bit.ly/2fOFAsC.

Sunday: **Cincinnati Rollergirls Halloween Bout**, 7-9 p.m., Skatetown USA, 8730 Pavilion Drive, West Chester. Cincinnati Rollergirls' Helltown Hellions and Union Terminators face off for second time this fall in special Halloween-themed bout. $7. cincinnatirollergirls.com.

SHOUT OUTS!!!
- To **Luke Lewis** for discharging EIGHT patients on short call without a senior!
- To **Megan Caroway** for adding some Halloween spirit to the lounge.
- To **Eejung Kim** for an awesome senior report presentation.
- To GI Fellows **Steven Gay** and **Meagan Gray** for teaching during Weesner prep!
- To **Meaghan Costello (MS3)** for transporting a patient herself from UC to the Barrett Center for an appointment!
- To **Alex Niu** for being an awesome covering senior during a past weekend!
- To **Jose Gomez-Arroyo** and **James Romano** for their awesome presentation to the Nephrology department.
- To **Yellow Team** for running a tight ship and having fun while doing so! - from a grateful AI!
- To **Matt Lambert** and **Molly Hillenbrand** for pointing out the importance of this upcoming election!!
- To **Ned Palmer** and **Kelly Grannan** for filling in for the R3s at ACP!