



# 09/23/21 Morning Report with @CPSolvers



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<p><b>CC:</b> Anemia</p> <p><b>HPI:</b> 70 F had a left hip replacement 6 y ago, multiple post op infections and hospital admissions s/p multiple hip washout procedures.</p> <p>2 months ago, had severe left thigh pain and was anemic. CT scan showed a large hematoma in left thigh- drain placed. Patient was discharged with drain in situ. On Follow-up- t\drain pulled 4 weeks prior to presentation of thigh pain.</p>		<p><b>Vitals:</b> T:normal HR:60-100 bpm BP: 130/70 mmHg RR: normal  <b>SpO<sub>2</sub>:</b> normal on ambient air  <b>Exam:</b>  <b>Gen:</b> Pallor  <b>HEENT:</b> Profound conjunctival pallor  <b>CV:</b> Normal exam, no murmur  <b>Pulm:</b> Normal exam  <b>Abd:</b> Soft, non tender  <b>Neuro:</b> -  <b>Extremities/Skin:</b> Left hip appeared larger than the right, no external bruising, some bandages were seen.</p>	<p><b>Problem Representation:</b>  70 year old female with a history of atrial fibrillation and a thigh hematoma s/p drainage now presenting with severe macrocytic anemia</p>
<p><b>PMH:</b> Atrial fibrillation</p> <p><b>Meds:</b> Rivaroxaban</p>	<p><b>Fam Hx:</b> -</p> <p><b>Soc Hx:-</b></p> <p><b>Health-Related Behaviors:</b> Drinks 4 beers/day- long term hx</p> <p><b>Allergies:-</b></p>	<p><b>Notable Labs &amp; Imaging:</b>  <b>Hematology:</b>  <b>On past follow up:</b> Hgb:11 (vs 8 on discharge)  <b>On presentation:</b> Hb: 6g/dl(↓↓) MCV: 98(↑) (previous was &gt;100)  WBC: 8K/ microliter  Pit: 350K/microliter INR: 1.7  PTT: 28s Retic: 38.0 (↓↓) Fer: 334  Periph smear: Present hypochromia, plt and WBCs remarkable  <b>Chemistry:</b>  {Na: K: Cl: CO2: BUN: Cr: glucose: Ca: Phos: Mag;} all wnl  AST:nI ALT:nI Alk-P:nI T. Bili: 1.5(↑) D.Bilir: 0.7  <b>Imaging:-</b>  EKG: -  CXR: -  <b>Final Dx: Awaited</b></p>	<p><b>Teaching Points (Dani Cal):</b></p> <ul style="list-style-type: none"> <li>● Anemia: Acute or Chronic?</li> <li>● Anemia caused by blood loss? Does the timing line up? Remember: Just because the patient is bleeding somewhere it does not mean that is the cause</li> <li>● Is surgery the possible cause? Loss of structure? Abnormality? Tissue manipulation?</li> <li>● Consider Chronic Anemia!</li> <li>● Hip enlargement: Compartment Syndrome?</li> <li>● ↓ Hemoglobin: Acute blood loss, Hemolysis Quantitative or qualitative issue?</li> <li>● Macrocytic anemia: Nutritional? Meds? Bleeding? Alcohol? B-12? Folate? Test by withdrawing possible cause</li> <li>● ↓ Hb = ↑ Reticulocyte</li> <li>● Consider vessel integrity</li> </ul>