



Interesting Cases From Guam

Charmaine Gregory MD
FACEP

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Disclosures

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hemoptysis

59 yo F presents with hemoptysis, no recent surgeries, travel, respiratory infection

Est volume ~1 cup prior to arrival

Tachypneic, 25, BP 110/70, HR 110, T 98F

Pale, diaphoretic, anxious appearing, speaking in full sentences

PMH DM, HTN

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hemoptysis

CBC: WBC 12, Hb 11, HCT 33, Plt 100

Course breath sounds on auscultation, +air movement throughout lung fields

Abd: slightly protuberant, nontender

No pitting edema, asymmetric leg swelling

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hemoptysis



- Cavitary lesion on xray
- CT findings

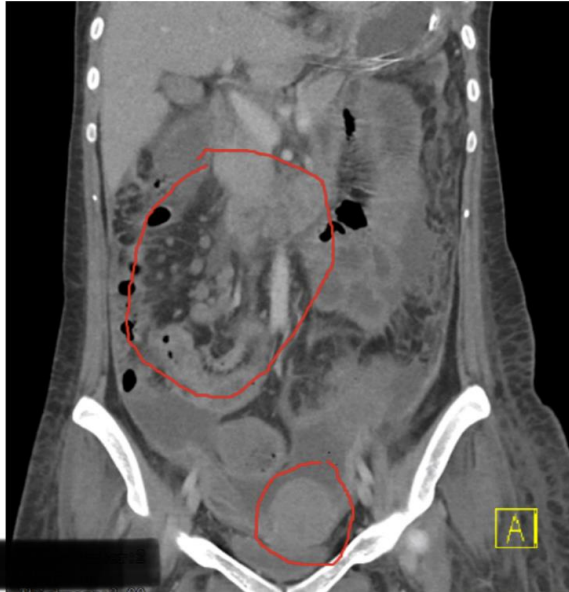


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Case outcome

- Patient did well overnight, admitted
- Had bronchoscopy with confirmed TB
- Did well on TB therapy
- Mental gymnastics: Intubating L bronchus, lateral positioning of patient

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many faces of TB

- 22 yo F presented in septic shock.
- Abdominal CT showed matted nodules
- Laproscopic lymphoma biopsy confirmed diagnosis

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many faces of TB

58 yo F presents with weakness

Unable to move legs for 5 days

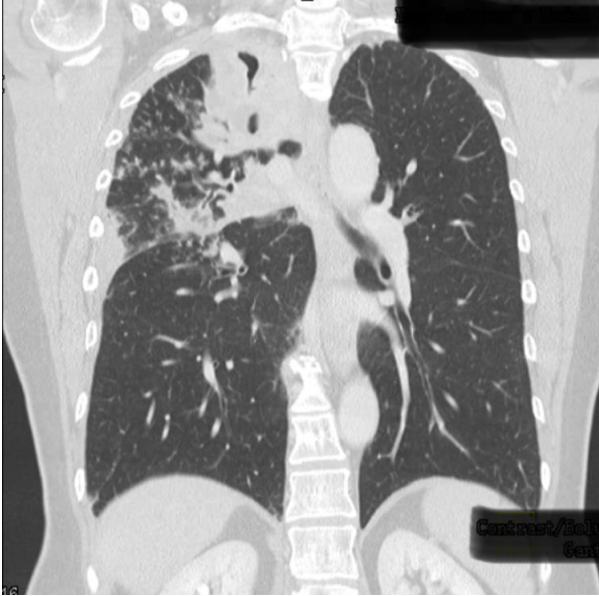
Urinary retention suspicious for cauda equina

MRI showed mass on spinal cord at the level of T10

CXR clear

Mass = TB

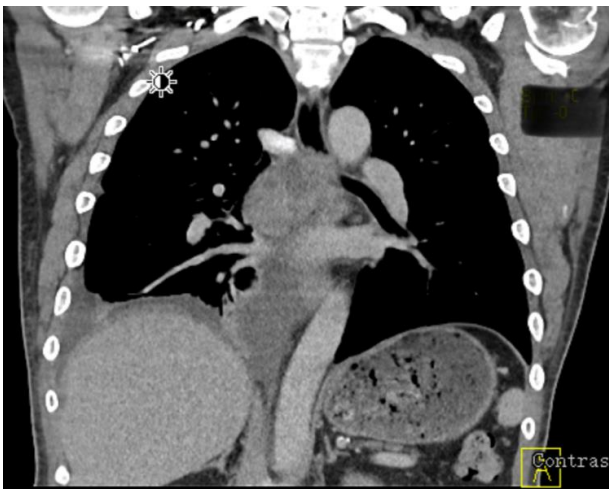
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many faces of TB

- 49 yo F presented with ataxia
- CXR with RUL opacity
- CT chest
- Sputum +TB

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many faces of TB

- 49 yo M dialysis patient with dyspnea
- CXR with widened mediastinum
- CT chest
- BAL +TB

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**PPE looks
the same**



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**hey, doc, I
have a bump
on my back**



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back "bump"

34 yo M DM presents with bump on back for 3 months

Back, chest, L arm and L shoulder pain with movement

Febrile 101F, HR 115, BP 120/70

Sitting crouched and hesitant to move his L side

Patient screamed in pain when LUE was slightly moved to check his L pulses

Large 14cm x 6cm area of fluctuant raised lesion noted over L scapula, no crepitus on palpation of the skin over the lesion and chest wall

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back "bump"

BS 700, pH 7.2, AG 15
WBC 30K

Concern to depth of
abscess penetrating the
chest cavity

CT chest

14

back “bump”



15

back “bump”



16



back
“bump”

*Patient went to the OR for I&D,
washout source control*

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I feel dizzy

- Scombroid poisoning
- Patient to ICU and improved with antihistamines
- Discharged

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I feel dizzy

- Husband and wife present with n/v feeling flush
- Husband HR 35-40
- Symptomatic bradycardia, diaphoresis, vomiting
- Family had been deep sea fishing, at the tuna they caught, everyone was sick

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triage: wound check



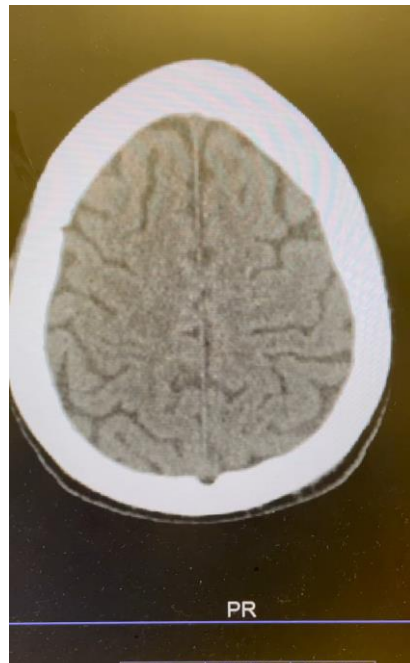
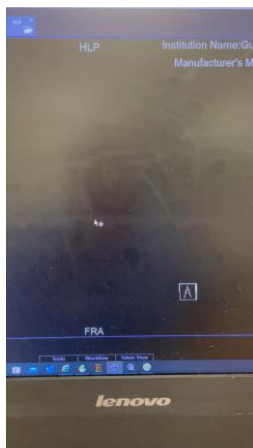
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betel nut



23

wound check



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global neuralgia



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global neuralgia

- Patient is on clofazimine
- Neuralgia side effect

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fever and rash

- 1 y 4 m M with fever, rash
- Refusing to eat but drinking water
- Temp 101.5F
- No pruritus
- Oral lesions
- Immunizations UTD
- Involves palms and soles

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**fever and
rash**

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trauma?

- Machete wounds
- Coconut husk
- MVC
- Burns
- Ortho



33

trauma

- 50 yo M altercation with family member presents with R foot pain
- Deformity of foot



34

trauma

- Lisfranc dislocation



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Thanks

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Questions?