

20th Edition Internal Medicine Core

Dermatology:

Page 3-1, Common Skin Problems > Atopic Dermatitis (AD)

<i>Text currently reads:</i>	<i>Text should read:</i>
<i>Staphylococcus aureus</i> infection, appearing as honeycombing and weeping, is often present in severe cases.	<i>Staphylococcus aureus</i> infection, appearing as honey-colored crust and weeping, is often present in severe cases.

Page 3-15, Inflammatory Skin Disorders > Vasculitis

<i>Text currently reads:</i>	<i>Text should read:</i>
Palpable purpura is the extravasation of red blood cells into the skin and is commonly caused by a small vessel vasculitis . Skin biopsy typically displays leukocytoclastic vasculitis.	Palpable purpura is the extravasation of red blood cells into the skin. It is palpable because of the inflammatory milieu surrounding small vessels. Skin biopsy typically displays leukocytoclastic vasculitis, which consists of both neutrophils and fibrin deposition.

Page 3-37, HIV- and AIDS-Related Skin Lesions

<i>Text currently reads:</i>	<i>Text should read:</i>
– Kaposi sarcoma in HIV is frequently associated with HHV-8 .	– Kaposi sarcoma in HIV is frequently caused by HHV-8 .

Infectious Disease:

Page 4-19, Syphilis [Sexually Transmitted Infections (STIs) > Infectious Genital Ulcers > Syphilis]

<i>Text currently reads:</i>	<i>Text should read:</i>
<ul style="list-style-type: none"> • General paresis is the name given to diffuse cortical disease seen in neurosyphilis. Its numerous manifestations can be remembered with the following mnemonic derived from its name: <ul style="list-style-type: none"> ◦ P = defects in personality ◦ A = reduced affect ◦ R = abnormal reflexes ◦ E = eye problems (Argyll Robertson pupil, which is miotic and irregular; it constricts with accommodation but does constrict to light) ◦ S = defects in sensorium ◦ I = defects in intellect ◦ S = defects in speech 	<ul style="list-style-type: none"> • General paresis is the name given to diffuse cortical disease seen in neurosyphilis. Its numerous manifestations can be remembered with the following mnemonic derived from its name: <ul style="list-style-type: none"> ◦ P = defects in personality ◦ A = reduced affect ◦ R = abnormal reflexes ◦ E = eye problems (Argyll Robertson pupil, which is miotic and irregular; it constricts with accommodation but does not constrict to light) ◦ S = defects in sensorium ◦ I = defects in intellect ◦ S = defects in speech

Page 4-52, Organism-Based Review > Bacteria > Gram-Negative Bacteria (GNB) > Brucella

<i>Text currently reads:</i>	<i>Text should read:</i>
<p>Resistance to a single agent is common, so treatment requires 1 of the following regimens:</p> <ol style="list-style-type: none"> 1) Doxycycline for 6 weeks + streptomycin for 14–21 days or gentamicin for 7–10 days 2) Doxycycline + rifampin × 6–8 weeks 3) Avoid doxycycline in pregnant persons and give rifampin + doxycycline × 6 weeks. 	<p>Resistance to a single agent is common, so treatment requires 1 of the following regimens:</p> <ol style="list-style-type: none"> 1) Doxycycline for 6 weeks + streptomycin for 14–21 days or gentamicin for 7–10 days 2) Doxycycline + rifampin × 6–8 weeks 3) Avoid doxycycline in pregnant persons. Before 36 weeks gestation give rifampin and trimethoprim-sulfamethoxazole (TMP-SMX) for 6 weeks (supplement with folic acid when using TMP-SMX). Give rifampin alone at ≥ 36 weeks gestation and continue until delivery.

Nephrology:

Page 7-3, Renal Tests > Urinalysis (U/A) > Proteinuria

<i>Text currently reads:</i>	<i>Text should read:</i>
<p>Moderately increased albuminuria (formerly microalbuminuria) is albumin excretion between 30 and 300 mg/day (albumin to creatinine ratio [albumin:creatinine] between 3 and 30 mg/g).</p>	<p>Moderately increased albuminuria (formerly microalbuminuria) is albumin excretion between 30 and 300 mg/day (albumin to creatinine ratio [albumin:creatinine] between 30 and 300 mg/g).</p>

Page 7-4, Renal Tests > Estimating Kidney Function > Glomerular Filtration Rate (GFR)

<i>Text currently reads:</i>	<i>Text should read:</i>
<p>The Cockcroft-Gault formula is another acceptable way to estimate GFR. Although it is less accurate than the MDRD and CKD-EPI equations, it can be calculated from basic variables with just the calculator on your smartphone:</p> $\text{CrCl} = \frac{(140 - \text{age}) \times (\text{weight}) \times (0.85 \text{ if female})}{72 \times \text{Scr}}$ <p>(Eq. 1)</p>	<p>The Cockcroft-Gault formula is another acceptable way to estimate GFR. Although it is less accurate than the MDRD and CKD-EPI equations, it can be calculated from basic variables with just the calculator on your smartphone:</p> $\text{CrCl} = \frac{(140 - \text{age}) \times (\text{weight}) \times (0.85 \text{ if female})}{72 \times \text{Scr}}$ <p>(Eq. 1)</p>

Page 7-37, Acid-Base Disorders > Acid-Base Balance

<i>Text currently reads:</i>	<i>Text should read:</i>
$\text{pH} = 6.10 + \log \left(\frac{\text{HCO}_3^-}{(0.03 \times \text{pCO}_2)} \right)$	$\text{pH} = 6.10 + \log \left[\frac{\text{HCO}_3^-}{(0.03 \times \text{pCO}_2)} \right]$

Page 7-48, Disorders of Water Balance > Hyponatremia > Euvolemic Hyponatremia > Primary Polydipsia

<i>Text currently reads:</i>	<i>Text should read:</i>
<p>Primary polydipsia is a psychiatric disorder in which patients consume large amounts of water (as much as v).</p>	<p>Primary polydipsia is a psychiatric disorder in which patients consume large amounts of water (as much as 1 L/hour).</p>

Oncology:

Page 9-36, Hypercalcemia of Malignancy

<i>Text currently reads:</i>	<i>Text should read:</i>
$\text{Ca}^{2+}_{\text{corrected}} = \text{Ca}^{2+}_{\text{measured}} + 0.8 \times (4.0 - \text{alb}_{\text{measured}})$	$\text{Ca}^{2+}_{\text{corrected}} = \text{Ca}^{2+}_{\text{measured}} + [0.8 \times (4.0 - \text{alb}_{\text{measured}})]$