Rash, Reaction, or Red Flag?

Many disorders begin with a red patch on the skin. Some diagnoses are easy to determine, based on clinical presentation and history alone. Others are more elusive, possibly leaving the patient with chronic disease and long-term consequences.

Match the diagnosis to the photo by letter

a. Urticaria
b. Erythema migrans
c. Erysipelas
d. Erythema nodosum

1. The patient, just recovered from a sore throat, noticed discrete red nodules that eventually coalesced into a single large edematous plaque over the right anterior tibia. The deep intradermal and subdermal edema is exquisitely tender to touch, considerably warmer than the surrounding skin, and highly blanchable.

2. A 16-year-old high school student joined her friends in a 2K run one morning. The next day, her shins were so painful she could hardly walk. She applied ice packs to her legs, using elastic bandages to hold them in place until the ice cubes melted. As her legs rewarmed, a rash appeared where the ice packs had contacted the skin.

3. Typically manifesting with edema, pruritus, warmth, and tenderness, this lesion is usually associated with a history of recent trauma or pharyngitis followed by malaise, chills, and high fever. The lesion is usually raised with a clear line of demarcation at the edge. Source: PhotoStock-Israel / Science Source

4. This patient presented with a red, expanding rash on the lateral aspect of the left thigh. Able to affect any part of the body, this illness may present with fever, chills, sweats, muscle aches, fatigue, nausea, and joint pain. Some patients have a rash or Bell’s palsy. Source: CDC Public Health Image Library.

For the correct answers, go to www.clinicianreviews.com/articles/picture-this.html.