A man between 60 and 70 years of age with a history of HIV, hepatitis C, and intravenous drug use acutely developed a petechial rash on the second day of his hospitalization for complex visual hallucinations. Examination revealed a sharply well-demarcated area of confluent, nonblanchable petechiae on his right, mid-upper arm extending distally to his fingertips (Figure and Supplementary Figure 1, available online at http://www.mayoclinicproceedings.org).

Vital signs were within normal limits and laboratory findings were largely unremarkable. He had normal platelet counts and was not on anticoagulation. Previously obtained radiographs of his contralateral upper extremity showed medial artery calcifications suggestive of peripheral artery disease and numerous retained needles, which suggest some degree of underlying vascular fragility (Supplementary Figure 2, available online at http://www.mayoclinicproceedings.org).

Given the sharp margins of the rash, suspicion was raised for a traumatic, allergic, or photosensitive process. Based on these clinical, laboratory, and imaging findings, this rash was thought to be due to a phenomenon known as the "Rumpel-Leede sign." First reported in the early 20th century, the Rumpel-Leede sign is the appearance of a well-demarcated petechial rash distal to a tourniquet or sphygmomanometer which rapidly develops on the release of pressure. The petechiae arise due to acute rupture of dermal capillaries from abrupt changes in blood pressure and are typically associated with underlying vascular disease and coagulopathies. This likely occurred in our patient as his blood pressure was checked on the right arm in the distribution where the rash arose. Historically, intentionally eliciting this sign was used as a surrogate marker for thrombocytopenia. The Rumpel-Leede sign typically resolves spontaneously over weeks after removal of external compression.

ACKNOWLEDGMENTS
The authors thank Christopher J. Moreland, MD, MPH, for his assistance in editorializing this paper.

SUPPLEMENTAL ONLINE MATERIAL
Supplemental material can be found online at http://www.mayoclinicproceedings.org.
Supplemental material attached to journal articles has not been edited, and the authors take responsibility for the accuracy of all data.

**Potential Competing Interests:** The authors report no potential competing interests.

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