Supplementary Table S1. Databases, search dates, restrictions, and literature-search strategy

Source	Search period and coverage	Restrictions	Search strategy
PubMed/ MEDLINE	Search conducted May 1-June 1, 2026; no lower publication-date limit; coverage through June 1, 2026	English language; no publication-date restriction	The search combined the following three concept blocks: Disease block: (“dermatologic emergency” OR “cutaneous emergency” OR “skin emergency” OR “Stevens-Johnson syndrome” OR “toxic epidermal necrolysis” OR “DRESS syndrome” OR “acute generalized exanthematous pustulosis” OR “eczema herpeticum” OR “disseminated herpes zoster” OR “necrotizing fasciitis” OR “ecthyma gangrenosum” OR “purpura fulminans” OR “calciphylaxis” OR “vasculitis” OR “pemphigus” OR “bullous pemphigoid” OR “linear IgA bullous dermatosis” OR “angioedema” OR “erythroderma” OR “pustular psoriasis” OR “pyoderma gangrenosum”) AND diagnostic-error block: (“misdiagnosis” OR “misdiagnosed” OR “initially diagnosed” OR “mimicking” OR “masquerading” OR “diagnostic delay” OR “diagnostic pitfall” OR “diagnostic challenge”) AND publication block: (“case report” OR “case series”). The English-language filter was applied.
Embase	Search conducted May 1-June 1, 2026; no lower publication-date limit; coverage through June 1, 2026	English language; no publication-date restriction	The PubMed concept blocks were adapted using the corresponding Emtree terms together with free-text title, abstract, and keyword searches. Disease terms were combined with (“misdiagnosis” OR “misdiagnosed” OR “initially diagnosed” OR “mimicking” OR “masquerading” OR “diagnostic delay” OR “diagnostic pitfall” OR “diagnostic challenge”) AND (“case report” OR “case series”). The English-language limit was applied.
Google Scholar	Search conducted May 1-June 1, 2026; no lower publication-date limit; coverage through June 1, 2026	English language; no publication-date restriction	Because Google Scholar does not support the same complex syntax as bibliographic databases, shorter searches were conducted separately for each disease term. The general structure was: “[disease name]” AND (“misdiagnosed” OR “mimicking” OR “diagnostic challenge”) AND (“case report” OR “case series”). These searches were repeated for each condition included in the disease block reported above. English-language publications were retained during screening.

Note. Across the three sources, 200 records were identified before duplicate removal. Four duplicate records were removed, leaving 196 unique records for title and abstract screening

Final 50-Case Reference List

01 | SCAR n = 12

No.	Final diagnosis	Initial incorrect diagnosis	Diagnostic confirmation	Source citation and DOI	Image / license / consent
1	Toxic epidermal necrolysis (paracetamol)	Chickenpox	Biopsy/clinicopathologic diagnosis	Jain A, Meshram RJ. Toxic Epidermal Necrolysis Following the Ingestion of Paracetamol in a Pediatric Patient. Cureus. 2023;15:e48216. **DOI:** 10.7759/cureus.48216 | Full text	Yes – serial clinical photographs License: CC BY 4.0 Consent: Yes
2	Toxic epidermal necrolysis	Oral thrush	Clinical diagnosis of toxic epidermal necrolysis based on mucocutaneous detachment, compatible drug-exposure history, specialist assessment, and clinical course.	Wani AM, et al. Don’t live in a town where there are no doctors: toxic epidermal necrolysis initially misdiagnosed as oral thrush. BMJ Case Rep. 2009:bcr10.2009.2392. **DOI:** 10.1136/bcr.10.2009.2392 | Full text	Yes – clinical photographs License: Publisher permission/restrictive Consent: Yes
3	Stevens–Johnson syndrome	Conjunctivitis / upper respiratory infection	Skin biopsy plus clinical diagnosis	Dutt J, et al. Stevens-Johnson Syndrome: A Perplexing Diagnosis. Cureus. 2020;12:e7374. **DOI:** 10.7759/cureus.7374 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
4	Amoxicillin-induced Stevens–Johnson syndrome	Chickenpox	Clinical diagnosis of amoxicillin-induced Stevens–Johnson syndrome based on acute mucocutaneous involvement, temporal drug exposure, specialist assessment, and compatible clinical course.	Shweliya MA, et al. Amoxicillin-induced Stevens–Johnson syndrome in a 13-year-old female: a case report. Ann Med Surg. 2025. **DOI:** 10.1097/MS9.0000000000003518 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
5	DRESS syndrome	Urticaria / allergic eruption	RegiSCAR criteria, laboratory organ involvement	Abusuliman M, et al. Fatal Itching and Failing Liver: A Case Report and Literature Review of Rare, Atypical DRESS Syndrome. Cureus. 2024;16:e55355. **DOI:** 10.7759/cureus.55355 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
6	Vancomycin-induced DRESS syndrome with shock	Allergic reaction, then sepsis	RegiSCAR score 7, skin biopsy, exclusion of infection	Nwokeocha SO, et al. DRESS’ed in Shock and Delay in Eosinophilia Resolution: Management Dilemmas in a Complex Case of Vancomycin-Induced DRESS Syndrome. Am J Case Rep. 2026;27:e952490. **DOI:** 10.12659/AJCR.952490 | Full text	Yes – abdominal erythroderma photograph License: CC BY-NC-ND 4.0 Consent: Yes
7	Azithromycin-associated DRESS syndrome	Septic shock	RegiSCAR-compatible clinicopathologic/laboratory assessment	Sriratanaviriyakul N, et al. DRESS syndrome associated with azithromycin presenting like septic shock: a case report. J Med Case Rep. 2014;8:332. **DOI:** 10.1186/1752-1947-8-332 | Full text	Yes – clinical photographs in full text License: CC BY 4.0 Consent: Yes
8	DRESS syndrome with multivisceral failure	Septic shock	Clinical criteria, eosinophilia and multiorgan involvement	Lafkih MA, et al. A fatal presentation of DRESS syndrome with multiple visceral failure mimicking septic shock. Ann Med Surg. 2022;79:104110. **DOI:** 10.1016/j.amsu.2022.104110 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
9	Moxifloxacin-induced DRESS with pulmonary involvement	Community-acquired pneumonia	RegiSCAR score 7, biopsy and pulmonary investigations	Zhang Y, et al. A typical presentation of moxifloxacin-induced DRESS syndrome with pulmonary involvement: a case report and review of the literature. BMC Pulm Med. 2022. **DOI:** 10.1186/s12890-022-02064-1 | Full text	Yes – rash and radiology images License: CC BY 4.0 Consent: Yes
10	Acute generalized exanthematous pustulosis (AGEP)	Toxic epidermal necrolysis	Skin biopsy and clinicopathologic reassessment	Copaescu AM, Bouffard D, Masse MS. Acute generalized exanthematous pustulosis simulating toxic epidermal necrolysis: case presentation and literature review. Allergy Asthma Clin Immunol. 2020;16:9. **DOI:** 10.1186/s13223-020-0407-5 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
11	Acute generalized exanthematous pustulosis	Toxic epidermal necrolysis	Skin biopsy	Peermohamed S, Haber RM. Acute Generalized Exanthematous Pustulosis Simulating Toxic Epidermal Necrolysis. Arch Dermatol. 2011;147:697-701. **DOI:** 10.1001/archdermatol.2011.147 | Full text	Yes – multiple clinical photographs License: Publisher permission/restrictive Consent: Yes
12	Allopurinol-induced DRESS syndrome	Upper respiratory tract infection	Clinical/RegiSCAR-compatible findings and skin biopsy	Kavala M, Karadag AS, Demir FT, et al. Drug Rash With Eosinophilia and Systemic Symptoms Syndrome Induced by Allopurinol. J Med Cases. 2014;5(7):420-422. **DOI:** 10.14740/jmc1811w | Full text	Yes – generalized eruption and histopathology License: CC BY-NC 4.0 Consent: Yes
02 | Infectious n = 11					
No.	**Final diagnosis**	**Initial incorrect diagnosis**	**Diagnostic confirmation**	**Source citation and DOI**	**Image / license / consent**
13	Eczema herpeticum	Facial cellulitis	HSV swab/PCR and clinical response	Lanka P, Woloski JR. Eczema Herpeticum Misdiagnosed as Facial Cellulitis in an Atopic Adult Patient. Cureus. 2024;16:e58328. **DOI:** 10.7759/cureus.58328 | Full text	Yes – facial clinical photograph License: CC BY 4.0 Consent: Yes
14	Cutaneous anthrax	Cellulitis	Bacillus anthracis detected by blister-fluid culture and metagenomic next-generation sequencing	Zheng C, Ye J, Song M, Guo Y, Gao W, Hao J, et al. The second cutaneous anthrax infection diagnosed by metagenomic next-generation sequencing: a case report. Medicine (Baltimore). 2024;103(3):e36921. **DOI:** 10.1097/MD.0000000000036921 | Full text	Yes - clinical photographs of the left wrist, dorsal hand and forearm lesions License: CC BY 4.0 Consent: Yes - written consent covering case data and images
15	Disseminated varicella-zoster virus infection	Bullous pemphigoid	VZV PCR and clinicopathologic evaluation	Timotijevic A, et al. Atypical Presentation of Disseminated Varicella Zoster Virus Infection Mimicking Bullous Pemphigoid. Cureus. 2024;16:e70651. **DOI:** 10.7759/cureus.70651 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
16	Disseminated herpes zoster	Preseptal/orbital cellulitis complicating sinusitis	Clinical diagnosis of disseminated herpes zoster based on dissemination of zosteriform vesicles, compatible clinical evolution, specialist assessment, and response to intravenous acyclovir. Laboratory/PCR confirmation was not reported in the source publication.	Park JS, In SM, Lee KI. Disseminated herpes zoster misdiagnosed as orbital complication of acute sinusitis. Otolaryngol Case Rep. 2020;17:100245. **DOI:** 10.1016/j.xocr.2020.100245 | Full text	Yes – facial, endoscopic and disseminated-rash images License: CC BY 4.0 Consent: Yes
17	Necrotizing fasciitis	Cellulitis	Imaging plus operative exploration	Joshi A, et al. A case of necrotizing fasciitis initially misdiagnosed as cellulitis. Int J Surg Case Rep. 2024;118:109701. **DOI:** 10.1016/j.ijscr.2024.109701 | Full text	Yes – clinical and radiographic images License: CC BY 4.0 Consent: Yes
18	Subacute necrotizing fasciitis of the posterior neck	Herpes zoster	Operative findings, cultures and histopathology	Wright SJ, et al. Subacute necrotizing fasciitis of the posterior neck disguised as a herpes zoster infection: A case report. SAGE Open Med Case Rep. 2022. **DOI:** 10.1177/2050313X221123295 | Full text	Yes – serial clinical photographs License: CC BY-NC 4.0 Consent: Yes
19	Labio-facial necrotizing fasciitis	Angioedema	Surgical exploration/culture and clinical course	Eltayeb AS, Ahmad AG, Elbeshir EI. A case of labio-facial necrotizing fasciitis complicating acne. BMC Res Notes. 2016;9:232. **DOI:** 10.1186/s13104-016-2041-3 | Full text	Yes – facial clinical photographs License: CC BY 4.0 Consent: Yes
20	Ecthyma gangrenosum caused by MSSA	Cellulitis	Blood/skin microbiology and clinicopathologic course	Fang KC, et al. Ecthyma Gangrenosum Secondary to Methicillin-Sensitive Staphylococcus aureus in an Atopic Child with Transient Neutropenia: A Case Report and Review. Diagnostics. 2022;12:1683. **DOI:** 10.3390/diagnostics12071683 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
21	Necrotizing fasciitis	Cellulitis	Subcutaneous emphysema on imaging and urgent surgical exploration	Palav S, Gangula S, Patri JR. Necrotizing Fasciitis Camouflaging As Cellulitis: A Case Report Highlighting Diagnostic Pitfalls. Cureus. 2026;18:e104734. **DOI:** 10.7759/cureus.104734 | Full text	Yes – forearm photograph and radiographs License: CC BY 4.0 Consent: Yes
22	Ulceroglandular tularemia	Spider bite, then cellulitis	Francisella tularensis serology (1:1280) plus clinical response	Sateia HF, Melia MT, Cofrancesco J Jr. Tularemia presenting as suspected necrotic arachnidism. Clin Case Rep. 2017;5:497-500. **DOI:** 10.1002/ccr3.882 | Full text	Yes – serial lesion photographs License: CC BY 4.0 Consent: Yes
23	Ecthyma gangrenosum	Cellulitis	Pseudomonas aeruginosa growth in blood culture and wound culture, with compatible lesion evolution from cellulitis-like erythema to necrotic ecthyma gangrenosum.	Ishihara T, Ozawa H. Ecthyma gangrenosum mimicking cellulitis. Clin Case Rep. 2021;9:1787-1788. **DOI:** 10.1002/ccr3.3711 | Full text	Yes – serial clinical photographs License: CC BY-NC 4.0 Consent: Yes
03 | Vascular/vasculitic n = 9					
No.	**Final diagnosis**	**Initial incorrect diagnosis**	**Diagnostic confirmation**	**Source citation and DOI**	**Image / license / consent**
24	Non-uremic calciphylaxis	Erythema multiforme / TEN	Skin biopsy and clinical course	Jamalifard F, et al. Non-uremic Calciphylaxis With Possible Initial Misdiagnosis as Erythema Multiforme/Toxic Epidermal Necrolysis Successfully Treated as Inpatient. Cureus. 2023;15:e43618. **DOI:** 10.7759/cureus.43618 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
25	Leukocytoclastic vasculitis associated with Crohn disease	Cellulitis	Skin biopsy; negative cultures and work-up	Buck M, Dumic I, McDermott W. Leukocytoclastic vasculitis as a rare dermatologic manifestation of Crohn’s disease mimicking cellulitis: a case report. BMC Gastroenterol. 2020;20:240. **DOI:** 10.1186/s12876-020-01371-3 | Full text	Yes – clinical rash photograph License: CC BY 4.0 Consent: Yes
26	Severe homozygous protein C deficiency with neonatal purpura fulminans	Cellulitis	Protein C testing/genetic diagnosis and longitudinal clinical course	Almatter E, et al. Challenges in managing severe homozygous protein C deficiency: a case report. Blood Coagul Fibrinolysis. 2025;36:34-36. **DOI:** 10.1097/MBC.0000000000001332 | Full text	Yes – clinical images in full text License: CC BY 4.0 Consent: Yes
27	Granulomatosis with polyangiitis with digital gangrene	Cellulitis, venous insufficiency and Raynaud phenomenon	PR3-ANCA, neurologic testing and systemic assessment	Hines A, et al. Rare presentation of granulomatosis with polyangiitis. BMJ Case Rep. 2019;12:e227218. **DOI:** 10.1136/bcr-2018-227218 | Full text	Yes – digital necrosis photographs License: Publisher permission/restrictive Consent: Yes
28	Purpura fulminans following sepsis	Calciphylaxis	Repeat skin biopsy showing cutaneous-vessel thrombi	Lyon P, Nambi R, Faruqi F. Atypical presentation of purpura fulminans following sepsis in an adult. BMJ Case Rep. 2011:bcr0320113996. **DOI:** 10.1136/bcr.03.2011.3996 | Full text	Yes – clinical photographs License: Publisher permission/restrictive Consent: Yes
29	Purpura fulminans with penile necrosis	Fournier gangrene	Histopathology showing occlusive nonvasculitic vasculopathy and DIC context	Caputo V, Bonoldi E, Rongioletti F. Penile Necrosis as a Presenting Sign of Purpura Fulminans Mimicking Fournier’s Gangrene. Am J Dermatopathol. 2021;43:e13-e15. **DOI:** 10.1097/DAD.0000000000001744 | Full text	Yes – clinical/histopathology images License: Publisher permission/restrictive Consent: Yes
30	Uremic calciphylaxis	Cellulitis	Skin biopsy showing small-vessel calcification and fat necrosis	Meegada S, Annakula M, Challa T, Peddi P. Calciphylaxis: A Deceiving Cellulitis. Cureus. 2019;11(12):e6518. **DOI:** 10.7759/cureus.6518 | Full text	Yes – clinical photographs License: CC BY 3.0 Consent: Yes
31	Livedoid vasculopathy with peripheral neuropathy	Cellulitis	Skin biopsy and direct immunofluorescence showing thrombotic small-vessel disease	Palanisamy N, Chinnappan J, Bachuwa G. Pain Management Options in a Patient with Livedoid Vasculopathy and Peripheral Neuropathy. Eur J Case Rep Intern Med. 2023;10(1):003727. **DOI:** 10.12890/2023_003727 | Full text	Yes – painful plaque/ulcer photographs License: CC BY-NC-ND 4.0 Consent: Yes
32	Severe cutaneous polyarteritis nodosa with gangrenous digital infarcts	Cellulitis	Skin biopsy and vasculitis work-up	Mahmood-Rao H, Gandhi N, Ding T. Gangrenous digital infarcts in a severe case of cutaneous polyarteritis nodosa. BMJ Case Rep. 2017:bcr2017220300. **DOI:** 10.1136/bcr-2017-220300 | Full text	Yes – digital infarct photographs License: Publisher permission/restrictive Consent: Yes
04 | Autoimmune bullous n = 8					
No.	**Final diagnosis**	**Initial incorrect diagnosis**	**Diagnostic confirmation**	**Source citation and DOI**	**Image / license / consent**
33	Linear IgA bullous dermatosis	Stevens–Johnson syndrome / TEN	Skin biopsy and direct immunofluorescence showing linear IgA	Park JS, et al. Linear Immunoglobulin A (IgA) Bullous Dermatosis Mimicking Stevens-Johnson Syndrome. Cureus. 2022;14:e30309. **DOI:** 10.7759/cureus.30309 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
34	Pemphigus vulgaris	SJS/TEN	Skin biopsy and direct immunofluorescence	Albrahim L, Alasmari AA, Aleissa M. Pemphigus vulgaris mimicking Stevens-Johnson syndrome/toxic epidermal necrolysis: report of an unusual case. Dermatol Rep. 2023;15:9649. **DOI:** 10.4081/dr.2023.9649 | Full text	Yes – clinical photographs License: CC BY-NC 4.0 Consent: Yes
35	Bullous pemphigoid	Cellulitis	Histopathology, direct immunofluorescence and BP serology	Ivyanskiy I, et al. Bullous Pemphigoid Mimicking Cellulitis. J Investig Med High Impact Case Rep. 2021;9:23247096211008585. **DOI:** 10.1177/23247096211008585 | Full text	Yes – clinical photograph License: CC BY-NC 4.0 Consent: Yes
36	Paraneoplastic pemphigus	Stevens–Johnson syndrome	Biopsy plus identification of underlying lymphoma and immunopathology	Hayanga AJ, et al. Paraneoplastic Pemphigus in a Burn Intensive Care Unit: Case Report and Review of the Literature. J Burn Care Res. 2010;31:826-829. **DOI:** 10.1097/BCR.0b013e3181eed4b4 | Full text	Yes – clinical photographs License: Publisher permission/restrictive Consent: Yes
37	Juvenile bullous pemphigoid with TEN-like presentation	Eczema, scabies, then toxic epidermal necrolysis	Histopathology plus direct immunofluorescence with linear IgG/C3 at the dermoepidermal junction	Nikyar Z, Hatami P, Aryanian Z, et al. An Unusual TEN-Like Presentation of Juvenile Bullous Pemphigoid: A Diagnostic Challenge. Case Rep Dermatol Med. 2022;2022:8507156. **DOI:** 10.1155/2022/8507156 | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes
38	Linear IgA bullous disease with TEN-like presentation	Toxic epidermal necrolysis	Histopathology and direct immunofluorescence	Kakar R, Paugh H, Jaworsky C. Linear IgA bullous disease presenting as toxic epidermal necrolysis: a case report and review of the literature. Dermatology. 2013;227:209-213. **DOI:** 10.1159/000353584 | Full text	Yes – clinical photographs on publisher page License: Publisher permission/restrictive Consent: Yes
39	Paraneoplastic pemphigus associated with small lymphocytic lymphoma	Stevens–Johnson syndrome	Skin biopsy, immunofluorescence and ELISA	Wang D, Chen Z. Paraneoplastic pemphigus associated with small lymphocytic lymphoma: a case report. Medicine. 2021;100:e24039. **DOI:** 10.1097/MD.0000000000024039 | Full text	Yes – oral and cutaneous photographs License: CC BY 4.0 Consent: Yes
40	Severe mucosal pemphigus vulgaris	Atypical Behcet disease / aphthous ulcers	Histology with suprabasal cleavage and acantholysis; direct immunofluorescence showing intercellular fishnet-pattern IgG; anti-Dsg3 ELISA positive	Delvaux C, Bohelay G, Sitbon IY, Soued I, Alexandre M, Cucherousset J, et al. Activity of apremilast in a patient with severe pemphigus vulgaris: case report. Front Immunol. 2024;15:1404185. **DOI:** 10.3389/fimmu.2024.1404185 | Full text	Yes - oral and laryngeal clinical photographs License: CC BY 4.0 Consent: Yes - written consent for potentially identifiable images/data
05 | Urticaria/angioedema n = 6					
No.	**Final diagnosis**	**Initial incorrect diagnosis**	**Diagnostic confirmation**	**Source citation and DOI**	**Image / license / consent**
41	Acquired C1-inhibitor-deficiency angioedema	Refractory anaphylaxis	Low C4 and quantitative/functional C1-INH testing; lymphoproliferative context	Nahid MH, et al. Recurrent Airway Swelling in a Patient With Acquired Angioedema. Cureus. 2025;17:e96070. **DOI:** 10.7759/cureus.96070 | Full text	Yes – floor-of-mouth/tongue swelling photograph License: CC BY 4.0 Consent: Yes
42	Hereditary angioedema	Allergic angioedema / allergy	Low C4 and C1-INH level/function	Shin M, Ahn K. A Case of Hereditary Angioedema in a 7-Year-Old Korean Girl. Allergy Asthma Immunol Res. 2013;5:59-61. **DOI:** 10.4168/aair.2013.5.1.59 | Full text	Yes – facial/periorbital swelling photograph License: CC BY-NC 3.0 Consent: Yes
43	Hereditary angioedema	Allergic reaction	C4 and C1-INH testing	Bhivgade S, et al. Hereditary Angioedema: Not An Allergy. Indian J Dermatol. 2012;57:503. **DOI:** 10.4103/0019-5154.103081 | Full text	Yes – facial swelling photograph License: CC BY 4.0 Consent: Yes
44	Hereditary angioedema type I	Gastroenteritis, peptic ulcer disease, pancreatitis, urinary tract infection, pelvic inflammatory disease, cholecystitis and appendicitis	Low C4/C1-INH plus pathogenic SERPING1 variant	Shrestha S, Yadav AK, Khadka D, Shrestha R, Paudel MS. A Two-Decade-Delayed Diagnosis of Hereditary Angioedema: A Case Report. Cureus. 2025;17(5):e85019. **DOI:** 10.7759/cureus.85019 | Full text	Yes – limb, facial and lip swelling photographs License: CC BY 4.0 Consent: Yes
45	Hereditary angioedema type I	Urticaria or anaphylactic reaction	Low C4, normal C1q and C1-INH at 24% of normal	Muñoz Peralta F, Buller Viqueira E, Cabello Pulido J. Hereditary angioedema type I: a case report. Medwave. 2016;16(1):e6378. **DOI:** 10.5867/medwave.2016.01.6378 | Full text	Yes – acute facial angioedema photograph License: CC BY-NC 3.0 Consent: Yes
46	Hereditary angioedema type 1	Allergic facial swelling; HAE suggestion dismissed	Low C4/C1-INH testing and genetic/family evaluation	Srikantharajah T, Jakobsen MA, Bygum A. Hereditary angioedema: a mother diagnosing her child using Google as a diagnostic aid. BMJ Case Rep. 2018:bcr-2018-225825. **DOI:** 10.1136/bcr-2018-225825 | Full text	Yes – upper-lip and facial swelling photograph License: Publisher version restrictive; accepted manuscript CC BY-NC Consent: Yes
06 | Other n = 4					
No.	**Final diagnosis**	**Initial incorrect diagnosis**	**Diagnostic confirmation**	**Source citation and DOI**	**Image / license / consent**
47	Necrotizing neutrophilic dermatosis	Necrotizing fasciitis	Repeated negative cultures, skin biopsy and steroid response	Gowda A, et al. Necrotizing neutrophilic dermatosis: A diagnostic challenge with a need for multi-disciplinary recognition, a case report. Ann Med Surg. 2020;57:299-302. **DOI:** 10.1016/j.amsu.2020.07.037 | Full text	Yes – serial clinical photographs License: CC BY 4.0 Consent: Yes
48	Pyoderma gangrenosum	Necrotizing fasciitis	Clinicopathologic reassessment and response to immunosuppression	Hradil E, et al. The diagnosis you wish you had never operated on: Pyoderma gangrenosum misdiagnosed as necrotizing fasciitis—a case report. Acta Orthop. 2017;88:231-233. **DOI:** 10.1080/17453674.2016.1260403 | Full text	Yes – serial wound photographs License: CC BY-NC 3.0 Consent: Yes
49	Pyoderma gangrenosum	Necrotizing infection	Biopsy, negative infectious work-up and underlying hematologic diagnosis	Saffie MG, Shroff A. A Case of Pyoderma Gangrenosum Misdiagnosed as Necrotizing Infection: A Potential Diagnostic Catastrophe. Case Rep Infect Dis. 2018;2018:8907542. **DOI:** 10.1155/2018/8907542 | Full text	Yes – serial clinical photographs License: CC BY 4.0 Consent: Yes
50	Giant cellulitis-like Sweet syndrome	Cellulitis / skin and soft-tissue infection	Skin biopsy and rapid steroid response	Muche ST, et al. Giant cellulitis-like Sweet syndrome mimicking cellulitis: a case report. J Med Case Rep. 2024;18:492. **DOI:** 10.1186/s13256-024-04848-x | Full text	Yes – clinical photographs License: CC BY 4.0 Consent: Yes