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The Objective Structured Clinical Examination Review Mubashar Hussain Sherazi, Elijah Dixon, 2018-11-05 This review book comprehensively covers most aspects of the Objective Structured Clinical Examination OSCE Each chapter provides a meticulous overview of a topic featured in the OSCE including general surgery pediatrics psychiatry obstetrics and gynecology gastroenterology geriatrics hematology and ethics Common scenarios for each topic are featured in every chapter accompanied by instructions and tips on how to take a patient s history diagnose a patient discuss treatment options and address patient concerns under each scenario Possible areas of difficulty common candidate mistakes made and important differential diagnosis are outlined in each chapter The text is also supplemented with check lists photographs and tables for enhanced readability and ease of use Written by experts in their respective fields The Objective Structured Clinical Examination Review is a valuable resource for medical students and residents preparing for the OSCE

The MGH Review of Critical Care Medicine Sheri Berg, Edward A. Bittner, 2013-10-16 The field of critical care medicine is evolving quickly To prepare for certification and refresh their knowledge today s practitioners need a concise multidisciplinary review that focuses on the core areas of critical care Ideal for critical care fellows critical care nurses residents and practitioners who spend time in the ICU This book employs brief chapters on focused topics to help readers review core areas and test their knowledge Features Broad scope addresses all major topics is adult critical care with contributions from experts in a range of disciplines Concise chapters based on commonly referenced topics make the review easy to navigate Focused discussions are based on patient presentation and are structured to include common causes initial management strategies pathophysiology differential diagnosis management and outcomes Incisive review questions 3 10 per topic include answers and explanations to help readers understand the how and why behind each answer Staff of MGH and its sister institutions provide consistent terminology and presentation throughout the review

Rosen & Barkin's 5-Minute Emergency Medicine Consult Jeffrey J. Schaidt, Roger M. Barkin, Stephen R. Hayden, Richard E. Wolfe, Adam Z. Barkin, Philip Shayne, Peter Rosen, 2012-02-17 This best selling emergency department reference is now in its thoroughly updated Fourth Edition The foremost authorities provide practical information on over 600 clinical problems in a fast access two page outline format that s perfect for on the spot consultation during care in the emergency department Coverage of each disorder includes clinical presentation pre hospital diagnosis treatment disposition and ICD 9 coding Icons enable practitioners to quickly spot the information they need This edition provides up to date information on topics such as emerging infections new protocols and new treatments

Critical Care Transport American Academy of Orthopaedic Surgeons (AAOS), American College of Emergency Physicians (ACEP), UMBC, 2017-03-20 Welcome to the gold standard in critical care transport training Published in conjunction with the American Academy of Orthopaedic Surgeons AAOS and the American College of Emergency Physicians ACEP and endorsed by the University of Maryland Baltimore County UMBC and the International Association of Flight and Critical Care

Providers IAFCCP Critical Care Transport Second Edition offers cutting edge content relevant to any health care provider training in critical care transport Authored by leading critical care professionals from across the country Critical Care Transport Second Edition contains state of the art information on ground and flight transport that aligns with the latest evidence based medicine and practices Content includes information specific to prehospital critical care transport such as flight physiology lab analysis hemodynamic monitoring and specialized devices such as the intra aortic balloon pump Standard topics such as airway management trauma resuscitation and more

DeLee & Drez's Orthopaedic Sports Medicine E-Book Mark D. Miller, Stephen R. Thompson, 2018-12-20 Indispensable for both surgeons and sports medicine physicians DeLee Drez a streamlined organization for quick reference in depth coverage of arthroscopic techniques extensive references levels of evidence at the end of each chapter and Author's Preferred Technique sections Enhanced eBook version included with purchase Your enhanced eBook allows you to access all of the text figures and references from the book on a variety of devices

To See or Not to See Rani Toll, 2020-04-01 Background Assessment of the critically ill is traditionally based on vital signs blood pressure pulse respiratory rate temperature and level of consciousness Altered vital signs are however late indicators of deranged hemodynamics pointing to a need for additional more sensitive markers of circulatory compromise In the beginning of the 20th century the capillary refill CR time evolved as a possible non invasive adjunct to early prediction of the outcome in the critically ill The manoeuvre entails application of blanching pressure on the skin of the finger pulp or sternum for 5 seconds After release of the pressure the observer estimates time in seconds for the skin to return to original colour This time is hypothesized to reflect the dynamics of the microcirculation and its possible connection with hemodynamics In the 1980s the normal capillary refill time was set to 2 seconds and later extended to 3 seconds without a clear scientific foundation Naked eye estimations of CR time met increasing scepticism in the 1990s due to subjectivity and poor prognostic value for shock or death Several basic traits such as age and sex as well as ambient temperature were also shown to independently influence the CR time Various methods have evolved with the capability to measure CR time quantitatively one of which is Polarisation Spectroscopy Imaging PSI PSI measures the Red Blood Cell RBC concentration in tissue e g the skin and can be used to measure CR time Objectives The purpose of this study was to establish basic characteristics for quantified CR qCR identify possible influencing factors in healthy subjects and to investigate how this relates to current practice We also sought to identify technical demands for transfer of the technique into clinical studies In paper I we analysed the qCR time characteristics at 5 different skin sites forehead sternum volar forearm finger pulp and dorsum finger The objective of paper II was to investigate the inter and intra observer variability of naked eye CR assessments of different professions nurses doctors and secretaries representing laymen In paper III we observed the effect of low ambient temperature on the qCR time in different skin sites In paper IV we transferred the equipment from a laboratory to a clinical setting in the Emergency Department ED for application on potentially critically ill patients In this

study we evaluated the most important factors determining a reliable data collection and influencing the amount of data possible to analyse. Methods qCR time was measured in a total of 38 volunteers and 10 patients in different skin sites. 25 skin sites at different ambient temperatures. PSI TiVi 600 and 700 Wheels Bridge AB Link ping Sweden was used to determine the rapid temporal changes in RBC concentration in skin during the CR manoeuvre. Films using a range of the first measurements from paper I were shown for assessment to 48 observers working in the ED. Results In paper I we could delineate qCR curves and suggest 2 possible equivalents to the naked eye observed CR time which we named Time to Return to Baseline 1 tRtB1 and Time to Peak tPk. We demonstrated differences in qCR curves depending on skin site and possibly due to skin temperature. In paper II we showed a poor inter and intra observer reproducibility in visually estimating the CR time regardless of profession clinicians or laymen. Paper III demonstrated a rapid effect of ambient temperature on qCR time in peripheral skin sites such as finger pulp. The forehead regarded as a more central skin site was the most temperature stable site and showed least variability in qCR time as determined using tRtB1. Paper IV a study on patients in an ED setting yielded assayable data in 80% of the measurements. We identified critical performance parameters to address in the further development of a more robust easy to use device for future validation of the possible relevance of qCR in patient triage and monitoring. Conclusions CR time can be quantified using PSI. Quantified CR time demonstrated a large variability between different skin sites specifically skin temperature was shown to be an important factor influencing qCR time particularly at the fingertip. Naked eye estimates of CR time were highly variable both within and between observers. Agreement between quantified CR time and naked eye estimates was poor. The prototypic PSI technique was feasible in a clinical setting and with further improvements clinical evaluation of qCR in relation to relevant patient outcomes will be possible. *Oral and Maxillofacial Surgery for the Clinician* Krishnamurthy Bonanthaya, Elavenil Panneerselvam, Suvy Manuel, Vinay V. Kumar, Anshul Rai, 2021-02-14. This is an open access book with CC BY 4.0 license. This comprehensive open access textbook provides a comprehensive coverage of principles and practice of oral and maxillofacial surgery. With a range of topics starting from routine dentoalveolar surgery to advanced and complex surgical procedures this volume is a meaningful combination of text and illustrations including clinical photos, radiographs and videos. It provides guidance on evidence based practices in context to existing protocols, guidelines and recommendations to help readers deal with most clinical scenarios in their daily surgical work. This multidisciplinary textbook is meant for postgraduate trainees, young practicing oral surgeons and experienced clinicians as well as those preparing for university and board certification exams. It also aids in decision making the implementation of treatment plans and the management of complications that may arise. This book is an initiative of Association of Oral and Maxillofacial Surgeons of India (AOMSI) to its commitment to academic medicine. As part of this commitment this textbook is in open access to help ensure widest possible dissemination to readers across the world.

Essentials of Trauma Anesthesia Albert J. Varon, Charles E. Smith, 2017-11-09. Covering the most important topics in

trauma anesthesia this updated edition provides anesthesiology trainees and practitioners with a practical basis for managing trauma patients Many recent advances in trauma care are identified including paradigm shifts in the management of bleeding and coagulopathy new neuromuscular blockade and anticoagulant reversal drugs and updated clinical practice guidelines This volume provides a concise practical review of the essential elements in the care of the severely injured trauma patient including emergency airway management fluid and blood resuscitation monitoring coagulation therapy regional and general anesthesia and perioperative care Edited by two of the most experienced trauma anesthesiologists in the United States with chapters written by experts from leading US and Canadian trauma centers with the highest and most varied caseload of critically injured patients *Essentials of Trauma Anesthesia* identifies new trends in surgery and anesthesiology practices that impact on the management of trauma patients *Penetrating Trauma* George C. Velmahos, Elias Degiannis, Dietrich Doll, 2011-09-28 Surgery needs skill Skill needs knowledge Knowledge of tricks moves and tools This book is about such knowledge Expert authors have contributed technical pearls gained by years of experience The short how I do it chapters offer the reader a quick and effective guide that will be invaluable when addressing any penetrating injury The book is not intended to serve as a comprehensive volume of pathophysiology and management in trauma rather the goal is to provide practical solutions on how to treat injuries surgically It describes the steps that you must take when in the middle of the night confronted with devastating bleeding you will have only one chance to save a life

Emergency Medicine Board Review E-Book Amy Kaji, Ryan A. Pedigo, 2021-06-25 Increase your opportunity for first time success on the challenging emergency medicine board exam with this authoritative highly illustrated review tool Written and edited by contributors from the UCLA affiliated residency programs *Emergency Medicine Board Review* covers the full range of disorders procedures skills and other core competencies that the emergency medicine physician needs to know A bulleted easy to read format supported by hundreds of high quality images and questions make it the most efficient and effective way to study for certification and MOC exams and prepare for clinical practice Contains approximately 500 board style multiple choice questions with full discursive answers and more than 300 clinical photos for effective visual learning Features up to date content in a streamlined highly focused format with questions directly related to the board exam both in print and online Covers all areas of the Emergency Medicine Model for certification and in service exams including devices AICD LVAD pacemakers infectious disease pediatrics rashes toxicology trauma and more Includes key procedures such as airway management neonatal pediatric adult cardiac arrest vascular access wound management ultrasound and procedural sedation

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