

Ontario S Critical Care Information System Ccis Hospital

Here's a unified evidence-based approach to problems encountered in trauma and critical care surgical situations. Comprehensive and concise, it is ideal for a quick overview before entering the operating room or ICU, or as a review for board certification or recertification. Be prepared for the unexpected with practical, concise coverage of major surgical problems in trauma and critical care. Get expert practical and up-to-date guidance on ventilator management, damage control, noninvasive techniques, imaging, infection control, dealing with mass casualties, treating injuries induced by chemical and biological agents, and much more. Find the information you need quickly and easily through numerous illustrations, key points boxes, algorithms, and tables.

Dr. Goldsworthy has created a state-of-the-art issue that emphasizes the nurse's role in mechanical ventilation. Pertinent clinical topics include the following: basics of mechanical ventilation for nurses; current modes for mechanical ventilation; best practices for managing pain, sedation, and delirium in the mechanically ventilated patient; mobilization of and optimal oxygenation for the mechanically ventilated patient; managing complications; and effective weaning strategies. Authors also address mechanical ventilation in both children and neonates. The current content in this issue will leave nurses with the clinical information they need to effectively manage mechanically ventilated patients.

Textbook of Critical Care is an extensive two volume guide to all aspects of critical care. The first volume covers systems of the human body in individual sections; the second volume continues to cover other vital topics for those working in an intensive care unit. With over 100 international contributors ensuring authoritative content throughout, and full colour illustrations across 1500 pages, Textbook of Critical Care is a valuable resource for residents, intensivists, and emergency medicine doctors.

Measuring the quality of a complex service like critical care that combines the highest technology with the most intimate caring is a challenge. Recently, consumers, clinicians, and payers have requested more formal assessments and comparisons of the quality and costs of medical care [2]. Donabedian [1] proposed a framework for thinking about the quality of medical care that separates quality into three components: structure, process, and outcome. An instructive analogy for understanding this framework is to imagine a food critic evaluating the quality of a restaurant. The critic might comment on the decoration and lighting of the restaurant, how close the tables are to each other, the extent of the wine list and where the chef trained. These are all evaluations of the restaurant structure. In addition, the critic might comment on whether the service was courteous and timely - measures of process. Finally, the critic might comment on outcomes like customer satisfaction or food poisoning. Similarly, to a health care critic, structure is the physical and human resources used to deliver medical care. Processes are the actual treatments offered to patients. Finally, outcomes are what happens to patients, for example, mortality, quality of life, and satisfaction with care (Table 1). There is a debate about which of these measurements is the most important measure of quality.

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The Fraser Institute's Hospital Report Card: Ontario 2008 is constructed to help patients choose the best hospital for their inpatient care by providing them with information on the performance Ontario of acute-care hospitals.

Year Book of Critical Care Medicine 2011 - E-Book

The Year Book of Critical Care Medicine brings you abstracts of articles carefully selected from more than 500 journals worldwide. Expert commentaries evaluate the clinical importance of each article and discuss its application to your practice. Topics such as Acute Lung Injury, Cardiac Arrest, Hemodynamics and Monitoring, Burns, Postoperative Management, Renal, Trauma and Overdose, and Pharmacology/Sedation-Analgesia are represented highlighting the most current and relevant articles in the field.

Comprehensive and clinically oriented, the authors offer in-depth, authoritative guidance on clinical problems from a multitude of perspectives. It combines practical, clinical guidance with the basic science necessary to effectively treat and manage critical care patients, and offers a differential diagnosis table, a management algorithm, a therapeutic implications flowchart, and a controversies box whenever relevant.

Intensive care medicine is one of the fastest growing services provided by hospitals and perhaps one of the most expensive. Yet in response to the global financial crisis of the last few years, healthcare funding is slowing or decreasing throughout the world. How we manage health care resources in the intensive care unit (ICU) now and in a future that promises only greater cost constraints is the subject of this book, the third in an informal series of volumes providing a global perspective on difficult issues arising in the ICU. Taking 12 developed countries as their focus, leading experts provide a country-by-country analysis of current ICU resource allocation. A second group of experts use the chapters as a departure point to analyze current ICU resource allocation at the level of the global medical village. The process is repeated, but with an eye toward the future – first country by country, then at the global level – that takes into account initiatives and reforms now underway. A fictional healthcare plan, the “Fair & Equitable Healthcare Plan,” is put forth to address weaknesses in existing approaches, and healthcare experts and ethicists are invited to respond to its often provocative provisions. Itself structured as a dialogue, the book is an excellent way to start or to continue serious discussion about the allocation of ICU healthcare resources now and in the years ahead.

Issues in Clinical, Critical, and Intensive Care Research: 2011 Edition is a ScholarlyEditions™ eBook that delivers timely, authoritative, and comprehensive information about Clinical, Critical, and Intensive Care Research. The editors have built Issues in Clinical, Critical, and Intensive Care Research: 2011 Edition on the vast information databases of ScholarlyNews.™ You can expect the information about Clinical, Critical, and Intensive Care Research in this eBook to be deeper than what you can access anywhere else, as well as consistently reliable, authoritative, informed, and relevant. The content of Issues in Clinical, Critical, and Intensive Care Research: 2011 Edition has been produced by the world's leading scientists, engineers, analysts, research institutions, and companies. All of the content is from peer-reviewed sources, and all of it is written, assembled, and edited by the editors at ScholarlyEditions™ and available exclusively from us. You now have a source you can cite with authority, confidence, and credibility. More information is available at <http://www.ScholarlyEditions.com/>.

The Manual of Pediatric Intensive Care distills the salient information required to provide state-of-the-art care for the acutely ill and injured child into a concise, readily useful guide. Providing timely and appropriate care is a daunting challenge for frontline caregivers, early response and transport teams, and pediatric and critical care trainees. This manual delivers the basic information and practical advice needed by those who provide urgently needed care to children in a format that occupies the middle ground between the voluminous, highly detailed textbook and the "to do" lists that provide no physiological background for the approach presented. An introduction for beginners and a valuable aid for those already engaged in the care of acutely ill children, the Manual of Pediatric Intensive Care comprises contributions from specialists from around the world, including doctors, nurses, pharmacists, and respiratory therapists. Key Features Stresses the importance of team dynamics, ethical decision-making, and family involvement in care; Concise, clearly organized delivery of basic and essential information needed on the spot by ICU care providers; Special chapters on septic shock, toxicology, and oncology.

This issue of Clinics in Chest Medicine focuses on Acute Respiratory Distress Syndrome and covers topics such as: Epidemiology and Definitions of ARDS and Early Acute Lung Injury, Environmental Risk Factors for ARDS, Clinical and Biological Heterogeneity in ARDS: Direct vs. Indirect Lung Injury, Obesity and Nutrition, Important Immunomodulators in ARDS?, Beyond SNPs—Genetics, Genomics and Other Omic Approaches to ARDS, Clinical Approach to the Patient with ARDS, The Immunocompromised Patient with ARDS: Role of Invasive Diagnostic Strategies, Clinical Trial Design in Prevention and Treatment of ARDS, Beyond Low Tidal Volume—Ventilating the Patient with ARDS, Prone Positioning in ARDS, and more!

Arguably medicine is either an arts-based science or a science-based art. In medieval times, clinical decisions were based on simple measures, such as the temperature of the body, the rhythm of the pulse, the consistency of the stool and the colour of the urine. Nowadays, thanks partly to modern technology, medical science has improved in many ways, as has healthcare. In particular, approaches which have their origins in Artificial Intelligence and Operational Research have a significant contribution to make in terms of improving not only diagnosis and treatment of patients, but also providing ways of managing patients in a more effective, more efficient, and more patient-friendly manner. This book focuses on the use of such Intelligent Patient Management to the benefit of clinicians, other healthcare and community practitioners and managers, patients and carers.

These proceedings represent the work of contributors to the 16th International Conference on Cyber Warfare and Security (ICWS 2021), hosted by joint collaboration of Tennessee Tech Cybersecurity Education, Research and Outreach Center (CEROC), Computer Science department and the Oak Ridge National Laboratory, Tennessee on 25-26 February 2021. The Conference Co-Chairs are Dr. Juan Lopez Jr, Oak Ridge National Laboratory, Tennessee, and Dr. Ambareen Siraj, Tennessee Tech's Cybersecurity Education, Research and Outreach Center (CEROC), and the Program Chair is Dr. Kalyan Perumalla, from Oak Ridge National Laboratory, Tennessee.

Although this volume presents plenty of topics in constant evolution, as witnessed by the collection of chapters compiled by several researchers, this edition includes, in particular, fields in which decision making at the patient's bedside prevails over theoretical argumentation. In other words, the first and foremost message this edition wants to provide is for the reader to focus his/her attention on evidence-based medicine.

A concise summary of perioperative management of high-risk surgical patients, bridging the gap between the operating theatre and ICU.

Advances in Critical Care Research and Application: 2011 Edition is a ScholarlyBrief™ that delivers timely, authoritative, comprehensive, and specialized information about Critical Care in a concise format. The editors have built Advances in Critical Care Research and Application: 2011 Edition on the vast information databases of ScholarlyNews.™ You can expect the information about Critical Care in this eBook to be deeper than what you can access anywhere else, as well as consistently reliable, authoritative, informed, and relevant. The content of Advances in Critical Care Research and Application: 2011 Edition has been produced by the world's leading scientists, engineers, analysts, research institutions, and companies. All of the content is from peer-reviewed sources, and all of it is written, assembled, and edited by the editors at ScholarlyEditions™ and available exclusively from us. You now have a source you can cite with authority, confidence, and credibility. More information is available at <http://www.ScholarlyEditions.com/>.

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This issue of Critical Care Clinics, Guest Edited by Dr. Stephen M. Pastores and Dr. Wendy R. Greene, focuses on Critical Care of the Cancer Patient (Pastores) and Geriatric Critical Care (Greene). Dr. Pastores' section of the issue is devoted to Critical Care of the Cancer Patient and includes the following topics: Triage and Prognostication of Cancer Patients Admitted to the ICU; ICU Organization and Interdisciplinary Care for Critically Ill Patients with Cancer; Critical Care of the Hematopoietic Stem Cell Transplant Recipient; Management of Drug Toxicities; Acute Kidney Injury in the Critically Ill Patient with Cancer; Infectious Disease Complications in Cancer Patients; and Palliative, Ethics, and End-of-Life Care Issues in the Cancer Patient. Dr. Green's section of the issue, devoted to Geriatric Critical Care, includes the following topics: The effect of aging physiology on critical care; The frailty syndrome: a critical issue in geriatric oncology; Detection of delirium in the intensive care unit: comparison of confusion assessment method for the intensive care unit with confusion assessment method ratings; Evidence-based geriatric nursing protocols for best practice; The effect of dementia in the critically ill geriatric patient; Nutritional assessment: a primary component of multidimensional geriatric assessment in the ICU; Rehabilitation concerns in the geriatric critically ill and injured; and Geriatric palliative care.

The pathophysiology of sepsis can be regarded as a series of steps, beginning with the invasion of normally sterile tissue by microbes and the elaboration of various pro-inflammatory mediators. The final common pathway is often the development of the multiple organ dysfunction syndrome (MODS). Whereas a great deal has been learned during the past quarter century

about the inflammatory processes associated with sepsis (and other related conditions, such as ischemia/reperfusion injury), our understanding is far less developed with respect to the pathophysiological events that lead to organ dysfunction under these conditions. Nevertheless, efforts by both clinical and laboratory scientists are leading to new knowledge in this area. The chapters in this volume provide a state-of-the-art overview of many aspects of the pathophysiology of organ dysfunction in critical illness.

This reference book compiles the most recent developments in experimental and clinical research and practice in one comprehensive edition. The chapters are written by well recognized experts in the field of intensive care and emergency medicine. It is addressed to everyone involved in internal medicine, anesthesia, surgery, pediatrics, intensive care and emergency medicine.

Evidence-Based Practice of Critical Care, 2nd Edition, presents objective data and expert guidance on managing critically ill patients in unique question-based chapters that focus on best practices. Now thoroughly updated by Drs. Clifford S. Deutschman, Patrick J. Neligan, and nearly 200 critical-care experts, this highly regarded title remains the only book of its kind that provides a comprehensive framework for translating evidence into practice, making it a valuable resource for both residents and practitioners. Tap into the expertise of nearly 200 critical-care experts who discuss the wide variety of clinical options in critical care, examine the relevant research, and provide recommendations based on a thorough analysis of available evidence. Think through each question in a logical, efficient manner, using a practical, consistent approach to available management options and guidelines. Find the information you need quickly with tables that summarize the available literature and recommended clinical approaches. Navigate a full range of challenges from routine care to complicated and special situations. Stay up to date with new issues and controversies such as the redefinition of sepsis . changing approaches to fluid administration . immune suppression in sepsis . monitoring the microcirculation . the long-term sequelae of critical illness . minimizing ventilator associated lung injury . the benefits of evidence-based medicine management guidelines . rapid response teams . and more. Benefit from all-new sections covering persistent critical illness and the role of advanced practice nurses and physician assistants in the ICU.

Every medical specialty has as its basis a core of classic papers which both reflects the historical background and gives insight into its present and future developments. The selected papers in this volume highlight landmarks in the development of critical care medicine. Internationally acclaimed experts have chosen what they consider to be the most important papers in their respective subspecialties. Each entry follows a set format, starting with the abstract and the reference to the original source of publication. This is followed by analysis of the strengths and weaknesses of the paper and the contribution it has made to the development of critical care. Additional information including citation score of each paper is given together with detailed analysis of the top 500 most widely cited papers.

In the realm of health care, privacy protections are needed to preserve patients' dignity and prevent possible harms. Ten years ago, to address these concerns as well as set guidelines for ethical health research, Congress called for a set of federal standards now known as the HIPAA Privacy Rule. In its 2009 report, Beyond the HIPAA Privacy Rule: Enhancing Privacy, Improving Health Through Research, the Institute of Medicine's Committee on Health Research and the Privacy of Health Information concludes that the HIPAA Privacy Rule does not protect privacy as well as it should, and that it impedes important health research.

This book identifies trends in critical care medicine that will form the basis for practice over the next ten years. Predicting the future is always risky. Nevertheless, the ideas articulated in this book are likely to serve as a road map for intensivists, hospital administrators, and governmental leaders interested in healthcare as they seek to improve the quality and efficiency of hospital-based services.

Veterinary Technician's Manual for Small Animal Emergency and Critical Care provides a comprehensive reference on emergency and critical care medicine for veterinary technicians of all skill levels. Beginning with information on initial patient assessment and triage, the first section covers shock and initial stabilization, venous access, monitoring, and cardiopulmonary cerebral resuscitation. A section on specific conditions such as cardiovascular and respiratory emergencies is organized by system, with a final section highlighting select topics like anesthesia and analgesia, transfusion medicine, and critical care pharmacology. Case studies, review questions, and images are provided on a companion website at www.wiley.com/go/norkus. Coverage focuses on dogs and cats, with special considerations for handling exotic and avian emergencies covered in a dedicated chapter. This in-depth material in an easy-to-navigate format is an essential resource for veterinary technicians and assistants, emergency and critical care veterinary technician specialists, and veterinary technician students.

Thoroughly updated for its Sixth Edition, this classic reference remains an unsurpassed source of definitive, practical guidance on adult patient care in the ICU. It provides encyclopedic, multidisciplinary coverage of both medical and surgical intensive care and includes a "how-to" atlas of procedures and a new section on noninvasive monitoring. Each Sixth Edition chapter, for the first time, identifies Advances in Management based on randomized controlled clinical trials. The cardiology section has been completely rewritten to reflect advances in management of acute coronary syndromes. Also included are extensive updates on management of COPD, diabetes, oncologic emergencies, and overdoses and poisonings. A companion Website will provide instant access to the complete and fully searchable online text.

This issue is the first of a two-part series on Life-Threatening Infections, edited by Dr. Anand Kumar. Article topics include: Meningitis and other non-viral CNS infections, Encephalitis and viral meningitis, Community Acquired Pneumonia, Hospital Acquired Pneumonia/Ventilator Associated Pneumonia, Clostridial gangrene and bacterial myositis, Acute peritonitis and bowel perforations, Post-operative wound and surgical site infections and Fulminant viral hepatitis.

This issue of Critical Care Clinics, guest edited by Drs. Marie Baldisseri, Mary Reed, and Randy Wax, in collaboration with Consulting Editor John Kellum, is devoted to Intensive Care Unit in Disaster. Topics in this issue include: Intensive care role in disaster management; Preparing the ICU for disaster; Augmenting capacity; Triage; Natural disasters; Biological/pandemic disasters; Chemical disasters; Radiation; Anthropogenic (terrorist/criminal act) disasters; Special populations (i.e., chronically ill, morbidly obese, pregnant); Pediatrics; Austere environments; Hospital as disaster Ground Zero; and Special considerations (i.e., mental health, ethics, public relations).

Issues in Critical and Emergency Medicine: 2013 EditionScholarlyEditions

Textbook of Critical Care, by Drs. Jean-Louis Vincent, Edward Abraham, Frederick A. Moore, Patrick Kochanek, and Mitchell P. Fink, remains your best source on effective management of critically ill patients. This trusted reference - acclaimed for its success in bridging the gap between medical and surgical critical care - now features an even stronger focus on patient outcomes, equipping you with the proven, evidence-based guidance you need to successfully overcome a full range of practice challenges. Inside, you'll find totally updated coverage of vital topics, such as coagulation and apoptosis in certain critical care illnesses, such as acute lung injury and adult respiratory distress syndrome; sepsis and other serious infectious diseases; specific organ dysfunction and failure; and many other vital topics. At www.expertconsult.com you can access the complete contents of the book online, rapidly searchable, with regular updates plus new videos that demonstrate how to perform key critical care procedures. The result is an even more indispensable reference for every ICU. Access the complete contents of the book online at www.expertconsult.com, rapidly searchable, and stay current for years to come with regular online updates. Practice with confidence by consulting with a "who's who" of global experts on every facet of critical care medicine. Implement today's most promising, evidence-based care strategies with an enhanced focus on patient outcomes. Effectively apply the latest techniques and approaches with totally updated coverage of the importance of coagulation and apoptosis in certain critical care illnesses, such as acute lung injury and adult respiratory distress syndrome; sepsis and other serious infectious diseases; specific organ dysfunction and failure; and many other vital topics. See how to perform key critical care procedures by watching a wealth of new videos online. Focus on the practical guidance you need with the aid of a new, more templated format in which basic science content has been integrated within clinical chapters, and all procedural content has been streamlined for online presentation and paired with videos.

This issue of Critical Care Clinics will focus on Severe Acute Respiratory Distress Syndrome and dealing with it in the ICU. Topics will include: Challenges and Successes in ARDS Research; Mechanical ventilation with Lung Protective Strategies: What works?; Gene therapy for ALI/ARDS; High Frequency Oscillatory Ventilation in ALI/ARDS; Prone positioning therapy in ARDS; Recovery and Long-term outcome in ARDS; and Experimental models and emerging hypotheses for ALI and ARDS

Now in its fourth edition, this leading critical care textbook contains more than 30 new chapters and completely updated information. The book addresses every problem encountered in the intensive care unit and covers surgical critical care more thoroughly than any other text.

Covering every problem encountered in today's intensive care unit, this leading critical care textbook presents the knowledge and expertise of more than 350 global experts in this fast-changing field. Beginning with the social aspects of medicine, it then discusses monitoring and organ system pathobiology followed by specific diseases states/syndromes. Each chapter begins with immediate concerns and proceeds to broader-based discussions of relevant pathophysiologic and clinical issues.

Drs. Honiden and Siner have put together a comprehensive issue on Critical Care as it relates to Chest Medicine. Articles include: Recent advances in management of Acute respiratory distress syndrome, Simulation training for critical care, Telemedicine (E-ICU issues), Adverse event reporting/quality improvement in the ICU, ICU Mobility, Hospital-acquired infections/resistant organisms/emerging pathogens, Circadian rhythm disturbance and sleep in the ICU environment, Advances in Sepsis Research, Controversies in ICU nutrition, and more

The Manitoba Law Journal is a peer-reviewed journal founded in 1961. The MLJ's current mission is to provide lively, independent and high caliber commentary on legal events in Manitoba or events of special interest to our community. This issue has articles from a variety of contributing authors including: Amar Khoday, Ami Kotler, Brandon Trask, Bruce MacFarlane, Bryan P. Schwartz, Dale McFadzean, Darcy L. MacPherson, Delloyd J. Guth, Donn Short, Douglas D. Ferguson, Edward D. Brown, Eveline Milliken, Gord Mackintosh, Janelle Anderson, Jeffrey Oliphant, John Burchill, John Pozios, Lee Stuesser, M. Lynne Jenkins, Martha E. Simmons, Miranda Grayson, Philip Girard, Richard J. Chartier, Richard Wolson, Romeo Dallaire, Sacha R. Paul, Sarah Buhler, Susan Noakes, and Trevor C. W. Farrow.

From the moment it was first proposed, the role of the nurse practitioner has been steeped in controversy. In the fields of both nursing and medicine, the idea that a nurse practitioner can, to some degree, serve as a replacement for the physician has sparked heated debates. Perhaps for that reason, despite the progress of the nurse practitioner movement, NPs have been reluctant to speak about themselves and their work, and their own vision of their role has thus remained largely invisible. Current research is dominated by instrumental and economic modes of discourse and tends to focus on the clinical activities associated with the role. Although information about demographics, educational preparation, position titles, reporting relationships, and costs of care contribute to our understanding, what was missing was an exploration of the lived experience of the nurse practitioner, as a means to deepen that understanding as well as our appreciation for their role. The Acute-Care Nurse Practitioner is based on in-depth interviews with twenty-six nurse practitioners working in acute-care settings within tertiary-care institutions all across Canada. Employing a hermeneutic approach, Rashotte explores the perspectives from which NPs view their reality as they undergo a transformational journey of becoming—a journey that is directed both outward, into the world, and inward, into the self. We learn how, in their struggle to engage in a meaningful practice that fulfills their goals as nurses, their purpose was hindered or achieved. In large part, the story unfolds in the voices of the NPs themselves, but their words are complemented by descriptive passages and excerpts of poetry that construct an animated and powerful commentary on their journey. Poised between two worlds, NPs make a significant contribution to the work of their colleagues and to the care of patients and families. The Acute-Care Nurse Practitioner offers an experiential alternative to conventional discourse surrounding this health care provider's role.

Basic Transesophageal and Critical Care Ultrasound provides an overview of transesophageal ultrasound of the heart, lung, and upper abdomen as well as basic ultrasound of the brain, lung, heart, abdomen, and vascular system. Ultrasound-guided procedures commonly used in critically ill patients are also covered. With more than 400 clinical images, this well-illustrated text and its accompanying videos demonstrate new developments and challenges for those interested in mastering basic transesophageal echocardiography

(TEE) and bedside surface ultrasound. Each chapter is presented in an easy-to-read format that includes color diagrams and ultrasound images which optimize interactive learning for both novice and experienced clinicians. The book is divided into two parts. The first is dedicated to basic TEE while the second provides focused coverage of bedside ultrasound. The book also includes chapters on extra-cardiac TEE and ultrasound of the brain—unconventional areas that will become more important in the future as clinicians evaluate not only the etiology of hemodynamic instability but also the impact on multiple organs and systems such as the kidney, liver, splanchnic perfusion, and brain. This text is an invaluable resource to those preparing for the National Board of Echocardiography's Examination of Special Competence in Basic Perioperative Transesophageal Echocardiography (PTEeXAM) and its equivalents outside the USA and Canada. In addition, it prepares physicians for the American College of Chest Physician's critical care ultrasound certification. The contents follow the syllabus of the TEE basic echo exam to ensure complete coverage of a trainee's requirements. It also includes sample questions and two helpful mock exams. Written by a multidisciplinary team of experts in TEE, the book is a must-have for those in training and in practice.

This book discusses basic monitoring techniques that can be easily performed on emergency canine and feline patients in both first line emergency and primary care clinics. Techniques include blood pressure measurement, capnography, electrocardiography, pulse oximetry, and point of care monitoring ranging from the physical exam to bedside ultrasound and diagnostic tests such as PCV/TP, blood glucose and lactate.

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