



Platforma edukacyjno-dydaktyczna



Urszula Sasimowicz-Andrzejewska



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AccessMedicine jest doskonale zaprojektowaną interaktywną platformą pozwalającą sprostać wszelkim wymaganiom programu nauczania na Uniwersytetach Medycznych. Pomaga nie tylko studentom jak również wykładowcom wyselekcjonować konkretne, specjalistyczne informacje.

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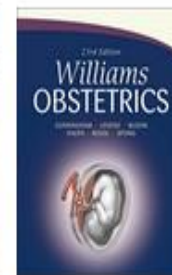
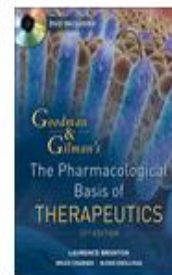
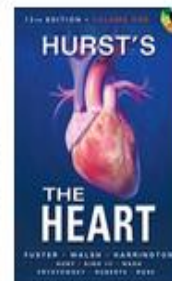
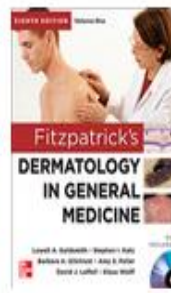
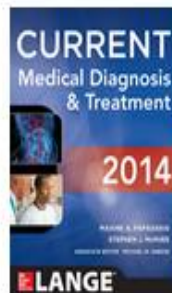
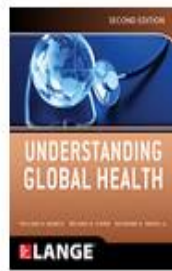
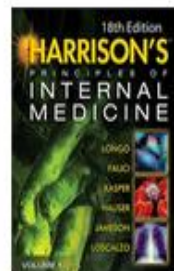
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pneumonia

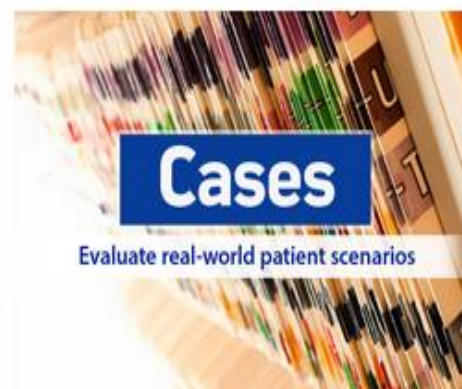
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Textbooks

▼ Narrow by Topic

5038 results in Textbooks



Chapter 257. Pneumonia

Harrison's Online



Chapter 68. Community-Acquired Pneumonia, Aspiration Pneumonia, and Noninfectious Pulmonary Infiltrates

Tintinalli's Emergency Medicine



Chapter 189. Community-Acquired Pneumonia

Principles and Practice of Hospital Medicine



Chapter 194. Healthcare and Hospital-Acquired Pneumonia

Principles and Practice of Hospital Medicine



Chapter 53. Pneumonia

Multimedia



Grand Rounds
Preoperative Pulmonary Evaluation
Grand Rounds



Grand Rounds
Community-Acquired Pneumonia
Grand Rounds



Videos
Bronchial breath

sounds recorded over an area of consolidation in a person with pneumonia. Note the loud expiratory phase, which helps to clarify these sounds as bronchial.

CURRENT Medical Diagnosis & Treatment 2014

All Multimedia Results (6) >

Images

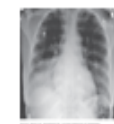


Figure 13-6.
Radiographic appearance of a right lower lobe pneumonia.

W przypadku wyszukiwania podstawowego baza poda listę źródeł na platformie, które dotyczą wybranego zagadnienia:

- Tytuły książek;
- Ground rounds – wykłady;
- Filmy video;
- Zdjęcia, etc.

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- ☐ Adams & Victor's Principles of Neurology, 10e
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- ☐ Basic & Clinical Pharmacology, 12e
- ☐ Basic Radiology, 2e
- ☐ Behavioral Medicine: A Guide for Clinical Practice, 3e
- ☐ Cardiovascular Physiology, 7e
- ☐ Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine, 7e
- ☐ Clinical Neuroanatomy, 27e
- ☐ Clinical Neurology, 8e
- ☐ Clinician's Pocket Reference: The Scout Monkey, 11e
- ☐ CURRENT Diagnosis & Treatment Emergency Medicine, 7e
- ☐ CURRENT Diagnosis & Treatment in Family Medicine, 3e
- ☐ CURRENT Diagnosis & Treatment in Pulmonary Medicine
- ☐ CURRENT Diagnosis & Treatment of Sexually Transmitted Diseases
- ☐ CURRENT Diagnosis & Treatment: Cardiology, 3e
- ☐ CURRENT Diagnosis & Treatment: Gastroenterology, Hepatology, & Endoscopy, 2e
- ☐ CURRENT Diagnosis & Treatment: Nephrology & Hypertension
- ☐ CURRENT Diagnosis & Treatment: Obstetrics & Gynecology, 11e
- ☐ CURRENT Diagnosis & Treatment: Pediatrics, 21e
- ☐ CURRENT Diagnosis & Treatment: Psychiatry, 2e
- ☐ Hurst's The Heart, 13e
- ☐ Jawetz, Melnick, & Adelberg's Medical Microbiology, 28e
- ☐ Junqueira's Basic Histology: Text & Atlas, 13e
- ☐ Lichtman's Atlas of Hematology
- ☐ Morgan & Mikhail's Clinical Anesthesiology, 5e
- ☐ Multimodal Cardiovascular Imaging: Principles and Clinical Applications
- ☐ Pathology: The Big Picture
- ☐ Pathophysiology of Blood Disorders
- ☐ Pathophysiology of Disease, 6e
- ☐ Pocket Guide to Diagnostic Tests, 6e
- ☐ Poisoning & Drug Overdose, 6e
- ☐ Principles and Practice of Hospital Medicine
- ☐ Principles of Critical Care, 3e
- ☐ Pulmonary Physiology, 8e
- ☐ Quick Medical Diagnosis and Treatment
- ☐ Review of Medical Microbiology & Immunology, 12e
- ☐ Schwartz's Principles of Surgery, 9e
- ☐ Sherris Medical Microbiology, 5e
- ☐ Smith's Patient-Centered Interviewing: An Evidence-Based Method, 3e
- ☐ Symptom to Diagnosis: An Evidence-Based Guide, 2e
- ☐ Systematic Musculoskeletal Examinations

W przypadku wyszukiwania zaawansowanego możemy wybrać źródło lub typ źródła, w obrębie którego chcemy to wyszukiwanie przeprowadzić

Baza zawiera różne moduły, w obrębie których możemy się poruszać.

W zakładce „Readings” znajdziemy listę pełnotekstowych podręczników oraz atlasów uporządkowanych tematycznie.

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- Healthcare Systems, Quality & Safety
- Internal Medicine
- Medical Research
- Neurology
- Obstetrics and Gynecology
- Ophthalmology
- Pediatrics
- Physical Exam and Patient Communication
- Psychiatry
- Radiology
- Surgery
- Textbook Updates

Harrison's Principles of Internal Medicine, 18e
Dan L. Longo, Anthony S. Fauci, Dennis L. Kasper, Stephen L. Hauser, J. Larry Jameson, Joseph Loscalzo

Adams and Victor's Principles of Neurology, 10e
Alan H. Ropper, Martin A. Samuels

Adams and Victor's Principles of Neurology, 8e
Alan H. Ropper, Martin A. Samuels

The Atlas of Emergency Medicine, 3e
Kevin J. Knopp, Lawrence S. Slack, Alan S. Slonov, R. Jason Thurman

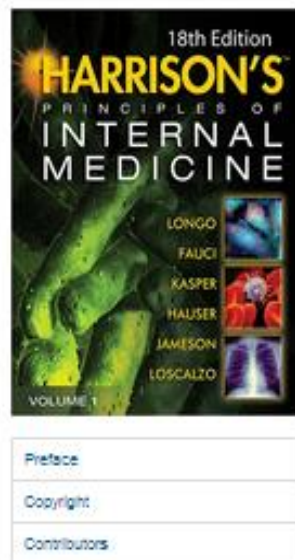
Basic & Clinical Biostatistics, 4e
Bretz Davison, Robert G. Trapp

Basic & Clinical Pharmacology, 12e

Basic Radiology, 2e
Michael Y.M. Chen, Thomas L. Pope

Po wybraniu tytułu otrzymujemy spis treści oraz dodatkowe materiały powiązane z daną publikacją: prezentacje, wykłady, multimedia.

Po otwarciu pełnego tekstu możemy użyć opcji wydruku, maila, etc.



Harrison's Principles of Internal Medicine, 18e

Den L. Longo, Editor, Anthony S. Fauci, Editor, Dennis L. Kasper, Editor, Stephen L. Hauser, Editor, J. Larry Jameson, Editor, Joseph Loscalzo, Editor

[Take Interactive Self-Assessment](#)

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- [+ Part 1. Introduction to Clinical Medicine](#)
- [+ Part 2. Cardinal Manifestations and Presentation of Diseases](#)
- [+ Part 3. Genes, the Environment, and Disease](#)
- [+ Part 4. Regenerative Medicine](#)
- [+ Part 5. Aging](#)
- [+ Part 6. Nutrition](#)
- [+ Part 7. Oncology and Hematology](#)
- [+ Part 8. Infectious Diseases](#)
- [+ Part 9. Terrorism and Clinical Medicine](#)
- [+ Part 10. Disorders of the Cardiovascular System](#)
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- [+ Part 12. Critical Care Medicine](#)
- [+ Part 13. Disorders of the Kidney and Urinary Tract](#)
- [+ Part 14. Disorders of the Gastrointestinal System](#)
- [+ Part 15. Disorders of the Joints and Adjacent Tissues](#)
- [+ Part 16. Endocrinology and Metabolism](#)
- [+ Part 17. Neurologic Disorders](#)
- [+ Part 18. Poisoning, Drug Overdose, and Envenomation](#)
- [+ Part 19. High-Altitude and Decompression Sickness](#)

[Appendix: Laboratory Values of Clinical Importance](#)

[Chapter e53 The Clinical Laboratory in Modern Health Care](#)

FEATURES

Textbook Updates

10/31/2013
[CMV001 Is Effective at Preventing Cytomegalovirus Infection in Patients Receiving Hematopoietic Stem Cell Transplants](#)
Neeraj K. Surana, Dennis L. Kasper

10/31/2013
[A Novel Brain-Computer Interface Approach to Deep Brain Stimulation for Parkinson's Disease](#)
S. Andrew Josephson

10/31/2013
[A New Drug for Narcolepsy Targets Histamine Receptors](#)
S. Andrew Josephson

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Multimedia

-  Video e33-30
1 secs
-  Video e36-08
54 secs
-  Video e36-03
1 min, 30 secs

[View All Videos](#)

Grand Rounds

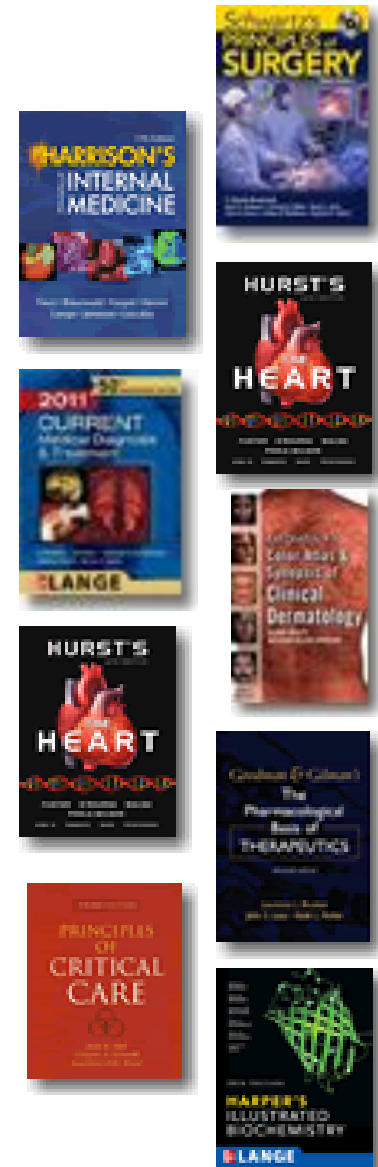
 [Strategies to Reduce Postoperative Cardiac Complications](#)
by Steven Cohn, MD, FACP

[View All](#)

Rozdziały dostępne wyłącznie na platformie

Najlepsze podręczniki + częste aktualizacje

- *Harrison's Online (Principles of Internal Med.);*
- *Schwartz's Principles of Surgery (F. Charles Brunickardi, Dana K. Andersen, Timothy R. Billiar);*
- *CURRENT Medical Diagnosis & Treatment*
(Stephen J. McPhee, Maxine A. Papadakis);
- *Fitzpatrick's Color Atlas and Synopsis of Clinical Dermatology (Klaus Wolff, Richard Allen Johnson);*
- *Hurst's the Heart (ed. Valentin Fuster, Robert A. O'Rourke);*
- *Goodman & Gilman's The Pharmacological...*
(Laurence L. Brunton) ;
- *Harper's Illustrated Biochemistry (Robert K. Murray);*
- *Clinical Neurology (Simon)...*



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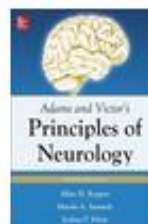
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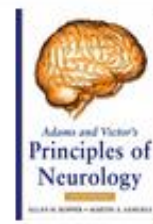
Harrison's Principles of Internal Medicine, 18e

Dan L. Longo, Anthony S. Fauci, Dennis L. Kasper, Stephen L. Hauser, J. Larry Jameson, Joseph Loscalzo



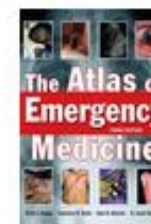
New! Adams and Victor's Principles of Neurology, 10e

Alan H. Ropper, Martin A. Samuels



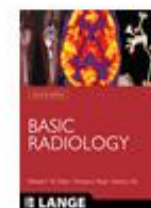
Adams and Victor's Principles of Neurology, 8e

Alan H. Ropper, Martin A. Samuels



The Atlas of Emergency Medicine, 3e

Kevin J. Kropp, Lawrence S. Slack, Alan S. Slonov, R. Jason Thurman



Oprócz znanych tytułów dostępne są również: baza wytycznych, algorytmy postępowania, narzędzie diagnostyczne (diagnostyka różnicowa), baza testów diagnostycznych, kalkulatory.

Zintegrowana
baza leków.

Drug Monographs

All Drugs

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Nazwy
generyczne,
handlowe, baza
przypadków

All Drugs

0-9 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

[A&D Jr. \(OTC\)](#)[A.E.R. Traveler \(OTC\)](#)[A.E.R. Witch Hazel \(OTC\)](#)[A+D Prevent \(OTC\)](#)[A+D® Original \(OTC\)](#)[A-200® Lice Treatment Kit \(OTC\)](#)[A-200® Maximum Strength \(OTC\)](#)[A-25 \(OTC\)](#)[A3 \(Neuroblastoma\)](#)[Abacavir](#)[Abacavir and Lamivudine](#)[Abacavir, Lamivudine, and Zidovudine](#)[Abatacept](#)[Abbreviations, Acronyms, and Symbols](#)[Abciximab](#)[Abelcet](#)[Abilify](#)[Abilify Discmelt](#)[Abilify Maintena](#)[Abiraterone Acetate](#)[Abiraterone-Prednisone \(Prostate\)](#)[Abiavar](#)[AbobotulinumtoxinA](#)[Abraxane](#)[Abreva \(OTC\)](#)[Absorica](#)[Abstral](#)[ABVD \(Hodgkin\)](#)[ABVD Early Stage \(Hodgkin\)](#)[AC \(Breast\)](#)[AC \(Dose-Dense\) followed by Paclitaxel \(Dose-Dense\) \(Breast\)](#)[AC \(Dose-Dense\) followed by Paclitaxel \(Dose-Dense\)-Trastuzumab \(Breast\)](#)[AC \(Dose-Dense\) followed by Paclitaxel Weekly \(Breast\)](#)[AC followed by Docetaxel Every 3 Weeks \(Breast\)](#)[AC followed by Paclitaxel Weekly \(Breast\)](#)[AC followed by Paclitaxel-Trastuzumab \(Breast\)](#)[ACAM2000®](#)[Acamprosate](#)[Acanya®](#)

Multimedia

Videos by Category

Bedside and Office-Based Procedures

- Cardiovascular
- Ears, Nose and Throat
- Gastrointestinal
- Genitourinary
- Musculoskeletal
- Neurologic
- Pulmonary
- Reproductive

Dx Tests, Treatments & Conditions

Pathophysiology

Patient Interview

Pharmacology

Physical Exam

Videos by System

Musculoskeletal Exams

Patient Safety Modules

Grand Rounds

Bedside

Procedures



Play

Abdominal Paracentesis

12 mins, 56 secs

Author(s): Maria A. Yialamas, Anna Rutherford, and Lindsay King

[View in context](#)

Play

Bartholin Gland Duo Incision and Drainage

4 mins, 50 secs

Author(s): Barbara L. Hoffman, MD, and Geneva Garrett



Play

Chest Tube Insertion

10 mins

Author(s): David Cline and Henderson McGinnis, Department of Emergency Medicine, Wake Forest University Baptist Medical Center
Medical Editor(s): Judith E. Tintinalli, David Cline, O. John Ma

Play

Endotracheal Intubation

13 mins, 0 secs

Author(s): Charles A. Morris, Emily Nelson Maher

[View in context](#)

Play

Fine Needle Aspiration of Breast Cyst

9 mins, 58 secs

Author(s): Christine Weitz, MD, Assistant Professor, Surgical Oncology, Mount Sinai Medical Center

[View in context](#)

Baza zawiera pliki multimedialne:

- Filmy video z przeprowadzanych zabiegów, badań pacjentów;
- Nagrane przez specjalistów wykłady;
- Zdjęcia.

Wszystko uporządkowane dziedzinowo i z możliwością znalezienia pliku w kontekście (tekście).

Cases

Case Files®

[Pathophysiology Cases](#)[Hurst's Imaging Cases](#)

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Case Files®

Author(s): Eugene C. Toy, MD

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▼ Anatomy

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Case 26
Case 27
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Case 30

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klinicznej (opis
przypadku,
pytania
sprawdzające,
referencje)

Self-Assessment

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Harrison's Principles of Internal Medicine: Self-Assessment and Board Review, 18e

Charles M. Wiener, Cynthia D. Brown, Anna R. Hammes
Preface | Copyright | Contributors



Williams Obstetrics Study Guide, 23e

Barbara L. Hoffman, Robyn Horsager, Scott W. Roberts, Vanessa L. Rogers, Patricia C. Santiago-Munoz, Kevin C. Worley
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Step 2: Click "Start Test".

NOTE: A test may not include more than 250 questions

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of 171 available from Section I. Introduction to Clinical Medicine

of 31 available from Section II. Nutrition

of 122 available from Section III. Oncology and Hematology

of 250 available from Section IV. Infectious Diseases

of 86 available from Section V. Disorders of the Cardiovascular System

of 66 available from Section VI. Disorders of the Respiratory System

of 36 available from Section VII. Disorders of the Urinary and Kidney Tract

of 73 available from Section VIII. Disorders of the Gastrointestinal System

of 74 available from Section IX. Rheumatology and Immunology

of 110 available from Section X. Endocrinology and Metabolism

of 87 available from Section XI. Neurologic Disorders

of 18 available from Section XII. Dermatology

► Williams Obstetrics Study Guide, 23e

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Wybierz liczbę
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Danego rozdziału
i rozpocznij testy
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Question 2 of 2

A 68-year-old man is admitted to the intensive care unit with spontaneous retroperitoneal bleeding and hypotension. He has a medical history of hypertension, diabetes mellitus, and chronic kidney disease stage III. His medications include lisinopril, amlodipine, sitagliptin and glimepiride. On initial presentation, he is in pain and has a blood pressure of 70/40 mmHg with a heart rate of 132 beats/min. His hemoglobin on admission is 5.3 g/dL and hematocrit is 16.0%. His coagulation studies demonstrate an aPTT of 64 seconds and a PT of 12.1 seconds (INR 1.0). Mixing studies (1:1) are performed. Immediately, the aPTT decreases to 42 seconds. At 1 hour, the aPTT is 48 seconds, and at 2 hours, it is 68 seconds. Thrombin time and reptilase time are normal. Fibrinogen is also normal. What is the most likely cause of the patient's coagulopathy?

- ☐ A. Acquired factor VIII deficiency
- ☐ B. Acquired factor VIII inhibitor
- ☐ C. Heparin
- ☐ D. Lupus anticoagulant
- ☐ E. Vitamin K deficiency

Submit Answer and Complete Test

[Stop test and return to Q&A home](#)

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klawiszem „submit”

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Question 2: Incorrect

A 68-year-old man is admitted to the intensive care unit with spontaneous retroperitoneal bleeding and hypotension. He has a medical history of hypertension, diabetes mellitus, and chronic kidney disease stage III. His medications include lisinopril, amlodipine, sitagliptin, and glimepiride. On initial presentation, he is in pain and has a blood pressure of 70/40 mmHg with a heart rate of 132 beats/min. His hemoglobin on admission is 5.3 g/dL and hematocrit is 16.0%. His coagulation studies demonstrate an aPTT of 64 seconds and a PT of 12.1 seconds (INR 1.0). Mixing studies (1:1) are performed. Immediately, the aPTT decreases to 42 seconds. At 1 hour, the aPTT is 58 seconds, and at 2 hours, it is 68 seconds. Thrombin time and reptilase time are normal. Fibrinogen is also normal. What is the most likely cause of the patient's coagulopathy?

- ☒ A Acquired factor VIII deficiency
- ☒ B Acquired factor VIII inhibitor
- ☐ C Heparin
- ☐ D Lupus anticoagulant
- ☐ E Vitamin K deficiency

Related Topics:

- [acquired factor viii inhibitors](#)

The correct answer is B. You answered A.

Explanation: The activated partial thromboplastin time (aPTT) measures the integrity of the intrinsic and common coagulation pathways, and as such, is affected by all of the coagulation factors, except factor VII. The aPTT reagent contains phospholipids derived from animal or vegetable sources and includes an activator of the intrinsic coagulation system such as nonparticulate ellagic acid or kaolin. The phospholipid reagent frequently varies from laboratory to laboratory. Thus, an aPTT measured in one hospital may differ from another. Isolated elevations in the aPTT can be related to factor deficiencies, heparin or direct thrombin inhibitors, lupus anticoagulant, or the presence of a specific factor inhibitor. To differentiate between the presence of factor deficiencies and inhibitors, mixing studies should be performed. Mixing studies are performed by mixing normal plasma and the patient's plasma in a 1:1 ratio. The aPTT and prothrombin time (PT) are incubated at 37°C, and levels are measured immediately and serially thereafter for about 2 hours. If the cause is an isolated factor deficiency, the aPTT should correct to normal values and remain normal throughout the incubation period. In the presence of an acquired inhibitor, the aPTT may or may not correct immediately, but upon incubation, the inhibitor becomes more active, and the aPTT will progressively prolong. In contrast, the aPTT does not correct immediately or with incubation in the presence of lupus anticoagulants. The presence of serious bleeding in the presence of mixing studies suggesting an inhibitor should further rule out lupus anticoagulant as a cause because the lupus anticoagulant typically presents with no symptoms or as a thrombotic disorder. The mixing studies do not, however, eliminate the presence of heparin as a cause of the prolonged aPTT. If heparin were present, the thrombin time, but not the reptilase time, would be prolonged. In this scenario, both values were normal, ruling out the presence of heparin or a direct thrombin inhibitor. Likewise, disseminated intravascular coagulation can be ruled out in the presence of normal fibrinogen levels. In serious vitamin K deficiency, both the PT and aPTT should be prolonged.

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A1C Test for Diabetes	Anesthesia
Abdominal Muscle Strain	Aneurysm
Abdominal Muscle Strain Exercises	Anger Management
Abdominal Pain	Angina (Chest Pain)
Abdominal Prostatectomy (Removal of Prostate Gland)	Angiogram
Ablation Treatment of Heart Rhythm Problems	Angioplasty
Abnormal Eye Movements (Nystagmus)	Angiotensin II Receptor Blockers
Abuse and Domestic Violence	Animal and Human Bites
Abuse During Pregnancy	Ankle Fracture
Abuse of Older Adults	Ankle Fracture Exercises
Acanthosis Nigricans Skin Changes	Ankle Replacement Surgery
ACE Inhibitors	Ankle Sprain
Achilles Tendon Injury	Ankle Sprain Exercises
Achilles Tendon Injury Exercises	Anorexia Nervosa
Acne	Antacids
Acne: Brief Version	Anterior Cruciate Ligament (ACL) Injury
Acromegaly (Excess Growth Hormone)	Anterior Cruciate Ligament (ACL) Injury Exercises
Active Listening	Anterior Cruciate Ligament (ACL) Reconstruction
Acute Bronchitis	Antianxiety Medicines
Acute Bronchitis: Brief Version	Antiarrhythmic Medicines
Acute Diarrhea	Antidiabetic-Associated Diarrhea
Acute Diarrhea: Brief Version	Antidiotics

Lista ulotek
informacyjnych dla
pacjentów



Dziękuję

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