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Complete Blood Count pt1
Infants with Fever:

Management - Pediatrics |
Lecturio *Understanding the
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Section 6 - Specific

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*Examination for Oral Non-
Verbal Apraxia - Edythe
Strand | MedBridge What is
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Explain Differential
diagnosis, Define
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development of sub

specialties in pediatrics

may be justifiably

considered to be progress.

Due to this fact, complex

syn dromes can be analyzed

today in their pathogenesis,

are better under stood in

their symptomatology, and

can be therapeutically

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Differential Diagnosis of
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epiglottitis,
retropharyngeal abscess,
peritonsillar abscess, EBV
(obstruction in or near
pharynx) Fatigue: infectious
mononucleosis; Abrupt
onset: epiglottitis;
Evaluation (physical
examination): Vesicles
anterior: herpetic
stomatitis, SJS, Behcet

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uncommon in pediatrics. Just as systematic reviews and meta-analyses combine small, clinical trials to give an overall estimate of clinical effectiveness, rigorous systematic reviews can combine data from small studies to provide pretest probabilities for clinical problems. Systematic reviews have addressed the differential diagnoses of

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How physicians arrive at a diagnosis has been the subject of much debate. Pattern recognition is used extensively by experts and

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~~Atlas of Pediatric Clinical
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Video-assisted thoracoscopic surgery as a primary intervention in pediatric parapneumonic effusion and empyema. Am Surg. 2010 Sep. 76(9):957-61. . Avansino JR, Goldman B, Sawin RS, Flum DR. Primary operative versus nonoperative therapy for pediatric empyema: a meta-analysis. Pediatrics. 2005 Jun. 115(6):1652-9. .

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The objective of the study
was to validate the
effectiveness of a
questionnaire and computer-
assisted algorithm in
diagnosing children with
dizziness or vertigo.
Dizziness and vertigo are
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children, causing an extensive, often unnecessary evaluation. A pediatric "dizziness questionnaire" was designed and a computer-assisted algorithm was developed to facilitate the ...

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The differential diagnoses
of diaper dermatitis include
infections (eg, bullous
impetigo), chronic
inflammatory dermatoses,
such as psoriasis and atopic
dermatitis, metabolic
diseases (eg, Acrodermatitis
enteropathica), autoimmune

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diseases (eg, Lichen sclerosus), and also neoplasias (eg, Langerhans cell histiocytosis).

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and clinical reasoning to develop diagnostic competence. It is also suitable for any doctor who wishes to refresh his/her clinical approaches to pediatric patients. With 50 carefully selected pediatric problems that are likely to be encountered in medical practice, each chapter is written in a user-friendly style and takes you through the fundamental thought process needed to arrive at the most likely diagnosis. This thought process includes: Understanding the correct definition of the clinical problem Recognizing the symptoms of the clinical problem Analyzing the

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pathophysiology behind the

problem Creating a

prioritized list of

differential diagnosis

Having a robust clinical

approach/algorithm that

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scenarios with structured

self-reflection questions

and answers Foreword by Dr

Naveen Thacker, President of

Asia Pacific Pediatric

Association Peer reviewed by

members of Asia Pacific

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The continuing development

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of subspecialties in pediatrics may be justifiably considered to be progress. Due to this fact, complex syndromes can be analyzed today in their pathogenesis, are better understood in their symptomatology, and can be therapeutically controlled. Therapy has reached an unexpectedly high level of effectiveness through this specialization, never dreamed of even a few years ago. No pediatrician can afford to do without it. However, this gain in knowledge inevitably places new burdens on the individual physician because of the confusing diversity

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of the diseases under consideration. The colleague in private practice who is called upon to treat an acutely ill child is all too likely to have the patient admitted to the hospital without necessity or without the desired diagnostic insight. The hospital-based physician, confronted with the same situation, tends to rely more on a haphazard utilization of the laboratory facilities or the specialists. Should an illness not present itself strictly according to the textbook, the wide range of biochemical investigations and "tolerance tests" to which the patient is

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subjected offers the physician, made insecure by the diversity of the diagnostic possibilities, an opportunity for thinking and reading on the problem. Medical literature, however, has reached such enormous proportions that many physicians give up trying to keep abreast of it. Be it for lack of time or some other reason, they may consult pediatric literature only superficially or not at all—to the harm of the sick child.

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ideal companion to Nelson
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This book is devoted exclusively to differential diagnosis in pediatric dermatology. It covers the full range of relevant conditions: inherited skin disorders; nevi; viral, bacterial, fungal, and parasitic infections; acne; allergic diseases; autoimmune skin disorders; connective tissue diseases; tumors; and miscellaneous conditions. Each comparison addresses the differential diagnosis between two (or occasionally three or four) dermatological conditions,

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containing between two and six images and a short text emphasizing the clinical differences between the diseases in question. At the end of each chapter, a summary highlights one or two characteristics essential for the differential diagnosis. The author is an expert who, since 1982, has been responsible for a column devoted to the differential diagnosis of pediatric dermatology in the European Journal of Pediatric Dermatology. The volume will represent an ideal tool for pediatric dermatologists, pediatricians, and GPs, and will help them in the

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Dr. Jean Lintermans came to Seattle in 1962 from his general pediatric residency at the University of Iowa. He worked with us in clinical pediatric cardiology and in our animal physiology laboratory for the next three years. He was the most productive individual in the history of our training program, publishing seven papers in those three years, four clinical papers and three involving pulsed ultrasonic flowmeters and implanted ultrasonic displacement devices in animals. The work, from laboratory to

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publication, was always done with the utmost attention to accuracy, and was well developed conceptually.

Although English was not his native language, Jean's mastery of English was not only excellent, I felt that he actually communicated better than many of our native physicians. During the past year, I was delighted to learn that Jean was preparing a textbook on pediatric echocardiography with Dr. van Dorp, and was even more pleased to be asked to write a foreword .. However, the greatest pleasure came from actually reading this book, and finding that it does indeed

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have a unique approach, and with the additional genuine benefit to the reader of a thorough, consistent, segmental approach to the diagnosis of congenital heart disease.

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examination area. Pediatric
Pearls highlight effective
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practice. Family, Cultural,
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sections address the

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increasingly important areas of family and cultural assessment to prepare you for differences to anticipate when assessing children of various cultural or racial groups. Evidence-Based Practice Tips highlight useful research findings that guide clinical practice. Bulleted Summary of Examination lists at the end of each examination chapter highlight key assessment points associated with each body system and serve as a convenient learning aid and quick reference. End-of-chapter Charting examples demonstrate how to record physical examination

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findings in the health record and familiarize you with documentation language and format. Convenient spiral binding lets you lay the book flat or fold it back for easy visualization and quick reference in clinical settings.

Featuring over 500 full-color clinical photographs, succinct clinical pearls, and detailed differential diagnosis tables, this atlas is a visual guide to the rapid and accurate diagnosis and appropriate treatment of pediatric problems. The book will greatly assist busy

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Practitioners in recognizing disease entities and distinguishing among entities that appear similar. The Second Edition includes information on treatment, a chapter on breastfeeding images that demonstrate proper latch, and 150 new images. Organized by anatomic site, the book focuses on presenting problems. Each chapter includes bulleted clinical pearls on the history and physical examination. A differential diagnosis table lists all common diagnoses with ICD-9 codes and the distinguishing characteristics for each diagnosis. Clinical

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