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http://www.idealibrary.com on 

### MR/CT Atlas of Anatomy (CD ROM)

Klaus Kuper.  
Thieme, 2001.  
price £101.75.

The utilisation of additional learning (including CD RoMs) is becoming increasingly important within medicine. This CD aims to depict a digital section of anatomy from MRI and CT scans in a comprehensive and logical fashion. The CD is routinely loaded and has two main sections, one describing CT and the other MRI anatomy. Access to the various sections and the images within are generally of very high quality and easy to use. There is the ability to scroll up and down various images and to change direction from axial to coronal or sagittal planes. There is a very good and extensive labelling of the structures identified, which is supplemented by a quiz function where the student is asked to click on the appropriate area of anatomy listed by the side. A successful click is accompanied by the sound of a gong whilst an error causes a dog to bark! Overall the layout and illustrations are of very high quality particularly of the central nervous system, spine and musculo-skeletal system. However, the angio anatomy of the abdomen and thorax is very poorly demonstrated. The images are of low definition with only very large vessels visible. In addition there are several factual errors including mislabelling of some muscles in the shoulder. There are some individual peculiarities in labelling secondary to translation from German but overall the labelling is of a very high quality. This CD would be useful to postgraduate trainees particularly in radiology but also in other specialities such as orthopaedics, neuroradiology and general surgery. It would not have much benefit to those interested in vascular anatomy.

Overall the wealth of high quality easily archived images outweighs these minor problems and I would recommend this as part of the digital library for diagnostic radiology trainees. It would need to be supplemented by other material particularly in vascular anatomy.

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### Decision making in Vascular Surgery

Cronenwett and Rutherford, Eds.  
Harcourt Publishers Ltd. 2001.  
390 pages, price £58.00.

This book comprehensively addresses the subject of vascular surgery and does so in an original and user-friendly way. Within each chapter a topic is presented in the form of an algorithm, showing the management pathway that is taken when faced with a particular clinical situation. The decision pathway is accompanied by text, which explains each step to be taken, and the reason for the decision. Background information is provided on each subject and references are given where these decisions are based on research evidence. The book has been split into a progressive sequence of chapters. The initial topics discuss the pre-operative evaluation and management of a patient with vascular disease. This is followed by chapters on cerebrovascular disease, aneurysms, extremity occlusive disease, renovascular disease, venous disease and finally miscellaneous topics that include lymphoedema and trauma.

The chapters are concise and well written. The diagrams are clear and easy to follow. They highlight the decisions that are routinely made and break the decision process into small and manageable stages. Unfortunately, the evidence for these decisions is not always explicit. Most chapters reference their sources but some do not provide a clear evidence-base for their decisions and relate them instead to the authors' own practice. If the evidence does not exist then it would be helpful for this to be explicitly stated.

The book explores difficult problems that are faced in vascular practice such as co-existing carotid and coronary disease. By using the algorithm approach one can easily follow each step in the decision path, and making the problem seem simpler and more logical. This may be especially useful for the inexperienced vascular surgeon. Exploring a subject in this manner also highlights areas of uncertainty and issues that require further research.

There are several interesting chapters that cover newer technologies and procedures such as endovascular aneurysm repair and thrombolysis. The endovascular chapter recognises the fact that this is still an unproven technique, both in terms of cost and effectiveness. The potential benefits and current limitations of this emerging technique are also discussed.

The book tends to have a North American perspective and certain recommendations, for example the screening of carotids and aneurysms post-operatively that may not be universally accepted. This also limits the discussion of other patterns of vascular disease and trauma, which may be more prevalent in different parts of the world.

This book generally addresses the main problems and decisions that face a vascular surgeon. It is easy to read and understand and would be especially useful

to the junior vascular trainee. It is not as in-depth as some textbooks but does provide a good grounding in topics of vascular surgery. It will also stimulate further reading and research on topics of particular interest. It utilises a modern approach for a textbook, but does fail to fulfil a potential to provide a comprehensive evidence-base for clinical decisions within vascular surgery.

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Shared decision-making improves the quality of patient care. Unfortunately, shared decision-making is not yet common practice among vascular surgeons. Thus, decision support tools were developed to assist vascular surgeons and their patients in using shared decision-making. This trial aims to evaluate the effectiveness and implementation of decision support tools to improve shared decision-making during vascular surgical consultations in which a treatment decision is to be made. Improving shared decision-making in vascular surgery by implementing decision support tools: study protocol for the stepped-wedge cluster-randomised OVIDIUS trial. S. M. L. de Mik 1 na1 , F. E. Stubenrouch 1 na1 Vascular Surgery Training Program Profiles. The Society develops guidelines to aid its members and their patients in the decision-making process. SVS guideline writing groups draw upon systematic reviews of the available evidence to inform key recommendations. Systematic reviews and meta-analyses are performed by the Mayo Clinic Evidence-based Practice Center, in Rochester, Minnesota. The methodology used for SVS clinical practice guidelines has been published in the Journal of Vascular Surgery. SVS members are invited to propose guideline topics, using the request form. New Guidelines & Reporting Standards @article{Santema2016SharedDM, title={Shared Decision Making in Vascular Surgery: An Exploratory Study.}, author={T. B. Santema and F. E. Stubenrouch and M. Koelemay and A. Vahl and C. Vermeulen and M. Visser and D. Ubbink}, journal={European journal of vascular and endovascular surgery : the official journal of the European Society for Vascular Surgery}, year={2016.} OBJECTIVES Shared decision making (SDM) is a process in which patients and their doctors collaborate in choosing a suitable treatment option by incorporating patient values and preferences, as well as the best available evidence. Particularly in vascular surgery, several conditions seem suitable for SDM because there are multiple treatment options. Start by marking "Decision Making in Vascular Surgery" as Want to Read: Want to Read savingâ€¦ Want to Read. Filled with clear, easy-to-follow decision trees for 75 common scenarios in vascular surgery, this resource presents helpful explanatory text and current references for every step of each algorithm. This practical approach highlights the key decision points in vascular surgery practice and considers their applications to individual patients. Both experienced practitioners Filled with clear, easy-to-follow decision trees for 75 common scenarios in vascular surgery, this resource presents helpful explanatory text and current references for every step of each algorithm.

Your money will make a difference - improve the quality of our file sharing community to help more people. Top Related. BIOL 121 Heart Anatomy Photo Atlas. Atlas Anatomy German. Atlas of Human Skeletal Anatomy - MIRACLE - Home 2019-09-07 Atlas of Human Skeletal Anatomy Basics. Basic Tactile Anatomy Atlas. Atlas Anatomy Larynx. Netter, Atlas of Human Anatomy. Color Atlas of Anatomy MC.minn. Atlas of Lobster Anatomy and Histology. About us. Contact us. Anatomy in Your Pocket by Anne Gilroy is based on the award-winning textbook Atlas of Anatomy and the work of Michael Schuenke, Erik Schulte, and Udo Schumacher. This volume is organized by seven sections: the back, thorax, abdomen, pelvis, upper limb, lower limb, and head and neck. The anatomy in these color illustrations mirror the black and white anatomic MR images presented in this atlas. Anatomical color drawings and concise descriptions of the major intracranial vascular territories further enhance understanding of the complex cerebral vasculature. This atlas is an indispensable reference for anyone seeking a fuller appreciation of intracranial and cervical anatomy and pathology, regardless of specialty. Creating a novel anatomical atlas requires a technique showing the organ in a different perspective (e.g. detailedness, staining, and tissue-fidelity), or that the applied method results in enhanced image quality compared to a previous atlas. There are several ways to visualize macro- or microanatomical structures in anatomy: conventional preparations and sections can be made shortly post mortem on a fresh cadaver, or previously fixed with a fixative agent [1], creating macerated bones and skeletons [2-4], or corrosion casting [5-7]. First we made in- and ex vivo CT and MR imaging on a brain of a two-year-old female Beagle dog with adequate T1- and T2-weighted sequences. Start by marking Atlas Of Human Anatomy With Cd Rom as Want to Read: Want to Read saving! Want to Read. It made my dreams come true! Well..it did not. I actually hated it when I had to learn the basics of Anatomy in my first year of medicine. The best anatomy atlas one could ever imagine. Every part of the human body were painted by Mr. Netter with realistic details. This is art meets science in a 640 page format. I love this so much. Netter's Atlas of Human Anatomy.pdf. Atlas Dissections Anat Core. Anatomy Coloring Book. For the first time, spectacular original paintings created by New CT angiograms have been included in the Upper Limb Carlos Machado illustrate clinically important structures such as and Lower Limb sections. This new technology not only clearly demonstrates blood vessels, but vividly shows bony landmarks help you better understand anatomy and its application to the to which the blood vessels are related.

and Vascular Computed Tomography Musani - Clinical Pearls in Diagnostic Cardiac Computed Tomography Ohnesorge - Multi-slice and Dual-source CT in Cardiac Imaging Pelberg - Cardiac CT Angiography Manual, 2nd ed\_2015.pdf Raman - Cardiovascular MDCT angiography\_2007.pdf Ray Richardson - Atlas of Pediatric Cardiac CTA\_2013.pdf Remy-Jardin - Integrated Cardiothoracic Imaging with MDCT\_20 Saremi - Revisiting Cardiac Anatomy - A Computed Tomography Schoenhagen - The Musculoskeletal Singh - Atlas of Human Anatomy on MRI Spine Extremities Join Standring - Atlas - Magnetic Resonance Imaging of the Brain and Spine, 5 Aygun

Bones of cranium : Anatomy , CT. Select a zone. Whole body. These cookies make it possible to obtain anonymous statistics of attendance as well as error reports during the visit of the site, in order to optimize its ergonomics, its navigation and its contents. By disabling these cookies, we will not be able to analyze site traffic or detect errors. Google Analytics. Chapters co-authored by CT and MR authorities cover imaging of all coronary and non-coronary arteries and veins. Each chapter details indications, imaging strategies, normal and variant anatomy, diseases, surgical management, and pitfalls. The authors compare the utility of CT and MR in specific clinical situations and discuss the role of conventional angiography and ultrasound where appropriate. Vascular biomedicine is a rapidly growing field as new molecular mechanisms of vascular health and disease are unraveled. Many of the major cardiovascular diseases including coronary artery disease, heart failure, stroke and vascular dementia are diseases of the vasculature. In addition vascular injury underpins conditions like kidney failure and cardiovascular complications of diabetes. Creating a novel anatomical atlas requires a technique showing the organ in a different perspective (e.g. detailedness, staining, and tissue-fidelity), or that the applied method results in enhanced image quality compared to a previous atlas. There are several ways to visualize macro- or microanatomical structures in anatomy: conventional preparations and sections can be made shortly post mortem on a fresh cadaver, or previously fixed with a fixative agent [1], creating macerated bones and skeletons [2-4], or corrosion casting [5-7]. First we made in- and ex vivo CT and MR imaging on a brain of a two-year-old female Beagle dog with adequate T1- and T2-weighted sequences.