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Autore	Gori, Roland (1943-)
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Autore	Liveson Jay Allan <1937->
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Nota di contenuto	Contents; I. FUNDAMENTAL CONCEPTS; 1. Interpretation of Electrodiagnostic Data; 2. Diffuse Processes; 3. Localized Processes; II. CASE STUDIES; 1 Bilateral lateral hand numbness; 2 Horner's sign and medial arm numbness; 3 Radiating foot pain; 4 Crush injury of thigh; 5 Caveat doctor!; 6 Serendipity; 7 Sudden thigh pain on coumadin; 8 Radiating shoulder pain; 9 ""Split"" finger findings; 10 Facial weakness and repair; 11 Proximal weakness and diplopia; 12 Wrist drop; 13 Foot drop; 14 Leg weakness and twitching; 15 Shoulder dislocation and weakness; 16 Abnormal pinch 17 Radiating pain and knee jerk decrease 18 Gunshot wound to neck; 19 Proximal weakness and ache in sixth decade; 20 Caveat again!; 21 Wrist weakness with deviation; 22 Foot drop after arthroplasty; 23 Tunnel and more; 24 Recurrent weakness and numbness; 25 Saddle numbness; 26 Painless scapular atrophy; 27 Radiating thigh pain and numbness; 28 Calcaneal fracture and foot numbness; 29 Thumb numbness and distal weakness; 30 Progressive diplopia in a 21-year-

old; 31 Asymmetric leg weakness and diabetes; 32 Rapid proximal weakness in a 10-year-old; 33 Mees' lines and distal numbness
 34 Sacral growth and incontinence 35 Scapular winging increased on flexion; 36 Difficulty relaxing grip and ptosis; 37 Arm symptoms aggravated by Valsalva; 38 Cramps and fasciculations; 39 Postlaminectomy recurrence of pain; 40 Intrinsic weakness related to stapling; 41 Multiple pelvic fractures; 42 Antecubital shunt and hand weakness; 43 Weakness, dry mouth, areflexia; 44 Focal fasciculations in a physician; 45 Crutches and a wrist drop; 46 Painful eruption and weak hip; 47 Positive "dropped arm test,"; 48 Scapular winging after neck tumor excision; 49 Slow progression of proximal weakness
 50 Quadrilateral space lesion 51 Myokymia and fasciculations; 52 Slow evolution of proximal weakness; 53 Thoracic outlet syndrome "recurrence,"; 54 Foot drop after walking; 55 Weak pinch and pronation; 56 Gluteal injection and radiating pain; 57 Clavicular fracture and weakness; 58 Abdominal pain with no abdominal pathology; 59 Diabetes with asymmetric weakness; 60 Handcuffs and numbness; 61 Shoulder pain and weakness; 62 Difficulty standing in a 30-month-old girl; 63 Hemiatrophy of the tongue; 64 Arm weakness after breech delivery; 65 Floppy 3-month-old boy; 66 Gunshot wound of leg
 67 Fractured ankle bone and focal atrophy 68 Exacerbating, remitting weakness, and ataxia; 69 Arm weakness postthoracotomy; 70 Ear pain, hoarseness, and facial weakness; 71 Knee fracture with puzzling findings; 72 Difficulty relaxing grip; 73 Burn victim with flaccid quadriplegia; 74 Charlie Chaplin gait and ataxia; 75 HIV and progressing weakness; 76 Progressive arm weakness with old polio; 77 Transient dysphagia; 78 Radiating pain and Pott's disease; 79 Mixed upper and lower motor neuron problem; 80 Fracture of C₍₁₎-C₍₂₎ complications; 81 Vertebral collapse and proximal weakness
 82 Proximal weakness and frequent pneumonia

Sommario/riassunto

Peripheral Neurology utilizes case presentations as a vehicle to teach the subject. It emphasises the clinical condition rather than the technique, and formulates conclusions by analyzing the history, physical, and laboratory data.