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Altri autori (Persone)	TruwitJonathon Dean BradyWilliam <1960->
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Nota di bibliografia	Includes bibliographical references and index.
Nota di contenuto	Section Editors; Contributors; Preface; Foreword 2; Part 1 The ECG in Clinical Practice; Chapter 1 What are the clinical applications of the ECG in emergency and critical care?; Chapter 2 What are the indications for the ECG in the pediatric emergency department?; Chapter 3 What are the limitations of the ECG in clinical practice?; Chapter 4 Is the ECG indicated in stable, non-cardiac patients admitted to the hospital?; Chapter 5 What is the use of the ECG in preoperative assessment and cardiovascular risk stratification? Chapter 6 Which patients benefit from continuous electrocardiographic monitoring during hospitalization? Part 2 The ECG in Cardinal Presentations; Chapter 7 How should the ECG be used in the syncope patient?; Chapter 8 How should the ECG be used in the chest pain patient?; Chapter 9 How should the ECG be used in the dyspneic patient?; Chapter 10 How should the ECG be used in the patient with altered mentation?; Chapter 11 How should the ECG be used in the patient during and following cardiac arrest? Chapter 12 What is the impact/proper role of the ECG in the undifferentiated cardiorespiratory failure patient? Part 3 The ECG in

ACS; Chapter 13 | What is the role of the ECG in ACS?; Chapter 14 | What pseudoinfarction patterns mimic ST elevation myocardial infarction?; Chapter 15 | What ECG changes might myocardial ischemia cause other than ST segment elevation or Q waves, and what are the differential diagnoses of these changes?; Chapter 16 | What is a hyperacute T wave?; Chapter 17 | What is the significance of Q waves? Chapter 18 | What are the ECG indications for additional electrocardiographic leads (including electrocardiographic body-surface mapping) in chest pain patients? Chapter 19 | What further diagnostic adjuncts to the standard 12-lead ECG may help to diagnose ACS?; Chapter 20 | Is serial electrocardiography (serial ECGs and ST segment monitoring) of value in the ECG diagnosis of ACS?; Chapter 21 | What QRS complex abnormalities result in ST segment elevation that may mimic or obscure AMI?; Chapter 22 | What are the electrocardiographically silent areas of the heart? Chapter 23 | What is the value of the prehospital acquired 12-lead ECG? Chapter 24 | What are the electrocardiographic indications for reperfusion therapy?; Chapter 25 | What are the ECG manifestations of reperfusion and reocclusion?; Chapter 26 | Does localization of the anatomic segment/identification of the infarct-related artery affect early care?; Chapter 27 | Can the ECG be used to predict cardiovascular risk and acute complications in ACS?; Part 4 | The Dysrhythmic ECG; Chapter 28 | Can the electrocardiogram determine the rhythm diagnosis in narrow complex tachycardia? Chapter 29 | Can the ECG guide treatment of narrow QRS tachycardia?

Sommario/riassunto

This scenario-based text provides answers to urgent and emergent questions in acute, emergency, and critical care situations focusing on the electrocardiogram in patient care management. The text is arranged in traditional topics areas such as ACS, dysrhythmia, etc yet each chapter is essentially a question with several cases illustrating the clinical dilemma - the chapter itself is a specific answer to the question. This is a unique format among textbooks with an ECG focus. The clinical scenarios cover the issues involved in detecting and managing major cardiovascular conditions. Focus
