

1. Record Nr.	UNISA996387460503316
Autore	Abbot George <1604-1649.>
Titolo	Vindiciæ sabbathi, or, An answer to two treatises of Master Broads [[electronic resource]] : the one, concerning the Sabbath or seaventh day, the other, concerning the Lord's-day or first of the weeke : with a survey of all the rest which of late have written upon that subject // by George Abbot
Pubbl/distr/stampa	London, : Printed for I.D. for Henry Overton and are to be sold at his shop ..., 1641
Descrizione fisica	[12], 164, 109 p
Soggetti	Sunday
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Note generali	Reproduction of original in Huntington Library.
Sommario/riassunto	eebo-0113

2. Record Nr.	UNINA9910968398503321
Autore	Sankaranarayanan Rajiv
Titolo	Treatment of ventricular fibrillation // Rajiv Sankaranarayanan, Hanney Gonna and Michael James
Pubbl/distr/stampa	Hauppauge, N.Y., : BioMedical Books, c2010
ISBN	1-61324-032-5
Edizione	[1st ed.]
Descrizione fisica	1 online resource (76 p.)
Collana	Cardiology research and clinical developments
Altri autori (Persone)	GonnaHanney JamesMichael <1960->
Disciplina	616.1/28
Soggetti	Ventricular fibrillation
Lingua di pubblicazione	Inglese
Formato	Materiale a stampa
Livello bibliografico	Monografia
Note generali	Description based upon print version of record.
Nota di bibliografia	Includes bibliographical references (p. [41]-55) and index.
Nota di contenuto	Cardiopulmonary resuscitation -- Drug therapy for ventricular fibrillation -- Automated external defibrillators and public access defibrillation -- Internal cardioverter defibrillator -- VF ablation.
Sommario/riassunto	The annual incidence of sudden cardiac deaths in the United States is about 300,000 cases. Ventricular fibrillation (VF) remains an important cause of sudden death both in hospitals and in the community contributing to about half of these cases, although in monitored setting with rapid response times, VF is the presenting rhythm in almost three quarters of these patients. Despite an overall declining trend in the incidence of VF, the management of the arrhythmia remains challenging due to the fact that the event is usually unexpected and almost certainly lethal in the absence of resuscitation within the first few minutes. There has been a dramatic improvement in survival from VF due to the introduction of defibrillation as a part of resuscitation but in a significant proportion of patients, the process of resuscitation proves futile due to lack of return of spontaneous circulation or significant neurological disability caused by cerebral anoxia.