

Case Report Open Access Primary Myoepithelial Carcinoma Of

Part of SAGE's Mastering Business Research Methods series, conceived and edited by Bill Lee, Mark N. K. Saunders and Vadake K. Narayanan, the series is designed to support business and management students with their research-based dissertations by providing in-depth and practical guidance on using a chosen method of data collection or analysis. The books are written in a concise and accessible way, and contain a range of features, including checklists and a glossary, designed to support self-guided research. In Case Study Research, Bill Lee and Mark Saunders describe the properties of case study designs in organizational research, exploring the uses, advantages and limitations of case research. They also demonstrate the flexibility that case designs offer, and challenges the myths surrounding this approach. Ideal for Business and Management students reading for a Master's degree, each book in the series may also serve as reference books for doctoral students and faculty members interested in the method. Watch the editors introduce the Mastering Business Research Methods series and tell you more about the first three books.

"The Nation has lost sight of its public health goals and has allowed the system of public health to fall into 'disarray'," from The Future of Public Health. This startling book contains proposals for ensuring that public health service programs are efficient and effective enough to deal not only with the topics of today, but also with those of tomorrow. In addition, the authors make recommendations for core functions in public health assessment, policy development, and service assurances, and identify the level of government--federal, state, and local--at which these functions would best be handled.

Data sharing can accelerate new discoveries by avoiding duplicative trials, stimulating new ideas for research, and enabling the maximal scientific knowledge and benefits to be gained from the efforts of clinical trial participants and investigators. At the same time, sharing clinical trial data presents risks, burdens, and challenges. These include the need to protect the privacy and honor the consent of clinical trial participants; safeguard the legitimate economic interests of sponsors; and guard against invalid secondary analyses, which could undermine trust in clinical trials or otherwise harm public health. Sharing Clinical Trial Data presents activities and strategies for the responsible sharing of clinical trial data. With the goal of increasing scientific knowledge to lead to better therapies for patients, this book identifies guiding principles and makes recommendations to maximize the benefits and minimize risks. This report offers guidance on the types of clinical trial data available at different points in the process, the points in the process at which each type of data

should be shared, methods for sharing data, what groups should have access to data, and future knowledge and infrastructure needs. Responsible sharing of clinical trial data will allow other investigators to replicate published findings and carry out additional analyses, strengthen the evidence base for regulatory and clinical decisions, and increase the scientific knowledge gained from investments by the funders of clinical trials. The recommendations of Sharing Clinical Trial Data will be useful both now and well into the future as improved sharing of data leads to a stronger evidence base for treatment. This book will be of interest to stakeholders across the spectrum of research--from funders, to researchers, to journals, to physicians, and ultimately, to patients.

This book gives a comprehensive overview on current clinical and basic research issues related to Parkinson's disease and its related disorders. The book is the result of the 16th International Congress of Parkinson's Disease and Related disorders congress 2005. Its contents are suitable for neurologists, psychiatrists, neurosurgeons, basic researchers, geneticists and patients as well as their relatives.

A How-to Manual for Clinicians

McDonald's Blood Flow in Arteries 5Ed

Report of Decisions

To Err Is Human

Molecular and Cellular Approaches to Neural Development

Improving Palliative Care for Cancer

Experts estimate that as many as 98,000 people die in any given year from medical errors that occur in hospitals. That's more than die from motor vehicle accidents, breast cancer, or AIDS--three causes that receive far more public attention. Indeed, more people die annually from medication errors than from workplace injuries. Add the financial cost to the human tragedy, and medical error easily rises to the top ranks of urgent, widespread public problems. To Err Is Human breaks the silence that has surrounded medical errors and their consequence--but not by pointing fingers at caring health care professionals who make honest mistakes. After all, to err is human. Instead, this book sets forth a national agenda--with state and local implications--for reducing medical errors and improving patient safety through the design of a safer health system. This volume reveals the often startling statistics of medical error and the disparity between the incidence of error and public perception of it, given many patients' expectations that the medical profession always performs perfectly. A careful examination is made of how the surrounding forces of legislation, regulation, and market activity influence the quality of care provided by health care organizations and then looks at their handling of medical mistakes. Using a detailed case study, the book reviews the current understanding of why these mistakes happen. A key theme is that legitimate liability concerns

discourage reporting of errors--which begs the question, "How can we learn from our mistakes?" Balancing regulatory versus market-based initiatives and public versus private efforts, the Institute of Medicine presents wide-ranging recommendations for improving patient safety, in the areas of leadership, improved data collection and analysis, and development of effective systems at the level of direct patient care. To Err Is Human asserts that the problem is not bad people in health care--it is that good people are working in bad systems that need to be made safer. Comprehensive and straightforward, this book offers a clear prescription for raising the level of patient safety in American health care. It also explains how patients themselves can influence the quality of care that they receive once they check into the hospital. This book will be vitally important to federal, state, and local health policy makers and regulators, health professional licensing officials, hospital administrators, medical educators and students, health caregivers, health journalists, patient advocates--as well as patients themselves. First in a series of publications from the Quality of Health Care in America, a project initiated by the Institute of Medicine

The world's leading source of evidence-based guidance on caring for patients at the end of life. Featuring the content of the world's most widely read medical journal, plus completely new, never-before-published content. Perfect for medical students, trainees, and clinicians alike. Market / Audience Medical students: 18000/yr US, 250,000 global NP and PA students: 25,000/yr US, 50,000+ global IM and FP residents: 30,000 US, 60,000 global IM and FP clinicians: 140,000 US, 300,000+ global Palliative medicine: 3000 US Oncology: 20,000 US, 60,000 global Social workers About the Book In the tradition of the User's Guides to the Medical Literature, and The Rational Clinical Examination, JAMA/Care at the Close of Life is based on a widely successful series of articles appearing over the course of the last ten years in JAMA, the world's most widely read medical journal. The series is directed by Stephen McPhee, a leading authority of end of life care, and the chief editor of our market leading Current Medical Diagnosis and Treatment text. The articles in the series cover fundamental topics and challenges in caring for patients who have been given a terminal diagnosis. Featuring a strong focus on evidence-based medicine, and organized by clinical cases, the articles are widely read by faculty, medical students, and clinicians who, frankly, have not been given a solid educational experience on this very important medical issue. The book will be physically modeled after The Rational Clinical Examination, in a full color format that highlights the clinical cases. It will be well suited for use as an required or recommended textbook for medical, PA, and NO students, and as a clinical reference text for trainees and practicing physicians and nurses. Key Selling Features Based on highly regarded content from the world's most widely read medical journal All content is completely updated, and extensive new, never-before-published content has been added Case-based, and evidence-based, so its a perfect fit for the way medical students and residents like to learn Focuses on practical, real-world issues for primary care physicians, and avoids esoteric issues of interest only to specialists in palliative care Full color format, modeled after the highly regarded Rational Clinical Examination Includes multimedia materials available on line: Power Point slides for teaching, and video interviews with patients in end-of-life care, so that faculty and students get supplemental resources for learning the art and science of care at the end of life Evidence-based guidance from the world's leading medical journal, on a

critical topic that has been neglected in medical education and training until recently. Author Profile JAMA is the world's most widely read medical journal, and has a reputation for excellence in evidence-based medicine. Stephen McPhee has high visibility on account of his editorship of CMTD, and for his driving role in enhancing end of life care in medical education and training programs. He is: Professor of Medicine, UCSF School of Medicine, San Francisco CA

The Scientific Style and Format Eighth Edition Subcommittee worked to ensure the continued integrity of the CSE style and to provide a progressively up-to-date resource for our valued users, which will be adjusted as needed on the website. This new edition will prove to be an authoritative tool used to help keep the language and writings of the scientific community alive and thriving, whether the research is printed on paper or published online.

September 07-08, 2017 Paris, France Key Topics : Psychology Case Reports, Case Reports on Neurology, Ophthalmology Case Reports, Dentistry Case Reports, Cardiology Case Reports, Pulmonology Case Reports, Gastroenterology Case Reports, Diabetes Case Reports, Obstetrics and Gynaecology Case Reports, Epidemiology Case Reports, Surgical Case Reports, Case Reports on Paediatrics, Case Reports on Public Health, Dermatology Case Reports, Emergency Medicine and Critical Care Case Reports, Forensic and Legal Medicine Case reports, Internal Medicine Case Reports, Orthopaedics & Rheumatology Case Reports, Pharmacology and Therapeutics Case Reports, Women's Health Case Reports, Radiology Case Reports, Anaesthesiology Case Reports, Pathology- Anatomic & Clinical Case Reports, Sexual Health Case Reports, Case Reports in Cancer Science, Case Reports in Clinical Pathology, Geriatric Medicine Case Reports, Veterinary Case Reports, Vascular and Endovascular Surgery,

Preventing HIV Among Young People in Southern and Eastern Africa

Limelight March 2022

Factors Influencing Students' Choice to Study Abroad at an Open-access Institution

Maximizing Benefits, Minimizing Risk

Eighth Edition

Designing Clinical Research

Many Americans believe that people who lack health insurance somehow get the care they really need. Care Without Coverage examines the real consequences for adults who lack health insurance. The study presents findings in the areas of prevention and screening, cancer, chronic illness, hospital--based care, and general health status. The committee looked at the consequences of being uninsured for people suffering from cancer, diabetes, HIV infection and AIDS, heart and kidney disease, mental illness, traumatic injuries, and heart attacks. It focused on the roughly 30 million -- one in seven--working--age Americans without health insurance. This group does not include the population over 65 that is covered by Medicare or the nearly 10 million children who are uninsured in this country. The main findings of the report are that working-age Americans without health insurance are more likely to receive too little medical care and receive it too late; be sicker and die sooner; and receive poorer care when they are in the hospital, even for acute situations like a motor

vehicle crash.

Comprehensive, up-to-date and authoritative, this volume covers all the recent advances in understanding the early events of neural development at the molecular and cellular levels. The authors detail the applications of molecular genetic methods to the study of neural induction, neuronal phenotypes and processes, and the formation of specific patterns of connections. They analyze the new information generated through modern techniques for identifying, cloning, deleting and introducing specific genes, for labeling neuronal or glial precursors, and for imaging individual neurons or parts of neurons. Other chapters focus on the increasing use of a variety of model organisms: fruit flies, nematode worms, zebra fish, xenopus frogs, chicks, and mice. The improved conservation of DNA and protein sequences, and the availability of gene and protein databases have made it possible to rapidly identify gene homologues in organisms sometimes separated by hundreds of millions of years of evolution. This volume features several chapters co-authored by investigators one of whom works on vertebrates and the other on invertebrates. They demonstrate clearly that although the nervous systems of a fruit fly and a mouse, for example, are quite different in appearance and organization, many of the same molecular players and cellular processes are involved in their assembly. Molecular and Cellular Approaches to Neural Development will be of great practical interest to researchers, graduate students and post-doctoral fellows in developmental, cell and molecular biology, genetics, and neuroscience.

This User's Guide is intended to support the design, implementation, analysis, interpretation, and quality evaluation of registries created to increase understanding of patient outcomes. For the purposes of this guide, a patient registry is an organized system that uses observational study methods to collect uniform data (clinical and other) to evaluate specified outcomes for a population defined by a particular disease, condition, or exposure, and that serves one or more predetermined scientific, clinical, or policy purposes. A registry database is a file (or files) derived from the registry. Although registries can serve many purposes, this guide focuses on registries created for one or more of the following purposes: to describe the natural history of disease, to determine clinical effectiveness or cost-effectiveness of health care products and services, to measure or monitor safety and harm, and/or to measure quality of care. Registries are classified according to how their populations are defined. For example, product registries include patients who have been exposed to biopharmaceutical products or medical devices. Health services registries consist of patients who have had a common procedure, clinical encounter, or hospitalization. Disease or condition registries are defined by patients having the same diagnosis, such as cystic fibrosis or heart failure. The User's Guide was created by researchers affiliated with AHRQ's Effective Health Care Program, particularly those who participated in AHRQ's DEcIDE (Developing Evidence to Inform Decisions About Effectiveness) program. Chapters were subject to multiple internal and external independent reviews. Now in its fifth edition, this guide sets out international and standard practice and is a useful reference for medical and scientific editors and authors.

*A Guide for Biological and Medical Editors and Authors
Medicine and the Internet*

Conducting Case Study Research for Business and Management Students

Care Without Coverage

Jones' Clinical Paediatric Surgery

A Case Study of The Integration of Environmental Education in the Primary School Curriculum

The Elements of Style William Strunk concentrated on specific questions of usage and the cultivation of good writing with the recommendation "Make every word tell"; hence the 17th principle of composition is the simple instruction: "Omit needless words." The book was also listed as one of the 100 best and most influential books written in English since 1923 by Time in its 2011 list.

The Elements of Stylee-artnow

Real-life primary care case studies* from more than 50 primary care providers, including physician assistants, nurse practitioners, and physicians! 101 Primary Care Case Studies offers real-life patient scenarios and critical thinking exercises to help you work through a patient's chief complaint. Through narrative case studies, you will determine how best to diagnose, treat, and manage your patient based on the history of present illness, review of systems, relevant history, and physical examination findings. This workbook will ask probing questions to help you determine differential and most likely diagnoses, diagnostic tests to order, and appropriate patient management strategies using relevant and timely references to support your decisions. The organization of each case study simulates the patient care journey from chief complaint to outcome. Serving as a virtual clinical preceptor, this workbook can be used independently or in a classroom setting. It is accompanied by a robust online student supplement that provides answers to all questions, real outcomes of the cases, and valuable personal insights from the authors on how the patient was successfully managed. Not only will this workbook help you work through patient cases clinically, it will also share important, but often overlooked, bedside manner skills needed to successfully communicate with and care for your patients. Covering conditions across all organ systems and across the lifespan, this workbook is organized by chief complaint, providing an authentic perspective on what to expect in the patient care environment. It even includes information on pathophysiology and how to use ICD-10 and CPT (E/M) codes in your documentation. The book uniquely weaves together both the science and art of medicine by including personal insights into quality and compassionate care. Key Features Provides real-life patient cases from an interprofessional author team of physician assistants, nurse practitioners, and physicians Uses a templated case study design and critical thinking exercises to help you methodically work through various patient scenarios Teaches clinical and bedside manner skills imperative for delivering quality patient care Covers patients across the lifespan, including pediatric, adolescent, adult, and geriatric populations Offers additional insight on patient education, medical and legal concerns, and interprofessional collaboration Includes a robust online student supplement with valuable insights from the authors on how they successfully managed the cases Provides instructors with a table of contents that is filterable by chief complaint, diagnosis, patient population, and organ system *Details changed to protect patient information.

This classic text, first published in 1960 and introducing at that time an entirely new approach to the study of arterial haemodynamics, provides a theoretical basis to understanding blood flow in normal and disease conditions. It examines the relationship between pulsatile pressure and flow in the arteries using a mathematical model of fluid flow principles. The current authors have developed the ground-breaking work of Donald McDonald through three editions during a period in which arterial disease has exploded as a huge clinical problem in the developed and developing world, and the content now reflects the application of the original haemodynamic discoveries to everyday clinical practice. The new edition retains the features key to the popularity of the earlier volumes - a strong scientific base, a focus on practical applications, a comprehensive coordinated style and a lack of fear in challenging established authority - but brings the content entirely up to date.

Clinical Case Reporting in Evidence Based Medicine, 2Ed

Enhancing Privacy, Improving Health Through Research

Guide for the Care and Use of Laboratory Animals

101 Primary Care Case Studies

Too Little, Too Late

An Essay on the Shaking Palsy

The history of psychiatry is complex, reflecting diverse origins in mythology, cult beliefs, astrology, early medicine, law religion, philosophy, and politics. This complexity has generated considerable debate and an increasing outflow of historical scholarship, ranging from the enthusiastic meliorism of pre-World War II histories, to the iconoclastic revisionism of the 1960s, to more focused studies, such as the history of asylums and the validity and efficacy of Freudian theory. This volume, intended as a successor to the centennial history of American psychiatry published by the American Psychiatric Association in 1944, summarizes the significant events and processes of the half-century following World War II. Most of this history is written by clinicians who were central figures in it. In broad terms, the history of psychiatry after the war can be viewed as the story of a cycling sequence, shifting from a predominantly biological to a psychodynamic perspective and back again -- all presumably en route to an ultimate view that is truly integrated -- and interacting all the while with public perceptions, expectations, exasperations, and disappointments. In six sections, Drs. Roy Menninger and John Nemiah and their colleagues cover both the continuities and the dramatic changes of this period. The first four sections of the book are roughly chronological. The first section focuses on the war and its impact on psychiatry; the second reviews postwar growth of the field (psychoanalysis and psychotherapy, psychiatric education, and psychosomatic medicine); the third recounts the rise of scientific empiricism (biological psychiatry and nosology); and the fourth discusses public attitudes and perceptions of public mental health policy, deinstitutionalization, antipsychiatry, the consumer movement, and managed care. The fifth section examines the development of specialization and differentiation, exemplified by child and adolescent psychiatry, geriatric psychiatry, addiction psychiatry, and forensic psychiatry. The concluding section examines ethics, and women and minorities in psychiatry. Anyone interested in psychiatry will find this book a fascinating read.

This 4-hour free course explored both practical and moral questions of access to community services, using a fictionalised case study.

As the evidence-based medicine movement gathers momentum, it is becoming apparent that valuable information can be derived from individual case studies, provided that the information is structured correctly from the outset. Good clinical reports and case studies must link together several elements of clinical epidemiology, clinimetrics, qualitative research principles and methods for gathering information on individual clinical situations. The first edition of 'Clinical Case Reporting in Evidence-Based Medicine' was timely in its explanations of the theory and practice of choosing and reporting clinical cases: this new edition provides additional coverage on routine case reports in medicine, surgery and psychiatry, case reporting in occupational medicine and in tort litigation at courts of law. This remains an essentially practical book which is a vital companion to any medical professional

contributing to research through individual case reports.

Jones' Clinical Paediatric Surgery provides clear-sighted advice on the surgical options available for young patients. Building on the popular and successful style of previous editions, this fully revised seventh edition employs a systematic approach to the childhood diseases that need surgical treatment. It includes more case vignettes and colour photographs, expanded coverage on the use of imaging, and updated approaches to management including laparoscopic operations. Key subject areas are supported by case vignettes in a familiar format similar to what might appear in an OSCE viva. Jones' Clinical Paediatric Surgery is the ideal guide for paediatricians, surgeons and trainees, as well as primary care physicians, junior doctors and medical students.

American Psychiatry After World War II (1944-1994)

Registries for Evaluating Patient Outcomes

Suggestions to Medical Authors and A.M.A. Style Book

The Future of Public Health

The limits of primary care

In examining opportunities to learn environmental education at the school and classroom level, we were interested in ascertaining how teachers in primary schools have made sense of the new policy of integrating environmental education in the various learning areas. The researchers wished to find out how workable the policy was in one school context, what its consequences were in terms of providing better opportunities for learners. Indeed the case of Sechaba Primary has provided some insights into these questions. We now know how some schools have taken the new policy and made it work for them. They have developed their own local environmental policy, which served as a basis for mobilising and organising resources for learning and teaching environmental education at the school. It is this localised policy that seemed important in driving the integration of the environment into the curriculum at Sechaba Primary. Furthermore, the local policy created a platform for mobilising the intellectual and material resources for the integration of environmental education at the school. For us, the most important lesson coming out of this research therefore is the need for local school actors to take the initiative and be the agents of change. Agency and teacher leadership have proved to be cornerstones of the success story of the integration of environmental education at Sechaba Primary. There is, however, still a long way to go in terms of reaching the conceptual depths of the integration and extended participation of learners in environmental education, as the case of Sechaba Primary has illustrated. The lessons learned from the Sechaba Primary case would be applicable in schools that have taken environmental education as seriously as Sechaba Primary has done.

A respected resource for decades, the Guide for the Care and Use of Laboratory Animals has been updated by a

committee of experts, taking into consideration input from the scientific and laboratory animal communities and the public at large. The Guide incorporates new scientific information on common laboratory animals, including aquatic species, and includes extensive references. It is organized around major components of animal use: Key concepts of animal care and use. The Guide sets the framework for the humane care and use of laboratory animals. Animal care and use program. The Guide discusses the concept of a broad Program of Animal Care and Use, including roles and responsibilities of the Institutional Official, Attending Veterinarian and the Institutional Animal Care and Use Committee. Animal environment, husbandry, and management. A chapter on this topic is now divided into sections on terrestrial and aquatic animals and provides recommendations for housing and environment, husbandry, behavioral and population management, and medical and Veterinary care. The Guide discusses veterinary care and the responsibilities of the Attending Veterinarian. It includes recommendations on animal procurement and transportation, preventive medicine (including animal biosecurity), and clinical care and management. The Guide addresses distress and pain recognition and relief, and issues surrounding euthanasia. Physical plant. The Guide identifies design issues, providing construction guidelines for functional areas; considerations such as drainage, vibration and noise control, and environmental monitoring; and specialized facilities for animal housing and research needs. The Guide for the Care and Use of Laboratory Animals provides a framework for the judgments required in the management of animal facilities. This updated and expanded resource of proven value will be important to scientists and researchers, veterinarians, animal care personnel, facilities managers, institutional administrators, policy makers involved in research issues, and animal welfare advocates.

With the 13th edition, Wintrobe's Clinical Hematology once again bridges the gap between the clinical practice of hematology and the basic foundations of science. Broken down into eight parts, this book provides readers with a comprehensive overview of: Laboratory Hematology, The Normal Hematologic System, Transfusion Medicine, Disorders of Red Cells, Hemostasis and Coagulation; Benign Disorders of Leukocytes, The Spleen and/or Immunoglobulins; Hematologic Malignancies, and Transplantation. Within these sections, there is a heavy focus on the morphological evaluation of the peripheral blood smear, bone marrow, lymph nodes, and other tissues. With the knowledge about gene therapy and immunotherapy expanding, new, up-to-date information about the process and application of these therapies is included. Likewise, the editors have completely revised material on stem cell transplantation in regards to both malignant and benign disorders, graft versus host disease, and the importance of long-term follow-up of transplantation survival. In our society's aggressive pursuit of cures for cancer, we have neglected symptom control and comfort care. Less than one percent of the National Cancer Institute's budget is spent on any aspect of palliative care research or education, despite the half million people who die of cancer each year and the larger number living with cancer and

symptoms. Improving Palliative Care for Cancer examines the barriers—scientific, policy, and social—that keep those in need from getting good palliative care. It goes on to recommend public- and private-sector actions that would lead to the development of more effective palliative interventions; better information about currently used interventions; and greater knowledge about, and access to, palliative care for all those with cancer who would benefit from it.

Equine Internal Medicine - E-Book

Proceedings of 5th European Conference on Clinical and Medical Case Reports 2017

A Workbook for Clinical and Bedside Skills

Gerontology and Leadership Skills for Nurses

Introducing Online Resources and Terminology

Theoretical, experimental and clinical principles

The second edition of this resource offers more writing aids than before—including updated reference lists for reliability and validity studies, more case report examples from both the physical therapy and occupational therapy literature, a case report writer's checklist, and a review of a "submitted" case report.

This second edition text is designed to prepare nursing students to be advocates for the aging population in all practice settings. Information on demographics, active and dependent aging, and leadership and management skills has been expanded. More ethical issues are also covered in this edition, such as living wills, guardianship, and power of attorney. An instructor's guide is also available.

PMBOK® Guide is the go-to resource for project management practitioners. The project management profession has significantly evolved due to emerging technology, new approaches and rapid market changes. Reflecting this evolution, The Standard for Project Management enumerates 12 principles of project management and the PMBOK® Guide – Seventh Edition is structured around eight project performance domains. This edition is designed to address practitioners' current and future needs and to help them be more proactive, innovative and nimble in enabling desired project outcomes. This edition of the PMBOK® Guide:

- Reflects the full range of development approaches (predictive, adaptive, hybrid, etc.);
- Provides an entire section devoted to tailoring the development approach and processes;
- Includes an expanded list of models, methods, and artifacts;
- Focuses on not just delivering project outputs but also enabling outcomes; and
- Integrates with PMI Standards+™ for information and standards application content based on project type, development approach, and industry sector.

This action research study examined factors influencing students' choice to study abroad at "Atlanta-Based College" (ABC), an access institution wishing to increase study-abroad opportunities for students, faculty, and staff. Many scholars and practitioners view the national initiative to advance study abroad as an important contributor to graduating globalized citizens. However, only a small percentage of students take advantage of such opportunities at ABC and at access institutions in general. Therefore, this case study examined students' decision-making process using the Collapsed Perna integrated model of student choice as a framework. A multi-functional action research group was selected to implement the action research project and address the

following primary research questions: (1) What does an access institution learn about the study-abroad decision-making process using the Collapsed Perna integrated model of student choice as a framework? (2) How does an action research project centering on study abroad in an access institution advance practice and theory at the individual, group, and system levels? The study showed that the higher education context of layer 2/3 of the Perna model was highly influential in the student-choice process. This suggest that the predominant issue preventing open-access college students from studying abroad is not student interest. Rather, it is the lack of institutionalization of study abroad. Open-access institutions ought to consider shifting their focus from student barriers to institutional barriers. This study also exemplifies the use of action research to address a systemic problem at an open-access institution.

A Case Study and Implications

Scientific Style and Format

Sir William Osler, bart

Eye and Skin Disease

Open Access

A User's Guide

Studies of patients blind from damage to the neocortex have revealed that some can discriminate certain visual events within their 'blind' fields. They are not aware that they can do so, however - they think that they are only guessing. This book is an account of research into a particular case of this 'blindsight' phenomenon. It also discusses the historical and neurological background, and reviews other cases and issues. - ;Damage to a particular area of the brain - the neocortex - is generally understood to result in blindness. Studies of some patients suffering from this form of blindness have nevertheless revealed that they can discriminate certain types of visual events within their 'blind' fields. They are not aware that they can do so, however - they think that they are only guessing. This phenomenon has been termed 'blindsight'. The present book gives an account of research over a number of years into a particular case of blindsight, together with a discussion of the historical and neurological background, a review of cases reported by other investigators, and a number of theoretical and practical issues and implications. - ;PART I: Background; D.B.: Clinical history and early testing; PART II: Reaching for randomly located targets; 'Presence' versus 'absence'; Visual acuity; Movement thresholds; Discrimination of orientation; 'Form' discrimination; Detection with slow rate of onset; The natural blind-spot (optic disc) within the scotoma; Left versus right eye; Detection of direction of contrast; 'Waves'; Matching between impaired and intact fields; Matching within the impaired field; Double dissociations between form and detection; Standard situation; PART III: Review of other cases; Status, issues, and implications; References; Indexes. -

Confidently diagnose, treat, and manage patient conditions with the only comprehensive book on the market devoted solely to equine internal medicine. Filled with fully updated content on principles of treatment and contributions from internationally known equine experts, Equine Internal Medicine, 4th Edition focuses on the basic pathophysiologic mechanisms that underlie the development of various equine diseases. A problem-based approach outlines how to apply the latest clinical evidence directly to the conditions you will encounter in practice. A new companion website with over 120 video clips presents diseases and disorders that cannot be explained as well through words Updated

information throughout, including the most recent drug information. Current and well-referenced content on equine diseases and treatment techniques cites the latest books and journals. Internationally known equine experts present information on problems affecting horses throughout the world — and provide contributions that enable practitioners and students to approach disease and treatment of equine patients with more authority and understanding. User-friendly exterior and interior design makes the book appealing to both the equine internal medicine practitioner and the veterinary student. Easy-to-find information facilitates a more thorough understanding with minimal frustration. Organized and consistent coverage among chapters allows you to easily find information on a specific topic. NEW! Fully updated and revised sections on disorders and principles of treatment. NEW! Problem-based approach outlines how to apply the latest clinical evidence directly to the conditions you will encounter in practice. NEW! Pathophysiology is emphasized throughout, providing a sound basis for discussions of the diagnosis, treatment, and prognosis that follow. NEW! Body systems chapters begin with a thorough discussion of the diagnostic method appropriate to the system, including physical examination, clinical pathology, radiography, endoscopy, and ultrasonography. NEW and UNIQUE! Companion website includes more than 120 video clips linked to content from chapters on cardiovascular and neurologic system disorders. NEW! Flow charts, diagrams, and algorithms clarify complex material.

This is a new and updated version of the highly successful book *Medicine and the Internet* (OUP 1995). Specially designed for anyone in the medical professions who would like to get started on the internet, or to use it more effectively, this edition contains new chapters on the internet's role in telemedicine and on how to become an internet provider yourself.

In the realm of health care, privacy protections are needed to preserve patients' dignity and prevent possible harms. Ten years ago, to address these concerns as well as set guidelines for ethical health research, Congress called for a set of federal standards now known as the HIPAA Privacy Rule. In its 2009 report, *Beyond the HIPAA Privacy Rule: Enhancing Privacy, Improving Health Through Research*, the Institute of Medicine's Committee on Health Research and the Privacy of Health Information concludes that the HIPAA Privacy Rule does not protect privacy as well as it should, and that it impedes important health research.

Wintrobe's Clinical Hematology

Writing Case Reports

The Elements of Style

Parkinson's Disease and Related Disorders

Beyond the HIPAA Privacy Rule

Care at the Close of Life: Evidence and Experience

A concise introduction to the basics of open access, describing what it is (and isn't) and showing that it is easy, fast, inexpensive, legal, and beneficial. The Internet lets us share perfect copies of our work with a worldwide audience at virtually no cost. We take advantage of this revolutionary opportunity when we make our work “open access”: digital, online, free of charge, and free of most copyright and licensing restrictions. Open access is made possible by

the Internet and copyright-holder consent, and many authors, musicians, filmmakers, and other creators who depend on royalties are understandably unwilling to give their consent. But for 350 years, scholars have written peer-reviewed journal articles for impact, not for money, and are free to consent to open access without losing revenue. In this concise introduction, Peter Suber tells us what open access is and isn't, how it benefits authors and readers of research, how we pay for it, how it avoids copyright problems, how it has moved from the periphery to the mainstream, and what its future may hold. Distilling a decade of Suber's influential writing and thinking about open access, this is the indispensable book on the subject for researchers, librarians, administrators, funders, publishers, and policy makers. This book provides an overview of the current epidemiology of the HIV epidemic among young people in Eastern and Southern Africa (ESA) and examines the efforts to confront and reduce the high level of new HIV infections amongst young people. Taking a multi-dimensional approach to prevention, the contributors discuss the many challenges facing these efforts, in view of the slow progress in curbing the incidence of HIV amongst young people, focusing particularly on the structural and social drivers of HIV. Through an examination of these issues, chapters in this book provide valuable insights on how to mitigate HIV risk among young people and what can be regarded as the catalysts to mounting credible policy and programmatic responses required to achieve epidemic control in the region. The contributors draw on examples from a range of primary and secondary data sources to illustrate promising practices and challenges in HIV prevention, demonstrating links between conceptual approaches to prevention and lessons learnt from implementation projects in the region. Bringing together social scientists and public health experts who are actively engaged in finding effective solutions, the book discusses 'which interventions works', 'why they work', and the limitations and gaps in our knowledge to curb the pandemic amongst young people. As such it is an important read for researchers focusing on HIV/AIDS and public health. Designing Clinical Research sets the standard for providing a practical guide to planning, tabulating, formulating, and implementing clinical research, with an easy-to-read, uncomplicated presentation. This edition incorporates current research methodology—including molecular and genetic clinical research—and offers an updated

syllabus for conducting a clinical research workshop. Emphasis is on common sense as the main ingredient of good science. The book explains how to choose well-focused research questions and details the steps through all the elements of study design, data collection, quality assurance, and basic grant-writing. All chapters have been thoroughly revised, updated, and made more user-friendly.

A Guide to the Project Management Body of Knowledge (PMBOK® Guide) - Seventh Edition and The Standard for Project Management (BRAZILIAN PORTUGUESE)

Sharing Clinical Trial Data

Journal of Clinical Case Reports : Volume 7

The CSE Manual for Authors, Editors, and Publishers

With a Guide to Abbreviation of Bibliographic References ; for the Guidance of Authors, Editors, Compositors, and Proofreaders

An Action Research Case Study