

Kaplan study guide

1. **Hazards of immobility:** Pressure ulcers, osteoporosis, hypercalcemia, negative Nitrogen balance, increased cardiac workload, orthostatic HTN, stasis of resp secretions, boredom and depression

Nursing considerations: Good skin care, high protein diet with small frequent feedings, rise from bed slowly, turning coughing and deep breathing.

3. **Diabetes Insipidus:** Decreased production of ADH.

Indications: Increased urinary output and increased plasma osmolality, increased thirst.

Caused by brain tumor, head injury, brain surgery, lithium therapy

Indications: Excessive urine output (polydipsia), chronic severe hydration, excessive thirst, anorexia, weight loss, weakness, constipation, fatigue, hypernatremia, increased serum osmolality

Nursing considerations: I&O, urine specific gravity, skin condition, daily weight, VS, administer vasopressor and reduce fluid intake to avoid intoxication, medications, thiazide diuretics, sign of hypovolemic shock, keep siderails up and assist with walking

4. **Addisonian Crisis:** Adrenakortical insufficiency. Precipitated by stress, surgery, trauma and infection.

Indications: Hypotension, cyanosis, fever, shock symptoms, headache, abdominal pain, nausea, diarrhea and confusion, weakness, circulatory shock, dehydration. Addison's DZ: fluid deficit, Increase in melanocyte stimulating hormone, abnormally dark and pigmented skin.

Treatment: Hormone replacement (dexamethasone), hydrocortisone or both. Later doses of hydrocortisone are given IV. Increase fluid and salt in hot weather

Nursing considerations: IV Fluid and electrolytes priority, VS, weight and BP

5. **Cushing's Syndrome:** Hypersecretion of adrenal hormones (mineral corticoids, glucocorticoids, and androgens).

Indications: Fatigue, weakness, osteoporosis, muscle wasting, cramps, edema, increased BP, hypernatremia, hypokalemia,

hyperglycemia. Truncal obesity, thin legs and arms due to muscle wasting, purple skin striation, and decrease resistance to infection.

Treatment: Adrenalectomy, radiation, drug therapy and surgery

Nursing considerations: High protein, low carb, high potassium, low sodium, low calorie diet.

POST OP: use careful technique to prevent infection, observe for hyperactivity and GI bleeding, monitor shock and HTN, administer cortisol

10. **Hyperglycemia:** Increased blood sugar.

Indications: Polyuria, polydipsia, polyphagia, glucosuria (when glucose level exceeds 180), fatigue, sudden vision changes, tingling in hands and feet, dry skin, slow healing wounds, recurrent infections

Treatment: Type 1- give insulin

Type 2- Diet and exercise, if symptoms persist, oral hypoglycemic agents (stimulate beta cells in the pancreas to release endogenous insulin) are given in conjunction with diet and exercise. Increased waste circumference size contributes to insulin resistance.

Note: Insulins

Glargine longer duration insulin

Regular Onset 30 hr, peak 2-5 hr, duration 8 hrs

NPH O- 1 1/2hr, P- 4-12hr, D- 24hr

Humulin R O- 30-1hr, P- 2-4hr

11. HHNS (hyperglycemic, hyperosmolar, not ketotic syndrome) Occurs in type 2 diabetics over 50.

Indications: glucose level greater than 800 mg/dl, Hypotension, dry mucous membranes, poor skin turgor, tachycardia, altered awareness, seizures, hemiparesis,

Nursing Care: administration of Normal saline, regular insulin, assess VS, glucose, CVP, level of consciousness, urine output and temp

Treatment: replacement of fluids, correction of electrolyte imbalance and insulin

12. **Anaphylaxis:** serious multiple system response (vasogenic shock) to an antigen antibody reaction upon subsequent exposure (rarely upon first contact) to a substance (allergen) for which a person has developed a serious hypersensitivity

Kaplan Med Surg Study Guide

**Judith Tintinalli,J. Stapczynski,O. John
Ma,David Cline,Rita Cydulka,Garth
Meckler**

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RN's Study Guide Vicky Li, 2016-12-05 Review Guides Certification Prep Pocket Guides Critical Care Study Guide
Gerard J. Criner, Gilbert E. D'Alonzo, 2013-03-09 Critical care medicine is a dynamic and exciting arena where complex pathophysiologic states requiring extensive knowledge and clinical acumen are commonly found. Caring for critically ill patients requires an extensive knowledge of basic pathophysiology as well as awareness of the appropriate diagnostic tests and therapeutic interventions. Because this knowledge base crosses many different disciplines, introduction to caring for the intensive care patient while exciting may also be intimidating. This textbook is designed toward making the dynamic environment of the critical care unit understandable and the approach to the patient both logical and successful. The book contains three components: 1. description of the procedural tasks commonly performed for the critically ill patient; 2. explanation of the most common pathophysiologic states encountered; and 3. description of specific disease entities with details of their differential diagnosis, diagnostic strategy, and therapeutic plan. This book also uses several educational approaches that we have found useful in our own teaching sessions and prior textbooks. Clinical cases introduce chapters and highlight chapter segments to emphasize clinical relevancy. As an additional study aid, margin notes highlight important teaching points and facilitate easy review of chapter content. To consolidate the principles outlined in each chapter, review questions with full text explanations are provided at the end of each chapter. All these elements help reinforce the most important messages for the reader.

Tintinalli's Emergency Medicine: A Comprehensive Study Guide, Seventh Edition Judith Tintinalli, J. Stapczynski, O. John Ma, David Cline, Rita Cydulka, Garth Meckler, 2010-11-12 The landmark emergency medicine text is now in full color! 17 additional chapters available for download. With 418 contributors representing over 120 medical centers around the world, Tintinalli's Emergency Medicine is the most practical and clinically rigorous reference of its kind. It covers everything from prehospital care, disaster preparedness, and basic resuscitative techniques to all the major diseases requiring emergency treatment, such as pulmonary emergencies, renal and GU disorders, and hemophilia. This authoritative in-depth coverage makes this classic text indispensable not only in emergency departments but also for residents and practitioners when studying or preparing for any exam they may face. While continuing to provide the most current information for acute conditions, the seventh edition of Tintinalli's Emergency Medicine has been substantially revised and updated to cover all of the conditions for which patients seek emergency department care in a concise and easy-to-read manner.

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The Nurse Professional Deborah Dolan Hunt, 2014-10-24 Print CourseSmart [Fundamentals of Nursing Care](#) Marti A Burton, Linda J May Ludwig, 2014-10-10 Take a fresh new approach to nursing fundamentals that teaches students how to think learn and do while they make the connections each step of the way [National Library of Medicine Current Catalog](#) National Library of Medicine (U.S.), 1983

Linton and Matteson's Medical-Surgical Practical Nursing in Canada - E-Book Katherine Poser, Adrienne Dill Linton, Mary Ann Matteson, 2023-10-13 Master the role and responsibilities of the PN in Canadian medical surgical nursing The only Canadian medical surgical nursing text designed for the Practical Nurse student Linton and Matteson's Medical Surgical Practical Nursing in Canada provides a solid foundation in the fundamentals of nursing including roles settings and issues and trends in health care Content includes descriptions of pathology medical conditions organized by body system emergency and disaster management pandemic preparedness and mental health nursing Unique to this text is a unit focusing on the older adult a key patient population that PNs see in practice Edited by Katherine Poser an experienced educator and critical care nurse this text helps you prepare for the REx PN or CPNRE licensure examinations and succeed as a new nurse

Current Catalog National Library of Medicine (U.S.), 1985 First multi year cumulation covers six years 1965 70 *Endocrine Surgery Comprehensive Board Exam Guide* Alexander L. Shifrin, Marco Raffaelli, Gregory W. Randolph, Oliver Gimm, 2022-01-19 Every surgical subspecialty has been rapidly developing with establishment of the board certification The Division of Endocrine Surgery DES of the European Board of Surgery has defined the curriculum for Endocrine Surgery to include thyroid parathyroid adrenal and GEP NET surgery and handles accreditation in Endocrine Surgery The first examinations in Endocrine Surgery in Europe have been introduced in 2003 The main goal of the exam is to maintain a uniform and high standard of endocrine surgical professionalism across the Europe This book was completed with the expectation that it would benefit all European surgeons

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Work Practices Guide for Manual Lifting ,1981 *Fundamentals of Urine and Body Fluid Analysis - E-Book*

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Rehabilitation David J. Magee, James E. Zachazewski, William S. Quillen, Robert C. Manske, 2015-11-20 Design and implement a rehab program on your own with Pathology and Intervention in Musculoskeletal Rehabilitation 2nd Edition Part of Magee's popular Musculoskeletal Rehabilitation Series this pathology text for physical therapists provides clear guidance on patient management relative to specific musculoskeletal pathology injury and illness all based on a sound understanding of basic science and principles of practice It focuses on the specific pathologies most often seen in the clinic and discusses the best methods for intervention for the different areas of the body in the context of the tissue healing model Each intervention features a rationale along with the pathology and problem presented stage of healing evidence in the literature and clinical reasoning considerations Dedicated and focused information on the specific pathologies most often seen in the clinic as well as the best methods for intervention for the different areas of the body minimizes duplication of information by referring you to other titles in the Musculoskeletal Rehabilitation Series for basic scientific information regarding inflammation healing tissue deformation and the development of muscular strength and endurance Trusted experts in musculoskeletal rehabilitation along with internationally recognized contributors present the best evidence behind contemporary interventions directed toward the treatment of the impairments and functional limitations associated with acute chronic and congenital musculoskeletal conditions occurring across the lifespan Evidence based content with over 4 000 references supports the scientific principles for rehabilitation interventions providing the best evidence for the management of musculoskeletal pathology and injury NEW The Skin and Wound Healing chapter looks at the numerous tools available to assist in objectively monitoring and treating a patient with an acute or chronic wound NEW Rotator Cuff Pathology chapter highlights the anatomy function and etiology of the rotary cuff and addresses rotary cuff injuries physical examination and non operative and operative treatment UPDATED Substantially revised chapter on the Thoracic Ring ApproachT facilitates clinical reasoning for the treatment of the thoracic spine and ribs through the assessment and treatment of thoracic spine disorders and how they relate to the whole kinetic chain UPDATED Revised Lumbar Spine Treatment of Motor Control Disorders chapter explores some of the research evidence and clinical reasoning pertaining to instability of the lumbar spine so you can better organize your knowledge for immediate use in the clinical setting UPDATED Significantly revised chapter on the treatment of pelvic pain and dysfunction presents an overview of specific pathologies pertaining to the various systems of the pelvis and highlights how The Integrated Systems Model for Disability and Pain facilitates evidence based management of the often complex patient with pelvic pain and dysfunction NEW Musculoskeletal Bone and Soft Tissue Tumors chapter covers common bones tumors anatomic considerations and rehabilitation pediatric patients and amputation related to cancer UPDATED Thoroughly revised chapters with additional references ensure you get the most recent evidence and information available NEW Full color design and illustration program reflects what you see in the physical world to help you recognize and understand concepts more quickly *Rosai and Ackerman's Surgical Pathology E-Book* Juan

Rosai,2011-06-20 Rosai and Ackerman's Surgical Pathology delivers the authoritative guidance you need to overcome virtually any challenge in surgical pathology Recognized globally for his unmatched expertise preeminent specialist Juan Rosai MD brings you state of the art coverage of the latest advancements in immunohistochemistry genetics molecular biology prognostic predictive markers and much more equipping you to effectively and efficiently diagnose the complete range of neoplastic and non neoplastic entities Efficiently review the clinical presentation gross and microscopic features ultrastructural and immunohistochemical findings differential diagnosis therapy and prognosis for virtually every pathologic entity Compare your findings to more than 3 300 outstanding illustrations that capture the characteristic presentation of every type of lesion Avoid diagnostic pitfalls using Dr Rosai's expert observations on what to look for what to be careful about and which presentations can be misleading Find quick answers on tumor staging quality control procedures and the handling of gross specimens through valuable appendices Make optimal use of all the very latest advances including our increased understanding of the genetic basis of inherited and acquired disease the newest molecular genetic and immunohistochemical techniques and the most recent WHO disease classification schemes Kaplan's Cardiac Anesthesia E-Book Joel A. Kaplan,David L. Reich,Steven N. Konstadt,2011-04-11 Optimize perioperative outcomes with Kaplan's Cardiac Anesthesia Dr Joel L Kaplan and a host of other authorities help you make the best use of the latest techniques and navigate your toughest clinical challenges Whether you are administering anesthesia to cardiac surgery patients or to cardiac patients undergoing non cardiac surgery you'll have the guidance you need to avoid complications and ensure maximum patient safety Consult this title on your favorite e reader conduct rapid searches and adjust font sizes for optimal readability Compatible with Kindle nook and other popular devices Update your understanding of cardiovascular and coronary physiology and the latest advances in molecular biology and inflammatory response mechanisms Master the newest approaches to perioperative assessment and management including state of the art diagnostic techniques Tap into the latest knowledge about 2D and 3D transesophageal echocardiography anesthesia delivery for minimally invasive robotic cardiac surgery assist devices and artificial hearts cardiac pacing cardiac resynchronization therapy ablation techniques and more Access the complete contents online at Expert Consult plus additional online only features including an ECG atlas videos that demonstrate 2 D and 3 D TEE techniques in real time and an Annual Year End Highlight from the Journal of Cardiovascular Anesthesia that's posted each February Clearly visualize techniques with over 800 full color illustrations Fatigue Science for Human Health Y. Watanabe,B. Evengard,B.H. Natelson,L.A. Jason,H. Kuratsune,2007-12-18 To provide a forum for discussion the International Conference on Fatigue Science was organized the first being held in 2002 in Sandhamn Sweden and the second in 2005 in Karuizawa Japan Subsequently it was decided that the papers presented at the two conferences should be collected The result is an authoritative guide to recent progress in the molecular and neural mechanisms of fatigue and in the development of the ways to prevent and overcome fatigue and chronic fatigue **Medical Research in the Veterans'**

Administration United States. Veterans Administration,1971 **Trauma** William C. Wilson,Christopher M. Grande,David B. Hoyt,2007-02-05 Produced by a world renowned team of trauma specialists this source reviews initial management considerations beginning in the pre hospital phase continues through the primary and secondary surveys of the hospital based evaluation process and proceeds to the perioperative management of trauma burns and associated conditions This reference pro

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