MR/CT Atlas of Anatomy (CD ROM)
Klaus Kuper.
price £101.75. 390 pages, price £58.00.

The utilisation of additional learning (including CD RoMs) is becoming increasingly important within medicine. This CD aims to depict a digital section of anatomy from MRI and CT scans in a comprehensive and logical fashion. The CD is routinely loaded and has two main sections, one describing CT and the other MRI anatomy. Access to the various sections and the images within are generally of very high quality and easy to use. There is the ability to scroll up and down various images and to change direction from axial to coronal or sagittal planes. There is a very good and extensive labelling of the structures identified, which is supplemented by a quiz function where the student is asked to click on the appropriate area of anatomy listed by the side. A successful click is accompanied by the sound of a gong whilst an error causes a dog to bark! Overall the layout and illustrations are of very high quality particularly of the central nervous system, spine and musculo-skeletal system. However, the angio anatomy of the abdomen and thorax is very poorly demonstrated. The images are of low definition with only very large vessels visible. In addition there are several factual errors including mislabelling of some muscles in the shoulder. There are some individual peculiarities in labelling secondary to translation from German but overall the labelling is of a very high quality. This CD would be useful to postgraduate trainees particularly in radiology but also in other specialties such as orthopaedics, neuroradiology and general surgery. It would not have much benefit to those interested in vascular anatomy.

Overall the wealth of high quality easily archived images outweighs these minor problems and I would recommend this as part of the digital library for diagnostic radiology trainees. It would need to be supplemented by other material particularly in vascular anatomy.

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Decision making in Vascular Surgery
Cronenwett and Rutherford, Eds.
390 pages, price £58.00.

This book comprehensively addresses the subject of vascular surgery and does so in an original and user-friendly way. Within each chapter a topic is presented in the form of an algorithm, showing the management pathway that is taken when faced with a particular clinical situation. The decision pathway is accompanied by text, which explains each step to be taken, and the reason for the decision. Background information is provided on each subject and references are given where these decisions are based on research evidence. The book has been split into a progressive sequence of chapters. The initial topics discuss the pre-operative evaluation and management of a patient with vascular disease. This is followed by chapters on cerebrovascular disease, aneurysms, extremity occlusive disease, renovascular disease, venous disease and finally miscellaneous topics that include lymphoedema and trauma.

The chapters are concise and well written. The diagrams are clear and easy to follow. They highlight the decisions that are routinely made and break the decision process into small and manageable stages. Unfortunately, the evidence for these decisions is not always explicit. Most chapters reference their sources but some do not provide a clear evidence-base for their decisions and relate them instead to the authors’ own practice. If the evidence does not exist then it would be helpful for this to be explicitly stated.

The book explores difficult problems that are faced in vascular practice such as co-existing carotid and coronary disease. By using the algorithm approach one can easily follow each step in the decision path, and making the problem seem simpler and more logical. This may be especially useful for the inexperienced vascular surgeon. Exploring a subject in this manner also highlights areas of uncertainty and issues that require further research.

There are several interesting chapters that cover newer technologies and procedures such as endovascular aneurysm repair and thrombolysis. The endovascular chapter recognises the fact that this is still an unproven technique, both in terms of cost and effectiveness. The potential benefits and current limitations of this emerging technique are also discussed.
The book tends to have a North American perspective and certain recommendations, for example the screening of carotids and aneurysms post-operatively that may not be universally accepted. This also limits the discussion of other patterns of vascular disease and trauma, which may be more prevalent in different parts of the world.

This book generally addresses the main problems and decisions that face a vascular surgeon. It is easy to read and understand and would be especially useful to the junior vascular trainee. It is not as in-depth as some textbooks but does provide a good grounding in topics of vascular surgery. It will also stimulate further reading and research on topics of particular interest. It utilises a modern approach for a textbook, but does fail to fulfil a potential to provide a comprehensive evidence-base for clinical decisions within vascular surgery.

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Shared decision-making improves the quality of patient care. Unfortunately, shared decision-making is not yet common practice among vascular surgeons. Thus, decision support tools were developed to assist vascular surgeons and their patients in using shared decision-making. This trial aims to evaluate the effectiveness and implementation of decision support tools to improve shared decision-making during vascular surgical consultations in which a treatment decision is to be made. Improving shared decision-making in vascular surgery by implementing decision support tools: study protocol for the stepped-wedge cluster-randomised OVIDIUS trial. S. M. L. de Mik na1, F. E. Stubenrouch na1 Vascular Surgery Training Program Profiles. The Society develops guidelines to aid its members and their patients in the decision-making process. SVS guideline writing groups draw upon systematic reviews of the available evidence to inform key recommendations. Systematic reviews and meta-analyses are performed by the Mayo Clinic Evidence-based Practice Center, in Rochester, Minnesota. The methodology used for SVS clinical practice guidelines has been published in the Journal of Vascular Surgery. SVS members are invited to propose guideline topics, using the request form. New Guidelines & Reporting Standards @article{Santema2016SharedDM, title={Shared Decision Making in Vascular Surgery: An Exploratory Study.}, author={T. B. Santema and F. E. Stubenrouch and M. Koelemay and A. Vahl and C. Vermeulen and M. Visser and D. Ubbink}, journal={European journal of vascular and endovascular surgery : the official journal of the European Society for Vascular Surgery}, year={2016.} OBJECTIVES Shared decision making (SDM) is a process in which patients and their doctors collaborate in choosing a suitable treatment option by incorporating patient values and preferences, as well as the best available evidence. Particularly in vascular surgery, several conditions seem suitable for SDM because there are multiple treatment options. Start by marking Decision Making in Vascular Surgery as Want to Read: Want to Read saving… Want to Read. Filled with clear, easy-to-follow decision trees for 75 common scenarios in vascular surgery, this resource presents helpful explanatory text and current references for every step of each algorithm. This practical approach highlights the key decision points in vascular surgery practice and considers their applications to individual patients. Both experienced practitioners Filled with clear, easy-to-follow decision trees for 75 common scenarios in vascular surgery, this resource presents helpful explanatory text and current references for every step of each algorithm.
Creating a novel anatomical atlas requires a technique showing the organ in a different perspective (e.g., detailedness, staining, and tissue-fidelity), or that the applied method results in enhanced image quality compared to a previous atlas. There are several ways to visualize macro- or microanatomical structures in anatomy: conventional preparations and sections can be made shortly post mortem on a fresh cadaver, or previously fixed with a fixative agent [1], creating macerated bones and skeletons [2–4], or corrosion casting [5–7]. First we made in- and ex vivo CT and MR imaging on a brain of a two-year-old female Beagle dog with adequate T1- and T2-weighted sequences. Start by marking Atlas Of Human Anatomy With Cd Rom as Want to Read: Want to Read saving… Want to Read. It made my dreams come true! Well..it did not. I actually hated it when I had to learn the basics of Anatomy in my first year of medicine. The best anatomy atlas one could ever imagine. Every part of the human body were painted by Mr. Netter with realistic details. This is art meets science in a 640 page format. I love this so much. Netter's Atlas of Human Anatomy.pdf. Atlas Dissections Anat Core. Anatomy Coloring Book. For the first time, spectacular original paintings created by New CT angiograms have been included in the Upper Limb Carlos Machado illustrate clinically important structures such as and Lower Limb sections. This new technology not only clearly F@rewrdl. demonstrates blood vessels, but vividly shows bony landmarks help you better understand anatomy and its application to the to which the blood vessels are related.
ATLAS OF FUNCTIONAL NEUROANATOMY By WALTER J. HENDELMAN, M.D., C.M. Professor Department of Cellular and Molecular Medicine Faculty of Medicine University of Ottawa Ottawa, Canada ©2000 CRC Press LLC Library of Congress Cataloging-in-Publication Data Hendelman, Walter. Atlas of functional neuroanatomy/ by Walter J. Hendelman. p. cm. Â A wide variety of references are listed. Reasonable efforts have been made to publish reliable data and information, but the author and the publisher cannot assume responsibility for the validity of all materials or for the consequences of their use. Â This Atlas is built upon three previous editions [titled Studentâ€™s Atlas of 2 Hand and peripheral nerve surgery. Anatomy of the hand 24 The trapezium: volar approach 27 The â€œboutonnièreâ€‌ deformity 31 Arthrolysis of the PIP joint 34 Protective flaps for the median nerve at the wrist 36 Flexor digitorum superficialis transfer to the thumb 38 Vascularised bone transfer from the metaphysis. Â Anatomy of the knee 160 Anatomy of the lumbosacral plexus 162 Prosthesis of the patella 163 Repair of a rupture of the anterior cruciate ligament 167 Posterior approach to the posterior cruciate ligament (anastomoses with vascular pedicle supplying rim of scapula) 18 thoracic vessels 19 trapezius and rhomboid muscles 20 long thoracic nerve 21 serratus anterior muscle. xii. 1. This atlas details the vascular anatomy seen on angiographic images and in the new imaging modalities. The book presents the complete anatomy of the arteries, veins, and lymphatic system by body region. Full-color drawings are correlated with angiographic images to guide evaluation and management of vascular disease and performance of endovascular procedures.
What Is Vascular Surgery? Vascular surgeons treat patients with all types of vascular disease, which includes arterial, venous and lymphatic pathology. Vascular surgeons operate throughout the entire body, with the exception of the heart, and some surgeons even do procedures that include interventions in the intra-cranial vessels. Vascular Surgery Elective Rotations Sub-internships provide an in-depth experience on a vascular surgery service. You should plan to complete a vascular surgery sub-internship late in your third year and/or early in your fourth year of medical school. It is important that your decision to pursue a career in Vascular Surgery is well-informed. Make sure you have a realistic understanding of both the positive and negative aspects of the profession.

Bones of cranium: Anatomy, CT. Select a zone. Whole body. These cookies make it possible to obtain anonymous statistics of attendance as well as error reports during the visit of the site, in order to optimize its ergonomics, its navigation and its contents. By disabling these cookies, we will not be able to analyze site traffic or detect errors. 

Google Analytics. Decision making in Vascular Surgery Cronenwett and Rutherford, Eds. Harcourt Publishers Ltd. 2001. 390 pages, price £58.00. The utilisation of additional learning (including CD RoMs) is becoming increasingly important within medicine. The CD is routinely loaded and has two main sections, one describing CT and the other MRI anatomy. Access to the various sections and the images within are generally of very high quality and easy to use. There is the ability to scroll up and down various images and to change direction from axial to coronal or sagittal planes. There is a very good and extensive labelling of the structures identified, which is supplemented by a quiz function where the student is asked to click on the appropriate area of anatomy listed by the side.
