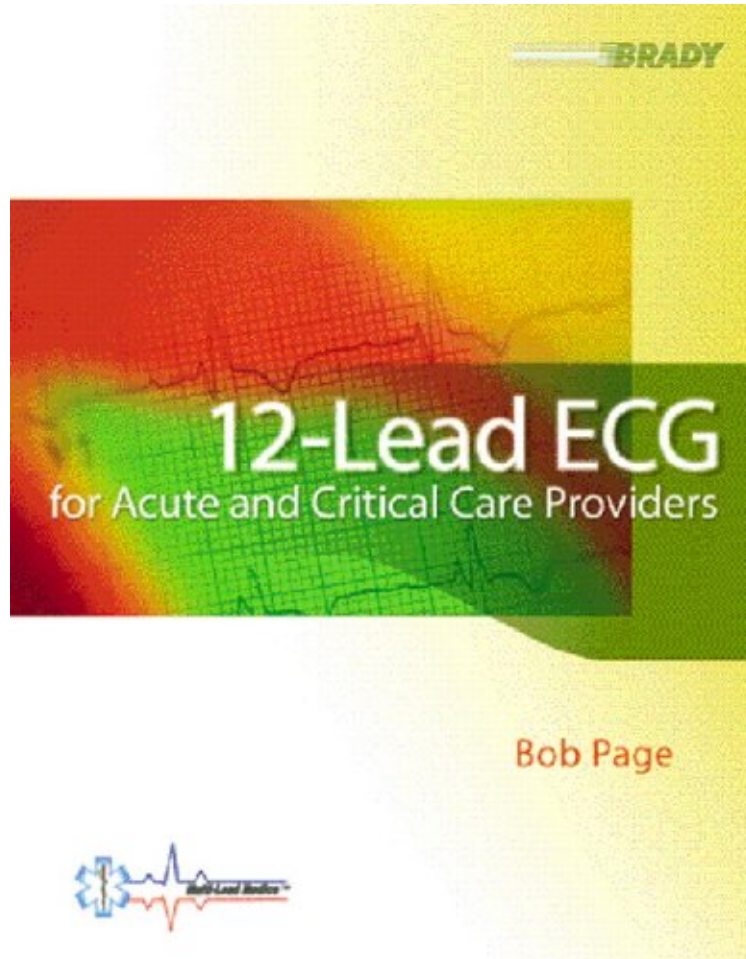


12-Lead ECG for Acute and Critical Care Providers

Bob Page

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Bob Page : 12-Lead ECG for Acute and Critical Care Providers before purchasing it in order to gage whether or not it would be worth my time, and all praised 12-Lead ECG for Acute and Critical Care Providers:

0 of 0 people found the following review helpful. each chapter broken down with easy to understand instruction on interpretation rulesBy Samuel L. PeppardA MUST for advanced 12 lead interpretation. Hundreds of 12 leads to practice with, each chapter broken down with easy to understand instruction on interpretation rules. Go beyond just looking for the STEMI and always remember as Bob said and it is so true; "In lead II, you have no clue!". I use this book as a reference teaching my Paramedic students (Para-pups) and have seen outstanding results when they reach the field. Samuel Peppard, EMT-P/Critical Care Paramedic/Adjunct instructor College of Central Florida1 of 1 people found the following review helpful. Great read! You can learn a lot from this ...By Mike and JulieGreat read! You can learn a lot from this book. I would recommend a sturdy basic understanding of your fundamentals before diving in. I hope to be in one of Bobs classes in the near future. Great way to keep sharp for your patients!1 of 1 people found the

following review helpful. Five StarsBy Customerexcellent seller-very pleased with purchase-fast shipping

Written by a paramedic with experience teaching at all levels (EMT-P, nurses, etc.)this user-friendly text presents a practical, easy-to-understand system for 12-Lead ECG interpretation and assessment. Based on the nationally reknown 12-lead ECG workshop, "Multi-Lead Medics." A focus on the need to know information and a large number of practice caseswith over 400 actual 12-leadsprovides students with the solid background and extensive hands-on practice that will help them gain confidence and build competence quickly.

From the Back Cover 12-Lead ECG for Acute and Critical Care Providers is a comprehensive yet concise text offering a practical, easy-to-understand approach to 12-lead interpretation and assessment. Written by a paramedic with experience teaching at all levels, this user-friendly text focuses on the need-to-know information that allows students to quickly gain an understanding of the 12Lead.The large number of practice cases, with over 400 actual patient strips, provides a solid background and the extensive hands-on practice necessary to help students gain confidence and build competence quickly. Bob Page is an internationally known speaker, instructor, author, and paramedic. He developed Multi-Lead Medics, a 12-lead ECG interpretation workshop that he has presented across the United States, Canada, and in Europe. His mission is to present high quality, innovative, informative, and entertaining educational programs for personnel involved in the emergency and critical care of patients. He is recognized for his energetic, motivational style. Bob has authored dozens of articles on cardiology and other emergency and critical care topics. About the Author Bob Page Multi-Lead Medics is the trademarked 12-Lead ECG interpretation workshop developed by Bob Page, AAS, NREMT-P, CCEMT-P, I/C. His mission is to develop and present high-quality, innovative, informative, and entertaining educational programs for personnel involved in the emergency and critical care of patients. Bob Page is an internationally known speaker, instructor, author, and paramedic. He has presented seminars across the United States, Canada, and in Europe. He is recognized for his energetic, humorous, and motivational style. Bob takes ordinarily dry and hard-to-teach topics and transforms them into a fun, learning experience. Bob calls it "Edutainment." Bob's presentations are accompanied by exciting AV support from the PowerPoint@ and Keynote programs with graphics, animation, audio, and video clips. Bob has authored dozens of articles on cardiology and other emergency and critical care topics and more recently has developed the cardiology section of the Critical Care Emergency Medical Transport Course from the University of Maryland, Baltimore County. Bob has been an instructor since 1975, teaching a variety of adult education courses from customer service to advanced medical care. He has an Associate degree in Paramedical Technology from Southwest Baptist University. He is a nationally registered and critical care paramedic. He has been involved in EMS since 1978; when he became a CPR instructor. Bob is Director of Emergency Care Education at St. John's Regional Health Center in Springfield, Missouri. He is the lead instructor for the paramedic program and has taught at all levels of EMS and nursing. He has earned an adjunct faculty appointment at the University of Maryland, Baltimore County, and is also a guest instructor at Southwest Baptist University's College of Nursing. Excerpt. Reprinted by permission. All rights reserved. It doesn't have to be difficult. I have always believed in the ability of people. When I began my career in acute medicine, "upper-level" knowledge always had a mystique. Medicine is cluttered with paradigms on how things should always be done. I can recall boundaries to learning. Skills were assigned to the level of licensure. For example, a paramedic could do this, a registered nurse could do that, and only the doctor could perform certain procedures and tasks. Reading the 12-lead ECG was one of those things reserved for the doctor. I recall sitting in on a few classes with physicians and some experienced cardiac care nurses to learn this advanced knowledge. Armed with an aboveaverage skill at recognizing basic cardiac rhythms, I set out to learn. It was after the first slide that I learned that I was in way over my head. Sure, I could recognize a P wave, but I could not spell or pronounce some of the information. One thing I did remember, however, was ST segment elevation. I saw a picture of that on the first slide. For the next 7 hours and 55 minutes, I did not understand why all the technical measuring and laborious tasks required for recognizing this elevation were necessary. I remember an occasion when my paramedic instructor pointed out ST segment elevation on a Lead II rhythm strip. It really didn't faze me because, on the basis of the patient's history and complaint and the current assessment findings, I was convinced that it was a heart attack, even without the ECG. The ECG monitor was there to help me look for ectopic beats and arrhythmias. After the class, I started to ask questions and pose analogies to the emergency physicians and cardiologists who had presented the seminars. I have spent many hours in seminars and in reading almost every book I can find on the subject of 12-lead ECGs and have found that it really doesn't have to be difficult. It's all in how you learn it. One analogy I use in my seminars is that of the German chocolate cake. My sister Janie made a wonderful German chocolate cake. She made it from scratch, gathering all the ingredients and even grating the coconut and pecans for the icing. It took a long time, but it was a great cake. Now, people can buy German chocolate cake mix in a store and just add water and spread the frosting. The two cakes taste the same, look the samethey are the same. As with the German chocolate cake, I realize that there are many different ways to read a 12-lead ECG. This book presents the "just-add-water" type. Life is about change. Human beings are not programmed to stay the same. This book is based on the Multi-Lead Medics 12-Lead ECG Interpretation Workshops I have presented

to thousands of paramedics, nurses, respiratory therapists, doctors, and other acute-care providers. This book recognizes the roots and pathophysiology of more complex methods of electrocardiography. Many books are available on 12-lead ECG interpretation. However, this book is greatly simplified for the acute-care provider. It is simplified without compromising accuracy. All examples and 12-lead ECGs used in this book have been over-read by cardiologists for accuracy. Compared with more traditional methods of interpretation, these methods have demonstrated comparable accuracy and increased speed of diagnosis. For simplicity, only the rapid methods of recognition are presented. Therefore, this book is comprehensive in topics, yet it is focused on a few easy-to-use methods for practical acute-care use. The book provides plenty of examples for you to practice your skills. I believe in the ability of the acute-care provider. This book is for you. Happy learning, and remember, it doesn't have to be difficult.