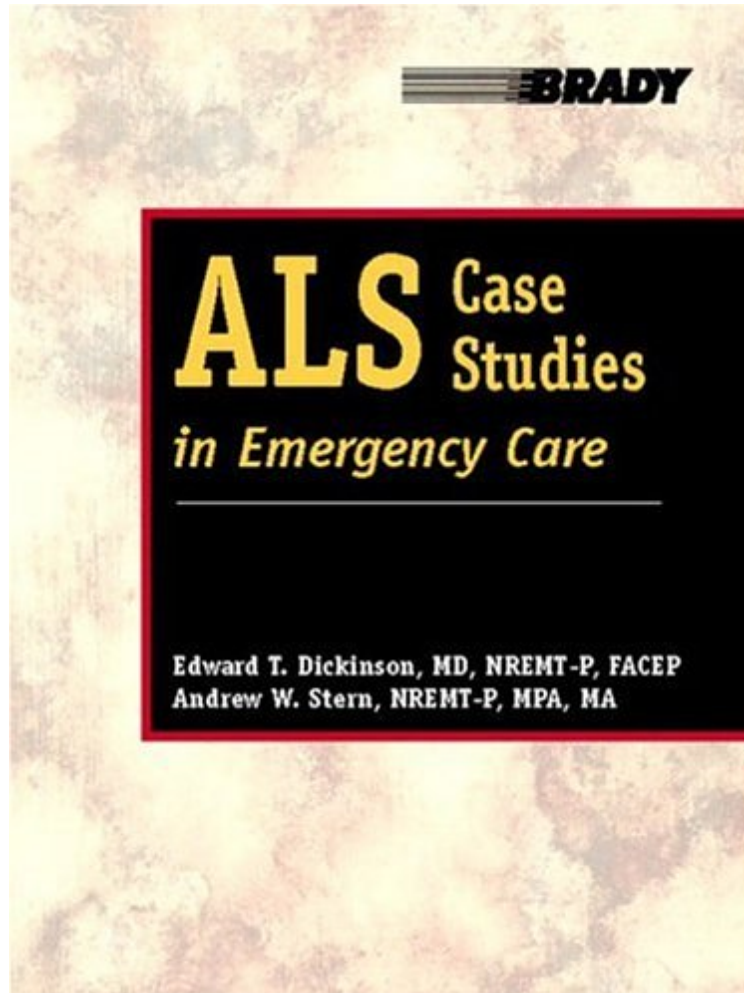


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ALS Case Studies in Emergency Care

Edward V. Dickinson Medical Editor, Andrew Stern NREMT-P MPA MA

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Edward V. Dickinson Medical Editor, Andrew Stern NREMT-P MPA MA : ALS Case Studies in Emergency Care before purchasing it in order to gauge whether or not it would be worth my time, and all praised ALS Case Studies in Emergency Care:

Written by leading practitioners in the medical field, these case studies offer in-depth explanations of scenarios encountered in the prehospital environment. A consistent format helps readers understand the discussions, questions, and the resolution for each case; allowing them to gain exposure to the many different situations that will arise on the job. 51 cases are organized into 3 topic areas: Medical Emergencies, Trauma and Surgical Emergencies, and Special Situations. An excellent reference and interesting reading for emergency medical technicians and paramedics.

From the Back Cover ALS Case Studies in Emergency Care introduces real-life case studies that aim to engage students in the critical thinking process necessary to provide the best clinical care possible. Written by leading prehospital and emergency medicine practitioners, this valuable tool helps prepare emergency care providers for a variety of situations they may encounter in the field. The case-based approach offered by this book gives students the opportunity to apply the concepts learned in class and gives them the opportunity to familiarize themselves with the scenario format, which is increasingly used in national and state exams. The book includes cases on Medical Emergencies, Trauma and Surgical Emergencies, and Special Situations. Case topics include: Cardiac Arrest Amputations Exposure to Hazardous Material Difficult Intubation Multiple Blunt Trauma Weapons of Mass Destruction About the Author Edward T. Dickinson, MD, NREMT-P, FACEP, is currently Assistant Professor and Director dEMS Field Operations in the Department of Emergency Medicine of the University of Pennsylvania School of Medicine in Philadelphia. He is Medical Director of the Malvern Fire company, the Berwyn Fire Company, and the Township of Haverford paramedics in Pennsylvania. He is a residency-trained, board-certified emergency medicine physician who is a Fellow of the American College of Emergency Physicians. Dr. Dickinson began his career in emergency services in 1979 as a firefighter-EMT in upstate New York. He has remained active in fire service and EMS for the past 25 years. He frequently rides with EMS units and has maintained his certification as a National Registry EMTParamedic. He has served as medical editor for numerous Brady EMT-B and First Responder texts and is the author of Fire Service Emergency Care and coauthor of Emergency Care Fire Service Edition and Emergency Incident Rehabilitation. Andrew W. Stern, NREMT-P, MPA, MA has been working in EMS for over 25 years as a provider, educator, and administrator. He has authored over 25 articles, book chapters, and instructor manuals. He holds instructor certifications in BCLS, ACLS, PALS (AHA), as well as for PHTLS and PEPP. Currently affiliated with the Town of Colonie Emergency Medical Services in New York State as a Senior Paramedic/Flightmedic, also serving as their CME coordinator. Mr. Stern's involvement in emergency services extends to membership in DMAT-2 (NY) and New York Rapid Response Team-1 (USAR). He is an associate of the Prehospital Care Research Forum and is a member of the National Association of EMS Educators. Excerpt. Reprinted by permission. All rights reserved. ALS Case Studies in Emergency Care is intended to be a paramedic-level, multi-purpose learning tool. There is a uniqueness to prehospital emergency care that requires providers to perform difficult tasks in uncontrolled environments, often with limited personnel, and often under specific time constraints. The intent of this book is to challenge those who use case studies as a learning technique to expand their ability to be more thorough in assessments, flexible when interpreting clinical findings, and ultimately be prepared to provide the best clinical care possible. To optimize learning for both new and current providers, each case is presented in the same easy-to-follow format. The Case Presentation describes the history, physical findings, and basic interventions that may be applied in a real-life situation. This is followed by Questions regarding intervention and pathophysiology/mechanisms of action. The Discussion includes a presentation of pathology, key prehospital interventions to optimize care, and controversial issues regarding management. The Return to the Case returns to the scenario to describe the use of the intervention and patient's response. Case studies provide a methodology for looking at an entire EMS call from initial dispatch until transition of care to the emergency department. Integrating this information is important to both the provider and the patient. The process of planning and preparing to give care starts with dispatch information. As a call progresses, additional data is provided from first responders, family members, and the patient. All this information needs to be processed in order to develop a full clinical picture of the patient's presenting problems and to determine what treatment options should be considered. Case studies make students and active field providers sort information and frequently reevaluate decisions. Please note that the case studies contained in this book reflect generally acceptable clinical treatment approaches and modalities. There is usually more than one clinically acceptable way to treat patients. There are variances that field providers must always take into account such as local or regional protocol as well as different approaches to care based on training and local resources. EMS is evolving. As more and more research is being conducted, some current practices may change. Finally, be open to change and realize that the evolution of new standards and interventions is an essential part of the dynamics of pre-hospital care. Edward T. Dickinson Andrew W. Stern