

CASE FILES® ORTHOPAEDIC SURGERY

骨科学案例 45 例

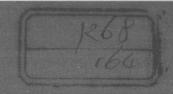
- 45 cases cover common orthopaedic injuries encountered in the office, ED, and OR
- Clinical pearls highlight key points
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CASE FILES® Orthopaedic Surgery 骨科学案例45例

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- 二、内容上,每个分册包含几十个经典案例。基础学科强调与临床的结合,临床学科强调临床思维的培养。
- 三、以案例和问题导入,互动式学习,尤其适合 PBL(问题为中心的学习)和 CBL(案例为中心的学习)。

本系列书可作为医学院校双语教学或留学生教学的教材或教学辅导用书,也是医学生学习医学英语的优秀读物。在世界范围内,该系列书还是参加美国医师执照考试的必备用书。

北京大学医学出版社

DEDICATION

To runners everywhere, from the casual jogger to the serious and competitive marathoner—may the wind be at our backs, horizon before us, and may we never need the medical care in this book.

—ECT

To Kristin, my sister Caroline, and my parents: thank you for your support, encouragement, and love. To Dr. Eric Hume, my mentor and role model.

And to my uncle David Dines, an inspiration and someone I can only hope to emulate as an orthopaedic surgeon.

-AIR

To Guy and Meisie, whose guidance, generosity, and genes inspired my orthopaedic dreams. And to the talented faculty of Albany Med, who are patiently making them real.

TTR

To the residents, fellows, and colleagues with whom I work: Thank you for inspiring me to always continue learning and teaching. And, to Kathryn, Humphrey, and my parents for your unwavering support.

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Eugene C. Toy, MD

Mastering the cognitive knowledge within a field such as orthopaedic surgery is a formidable task. It is even more difficult to draw on that knowledge, procure and filter through the clinical and laboratory data, develop a differential diagnosis, and finally form a rational treatment plan. To gain these skills, the student often learns best at the bedside, guided and instructed by experienced teachers, and inspired toward self-directed, diligent reading. Clearly, there is no replacement for education at the bedside or operating room. Unfortunately, clinical situations usually do not encompass the breadth of the specialty. Perhaps the best alternative is a carefully crafted patient case designed to stimulate the clinical approach and decision making. In an attempt to achieve that goal, we have constructed a collection of clinical vignettes to teach diagnostic or therapeutic approaches relevant to pediatrics. Most importantly, the explanations for the cases emphasize the mechanisms and underlying principles, rather than merely rote questions and answers.

This book is organized for versatility: It allows the student "in a rush" to go quickly through the scenarios and check the corresponding answers, while allowing the student who wants more thought-provoking explanations to go at a more measured pace. The answers are arranged from simple to complex: a summary of the pertinent points, the bare answers, an analysis of the case, an approach to the topic, a comprehension test at the end for reinforcement and emphasis, and a list of resources for further reading. The clinical vignettes are purposely placed in random order to simulate the way that real patients present to the practitioner. A listing of cases is included in Section III to aid the student who desires to test his or her knowledge of a specific area or who wants to review a topic, including basic definitions. Finally, we intentionally did not primarily use a multiple-choice question format in our clinical case scenarios because clues (or distractions) are not available in the real world. Nevertheless, several multiple-choice comprehension questions are included at the end of each case discussion to reinforce concepts or introduce related topics.

HOW TO GET THE MOST OUT OF THIS BOOK

Each case is designed to simulate a patient encounter with open-ended questions. At times, the patient's complaint is different from the most concerning issue, and sometimes extraneous information is given. The answers are organized into four different parts:

PART I

1. Summary: The salient aspects of the case are identified, filtering out the extraneous information. Students should formulate their summary from the case before looking at the answers. A comparison to the summation in the answer will help to improve their ability to focus on the important data while appropriately discarding the irrelevant information—a fundamental skill in clinical problem solving.