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麻醉决策

Decision Making in Anesthesiology

(第4版)



北京大学医学出版社

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北京大学医学出版社
Peking University Medical Press

图书在版编目(CIP)数据

麻醉决策 / (美) 布雷迪 (Bready, L.L.), (美) 努里利 (Noorily, S.H.), (美) 迪尔曼 (Dillman, D.D.) 主编; 王军等译. —北京: 北京大学医学出版社, 2011.1

书名原文: Decision Making in Anesthesiology

ISBN: 978-7-5659-0040-2

I. ①麻… II. ①布…②努…③迪…④王… III. ①麻醉学

IV. ①R614

中国版本图书馆 CIP 数据核字 (2010) 第 226266 号

北京市版权局著作权合同登记号: 图字: 01-2008-2341

Decision Making in Anesthesiology, 4th edition

Lois L. Bready, Susan H. Noorily, Dawn Dillman

ISBN-13: 978-0-323-03938-3

ISBN-10: 0-323-03938-3

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Authorized Simplified Chinese translation from English language edition published by the Proprietor.

978-981-272-152-5

981-272-152-5

Elsevier (Singapore) Pte Ltd.

3 Killiney Road, #08-01 Winsland House I, Singapore 239519

Tel: (65) 6349-0200, Fax: (65) 6733-1817

First Published 2011

2011 年初版

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麻醉决策 (第 4 版)

主 译: 王军 贾东林

出版发行: 北京大学医学出版社 (电话: 010-82802230)

地 址: (100191) 北京市海淀区学院路 38 号 北京大学医学部院内

网 址: <http://www.pumppress.com.cn>

E-mail: booksale@bjmu.edu.cn

印 刷: 北京画中画印刷有限公司

经 销: 新华书店

责任编辑: 李海燕 王霞 马联华 畅晓燕 责任校对: 金彤文 责任印制: 张京生

开 本: 889mm × 1194mm 1 / 16 印张: 41 字数: 1068 千字

版 次: 2011 年 1 月第 1 版 2011 年 1 月第 1 次印刷

书 号: ISBN 978-7-5659-0040-2

定 价: 199.00 元

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(凡属质量问题请与本社发行部联系退换)

本书由

北京大学医学科学出版基金

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译者前言

自从 1842 年 Crawford Long 博士首次使用乙醚麻醉至今，麻醉学现已真正发展成为包括临床麻醉、危重症急救和疼痛诊疗在内的二级学科，麻醉科也成为一级临床科室。近年来，国内外麻醉药物、麻醉理论和麻醉技术等方面都取得了较大进展，我国麻醉学在基础理论和临床技术等方面亦取得了长足进步，尤其是在麻醉质量和患者安全性方面都有了很大提高。临床麻醉和相关学科的广大从业人员在日常工作中已不满足于经典的麻醉学参考书，迫切需要通过阅读一些最新的、简明的参考资料去了解国外先进的麻醉理念。

由 Lois L. Bready 等编著的《麻醉决策》(Decision Making in Anesthesiology) 一书在 2007 年由世界著名出版公司 Elsevier 出版发行。该书由长期工作在临床麻醉第一线的资深麻醉专家编写而成，从麻醉评估、麻醉总论、重症监测及各种外科手术的麻醉处理等方面，阐述了临床麻醉过程中的各种要点，并配有详细的流程图。本书语言简洁，重点突出，特别是相关的流程图对于指导临床麻醉快速处理，以及临床相关人员迅速了解和掌握各种麻醉相关知识具有重要的指导意义。

目前，有关麻醉的专业书籍种类繁杂，但很多书籍都偏重理论，实践意义不强。本书是第一部系统、全面介绍麻醉流程的著作，在目前的麻醉专业书籍当中独树一帜。本书最具特色之处在于文字言简意赅，流程图简明扼要，都是以要点和图表的形式体现相关内容，总结了作者工作中的许多技巧和经验，具有很强的实用性和指导性，对快速指导临床具有直接、快捷和方便的特点，填补了国内麻醉领域出版物的空白，对从事临床麻醉实践的同行有着重要的参考价值。本书不仅可以作为麻醉专业人士的参考书，而且有益于住院医师、研究生、进修医师提高临床水平。

我们在北京大学医学科学出版基金资助及出版社的大力支持下，组织人员翻译了本书，其目的是向广大麻醉科和外科医师提供临床麻醉方面的系统知识，以期为麻醉学的发展起到一定的促进作用。参与本书翻译的人员都是长期工作在临床麻醉第一线的专科医师，且均具有硕士、博士学位，其中大部分具有海外留学经历，这些都为本书的翻译质量提供了保证。当然，由于译者的理解和水平不一，书中辞不达意乃至错误之处在所难免，恳请同道及广大读者批评指正。

最后，我们向所有关心、支持本书出版的专家和同道，尤其是北京大学医学出版社和为本书付出辛勤劳动的全体译者表示衷心的感谢。

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2010 年 9 月

著者前言

《麻醉决策》一书以决策树的形式来说明围术期麻醉管理的过程。因此，本书的目的不是为了取代经典的麻醉学教科书，而是要说明如何运用这些书本知识。这种形式启发读者进行系统性思考，建立术前评估和准备、术中管理和术后注意事项的逻辑思维。我们的目的是建立一系列决策树，这些决策树简单易行，能清楚地显示决策的关键点，简易但不简化。书中的评论能够说明决策要点，并辅以参考文献进一步为证。而最有意义的是为构建这些流程而对现有知识和临床经验进行再认识和重新整理。

虽然我们希望我们的工作遵循循证医学，但在实际操作时，很多决策受患者的意愿、拥有的设备和材料、医疗法律问题以及现有麻醉学知识的影响。虽然存在以上限制，我们每天都努力提高决策的准确度，并力争使患者的预后达到最佳。我们已努力确认这些流程准确而可行。部分有争议的内容反映出不同作者的习惯和思维方式。在一些病例中，也可能还有其他有效方法未加以说明。

作为参与医学院培训项目的教师，我们特别将本书的读者定位为麻醉科住院医师。在学习麻醉学或一些不熟悉的操作时，随时得到有经验的教师的指导将是非常有益的，这样的教师能够提出可行的处理方法，全面告知特殊的手术需求（以及可能出现的问题）。这就是本书要达到的目的——提供合理的麻醉管理方案，以供临床参考。正如有经验的医师给予患者的建议需要个体化一样，我们给予的建议也会根据患者的具体情况来调整。我们希望本书可以为麻醉医师和其他参与围术期患者管理的医务人员提供新的思路。来自读者的反馈非常重要，希望您能与我们交流。

非常感谢各位编者热心而无条件地与我们分享临床经验，完成了这本形式与众不同的书。感谢 Natasha Andjelkovic 的帮助和支持，如果没有她，这本书将无法完成。特别感谢编辑助理 Katharine Holahan 为我们整理初稿并完成其他组织工作。如同以往，我们特别感谢每位与我们一起辛勤工作和学习的麻醉科住院医师——我以你们为骄傲。

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