

## User Guide

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The screenshot displays the AccessMedicine website interface. At the top, the logo is followed by navigation links: Books, Quick Reference, Drugs, Multimedia, Cases, Study Tools, Patient Ed, and Hospital Corner. A search bar with the text 'AccessMedicine Search AccessMedicine' and an 'Advanced Search' button is present. Below the navigation is a carousel of book covers including 'HARRISON'S INTERNAL MEDICINE', 'CURRENT Medical Diagnosis & Treatment 2019', 'PATIENT-CENTERED MEDICINE: A PRACTICE APPROACH', 'Gynfish & Gynfish THE PHARMACOLOGICAL THERAPEUTICS', and 'CURRENT Practice Guidelines in Primary Care 2018'. A 'Browse Books by Topic' and 'Get Alerts' link is located below the carousel. The main content area is divided into three columns: 'AccessMedicine Channel' featuring 'Why is everyone searching... Cervical Health Awareness Month?' by Julie Grisham, ACNP; 'Harrison's Channel' featuring 'Aortic regurgitation: a new episode of Harrison's High Yield...' by Harrison's Self Assessment and Board Review; and 'Case of the Week' featuring 'AccessMedicine's Case of the Week: Cervical Cancer' by Julie Grisham, ACNP. Below these are three more sections: 'MyAccess' with 'Get Access to This Site' and 'View Purchase Options' buttons; 'New on AccessMedicine' featuring 'Principles of REHABILITATION MEDICINE' by RAJ MITRA, MD; and 'Popular Chapters on AccessMedicine' listing chapters 82, 90e, 22, and 9.

## AccessMedicine는?

- AccessMedicine은 의학분야에서 가장 뛰어난 완벽한 지식의 스펙트럼을 제공하는 포괄적인 정보원입니다.
- 권위있고 신뢰할 수 있는 자원인 AccessMedicine은 탁월한 의학 분야 전문가인 Mark A. Graber, MD; Diane Levine, MD; and Anderson Spickard, III, MD를 포함하는 저명한 자문위원회가 이끌고 있으며 자료들이 지속적으로 업데이트되고 있습니다.
- AccessMedicine은 의대생에게 기초과학 학습과 클릭습을 수행하는데 필요한 다양한 자원을 제공합니다. 바로 볼 수 있는 비디오자원, Review Questions과 현장 진료 시 의사결정을 돕는 주요 의학 교과서를 통해 레지던트, 임상간호사, P.A.를 도와줍니다. 또한 개업의가 환자의 최상의 결과를 보장하기 위한 의학 지식을 제공합니다.

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- **Books : Leading medical textbooks**
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(*Harrison's Principle of Internal Medicine* 포함)
- **Quick Reference Tools**
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  - Current Practice Guidelines in Primary Care : *Digests of evidence-based guidelines for primary care topics*
  - Pocket Guide to Diagnostic Tests : *Quick guide to commonly used diagnostic tests in a clinical setting*
  - Differential Diagnosis Tool – 1,000가지 이상의 감별진단 (from *Diagnosaurus*)
  - Clinical Prep : 의대생에게 필수적인 650 개 이상의 핵심 주제로부터의 질문을 통해 유용한 임상정보를 제공
- **Drugs** – 약물정보 데이터베이스
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## AccessMedicine Channel



Why is everyone searching...

ACCESSMEDICINE CHANNEL, WHY IS EVERYONE...

Cervical Health Awareness Month?

Julie Grishaw, ACNP  
Dec 31, 2018

## Harrison's Channel



ACCESSMEDICINE CHANNEL, HARRISON'S...

Aortic regurgitation: a new episode of Harrison's High Yield...

Harrison's Self Assessment and Board Review  
Dec 10, 2018

## Case of the Week



ACCESSMEDICINE CHANNEL, ACCESSMEDICINE'S...

AccessMedicine's Case of the Week: Cervical Cancer

Julie Grishaw, ACNP  
Jan 01, 2019

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- Adams and Victor's Principles of Neurology, 10e (455)
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  - Basic Radiology, 2e (23)
  - Behavioral Medicine: A Guide for Clinical Practice, 4e (5)
  - Cardiovascular Physiology, 8e (2)
  - Clinical Dermatology (3)
  - Clinical Ethics: A Practical Approach

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- brain (91)
- brain stem (59)



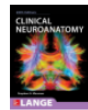
Diseases of the Spinal Cord  
Harrison's Principles of Internal Medicine



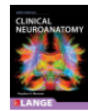
Disorders of the Autonomic Nervous System > SPINAL CORD  
Harrison's Principles of Internal Medicine

... Spinal cord lesions from any cause may result in focal autonomic deficits or autonomic hyperreflexia (e.g., spinal cord transection or hemisection) affecting bowel, bladder, sexual, temperature-regulation, or cardiovascular functions. Quadriparetic patients exhibit both supine hypertension...

View All Harrison's Principles of Internal Medicine Results >



The Spinal Cord  
Clinical Neuroanatomy, 28e



The Vertebral Column and Other Structures Surrounding the Spinal Cord  
Clinical Neuroanatomy, 28e



Chapter 44. Diseases of the Spinal Cord  
Adams & Victor's Principles of Neurology, 10e

키워드 검색 시 사례

: 사용자가 Spinal Cord와 같이 두 단어를 검색하면 두 단어가 and 검색으로 이루어진 결과를 보여줌

키워드로 검색된

- 자료 유형
- 유형별 결과 수

Book Title로  
좁히기

1. 검색상자에 키워드를 입력하여 좁히기
2. 디스플레이된 타이틀 선택(체크)

토픽별로 분류하기

# Books

## 세계적으로 가장 저명한 Textbook의 최신 Edition 제공

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- Gastroenterology
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- Healthcare Business
- Healthcare Systems: Quality, Safety, & Cost

### Textbooks

Tools ▾

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**Harrison's Principles of Internal Medicine, 20e**  
20th Edition  
JAMESON FAUCI KASPER HAUSER LONGO LOSCALZO  
J. Larry Jameson, Anthony S. Fauci, Dennis L. Kasper, Stephen L. Hauser, Dan L. Longo, Joseph Loscalzo

**Adams and Victor's Principles of Neurology**

**THE ATLAS OF EMERGENCY MEDICINE**

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바이블로 세계적 인정을 받는 콘텐츠 제공

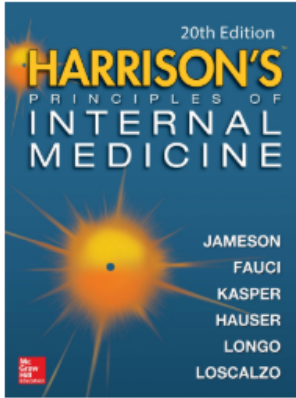
- Harrison's Principles of Internal Medicine
- CURRENT Medical Diagnosis & Treatment
- Hurst's the Heart
- Schwartz's Principles of Surgery
- Adams and Victor's Principles of Neurology
- Williams Obstetrics
- Clinical Neuroanatomy
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# Harrison's Principles of Internal Medicine, 20e

J. Larry Jameson, Anthony S. Fauci, Dennis L. Kasper, Stephen L. Hauser, Dan L. Longo, Joseph Loscalzo

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    - Chapter 116: Molecular Mechanisms of Microbial Pathogenesis
    - Updated! Chapter 117: Approach to the Acutely Ill Infected Febrile Patient**
    - Chapter 118: Immunization Principles and Vaccine Use
    - Chapter 119: Health Care-Associated Infections
    - Updated! Chapter 120: Travel Medicine

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업데이트된 챕터

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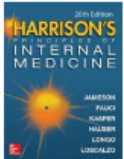
- 12/18/2018**  
**Valerate, a Microbial Metabolite, Inhibits C. difficile Growth**  
Kurt J. Isselbacher, MD
  - 12/17/2018**  
**Prednisone Prophylaxis for Prevention of TB-Associated Immune Reconstitution Inflammatory Syndrome (IRIS)**  
Robert W. Eisinger, PhD, Anthony S. Fauci, MD
  - 12/17/2018**  
**Myocardial Inflammation Associated with Rheumatoid Arthritis Disease**  
Robert W. Eisinger, PhD, Anthony S. Fauci, MD
- [View All Textbook Updates](#)

업데이트 정보

### Multimedia

- VIDEO A11-19: Procedure for Gynecologic Examination Smear.**  
14 mins, 33 secs
- VIDEO A11-19: Result after manual thrombectomy and thrombus extraction.**  
10 secs

연관된 Multimedia 자원



## Chapter 125: Infectious Arthritis

Lawrence C. Madoff

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책 내 검색 등의  
부가기능 제공

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### INTRODUCTION

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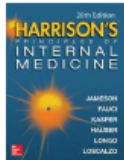
Although *Staphylococcus aureus*, *Neisseria gonorrhoeae*, and other bacteria are the most common causes of infectious arthritis, various mycobacteria, spirochetes, fungi, and viruses also infect joints (**Table 125-1**). Since acute bacterial infection can destroy articular cartilage rapidly, all inflamed joints must be evaluated without delay to exclude noninfectious processes and determine appropriate antimicrobial therapy and drainage procedures. For more detailed information on infectious arthritis caused by specific organisms, the reader is referred to the chapters on those organisms.

원문내용

**TABLE 125-1**

Differential Diagnosis of Arthritis Syndromes





## Chapter 125: Infectious Arthritis

Lawrence C. Madoff

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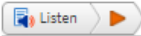
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### INTRODUCTION



Although *Staphylococcus aureus*, *Neisseria gonorrhoeae*, and other bacteria are the most common causes of infectious arthritis, various mycobacteria, spirochetes, fungi, and viruses also infect joints (Table 125-1). Since acute bacterial infection can destroy articular cartilage rapidly, all inflamed joints must be evaluated without delay to exclude noninfectious processes and determine appropriate antimicrobial therapy and drainage procedures. For more detailed information on infectious arthritis caused by specific organisms, the reader is referred to the chapters on those organisms.

TABLE 125-1  
Differential Diagnosis of Arthritis Syndromes

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## Chapter 125: Infectious Arthritis

Lawrence C. Madoff

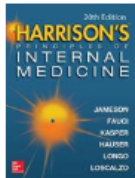
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Although *Staphylococcus aureus*, *Neisseria gonorrhoeae*, and other bacteria are the most common of infectious arthritis, various mycobacteria, spirochetes, fungi, and viruses also infect joints (Table 125-1). Since acute bacterial infection can destroy articular cartilage rapidly, all inflamed joints must be evaluated without delay to exclude noninfectious processes and determine appropriate antimicrobial therapy. Drainage procedures. For more detailed information on infectious arthritis caused by specific organisms, the reader is referred to the chapters on those organisms.

**TABLE 125-1**  
Differential Diagnosis of Arthritis Syndromes


목차 : “Section” 클릭 시 왼쪽에 각 section 리스트가 나타나고, 클릭하여 바로 이동할 수 있음



## Chapter 125: Infectious Arthritis

Lawrence C. Madoff

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### INTRODUCTION



톱니모양 아이콘을 클릭하면 읽어주는 속도, 하이라이트 표기 여부, 컬러 등 설정 가능

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텍스트를 음성으로  
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Although *Staphylococcus aureus*, *Neisseria gonorrhoeae*, and other bacteria are the most common causes of infectious arthritis, various mycobacteria, spirochetes, fungi, and viruses also infect joints (Table 125-1). Since acute bacterial infection can destroy articular cartilage rapidly, all inflamed joints must be evaluated without delay to exclude noninfectious processes and determine appropriate antimicrobial therapy and drainage procedures. For more detailed information on infectious arthritis caused by specific organisms, the reader is referred to the chapters on those organisms.

TABLE 125-1

Differential Diagnosis of Arthritis Syndromes

Quick Reference

Quick Medical Diagnosis & Treatment

Quick Reference - QMDT

: 진단과 치료에 대한 실용적이고 전문적인 정보를 질병별로 바로 제공

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Quick Medical Diagnosis & Treatment 2018

Maxine A. Papadakis, Stephen J. McPhee, Jennifer Bernstein

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A B C D E F G H I J K L M N O P Q R

- New!** Abdominal Aortic Aneurysm
- New!** Abortion, Recurrent
- New!** Abortion, Spontaneous
- New!** *Acanthamoeba* Infections
- New!** Accelerated Idioventricular Rhythm
- New!** Acetaminophen Overdose
- New!** Achalasia
- New!** Acidosis, Lactic
- New!** Acidosis, Metabolic, Decreased or Normal Anion Gap
- New!** Acidosis, Metabolic, Increased Anion Gap
- New!** Acidosis, Respiratory
- New!** Acids, Corrosive

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- Key Features
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Abdominal Aortic Aneurysm ☆

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Key Features

Essentials of Diagnosis

- Most aortic aneurysms are asymptomatic until rupture, which is catastrophic
- Aneurysms measuring 5 cm are palpable in 80% of patients
- Back or abdominal pain with aneurysmal tenderness may precede rupture
- Hypotension
- Excruciating abdominal pain that radiates to the back

General Considerations

- The aorta of a healthy young man measures approximately 2 cm
- An aneurysm is considered present when the aortic diameter exceeds 3 cm
- Aneurysms rarely cause rupture until diameter exceeds 5 cm
- 90% of abdominal atherosclerotic aneurysms originate below the renal arteries
- Aortic bifurcation is usually involved
- Common iliac arteries are often involved

Demographics

- Found in 2% of men over age 55
- Male to female ratio is 4:1

+ Clinical Findings

+ Diagnosis

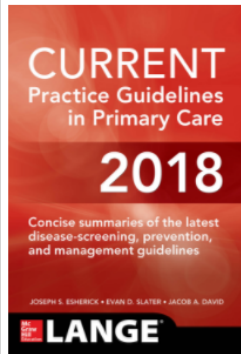
Quick Reference

CURRENT Practice Guidelines in Primary Care

Quick Reference - Guidelines

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CURRENT Practice Guidelines in Primary Care 2018 ☆

Joseph S. Esherrick, Evan D. Slater, Jacob A. David

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- ALCOHOL ABUSE AND DEPENDENCE
- ANEMIA
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Chapter 1: Disease Screening ☆

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ABDOMINAL AORTIC ANEURYSM

Population

-Men age 65-75 y who have ever smoked.

Recommendations

▶ USPSTF 2014, ACC/AHA 2006, Canadian Society for Vascular Surgery 2006

-Screen once, with ultrasonography.

-In men in this age group who have never smoked, no recommendation for or against screening.

Sources

-Ann Intern Med. 2014;161(4):281-90

-J Vasc Surg. 2007;45:1268-1276

Population

-Men/women at high risk.

Recommendations

▶ Canadian Society for Vascular Surgery 2008

-All men age 65-75 y be screened for AAA.

-Individual selective screening for those at high risk for AAA:

- a. Women older than 65 y at high risk secondary to smoking, cerebrovascular disease, and family history.
- b. Men younger than 65 y with positive family history.

# Quick Reference

## DDx - 1,000종 이상의 감별진단 Database

### Quick Reference - DDX

: 특정 질병에 대한 증상 및 진단에 대한 정보를 제공

### Diagnosaurus



증상/질병/기관계  
별로 분류

#### All Differential Diagnoses

By Symptom

By Disease

By Organ System

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Diagnosaurus for mobile

### All Differential Diagnoses

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A B C D E F G H I J K L M N O

- Abdominal aortic aneurysm
- Abdominal pain
- Abdominal pain and fever
- Abdominal pain and hematuria
- Abdominal pain and rash
- Abdominal pain and weight loss
- Abdominal pain in women
- Abdominal pain, generalized
- Abdominal pain, left lower quadrant
- Abdominal pain, left upper quadrant
- Abdominal pain, right lower quadrant

#### All Differential Diagnoses

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#### Abdominal pain and fever

DDx

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- Pancreatitis
- Peritonitis
- Urinary tract infection
- Appendicitis
- Diverticulitis
- Viral hepatitis
- Liver or abdominal abscess
- Pelvic inflammatory disease
- Ruptured ectopic pregnancy
- Tubo-ovarian abscess
- Inflammatory bowel disease
- Cholecystitis or Cholangitis
- Prostatitis
- Pneumonia

See related DDx




Quick Reference

Guide to Diagnostic Tests

Quick Reference – Diagnostic Tests

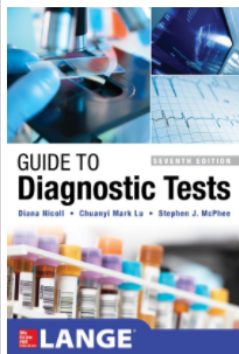
: 일반적으로 사용되는 진단검사와 일반 질병상태의 진단적 접근 정보

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Guide to Diagnostic Tests

Diana Nicoll, Chuanyi Mark Lu, Stephen J. McPhee

Search Textbook

Decision Making POC Tests/Microscopy Lab Tests

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PERFORMANCE OF DIAGNOSTIC TESTS

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Chapter 1: Decision Making

C. Diana Nicoll; Chuanyi Mark Lu

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— INTRODUCTION

The clinician's main task is to make reasoned decisions about patient care based on available clinical information and estimated clinical outcomes. Although data elicited from the history and physical examination may be sufficient for making a diagnosis or for guiding therapy, more information is often required. Today's clinicians rely increasingly on diagnostic tests and face challenges in selecting which tests to order and in interpreting test results. This chapter aims to help clinicians understand the utility as well as the limitations of diagnostic testing in clinical diagnosis and management.

— BENEFITS, COSTS & RISKS

When used appropriately, diagnostic tests can be of great assistance to the clinician. Tests can be used for **screening**, ie, to identify risk factors for disease and to detect occult disease in asymptomatic persons. Identification of risk factors may allow early intervention to prevent disease occurrence, and early detection of occult disease may reduce disease morbidity and mortality through early treatment. Blood pressure measurement is recommended for preventive care of asymptomatic low risk adults. Screening for breast, cervix, colon, and lung cancer is also recommended, whereas screening for prostate cancer remains controversial. Screening without demonstrated benefits should be avoided. Optimal screening tests should meet the criteria listed in Table 1-1. Some screening test results (eg, rapid HIV Ab tests) require confirmatory testing.



Table 1-1.

Criteria for use of screening procedures.

View Large | Favorite Table | Download (.pdf)

Tests can be used for **diagnosis**, ie, to help establish or exclude the presence of disease in symptomatic persons. Some tests assist in early diagnosis after onset of symptoms and signs; others assist in developing a differential

# Quick Reference

## Clinical Prep

### Quick Reference – Clinical Prep

: 650개 이상의 핵심 주제로부터 50,000여 개의 질문을 통해 신뢰할 수 있고 유용한 임상 정보를 제공

About Clinical Prep

How to Use This Feature

Contributing Authors

Prepare for wards with access to thousands of clinical questions and answers.

Ask a Clinical Question...

e.g. "treatments for lung cancer" "manifestations of Zika virus infection" "asthma



Bridge the gap between course work and actual patient care experiences



Ask a Clinical Question...



### Angina pectoris

View  Categories  List

#### Epidemiology

+ How does gender impact the presentation of angina pectoris (AP)? 

+ What are risk factors for Ludwig's angina?

+ How does age impact the risk for variant angina?

View More ▾

#### Description

+ What is the character of pain of angina pectoris?

+ What is Ludwig's angina? 

+ What is variant angina (Prinzmetal's angina)?

View More ▾

#### Etiology

+ What bacterial microorganisms are associated with Ludwig's angina?

+ What bacterial microorganisms are associated with Ludwig's angina?

+ What is the pathogenesis of Ludwig's angina?

Ask a Clinical Question...

Ask a Clinical Question...

Eligible for CME | [Learn More](#) | [My CME](#)

Last reviewed: 05/08/2015

### What is the mortality rate of patients with Ludwig's an

 Email

With the combined use of systemic antibiotics and aggressive surgical intervention, the mortality rate has declined dramatically from over 50% in the pre-antibiotic era to 0% to 4% currently.<sup>8</sup>

Answer Source »

JOURNAL  
ARTICLES

View the current best evidence for Ludwig's Angina and Lemierre's Disease from M

Quick  
Reference

2 Minute Medicine

Quick Reference – 2 Minute  
Medicine

: 영향력있는 최신의 의학문헌을  
토픽별/최신별로 빠르게 확인할 수  
있도록 요약정보 제공

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Topics ▾

2/16/2018 2:27:49 PM  
**No benefit of sodium bicarbonate or a**  
Ilyas Daghlas, Dayton McMillan

2/16/2018 2:27:49 PM  
**Nusinersen improves motor function in**  
Shani Chibber, Dayton McMillan

2/16/2018 2:27:49 PM  
**Influenza vaccine not associated with i**  
Kate Anderson, Leah H. Carr, MD

2 Minute Medicine® > Cardiology >



Editors and Contributors

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Adverse outcomes are similar for patients undergoing percutaneous coronary intervention receiving heparin or bivalirudin

by Dayton McMillan

Originally published by 2 Minute Medicine® (view original article). Reused on AccessMedicine with permission.

1. Patients undergoing percutaneous coronary intervention (PCI) mainly via radial approach receiving either bivalirudin or heparin, in addition to P2Y<sub>12</sub> inhibitors, following myocardial infarction experienced similar rates of death from any cause, myocardial infarction, or major bleeding.
2. Patients who had ST-segment elevation myocardial infarction (STEMI) or non-STEMI myocardial infarctions experienced similar rates of major adverse events regardless of their treatment with bivalirudin or heparin during PCI.

Evidence Rating: 1 (Excellent)

Study Rundown:

Following myocardial infarction, anticoagulation and antiplatelet agents are used during PCI to improve clinical outcomes by reducing thrombotic complications. Advantages of anticoagulation and antiplatelet agents must be weighted with their adverse effects of bleeding complications. In this study, patients post myocardial infarction undergoing radial-artery PCI and receiving a potent P2Y<sub>12</sub> inhibitor were treated with the anticoagulants heparin or bivalirudin. The primary endpoints of the study were death from any cause, myocardial infarction, and major bleeding events. This multicenter, randomized trial included patients with both STEMI and non-STEMI myocardial infarction with an urgently planned PCI. Most patients had a radial-artery PCI approach, and all were treated with P2Y<sub>12</sub> inhibitors ticagrelor, prasugrel, or cangrelor. No significant differences in rates of primary endpoints were observed between patients treated with bivalirudin or heparin at either 30 or 180 days post-PCI. No difference in outcomes was observed between treatment groups for patients with either STEMI or non-STEMI myocardial infarctions. The size of the study is a significant strength,

Drugs

약물정보 제공 Database (복용, 적응증, 부작용, 가격 등)

약물의 기본적인 정보 및 상세정보까지 제공

Drug Monographs

All Drugs

Generics

Trade Names

Drug Classes

Patient Handouts

All Drugs

Search Drugs

0-9 A B C D E F G H I J K L M N O P

A&D Jr. [OTC]

A.E.R. Witch Hazel [OTC]

A-200 Lice Treatment Kit [OTC]

A-25 [OTC]

AA-Clozapine

Amivudine

Amivudine, and Zidovudine

Acetaminophen

Amphetamine

- Indications and Usage
- Contraindications
- Warning/Precautions
- Dosing
- Administration
- Patient Education handouts
- Interactions

Clopidogrel

Basics	Pregnancy & Lactation	Storage & Compatibility	References
Clinical Pharmacology	Adverse Reactions	Monitoring	
Indications & Usage	Interactions	Patient Education	
Contraindications	Dosing	Additional Information	
Warnings/Precautions	Administration	Pricing	

Images	Description
 <p>Formulation Details</p>	Plavix [AIDAREX PHARMACEUTICALS] 75 mg
View all	

Name

Clopidogrel

Pronunciation

(kloh PID oh grel)

Brand Names: US

- Plavix

Brand Names: Canada

- Abbott-Clopidogrel
- Accel-Clopidogrel
- ACT Clopidogrel
- Apo-Clopidogrel

# Multimedia

## Video 및 Animation 형태의 교육자료 제공

임상적으로 접근이 편리하도록 분류체계를 변경하고, 하위 카테고리 분류를 통해 접근성을 높임.

### Multimedia

Diagnostic and Imaging Studies

Cardiovascular

Fetal ultrasonography

Gastrointestinal

Pulmonary

Rheumatology

Exploring Essential Radiology

Harrison's Pathophysiology Animations

Harrison's Podclass

Human Anatomy Modules

Lectures

Patient Interview

Patient Safety Modules

Pharmacology

Physical Exam

Procedural Videos

Tools

### Diagnostic and Imaging Studies



Cardiovascular



Pulmonary



Fetal



### Abdominal Paracentesis

12 mins, 56 secs

Author(s): Maria A. Yialamas, Anna Rutherford, and Lindsay King

Jump to:

Abdominal Paracentesis

Indications

Contraindications

Equipment

Preparation

Procedure

Complications

Summary

mcg\_3024\_abdominal\_paracentesis\_no\_music



# Multimedia

# 신규항목

## Multimedia

- Diagnostic and Imaging Studies ▶
- Exploring Essential Radiology ▶
- Harrison's Pathophysiology Animations**
- Harrison's Podclass
- Human Anatomy Modules
- Lectures ▶
- Patient Interview
- Patient Safety Modules ▶
- Pharmacology ▶
- Physical Exam ▶
- Procedural Videos ▶

Tools ▼

 Grid  List

### Harrison's Pathophysiology Animations



**New!** Chronic Aortic Regurgitation  
**Author(s):** Scott Stern, MD  
 Professor of Medicine, University of Chicago School of Medicine  
 3 mins, 43 secs



- Exploring Essential Radiology ▶
- Harrison's Pathophysiology Animations
- Harrison's Podclass**
- Human Anatomy Modules
- Lectures ▶
- Patient Interview
- Patient Safety Modules ▶
- Pharmacology ▶
- Physical Exam ▶
- Procedural Videos ▶

### Harrison's Podclass



Illuminating and engaging discussions on key principles of internal medicine, around board-style case vignettes from the acclaimed *Harrison's Self Assessment and Board Review*.

**Authors:**  
 Charles Wiener, MD, Professor of Medicine  
 Johns Hopkins University School of Medicine, Baltimore, MD  
  
 Cathy Handy, MD, Fellow, Oncology  
 Johns Hopkins University School of Medicine, Baltimore, MD



**Episode 01: A 65-Year-Old with Low Back Pain**  
**Author(s):** Charles Wiener, MD,



**Episode 02: A 72-Year-Old with Fever and Dyspnea**  
**Author(s):** Charles Wiener, MD,



**Episode 03: A 23-Year-Old with Undetectable TSH**  
**Author(s):** Charles Wiener, MD,



# Cases

## 다양한 실제 사례를 통한 학습

### Cases

#### Case Files®

Basic Science ▾

[Anatomy 3e](#)

Biochemistry 3e

Microbiology 3e

Neuroscience 2e

Pathology 2e

Pharmacology 3e

Physiology 2e

Clinical Medicine ▶

[Family Practice Board Review](#)

[Fluid/Electrolyte and Acid-Base Cases](#)

[Microbiology Cases](#)

[Pathophysiology Cases](#)

[Clinical Neuroanatomy Cases](#)

[Resident Readiness®: Internal Medicine](#)

#### About our Cases

Learn more about the resources from which AccessMedicine Cases are compiled



### Case Files: Anatomy 3e

Get Alerts ⓘ

Author(s): Eugene C. Toy; Lawrence M. Ross; Han Zhang; Cristo Papasakelariou

View by: [Case Topic](#) [Case Number](#)

Brachial Plexus Injury

Deep Venous Thrombosis

Cirrhosis

Inguinal Hernia

Coronary Artery Disease

Sinusitis

#### Key

■ Unopened Case

■ Viewed Case

Case Files: Biochemistry 3e >



View Contents

< Case 45 / 6

Notice

Dedication

Contributors

Preface

Acknowledgments

Introduction

Applying the Basic Sciences to Clinical Medicine

Copyright

### Hypothyroidism

Authors: Eugene C. Toy; William E. Seifert, Jr.; Henry W. Strobel; Konrad P. Harms

[Case](#) [Approach](#) [Biochemistry Pearls](#) [References](#) [Comprehension Questions](#)

A 65-year-old woman presents to the clinic feeling tired and fatigued all the time. She has also noticed an increasing problem with constipation despite adequate fiber intake. She is frequently cold when others are hot. Her skin has become dry, and she has noticed a swelling sensation in her neck area. On examination she is afebrile with a pulse of 60 beats/minute. She is in no acute distress and appears in good health. She has an enlarged, nontender thyroid noted on her neck. Her reflexes are diminished, and her skin is dry to the touch.

#### Questions

What is the most likely diagnosis?

What laboratory test would you need to confirm the diagnosis?

What is the treatment of choice?

To Save Your Answers Please Sign In or Create a Free MyAccess Profile

Show Answers

Next: Approach

# Study Tools

# Review Questions

## Study Tools

By Resource

Review Questions

Anatomy

Biochemistry

Epidemiology & Biostatistics

Family Medicine

Histology & Cell Biology

Internal Medicine

Microbiology

Neuroanatomy

Obstetrics

Occupational and Environmental  
Medicine

Pathology

## Review Questions

Generate multiple-choice quizzes from the



**Basic & Clinical Biostatistics, 4e**

65 Questions



**Clinical Neuroanatomy, 28e**

100 Questions



**CURRENT Diagnosis & Treatment: Occupational & Environmental Medicine, 5e**

377 Questions



**CURRENT Diagnosis & Treatment: Nephrology & Hypertension, 2e**

314 Questions



**CURRENT Diagnosis & Treatment: Surgery, 14e**

216 Questions

## Study Tools – Review Questions

: Q&A Test를 제공하여 내용이 제대로 학습되었는지 확인하고, 강점과 약점을 파악할 수 있음

# Study Tools

# Review Questions



## Review of Medical Microbiology and Immunology, 14e

Warren Levinson  
Preface | Copyright | Notice

Go to Book

“Go to Book” 버튼을 통해 해당 교재로 쉽게 돌아갈 수 있음. (해당되는 경우)

NOTE: A quiz may not include more than 250 questions. Quizzes cannot be saved mid-progress.

### Create Random Quiz

of 1087 available

Start Quiz

### Create Custom Quiz

Generate a custom quiz from the topics below.

of 114 available Part I: Basic Bacteriology

of 188 available Part II: Clinical Bacteriology

of 82 available Part III: Basic Virology

of 143 available Part IV: Clinical Virology

of 50 available Part V: Mycology

of 106 available Part VI: Parasitology

of 201 available Part VII: Immunology

of 4 available Part VIII: Ectoparasites

of 58 available Extended Matching Questions

of 61 available Clinical Case Questions

of 40 available USMLE (National Board) Practice Examination, Block One

of 40 available USMLE (National Board) Practice Examination, Block Two

Start Quiz

사용자는 단일 책 내의 모든 Q&A에서 랜덤 퀴즈를 바로 생성 가능

집중 학습 원하는 사용자는 특정 주제 (있는 경우)에서 질문을 선택하여 퀴즈 생성 가능

# Study Tools

# Review Questions

## Question 4 of 10

A sputum culture will be rejected (i.e., it will not be stained or cultured) by the clinical laboratory if:

- A it is streaked with blood.
- B it contains IgA antibody.
- C it contains many more epithelial cells than neutrophils.
- D it contains pus.
- E it contains sulfur granules.

Submit & View Answer

Submit & View Next Question

End quiz and return to [Review of Medical Microbiology and Immunology, 14e Review Questions](#)

문제풀이 후 결과 및 해설 제공

[Review of Medical Microbiology and Immunology, 14e>](#)

## Quiz Results

**Your Score: 20 %**


You answered 2 of 10 questions correctly.

### Question 1: Incorrect

Crosses the placenta

- A IgM
- B IgG
- C IgA
- D IgE

The correct answer is B. You answered C.

 91% of users answered correctly.

### Question 2: Incorrect

Each of the following statements concerning hepatitis C virus (HCV) and hepatitis D virus (HDV) is correct EXCEPT:

- A HCV is an RNA virus that causes post-transfusion hepatitis.
- B HDV is a defective virus that can replicate only in a cell that is also infected with hepatitis B virus.
- C HDV is transmitted primarily by the fecal-oral route.
- D People infected with HCV commonly become chronic carriers of HCV and are predisposed to hepatocellular carcinoma.

The correct answer is C. You answered D.

# Study Tools Clerkship Topics

## Clerkship Topics

This collection of study materials covers every major topic of the internal medical clerkship, featuring select chapters from Harrison's Principles of Internal Medicine, 19e, and other resources.

Open All | Close All

▶ Cardiology

▶ Pulmonology

▼ Nephrology + Urology

- [Congenital/Genetic Kidney Disease](#)
- Ward Skills in Nephrology
- Acid-Base Disturbances and Electrolyte Abnormalities
- Acute Kidney Injury
- Chronic Kidney Disease
- Glomerular Disease
- Nephrolithiasis and Urinary Tract Obstruction
- Benign Prostatic Disease
- Renal Tubulointerstitial and Vascular Disorders

▶ Gastroenterology

▶ Hematology/Oncology

▶ Infectious Disease

▶ Endocrinology

▶ Rheumatology

▶ Essential of Key Patient Presentations

▶ Skills for the Wards

▶ Neurology

▶ Psychiatry

### Study Tools – Clerkship Topics

: 자가 학습을 위한 토픽 기반의 학습 모듈을 제공.  
선택한 토픽에 맞는 학습 과정을 제공하여 이용자가 더 빠르고 효율적으로 원하는 내용을 학습할 수 있도록 도와줌.

Clerkship Topics > Nephrology + Urology

### Chronic Kidney Disease ☆

AUTHORS: ESL

LEARNING OBJECTIVES: Diagnosis  
Management  
Complications



CHAPTER

AccessMedicine > Harrison's Principles of Internal Medicine, 19e > [Chronic Kidney Disease](#)



CASE FILE

AccessMedicine > Resident Readiness®: Internal Medicine > Chronic Kidney Disease > [A 65-Year-Old Man with a GFR of 55](#)



CASE FILE

AccessMedicine > Family Practice Examination & Board Review, Third Edition > CASE 5-2 > [Case](#)



EXTERNAL ACTIVITY

Case: CKD

Note

# Study Tools

**Flash Card** : 학습한 내용을 복습해볼 수 있도록 Flash card 형태의 퀴즈를 제공

## Study Tools

By Resource

Flashcards

Play Showdown!

### FLASHCARDS



### ACCESS Medicine FLASHCARDS

Welcome Sunmi Lee 





# Study Tools

**Flash Card** : 학습한 내용을 복습해볼 수 있도록 Flash card 형태의 퀴즈를 제공

The screenshot shows the 'DeGowin's Diagnostic Examination Flashcards' interface. On the left is a book cover for 'DeGowin's Diagnostic Examination Flashcards' with 250 cards. The main area displays a grid of category cards: 'Random Card', 'Nonregional Systems and Diseases', 'The Abdomen, Perineum, Anus, and Rectosigmoid', 'The Chest: Chest Wall, Pulmonary, and Cardiovascular Systems; The Breasts', 'The Female Genitalia and Reproductive System', 'The Male Genitalia and Reproductive System', and 'The Mental Status, Psychiatric, and Social Evaluations'. A detailed view of 'The Male Genitalia and Reproductive System' is shown, featuring a list of sub-topics on the left and a card titled 'CARD 1' on the right. The card text reads: 'You are evaluating a 38-year-old man for erectile dysfunction. For the last few months he has not had early morning spontaneous erections. QUESTIONS: 1. How does the absence of morning erections influence your differential diagnosis? 2. Name the pathophysiologic mechanisms that can produce erectile dysfunction, and give examples of each.' Navigation buttons like 'Flip', 'Next', and 'Select Card' are visible at the bottom.

선택한 플래시카드에서 원하는 주제 데크를 선택 후 해당 카테고리 내에서 학습

- 현재 학습 위치  
- 다른 카테고리로 빠른 이동

# Patient ED

환자에게 질병에 대해 이해시킬 수 있도록 의학 전 분야의 질병/증상에 대한 정보를 Handbook 형식으로 제공 (한국어 제공)

## Patient Education Handouts

Acute Advisor

Adult Advisor

Medicines Advisor

Pediatric Advisor

Sign in to add a logo and/or personal message to your Patient Education Handouts

### Adult Advisor

Language: English

- Chinese (Simplified)
- Chinese (Traditional)
- English**
- French
- Korean
- Portuguese (Brazilian)
- Russian
- Spanish
- Tagalog
- Vietnamese

0-9 A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

- Abdominal Pain
- Abdominal Pain (Right Upper Quadrant)
- Abdominal Pain (Left Upper Quadrant)
- Ablation Treatment of Atrial Fibrillation Problems
- Abnormal Eye Movements (Nystagmus)
- Abuse and Domestic Violence
- Abuse During Pregnancy
- Acanthosis Nigricans Skin Changes
- ACE Inhibitors
- Achilles Tendon Injury
- Achilles Tendon Injury Exercises
- Acne
- Acne: Brief Version

### 알츠하이머

(Alzheimer's Disease)

#### 알츠하이머란 무엇입니까?

AD, 알츠하이머는 시간이 지날수록 증세가 심해지는 치매입니다. 치매란 생각하고 기억하고 논리적으로 사고하고 계획을 세우는 능력이 점점 떨어지는 병입니다. 치매는 뇌세포에 영향을 미쳐 기억과 사고력을 완전히 파괴합니다. 시간이 지남에 따라 치매로 인해 말하고 기억하고 감정을 조절하고 결정을 내리는 능력이 상실될 수 있습니다. 알츠하이머는 치료가 불가능합니다. 죽을 때까지 뇌 기능이 계속 약화됩니다. 기억에 문제가 생기는 순간부터 사망에 이르기까지의 시간은 5-15년입니다.

#### 원인이 무엇입니까?

AD의 정확한 원인은 알려져 있지 않습니다. 유전자나 환경, 생활습관 등 다양한 원인이 있을 수 있습니다. AD가 발생하면 뇌에 변화가 일어납니다. 비정상적인 단백질 조각과 덩어리, 죽은 신경 세포가 뇌에 형성됩니다. 시간이 지남에 따라 이러한 변화가 점점 커지고 늘어나며, 신경 세포는 작용을 멈추고 죽게 됩니다. 또한, 뇌의 일부가 수축되기 시작합니다. 이러한 변화가 AD의 원인인지 또는 AD의 결과인지는 분명하게 밝혀지지 않았습니다.

나이는 AD의 가장 중요한 위험 요소입니다. 뇌의 변화는 30-65세에 시작될 수 있습니다. 그러나 대부분 65세가 넘어야 병의 징후가 나타나기 시작합니다.

지금까지 일부 가족에서 알츠하이머의 위험을 높이는 유전자가 발견되었습니다. 이러한 유전자를 갖고 있는 사람은 30대부터 알츠하이머의 징후가 나타날 수 있습니다. 이러한 유형의 AD는 매우 드물입니다. 훨씬 나이가 든 후에 AD의 위험을 높이는 유전자도 있습니다.

#### 어떤 증상을 보입니까?

알츠하이머의 증상은 사람마다 다릅니다. 또한 병이 악화됨에 따라 증상도 달라집니다.

맨 처음 나타나는 증상은健忘증입니다. 거의 모든 사람이 나이가 들면 기억에 문제가 생기기 시작합니다. 그러나 AD 초기 단계인 경우 같은 연령의 다른 사람에 비해 기억 문제가 확연하게 나타납니다. 최근에 있었던 일이나 활동, 친한 사람, 물건의 이름이 잘 기억나지 않게 됩니다. 원가에 주의를 기울이는 시간도 점점 짧아집니다. 집중도 어려워집니다. 그러나 알츠하이머 초기 단계에는健忘이 일상생활이나 일에 큰 영향을 미치지 않습니다. 초기 단계의 기억 문제는 약한 인지장애로 불리는 경우가 많습니다.

시간이 지나면서 기억 문제가 심해집니다. 읽고, 쓰고, 이해하는 능력에 문제가 생깁니다. 물건을 사고 돈을 어떻게 내야 하는지도 모르게 됩니다. 물건을 이상한 곳에 두고 잃어버리는 경우도 늘어날 수 있습니다. 운전할 때 또는 심지어는 집에 있으면서도 여기가 어디인지 모를 수 있습니다.

병이 악화됨에 따라 최근 일뿐만 아니라 과거에 있었던 일도 기억나지 않을 수 있습니다. 그러나 일반적으로 최근 기억이 장기 기억보다 영향을 많이 받습니다.

# Hospital Corner

## 임상을 위한 선택적인 자원을 제공하는 컬렉션 항목


ACCESS  Medicine

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McGraw-Hill  Medical

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### Hospital Corner

Books

Board Review

Cases

Quick Reference

Selected content for practicing providers



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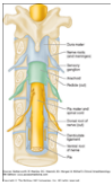
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