

CLINICAL **KEY**TM

By:
Mohammad Ali Boroumand

1395

برخی سوالات متداول:

- چگونه می توان به جدیدترین اطلاعات پزشکی مبتنی بر شواهد دست پیدا کرد؟
- آیا دانشگاه به ژورنالهای **Clinics of North America** دسترسی دارد؟
- چه نوع اطلاعاتی در **CK** وجود دارد؟
- آیا متن کامل مقالات در این پایگاه ارائه می شود؟
- لیست مجلات **CK** چگونه می توان مشاهده کرد؟
- کتب رفرنس موجود در پایگاه کدامند؟
- آیا می توان تصاویر و ویدئوهای پزشکی را بازیابی و ذخیره نمود؟
- آیا می توان از **CK** در بیرون دانشگاه هم استفاده کرد؟
- آیا می شود این پایگاه را بر روی تبلت و تلفن هوشمند استفاده کرد؟

Clinical information
at the *speed of care*



Elsevier ClinicalKey™
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CLINICAL KEY
beta

Smarter search. Faster answers.

Clinical Medicine:

- **Right Time**
- **Right Place**
- **Right Information**

Information resources:

1. Primary resources

Scopus, ISI WOK , Medline

2. Secondary resources

EBMs: UpToDate, Clinical Key

Why ?

- Elsevier produce about 25% clinical information resources
- Clinical Key and UTD complete each other
- Clinical key is one of EBM resources:
 - Best research evidence
 - Clinical expertise
 - Patient preferences

Comprehensive and Trusted

More than 600 Journals, such as *Journal of the American College of Cardiology* and *The Lancet*

MEDLINE abstracts, retrieved each day from the National Library of Medicine (NLM)

Drug Monographs from Gold standard With 30 to 50 content updates each day

Thousands

Over 100

Gray's

Clinical review articles from *Clinics of North America* series
Campbell's Operative Orthopaedics, and more

Surgical Topics (Vitals)

Practice Guidelines



What is ?

- It is a clinical search engine developed by **Elsevier Health**
- **Books:** over 1100 of Elsevier's medical and surgical reference books
- **Journals:** over 600 of Elsevier's medical and surgical journals
- **Procedures Consult:** Procedures Consult content in various specialties
- **First Consult:** over 850 Point-of-Care clinical monographs

What is

CLINICAL



- **Patient Education:** over 15000 patient education handouts
- **Clinical Trials:** all clinical trials from the ClinicalTrials.gov database
- **Practice Guidelines:** over 4500 practice guidelines
- **MEDLINE:** Fully indexed MEDLINE more than 20 million MEDLINE abstracts
- **Multimedia:** over 17000 medical and surgical videos and over 5 million images
- **Drug Monographs:** over 2900 clinical pharmacology drug monographs from Gold Standard

ClinicalKey

- Comprehensive
- Trusted
- Speed to Answer

Faster Speed to Answer

EMMeT

Elsevier Merged Medical Taxonomy

SMART CONTENT



CLINICAL **KEY**

Example: Orthopaedics

Parent term

- Disorder of bone

Display Name

Osteitis deformans

Synonyms

Paget's disease of bone
Paget's bone disease
Paget's disease

Codes

LCH90 – U003400
MeSH – D010001
SNOMED-CT – 2089002

Semantic Type

Disease or syndrome

Child terms

- Paget's disease of humerus
- Paget's disease of jaw
- Paget's disease of pelvis
- Paget's disease of calcaneum
- Paget's disease of carpal bone
- More...

Semantic Relationships

clinical findings

Bone pain, Headache, Hearing loss, Skeletal deformity...

diagnostic procedures

Alkaline phosphatase test, Radiographic imaging of bone...

medications

Fosamax, Miacalcin, Alendronate...

risk factors

Advanced age, Genetic inheritance...

specialty

Orthopedics, Internal medicine, Rheumatology...

complications

Deafness, Cardiac failure, Spinal stenosis...

has finding site

Bone, Osteoclasts, Cranial structure...

Access to ClinicalKey:

- **1- Registration and Login**
- **2- Using VPN Accounts**

ClinicalKey:

1- for clinicians

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Lead with answers.

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Or Browse: Books Journals

2- for Nursing

ClinicalKey®
for Nursing

All Types ▾

Search nursing content for diseases, drugs, etc...



Or Browse: Books Journals More ▾ Tools ▾

Leading Topics

COVID-19
Working Hours and Heart Disease
Influenza

Featured Content

- Adult Dehydration
- Disasters, Terrorism, and Children
- Influenza Prevention

Nurse Educator Topics

- Ovarian Cancer
- Pain Management and Documentation
- Medication Safety and Reconciliation

CK Advanced Search Option

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Suggestions	Related	Authors
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Rubella	Bed Rest	Measles Initiative
measles virus vaccine	Fluid intake encouragement	MeaslesNetIndia collaborators
measles/mumps/rubella virus vaccine	Rubeola Virus Antibody Assay	Measley, R
Subacute Sclerosing Panencephalitis	Isolation of infected patient	Measley, R E
rubella virus vaccine	Oral form ampicillin	Measley, Robert
Rubella vaccination	Parenteral form ampicillin	MEASLEY, ROBERT E., MD
Measles-mumps-rubella vaccination	Ampicillin sodium	Measley, Robert, MD
Epidemic parotitis,Rubeola,Rubella	Procipen	
Other measles	AU-1	

Auto-suggest

- Do not put punctuation marks, parentheses, brackets...
- No need to use Boolean AND, OR, NOT
- No need any truncation

انواع منابع موجود در Clinical Key

- Journals
- Books
- First Consult ←
- Guidelines ←
- MEDLINE
- Drug Monographs
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- Patient Education ←
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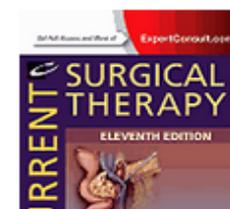
[Esthetic Dentistry: A Clinical Approach to Techniques and Materials](#)

[Implant Dentistry](#)

Featured Books



[Abeloff's Clinical Oncology](#)



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Systematic Review	Advanced Basic Science	181
Meta Analysis	Allergy and Immunology	212
Randomized Controlled Trial	Anesthesia & Perioperative Medicine	93
Narrative Review	Anesthesiology	7
Case Report	Cardiothoracic Surgery	71
Case Series	Cardiovascular	9121
Case Study	Cardiovascular Disease	84
Case Report	Critical Care	51
Case Report	Critical Care Medicine	15
Case Report	Dentistry	109



Diabetes Mellitus

Disease Overview

[View Full Topic](#)

Ferri's Clinical Advisor 2016 · Ferri, Fred F., M.D., M.P.H.

Definition

• Diabetes mellitus (DM) refers to a syndrome of hyperglycemia resulting from many different causes (see “Etiology”). It is broadly classified into type 1 and type 2 DM. The terms “insulin-dependent” and “non-insulin-dependent” diabetes are obsolete because when a person with type 2 diabetes needs insulin, he or she remains labeled as type 2 and is not reclassified as type 1. [Table D1-11](#) provides a general comparison of the two types of DM.

[Continue Reading](#)

FIRST CONSULT

Inpatient management of patients with diabetes

Cecilia C. Low Wang, MD, Associate Professor of Medicine, University of Colorado Anschutz Medical Campus School of Medicine, Department of Medicine, Division of Endocrinology, Metabolism and Diabetes, Aurora, Colorado; and University of Colorado Hospital, Aurora, Colorado; Boris Draznin, MD, PhD, Professor of Medicine, University of Colorado Anschutz Medical Campus School of Medicine, Department of Medicine, Division of Endocrinology, Metabolism and Diabetes, Aurora, Colorado; and University of Colorado Hospital, Aurora, Colorado. Published September 11, 2013. Last updated September 10, 2013.

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Diabetic retinopathy. A Microaneurysms . Usually the earliest clinical abnormality, these tiny aneurysms arise mainly from the venous end of capillaries and appear as discrete, circular, dark red dots near to, but apparently separate from, the retinal vessels and no wider than a vessel at the optic disc margin (arrows). B Haemorrhages . Larger than a microaneurysm, with indistinct margins and at least as wide as a vessel at the optic disc margin, these occur in deeper layers of the retina (arrows). They result either from microaneurysms that have burst or from leaky capillaries. Superficial flame-shaped haemorrhages in the nerve fibre layer may also occur, particularly if the patient is hypertensive. C Hard exudates . These irregularly shaped lesions are formed from leaking of cholesterol, often through microaneurysms (black arrows). They can be associated with retinal oedema; if this affects the centre of the macula, it can cause clinically significant macular oedema (CSMO, white arrows), which is sight-threatening. D Cotton wool spots . These white, feathery, fluffy lesions indicate capillary infarcts within the nerve fibre layer (arrows). They are most often seen in rapidly advancing retinopathy or in association with uncontrolled hypertension. E Venous beading . In extensive retinal ischaemia, walls of veins develop saucular bulges, looking like a string of sausages (black arrow). Intra-retinal microvascular anomalies (IRMA) are spidery vessels, often with sharp corners that indicate dilatations of pre-existing capillaries (white arrow). F and G Neovascularisation . New vessel formation in response to widespread retinal ischaemia may arise from the venous circulation either on the optic disc (NVD, arrows in F) or elsewhere in the retina (NVE, arrows in G). Initially, fine tufts of delicate vessels form arcades on the surface of the retina; later, they may extend forwards on to the posterior surface of the vitreous. Leaking of serous products from new vessels stimulates a connective tissue reaction, with gliosis and fibrosis, that first appears as a white, cloudy haze among the network of new vessels and later extends to obliterate the area with a dense white sheet. H Vitreous haemorrhage . New vessels are fragile and liable to rupture during vitreous movement, causing a pre-retinal ("subhyaloid") or vitreous haemorrhage (arrows), which may lead to sudden visual loss.

Diabetes mellitus
Pearson, E.R., Davidson's Principles and Practice of Medicine, 21, 797-836
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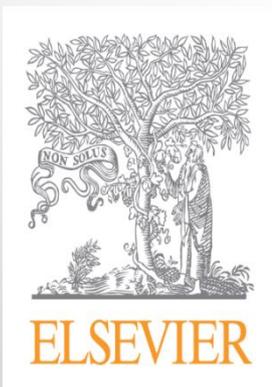
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- ✔ Searching complement **PubMed**
- ✔ Get full text articles and books (**CK**)
- ✔ Additional Information (medications, First Consult, etc.)
- ✔ Images and video presentations
- ✘ Search only in **ClinicalKey**
- ✘ Complex Searches

باتشکر

boroumand@lib.mui.ac.ir



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