

# Healing the Wounds, A Physician Looks at His Work

David MD Hilfiker

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# Healing The Wounds A Physician Looks At His Work

**Michael Rajnik**



## **Healing The Wounds A Physician Looks At His Work:**

Healing the Wounds David Hilfiker, 1987 In this remarkably candid account Dr David Hilfiker breaks the silence surrounding the everyday practice of medicine and tells what it really feels like to be a doctor **What Every Medical Writer Needs to Know** Robert B. Taylor, 2015-08-29 This book presents must know facts generally not covered in How To books about medical writing Every medical writer whether a beginner or veteran needs answers to questions many might not even know to ask How does your personality type influence your writing behavior and what can you do to make writing easier for you What should you ask before agreeing to co author an article for publication or write a book chapter What are some of the current issues regarding copyright and plagiarism that authors may face What has research discovered about the quotations and references found in journal articles What do you need to know about open access journals and predatory publishers Dr Taylor tells some surprising truths about medical publishing including possible sources of peer review bias and some alarming influences on what ends up in print He also relates little known stories about renowned medical writers such as Sir William Osler William Carlos Williams and Elisabeth K bler Ross and the origins of some of medicine s classic publications **What Every Medical Writer Needs to Know** provides information vital for every health care professional who aspires to write for others to read academicians and practicing physicians nurses nurse practitioners and physician assistants and professional medical and scientific writers **Doctor-Patient Interaction** Walburga von Raffler-Engel, 1989-01-01 This volume covers many of the ways of speaking that create problems between doctor and patient The questions under consideration in the present book are the following How is the doctor patient interaction structured in a particular culture What takes place during the process What causes misunderstandings lack of cooperation and even total non compliance What is the outcome of the interaction and how does the patient benefit from it Finally and this is the ultimate purpose of this book How can the interaction be improved so that an optimum outcome is assured for the patient with maximum satisfaction to the physician **Facing Death: Images, Insights, and Interventions** Sandra L. Bertman, 2016-01-08 Facing Death is a unique handbook for educators healthcare professionals and counselors It uses materials from the visual arts excerpts from poetry fiction drama and examples from popular culture to sensitize the reader to important universal issues confronting the dying and those responsible for their care **Reclaiming the Body** Joel James Shuman, Brian Volck, 2006-02 A doctor and a theologian explore the relationship between Christian faith and medicine encouraging a more biblical view of health and health care by individuals and churches *Treating Compassion Fatigue* Charles R. Figley, 2013-05-13 In recent years much has occurred in the field of traumatology including the widening of the audience and the awareness of PTSD post traumatic stress disorder This book from celebrated traumatology pioneer Charles Figley further clarifies the concept of compassion fatigue through theory research and treatment The basic thesis of this book is the identification assessment and treatment of compassion fatigue and this is done over eleven chapters each from distinguished researchers in the field Rethinking

Health Psychology Michele Crossley, 2000-10-16 What are the main theories methods and applications relevant to the study of health and illness from a psychological perspective In what ways can contemporary health psychology be critically rethought What are the implications of this rethinking for the future of health psychology This introductory text presents a coherent overview of prevalent theories methods and applications within contemporary health psychology In particular it provides a critical analysis of mainstream health psychology by drawing on newer approaches such as discourse narrative postmodernism and material discursive analysis In this way the largely decontextualized individualist and cognitively orientated field of health psychology is brought up to pace with critical developments in other areas such as social psychology These theoretical ideas provide the basis of the book's main thesis that contemporary health psychology needs to be rethought After presenting an overview of the different theories and methods associated with mainstream and newer approaches within health psychology the application of these approaches is logically and critically pursued across a range of substantive areas These include risky health related behaviours such as eating alcohol and drug use exercise and sex health promotion related to these risky behaviours living and coping with chronic illnesses mental health and illness communicating and relating with health professionals and living with dying Finally this book locates the growing popularity of health psychology within the contemporary social and political context particularly in relation to recent changes in the way health care is organized and the commodification and commercialization of health and lifestyles Bodymind Energetics Mark D. Seem, Joan Kaplan, 1987-12 Dr Seem proposes an integration of Traditional Chinese Medicine and psychosomatics in this model of health care that acknowledges the connection of body and mind *Knowledge, Power, and Practice* Shirley Lindenbaum, Margaret M. Lock, 1993-10-04 Ranging in time and locale these essays which combine theoretical argument with empirical observation are based on research in historical and cultural settings The contributors accept the notion that all knowledge is socially and culturally constructed and examine the contexts in which that knowledge is produced and practiced in medicine psychiatry epidemiology and anthropology from publisher description *My Imaginary Illness* Chloe Atkins, 2011-05-15 How Patients Think At age twenty one Chlo Atkins began suffering from a mysterious illness the symptoms of which rapidly worsened Paralyzed for months at a time she frequently required intubation and life support She eventually became quadriplegic dependent both on a wheelchair and on health professionals who refused to believe there was anything physically wrong with her When test after test returned inconclusive results Atkins's doctors pronounced her symptoms psychosomatic Atkins was told not only that she was going to die but also that this was her own fault they concluded she was so emotionally deranged that she was willing her own death My Imaginary Illness is the compelling story of Atkins's decades long battle with a disease deemed imaginary her frustration with a succession of doctors and diagnoses her immersion in the world of psychotherapy and her excruciating physical and emotional journey back to wellness As both a political theorist and patient Atkins provides a narrative critique of contemporary medicine and its problematic handling of uncertainty and of

symptoms that are not easily diagnosed or known She convincingly illustrates that medicine's belief in evidence based practice does not mean that individual doctors are capable of objectivity nor that the presence of biomedical ethics invokes ethical practices in hospitals and clinics A foreword by Bonnie Blair O Connor who teaches medical students how to listen to patients and a clinical commentary by Dr Brian David Hodges a professor of psychiatry enrich the book's narrative with practical guidance for medical practitioners and patients alike *The Finest Traditions of My Calling* Abraham M. Nussbaum, 2016-03-28 Patients and doctors alike are keenly aware that the medical world is in the midst of great change We live in an era of continuous healthcare reforms many of which focus on high volume efficiency and cost effectiveness This compelling thoughtful book is the response of a practicing psychiatrist who explains how population based reforms have diminished the relationship between doctors and patients to the detriment of both As an antidote to failed reforms and an alternative to stubbornly held traditions Dr Abraham M Nussbaum suggests ways that doctors and patients can learn what it means to be ill and to seek medical assistance Using a variety of riveting stories from his own and others experiences the author develops a series of metaphors to explore a doctor's role in different healthcare reform scenarios scientist technician author gardener teacher servant and witness Each role influences what a physician sees when examining a person as a patient Dr Nussbaum cautions that true healthcare reform can happen only when those who practice medicine can see and be seen by their patients as fellow creatures His memoir makes a hopeful appeal for change and his insights reveal the direction that change must take *Illuminating the Diversity of Cancer and Palliative Care Education* Lorna Foyle, Janis Hostad, 2018-04-19 Illuminating the Diversity of Cancer and Palliative Care Education examines a myriad of original approaches techniques methods educational strategies and imaginative innovations within this vital field of medicine Its contributors share a range of educational techniques and tactics from Neuro Linguistic Programming to creative teaching strategies for bereavement support allowing readers to reflect on best practice and inventive ways of working which can be used or adapted to suit This book is an ideal companion to its sister volumes Innovations in Cancer and Palliative Care Education and Delivering Cancer and Palliative Care Education **The Illusion of Trust** E.R. DuBose, 2012-12-06 This book is about trust and its implications for a medical theological ethics Beginning with its earliest work there has been attention to trust running through the bioethics literature in the United States and much of this discussion has examined its theological elements Clearly trust is indispensable when describing the patient physician relationship so why is there a need for yet another study There is no doubt that people generally trust physicians Traditionally the physician is the patient's fiduciary agent whose sole obligation is to act only in the patient's best interest In recent times however there is a perception on the part of people within and without health care that physicians have other obligations that compete with their obligation to the patient If we acknowledge that one price for the successes of technological biomedicine is high in terms of financial cost another price of success seems to be distrust cynicism and suspicion directed by the public toward the medical profession If

this uneasiness is the price society pays for medical success what is the price of success for the doctor Because of their role within the social order physicians have claimed and been granted autonomy authority and special status In return the profession has pledged to serve the well being and interests of humankind This fiduciary commitment becomes a taken for granted aspect of the physician's identity both for the physician for whom this dedication is definitional and for the public which expects trustworthy service from this person

**Cancer in the Community** Martha Balshem, 2013-04-09 Focusing on deep conflicts between the medical establishment and the working class Martha Balshem chronicles a health education project in Tannerstown a pseudonym for a blue collar neighborhood in northeast Philadelphia

Reconstructing Illness Anne Hunsaker Hawkins, 1999 Serious illness and mortality those most universal unavoidable and frightening of human experiences are the focus of this pioneering study which has been hailed as a telling and provocative commentary on our times As modern medicine has become more scientific and dispassionate a new literary genre has emerged pathography the personal narrative concerning illness treatment and sometimes death Hawkins's sensitive reading of numerous pathographies highlights the assumptions attitudes and myths that people bring to the medical encounter One factor emerges again and again in these case studies the tendency in contemporary medical practice to focus primarily not on the needs of the individual who is sick but on the condition that we call disease Pathography allows the individual person a voice one that asserts the importance of the experiential side of illness and thus restores the feeling thinking experiencing human being to the center of the medical enterprise Recommended for medical practitioners the clergy caregivers students of popular culture and the general reader *Reconstructing Illness* demonstrates that only when we hear both the doctor's and the patient's voice will we have a medicine that is truly human

*Nowhere Else I Want to Be* Carol D. Marsh, 2017-01-10 From the founder of the DC women's residence Miriam's House comes a tale of family community and transformation

*Field Guide to the Difficult Patient Interview* Frederic W. Platt, Geoffrey H. Gordon, 2004 Written by physicians skilled at coaching colleagues in physician patient communication this pocket guide presents practical strategies for handling a wide variety of difficult patient interviews Each chapter presents a hypothetical scenario describes effective communication techniques for each phase of the interaction and identifies pitfalls to avoid The presentation includes examples of physician patient dialogue illustrations showing body language and key references This edition includes new chapters on caring for physician patients communicating with colleagues disclosing unexpected outcomes and medical errors shared decision making and informed consent and teaching communication skills Other new chapters describe clinical attitudes such as patience curiosity and hope

**Bodies in a Broken World** Ann Folwell Stanford, 2004-07-21 In this multidisciplinary study Ann Folwell Stanford reads literature written by U.S. women of color to propose a rethinking of modern medical practice arguing that personal health and social justice are inextricably linked Drawing on feminist ethics to explore the work of eleven novelists Stanford challenges medicine to position itself more deeply within the communities it serves especially the

poor and marginalized However she also argues that medicine must recognize its limits and join forces with the nonmedical community in the struggle for social justice In literary representations of physical and emotional states of illness and health Stanford identifies issues related to public health medical ethics institutionalized racism women s health domestic abuse and social justice that are important to discussions about how to improve health and health care She argues that in either direct or indirect ways the eleven novelists considered here push us to see health not only as an individual condition but also as a complex network of individual institutional and social changes in which wellness can be a possibility for the majority rather than a privileged few The novelists whose works are discussed are Toni Cade Bambara Paule Marshall Gloria Naylor Leslie Marmon Silko Toni Morrison Louise Erdrich Sandra Cisneros Bebe Moore Campbell Sapphire Ana Castillo and Octavia Butler

**Medication Errors** Michael Richard Cohen,2007 In the second expanded edition of the acclaimed Medication Errors 1999 Michael R Cohen brings together some 30 experts from pharmacy medicine nursing and risk management to provide the best most current thinking about medication errors Their contributions make this the most comprehensive authoritative examination in print of the causes of medication errors and strategies to prevent them Medication Errors provides the health care community acute care long term care ambulatory care the pharmaceutical industry regulatory affairs and academia with practical guidance to make patients who take or receive medications safer Key Features Numerous insights into the causes of medication errors including drug names drug packaging and labeling and error prone abbreviations and dose expressions In depth analyses of prescribing errors dispensing errors drug administration errors and errors related to drug delivery devices using examples of actual errors for illustration Detailed discussions of specialty areas fraught with risk cancer chemotherapy pediatric and neonatal patients and immunologic drugs A comprehensive chapter on high alert medications those drugs most frequently involved in harmful events with precautions that should be taken to avoid such mishaps Dozens of tables and figures throughout plus a color plate section capturing key information concisely     *Introduction to Clinical Skills* Mark B. Mengel,Scott A. Fields,2007-08-19 This practical text is an excellent introduction to the clinical skills all physicians particularly those in primary care disciplines need to treat their patients in a humane fashion and at a reasonable cost The authors focus on patient centered or generalist skills that will help the biomedically oriented physician become more comfortable in managing patient care situations In addition the chapters review the diagnostic treatment and technical skills that medical students encountered in their Introduction to Clinical Medicine or Physical Diagnosis courses The book s clinical cases will stimulate class discussions and provide vignettes for skills practice

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web the angle of incidence is equal to the angle of reflection for diffuse reflections ii the angle measured between the surface and the ray is the same magnitude as the angle of reflection iii the angle of incidence is found by subtracting the angle made with the

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web q14 state the law of refraction of light that defines the refractive index of a medium with respect to the other express it mathematically how is the refractive index of any medium a with respect to a medium b related to the speed of propagation of light in two media a and b state the name of this constant

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