Library Resources for Psychology Internship

Carmen Bou-Crick M.S.L.S.
University of Miami, CBou@med.miami.edu

Recommended Citation
https://scholarlyrepository.miami.edu/health_informatics_research/48

This Article is brought to you for free and open access by the Department of Health Informatics at Scholarly Repository. It has been accepted for inclusion in Faculty Research, Publications, and Presentations by an authorized administrator of Scholarly Repository. For more information, please contact repository.library@miami.edu.
Library Resources for Psychology Internship

Carmen Bou-Crick, MSLS, AHIP
Librarian Associate Professor
Department of Health Informatics
Head, Reference & Education, Calder Library
July 11, 2018
Objectives

Upon completion of this class, you will be able to identify, describe, and use:

1. **uSearch**—to find e-Journals, e-Books, and much more from all UM Libraries

2. **Clinical Support Tools**—Psychiatry Online, Access Medicine, ClinicalKey, Isabel, DynaMed Plus, and UpToDate) to find answers to assist in clinical decision-making.

3. **Bibliographic Databases**—PsycINFO, PubMed, Health and Psychosocial Instruments, and Mental Measurements Yearbook/Tests in Print to search the published peer reviewed literature and find questionnaires.
http://calder.med.miami.edu
1. Using **uSearch** to find e-Journals, e-Books, and other library resources

- Search for Electronic Resources
- Search for books in the Library Catalog
- Search for Everything in all UM Libraries
Practice Exercise

• Find an e-Book on Clinical Psychology published in the last 5 years.
• The title of the book should have the words “Clinical Psychology” in it.
• Open a chapter from that book.
Step 1. From Calder Library website, click “Search” to access uSearch.
Step 2. Enter “clinical psychology” and change options to search for your exact phrase in the title.
Step 3. Use “Refine Results” options to streamline your search by:

* Date
* Resource Type
Find the link for Online Access
Step 4: Open book and find Table of Contents
21
Positive Psychological Interventions: An Overview
Acacia C. Parks and Liudmila Titova

Although positive psychology is a relatively new field, it has created a considerable body of research on how people can learn happiness. Happiness can be pursued via numerous pathways: through sensory experiences, using savoring; through social interactions, using active-constructive responding and gratitude; through cognitive experiences, using optimism activities. Taken together, these types of technique are called Positive Psychological Interventions (PPIs) (Schueller & Parks, 2014), and they have been applied in both nondistressed and clinical populations to promote happiness.

PPIs are fairly new, so there is some inconsistency in the way they are defined by different researchers. For instance, a definition proposed by Sin and Lyubomirsky (2009) stresses two important factors which describe PPIs: concentration on increasing positivity rather than on decreasing negativity; and long-term effects. Bolier, Haverman, Westerhof, Riper, Smit, and Bobbemeier (2012) took this definition a step further, by adding that these...
Use your Cane ID to Sign-in

Register for Remote Access at the Front Desk. Bring your Photo ID, CaneID, and C-Number. Remote Access instructions are available on Calder Library website.
### Instructions:
Please print form and complete all highlighted fields. Information on incomplete forms cannot be entered into the Library's system.

<table>
<thead>
<tr>
<th>Library Card Number</th>
<th>Last name</th>
<th>First name</th>
<th>University of Miami C#</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. **Status (check one):**
   - [ ] UM Medical Staff
   - [ ] UM Medical Students
   - [ ] UM Medical Adjunct Faculty
   - [ ] Jackson Hospital Staff
   - [ ] Residents/Interns
   - [ ] Observers
   - [ ] Latin American Training Program
   - [ ] Exchange/Rotating Students
   - [ ] Affiliated Faculty
   - [ ] Voluntary Faculty
   - [ ] Emeritus/Retired Tenure Faculty
   - [ ] All Others

2. **Home Address:**
   - Street (Local address only) [ ]
   - Apt [ ]
   - City [ ]
   - FL [ ]
   - State [ ]
   - Zip Code [ ]

3. **Personal Telephone Number** [ ]

4. **Work Department** [ ]

5. **Work Telephone Number** [ ]

6. **Expiration Date** [ ]

7. **NO REMOTE ACCESS**
   - (Voluntary and Emeritus/Retired Tenure Faculty)

**PATRON MUST READ & SIGN**

In the event that publications are not returned when due, a returned book fee will be charged against me. I agree to pay to the University of Miami all costs incurred by the University of Miami in enforcing its rights which may include additional in-house or collection agency fees.

Signature: [ ]

**Please make PHOTOCOPY of patron's ID**

1) 35062
2) 35062
3) 35062
4) 35062
5) 35062
Remote Access

Remote access to the Louis Calder Memorial Library’s "Licensed" Resources (E-journals, E-books and Databases) is restricted to faculty, staff and students at the University of Miami Miller School of Medicine / University of Miami Health System (UMMSM/UMH) and Jackson Health System (JHS) Personnel.

Eligible off-campus users (UMMSM/UMH and JHS) can access resources in a variety of ways depending on their affiliation.

**EZ-Proxy Access**

Medical Library users who are on campus will have automatic access to resources. Remote access will continue to be provided with Single Sign-On Authentication (CaneID) for UM students and employees.

Remote access for non resident JMH staff will require registering for a restricted-use CaneID/C-Number.

Follow these steps:
1. Register for a CaneID/ C-Number
2. Register in person at Calder Library with photo ID and provide your C# to library staff.

Detailed proxy logon information is available [here](http://calder.med.miami.edu). It may take up to 2 business days for your account to be activated. For further help, you can contact library staff at 305-243-6403.

Secure Gateway/VPN for UMMSM and UMH faculty/staff/students:

http://calder.med.miami.edu
To find journals: eJournals A-Z in uSearch
You can access e-Journals also from Calder Library’s homepage.
Practice Exercise

• Find the latest issue of the Journal of Consulting and Clinical Psychology.
Enter the journal title in the search box. Select the journal from the list and click Online Access.
Publication Details For "Journal of Consulting and Clinical Psychology"

**Title:** Journal of Consulting and Clinical Psychology

**ISSN:** 0022-006X

**Publisher Information:** American Psychological Association

**Title History:** Journal of Consulting Psychology vol. 1 (1) - vol. 31

**Other ISSN:** 0095-8891 vol. 1 (1) - vol. 31

**Electronic ISSN:** 1939-2117 vol. 32 (1)

**Bibliographic Records:** 1937 - current

**Full Text:** 1937 - current

**Publication Type:** Academic Journal

**Frequency:** 12 per year
Each citation will provide links to HTML Full Text, PDF Full Text, as well as PlumX Metrics (how many people have read and cited this article).

To print this article, first open the PDF Full Text and use the icons to print, email, or save citations.
Use uSearch to find E-Books and/or e-Book chapters

eBooks can be found from the Calder Library website too
# E-Books

If you are unable to locate a book on this page, please go to uSearch.

## Search Inside Book Packages

<table>
<thead>
<tr>
<th>Package Name</th>
<th>Package Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access Medicine - Clinical &amp; LANGE Educational Library</td>
<td>Oxford eBook Collection</td>
</tr>
<tr>
<td>Books@Ovid</td>
<td>PsycBooks (APA)</td>
</tr>
<tr>
<td>ClinicalKey</td>
<td>PsycCRITIQUES (APA)</td>
</tr>
<tr>
<td>ebrary</td>
<td>PsycEXTRA</td>
</tr>
<tr>
<td>EBSCO eBook Collection</td>
<td>PsychiatryOnline</td>
</tr>
<tr>
<td>Free Books 4 Doctors</td>
<td>R2 Digital Library</td>
</tr>
<tr>
<td>Knovel: Biochemistry, Biology, Biotechnology</td>
<td>Thieme ElectronicBook Library</td>
</tr>
<tr>
<td>McGraw-Hill Board &amp; Exam Review Collection</td>
<td>MedOne Neurosurgery</td>
</tr>
<tr>
<td>National Academies Press</td>
<td>USMLE Collection</td>
</tr>
<tr>
<td>NCBI Bookshelf</td>
<td>U.S. National Library of Medicine Digital Collections</td>
</tr>
</tbody>
</table>

## Browse e-books by alpha letter

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
<td>F</td>
<td>G</td>
<td>H</td>
</tr>
<tr>
<td>I</td>
<td>J</td>
<td>K</td>
<td>L</td>
<td>M</td>
<td>N</td>
<td>O</td>
<td>P</td>
</tr>
<tr>
<td>Q</td>
<td>R</td>
<td>S</td>
<td>T</td>
<td>U</td>
<td>V</td>
<td>W</td>
<td>X</td>
</tr>
<tr>
<td>Y</td>
<td>Z</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Browse e-books by subject

<table>
<thead>
<tr>
<th>Subject</th>
<th>Subject</th>
<th>Subject</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS / HIV</td>
<td>Health Informatics</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>Allergy &amp; Immunology</td>
<td>Health Policy</td>
<td>Physiology</td>
</tr>
<tr>
<td>Anatomy &amp; Embryology</td>
<td>Hematology</td>
<td>Plastic Surgery</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>Histology</td>
<td>Psychiatry and Psychology</td>
</tr>
<tr>
<td>Biochemistry</td>
<td>History</td>
<td>Public Health &amp; Epidemiology</td>
</tr>
</tbody>
</table>
Search in Book Packages

E-Books

Please Note: Some books in packages can be located by searching Calder Medical Library’s online catalog or the e-Book A-Z list; others must be located by searching within individual book packages.

Search Inside Book Packages

Access Medicine - Clinical & LANGE Educational Library
Books@Ovid
ClinicalKey
ebrary
EBSCO Ebook Collection
Free Books 4 Doctors
McGraw-Hill Board & Exam Review Collection
National Academies Press
NCBI Bookshelf
PsycBooks (APA)
PsycCRITIQUES (APA)
PsycEXTRA
PsychiatryOnline
R2 Digital Library
Thieme ElectronicBook Library
Thieme eNeurosurgery
USMLE Collection
U.S. National Library of Medicine Digital Collections
PsycBooks (American Psychol Assn) (enter topic/topics)

Find PDF Full Text icon
If you know the book title, you can search by title or browse titles.
<table>
<thead>
<tr>
<th>Subject</th>
<th>Subject</th>
<th>Subject</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS / HIV</td>
<td>Global Health</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>Allergy &amp; Immunology</td>
<td>Health Informatics</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>Anatomy &amp; Embryology</td>
<td>Health Policy</td>
<td>Physiology</td>
</tr>
<tr>
<td>Anesthesiology</td>
<td>Hematology</td>
<td>Plastic Surgery</td>
</tr>
<tr>
<td>Biochemistry</td>
<td>Histology</td>
<td>Psychiatry and Psychology</td>
</tr>
<tr>
<td>Biology</td>
<td>History</td>
<td>Public Health</td>
</tr>
<tr>
<td>Biomedical Engineering</td>
<td>Hospitals</td>
<td>Publishing</td>
</tr>
<tr>
<td>Cardiology</td>
<td>Internal Medicine</td>
<td>Pulmonary Medicine</td>
</tr>
<tr>
<td>Cell Biology</td>
<td>Jurisprudence</td>
<td>Radiology</td>
</tr>
<tr>
<td>Communicable Diseases</td>
<td>Laboratory Animal Science</td>
<td>Regenerative Medicine</td>
</tr>
<tr>
<td>Search by Subject</td>
<td>Medicine</td>
<td>Rehabilitation</td>
</tr>
<tr>
<td>Search by Subject</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Books for Psychiatry & Psychology

### Psychiatry and Psychology

- **ABC of Mental Health, 2nd ed.**, Wiley-Blackwell, 2009
- **Acquired Tastes: Why Families Eat the Way They Do**, UBC Press, 2015
- **Addiction Treatment Planner, 5th ed.**, Wiley, 2014
- **Adolescent Psychotherapy Treatment Planner**, Wiley, 2014
- **Adult Psychotherapy Progress Notes Planner**, Wiley, 2014
- **African American Experience : Psychoanalytic Perspectives** Jason Aronson, 2012
- **American Dolorologies: Pain, Sentimentalism, Biopolitics**, State University of New York Press, 2014
- **American Madness: the Rise and Fall of Dementia Praecox**, Harvard Univ.Press, 2011
- **Anxiety: A Short History**, Johns Hopkins University Press, 2013
- **Alchemy of Wolves and Sheep : A Relational Approach to Internalized Perpetration In Complex Trauma Survivors, The**, Routledge, 2013
PracticePlanners Ser.: The Adolescent Psychotherapy Treatment Planner: Includes DSM-5 Updates (5)
by Jongma, Arthur E., Jr.
Peterson, L. Mark
McInnis, William P.

Availability
Your institution has unlimited access to this book.

This book is not available for download. Full Download is not offered for this title. Meanwhile, you may Read Online to print chapters to PDF.

Table of Contents
Cover
Title Page
Copyright
Contents
PracticePlanners® Series Preface
SAMPLE TREATMENT

OBSESSIVE-COMPULSIVE

Definitions: Recurrent and persistent ideas or images that are viewed as intrusive, or that interfere with the person's performance, or social or occupational roles. Failed attempts to ignore or control these ideas or impulses or neutralize actions. Recognition that obsessive are his/her own mind.

Recognition of repetition of a thought or image that is not in line with reality or logical thinking and the desire to eliminate it but cannot be controlled.
Finding Print Books at Calder Library

Use Library Catalog

Search for "depression and anxiety" in the library catalog.

Example search results:
Search for Everything at all UM Libraries

BOOKS FROM ALL LIBRARIES CAN BE PICKED UP AT CALDER LIBRARY
Sign in to your library account

Enter your CaneID and password.

Security options--Duo Mobile
Select citations by clicking on pins.
Suicide attempts and related factors in patients admitted to a general hospital: a ten-year cross-sectional study (1997-2007). (Research article) (Report)
Alberdi - Sudupe, Jesus ; Pita - Fernandez, Salvador ; Gomez - Pardinas, Sonia M. ; Iglesias - Gil - De - Bernabe, Fernando ; Garcia - Fernandez, Jorge ; Martinez - Sande, Gonzalo ; Lantes - Louza, Sara ; Pertega - Diaz, Sonia
BMC Psychiatry, March 31, 2011, Vol.11, p.51
""""""""""""\nPrevalence and comorbidity of mental disorders in illness and the risk of suicide in the elderly. Arch... probability of suicide attempt, age and grouped diagnosis
""""""""""
<table>
<thead>
<tr>
<th>Section</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loans</td>
<td>There are no loans</td>
</tr>
<tr>
<td>Fine + fees</td>
<td>There are no fines</td>
</tr>
<tr>
<td>Requests</td>
<td>There are no requests</td>
</tr>
<tr>
<td>Blocks + messages</td>
<td>1, MERGE_NOTE: Merged with patron p...</td>
</tr>
</tbody>
</table>
Learn more about uSearch

**uSearch**
Discover materials from all University of Miami Libraries, including Law and Medical

Electronic Resources
Search for journal articles, book chapters, and other online resources in all UM digital collections.

Library Catalog
Search for books and all other materials housed at the Medical Libraries (Calder Library, Ophthalmology Library, and University of Miami Hospital/UMH Library) or, search a specific medical library collection.

Everything
Search for journal articles, books, e-books, audiovisual materials, and all resources in all UM libraries.

Can't Find It in uSearch?
Try our Interlibrary Loan Service.

Help!
Search Tips

ILL form

Help Manual
Practice Exercise

• A 16-year-old girl is brought to the clinic by her mother, who states that her daughter has been losing weight steadily. The adolescent denies there is a problem and states that she is in no way underweight. The physician determines that the girl is 5 ft 6 in tall and weighs 90 lb. After a diagnosis of anorexia and an inpatient stay to stabilize her, what would be the best outpatient treatment, Group Therapy or Family Therapy?
PICO-TT Queries

- **P**: adolescent diagnosed with anorexia
- **I**: family therapy
- **C**: group therapy
- **O**: prevent recurrence
- **T**: Therapy
- **T**: Type of Study
Results: 5 of 54
Cognitive remediation therapy (CRT) as a pretreatment intervention for adolescents with anorexia nervosa during medical hospitalization: a pilot randomized controlled trial protocol.

Using bivariate latent basis growth curve analysis to better understand treatment outcome in youth with anorexia nervosa.

Results: 5 of 20
Family Therapy for Child and Adolescent Eating Disorders: A Critical Review.

Two models of multiple family therapy in the treatment of adolescent anorexia nervosa: a systematic review.

An Update on Evidence-Based Psychosocial Treatments for Eating Disorders in Children and Adolescents.

Results: 5 of 7
Perplexities and provocations of e.

[Family pattern with reference to systemic psychoanalytic systematic viewpoint]

Bipolar illness preceded by anorexia nervosa.
1. Do in-vivo behaviors predict early response in family-based treatment for anorexia nervosa?

2. Is weight gain really a catalyst for broader recovery? The impact of weight gain on psychological symptoms in the treatment of adolescent anorexia nervosa.

Select citations from this list

1. An Exploratory Evaluation of the **Family** Meal Intervention for **Adolescent Anorexia Nervosa**
   Herscovici CR, Kovalskys I, Orellana L.
   PMID: 26596997
   Similar articles

2. Parental Expressed Emotion During Two Forms of **Family-Based** Treatment for **Adolescent Anorexia Nervosa**
   Allan E, Le Grange D, Sawyer SM, McLean LA, Hughes EK.
   PMID: 29105211
   Similar articles

3. Using bivariate latent basis growth curve analysis to better understand treatment outcome in youth with **anorexia nervosa**
   Byrne CE, Wonderlich JA, Curby T, Fischer S, Lock J, Le Grange D.
   Eur Eat Disord Rev. 2018 Apr 25. doi: 10.1002/erv.2596. [Epub ahead of print]
   PMID: 29691947
   Similar articles

4. **A Pilot, Multicentre Pragmatic Randomised Trial** to Explore the Impact of Carer Skills Training on Carer and Patient Behaviours: Testing the Cognitive Interpersonal Model in **Adolescent Anorexia Nervosa**
Parental Expressed Emotion During Two Forms of Family-Based Treatment for Adolescent Anorexia Nervosa.

Allan F1,2,3, Le Grange D1,2,4,5, Sawyer SM1,2,6,7, McLean LA,8, Hughes EF1,2,6,8

Author information
1 Murdoch Children’s Research Institute, Melbourne, VIC, Australia.
2 Centre for Adolescent Health, Royal Children’s Hospital, Melbourne, VIC, Australia.
3 Faculty of Education, Monash University, VIC, Australia.
4 Department of Psychology, University of California, San Francisco, CA, USA.
5 Psychiatry and Behavioral Neuroscience, The University of Chicago, IL, USA (Emeritus).
6 Department of Paediatrics, University of Melbourne, Melbourne, VIC, Australia.
7 Department of Adolescent Medicine, Royal Children’s Hospital, Melbourne, VIC, Australia.
8 School of Psychological Sciences, Monash University, VIC, Australia.

Abstract
High parental expressed emotion (EE), reflected by criticism or emotional over-involvement, has been related to poorer outcome in family-based treatment (FBT) for adolescent anorexia nervosa. This study assessed EE in 88 mothers and 84 fathers at baseline and end of treatment in a randomised trial comparing conjoint FBT to parent-focused FBT (PFT). Compared with conjoint FBT, PFT was associated with a decrease in maternal criticism, regardless of adolescent remission. Furthermore, an increase in maternal criticism was more likely to be observed in conjoint FBT (80%) than PFT (20%, p = 0.001). Adolescents of mothers who demonstrated an increase in EE, or remained high in EE, were less likely to remit compared with adolescents for whom EE decreased or remained low (33% and 0% vs. 43% and 50%, p = 0.03). There were no significant effects for paternal EE. The results highlight the importance of considering EE when implementing FBT for adolescents with anorexia nervosa.

Copyright © 2017 John Wiley & Sons, Ltd and Eating Disorders Association.

KEYWORDS: adolescents; anorexia nervosa; criticism; emotion; family therapy; parents

PMID: 29105211 DOI: 10.1002/erv.2594
(Indexed for MEDLINE)
Parental Expressed Emotion During Two Forms of Family-Based Treatment for Adolescent Anorexia Nervosa

Erica Allan, Daniel Le Grange, Susan M. Sawyer, Louise A. McLean, Elizabeth K. Hughes

First published: 03 November 2017 | https://doi.org/10.1002/erv.2564

Abstract

High parental expressed emotion (EE), reflected by criticism or emotional over-involvement, has been related to poorer outcome in family-based treatment (FBT) for adolescent anorexia nervosa. This study assessed EE in 89 mothers and 64 fathers at baseline and end of treatment in a randomised trial comparing conjoint FBT to parent-focused FBT (PFT). Compared with conjoint FBT, PFT was associated with a decrease in maternal criticism, regardless of adolescent remission. Furthermore, an increase in maternal criticism was more likely to be observed in conjoint FBT (80%) than PFT (20%, p = 0.001). Adolescents of mothers who demonstrated an increase in EE, or remained high in EE, were less likely to remit compared with adolescents for whom EE decreased or remained low (33% and 0% vs. 43% and 50%, p = 0.03). There were no significant effects...
To save your search strategies: click on Advanced

Click on the search number you want to save

Click on Save on My NCBI

Sign in or Create a MyNCBI account
Other resources to make your work easier: Clinical Decision Support Databases

• PsychiatryOnline
• Access Medicine
• ClinicalKey
• DynaMed Plus
• UpToDate
eDatabases

Find at Calder’s homepage

Also look under “All Databases” for a list of all free and subscription databases
Clinical Decision Support: PsychiatryOnline

Register for a free account

DSM LIBRARY

Psychiatric News

APA guidelines

APA JOURNALS

Patient Education materials

BOOKS
Palliative and End-of-Life Care > Interventions
Harrison's Principles of Internal Medicine

For patients with depression who have insomnia and anxiety, a sedating antidepressant such as mirtazapine can be helpful. In the elderly, trazodone, beginning at 25 mg at nighttime, is an effective sleep aid at doses lower than those which cause its antidepressant effect. Zolpidem may have a decreased... 

Mental Disorders > Clinical Manifestations
Harrison's Principles of Internal Medicine

Minimization of distress. The presence of anxiety, panic, or agitation significantly increases near-term suicidal risk. Approximately 4-5% of all depressed patients will commit suicide; most will have sought help from physicians within 1 month of their deaths. In some depressed patients, the mood disorder...

Final Examination
Graber and Wilbur's Family Medicine Examination & Board Review, 4e

... in select cases for tocolysis. Realize that these drugs carry substantial risks and only delay delivery by about 48 hours. Their main use is to provide time to administer corticosteroids. See question 15.4.3: Helpful Tip. As you start a patient on fluoxetine for depression, you counsel him about...

Thyroid Disease
Pathophysiology of Disease: An Introduction to Clinical Medicine, 7e

Cold, dry, thick, scaling skin; dry, coarse, brittle hair; dry, longitudinally ridged nails. Periorbital edema. Normal or faint cardiac impulse; indistinct heart sounds; cardiac enlargement; bradycardia. Ascites; pericardial effusion; ankle edema. Mental clouding. Depression...

Cardiovascular Disorders: Vascular Disease
Pathophysiology of Disease: An Introduction to Clinical Medicine, 7e

Acid. In severe cases, the blood lactate level rises from a normal value of about 1 mmol/L to 9 mmol/L or more. The resulting lactic acidosis depresses the myocardium, decreases peripheral vascular responsiveness to catecholamines, and may be severe enough to cause coma. Vasoconstriction...
Register to create a profile for remote access

Use your JHS email to register and use this account to access the Mobile App
You can search for a topic or **Browse** books, journals, drug monographs, guidelines, patient education, multimedia, or procedures consult.
Results show Full text and MEDLINE. It includes book chapters, practice guidelines, and MEDLINE articles. You can apply other filters.
An outline lets you navigate to specific parts of the document.
Register to create a ClinicalKey account to get mobile access. Click the link on the confirmation email, then download the ClinicalKey App from your mobile device. Your account will last 6 months. Login from campus to keep it active.
Clinical Decision Support: Isabel

Enter clinical features and symptoms

Click Get checklist
### Clinical Features

- **Age**: Adult 50-64yrs
- **Gender**: Female
- **Pregnancy**: Not pregnant
- **Travel History**: North America

#### Enter Abnormal Clinical Features
- **Lethargy**
- **Sleepiness**

---

### Ranked Diagnoses

<table>
<thead>
<tr>
<th>Show 10</th>
<th>Show all</th>
<th>Red Flags</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="Sleep Apnea" /></td>
<td><img src="image" alt="Resp" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Renal Failure" /></td>
<td><img src="image" alt="Nephro" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Chronic Renal Failure" /></td>
<td><img src="image" alt="..." /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Infectious Mononucleosis" /></td>
<td><img src="image" alt="Infec" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Depression" /></td>
<td><img src="image" alt="Psyc" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Cirrhosis" /></td>
<td><img src="image" alt="Hepato" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Seasonal Affective Disorder" /></td>
<td><img src="image" alt="Psyc" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Interstitial Nephritis" /></td>
<td><img src="image" alt="Nephro" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Motor Neurone Disease" /></td>
<td><img src="image" alt="Neuro/musc" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="Bipolar Disorder" /></td>
<td><img src="image" alt="Psyc" /></td>
<td><img src="image" alt="..." /></td>
</tr>
<tr>
<td><img src="image" alt="CNS TB &amp; TB Meningitis" /></td>
<td><img src="image" alt="Infec" /></td>
<td><img src="image" alt="..." /></td>
</tr>
</tbody>
</table>

---

### Drugs

- ![Resp](image)
- ![Nephro](image)
- ![Infec](image)
- ![Psyc](image)
- ![Hepato](image)
- ![Neuro/musc](image)
- ![Infec](image)

---

### Feedback
Expand Depression

Click on Major Depression
Display is easy to navigate with additional links for more information.

Contents are from **UpToDate** (other options are available).
Instructions for Mobile Access

On 'Mobile Access' to see login details:

Mobile Access

Login details are:

UserID: XXXXX
Password: XXXXXX

On the device go to: https://www.isabelhealthcare.com, save the shortcut to your home screen. Click on the icon – select 'login' and enter the details specified above, check 'remember me' to save login details.

For iPhones:

On iPhone:

Message Mail Reminders Add to Notes

Add to Favourites Add Bookmark Add to Reading List Add to Home Screen

For Androids:

On Android:

Downloads Share...

Find in page

Add to Home screen

Request desktop site

Settings
Clinical Decision Support: DynaMedPlus

Enter your topic

Sign up for remote access

Spotlight

Browse by specialty

Get the DynaMed Plus Mobile App

Dynamed Plus outscore s all point-of-care reference competitors for overall product quality in KLAS 2016 CDS report

Bedside point-of-care ultrasound conducted by an

Recent Updates

06/22/2017 01:56:00 PM (ET)
rituximab may improve lung function at 7 years compared to other treatments in patients with systemic sclerosis and interstitial lung disease (Semin Arthritis Rheum 2017 Apr)
Topic: Systemic sclerosis (scleroderma)-related lung disease

06/22/2017 01:50:00 PM (ET)
review of pulmonary manifestations in rheumatic disease (Chest 2017 May 25 early online)
Topic: Systemic sclerosis (scleroderma)-related lung disease
Major depressive disorder (MDD)

Overview and Recommendations

- Condition

- History and Physical

- Diagnosis

- Treatment / Medications / Antipsychotics for depression with psychotic features

Posttraumatic stress disorder (PTSD)

Overview and Recommendations

- Condition

- History and Physical

- Diagnosis

- Treatment / Counseling / Eye movement desensitization and reprocessing (EMDR)

  EMDR and prolonged exposure therapies may be similarly effective for reducing PTSD symptoms in patients with PTSD ar

Parkinson disease

Overview and Recommendations

- Condition

- History and Physical

- Diagnosis

progressive movement disorder characterized by bradykinesia, resting tremor (4-6 hertz [Hz]), rigidity, and loss of postural reflex
Postpartum psychosis

Related Summaries

- General Information
- Epidemiology
- Etiology and Pathogenesis
- History and Physical
- Diagnosis
- Treatment
- Complications and Prognosis
- Prevention and Screening
- Quality Improvement
- Guidelines and Resources
- Patient Information
- ICD-9/ICD-10 Codes
- References

Updates

- Updated 2016 Sep 05 12:00 AM (ET)

Related Summaries

- Postpartum depression

General Information

Description

- affective psychosis with acute onset, typically presenting in early postnatal period (generally within 42 days of delivery)
  - often severe
  - often presents as mixed affective, schizoaffective, or manic state, with prominent confusion symptoms
  - depressive or schizophrenia-like presentations may also occur
- medical emergency (woman at risk of harming herself, baby, or both)
- may resemble delirium but is most likely an overt presentation of bipolar disorder

Also called

- puerperal psychosis
Clinical Criteria

- Acetaminophen (Paracetamol) Toxicity Assessment
- Alcohol Consumption Screening AUDIT Questionnaire
- Clock Drawing Task (Cognitive Impairment Screening)
- Cognitive Impairment Screening with 6 Questions
- Depression (any) Screening by a Two Item PHQ-2
- Depression (major) Screening by a Two Item PHQ-2
- Epworth Sleepiness Scale (ESS)
- GAD-7 Generalized Anxiety Disorder Scale
- Geriatric Depression 1 Item Screener
- Geriatric Depression 4 Item Scale
- Geriatric Depression Scale
- Panic Disorder Screener
Remote access

Sign up for a personal account

Already have an Account? Sign in

Three reasons to sign up for a personal account.

Easy access

- You can access anytime, anywhere, on any device.

Get the mobile App

- You must have a personal account to download the mobile app from the App Store or Google Play.

It's convenient

- Simply log in from home, office, or hospital and you're in. Save your password for even quicker access.

Use your official JMH email to register!

First Name

Last Name

Email Address
This is your personal User Identification necessary to sign into DynaMed

Institution
UNIV OF MIAMI SCHOOL OF MEDICINE

Specialty

Role

Note: Please remember your account information for future reference

Submit  Cancel
Clinical Support: UpToDate

UpToDate is on both the JMH and UHealth electronic health records
Suicidal ideation and behavior in adults
...patients who subsequently commit suicide suggests that an approach to case finding based upon risk factors, sensitivity to high risk situations in depressed patients, and assessment of suicidality in patients ...

Patient evaluation
Risk factors
Summary and recommendations
PHQ-9 questionnaire (Tables)

Suicidal ideation and behavior in children and adolescents: Evaluation and management
...lethality, suicide risk assessment in children should be based upon the child perception of lethality rather than the objective lethality of the suicidal act. Following a suicide attempt, the absence ...

Risk assessment of suicidal ideation
Summary and recommendations
Suicide risk assessment1 (Tables)
Suicide risk assessment2 (Tables)

Effect of antidepressants on suicide risk in adults
...topic reviews whether antidepressants affect the risk of suicidality in adults. The effect of antidepressants on suicide risk in children and adolescents, risk factors and management of suicidality in adults ...

Reduction of existing suicidal ideation
Summary

Approach to symptom assessment in palliative care
INTRODUCTION — Approximately 37,000 people in the United States [1] and one million worldwide die by suicide [2].

Primary care providers may be in a unique position due to their frequency of interaction with suicidal patients, compared with one-third who had contact with mental health services before their suicide (45 versus 20 percent).

Despite this, there are no data to show that screening for suicide in primary care reduces mortality. Addition sensitivity or specificity [4,5].

Nevertheless, the fact that primary care clinicians see a large portion of the patients who subsequently commit suicide, and assessment of suicidality in patients being treated for depression are appropriate in the primary care setting.

This topic reviews risk factors for suicide, and the evaluation, initial management, and appropriate follow-up of antidepressants on suicide risk in adults.
Register for an UpToDate account on campus

Use your JMH email to register

Download the UpToDate, Inc. App.

Sign in with your user name and password
Bibliographic/Citation Databases

• PsycINFO
• PubMed
• Health & Psychosocial Instruments
• Mental Measurements Yearbook/Tests in Print
Practice Exercise

• Find articles about depression and anxiety in the elderly.
Bibliographic Databases: PsycINFO (APA/EBSCO)

Simple keyword search on “depression AND anxiety AND elderly” in all fields
1. Degree, but not direction of grip strength asymmetries, is related to depression and anxiety. Yu, Junhong, Rawtaer, Ir's, Mahendran, Rath, Kua, Ee-Heok, Peng, Lei, Laterality: Asymmetries of Body, Brain and Cognition, Subjects: Aging, Anxiety, Brain, Lateral Dominance, Major Depression, Adulthood (18 yrs & older), Middle Age (40-64).

Select citations by clicking on folders

When you finish selecting, go to Folder View

reening results in middle aged and elderly individuals? A

1, 2018 ArtID: 5. Publisher: BioMed Central Limited; [Journal Article]

3d (18 yrs & older); Middle Age (40-64 yrs); Aged (65 yrs & older); Male; Female

enta and influence of depression and anxiety: A

17 pp. 810-822. Publisher: Taylor & Francis; [Journal Article]

& older); Aged (65 yrs & older); Very Old (85 yrs & older); Male; Female

iving in the community.

Other options include Print, Save as File and Export to citation manager (EndNote, RefWorks, Mendeley, etc.)
Simple Keyword Search in PubMed

PubMed comprises more than 27 million citations for biomedical literature from MEDLINE, life science journals, and online books. Citations may include links to full-text content from PubMed Central and publisher web sites.
Nocturnal enuresis with spina bifida occulta: Does it interfere behavioral management success?

Kurt O, Yazici CM, Paco C.

Abstract

PURPOSE: We aimed to investigate the incidence of spina bifida occulta (SBO) in patients with nocturnal enuresis (NE) and its effect on the success of behavioral interventions. We also aimed to identify predictive factors related to success of behavioral interventions.

METHODS: A total of 163 patients with NE and 160 patients without NE were enrolled to study. Urinalysis, urine culture, biochemical evaluation, plain radiography and urinary system ultrasonography were performed before treatment. Patients with NE received behavioral interventions for 3 months. Response to behavioral interventions was analyzed according to the presence and absence of SBO. Possible predictive factors for treatment success were also evaluated.

RESULTS: Spina bifida occulta was detected in 47 (28.8%) children at NE group and 24 (15.0%) at control group (p = 0.138). Non-monosymptomatic NE was more prevalent in patients with SBO (p < 0.001), and response to the treatment was significantly lower (p = 0.037). Presence of SBO (OR 8.8, 95% CI 3.1-25.8), NE severity (OR 7.2, 95% CI 2.4-21.7) and NE frequency on 3-day voiding diary (OR 9.4, 95% CI 3.7-24.3) were significantly related to the success.

CONCLUSIONS: The presence of SBO, severe NE and higher frequency of NE in voiding diary affect the response to behavioral interventions. Other treatment options such as medical treatment or enuresis alarm may be recommended for those patients.

PMID: 26149536 DOI: 10.1007/s11255-015-1047-4
[Index for MEDLINE]
Create an alert when new articles are published
Select your options

Your PubMed search

Name of saved search: bedwetting in children

Search terms: bedwetting in children

Filters: From 2015/01/01 to 2018/12/31. English. Child: birth-18 years

Would you like e-mail updates of new search results?
- No, thanks.
- Yes, please.

E-mail: cbou@med.miami.edu (change)

Schedule:
- Frequency: Weekly
- Which day? Monday

Formats:
- Report format: Abstract

Number of items:
- Send at most: 50 items
- Send even when there aren't any new results

Any text you want to be added at the top of your e-mail (optional):
<table>
<thead>
<tr>
<th>Search Name</th>
<th>What's New</th>
<th>Last Searched</th>
</tr>
</thead>
<tbody>
<tr>
<td>bedwetting in children</td>
<td>0</td>
<td>today</td>
</tr>
<tr>
<td>(zika virus) AND (pregnant OR pregnancy OR child)</td>
<td>3</td>
<td>4 days ago</td>
</tr>
<tr>
<td>AIDS drugs and breast feeding</td>
<td>0</td>
<td>last year</td>
</tr>
<tr>
<td>Drug-Related Side Effects and Adverse Reactions</td>
<td>74398</td>
<td>3 years ago</td>
</tr>
<tr>
<td>Vitamin C AND Zinc AND Cold</td>
<td>4</td>
<td>3 years ago</td>
</tr>
<tr>
<td>COMBO SEARCH-ADVERSE EVENTS ETC.</td>
<td>275898</td>
<td>4 years ago</td>
</tr>
<tr>
<td>Drug Labeling OR (Drug Product Labeling OR Drug)</td>
<td>8307</td>
<td>4 years ago</td>
</tr>
<tr>
<td>Product Surveillance, Postmarketing OR (Post-Ma...</td>
<td>2813</td>
<td>4 years ago</td>
</tr>
<tr>
<td>&quot;Safety Management&quot;[Mesh] OR &quot;Risk Management&quot;...</td>
<td>61278</td>
<td>4 years ago</td>
</tr>
</tbody>
</table>
Sign in to MyNCBI
Or create an account

Sign in to NCBI
Last signed in from this computer via: ORCID

Sign in with
Google NIH Login ERA Commons

See more 3rd party sign in options

OR

Sign in directly to NCBI

Sign In

Forgot NCBI username or password?
Register for an NCBI account
To Find Questionnaires...

- Health and Psychosocial Instruments (HAPI)
- Mental Measurements Yearbook/Tests in Print
Go to: e-Databases
(click on “H” for “Health and Psychosocial Instruments”)
Basic Search

Filter by Relevancy

Click on title to expand the citation

Options
Title: Hospital Anxiety and Depression Scale.

Acronym: HADS

Author: Snaith, R. P.; Zigmond, A. S.


Measure Descriptors: Anxiety
Anxiety Neurosis
Anxiety States
Depression
Depression Emotion
Elderly
 Emotional States
Fear
Hospital Environment

Sample Descriptors: Adult
Adults
Aged
Anxiety Neurosis
Anxiety States
Elderly
England
Hospital Environment
Patients


Analyst: HaPI Staff.

Year: 1997

Update Code: 201401
DETECTION OF DEPRESSION IN PRIMARY CARE: COMPARISON OF TWO SELF-ADMINISTERED SCALES

AJAY K. UPADHYAYA, IAN STANLEY

First published: January 1997  Full publication history
DOI: 10.1002/(SICI)1099-1166(199701)12:1<35:AID-GPS447>3.0.CO;2-H  View have citation
Cited by (CrossRef): 7 articles  Check for updates  Citation tools

Abstract

Two self-rated questionnaires, SELFCARE (D) and Hospital Anxiety Depression (HAD) Scale, were compared in relation to their efficacy in detecting depression in 72 elderly patients attending general practitioners at a health centre in Liverpool, England. The sensitivity, specificity and overall misclassification rates of both the scales were assessed against a diagnosis arrived at by using a standardized interview schedule, Geriatric Mental State (community version), and a computerized diagnostic scheme, AGECAT. In this preliminary study, SELFCARE (D) was found to be superior to HAD as a screening instrument for depression in the elderly population in primary care. © 1997 by John Wiley & Sons, Ltd.

Continue reading full article
The Mental Measurements Yearbook with Tests in Print (Buros Institute, Univ Nebraska)

<table>
<thead>
<tr>
<th>Mental Measurements Yearbook with Tests in Print</th>
<th>Comprehensive guide to over 2,000 contemporary testing instruments. Designed for novice test consumers to experienced professionals. Contains information for a complete evaluation of test products in psychology, education, business, and leadership.</th>
</tr>
</thead>
</table>

From the All Databases list, go to MMY/TiP
Search for dementia in Title (Test Name)
Behavioral and Psychological Assessment of Dementia

Acronym: BPAD.

Authors: Schmidt, Kara S.; Gallo, Jennifer L.

Publication Date: 2007.


Purpose: Designed to "assess changes in behavior and mood associated with the onset of various dementia syndromes."

Test Category: Behavior Assessment.


Scores: 24: Total Current, Total Past, Total Change, Perceptual/Delusional Current, Perceptual/Delusional Past, Perceptual/Delusional Change, Positive Mood/Anxiety Current, Mood/Anxiety Current, Negative Mood/Anxiety Past, Negative Mood/Anxiety Change, Aggressive Current, Aggressive Past, Aggressive Change, Perseverative Current, Disinhibited Past, Disinhibited Change, Biological Rhythms Current, Biological Rhythms Past, Biological Rhythms Change.

Administration: Individual.

Time: (15) minutes.

Price Data: 2015: $200 per introductory kit including software portfolio with on-screen help and quick start guide, professional manual (67 pages), and 25 response booklets.

Comments: Should be completed by family members, paraprofessionals, or other professionals ages 18-90 who have regular contact with individuals who have suspected dementia.

Cross References: For reviews by Shawn K. Acheson and Anita M. Hubley, see 18:12.

Reviewers: Acheson, Shawn K.; Hubley, Anita M.

Yearbook Volume: 18.


Published Test Description: Behavioral and Psychological Assessment of Dementia. Purpose: Designed to "assess changes in behavior and mood associated with the onset of various dementia syndromes."

Scores: 24: Total Current, Total Past, Total Change, Perceptual/Delusional Current, Perceptual/Delusional Past, Perceptual/Delusional Change, Positive Mood/Anxiety Current, Mood/Anxiety Current, Negative Mood/Anxiety Past, Negative Mood/Anxiety Change, Aggressive Current, Aggressive Past, Aggressive Change, Perseverative Current, Disinhibited Past, Disinhibited Change, Biological Rhythms Current, Biological Rhythms Past, Biological Rhythms Change. Administration: Individual. Professional manual (67 pages), and 25 response booklets. §3 per 25 response booklets. $87 per professional manual. Time: (15) minutes. Comments: Should be completed by family members, paraprofessionals, or other professionals ages 18-90 who have regular contact with individuals who have suspected or diagnosed dementia. Authors: Kara S. Schmidt and Jennifer L. Gallo. Publisher: Psychological Assessment Resources, Inc., Lutz, FL 33549-8119. custsupp@parinc.com, http://www4.parinc.com.
Other Bibliographic Databases

• Cochrane Library of Systematic Reviews
• Joanna Briggs Institute Database of Evidence Based Medicine (Nursing procedures)
• Natural Medicines (CAM resources)
• Embase (International in scope)
• Scopus (conferences and author productivity)
• PURE Experts (UM faculty researchers)
Online Tutorials

Calder Medical Library's Resource Guide for Online Tutorials

Welcome to the Calder Medical Library's Resource Guide for Online Tutorials!

We have designed this guide to provide easy access to tutorials for the most popular databases and software applications available to our patrons.

We hope you find this page useful.

Featured Resources

Calder Library Video Training Sessions

No time to attend a training session? Save time and effort by viewing Calder Library created online training tutorials:

PubMed

PubMed provides access to MEDLINE, the National Library of Medicine's database of citations and abstracts in the fields of medicine, nursing, health care system sciences, and other biomedical topics.
Come back to Calder Library soon!

- **Library Hours:**
  - Mon-Thu: 7:30 AM-Midnight
  - FRI: 7:30 AM-10 PM
  - SAT: 10 AM - 10 PM
  - SUN: 10 AM – 10 PM
- **Computers on three floors**
- **Small Group Study Rooms**
- **Collaboratory & Lounge**
- **Quiet Areas**
- **Relaxing chairs**
- **Poster Preparation**
- **Photography & Graphics assistance**
Need Research Help?
Ask A Librarian
@ Calder Library!

CONTACT US BY PHONE, EMAIL OR CHAT!
Email: reference@med.miami.edu
Call: 305-243-6648
We hope you have a wonderful training here at UM/JMH!

Thank You!
For more information, contact us at:
reference@med.miami.edu
305-243-6648