


ACCESS Surgery from McGraw-Hill

Where Top Surgeons Begin™

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ACCESS  Surgery from McGraw-Hill
A Comprehensive Resource for Surgical Education


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Textbooks

 **Zollinger's Atlas of Surgical Operations**
Zollinger RM Jr, Zollinger RM Sr

 **CURRENT Diagnosis & Treatment: Surgery**

 **Schwartz's Principles of Surgery**

 **Trauma**

 **Maingot's Abdominal Operations**

Procedures

- Airway Management
- Bariatric
- Basic Technical Skills
- Body Wall
- Breast
- Cardiac
- Critical Care
- Endocrine
- Gastrointestinal: Colorectal
- Gastrointestinal: Upper
- Hepatopancreaticobiliary
- Otolaryngology
- Pediatric Surgery
- Plastic Surgery


Core Curriculum


CORE TOPICS:

- Acute Care Surgery
- Endocrine Surgery
- Surgical Oncology
- Cardiothoracic Surgery
- Orthopedics
- Neurosurgery
- Gastrointestinal Surgery
- Vascular Surgery
- Head and Neck
- Urology
- Gynecology
- Plastic and Reconstructive Surgery
- Pediatric Surgery
- Transplantation
- General Skills


Updates and Journal Reviews


Check out the latest updates to *Schwartz's Principles of Surgery* and related Journal Reviews




1 2 3 4 

Multimedia

 **New! Toe Amputation**
(2 minutes, 30 seconds)

 **Atrial Thrombectomy and Pacemaker/Defibrillator Insertion**
(8 minutes, 12 seconds)

 **Schwartz's Principles of Surgery > Updates and Journal Reviews**

Schwartz Updates
9/27/2010: **Surgical Management of Severe Pancreatitis**
[All Text and Video Updates >](#)

Journal Reviews

There has never been an online surgical education resource as comprehensive, as content rich, and as tightly integrated with your curriculum as **AccessSurgery from McGraw-Hill.**



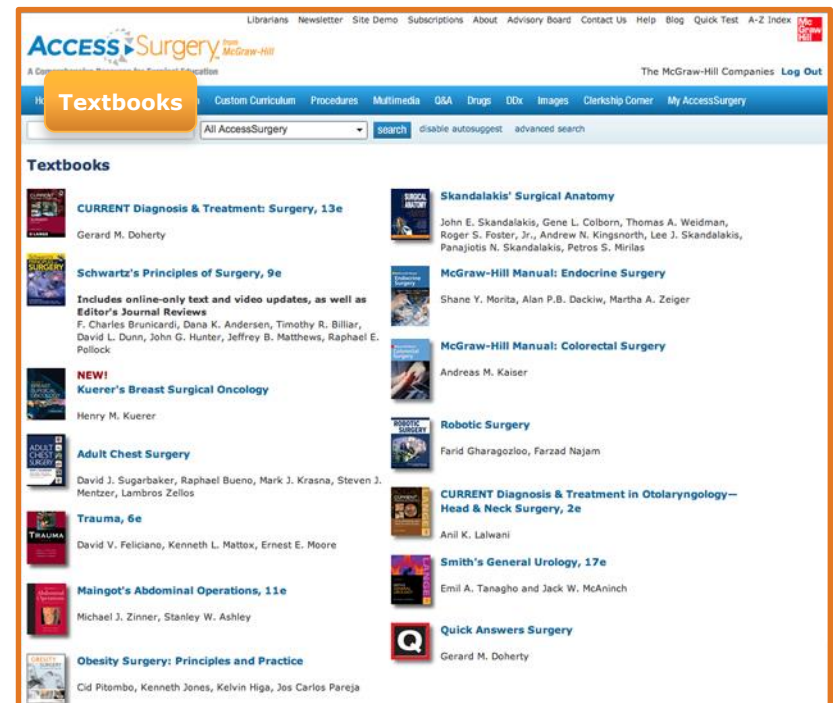
AccessSurgery's unique curriculum-based approach combined with its unmatched resources and student-specific features makes it an essential part of any resident education program. Your institution can incorporate the world's finest references, videos, animations, and updates into your curriculum.

AccessSurgery delivers all this:

- A complete library of cornerstone **surgery titles**
- Must-know **procedures**
- More than 160 narrated **videos and animations**
- 100 **differential diagnoses**
- Interactive **board review**
- Quick Answers
- NEW! Clerkship Corner
- **Semantic and full-text search** capability
- Personalization features
- Custom Curriculum tool

AccessSurgery includes content from more than a dozen world-renowned surgical textbooks, including:

- *Schwartz's Principles of Surgery, 9e*
- *Zollinger's Atlas of Surgical Operations, 8e*
- *CURRENT Diagnosis & Treatment Surgery, 13e*
- *Maingot's Abdominal Operations, 11e*
- *Smith's General Urology*
- *Adult Chest Surgery*
- *Kuerer's Breast Surgical Oncology*



The site is continuously updated with online-only material such as:

- Videos
- *Schwartz's Principles of Surgery* chapter updates

[Schwartz's Principles of Surgery >](#)

Schwartz Updates

Text and video updates to the book [Schwartz's Principles of Surgery](#).

Current Updates

Archived Updates

TEXT UPDATE: (1/3/2013)

Hemostasis-Directed Resuscitation Using Thromboelastography

TEXT UPDATE: (9/5/2012)

Contemporary Observations on Surgical Outcomes with Biliary Atresia

TEXT UPDATE: (8/13/2012)

Surgery for Acquired Heart Disease: An Update

TEXT UPDATE: (7/12/2012)

Reconstructive Transplantation of the Upper Extremity

TEXT UPDATE: (5/21/2012)

Management Updates in Sarcoma

TEXT UPDATE: (1/24/2012)

The Changing Management of Infected Pancreatic Necrosis

Videos

Patient Safety Modules

Exploring Essential Surgery from the Clerkship Corner

 **Airway Management >**

- Tracheal Intubation
- Surgical Airway

 **Bariatric**

 **Basic Technical Skills**

 **Body Wall**

 **Breast**

 **Cardiac**

 **Critical Care**

 **Endocrine**

 **Gastrointestinal: Colorectal**

 **Gastrointestinal: Upper**

 **Hepatopancreaticobiliary**

 **Pediatric Surgery**

 **Surgical Oncology**

Airway Management



Digital Intubation

(3 minutes, 11 seconds)

Dr. Orlando Hung and Dr. Michael F.

play

clip multimedia



Invasive Infraglottic Airways

(3 minutes, 54 seconds)

Dr. Orlando Hung and Dr. Michael F.

play

clip multimedia



Tracheal Intubation Under Direct Vision

(7 minutes, 15 seconds)

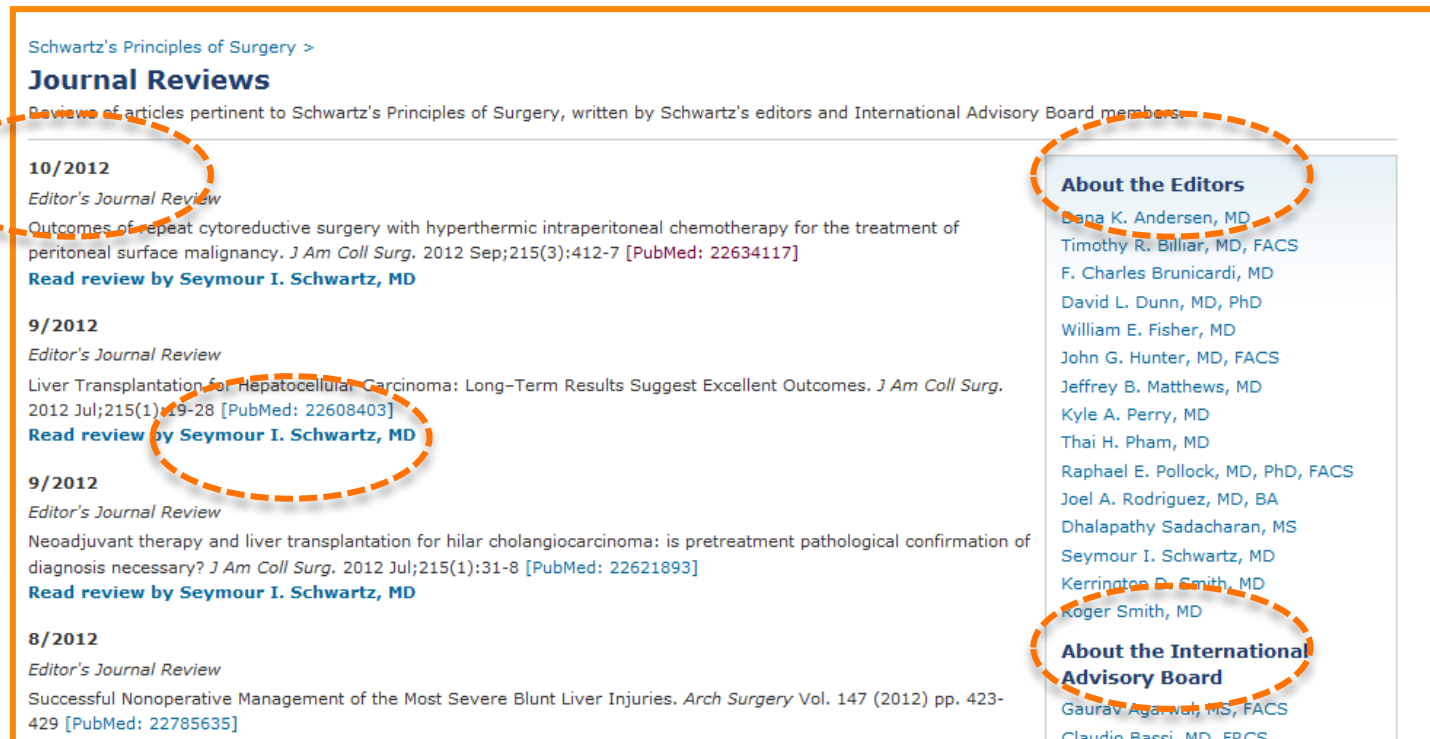
Dr. Orlando Hung and Dr. Michael F.

play

clip multimedia

The site is continuously updated with online-only material such as:

- Editor's journal reviews



[Schwartz's Principles of Surgery >](#)

Journal Reviews

Reviews of articles pertinent to Schwartz's Principles of Surgery, written by Schwartz's editors and International Advisory Board members.

10/2012
Editor's Journal Review
Outcomes of repeat cytoreductive surgery with hyperthermic intraperitoneal chemotherapy for the treatment of peritoneal surface malignancy. *J Am Coll Surg.* 2012 Sep;215(3):412-7 [PubMed: 22634117]
Read review by Seymour I. Schwartz, MD

9/2012
Editor's Journal Review
Liver Transplantation for Hepatocellular Carcinoma: Long-Term Results Suggest Excellent Outcomes. *J Am Coll Surg.* 2012 Jul;215(1):29-28 [PubMed: 22608403]
Read review by Seymour I. Schwartz, MD

9/2012
Editor's Journal Review
Neoadjuvant therapy and liver transplantation for hilar cholangiocarcinoma: is pretreatment pathological confirmation of diagnosis necessary? *J Am Coll Surg.* 2012 Jul;215(1):31-8 [PubMed: 22621893]
Read review by Seymour I. Schwartz, MD

8/2012
Editor's Journal Review
Successful Nonoperative Management of the Most Severe Blunt Liver Injuries. *Arch Surgery* Vol. 147 (2012) pp. 423-429 [PubMed: 22785635]

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Claudio Bassi, MD, FRCSC

Procedures

Airway Management
Bariatric
Basic Technical Skills
Body Wall
Breast
Cardiac
Critical Care
Endocrine
Gastrointestinal: Colorectal
Gastrointestinal: Upper
Gynecology
Hepatopancreaticobiliary
Otolaryngology
Pediatric Surgery >
Plastic Surgery
Surgical Oncology

Pediatric Surgery

-  **Gastrointestinal Procedures**
 - Laparoscopic Pyloromyotomy
 - Open Pyloromyotomy
- Pediatric Hernia Repair**
-  **Thoracic**
- Gastroschisis**
- Omphalocele**

Pediatric Hernia Repair

Textbooks

Hairinger's Abdominal Operations
Chapter 46: Hernia Repair
- Pediatric Inguinal Hernias

Atlas

Current Procedures: Surgery
- Chapter 46: Pediatric Inguinal Hernia

Surgical Anatomy

Skandalakis' Surgical Anatomy
Chapter 9: Abdominal Wall and Hernias
- Hernias of the Abdominal Wall and Surgical Treatment
- "It is a misconception with an indirect inguinal hernia, there is nothing wrong with the posterior wall of L..."

Multimedia

Pediatric Inguinal Hernia Repair
(2 minutes, 14 seconds)
[View](#)

Related Procedures

- cryptorchidism
- hernias

ACCESS Medicine
Search AccessMedicine.com for:

Pediatric Hernia Repair

National Guideline Clearinghouse
guideline.gov
Search Guidelines.gov for:
Pediatric Hernia Repair

All AccessSurgery

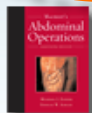
search

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Pediatric Hernia Repair

Textbooks



Maingot's Abdominal Operations
Chapter 46. Hernia Repair:
- Pediatric Inguinal Hernias

Atlas



Current Procedures: Surgery
- Chapter 48. Pediatric Inguinal Hernia

Surgical Anatomy



Skandalakis' Surgical Anatomy
Chapter 9. Abdominal Wall and Hernias:
- Hernias of the Abdominal Wall and Surgical Treatment
- "In a newborn with an indirect inguinal hernia, there is nothing wrong with the posterior wall of t..."

Multimedia



**Pediatric Inguinal
Herniorrhaphy**
(2 minutes, 14 seconds)

play

Related Procedures

- cryptorchidism
- hernias

ACCESS Medicine from McGraw-Hill

Search AccessMedicine.com for:

Pediatric Hernia Repair

go

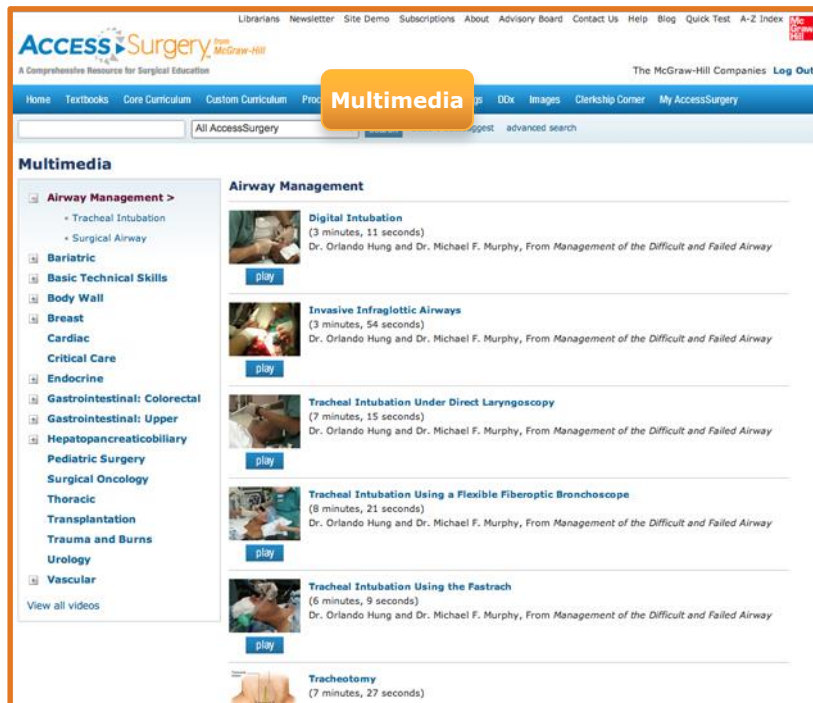


National Guideline Clearinghouse
guideline.gov

Search Guidelines.gov for:

Pediatric Hernia Repair

go



AccessSurgery presents the operations and core competencies most commonly encountered in a surgical residency with **more than 160 narrated videos and animations** covering topics ranging from Airway Management to Vascular Procedures

Multimedia

Videos

Patient Safety Modules

Exploring Essential Surgery from the Clerkship Corner

Exploring Essential Surgery

Home

Skin

Principles

Overview

Skin

Squamous Cell Carcinoma and Keratoses

Head and Neck

Thorax

Melanoma and Nevii

Abdomen

Excision of Malignancies

Hernia

Basal Cell Carcinoma

Anorectal

Pelvis

Sebacious Cysts

Upper Limb

Pretibial Lacerations

Lower Limb

Ungual Conditions

Spine

Burns

Procedures

Grafts

Quiz

OVERVIEW

There are a wide variety of benign conditions affecting the skin (such as **keratoses, nevi and cysts**) but of most concern is early diagnosis and adequate treatment of skin carcinoma (squamous cell, basal cell, melanoma). It can be difficult to distinguish between benign and malignant lesions on clinical examination.

In many countries, there is **increasing incidence*** of these tumors. An increasing community emphasis is being placed on **prevention*** and early diagnosis. Analyses of diagnostic accuracy show a significant error rate. More accurate and early diagnosis is required to minimize treatment delay and maximize its suitability.

Examination of a skin lesion requires adequate exposure and lighting.

Examination of a skin lesion requires adequate exposure and lighting.

Exploring Essential Surgery

Home

Skin

Principles

Overview

Skin

Squamous Cell Carcinoma and Keratoses

Head and Neck

Thorax

Melanoma and Nevii

Abdomen

Excision of Malignancies

Hernia

Basal Cell Carcinoma

Anorectal

Sebacious Cysts

Pelvis

Pretibial Lacerations

Upper Limb

Ungual Conditions

Spine

Burns

Procedures

Grafts

Quiz

Quiz

Select all correct answers. The number of answers is noted below each question.

1. Keratoses involve the:

- ☐ A. Epidermis
- ☐ B. Dermis
- ☐ C. Horny layer
- ☐ D. Stratum basalis

(2 answers)

2. Nevii are colored by:

- ☐ A. Vessels
- ☐ B. Collagen
- ☐ C. Pigment
- ☐ D. Elastin

(2 answers)

3. Cysts may contain:

- ☐ A. Gas
- ☐ B. Liquid
- ☐ C. Semi-solid material
- ☐ D. Solid material

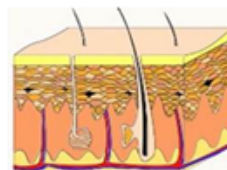
(4 answers)

4. SCC occurs in the:

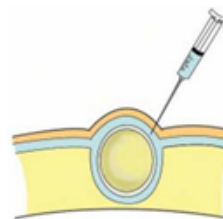
- ☐ A. Skin

▶ Play Video 1

▶ Play Video 2




Epidermis and dermis



Inject local into plane

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All AccessSurgery

Differential Diagnosis

Select a symptom or disease and get instant differential diagnosis information.

Abdominal Pain	Fever	Pancreatitis
Abdominal Pulsation	Groin Pain/Swelling	Pelvic Pain
Axillary Swelling	Heartburn/Indigestion	Pulmonary Nodule
Back Pain	Hematemesis	Rectal/Perianal Pain
Bone/Extremity Mass	Hypercalcemia	Rectal Tenesmus
Breast Lump	Hyperthyroidism	Splenomegaly
Breast Pain	Jaundice	Swollen Legs
Burns	Leg Pain	Testicular Pain
Chest Pain	Leg Ulcer	Thyroid Cancer
Constipation	Liver Enlargement	Thyroid Enlargement
Cough	Lung Cancer	Thyroid Pain
Diarrhea	Neck Mass	Trauma
Dysphagia	Oliguria	Weight Gain
Fatigue	Pancreas Cancer	Weight Loss

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a silverchair information system

The McGraw-Hill Companies

100 differential diagnoses can be searched by symptom or disease for instant answers to clinical questions

DDX

Chest Pain

- ☒ Cough
- ☒ Fever

More Common

- Acute respiratory distress syndrome (ARDS)
- Aspiration
- Atelectasis
- Bronchiectasis
- Cellulitis
- Cholecystitis (acute & chronic)
- Empyema
- Esophageal perforation
- Lung abscess
- Lung infections, fungal
- Pneumonia
- Pulmonary embolism
- Tuberculosis: pulmonary

Less Common

- Carcinoma, inflammatory
- Chest wall osteomyelitis
- Cystic diseases of lungs, congenital
- Cystic fibrosis
- Hepatic abscess
- Hodgkin lymphoma
- Lung infection, aspergillosis

Leg Ulcer

Liver Enlargement

Lung Cancer

Neck Mass

Oliguria

Pancreas Cancer

Thyroid Cancer

Thyroid Enlargement

Thyroid Pain

Trauma

Weight Gain

Weight Loss

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Lung Abscess

Textbooks

CURRENT Diagnosis & Treatment: Surgery
Chapter 18. Thoracic Wall, Pleura, Mediastinum, & Lung:
- Lung Abscess

Schwartz's Principles of Surgery
Chapter 19. Chest Wall, Lung, Mediastinum, and Pleura:
- Lung Abscess

Quick Answers Surgery

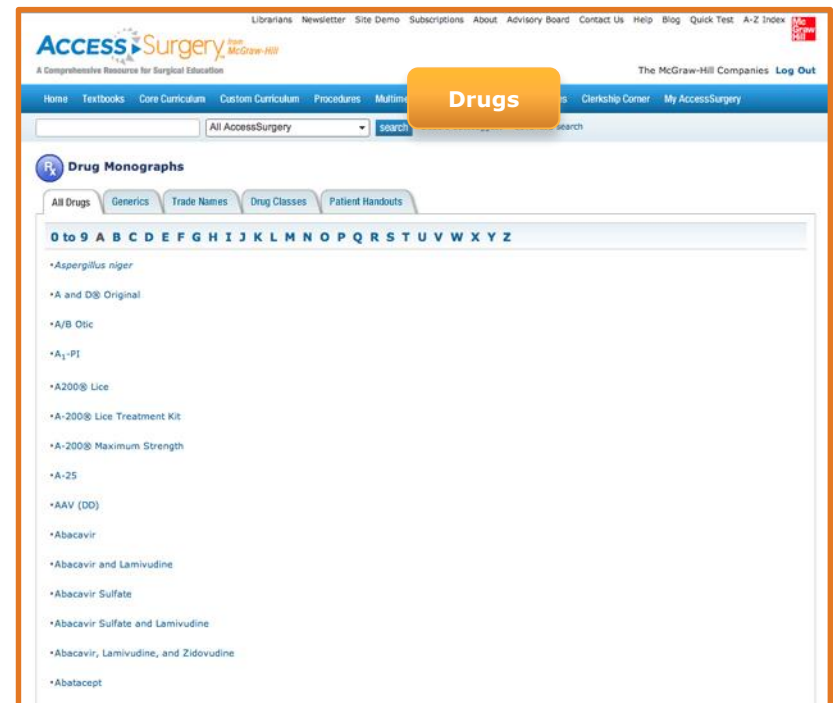
Diseases
- Lung Abscess

Search AccessMedicine for:

Search Guideline.gov for:

The fully-integrated drug database, searchable by generic and U.S. brand name, provides information on:

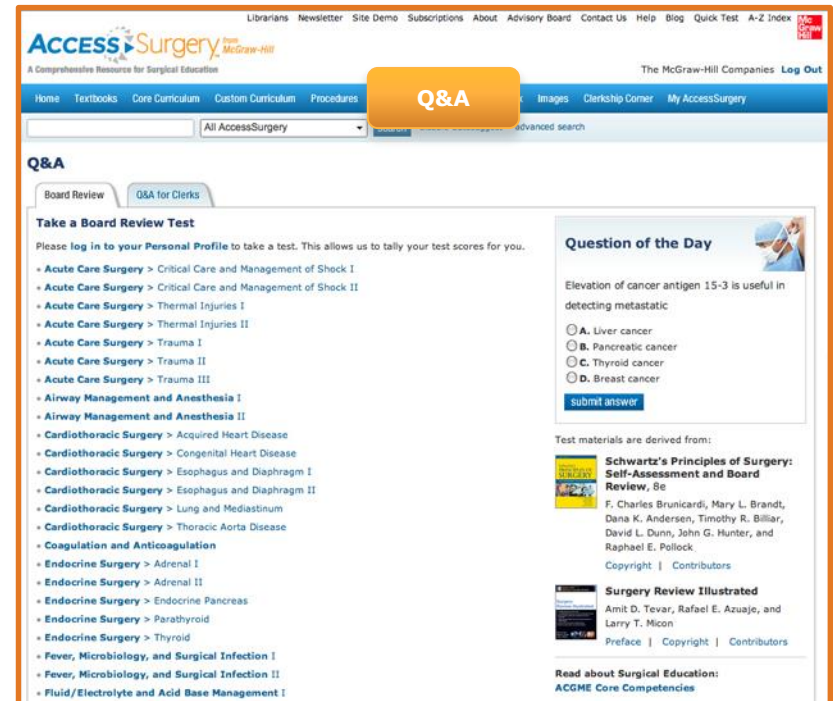
- Indications and usage
- Contraindications
- Warnings/Precautions
- Interactions
- Dosing
- Administration
- Patient education in English and Spanish



Interactive Board Review features nearly 3,000 ABSITE-style Q&A from:

- *Schwartz's Principles of Surgery: Self-Assessment and Board Review, 8e*
- *Surgery Review Illustrated*

Users can select a topic to be tested on and **AccessSurgery** will randomly generate a set of questions, tally their score, and email the score to any address provided. AccessSurgery enables residents to measure themselves and focus on the topics and subjects that they need to master.



QUESTION 3: ✖ INCORRECT (You answered C; the correct answer is A)

The injury severity score (ISS) is determined based on which of the following?

- (A) the sum of the squares from the three highest abbreviated injury scale (AIS) scores
- (B) the sum of the three highest AIS scores
- (C) the sum of all nine sections from the AIS
- (D) the sum of the scores from all six body regions used in the ISS
- (E) the sum of the squares from all nine sections of the AIS

Explanation: The ISS provides a numerical description of the overall severity of injury and chance of mortality in multiple injury regions. Regions are graded as (1) mild, (2) moderate, (3) severe, (4) critical—outcome usually favorable, and (5) critical—outcome unfavorable.

The ISS is defined as the sum of the squares of the highest AIS scores from six body regions of injury: head/neck, face, chest, abdominal or pelvic contents, extremities, and external.

Becker et al. (1974) studied over 2000 victims of MVA, pedestrian accidents, and falls. They considered polytraumatized and is at risk for multiorgan failure with head injury. An ISS >60 is usually fatal. In the initial report there were 10 deaths. In the first week and 75% within 1 h.

ISS has limitations since it can underestimate the injury severity.

Example

Isolated severe head AIS-5 = ISS 25

Liver laceration AIS-4, femur fracture AIS-3 = ISS 25

Mortality, complication rate, and resource uses are probably very high.

Bibliography

Baker SP, O'Neil B, Haddon W Jr, et al. The injury severity score.

[[PubMed: 4814394](#)]

Roberts CS, Gleis GE, Seligson D. Diagnostic accuracy of CT scan in the detection of complications. In: Browner BD, Jupiter JB, Levine AE, et al. *Orthopaedic Trauma*. 2003; 452–453.

See all AccessSurgery content on:

- injury severity score

Injury Severity Score

Textbooks



Trauma

Chapter 5. Injury Severity Scoring and Outcomes Research:

- In 1974, Baker et al. first posited a multiinjury score by introducing the Injury Severity Score (...)

Chapter 9. Trauma Care in Mass Casualty Incidents:

- An urban bombing is an unusually severe form of trauma. In these incidents, up to one-third of...



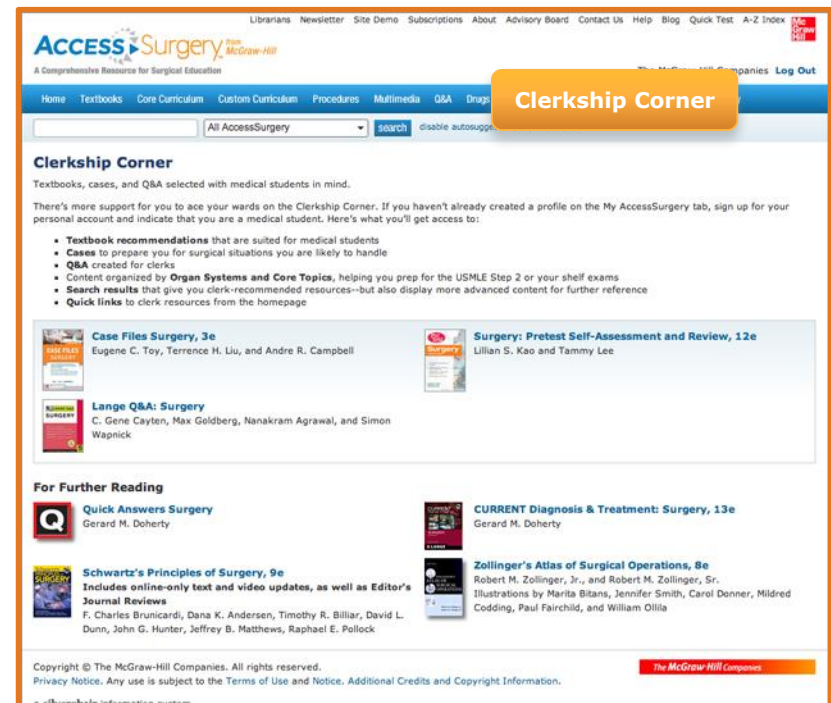
Principles of Critical Care, 3e

Chapter 6. Assessment of Severity of Illness:

- Scoring Systems Specific for Trauma Patients

The Clerkship Corner connects medical students with resources and functionality specifically designed to assist them on their surgical clerkship. **With Clerkship Corner**, users who log on as medical students can access:

- **Textbook recommendations** tailored to medical students
- **Cases** to prepare students for surgical situations they are likely to encounter
- **Q&A** created for clerks
- Content organized by **Organ Systems and Core Topics** to help prep students for the USMLE Step 2 CK and shelf exams
- **Search results** that display clerk-recommended resources—as well as more advanced content for further reference



Case

Questions

Approach

Clinical Pearls

References

Comprehension Questions

Questions

A 20-year-old construction worker complains of pain and intermittent bulge in his left groin. He indicates that the symptoms began about the past 3 months and beginning to affect his activities. On examination, he appears to have a small indirect inguinal hernia. What is the most appropriate management?

- ☐ A. Discuss with the patient potential benefits of "watchful waiting" and reevaluate the patient in 1 month.
- ☐ B. Advise the patient to undergo laparoscopic hernia repair because a large randomized trial showed superior outcome for laparoscopic repairs.
- ☐ C. Perform open left inguinal herniorrhaphy with primary suture repair.
- ☐ D. Advise the patients that groin hernias do not need to be fixed.
- ☐ E. Perform open left inguinal hernia repair with prosthetic mesh.

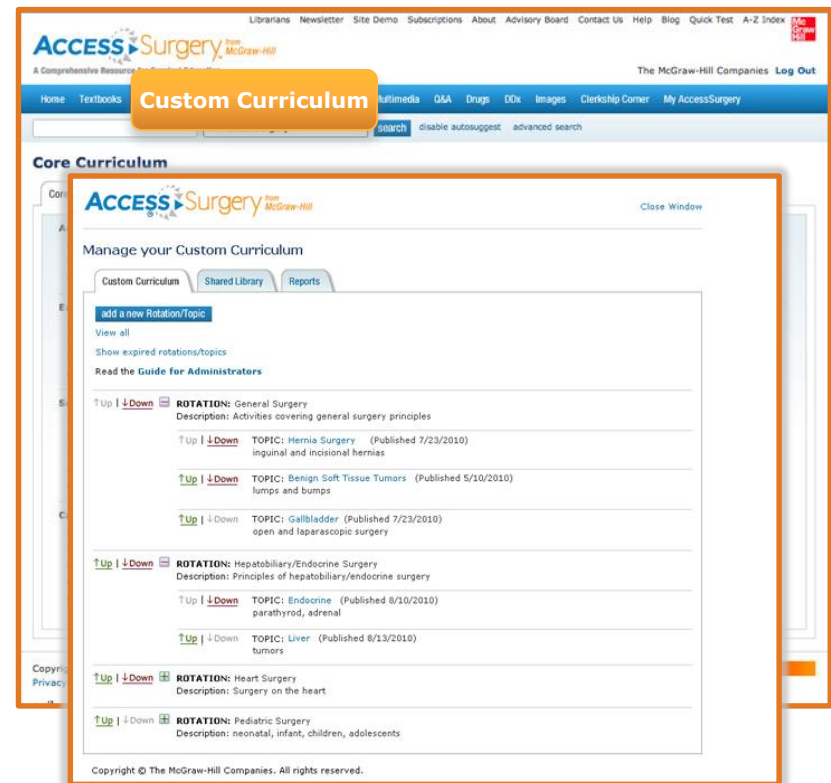
A 40-year-old man presents with recurrent bulge in the left groin 2 years following open left inguinal hernia repair with mesh. On examination, he showed a moderately dilated external inguinal ring with a small bulge produced by Valsalva maneuver. Which of the following treatment approach?

- ☐ A. Obtain a CT to rule out a femoral hernia, followed by elective hernia repair.
- ☐ B. Schedule patient for left groin exploration and hernia repair with prosthetic mesh.
- ☐ C. Advise patient to limit his physical activities and reevaluate in 6 months.
- ☐ D. Send the patient to an immunologist for evaluation of possible wound healing and tissue collagen defects.
- ☐ E. Schedule the patient for bilateral inguinal exploration.

Custom Curriculum is a powerful online tool for managing residency curriculum, enabling program directors and instructors to:

- Incorporate **AccessSurgery** and other medical content into assignments and activities
- Monitor and report mastery of required topics by resident or rotation
- Create, manage, and save rotations and resident education more efficiently

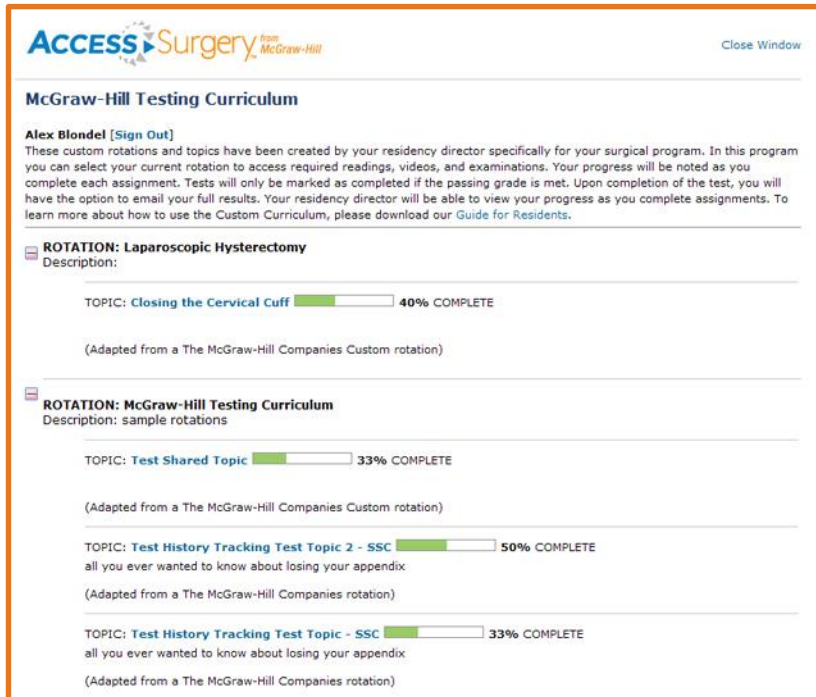
Custom Curriculum helps program directors and instructors effectively educate surgical residents and makes remediation needs more visible.




Through the **Custom Curriculum** tool residents can:

- Study procedures in detail using faculty-selected resources
- Test themselves and track their performance and areas for improvement

Residents can actively participate in their education, making the most of their experience in residency.




The screenshot displays the 'ACCESS Surgery from McGraw-Hill' interface for a 'Custom Curriculum'. At the top right is a 'Close Window' link. The main heading is 'McGraw-Hill Testing Curriculum'. Below this, a user profile for 'Alex Blondel' with a '[Sign Out]' link is shown, followed by a paragraph explaining the custom rotations and topics created by the residency director. The curriculum is divided into two sections: 'ROTATION: Laparoscopic Hysterectomy' and 'ROTATION: McGraw-Hill Testing Curriculum'. Each rotation has a 'Description' and a list of topics with progress bars. For the 'Laparoscopic Hysterectomy' rotation, the topic 'Closing the Cervical Cuff' is 40% complete. For the 'McGraw-Hill Testing Curriculum' rotation, 'Test Shared Topic' is 33% complete, 'Test History Tracking Test Topic 2 - SSC' is 50% complete, and 'Test History Tracking Test Topic - SSC' is 33% complete. Each topic entry includes a brief description and a note that it is adapted from a McGraw-Hill Companies rotation.

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McGraw-Hill Testing Curriculum


Alex Blondel [\[Sign Out\]](#)
These custom rotations and topics have been created by your residency director specifically for your surgical program. In this program you can select your current rotation to access required readings, videos, and examinations. Your progress will be noted as you complete each assignment. Tests will only be marked as completed if the passing grade is met. Upon completion of the test, you will have the option to email your full results. Your residency director will be able to view your progress as you complete assignments. To learn more about how to use the Custom Curriculum, please download our [Guide for Residents](#).

ROTATION: Laparoscopic Hysterectomy
Description:


TOPIC: **Closing the Cervical Cuff**  **40% COMPLETE**


(Adapted from a The McGraw-Hill Companies Custom rotation)

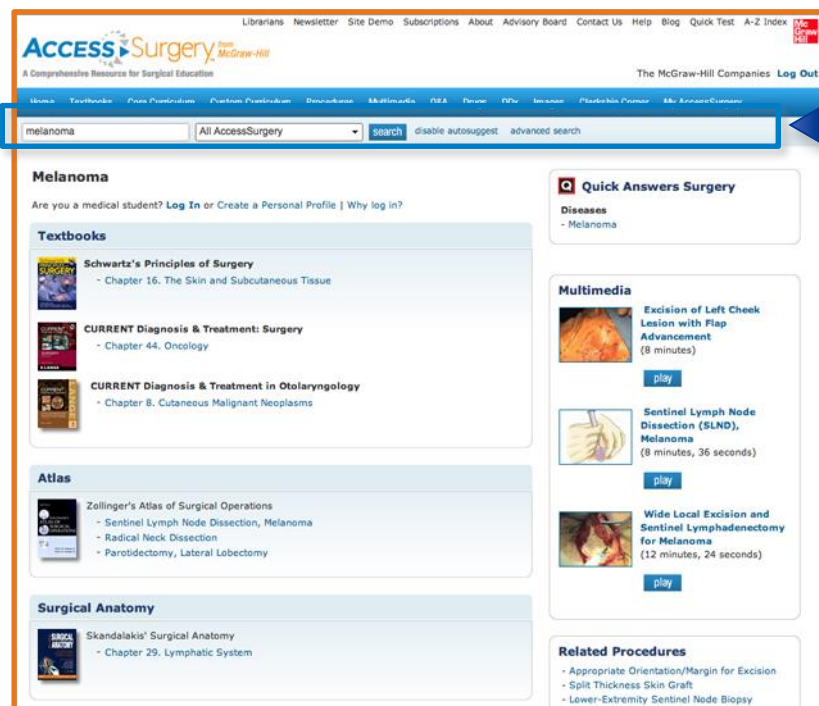
ROTATION: McGraw-Hill Testing Curriculum
Description: sample rotations

TOPIC: **Test Shared Topic**  **33% COMPLETE**

(Adapted from a The McGraw-Hill Companies Custom rotation)

TOPIC: **Test History Tracking Test Topic 2 - SSC**  **50% COMPLETE**
all you ever wanted to know about losing your appendix
(Adapted from a The McGraw-Hill Companies rotation)

TOPIC: **Test History Tracking Test Topic - SSC**  **33% COMPLETE**
all you ever wanted to know about losing your appendix
(Adapted from a The McGraw-Hill Companies rotation)

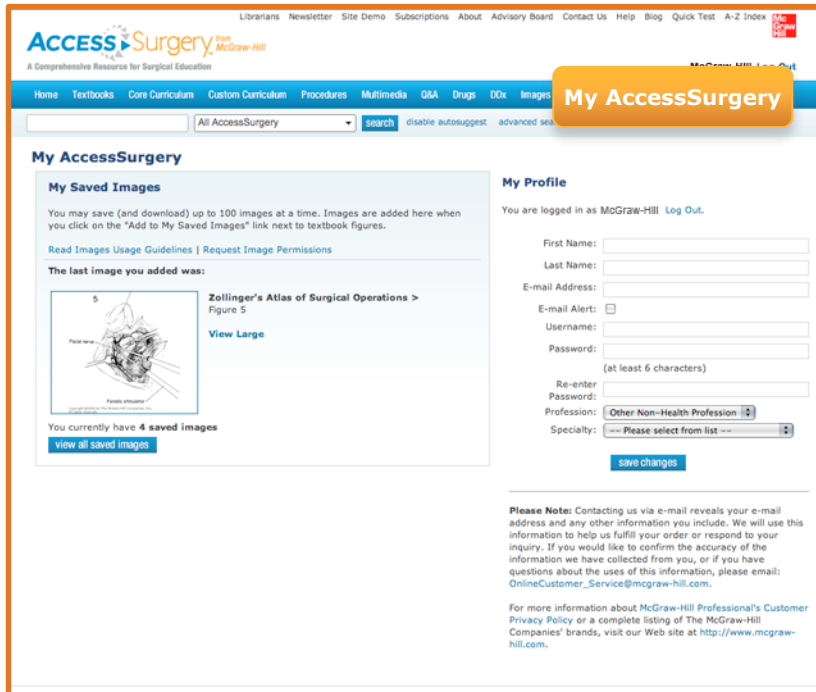


The screenshot shows the AccessSurgery website interface. At the top, there is a navigation bar with links like Librarians, Newsletter, Site Demo, Subscriptions, About, Advisory Board, Contact Us, Help, Blog, Quick Test, and A-Z Index. Below this is a search bar where 'melanoma' has been entered. The search results are displayed in a grid format. On the left, under the 'Textbooks' section, there are three items: 'Schwartz's Principles of Surgery' (Chapter 16: The Skin and Subcutaneous Tissue), 'CURRENT Diagnosis & Treatment: Surgery' (Chapter 44: Oncology), and 'CURRENT Diagnosis & Treatment in Otolaryngology' (Chapter 8: Cutaneous Malignant Neoplasms). Below this is the 'Atlas' section, featuring 'Zollinger's Atlas of Surgical Operations' with links to 'Sentinel Lymph Node Dissection, Melanoma', 'Radical Neck Dissection', and 'Parotidectomy, Lateral Lobectomy'. The 'Surgical Anatomy' section lists 'Skandalakis' Surgical Anatomy' (Chapter 29: Lymphatic System). On the right, the 'Quick Answers Surgery' section lists 'Diseases' and 'Melanoma'. Below this is the 'Multimedia' section, which includes three video thumbnails: 'Excision of Left Cheek Lesion with Flap Advancement' (8 minutes), 'Sentinel Lymph Node Dissection (SLND), Melanoma' (8 minutes, 36 seconds), and 'Wide Local Excision and Sentinel Lymphadenectomy for Melanoma' (12 minutes, 24 seconds). Each video has a 'play' button. At the bottom right, the 'Related Procedures' section lists 'Appropriate Orientation/Margin for Excision', 'Split Thickness Skin Graft', and 'Lower-Extremity Sentinel Node Biopsy'.

All AccessSurgery content is semantically tagged to give users the most relevant search results possible


My AccessSurgery allows users to create a personal profile to:

- Log onto their account
- Save and download images and text for educational use
- Retrieve assignments from their instructors



The screenshot shows the 'My AccessSurgery' user profile page. The page has a blue header with the 'ACCESS Surgery from McGraw-Hill' logo and a navigation menu. A search bar is located below the header. The main content area is divided into two columns. The left column, titled 'My AccessSurgery', contains a section for 'My Saved Images' which includes a list of saved images, a 'View Large' button, and a 'view all saved images' link. The right column, titled 'My Profile', contains a form for user information including First Name, Last Name, E-mail Address, E-mail Alert, Username, Password, Re-enter Password, Profession, and Specialty. A 'save changes' button is at the bottom of the profile form. A 'Please Note' section at the bottom of the page provides contact information for customer service.

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The last image you added was:

5 [Zollinger's Atlas of Surgical Operations >](#)
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