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The Textbook of Non-Medical Prescribing Dilyse Nuttall, Jane Rutt-Howard, 2015-06-15 The Textbook of Non Medical Prescribing is an easy to read comprehensive overview of the essential knowledge key issues and skills relevant to non medical prescribing Now fully updated and linked to the National Prescribing Centre Single Competency Framework for non medical prescribers with activities to help you link your continuing professional development within the competences required as a prescriber This practical title remains an ideal resource for all qualified health professionals to practice safe and effective non medical prescribing The section edition is structured around four core themes public health social and cultural issues prescribing principles and continuing professional development which are threaded throughout the text It also includes additional material on the importance on continuing professional development in prescribing as well as the history and context of non medical prescribing ethical legal and professional issues effective consultations essential pharmacology clinical skills prescribing for specific groups and the role of the multidisciplinary team Key Features Accessible and study friendly Each chapter has learning objectives and activities to support a deeper understanding of the theoretical knowledge base and its application to practice Case studies linking the topics to real life scenarios Companion website at www.wiley.com/go/nuttall with a range of self assessment questions quizzes numeracy exercises case studies and weblinks The Textbook of Non Medical Prescribing provides support to anyone studying for a prescribing qualification or looking for a refresher on the subject

The Maudsley Practice Guidelines for Physical Health Conditions in Psychiatry David M. Taylor, Fiona Gaughran, Toby Pillinger, 2020-10-14 Learn to improve your assessment investigation and management of physical health conditions in people with severe mental illness The Maudsley Practice Guidelines for Physical Health Conditions in Psychiatry offers psychiatric and general

practitioners an evidence based and practical guide for the appropriate assessment investigation and management of common physical health conditions seen in people with severe mental illness Written by a renowned team of respected experts in medicine surgery pharmacy dietetics physiotherapy and psychiatry the book bridges the gap between psychiatric and physical health services for the severely mentally ill The Maudsley Practice Guidelines for Physical Health Conditions in Psychiatry also provides practitioners with expert guidance on making effective referrals to other medical and surgical subspecialties telling readers what information subspecialties would expect to receive Its use will improve the quality of clinical care received by mentally ill patients and by promoting a holistic approach to treatment that considers both body and mind will enhance the therapeutic relationship between patient and practitioner The Maudsley Practice Guidelines for Physical Health Conditions in Psychiatry covers the following Guidance on assessment and management of well over a hundred different medical and surgical presentations commonly seen in people with serious mental illness Management of physical health emergencies in a psychiatric setting Evidence based approaches to management of physical side effects of psychiatric medications Advice on approaches to promote a healthy lifestyle in people with serious mental illness such as smoking cessation and changes to diet and physical activity Perfect for both psychiatrists and general practitioners who wish to improve the quality of care they provide to people with serious mental illness The Maudsley Practice Guidelines for Physical Health Conditions in Psychiatry will be of use to anyone setting out to navigate the divide between the treatment of psychiatric and physical health conditions

A Cost-Benefit Analysis of Case Management Activities for Diabetes Felix J. Bradbury, 2010-06 The economic and human costs of diabetes in the U S population place an enormous burden on its healthcare system as well as on employers diabetics and their respective families Many Medicare Advantage plans have responded to this burden by implementing diabetes case management programs DCMPs aimed at reducing inappropriate health services utilization improving health outcomes and containing costs While the use of DCMPs is common to many health plans the research regarding their effectiveness has been sparse or inconclusive The purpose of this study was to help fill a critical gap in the research literature by evaluating the effect of a diabetes case management program known as CareContact on a Medicare population in Texas The study population consisted of 2 972 confirmed diabetic members who were continuously enrolled in SelectCare of Texas a Medicare Advantage plan for the two year period between January 1 2005 and December 31 2006 To be eligible for this study diabetic members had to have a minimum of 6 months without exposure to CareContact and 6 months of exposure to CareContact after the initial exposure Twelve separate cohorts defined by date of initial program exposure were evaluated using a one group interrupted time series design Cross sectional time series analysis which combines ordinary least square regression techniques and time series analyses was used to evaluate program effectiveness After controlling for confounders and the effects of time the data indicated that membership in the DCMP was associated with increased costs and increased utilization over the two year study period The study points to the

need for further research into the effectiveness of diabetes case management programs especially for participants of Medicare Advantage health plans

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Table of Contents Oxford Handbook Of Clinical Medicine 9

1. Understanding the eBook Oxford Handbook Of Clinical Medicine 9
 - The Rise of Digital Reading Oxford Handbook Of Clinical Medicine 9
 - Advantages of eBooks Over Traditional Books
2. Identifying Oxford Handbook Of Clinical Medicine 9
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Oxford Handbook Of Clinical Medicine 9
 - User-Friendly Interface
4. Exploring eBook Recommendations from Oxford Handbook Of Clinical Medicine 9
 - Personalized Recommendations
 - Oxford Handbook Of Clinical Medicine 9 User Reviews and Ratings
 - Oxford Handbook Of Clinical Medicine 9 and Bestseller Lists

-
5. Accessing Oxford Handbook Of Clinical Medicine 9 Free and Paid eBooks
 - Oxford Handbook Of Clinical Medicine 9 Public Domain eBooks
 - Oxford Handbook Of Clinical Medicine 9 eBook Subscription Services
 - Oxford Handbook Of Clinical Medicine 9 Budget-Friendly Options
 6. Navigating Oxford Handbook Of Clinical Medicine 9 eBook Formats
 - ePub, PDF, MOBI, and More
 - Oxford Handbook Of Clinical Medicine 9 Compatibility with Devices
 - Oxford Handbook Of Clinical Medicine 9 Enhanced eBook Features
 7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Oxford Handbook Of Clinical Medicine 9
 - Highlighting and Note-Taking Oxford Handbook Of Clinical Medicine 9
 - Interactive Elements Oxford Handbook Of Clinical Medicine 9
 8. Staying Engaged with Oxford Handbook Of Clinical Medicine 9
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Oxford Handbook Of Clinical Medicine 9
 9. Balancing eBooks and Physical Books Oxford Handbook Of Clinical Medicine 9
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Oxford Handbook Of Clinical Medicine 9
 10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
 11. Cultivating a Reading Routine Oxford Handbook Of Clinical Medicine 9
 - Setting Reading Goals Oxford Handbook Of Clinical Medicine 9
 - Carving Out Dedicated Reading Time
 12. Sourcing Reliable Information of Oxford Handbook Of Clinical Medicine 9
 - Fact-Checking eBook Content of Oxford Handbook Of Clinical Medicine 9
 - Distinguishing Credible Sources
 13. Promoting Lifelong Learning

- Utilizing eBooks for Skill Development
- Exploring Educational eBooks

14. Embracing eBook Trends

- Integration of Multimedia Elements
- Interactive and Gamified eBooks

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