CASE STUDIES
41 Late-Presenting Complications After Splenic Trauma.
Sandra Freiwald, MD, FACS

The management of blunt splenic trauma has evolved from almost exclusive surgical management to selective nonsurgical management in hemodynamically stable patients. Understanding the spleen’s immunologic importance in protection against overwhelming postsplenectomy infection led to surgical splenic salvage and later to nonsurgical management (60% of adults). This article describes a pancreatic pseudocyst, a delayed complication of nonsurgical management.

45 Echinococcus of the Liver Treated with Laparoscopic Hepatectomy.
Erina N Foster, MD; Cabor Hertz, MD

Echinococcosis or hydatid disease is endemic to many countries where livestock, mainly sheep and cattle, are raised with dogs that act as the definitive hosts for the adult phase of the echinococcal tapeworm. We report a case of a man, age 22 years, who emigrated from Kyrgyzstan as an adult, presenting with abdominal fullness and nausea. A 9 cm echinococcal cyst of the liver was successfully treated with laparoscopic hepatectomy.

47 Humanizing Patients through Narrative Approaches: The Case of Murphy, the “Motor-Mouth.”
Michael Pickren Valenti, MA; Lewis Mehl-Madrona, MD, PhD, MPhil

Some psychiatric patients are presented as hopeless, burned out, and devoid of social graces. A narrative perspective allows anyone to emerge as a richly complex human being. Murphy in story emerges as a more interesting, worthy of knowing, and richly complex human being than the clinical Murphy constructed by medical staff. This approach fosters a more therapeutic and effective relationship between patients and staff.

CLINICAL MEDICINE
53 ECG Diagnosis: Wolff-Parkinson-White Syndrome.
Joel T Levis, MD, FACEP, FAAEM

Wolff-Parkinson-White Syndrome—the presence of an accessory pathway and a predisposition to the development of supraventricular tachydysrhythmias—results in conduction that circumvents delay within the atrioventricular node, leading to early eccentric activation of the ventricles and fusion complexes. Unstable patients should receive immediate electrical cardioversion. Stable patients can be chemically cardioverted with IV procainamide.

54 Image Diagnosis: Ankle Fractures and Dislocations.
Sundeep R Bhat, MD; Gus M Carmel, MD, FACEP, FAAEM

Standard radiographs for suspected ankle injury include anterior-posterior, lateral, and mortise views. This series features: a subtle fracture of the distal fibula; a bimalleolar ankle fracture; a trimalleolar ankle fracture, and a talar neck fracture-dislocation.

Corridor Consult
62 Hyponatremia—What Is Cerebral Salt Wasting?
Jasminder Momi, MD; Christopher M Tang, MD; Antoine C Abcar, MD; Dean A Kujubu, MD; John J Sim, MD

Hyponatremia, a common electrolyte imbalance in hospitalized patients, is associated with significant morbidity and mortality, if the underlying cause is incorrectly diagnosed. The hospitalist is faced with a clinical dilemma when there is hyponatremia of unclear etiology and uncertain volume status. The syndrome of inappropriate antidiuretic hormone is frequently diagnosed in this clinical setting, but cerebral salt wasting is an important diagnosis to consider.

COMMENTARY
66 On Being a Time-Space Copilot: 35 Years of Practicing Psychotherapy.
William J Cook, MSW, LSW

A mental health therapist shares personal triumphs and frustrations, exploring the integration of mental and physical health and the joys and challenges of caring for patients.

70 The Case for Unit-Based Teams: A Model for Frontline Engagement and Performance Improvement.
Paul M Cohen; Mark Ptaskiewicz, MD; Debra Mipos

Unit-based teams (UBTs)—defined as natural work groups of physicians, managers, and frontline staff who work collaboratively—are designed to deliver measurable benefits in clinical outcomes and operations, patient-experience enhancements, and physician-team performance or work life. This article presents case examples of successful UBTs’ outcomes, and physicians’ comments on their experience working with teams.