the steep granite wall to the valley far below. The majestic falls seemed to flow from clouds down appeared as cotton candy in the foreground while background. The snow clinging to leafless brush open area where Yosemite Falls was visible in the after hiking out from a thicket of trees to a large of the park’s landmarks. This photo was shot his days off to find unique angles and perspectives Berkeley, CA. He loves traveling to Yosemite on quarter, and accessed by 700,000 unique Web readers in the last 12 months from 164 countries. 100x718 80 CME EVALUATION FORM


Winter 2012/Volume 16 No. 1

ON THE COVER "Yosemite Winter Scene" by Gary Larsen taken in Yosemite National Park during the winter months to capture its stunning beauty after a fresh blanket of snow covered the valley floor. Mr. Larsen is a Clinical Photographer in the bacteriology section of the Northern California Regional Laboratory in Berkeley, CA. He loves traveling to Yosemite on his days off to find unique angles and perspectives of the park's landmarks. This photo was shot after hik –ing out from a thicket of trees to a large open area where Yosemite Falls was visible in the background. The snow clinging to leafless brush appeared as cotton candy in the foreground while the majestic falls seemed to flow from clouds down the steep granite wall to the valley far below.

Books published by Permanente authors:

Practical Nuclear Cardiology
James Spiegelhalter, PhD, and Calvin Webber

Handbook of Adolescent Medicine and Health Promotion
James J Annesi, PhD
Chapter 35: Behavioral Weight Loss Treatments and Their Outcomes

The Power of the Words
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However, if you have any questions about the content, feel free to ask! 😊
Gathering
SPECIAL REPORTS

51 A Case of Baffling Fatigue with a Spectral Twist.
Kate Scannell, MD, FACP

Mr. Gee had increasingly experienced “episodes” of abrupt elevations of systolic blood pressure beyond 200 mmHg that occurred at night, when he also had headaches, tinnitus, nausea, and fear of a stroke. Laboratory and radiographic tests were negative. Encouraging a patient to frame his illness within his own experience of its beginning, its current middle, and its imagined ending will often expose clarifying diagnostic clues. This case study illustrates clinical empathy in action.

Commentary

52 Gathering the Patient’s Story and Clinical Empathy.
Jodi Halpern, MD, PhD

Until the 1990s, physicians have been skeptical about empathy, assuming that it would interfere with clinical objectivity and effectiveness. This has shifted as research has shown that empathy plays a fundamental role in both diagnostic accuracy and treatment effectiveness. Often confused with compassion, sympathy, and other benevolent emotions, clinical empathy involves emotional resonance, but is distinguished by curiosity. Helping patients tell their stories is one way to “practice” empathy.

REVIEW ARTICLES

Carrie Davino-Ramaya, MD; I Kendall Krause, MD; MPH; Craig W Robbins, MD, MPH; Jeffrey S Harris, MD, MPH; Margarette Koster, MA, MFT; Wiley Chan, MD; Gladys I Tom, MS

The practice-guideline process of collecting, critically appraising, and synthesizing available evidence, then developing expert panel recommendations based on appraised evidence, makes it possible to do the best for patients at the point of care. A multidisciplinary group of stakeholders conduct high-quality systematic reviews either of acceptable external guidelines, then an internal search for relevant reviews, meta-analyses, and original studies, which are then appraised using GRADE. Recommendations are disseminated through the e-Clinical Library.

CASE STUDIES

64 Altered Mental Status in an Elderly Woman with Concurrent Takotsubo Syndrome and Polymyalgia Rheumatica: A Case of Treatable Geriatric Delirium.
Hien Nguyen, MD; Connie Le, MD; Hanh Nguyen, MD; Nam-Tran Nguyen

The authors describe a unique case of a patient, aged 80 years, who presented with delirium and takotsubo syndrome, known as “broken heart syndrome,” because it often follows emotional stress. Though difficult to distinguish from myocardial infarction, it is associated with favorable prognosis for complete recovery. This is the first case reported in an elderly patient, who also had coexistent polymyalgia rheumatica.

Samir Johna, MD; Taylor Tang, MD; Maryam Saidy, MD

The surgical morbidity and mortality conference currently focuses mainly on human errors rather than system failures. Root cause analysis can be an effective way of analyzing system failures and of finding possible solutions for them. Having both perspectives—human errors and systems failures—enhances surgical education, improving quality assurance, and improving patient safety.

CLINICAL MEDICINE

70 Image Diagnosis: Perilunate and Lunate Dislocations.
Jennifer A Newberry, MD, JD; Gus M Garmel, MD, FACEP, FAEM

In perilunate dislocation, the distal and proximal carpal rows overlap and the radial styloid may be completely fractured, with dorsal dislocation of the capitate. It is most commonly seen in young men (teens to 20s), from a high-energy hyperextension mechanism, often caused by falling on an outstretched hand. In lunate dislocation, it displaces volar (the “spilled teacup sign”), and the capitate is dorsal to the lunate.

EDITORIAL

Narrative Medicine

74 The Physician as Storyteller & Poet: Quick Writes from East Bay Writers' Workshops.
Tom Janisse, MD; Betty Lin, MD

In this issue, the authors review the importance of reflective writing and present 15 stories and 2 poems written in 10 minutes by physicians and practitioners at 2 writing workshops designed to use creativity as a means of dealing with the stress of a medical career, enhancing coping skills, strengthening the ability to attend empathetically to a patient’s experience of illness, and improving well-being.

SOUL OF THE HEALER

Original Visual Art

34 “Butterfly”
Thomas Faluch, MD

46 “Leopard”
Calvin Weisberger, MD

63 “Green Bridge—Florence, OR”
John Davenport, MD, JD