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Except where otherwise stated, drug doses and recommendations are for the non-pregnant adult who is not breast-feeding.
Oxford Handbook of Clinical and Laboratory Investigation

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## Contents

Contributors vi  
Foreword by Professor Sir George Alberti viii  
Preface ix  
Acknowledgements x  
Symbols & abbreviations xi  
Introduction: Approach to investigations xix  

### Part 1  The patient  
1 Symptoms and signs 3  

### Part 2  Investigations  
2 Endocrinology and metabolism 99  
3 Haematology 165  
4 Immunology 241  
5 Infectious & tropical diseases 257  
6 Cardiology 303  
7 Gastroenterology 325  
8 Respiratory medicine 355  
9 Neurology 383  
10 Renal medicine 423  
11 Poisoning and overdose 459  
12 Rheumatology 487  
13 Radiology 495  
14 Nuclear medicine 539  
15 Normal ranges 583  

Index 585
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This book fills an obvious gap in the Handbook series and indeed a major lacuna in the medical literature. Too often investigations of a particular condition are lost in the welter of other text. Alternatively, they appear as specialist books in pathology and radiology. One unique feature of this book is the inclusion of all clinical investigative techniques, i.e. both truly clinical tests in the shape of symptoms and signs and then laboratory-based investigations. This stops what is often an artificial separation. Each section is clearly put together with the intent of easing rapid reference. This is essential if the book is to have (and I believe it does have) real usefulness for bedside medicine. There are many other useful aspects of the text. These include a comprehensive list of abbreviations—the bugbear of medicine, as well as reference ranges which some laboratories still do not append to results. Overall, the Handbook should be of benefit to not just clinical students and junior doctors in training, but all who have patient contact. With this in one pocket, and Longmore in the other, there should be little excuse for errors in diagnosis and investigation, with the added benefit that the balance between the two will allow the upright posture to be maintained.

Professor Sir George Alberti
President of The Royal College of Physicians of London
July 2002
Preface

With the increasing complexity of modern medicine, we now have literally thousands of possible investigative techniques at our disposal. We are able to examine our patient’s serum and every other body fluid down to the level of individual nucleotides, as well as being able to perform precise imaging through CT, MRI and other imaging technologies. The problem we have all faced, especially as senior medical students or junior doctors is: which test should we use in a given setting? What hazards are associated with the tests? Are there any situations where specific tests should not be used or are likely to produce erroneous results? As medical complexity increases so too does cost; many assays available today are highly expensive and wherever possible we would ideally like to use a test which is cheap, reliable, reproducible and right for a given situation.

Such knowledge takes many years to acquire and it is a fact of life that senior doctors (who have attained such knowledge) are not usually those who request the investigations. In this small volume, we have attempted to distil all that is known about modern tests, from blood, urine and other body fluids, along with imaging and molecular tests. The book is divided into two principal parts: the first deals with symptoms and signs in The patient section, because that is how patients present. We have tried to cover as many topics as possible, discussing these in some detail and have provided differential diagnoses where possible. We also try to suggest tests that might be of value in determining the cause of the patient’s symptom or sign. The second part of the book, Investigations, is specialty-specific, and is more relevant once you know roughly what type of disease the patient might have. For example, if the symptom section suggests a likely respiratory cause for the patient’s symptoms, then the reader should look to the Respiratory investigations chapter in order to determine which tests to carry out, or how to interpret the results.

The entire book is written by active clinicians, rather than scientists, since we wanted to provide a strong clinical approach to investigation. We have tried, wherever possible, to cross-refer to the Oxford Handbook of Clinical Medicine, 5th edition, Oxford University Press, which provides the clinical detail omitted from this handbook. The symbol is used to highlight a cross-reference to OHCM, in addition to cross-referencing within this book.

We would value feedback from readers since there will doubtless be tests omitted, errors in the text and many other improvements we could, and will, make in future editions. All contributors will be acknowledged individually in the next edition. We would suggest you e-mail us directly: a.provan@virgin.net.

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2002