

# Examination Medicine Talley

## Melena

*intake, and a history of peptic ulcer disease. Talley, Nicholas; O'Connor, Simon (2014). Clinical Examination: A Systematic Guide To Physical Diagnosis (7th ed*

Melena is a form of blood in stool which refers to the dark black, tarry feces that are commonly associated with upper gastrointestinal bleeding. The black color and characteristic strong odor are caused by hemoglobin in the blood being altered by digestive enzymes and intestinal bacteria.

## Pulmonary consolidation

*physical examination&quot;. JAMA: The Journal of the American Medical Association. 278 (17): 1440–5. doi:10.1001/jama.278.17.1440. PMID 9356004. Talley, Nicholas*

A pulmonary consolidation is a region of normally compressible lung tissue that has filled with liquid instead of air. The condition is marked by induration (swelling or hardening of normally soft tissue) of a normally aerated lung. It is considered a radiologic sign. Consolidation occurs through accumulation of inflammatory cellular exudate in the alveoli and adjoining ducts. The liquid can be pulmonary edema, inflammatory exudate, pus, inhaled water, or blood (from bronchial tree or hemorrhage from a pulmonary artery). Consolidation must be present to diagnose pneumonia: the signs of lobar pneumonia are characteristic and clinically referred to as consolidation.

## Meningism

*Petersb Med Wochensch. 7: 398. O'Connor, Simon; Talley, Nicholas Joseph (2001). Clinical Examination: A Systematic Guide to Physical Diagnosis. Cambridge*

Meningism is a set of symptoms similar to those of meningitis but not caused by meningitis. Whereas meningitis is inflammation of the meninges (membranes that cover the central nervous system), meningism is caused by nonmeningitic irritation of the meninges, usually associated with acute febrile illness, especially in children and adolescents. Meningism involves the triad (3-symptom syndrome) of nuchal rigidity (neck stiffness), photophobia (intolerance of bright light) and headache. It therefore requires differentiating from other CNS problems with similar symptoms, including meningitis and some types of intracranial hemorrhage. Related clinical signs include Kernig's sign and three signs all named Brudzinski's sign.

Risk factors include kneeling or crawling. It may also be brought on by frequent bending of the knees while standing, squatting, running, or jumping. Diagnosis is generally based on symptom and physical examination. When the deep bursa is involved, bending the knee generally increases the pain. Other conditions that may appear similar include patellar tendonitis and prepatellar bursitis.

## Infrapatellar bursitis

*Physician. 95 (4): 224–231. PMID 28290630. Talley, Nicholas J.; O'Connor, Simon (2013). Clinical Examination: A Systematic Guide to Physical Diagnosis*

Infrapatellar bursitis, also known as pastor's knee, is inflammation of the superficial or deep infrapatellar bursa. Symptoms may include knee pain, swelling, and redness just below the kneecap. It may be complicated by patellar tendonitis.

Although nosologic coding systems, such as ICD-10 and MeSH, define meningism/meningismus...

Nick Talley

*clinical examination techniques. Talley and Connor also wrote the widely acclaimed Examination Medicine for postgraduate trainees. Talley wrote the*

Nicholas Talley is an Australian gastroenterologist, epidemiologist, researcher, and clinical educator. Most of his work centers on FGIDs. He currently serves as Distinguished Laureate Professor at the University of Newcastle, Australia and as Adjunct Professor at the University of North Carolina, USA. He is also Director, NHMRC Centre for Research Excellence in Transforming Gut Health and an NHMRC Leadership Fellow. He currently works as Senior Staff Specialist at John Hunter Hospital, Newcastle, Australia.

Treatment is generally by rest, alternating between ice and heat, and NSAIDs. Infrapatellar bursitis is relatively rare. Due to the kneeling being enjoined in church services...

Pulmonary regurgitation

*Current Medicine. p. 306. ISBN 978-1-4615-6603-8. Retrieved 29 August 2015. Connor, Nicholas J. Talley, Simon (2014). Clinical examination : a systematic*

Pulmonary (or pulmonic) regurgitation (or insufficiency, incompetence) is a condition in which the pulmonary valve is incompetent and allows backflow from the pulmonary artery to the right ventricle of the heart during diastole. While a small amount of backflow may occur ordinarily, it is usually only shown on an echocardiogram and is harmless. More pronounced regurgitation that is noticed through a routine physical examination is a medical sign of disease and warrants further investigation. If it is secondary to pulmonary hypertension it is referred to as a Graham Steell murmur.

List of medical textbooks

*field of pain research. Talley and Connor's Clinical Examination Macleod's Clinical Examination Bates' Guide To Physical Examination and History Taking Rook's*

This is a list of medical textbooks, manuscripts, and reference works.

Liver scratch test

*accurate for young trainees. Gupta, Krishan; Dhawan, Akash; Abel, Christian; Talley, Nicholas; Attia, John (2013-02-25). "A re-evaluation of the scratch test*

The liver scratch test (also known as Lazar's test) is a technique used by medical professionals during a physical exam to locate the inferior border of the liver in order to approximate the size of a patient's liver. The technique was first credited to Burton-Opitz in 1925 where it was used to identify the cardiac silhouette, however there are references of similar techniques used prior to this. The liver scratch test can be used when other exam techniques used to approximate liver size are ineffective or unavailable and is thought to be most useful if the abdomen is distended, too tender for direct palpation, the abdominal muscles are too rigid, or the patient is obese.

Iron supplements may cause a grayish-black stool that should be distinguished from melena, as should black coloration caused by a number of medications, such as bismuth subsalicylate (the active ingredient in Pepto-Bismol), or by foods such as beetroot, black liquorice, or blueberries.

Onycholysis can occur in many conditions, including psoriasis. In thyrotoxicosis, it is thought to be due to sympathetic overactivity. It may also be seen in infections or trauma.

Parasternal heave

*Laboratory Examinations. Butterworths. 1990. ISBN 9780409900774. Clinical Examination: A Systematic Guide to Physical Diagnosis 5th Edition Nicholas Talley Simon*

A parasternal heave, lift, or thrust is a precordial impulse that may be felt (palpated) in patients with cardiac or respiratory disease. Precordial impulses are visible or palpable pulsations of the chest wall, which originate on the heart or the great vessels.

#### Onycholysis

*Clinical Signs. Elsevier. p. 542. ISBN 978-0729540759. Talley&Connor (2006). Clinical Examination A Systematic Guide to Physical Diagnosis (5th ed.). Elsevier*

Onycholysis is a common medical condition characterized by the painless detachment of the nail from the nail bed, usually starting at the tip and/or sides. On the hands, it occurs particularly on the ring finger but can occur on any of the fingernails. It may also happen to toenails.

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