

# UP TO DATE

کتابخانه دانشکده پزشکی

# UpToDate

- ❖ یکی از پر استفاده‌ترین منابع اطلاعات بالینی جهان
- ❖ محصول کشور هلند که در سال ۱۹۹۲ راه اندازی شد.
- ❖ نیمه مبتنی بر شواهد
- ❖ یک سیستم حمایت از تصمیم‌گیری بالینی

# UpToDate

❖ موضوعات UpToDate توسط بیش از هزاران پزشک در حوزه‌های مختلف موضوعی در سراسر جهان نوشته می‌شود.

❖ UpToDate به صورت روزانه به روز می‌شود و پس از بررسی جامع مجلات مورد بررسی (تعداد ۴۵۰ مجله)، پایگاه‌های داده‌ای بالینی (مانند مدلاین، کوکران و ...) و سایر منابع به روزرسانی می‌شود.

# UpToDate

- ❖ جستجو در این پایگاه براساس topic است و بیش از 11,000 هزار موضوع را شامل می‌شود.
- ❖ امکان استفاده از عملگرهای جستجو (and, or, not, ...) وجود ندارد.
- ❖ قابلیت تعامل پایگاه با کاربران از طریق کامنت گذاشتن (feedback)
- ❖ دارای ارجاع به چکیده‌های Medline است.

این پایگاه توسط وزارت بهداشت خریداری شده است و برای دسترسی به آن باید VPN خود را وصل (connect) نمایید.

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# UpToDate شامل ۲۵ حوزه‌ی موضوعی پزشکی است.

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## Crohn's disease

Clinical manifestations and complications of inflammatory bowel disease in children and adolescents

Clinical manifestations and diagnosis of arthritis associated with inflammatory bowel disease and other gastrointestinal diseases

Clinical manifestations, diagnosis, and prognosis of Crohn disease in adults

Fertility, pregnancy, and nursing in inflammatory bowel disease

Genetic factors in inflammatory bowel disease

Investigational therapies in the medical management of Crohn disease

Management of Crohn disease after surgical resection

Medical therapies for Crohn disease in children and adolescents

# محدود کردن نتایج جستجو

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Showing results for **ascites** (instead of *acites*)

### Evaluation of adults with ascites

... of **ascites** depends upon an accurate diagnosis of its cause ( and and and ). This topic will review the evaluation of adults with **ascites**. Performance of paracentesis, specific causes of **ascites**, the...

- Initial ascitic fluid tests
- Differential diagnosis
- Summary and recommendations
- Approach dx ascites (Algorithms)
- Analysis of ascitic fluid (Tables)

### Ascites in adults with cirrhosis: Initial therapy

...percent of patients will have developed **ascites** . Successful treatment of the patient with **ascites** depends upon an accurate diagnosis regarding the cause of **ascites** formation . A careful history, physical ...

- Diuretic therapy
- Large-volume paracentesis
- Summary and recommendations

می‌توانیم نتایج جستجو را بر اساس بزرگسالان، کودکان، بیماران و گرافیک محدود نماییم.

# امکانات جستجو

جهت جستجو لازم است در کادر جستجو موضوع یا عبارت مورد نظر را وارد نماییم.

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ascites

ascites

ascites treatment

ascites fluid analysis

ascites management

ascites evaluation

ascites cirrhosis

همچنین می‌توان از ویژگی پیشنهادهای جستجو که توسط پایگاه ارائه می‌شود، استفاده نمود.

# جستجوی یک موضوع

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Showing results for **ascites**

**Evaluation of adults with ascites**

... of **ascites** depends upon an accurate diagnosis of its cause ( and and and ) . This topic will review the evaluation of adults with **ascites**. Performance of paracentesis, specific causes of **ascites**, the ...

- Initial ascitic fluid tests
- Differential diagnosis
- Summary and recommendations
- Approach dx ascites (Algorithms)
- Analysis of ascitic fluid (Tables)

**Ascites in adults with cirrhosis: Initial therapy**

...percent of patients will have developed **ascites** . Successful treatment of the patient with **ascites** depends upon an accurate diagnosis regarding the cause of **ascites** formation . A careful history, physical ...

- Diuretic therapy
- Medications to avoid or use with caution

نتایج مربوط به یک  
موضوع نمایش داده شده  
است.



# خلاصه‌ی بخش‌های مربوط به این موضوع که راهی سریع برای رسیدن به آن بخش است.

The screenshot shows the UpToDate website interface. At the top, there is a search bar with the text 'ascites' and a magnifying glass icon. To the right of the search bar, it says 'University of Medical Sciences'. Below the search bar, there is a navigation menu with options: 'Contents', 'Calculators', 'Drug Interactions', and 'UpToDate Pathways'. On the far right of this menu are 'Register' and 'Log In' buttons. Below the navigation menu, there are filters for 'All', 'Adult', 'Pediatric', 'Patient', and 'Graphics', along with a 'Collapse Results' button. The main content area shows 'Showing results for ascites'. The first result is 'Evaluation of adults with ascites', with a brief description and a list of sub-topics: 'Initial ascitic fluid tests', 'Differential diagnosis', 'Summary and recommendations', 'Approach dx ascites (Algorithms)', and 'Analysis of ascitic fluid (Tables)'. The second result is 'Ascites in adults with cirrhosis: Initial therapy', with a brief description and sub-topics: 'Diuretic therapy' and 'Medications to avoid or use with caution'. On the right side, a 'Topic Outline' sidebar is visible, listing the following sections: 'SUMMARY AND RECOMMENDATIONS', 'INTRODUCTION', 'ETIOLOGY', 'CLINICAL MANIFESTATIONS', 'Symptoms', 'Physical examination', 'Laboratory tests', and 'DIAGNOSIS'. The 'DIAGNOSIS' section is currently selected and highlighted. At the bottom of the sidebar, there is a watermark for 'Activate Windows'.

## Topic Outline

SUMMARY AND RECOMMENDATIONS

INTRODUCTION

ETIOLOGY

CLINICAL MANIFESTATIONS

Symptoms

Physical examination

Laboratory tests

DIAGNOSIS

History and physical examination

Imaging tests

Paracentesis

**ETIOLOGY**

There are numerous causes of ascites, but the most common cause of ascites in the United States is cirrhosis, which accounts for approximately 80 percent of cases ( [table 1](#) ) [4]. Up to 19 percent of patients with cirrhosis will have hemorrhagic ascites, which may develop spontaneously (72 percent probably due to bloody lymph and 13 percent due to hepatocellular carcinoma) or following paracentesis [5]. Other common causes of ascites include malignancy-related ascites and ascites due to heart failure.

Ascites can be classified based on the underlying pathophysiology [6]:

- Portal hypertension
  - Cirrhosis (see "[Pathogenesis of ascites in patients with cirrhosis](#)")
  - Alcoholic hepatitis (see "[Alcoholic hepatitis: Clinical manifestations and diagnosis](#)")



# نتایج جستجو

UpToDate® ascites University of Medical Sciences

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## Topic Outline

- SUMMARY AND RECOMMENDATIONS
- INTRODUCTION
- ETIOLOGY
- CLINICAL MANIFESTATIONS
  - Symptoms
  - Physical examination
  - Laboratory tests
- DIAGNOSIS
  - History
  - Imaging
  - Paracentesis
- DIFFERENTIAL DIAGNOSIS
- DETERMINING THE CAUSE OF THE ASCITES

### Evaluation of adults with ascites

**Author:** Bruce A Runyon, MD  
**Section Editor:** Keith D Lindor, MD  
**Deputy Editor:** Kristen M Robson, MD, MBA, FACC  
[Contributor Disclosures](#)

All topics are updated as new evidence becomes available and our [peer review process](#) is complete.  
Literature review current through: **Oct 2020**. | This topic last updated: **Apr 09, 2019**.

#### INTRODUCTION

Accumulation of fluid within the peritoneal cavity results in ascites. In the United States, ascites is most often due to portal hypertension resulting from cirrhosis. Other common causes include malignancy and heart failure. Successful treatment of ascites depends upon an accurate diagnosis of its cause ([table 1](#) and [table 2](#) and [table 3](#) and [algorithm 1](#)) [\[1\]](#).

This topic will review the evaluation of adults with ascites. Performance of paracentesis for the initial therapy of ascites in patients with cirrhosis, and the treatment of refractory ascites are reviewed separately. (See ["Diagnostic and therapeutic abdominal paracentesis"](#) and ["Bleeding and non-neoplastic ascites"](#) and ["Abdominal tuberculosis"](#) and ["Ascites"](#))

اطلاعاتی درباره‌ی نویسندگان و ویراستاران

ارجاع به چکیده‌های Medline

ارجاع به سایر موضوعات مرتبط که در UpToDate وجود دارد

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ascites



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## Medline® Abstract for Reference 1 of 'Evaluation of adults with ascites'

1 [Check for full text availability](#) | PubMed

TI Management of adult patients with ascites caused by cirrhosis.

AU Runyon BA

SO Hepatology. 1998;27(1):264.

Ascites is the most common of the major complications of cirrhosis. The development of ascites is an important landmark in the natural history of cirrhosis and has been proposed as an indication for liver transplantation. The initial evaluation of a patient with ascites should include a history, physical evaluation, and abdominal paracentesis with ascitic fluid analysis. Treatment should consist of abstinence from alcohol, sodium restricted diet, and diuretics. This regimen is effective in approximately 90% of patients. The treatment options for the diuretic-resistant patients include serial therapeutic paracenteses, liver transplantation, and peritoneovenous shunting.

AD Loma Linda Transplantation Institute, CA 92354, USA.

PMID 9425946

# Topic Feedback

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Your detailed comments will help us provide better content.

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# جستجوی algorithm

UpToDate® ascites algorithm × 🔍 University of Medical Sciences ▾

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Showing results for **ascites algorithm**

**Evaluation of adults with ascites**

... of **ascites** depends upon an accurate diagnosis of its cause ( and and and ). This topic will review the evaluation of adults with **ascites**. Performance of paracentesis, specific causes of **ascites**, the ...

- Determining the cause of the ascites
- Summary and recommendations
- Approach dx ascites (Algorithms)
- Serum albumin ascites gradient (Tables)





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omeprazole dosing

omeprazole side effects

omeprazole sodium bicarbonate

x



Wolters Kluwer

Language

برای جستجوی اطلاعات  
درباره‌ی یک دارو، نام دارو  
را در صفحه‌ی جستجو وارد  
می‌کنیم.



# نتایج جستجوی یک دارو

UpToDate®

Omeprazole



University of Medical Sciences

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Search instead: proton pump inhibitors

## UpToDate Pathways: Gastroesophageal reflux disease: Identification of adults who require upper endoscopy

The goal of this UpToDate Pathway is to help clinicians identify patients with gastroesophageal reflux disease (GERD) who should undergo upper endoscopy. The diagnosis of GERD can often be based on clinical symptoms alone if the patient reports classic symptoms such as heartburn and/or regurgitation.

## UpToDate Pathways: Helicobacter pylori: Initial treatment for adults

This UpToDate Pathway will help guide clinicians in selecting therapy for an adult with Helicobacter pylori infection who has not previously been treated. Several guidelines address the management of H. pylori. The recommendations in this UpToDate Pathway are generally consistent with the 2016 Toronto guidelines and the 2017 American College of Gastroenterology guidelines.

## Proton pump inhibitors: Overview of use and adverse effects in the treatment of acid related disorders

...among the compounds and is inversely proportional to the pKa of the benzimidazole (rabeprazole >omeprazole, esomeprazole, and lansoprazole >pantoprazole). The reactive species interacts with the external ...

Intravenous regimen

Selecting a PPI

## Omeprazole

General

Pediatric

Patient

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Dosing

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[Hepatic Impairment \(Adult\)](#)

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[Geriatric](#)

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# نتایج جستجوی یک دارو

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Omeprazole



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## Topic Outline

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Pharmacologic Category

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Dosing: Renal Impairment: Adult

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Dosing: Pediatric

Dosing: Renal Impairment: Pediatric

Dosing: Hepatic Impairment: Pediatric

Dosing: Geriatric

## Omeprazole: Drug information Lexicomp®

[Access Lexicomp Online here.](#)

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(For additional information see "[Omeprazole: Patient drug information](#)" and see "[Omeprazole: Pediatric drug information](#)")

For abbreviations and symbols that may be used in Lexicomp ([show table](#))

### Brand Names: US

Acid Reducer [OTC]; PriLOSEC; PriLOSEC OTC [OTC]

### Brand Names: Canada

APO-Omeprazole; BIO-Omeprazole; DOM-Omeprazole DR [DSC]; JAMP-Omeprazole DR; Losec; MYLAN-Omeprazole [DSC]; NAT-Omeprazole DR; Omeprazole-20; PMS-Omeprazole; PMS-Omeprazole DR; Priva-Omeprazole; RAN-Omeprazole; RATIO-Omeprazole [DSC]; RIVA-Omeprazole DR; SANDOZ Omeprazole; SANDOZ Omperazole; TEVA-Omeprazole; VAN-Omeprazole [DSC]

### Pharmacologic Category

Topic Feedback

# Drug interaction

- ❖ یکی از قابلیت‌های کلیدی UpToDate بخش تداخلات دارویی می‌باشد.
- ❖ UpToDate با همکاری Lexicomp بانک اطلاعات دارویی وسیعی را فراهم آورده که به کاهش خطرات و افزایش ایمنی بیمار کمک می‌کند.
- ❖ این بانک قابلیت تحلیل تداخل بین دارو با دارو، دارو با گیاه دارویی، گیاه دارویی - گیاه دارویی را دارد.



## داروهای متداخل براساس میزان خطر به درجه‌های A,B,C,D,X تقسیم می‌شوند:

**A:** نشان دهنده نبود تداخل بین دو دارو است.

**B:** امکان وجود تداخل بین دو دارو وجود دارد اما نیازی به تغییر یکی از داروها برای بیمار وجود ندارد.

**C:** امکان تداخل بین دو دارو وجود دارد. برای کاهش خطرات، نیاز به تغییر دوز مصرفی در یک یا هر دو دارو نیاز است.

**D:** امکان تداخل بین دو دارو وجود دارد. نیاز به مشاهده دقیق بیمار، تغییر دوز و جایگزینی داروهای معادل وجود دارد.

**X:** وجود تداخل بین دو دارو و نباید با یکدیگر مصرف شوند.

# Drug interaction

## Lexicomp® Drug Interactions

Add items to your list by searching below.

infiximab|



### ITEM LIST

Clear List

Analyze

– InFLIXimab

با انتخاب نام دارو، تمام  
تداخلات این دارو با داروهای  
دیگر نمایش داده می‌شود.

# Drug interaction

36 Results

[Print](#)

X	InFLIXimab (Anti-TNF Agents) Abatacept
X	InFLIXimab Adalimumab
X	InFLIXimab (Anti-TNF Agents) Anakinra
X	InFLIXimab (Immunosuppressants) BCG (Intravesical)
D	InFLIXimab (Immunosuppressants) Roflumilast
D	InFLIXimab (Immunosuppressants) Tofacitinib
D	InFLIXimab (Immunosuppressants) Vaccines (Inactivated)
C	InFLIXimab AzaTHIOprine
C	InFLIXimab (Immunosuppressants) Coccidioides immitis Skin Test
C	InFLIXimab (Immunosuppressants) Denosumab



# Drug interaction

## Lexicomp® Drug Interactions

Add items to your list by searching below.

### ITEM LIST

Clear List

Analyze

InFLIXimab

MetFORMIN

Display complete list of interactions for an individual item by clicking item name.

<b>X</b> Avoid combination	<b>C</b> Monitor therapy	<b>A</b> No known interaction
<b>D</b> Consider therapy modification	<b>B</b> No action needed	<a href="#">More about Risk Ratings</a> ▼

Filter Results by Item ▼

Print

No interactions of Risk Level A or greater identified.

DISCLAIMER: Readers are advised to consult the manufacturer's information about a drug (eg, package insert) for information on drug interactions, including changes in dosing or contraindications.

برای یافتن تداخل بین دو دارو، نام دو دارو را در جعبه جستجو وارد می‌کنیم و سپس Analyze را انتخاب می‌کنیم. تداخل بین دو دارو در کادر روبه‌رو نمایش داده می‌شود.

# Calculators

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# Calculators

## Calculator: Child Pugh score for severity of liver disease

### Encephalopathy

- None (1 point)
- Grade 1: Altered mood/confusion (2 points)
- Grade 2: Inappropriate behavior, impending stupor, somnolence (2 points)
- Grade 3: Markedly confused, stuporous but arousable (3 points)
- Grade 4: Comatose/unresponsive (3 points)

### Ascites

- Absent (1 point)
- Slight (2 points)
- Moderate (3 points)

### Bilirubin

- <2 mg/dL (1 point)
- 2 to 3 mg/dL (2 points)
- >3 mg/dL (3 points)

### Albumin

- >3.5 g/dL (1 point)
- 2.8 to 3.5 g/dL (2 points)
- <2.8 g/dL (3 points)

### Prothrombin time prolongation

- Less than 4 seconds above control/INR <1.7 (1 point)
- 4 to 6 seconds above control/INR 1.7 to 2.3 (2 points)
- More than 6 seconds above control/INR >2.3 (3 points)

# Calculators

## Encephalopathy

- None (1 point)
- Grade 1: Altered mood/confusion (2 points)
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## Prothrombin time prolongation

- Less than 4 seconds above control/INR <1.7 (1 point)
- 4 to 6 seconds above control/INR 1.7 to 2.3 (2 points)
- More than 6 seconds above control/INR >2.3 (3 points)

Total criteria point count:

## Child Pugh score interpretation

5 to 6 points: Child class A
7 to 9 points: Child class B
10 to 15 points: Child class C

# Patient Education

- UpToDate بیش از هزاران مبحث آموزش به بیمار را در سطوح مختلف جهت پاسخگویی به نیازهای اطلاعاتی بیماران فراهم می‌کند.
- مطالب این بخش شامل تصاویر، نمودار و جدول جهت کمک به خواننده برای درک وضعیت و مراقبت از خود می‌باشد.



# Patient Education

این مطالب در ۲ سطح زیر ارائه می شود:

- **The Basics**: به زبان ساده و کوتاه نوشته شده است و پاسخگوی چهار یا پنج سوال مهم افراد در خصوص یک مشکل پزشکی می باشد. برای افرادی که می خواهند دید کلی نسبت به موضوع داشته باشند گزینه مناسبی است.
- **Beyond the Basics**: این سطح طولانی تر و مفصل تر است و برای افرادی که اطلاعات جزئی را می خواهند و با برخی اصطلاحات پزشکی آشنایی دارند، مناسب است.



# Patient Education

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**The Basics**

Beyond the Basics

"The Basics" are short (1 to 3 page) articles written in plain language. They answer the 4 or 5 most important questions a person might have about a medical problem. These articles are best for people who want a general overview.

## Abdominal pain



[Appendicitis in adults \(The Basics\)](#) [View in Spanish](#)

[Appendicitis in children \(The Basics\)](#) [View in Spanish](#)


[Stomach ache and stomach upset \(The Basics\)](#) [View in Spanish](#)

## Anal cancer

# Patient Education

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## Topic Outline

- What is constipation?
- What causes constipation?
- What other symptoms should I watch for?
- Is there anything I can do on my own to get rid of constipation?
- Should I see a doctor or nurse?
- Are there tests I should have?
- How is constipation treated?
- Can constipation be prevented?

## Patient education: Constipation in adults (The Basics)

[View in Spanish](#)

[Written by the doctors and editors at UpToDate](#)

### What is constipation?

Constipation is a common problem that makes it hard to have bowel movements. Your bowel movements might be:

- Too hard
- Too small
- Hard to get out
- Happening fewer than 3 times a week

علت بیماری، علائم،  
درمان، تصاویر و  
جدول‌ها و ...

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## Topic Outline

CONSTIPATION OVERVIEW

CONSTIPATION DIAGNOSIS

When to seek help

CONSTIPATION TREATMENT

Behavior changes

Increase fiber

• Fiber side effects

LAXATIVES

Bulk forming laxatives

Hyperosmolar laxatives

Saline laxatives

Stimulant laxatives

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## Patient education: Constipation in adults (Beyond the Basics)

**Author:** [Arnold Wald, MD](#)

**Section Editor:** [J. Thomas Lamont, MD](#)

**Deputy Editor:** [Shilpa Grover, MD, MPH, AGAF](#)

Contributor Disclosures

All topics are updated as new evidence becomes

Literature review current through: Nov 20

### CONSTIPATION OVERVIEW

Constipation refers to a change in bowel habit

اطلاعاتی در مورد تشخیص،  
درمان، انواع، داروها، ارجاع  
برای کسب اطلاعات بیشتر،  
تصاویر و جدول‌ها و ...



# What's New

حاوی تعداد کمی از یافته‌های جدید براساس تخصص می‌باشد.

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## What's new in gastroenterology and hepatology

**Authors:** [Anne C Travis, MD, MSc, FACC, AGAF](#), [Shilpa Grover, MD, MPH, AGAF](#), [Kristen M Robson, MD, MBA, FACC](#)

[Contributor Disclosures](#)

All topics are updated as new evidence becomes available and our [peer review process](#) is complete.

Literature review current through: **Nov 2020**. | This topic last updated: **Dec 01, 2020**.

The following represent additions to UpToDate from the past six months that were considered by the editors and authors to be of particular interest. The most recent What's New entries are at the top of each subsection.

### ENDOSCOPY

**Smartphone app for augmenting bowel preparation instructions (June 2020)**

Bowel preparation is important for high quality colonoscopy, and digital tools are increasingly being used to augment the preparation instructions. In a trial of 500 patients who underwent colonoscopy, use of a

Topic Feedback



# Practice Changing Update

این بخش شامل تغییرات در خصوص عملکردهای بالینی است. تمرکز این بخش روی تغییراتی است که امکان دارد تأثیرات قابل توجه و گسترده‌ای در عملکرد بالینی داشته باشد.

The screenshot shows the UpToDate website interface. At the top, there is a search bar with the text "Search UpToDate" and a magnifying glass icon. To the right of the search bar, it says "University of Medical Sciences". Below the search bar is a navigation menu with options: "Contents", "Calculators", "Drug Interactions", "UpToDate Pathways", "Register", and "Log In".

The main content area is titled "Practice Changing Updates" and is highlighted with a red box. Below the title, it lists authors: "April F Eichler, MD, MPH, Sadhna R Vora, MD" and a link for "Contributor Disclosures". It states: "All topics are updated as new evidence becomes available and our peer review process is complete. Literature review current through: Nov 2020. | This topic last updated: Dec 03, 2020."

The "INTRODUCTION" section reads: "This section highlights selected specific new recommendations and/or updates that we anticipate may change usual clinical practice. Practice Changing Updates focus on changes that may have significant and broad impact on practice, and therefore do not represent all updates that affect practice. These Practice Changing Updates, reflecting important changes to UpToDate over the past year, are presented chronologically, and are discussed in greater detail in the identified topic reviews."

On the left side, there is a "Topic Outline" sidebar with a list of topics: "INTRODUCTION", "PRIMARY CARE (ADULT) (October 2020) Colchicine in patients with stable coronary artery disease", "CARDIOVASCULAR MEDICINE (October 2020) Antiplatelet therapy for transcatheter aortic valve implantation", "CARDIOVASCULAR MEDICINE (September 2020) Rhythm control for high-risk, early atrial fibrillation", and "INFECTIOUS DISEASES; OBSTETRICS, GYNECOLOGY AND WOMEN'S HEALTH".

At the bottom right, there is a "Topic Feedback" button and a "Windows" watermark with the text "Activate Windows. Go to Settings to activate Windows."

# Graphics

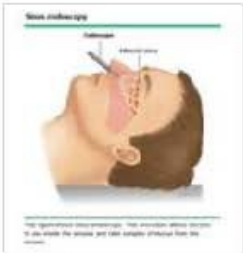











هزاران گرافیک در این پایگاه وجود دارد که شامل تصویر، جدول، نمودار، فیلم، الگوریتم می باشد.

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Showing results for **endoscopy**

-  **Sinus endoscopy**
-  **Upper endoscopy**
-  **Double balloon endoscopy system**
-  **Airway set up for endoscopy**
-  **Percutaneous gallbladder endoscopy showing gallstone**
-  **Gastric marginal zone lymphoma of mucosa associated lymphoid tissues (MALT) on endoscopy**
-  **Endoscopic view of a polypoid lesion**
-  **Endoscopic view of a polypoid lesion**
-  **Upper endoscopy showing shallow ulcer in the esophagus**
-  **Nasopharyngeal carcinoma on endoscopy**
-  **Hemodialyzed tuberculous Endoscopy**
-  **Endoscopic view of a polypoid lesion**

Activate Windows  
Go to Settings to activate Windows.

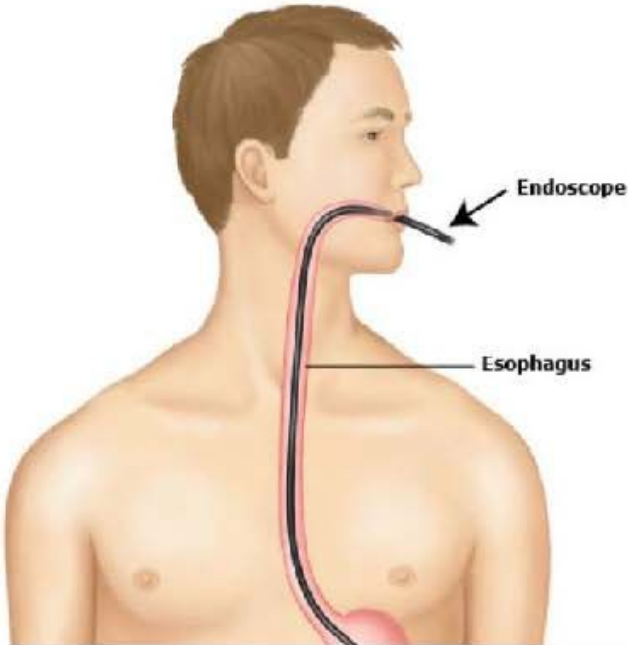
# Graphics

UpToDate<sup>®</sup> endoscopy University of Medical Sciences

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## Upper endoscopy



**APPEARS IN TOPICS:**

*Please view graphics in the context of the topic in which they appear below.*

- Patient education: Bloody stools in children (Beyond the Basics)
- Patient education: Carcinoid syndrome (The Basics)
- Patient education: Stomach cancer (The Basics)
- Patient education: Familial adenomatous polyposis (The Basics)
- Patient education: Angiodysplasia of the GI tract (The Basics)
- Patient education: Esophageal varices (The Basics)
- Patient education: Esophageal stricture (The Basics)
- Patient education: Achalasia (The Basics)
- Patient education: Minimally invasive surgery (The Basics)
- Patient education: Swallowed objects (The Basics)
- Patient education: Esophageal

Sinus endoscopy

Upper endoscopy of esophageal diffuse glycogenic acanthosis

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