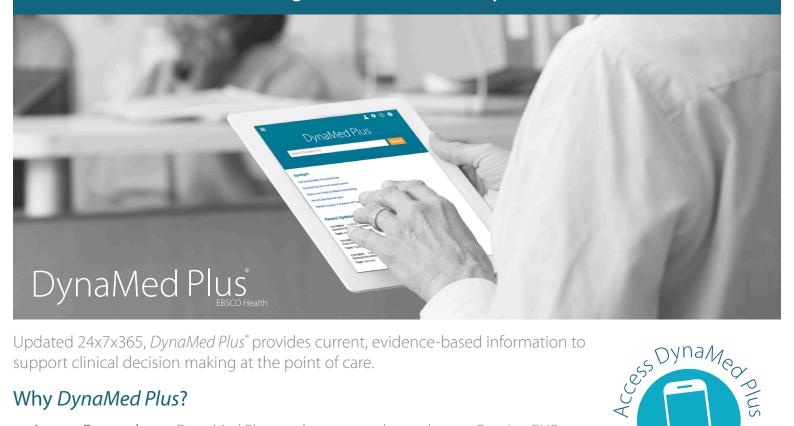
The Right Answers, **Every Time**



Updated 24x7x365, *DynaMed Plus*° provides current, evidence-based information to support clinical decision making at the point of care.

Why DynaMed Plus?

- Access Everywhere: DynaMed Plus can be accessed anywhere On-site, EHR, remote and mobile app.
- Ease of Navigation: Updates can be easily filtered to view by specialty area and practice-changing updates.



• Highest Quality Drug & Lab Content: From Micromedex® DRUGDEX and Lab Recommendations

What will I find in *DynaMed Plus*?



Updated 24x7x365



Micromedex® Drug Content



Evidence-Based Recommendations



Alerts When **Topics Change**



ZIME, ANYWHILE

Graphics and **Images**



Easy Access From EHRs



One-Click Access to Full-Text Articles

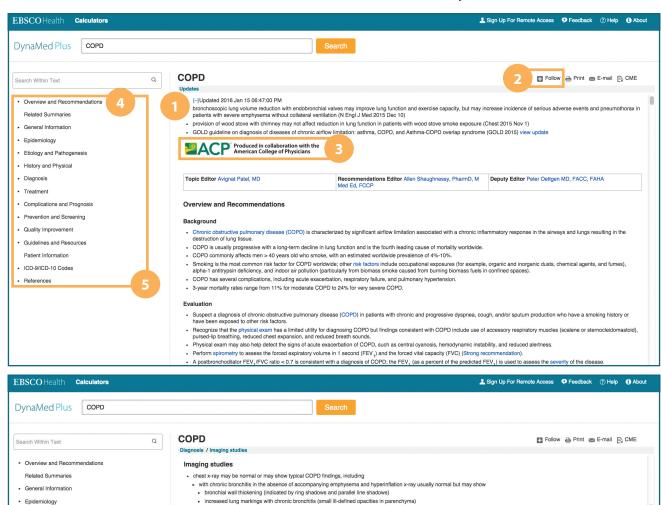


Mobile App



Remote Access

Content, Features & Functionality at a Glance...



Currency

The date of the most-recent update and the source of evidence is always displayed at the top of the topic.

Follow Feature

Users can quickly and easily set up alerts to be notified when topics are updated.

Etiology and Pathogenesis

Making the diagnosis

Differential diagnosis

Pulmonary function tests

Complications and Prognosis
 Prevention and Screening

Patient Information

• ICD-9/ICD-10 Codes

Blood tests
Imaging studies

Diagnosis

ACP Collaboration

prominent vessels (large central pulmonary arteries if pulmonary hypertension)

Saber-sheath trachea (trachea normal to level of thoracic inlet, then narrows in coronal plane)
 increased retrosternal airspace (> 2.5 cm between sternum and ascending aorta)

ching angles

nost Full Text full-text

signs of hyperinflation

diaphragmatic flattening
 seen best on lateral films

increased length of lung (> 30 cm)

Reference COPD 2007 Jun;4(2):143

signs of arterial deficiency in outer lung fields
 reduced number and size of pulmonary ves
 vessels distorted and may have increase.

perpendicular height < 1.5 cm indicates flattening

Internal medicine topics are developed and maintained jointly by *DynaMed Plus* and the American College of Physicians (ACP) clinical leadership.

. low diaphragm (considered low if border of right hemi-diaphragm in the midclavicular line lies at or below anterior end of seventh rib

Recommendations

Concise evidence-based recommendations with easily accessible supporting references and GRADE classifications.

Easy Navigation

Search within a topic or navigate using the linked table of contents.

6 PubMed Links

Easily access the PubMed citation for the original article and full text when available.

Visual Content

Images, algorithms and other visual content are included in topics where relevant.