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In his Operative Strategy in General Surgery, volume 1, Dr Jameson L. Chassin, professor of clinical surgery at New York University and director of surgery at Booth Memorial Hospital, presents to the reader his choice of one procedure for each of the common surgical problems in the gastrointestinal tract, from esophagus to rectum. He has chosen to present only one operation that he has found valuable and safe for each problem, because he has observed that "when many operative techniques by ...

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The Fourth Edition of Chassin's Operative Strategy in General Surgery: An Expositive Atlas is designed to expand this comprehensive and unique general surgery reference while remaining true to the special character of the work. This unique text continues to provide an emphasis on surgical strategy that is unmatched by other textbooks of surgical technique. It continues to comprehensively cover all non-vascular operations commonly performed by general surgeons. As always, Chassin's explains the conceptual basis of each operation, outlines strategies to avoid common pitfalls, and carefully describes and beautifully illustrates the technical steps of each operation. The Fourth Edition has been expanded and updated by adding both new procedures and new features. A significant new feature, "Documentation Basics" has been added to each chapter, providing a bulleted list of key features that need to be listed in the operative note to accurately describe extent of procedure and enhance accuracy of coding. General surgery continues to evolve. Procedures are added and many operations are done through new minimal access approaches. However, as a surgeon may be called upon to perform an operation that has become rare, Chassin's unique "legacy" material has been retained for reference. In addition, 17 new chapters have been added, including 4 new chapters on colorectal surgery. Over 1100 elegant illustrations and new radiographs accompany detailed textual explanations. More than ever, Chassin's Operative Strategy in General Surgery: An Expositive Atlas, Fourth Edition is an indispensable reference for all surgical residents and practicing surgeons.

This surgical atlas should be of great value to all clinical surgeons, both those in training and those in surgical practice, and Dr. Chassin is superbly qualified to author this work. During more than three decades as a member of the faculty of the New York University School of Medicine, he has taught countless residents many aspects of the art of surgical technique. One measure of Dr. Chassin's unusual teaching ability is that he is both Professor of Clinical Surgery at New York University and Director of Surgery at Booth Memorial Hospital, where our fourth-year surgical residents have rotated regularly for the past 12 years. Booth Memorial is the only hospital outside the New York University Medical Center to which New York University residents rotate. This simple fact well underlines Dr. Chassin's remarkable capability for teaching. When a surgical complication develops after an operation, two or three possibilities should be considered. First, of course, was the diagnosis correct? If it was, then the cause of the complication is usually either an inadequate operative technique or a flawed concept underlying the selection of the operative procedure. When the surgical technique seems faultless, a postoperative complication would strongly indicate that the concept

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was erroneous, albeit cherished perhaps for decades. Unlike any other atlas on operative technique, this book specifically discusses the conceptual basis of the operation as well as the strategy that will help the surgeon avoid common pitfalls.

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"Operative Strategy" is the advance plan that the surgeon develops to anticipate and avoid technical pitfalls and potential danger points of an operation. The goal is to make each surgical procedure safe and without complications. Completely revised and now under the editorship of Carol E.H. Scott-Conner, M.D., Chassin's Operative Strategies in General Surgery: An Expositive Atlas, Third Edition provides a clear exposition of all basic procedures including surgery of the digestive tract, breast, abdominal wall, selected head and neck, and endocrine system. Surgery is currently in a state of transition, and many procedures are being performed by minimally-invasive means. While some might argue that "old" operations should be discarded, no operations have been deleted from the text. These operations are still needed, and a surgeon may be called upon to perform an operation that has become rare. That is when this "legacy" material, unique to Chassin's, will be used. In addition, nineteen new chapters have been added, including seven new chapters featuring precise technical discussions of: -laparoscopic basics -laparoscopic nissen fundoplication -laparoscopic esophagomyotomy -laparoscopic plication of perforated ulcer -laparoscopic appendectomy -mesh repair of inguinal hernia -laparoscopic repair of inguinal hernia. Over 1000 elegant illustrations by Caspar Henselmann accompany detailed textual explanations. This book is an indispensable reference for all surgical residents and practicing surgeons.

Operative Techniques in Surgery is a new comprehensive, 2-volume surgical atlas that helps you master a full range of general surgical procedures. Ideal for residents as well as experienced surgeons, it guides you step-by-step through each technique using concise, bulleted text, full-color illustrations, and intraoperative photographs to clarify exactly what to look for and how to proceed.

Operative Dictations in General and Vascular Surgery, Second Edition is intended to teach residents the principles of succinct and precise operative dictations for a wide spectrum of surgical procedures. Designed as a portable resource, the book provides typical dictations to guide the resident. Comprised of 226 procedures, this new edition comprises the majority of procedures commonly performed by general and vascular surgeons. For each procedure, a list of common indications is given. This list covers 95% of the situations in which a particular procedure will be used. A list of essential steps follows. These can be used to mentally rehearse the procedure before it is performed. The next heading, Note these technical variations, introduces a list that is intended to prompt the surgeon for particular things to note and dictate within the template. A list of possible complications that are

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typically associated with that particular surgical procedure follows. Finally, a template operative dictation is provided. Common opening and terminating sequences (for example, how to enter and close the abdomen) in all laparotomy dictations are included. The volume has two primary objectives. First, it is designed to serve as a source of model operative dictations that may be individualized and used as templates. Second, it is intended as an aide-memoir, giving the surgeon a short list of pertinent information about each procedure. Ample space is provided to allow each surgeon to add notes. By reviewing this introductory material before scrubbing on a procedure, the trainee surgeon will enter the operating room better prepared to participate actively and to learn as much as possible. At the end of training, this book, with the notes accumulated by the resident, will serve as an invaluable review resource analogous to the individualized notebooks many surgeons keep. Operative Dictations in General and Vascular Surgery, Second Edition is intended for practicing surgeons, who may modify each template to reflect their own individual practice. It also serves as a concise reminder of essential steps in those operations that may be only rarely performed.

"As a resident at Washington University--Barnes Hospital in the 1990s, we were trained in Bassini, Cooper, Shouldice and then Lichtenstein repair. Every staff surgeon had a favorite repair and their own version of it. We learned the nuances of a transition stitch, releasing incision, and shutter mesh overlap. Mesh could be glued, sutured, tacked or stapled. The laparoscopic TAPP and later TEP mesh repair became very popular, and about the same time the American College of Surgeons was studying whether "watchful waiting" was a safer option in patients with asymptomatic inguinal hernias"--Provided by publisher.

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