## **Quick Guide**



# McGraw-Hill's ACCESSSURGERY

### **Custom Curriculum**

A cutting-edge functionality that enables program directors to create, track, and report usage of surgical rotations online. Program directors can choose to create or modify existing rotations; assign board review quizzes and set the passing grade; link out to references or other webbased resources; and schedule grand rounds, lectures, or other offline activities.

Custom Curriculum is part of an AccessSurgery subscription. To begin using Custom Curriculum in your residency program, contact your McGraw-Hill representative for information and set-up.

For residents, the Custom Curriculum provides a powerful educational tool. When they log on, the residents view the available rotations from their program director, as well as their own individual progress by rotation.



### **Core Curriculum**

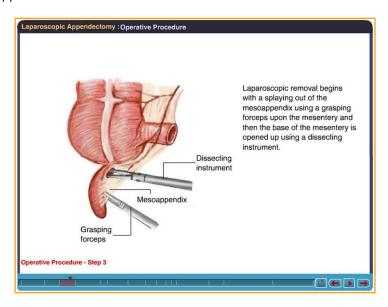
AccessSurgery is organized around a Core Curriculum designed for Residents in General Surgery. An ongoing national effort, the Core Curriculum mandate has pulled together key surgical organizations in an effort to develop a consistent general surgery educational framework.

### The Semantic Search Engine

The search engine is a state-of-the-art tool designed for sophisticated collections of medical information. It runs in conjunction with a layer of semantic metadata that has been applied to all of the information in the website so that the

content, though written by multiple authors and derived from many resources, is completely integrated and connected by topic-based medical language tags that are compliant with the Unified Medical Language System (UMLS), developed by the National Library of Medicine (NLM).

When a user searches for information on AccessSurgery, the search engine looks for matches with the metadata to deliver results based on matching search terms with concepts and topics, rather than matching exact words when they appear in the content. By focusing on broader concepts, practices, and procedures, users can find all the relevant discussions of the topic they are looking for, even if named differently in different resources.





### Advanced Search

In the infrequent cases when a user cannot find the results he or she is looking for by using the semantic search engine, full-text searches can be done by using the Advanced Search, which searches exact word matches in the data set and which allows the Boolean connectors "and" and "or."

### **MyAccessSurgery Account**

By creating a My AccessSurgery account, or personal profile, users save and maintain a collection of images from the site for educational or personal use, and bookmark important chapters and sections for future reference.

### **Finding References to Primary Literature**

A Bibliography or Reference section exists at the end of each chapter with links to the primary literature via PubMed (www.pubmed.gov).

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### **Videos and Animations**

AccessSurgery contains a regularly updated library of videos from Columbia University College of Physicians and Surgeons and Northwestern University Feinberg School of Medicine and animations adapted from *Zollinger's Atlas of Surgical Operations*.

Macromedia's free Flash Player (version 8 or higher) plug-in is required to view all video on this website.

### **Drug database**

The integrated, updated drug database provides critical information on medication indications, dosages, contraindications, and drug classes, as well as patient handouts in English and Spanish.

### **AccessSurgery Library Resource Center**

A centralized location for librarians and site administers to find marketing materials, product title lists, updates, the latest newsletters, product announcements, password-protected user statistics, and more.

### **AccessSurgery Blog**

Open to everyone and administered by an MD, the AccessSurgery Blog provides a forum for surgical residents and practicing surgeons to debate and share information on the latest advances in the field. The blog is also used to announce new content and features added to AccessSurgery. Debate is encouraged.

