

13th Edition
43rd Year of Publication



The Short Textbook of **PEDIATRICS**

Incorporating National and International Recommendations
(MCI, IAP, NNF, WHO, UNICEF, CDC, IPA, ISTP, AAP, etc.)

HIGHLIGHTS

- Thoroughly revised, updated and state-of-the-art
- Reader-friendly—bulleted format; profusely illustrated with algorithms/flowcharts, tables, boxes and clinical photographs
- Twelve new chapters on pediatric emergencies and intensive care
- MCQs and clinical problem solving reviews for self-assessment
- Tailor-made for students with easy-to-understand descriptions

Suraj Gupte

Foreword
Bakul J Parekh



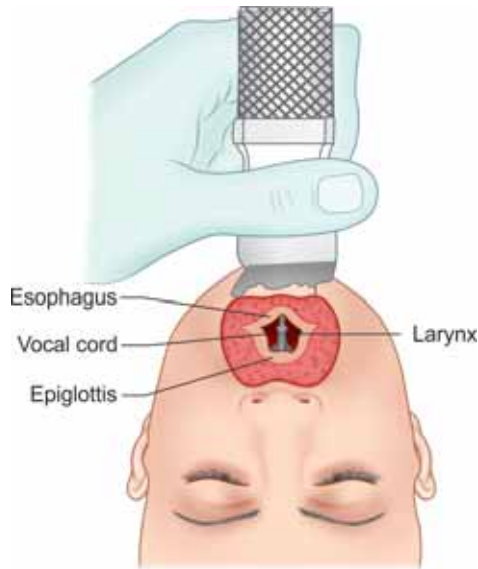
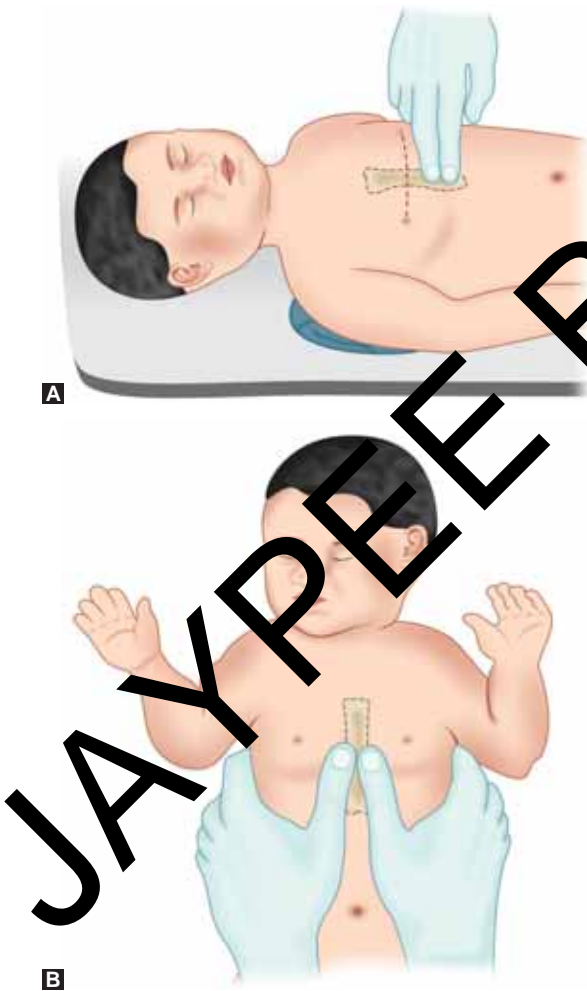


Fig. 17.21: Endotracheal intubation technique. The glottis (triangular opening formed by vocal cords and arytenoid cartilage) as viewed through laryngoscope.



Figs. 17.22A and B: Chest compression. It consists of rhythmic compressions (120/min; ratio 3:1 with ventilation) of lower third of the sternum if heart rate remains <60/minute. (A) Two-finger technique in which tips of the middle finger and an adjoining finger of a hand are employed to depress the lower one-third of the sternum; (B) Thumb technique in which thumbs of both hands are employed to depress the lower one-third of the sternum.

BOX 17.5: Chest compression.

Indications

If after 15–30 seconds of positive pressure ventilation (PPV) with 100% oxygen, heart rate remains <60/minute or it is 60–80/minute, but not increasing.

Site

Lower third of the sternum below the imaginary line drawn between two nipples.

Procedure

In the thumb technique, thumbs are employed to compress the sternum while the fingers support the back and the hand encircles the torso. In the two-finger technique, the finger tips (middle finger with index finger or ring finger), one hand are employed to compress the sternum. The other hand supports the neonate's back. The rate of chest compressions should be 120 beats/minute and depth 1–2 cm. During the procedure, fingers and thumbs must never be taken off the sternum in between compressions.

Evaluation

Thirty seconds of chest compression should be followed by rechecking of the heart rate. If it is below 80 beats/minute, the procedure should continue along with bag and mask ventilation with 100% oxygen, plus medication (vide text). If heart rate is more than 80/minute, stop chest compression but continue ventilation until heart rate crosses 100 beats/minute and the baby is breathing spontaneously.

Complications

Trauma to the chest in the form of fractures, pneumothorax, and laceration of liver.

ventilation has been established. It is indicated only in the event of documented metabolic acidosis. Else, there is risk of such a therapy producing respiratory acidosis.

Dopamine: 5–20 mg/kg/minute as a continuous IV infusion in poor peripheral perfusion, weak pulses, hypotension, tachycardia persisting after the initial resuscitative efforts.

In earlier guidelines, naloxone 0.01 mg/kg [IV, subcutaneous (SC), intramuscular (IM), IT] was recommended in case of history of maternal narcotic drug administration. New guidelines do not recommend naloxone.

Pulse Oximetry

The new guidelines have emphasized the use of pulse oximetry rather than the color of the baby (Box 17.6).

Supplementary Oxygen

The new guidelines stress the need for employing room air providing 21% oxygen (rather than using 100% oxygen) in

BOX 17.6: Pulse oximetry.

Pulse oximetry should be employed:

- When resuscitation is anticipated
- When positive pressure is administered for more than few breaths
- When cyanosis is persistent
- When supplementary oxygen is administered.

The probe should be attached to a preductal location, i.e. right upper extremity, usually wrist or medial surface of palm. Attaching the probe to the infant before connecting the probe to the instrument facilitates the most rapid acquisition of signal.

The Short Textbook of PEDIATRICS

The 13th fully revised, updated, and state-of-the-art edition of The Short Textbook of Pediatrics, the first and the foremost pediatric textbook from the Indian subcontinent, with a track record of excellence spread over 43 years, is a brilliant blend of time-honored concepts and the recent and ongoing advances with special accent on the scenario in India and the neighboring countries.

All chapters stand thoroughly updated to accommodate new knowledge, changing concepts and fresh concerns by the 69 expert contributors drawn from many countries. The special interests of the undergraduates [reader-friendliness, Medical Council of India (MCI) curriculum/syllabus, postgraduate entrance tests, etc.] are accorded a yet higher priority in formulating its contents and format. A new Section on "Emergencies and Intensive Care" adds further strength to the rich contents.

The reader-friendly "STP", as it is popularly referred to, is primarily addressed to the undergraduates, residents, junior pediatricians, family physicians and practicing physicians dealing with children as well. Nevertheless, even the postgraduates and established pediatric teachers will readily find a great deal of valuable information of considerable interest and utility to them.

Outstanding Features

- A comprehensive, most up-to-date and state-of-the-art book with a focus on relevance in India and its neighboring countries.
- Eminently covering MCI curriculum/syllabus and postgraduate entrance examination course.
- Rational division of the contents in 11 Sections.
- Profusely illustrated with hundreds of illustrations (clinical photographs, diagrams and flowcharts/ algorithms), boxes and tables.
- A brand new Section comprising 12 crisp chapters on Pediatric Emergencies and Intensive Care.
- Pearls include MCQs and Clinical Problem-solving reviews at the end of most chapters for self-assessment.
- Tailor-made and student-friendly textbook with down-to-earth presentation and easy-to-understand descriptions.
- Color design allowing easy location of key content.
- An excellent and comprehensive Index facilitating easy and speedy access to and retrieval of the requisite information.

Excerpts from Reviews

"...Work of extraordinary merit...an essential reading for pediatric undergraduates and postgraduates...bound to occupy pride of place among the textbooks in the field of child health."
— *Asian Journal of Maternal and Child Health*

"A state-of-the-art spotlight on current pediatric scenario in the developing world...strongly recommended."
— *Hong Kong Journal of Pediatrics*

"An up-to-date tropical pediatric textbook of outstanding merit...highly recommended."
— *American Journal of Diseases of Children*

"...this excellent book should prove to be of great value to medical students and young pediatricians seeking information on pediatric problems in India and rest of the developing world."
— *Indian Journal of Pediatrics*

"Clinical-oriented approach...this popular book guides the readers to deal with the whole child in our setting with greater confidence..."
— *Pediatric Clinics of India*

"A work of extraordinary merit...tailor-made for the needs of the Indian students."
— *Indian Pediatrics*

"...highly-acclaimed book...most up-to-date, most comprehensive, most needed and clinically-oriented...profusely illustrated."
— *Academy Today (Bulletin, Indian Academy of Pediatrics)*

"Full marks to Prof Suraj Gupte and his team-mates for this superb textbook of pediatrics..."
— *Journal of Association of Physicians of India*

"A nice reference-supported textbook in child health and disease from India... popular since 1977 when its first edition appeared ... should eminently serve the pediatric scholars (both under and postgraduates) as also field pediatricians in the resource-limited countries..."
— *American Bulletin of Diseases of Childhood and Adolescence*

"... a highly outstanding, most comprehensive, most relevant and absolutely state-of-the-art textbook of pediatrics for the developing world... a "must" for the target audience..."
— *Tropical and Subtropical Pediatrics*

"Simple, straightforward and easy-to-use format ... strongly recommended...keeps you on the cutting edge of the pediatric care in S-E Asian countries."
— *Asian Chronicle of Medical Sciences*

"...Dr Suraj Gupte's STP is by any yardstick a UGs Nelson Textbook of Pediatrics..."
— *Asia Pacific Bulletin of Child Health*

Suraj Gupte MD FIAP FSAMS (Sweden) FRSTMH (London) hails from the alumni of India's prestigious, Postgraduate Institute of Medical Education and Research (PGIMER), Chandigarh. At present, he is Professor and Head (Emeritus), Postgraduate Department of Pediatrics, Mamata Medical College/Mamata General and Superspecialty Hospitals, Khammam, Telangana, India.

He occupies a pride of place as an outstanding pediatric educationist, researcher and author globally. Besides receiving several prestigious awards and fellowships/professorships, he has represented India in a multitude of international conferences, workshops, symposia and seminars, etc. worldwide as a guest speaker, chairperson, rapporteur, visiting fellow/Professor, etc.

Over and above The Short Textbook of Pediatrics, he has edited/authored international series, Recent Advances in Pediatrics, and scores of other world class child health books of high esteem and published/presented over 260 papers in national and international journals/forums. He has been on several academic task forces and editorial boards of reputed pediatric periodicals, both national and international, as an adviser, editor, member and peer-reviewer.

In the Indian Academy of Pediatrics and its subspecialty chapters, he has held several important positions, including Founder and Vice-President of the Child Nutrition Chapter and Founder and Secretary of the Child Neurology Chapter. He remained National Executive Member for several terms. At the International Nestle Nutrition Workshop held in Taiwan in 1989, he was the solo official representative of the IAP. He was Adviser, 8th International Congress of Tropical Pediatrics and National Executive Member, 8th Asian Congress of Pediatrics.

Besides being faculty selection expert for State and Union Public Service Commissions as also All India Institute of Medical Sciences, he is an examiner in several reputed universities and apex institutions, including AIIMS, PGIMER, SGPGIMS, SKIMS, IGNOU and National Board of Examination (NBE). He is credited for figuring in most of the reputed national and international Who's Who volumes, including the Morqui's Who's Who — a pre-eminent database of outstanding personalities of the World.

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