Getting Started with PsychiatryOnline.com – User Training Guide

About this guide
This guide introduces you to PsychiatryOnline.com and provides basic information about using its many features. For more information about using these features not found in this guide, please email psychiatryonline@psych.org.

Refer to the table below to locate the information you need. Feature descriptions and step-by-step procedures are grouped under the main task that you are performing, such as researching a psychiatric disorder, managing your journal reading, or downloading information to your PDA.

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Getting started

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What’s Included in Your Subscription

Your institution has purchased the DSM Premium subscription at PsychiatryOnline.com. This includes full-text access to the following psychiatric resources:

American Psychiatric Publishing, Inc. (APPI) peer-reviewed journals:
- The American Journal of Psychiatry
- Psychiatric Services
- Academic Psychiatry
- The Journal of Neuropsychiatry and Clinical Neurosciences
- Psychosomatics
And Psychiatric News, for the latest developments in the field.

Aggregated along with the full-text of the best selling peer-reviewed books in the field:
- DSM-IV-TR®
- DSM-IV-TR® Handbook of Differential Diagnosis
- DSM-IV-TR® Casebook and its Treatment Companion
- American Psychiatric Association Practice Guidelines in both comprehensive and quick-reference formats
- What Your Patients Need to Know About Psychiatric Medications
- Gabbard’s Treatments of Psychiatric Disorders, Fourth Edition
- The American Psychiatric Publishing Textbook of Substance Abuse Treatment, Fourth Edition
- Textbook of Psychotherapeutic Treatments
- Helping Parents, Youth, and Teachers Understand Medications for Behavioral and Emotional Problems: A Resource Book of Medication Information Handouts

Access PsychiatryOnline.com

Depending on how your institution’s administrator or librarian has set up your institution’s access to PsychiatryOnline.com, you can access resources for PsychiatryOnline.com anytime, at any computer within your institution.

If you experience any access problems, contact your institution’s administrator and/or librarian or email: institutions@psych.org or call 703-907-8538.

Set Up Your Personal My PsychiatryOnline Account

My PsychiatryOnline is a free personalized account to access features including bookmarks, emailing topics, saved searches and PDA downloads.

From the PsychiatryOnline.com homepage, click on My PsychiatryOnline.
Register for your **My PsychiatryOnline** personal account by completing your information.

You will now be able to take advantage of PsychiatryOnline.com features such as email a colleague, save for PDA, and bookmark chapters (described in the next section).
Research a Psychiatric Disorder

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Search on a Psychiatric Disorder

The best way to research a psychiatric disorder on PsychiatryOnline.com is from the homepage. In the top banner you will see a search bar.

Type in a psychiatric disorder you are researching. In this case, we are researching “depression.” Click “GO.”
Search results page for “depression” appears.

Notice two separate tabs for book results and journal results. The number indicates the # of results for each.

Results are also broken down by resource book.

Results page will also dynamically generate a sub-topic list to narrow your search results further.

Click on search result.

### Limited book results by topic: depression
- adolescent
- in adolescents
- in anxiety disorder
- in anxiety disorders and
- in depression
- in dementia
- in depression and
- in diabetic patients
- in dissociative disorder
- in elderly patients
- in endogenous and reactive
- in functional acute

<table>
<thead>
<tr>
<th>1-20 of 63 Book Results</th>
<th>Next book results</th>
</tr>
</thead>
</table>
| 1. **Antidepressant Drugs**
  *Textbook of Clinical Psychiatry* > Chapter 24. Psychopharmacology and Electroconvulsive Therapy |
| 2. **Depression**
  *Textbook of Clinical Psychiatry* > Chapter 37. Geriatric Psychiatry |
| 3. **Functional Outcome**
  *Textbook of Clinical Psychiatry* > Chapter 10. Mood Disorders |
| 4. **Psychotherapy for Mood Disorders**
  *Textbook of Clinical Psychiatry* > Chapter 10. Mood Disorders |
| 5. **Somatic Treatments**
  *Textbook of Clinical Psychiatry* > Chapter 10. Mood Disorders |
| 6. **Depression**
| 7. **Treatments for depression**
  *APA Practice Guidelines* > Practice Guideline for the Treatment of Patients With Alzheimer’s Disease and Other Dementias of Late Life > III. Treatment Principles and Alternatives > D. Somatic Treatments |
| 8. **Treatment of depression**
Book Results Page

Click on a search result in the *Textbook of Clinical Psychiatry*. You receive full-text access to all the information found in the print textbook.

Chapter 24. Psychopharmacology and Electroconvulsive Therapy

Lauren B. Marangell, M.D., Jonathan M. Silver, M.D., Donald C. Goff, M.D., Stuart C. Yudofsky, M.D.

Sections:
- Introduction
- General Principles
- Antidepressant Drugs
- Anxiolytics, Sedatives, and Hypnotics
- Antipsychotic Drugs
- Pharmacological Treatment of Schizophrenia
- Other Uses of Antipsychotic Medications
- Mood Stabilizers
- Drug Interactions
- Antidepressant Drugs
- Electroconvulsive Therapy
- Other Nonpharmacological Somatic Treatments
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- General Principles
- Antidepressant Drugs
- Anxiolytics, Sedatives, and Hypnotics
- Antipsychotic Drugs
- Mood Stabilizers
- Drug Interactions
- Antidepressant Drugs
- Electroconvulsive Therapy and Other

ANTIDEPRESSANT DRUGS

Overview

The modern era of the treatment of depression with medication began in the 1950s when iproniazid, an MAOI used for the treatment of tuberculosis, was noted to elevate mood (Selkoff et al., 1952). Unfortunately, hepatic necrosis was a side effect of iproniazid, and this led to its withdrawal from clinical use. In addition, dangerous hypertensive reactions associated with the MAOIs initially were poorly understood, and most psychiatrists were reluctant to use these drugs. Imipramine, the first of the tricyclic antidepressants (TCAs), was developed as a derivative of chlorpromazine; it was hoped that imipramine would be more effective than chlorpromazine as an antipsychotic agent. Although imipramine did not show antipsychotic efficacy, it was shown to be effective in the treatment of depression (Kuhn, 1958). Subsequently, many other antidepressants have been approved for use in the United States. To date, all antidepressants appear to be equally effective for treating major depression, but individual patients may respond preferentially to one agent or another. In addition, these medications are significantly different from one another with regard to side effects, lethality in overdose, pharmacokinetics, and the ability to treat comorbid psychiatric disorders.

Mechanisms of Action

All current antidepressant drugs affect the serotonergic and/or catecholaminergic systems in the central nervous system.
Mechanisms of Action

All current antidepressant drugs affect the serotonergic and/or catecholaminergic systems in the central nervous system (CNS), by either presynaptic reuptake inhibition, blocking catabolism, or receptor agonist or antagonist effects (for a review, see Charney 1998; Frazer 1997; W.K. Goodman and Charney 1985). The effects of antidepressants on monoamine availability are immediate, but the clinical response is typically delayed for several weeks. Downregulation of presynaptic autoreceptors, α2 and β-noradrenergic receptors, and the serotonin type 1 (5-HT1A) receptors more closely parallels the time course of clinical response. This downregulation can be conceptualized as a marker of antidepressant-induced neuronal adaptation. More important, most of the receptors that are immediately affected by antidepressants are linked to G proteins. A defective linkage between the receptor and the G protein may result in abnormal intracellular transduction mechanisms (Bourin and Baker 1996). In actuality, antidepressants most likely act via modulating G proteins, second messenger systems, and gene expression (for a review of molecular mechanisms, see Duman 1999).

Indications

Although the antidepressants have many potential therapeutic uses, the primary approved indication for these drugs is the treatment of major depression, as defined by DSM-IV-TR (American Psychiatric Association 2000). Overall, approximately 70% of the patients with depression respond to an adequate trial of antidepressant medication, although far fewer achieve full remission of symptoms. In addition, antidepressants are effective for patients with obsessive-compulsive disorder (OCD) (selective serotonin reuptake inhibitors [SSRIs] and clomipramine), panic disorder (TCAs and SSRIs), bulimia (TCAs, SSRIs, and MAOIs), dysthymia (SSRIs), bipolar depression (after treatment with a mood stabilizer), social phobia (MAOIs and SSRIs), posttraumatic stress disorder (PTSD) (SSRIs), irritable bowel syndrome (TCAs), anorexia (TCAs), neuropathic pain (TCAs), migraine headache (TCAs), attention-deficit/hyperactivity disorder (bupropion), smoking cessation (bupropion), autism (SSRIs), and late luteal phase dysphoric disorder (SSRIs); however, the FDA has not evaluated or approved the use of antidepressants to treat many of these conditions.

Clinical Use

Each chapter will also provide suggested related content that can be found in other PsychiatryOnline resources.
Journal Results Page

Journal results page for “depression.”

Results are also broken down by journal.

Note ability to define search results further.

Option to click on full text article or abstract.
Advanced Searching Within APPI Journals

The PsychiatryOnline journals are hosted on Stanford University Libraries' respected HighWire Press. Once you have accessed the full-text of an article, you will now be in the Highwire Press site.

Acute and Longer-Term Outcomes in Depressed Outpatients Requiring One or Several Treatment Steps: A STAR*D Report

A. John Rush, M.D., Madhukar H. Trivedi, M.D., Stephen R. Wisniewski, Ph.D., Andrew A. Nierenberg, M.D., Jonathan W. Stewart, M.D., Diane Warden, Ph.D., M.B.A., George Niederehe, Ph.D., Michael E. Thase, M.D., Philip W. Lavori, Ph.D., Barry D. Lehewitz, Ph.D., Patrick J. McGrath, M.D., Jerrold F. Rosenbaum, M.D., Harold A. Sackeim, Ph.D., David J. Kupfer, M.D., James Luther, M.A., and Maurizio Fava, M.D.
PsychiatryOnline.com has several convenient features that will saving you time in your busy schedule.

Email a Link – allows you to share information with a colleague, students, or anyone for free.

Bookmark This – allows you to save your researches in your My PsychiatryOnline account so you have immediate links to the information you use often.

Save for PDA – allows you to save any book section to your PDA so it’s with you wherever you go. (See “Custom design your own eBook” for more information.)

ANTIDEPRESSANT DRUGS

Overview

The modern era of the treatment of depression with medication began in the 1950s when imipramine, an MAOI used for the treatment of tuberculosis, was noted to elevate mood (Selkoff et al., 1952). Unfortunately, hepatic necrosis was a side effect of imipramine, and this led to its withdrawal from clinical use. In addition, dangerous hypertensive reactions associated with the MAOIs initially were poorly understood, and most psychiatrists were reluctant to use these drugs. Imipramine, the first of the tricylic antidepressants (TCAs), was developed as a derivative of chlorpromazine; it was hoped that imipramine would be more effective than chlorpromazine as an antipsychotic agent. Although imipramine did not show antipsychotic efficacy, it was shown to be effective in the treatment of depression (Kahn, 1959). Subsequently, many other antidepressants have been approved for use in the United States. To date, all antidepressants appear to be equally effective for treating major depression, but individual patients may respond preferentially to one agent or another. In addition, these medications are significantly different from one another with regard to side effects, lethality in overdose, pharmacokinetics, and the ability to treat comorbid psychiatric disorders.
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Chapter 24. Psychopharmacology and Electroconvulsive Therapy

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References:
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- Mood Stabilizers
- Drug Interactions
- Anticonvulsant Drugs
- Electroconvulsive Therapy and Other

ANTIDEPRESSANT DRUGS

Overview

The modern era of the treatment of depression with the development of the first selective serotonin reuptake inhibitors (SSRIs) in the 1980s and later in the 1990s. These agents were designed to mimic the effects of some antidepressant medications by increasing the availability of serotonin at synapses where it acts as a neurotransmitter. This increase in serotonin levels can help to improve mood and reduce symptoms of depression.

Mechanisms of Action

All current antidepressant drugs affect the serotonergic and/or catecholaminergic systems in the central nervous system. They increase the availability of serotonin, norepinephrine, and dopamine, which are neurotransmitters involved in mood regulation. This increase in neurotransmitter availability is thought to be the mechanism by which antidepressants alleviate symptoms of depression.

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Managing your journal reading

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To sign up for journal alerts and downloads, click on the “Journals” link in the PsychiatryOnline banner.

eTOCS - Automatic alerts sent by e-mail whenever a new journal issue goes online. Complete table of contents for each issue, with links to full text are provided for your convenience. You can also download tables of contents and abstracts of current journal issue to PDAs. PalmOS and PocketPC are supported.
**RSS – Real Simple Syndication** – This is a quick and easy way to gather news of articles published in APA and APPI journals with quick links back to the full text. Gather new information on your topics of interest from different publications – journals, newspapers, magazines – all in one virtual location. Avoid visiting many Web sites to access current journal issues and sorting through separate eTOCs for each journal among hundreds of emails. Look for the little orange XML buttons on your favorite sites.

**Email Alerts** – You can set up email alerts to inform you of new articles published that match certain **key words**; new articles published as part of **Subject Collections**; new articles published by certain **authors**; contents announced of **new and future issues**; articles of interest **cited**; **Errata** posted to tracked article.

**Toll-Free Inter-Journal Links** – As part of the HighWire Press platform, we make available to subscribers “toll free” links from reference lists to any other journal hosted by HighWire. HighWire is the home of most of the major medical and science journals: [http://www.highwire.org/lists/allsites.dtl#A](http://www.highwire.org/lists/allsites.dtl#A) including **New England Journal of Medicine, Journal of American Medical Association** and **British Medical Journal**. You get full text access even if you don’t have a subscription to that journal.

**Citation Maps and Downloads** – Each journal homepage provides links to the 50 most-read and most-cited articles within the past month (in chunks of 5 articles). You can also download complete citation information for any article to your reference citation manager. Supported formats: EndNote, ReferenceManager, ProCite, BibTeX, MedLARS.
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- Purchase eBooks for Your PDA .............................................. 21

Set Up Your PDA for Downloading

After you have created your personal My PsychiatryOnline account (see section on “Getting Started”), and have selected book sections to your PDA, you are now ready to save and download PsychiatryOnline content to your PDA.

Go to your My PsychiatryOnline account.

Follow instructions to install our FREE reader software.

**What you need to use this feature:**
1. A PalmOS or PocketPC PDA
2. A WindowsOS computer synchronized with your PDA
3. Free reader software loaded on your PDA and PC

Step-by-step instructions will assist you in successfully setting up your PDA to download PsychiatryOnline content.

Should you have any problems in setting up your PDA for downloads, please contact APPI Customer Service at 703-907-7322 or email psychiatryonline@psych.org.
Download Your PsychiatryOnline Content to Your PDA

Once you have successfully installed the FREE reader software, you can now synchronize your PDA.

From your My PsychiatryOnline account you will find a list of content that you saved for PDA (see section on “PsychiatryOnline features”).

Make sure your PDA is hooked up to your computer, then hit sync button to begin downloading.

Each time you sync your PDA to My PsychiatryOnline, you have the ability to delete and add content.
You can now access your PsychiatryOnline content on your PDA. Each time you sync, PsychiatryOnline rebuilds a custom index that is specific to the items in your PDA downloads list. So—not only can you carry PsychiatryOnline content with you wherever you go, you can access exactly what you need with a tap on your PDA screen.
Purchase eBooks for Your PDA

Your subscription does not include access to the eBook Library. Please see the details below for more information on purchasing eBooks.

The following PDA eBooks are available from PsychiatryOnline:

**PDA eBook: Quick Reference to the DSM-IV-TR® Diagnostic Criteria.....$36.95**
[Size: 187K] This concise companion designed specifically for PDA includes all of the diagnostic criteria from DSM-IV-TR®. In addition to full-text searching, a comprehensive index organizes the book’s key concepts for quick retrieval.

**PDA eBook: DSM-IV-TR® Handbook of Differential Diagnosis.....$67.00**
[Size: 193K] This succinct reference customized for PDA helps ensure that all important diagnoses that need to be ruled out during a clinical evaluation are considered. Outlined are the six crucial steps in differential diagnosis that must be considered for every patient. Plus, 27 interactive decision trees walk you step-by-step from the most common presenting symptoms to a final diagnosis, and 62 differential diagnosis tables provide a head-to-head comparison of a disorder with its differential diagnostic contenders. In addition to full-text searching, a comprehensive index organizes the book's key concepts for quick retrieval.

**PDA eBook: Quick Reference to the APA Practice Guidelines for the Treatment of Psychiatric Disorders.....$49.95**
[Size: 143K] All of the crucial clinical information from the full guidelines is included in this Quick Reference, with greatest emphasis placed on material most relevant to treatment decision making. Contains all published Practice Guidelines from the American Psychiatric Association, including those not yet available in the print compendium. You’ll be given access to newly approved Practice Guidelines for 12 months from your purchase. In addition to full-text searching, a comprehensive index organizes the book’s key concepts for quick retrieval. Currently includes:

psychiatryonline.com
Psychiatric Evaluation of Adults
Delirium
Alzheimer's Disease and Other Dementias of Late Life
HIV/AIDS
Substance Use Disorders
Schizophrenia
Major Depressive Disorder
Bipolar Disorder
Panic Disorder
Acute Stress Disorder and Posttraumatic Stress Disorder
Eating Disorders
Borderline Personality Disorder
Suicidal Behaviors

The PsychiatryOnline eBooks and reader can be installed to memory cards.
Test Your Knowledge

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Test Knowledge and Prepare for Boards

You’ll have the opportunity to enhance your knowledge of clinical psychiatry, improve clinical decision making and patient care, test and assess your clinical knowledge and decision-making skills, prepare for certification and recertification, and practice answering board-like questions.

Self-Assessment

Access the Self-Assessment by clicking on the “Self-Assessment” link in the PsychiatryOnline.com banner.
The self-assessment exam is made up of 256 questions divided into 40 individual tests of 5 to 10 questions each that correspond to chapters in *The American Psychiatric Publishing Textbook of Clinical Psychiatry*, Fourth Edition. You can answer questions at your own pace and save your progress after each test. After you've completed each short test, your score is calculated instantly.
For each question, your answer and the correct answer are highlighted and are accompanied by a discussion with supporting references that addresses not only the correct response but also explains why other responses are not correct. The answer explanation references relevant text, tables, and figures in the Textbook to allow quick access to more detail. Links to additional related material in the PsychiatryOnline collection provide opportunities for further study.

Normal Child and Adolescent Development

Question 1 of 10

Incorrect
You incorrectly answered B. The correct answer is A.

Sigmund Freud's hierarchy of threats during early childhood are experienced in which of the following sequences?

A. Helplessness, separation, castration anxiety, punishment by guilt.
B. Separation, helplessness, annihilation, castration anxiety.
C. Annihilation, separation, castration anxiety, punishment by guilt.
D. Separation, helplessness, punishment by guilt, castration anxiety.
E. Helplessness, separation, annihilation, punishment by guilt.

Explanation
(see in Chapter 2). According to Freud's (1926/1959) formulation, helplessness is the first signal of danger. Separation, occurring somewhere between 7 and 24 months, follows, and then castration anxiety (or body integrity anxiety) takes over from the third through the sixth years. Finally, danger of punishment by guilt ensues from an internalized value system embodied in the superego, which is an agency of the tripartite mind of the new structural model.

Earn CME Credits

Your subscription does not include CME credits. The CME Add-on feature can purchased, which activates the Self-Assessment in Clinical Psychiatry CME module, offering up to 20 AMA PRA Category 1 Credits. All test questions are derived from *The American Psychiatric Publishing Textbook of Clinical Psychiatry*, Fourth Edition.

**CME Add-on costs: Please visit the site for updated prices and modules.**

Earn continuing medical education (CME) credits for reviewing *The American Psychiatric Publishing Textbook of Clinical Psychiatry*, Fourth Edition, assessing your retention of *Textbook* content by taking the self-assessment tests, and further increasing your clinical knowledge by reviewing answer explanations, the related content in the *Textbook*, and additional related material in the PsychiatryOnline collection.

No minimum percentage of correct answers is required for CME credit to be granted.

The American Psychiatric Association (APA) designates this educational activity for a maximum of 20 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity. APA is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.
As a PsychiatryOnline subscriber, you receive access to a FREE PDF version of an APPI bookstore title every month.

Question of the Week
from Self-Assessment

After listening to several examples of similar behavior in the patient's life story, the psychiatrist offers the observation "When you can't perform up to your own high standards, you appear to act to try to please someone else." This response by the psychiatrist is an example of

- A. Reflection.
- B. Interpretation.
- C. Transition.
- D. Self-disclosure.
- E. Facilitation.

How are we doing?
Submit your feedback and help us improve our service to you.

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PsychiatryOnline Mobile

A new mobile version of the PsychiatryOnline.com site—available at m.psychiatryonline.com—is optimized for viewing on mobile devices. Access to the mobile site is included as an added benefit of current subscriptions. You will be automatically redirected to m.psychiatryonline.com when visiting the main PsychiatryOnline.com site from a wireless-enabled mobile device (such as a smartphone or PDA).

Before your first mobile visit, be sure to create a free personal “My PsychiatryOnline” account. To create an account, go to www.psychiatryonline.com from a desktop or laptop computer while authenticated by your institutional subscription, click the “My PsychiatryOnline” link from the homepage, and follow the instructions for creating an account. Your “My PsychiatryOnline” username and password will then give you access to the mobile site. (IP-based recognition is not possible from mobile devices, and accounts cannot be created from the mobile site.) The mobile site will prompt users who haven’t yet created My PsychiatryOnline accounts with these instructions.

Content Available
Most mobile browsers are limited in their ability to transmit large files quickly, so only the most essential information is included in the mobile version of PsychiatryOnline. Search and navigation are simplified as well, to better suit the small mobile screen (e.g., the “related content” links usually seen at the left of content have been removed to unclutter the screen). Mobile site users do, however, get full advantage of PsychiatryOnline’s powerful semantic indexed search.

The mobile view content set includes
- DSM-IV-TR—search or browse the Classification and criteria sets individually, or the entire DSM-IV-TR manual
- ICD-9-CM codes for selected general medical conditions and medication-induced disorders
- Differential diagnosis decision trees and the DSM symptom index from DSM-IV-TR Handbook of Differential Diagnosis
- APA Practice Guideline Quick References
- Essentials of Clinical Psychopharmacology
- Manual of Clinical Psychopharmacology
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PsychiatryOnline offers other mobile benefits:

Book "Clip & Go"
Any book section at PsychiatryOnline.com can be “clipped” and downloaded to PDA as an HTML file. Look for the “PDA Download” link on book content pages.

One download you might find especially valuable is the DSM-IV-TR Classification. Visit the DSM - IV - TR table of contents page and look for the link to “Download the DSM-IV-TR Classification to your PDA.”

PDA eBooks
PsychiatryOnline.com offers three downloadable ebooks for PDA:
- Quick Reference to the DSM-IV-TR® Diagnostic Criteria
- DSM-IV-TR® Handbook of Differential Diagnosis
- Quick Reference to the APA Practice Guidelines for the Treatment of Psychiatric Disorders

The PDA ebooks are not included in institutional subscriptions but can be purchased by individual users here: http://www.psychiatryonline.com/eBooks.aspx.

These downloadable ebooks contain the same content as their counterparts on the full and mobile sites, but they are perfect for situations where you have no Internet access. In addition to full-text searching, each title contains a comprehensive index that organizes the book’s key concepts for quick retrieval.

Journal Abstracts on PDA
You can download PsychiatryOnline Journal citations, abstracts, and editorials to your PDA, or sign up for eTOCs and RSS feeds that can be read on your mobile device. Learn more
Questions, Suggestions, and Feedback

Submit your feedback and suggestions in our online survey. You can access the link on the PsychiatryOnline.com homepage.

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