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Find the Software by Dataset Title Title Time to open? Time to Edit? Overview This project teaches the value of the LogNormal distribution with respect to the analysis of physiological data. The web page presents an easy to understand explanation of the LogNormal distribution and examples of its use. A demonstration program illustrating how to fit the LogNormal distribution is presented along with instructions for using. The LogNormal distribution was developed in the 1930's by Ronald A. Fisher as part of his effort to model and analyze probability and mortality data. Although the LogNormal Distribution has been heavily studied in the biometrical and the social sciences, we know relatively little of its biological implications and applications. In this.[Changing patterns of aural discharge diagnosis in Denmark]. In Denmark a systematic registration of otitis media with effusion and otitis media with cholesteatoma was started in 1984. During the year 1984-1985, 31 otologists in Denmark used the format proposed by the International Committee on Standards for the diagnosis of otitis media with effusion, otitis media with effusion and cholesteatoma and the format suggested by the British Committee on Standards for the diagnosis of cholesteatoma to diagnose aural discharge. The otologists categorized separately into 3 groups (typical, probable and unreliable diagnosis) and as a whole. The changes in the diagnosis of the otitis media with effusion were: 4.8% otitis media with effusion without cholesteatoma diagnosis changed to otitis media with effusion and cholesteatoma diagnosis, 47.2% diagnosis of otitis media with effusion changed to otitis media with effusion without cholesteatoma and 33.8% diagnosis of otitis media with effusion with cholesteatoma changed to otitis media with effusion and cholesteatoma. The diagnostic reliability increased in 9.7% and decreased in 4.8%. The diagnosis of otitis media with effusion without cholesteatoma diagnosis remained stable as it had been in 1983. The diagnosis of otitis media with effusion and cholesteatoma, at the time of the initiation of registration, improved by 14.5% as compared with the diagnosis at the beginning of the registration. The diagnosis of otitis media with effusion without cholesteatoma, improved by 10.3%. The diagnosis of cholesteatoma remained stable. The remaining otologists c6a93da74d

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