considerations. The subsections are bulleted and easy to find. This format works well for brief topics such as epididymitis or impetigo, and this text can serve as “one-stop shopping” for those types of clinical problems. Broad topics such as diabetes are not as amenable to this condensed, outline format and further reading would be required for appropriate patient care.

Section II contains the differential diagnoses for various symptoms, many of which (eg, puritis) are in list form. Personally, I don’t find a list of 48 things that can cause itching all that helpful. Other topics, however, are written in a format that is very useful for the busy practitioner. The section on acute, painless vision loss, for example, outlines the key examination findings for each of the items in the differential diagnosis. The table on erythematous oral mucosal lesions discusses the location, characteristics, diagnosis, and treatment of each item in the differential diagnosis.

Section III is an interesting collection of algorithms. There are classic algorithms for laboratory-measurement abnormalities (eg, hypernatremia) and symptoms (eg, chronic diarrhea) as well as flow charts for domestic violence, code status determination, and the patient with ill-defined physical complaints. I am not sure that I would have thought to look in a book for guidance on any of the latter topics, but those who do will be rewarded with helpful information.

Common laboratory tests are outlined in Section IV. For each test the chapter provides the normal range, cost, and conditions in which the test result is above or below normal. As opposed to standard laboratory tests that simply list conditions associated with a single laboratory test, this section contains tables that put single test results into the perspective of the “big picture.” For example, a table on findings in thyroid function tests in various clinical conditions lists 7 different thyroid tests and the typical patterns of findings in 9 different thyroid disorders.

Section V lists clinical preventive services. Components of the age-specific periodic health examination and standard immunizations are outlined. There are special sections on travel immunizations, endocarditis prophylaxis, and occupational exposures.

One of the best features of this book is the collection of patient teaching guides on the accompanying CD-ROM. Patient handouts are available in English and Spanish, on a wide array of topics, from abscess to Zollinger–Ellison syndrome. Patient education materials can be hard to find, and this is the most comprehensive list of topics I have seen. They are generally well written and contain good patient education, with sections on Dos and Don’ts and When to Call Your Doctor. The handout on the common cold, for example, explains the role of viruses and the lack of efficacy of antibiotics. Providers should review individual topics before distributing them to patients. Some are written at a level that patients may find difficult to understand without additional explanation.

In general the information provided is accurate and up-to-date, but I did find several examples of recommendations that are not in keeping with standard practice. For example, the section on ankle sprains contains many very useful drawings but states that “plain radiographs are always needed.” However, the listed reference suggests the use of the Ottawa ankle rules, a commonly used clinical tool to reduce unnecessary radiography. The hepatitis C patient teaching guide recommends separate or disposable eating utensils for individuals with hepatitis C. The Centers for Disease Control acknowledges the need for separate personal-care items such as toothbrushes and razors but not the need for separate eating utensils. Such recommendations may unnecessarily heighten a patient’s anxiety regarding his or her condition.

I have been a primary care provider for over 10 years, but I still sometimes need a succinct reference to guide my work-up or treatment of unfamiliar problems, and I will use this book in clinic as a quick review of topics, including medical orthopedics, ophthalmology, and dermatology, because of the book’s breadth, brief and varied format, and the good quality of the drawings and pictures. Beginning practitioners will find much of the information helpful in day-to-day practice. The book does not pretend to be and should not be used as a comprehensive text of all medical topics. A wide variety of general and specialty texts, reports, and review articles must be used in the care of patients.

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Thoracic Trauma and Critical Care, edited by Drs Karmy-Jones, Nathens, and Stern (who are all from Harborview Medical Center in Seattle, Washington), provides a succinct and well-organized guide to the management of thoracic trauma and thoracic surgery. The text supplies a large body of information in the format of brief, well-organized chapters. Each chapter gives a general overview on the chapter topic, followed by commentary and a discussion of current controversies. For example, Chapter 3.2 presents an explanation of blunt and penetrating injuries of the tracheobronchial tree, followed by comments on the difficulties of managing such injuries. The commentary sections provide important clinical “pearls.”

The text gives an excellent review of the critically ill patient, whether in the intensive care unit or the emergency department. The book’s focus is care of the chest, chest wall, lungs, and mediastinum. The book begins with a brief overview of resuscitation of the trauma patient and the assessments used to identify patients with severe injury. The early chapters identify the markers of adequacy of perfusion associated with resuscitation of the multiply-injured patient who presents with thoracic trauma. The book then reviews basic concepts and conditions (eg, tube thoracostomy and chest wall burns) and some of the most complex management problems (eg, acute respiratory distress syndrome, tracheobronchial injuries, and tracheoinnominate-artery fistulas). The chapters describe important diagnostic and treatment adjuncts that guide surgical and nonsurgical treatments of the injuries and diseases.

The information is concise and evidence-based. Information supplied in each chapter is presented in a manner that can serve as a guide for all, from the most junior resident to an attending surgeon looking for a quick review. The book, which is very readable, focuses on the thorax, which is unusual in comparison with traditional trauma textbooks, in which multiple organ systems are reviewed. This book’s aim was to review critical care, surgical practices, and treatment modalities of the multiply-injured patient who presents with concomitant thoracic injury, and that aim is definitely accom-
plished. Despite focusing solely on the thorax, the authors do an admirable job of providing a complete overview of surgical care of thoracic trauma.

Each chapter contains black-and-white photographs that are clinically relevant and that clearly identify the illness or injury in question. The photographs are presented and described so that they avoid reader confusion. For example, the photograph on sonographic detection of pneumothoraces clearly identifies the findings of a pneumothorax on the still image, but the description also notes the limitations of the photograph and provides an Internet address at which the reader can see an in-motion sonogram of a pneumothorax. In the book the numerous photographs enhance the explanation of difficult concepts. The chapters also review anatomy and surgical technique, which is important for the practitioner who does not regularly evaluate critically ill or traumatically injured patients but who needs to review the techniques.

The material is presented so that an intensive-care nurse or respiratory therapist could understand the concepts and utilize the themes to assist in improving patient care. The book’s charts and tables assist in identifying key concepts. For example, in Chapter 2.2, “Incisions and Approaches,” the chart on page 51 is a quick guide to surgical approaches based on the site of the injury. Another example of the book’s good use of charts is in Chapter 1.1, in which the authors clearly present the various trauma scoring systems and allow the reader to identify which system best suits his or her practice.

The book is bound in hard cover and is visually appealing. Key concepts are highlighted throughout the text with bold and italic lettering, allowing for easy identification. The photographs are clearly marked with descriptions. The book is offered at a reasonable price.

My only complaint about this overall good text regards the preponderance of typographical errors, starting in the first chapter (e.g., on page 3, “filed” should be “filed”). However, aside from such minor editing errors, I found no major errors; the algorithms, protocols, and procedural information are precise and accurate throughout the text. Good examples include the discussion of approaches to treating penetrating cardiac injury and the algorithms for ventilator management and weaning.

In summary, *Thoracic Trauma and Critical Care* is an excellent overview of thoracic trauma in the multiply-injured patient. Its concise format and writing allow for quick reference by practitioners and non-practitioners alike. In achieving its overall goal of covering the critically ill patient with thoracic injury, the text neglects extrathoracic organ systems, which precludes this book from being the sole source of information for students interested in learning about trauma as a whole. Aside from that, though, this text is a good addition to one’s library.

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**Aeromedical Evacuation: Management of Acute and Stabilized Patients**

**Aeromedical Evacuation: Management of Acute and Stabilized Patients** is a comprehensive text for medical transport. It covers many of the complexities involved in transporting patients by air and addresses both common and specialized aspects of aeromedical evacuation.

The text relies heavily on the military’s experience with medical evacuation and transportation, which has long been a military priority. Many medical evacuation and transport techniques and logistics were pioneered during wartime. The majority of this book’s contributors are members of the military, and many of the topics focus on military applications, situations, and perspectives. However, the information readily translates to non-military medical transports. The origin and evolution of civilian aeromedical transport are directly linked to military medical transport.

Although the text conceptually centers on aeromedical transport, many of the techniques may be applied to other forms of medical transport.

The book is organized into 3 main parts. Part 1 is entitled “The Need” and describes the history of and need for aeromedical transport. Part 2 is “The Means,” chapters that are dedicated to the logistics of transport, such as flight physiology, nursing care, transporting contagious patients, and in-flight emergencies. Part 3 is “The Patients,” which covers patient- and disease-specific considerations during transport.

The individual chapters are generally clear, concise, and provide essential information required for effective evacuation and transportation. In summary, this is a comprehensive review that displays the collective experience gained through a long history of aeromedical transportation. The target audience would include anyone with an interest in the subject.

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The latest release in the MD Anderson Cancer Care series, entitled *Lung Cancer*, edited by Drs Fossella, Komaki, and Putnam, reviews the diagnosis, staging, treatment, and recent advances in prevention and early detection of lung cancer. It is a great read, particularly for the respiratory therapist who has an interest in furthering his or her knowledge of lung cancer.

What I enjoyed most about this book is that it provides a multidisciplinary approach to lung cancer, from the perspectives of pulmonary medicine, thoracic surgery, radiation therapy, and medical oncology. MD Anderson Cancer Center is one of the leading cancer centers in the United States, so it is a treat to read the opinions of this group of experts on how they manage this disease. One of the most appealing aspects of the book is that each chapter ends with a table of key practice points that highlight, in one-sentence bullet-items, the salient points made in the chapter.

As a medical director of respiratory care, I was particularly drawn to the chapter on the role of clinical practice guidelines and clinical pathways for the hospital management of lung cancer patients. I believe this chapter would be particularly useful for respiratory therapists who care for lung cancer patients in hospital wards and intensive care units. The chapter in-
This text contains state-of-the-art reviews covering the management of thoracic trauma for intensive care/critical care physicians, trauma surgeons, chest surgeons and other professionals in this field. Thoracic Trauma and Critical Care is a comprehensive reference that covers this subject in the following sections:

- Thoracic Trauma: Underlying Principles;
- Thoracostomy,

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