## **Book Reviews**

Problem-Oriented Medical Record Concepts. Richard E. Easton. Appleton-Century-Crofts, New York, 1974, 158 pp., \$9.95.

This is a rather lengthy treatment of the subject. In an informal, conversational style, the author leads us by the hand down the path of the POMR idea from its inception, through its variations, to flow sheets, to patient care instructions in problem-oriented style, and to the audit. All topics are well illustrated. The reader will find the going easy but thorough, with many memory-jogging review questions along the way. While this work is not likely to displace The Problem-Oriented Private Practice of Medicine by John C. Bjorn and Harold D. Cross, it would be useful in a didactic course on POMR, particularly since the author emphasizes that all members of the health care team should participate in producing the POMR (an idea which, I must admit, I find jarring but logical).

Most physicians who have teaching responsibility for the POMR, as well as those who have not yet taken the plunge into its use, will find the book helpful. Nurses and paraprofessionals seeking to gain insight into the richness of the system are a particularly appropriate audience for this book.

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Children's Fractures. Mercer Rang. J. B. Lippincott Company, Philadelphia, 1974, 238 pp., \$28.00.

This is a delightful medical text. From the very first paragraph, it is apparent that Dr. Rang is a teacher, physician, humanitarian, and possesses a keen sense of humor. The format is clear, concise and explicit with short, simple sentences and numerous illustrations. Emphasis is placed on the important art of communication with parents regarding the injury of the



child, the future plans, the outcome, and the details of treatment.

The first five chapters deal with an understanding of the differences between children's and adults' fractures and they are excellent. Chapter 1 ("Children are not just Small Adults") deals with epiphyses, bone growth, traumatic bending of bones, and types of fractures encountered in children. Chapter 2 ("Injuries of the Epiphysis, Growth Plate and Perichondrial Ring") discusses the importance of the growth plate in fractures, the injury classification of Salter and Harris, the factors of rapid healing, and the use of stress films and multiple views. Dr. Rang points out that "man is made symmetrical for purposes of comparison." Chapter 3 ("Fracture Care is a Game of Chess") discusses missed fractures, especially at growth plates, and encourages multiple x-rays. This chapter deals with what "modelling" can and cannot do, tricks in applying casts, problems with ill-fitting casts, and pitfalls between the physician and successful treatment. Chapter 4 ("Fractures with Vascular Damage") reviews the importance of post-reduction pain and how to go about assessing vascular damage. This is an excellent review for the family physician and will help him in managing his own cases and understanding those referred to specialists. Chapter 5 ("Fractures in Special Circumstances") deals with such unusual matters as the specific details of fractures in the "battered child," as well as recognition and causes of pathological and stress fractures.

Chapters 6 through 9 are written by collaborators in several specialties and discuss systemic and specific injuries accompanying fractures such as soft tissue injury, chest and gastrointestinal injury, genitourinary injury, and craniocerebral injury. Beginning with Chapter 10 and extending through Chapter 22, Dr. Rang outlines in detail the diagnosis, pitfalls, peculiarities and management of specific fractures. This is the reference "meat" of the book; it

is written with such simplicity yet completeness that it will serve the family physician well. The chapters are arranged according to anatomic sections of the body.

Each chapter of the book contains a complete reference bibliography for recommended reading. The appendix is unusual, in that it outlines Dr. Rang's thoughts on accident prevention and what a family physician may do to improve his patient's environment. One section deals with techniques in writing a medicolegal report, and, lastly, there is a discussion of the role of muscles in fracture patterns.

The book is a useful review of the reasons why children's fractures are different, and is a ready reference for any specific fracture encountered. The text is highly recommended for the family physician and the author is to be congratulated on his skillful presentation.

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Manual of Emergency Pediatrics. Robert M. Reece and John W. Chamberlain. W. B. Saunders Company, Philadelphia, 1974, 483 pp., \$10.00.

This manual is concise, relevant, and alphabetically organized to provide rapid reference to the majority of pediatric emergencies. The format, binding, size, and structure all contribute to easy utilization. A brief bibliography, current through 1973, accompanies short, accurate presentations.

Following a brief introduction outlining administrative policies, the body of the book discusses the entities representing most emergencies. Then, neatly assembled in Appendix A-Z, are many of the facts and calculations which are impossible to recall when needed to deal with pediatric dosages and procedures. The authors eliminate the generic/trade name problem very comfortably.

The manual is highly recommended for Emergency Rooms, family physician and pediatric offices, family practice and pediatric residents, and allied health personnel in these specialities.

William A. Fisher, MD University of Oregon Medical School Portland Manual of History Taking, Physical Examination and Record Keeping. Elmer E. Raus and Madonna M. Raus. J. B. Lippincott Company, Philadelphia, 1974, 588 pp. \$18.00.

This extensive listing of the questions, examination procedures and recording techniques required for patient evaluation is one of the most complete manuals available. It utilizes an outline format which allows one to find and review sections quickly but does not lend itself to reading large sections at one time. It also introduces the student to a large number of medical terms in an orderly manner and provides an excellent glossary, listing the medical term and the lay equivalent

The manual, however, has a number of shortcomings. Most important, there is no explanation as to why a particular question or procedure is preferred. While many of the questions and procedures are self-explanatory, the majority would require some understanding of basic normal and pathological anatomy and physiology. Without these, patient evaluation will become a purely mechanical process, utilizing rote memory. If instruction in the complete and thorough evaluation of the patient is to occur when the student begins to develop his problem-solving methods and to refine his abilities in logical and deductive reasoning, then specific efforts must be made to compensate for this deficien-

An additional problem is that there is no introduction which would suggest methods of optimum utilization of this work or describe how it is used at Case Western Reserve University. Finally, additional illustrations would be of value, particularly in the section on physical examinations. However, those included are of good to excellent quality.

Despite these shortcomings, the manual should be carefully considered for use in courses in clinical evaluation. It could be best utilized in those medical student and physician's assistant programs which correlate basic science and clinical instruction, or those which utilize lectures and demonstrations to make the needed clinical correlations.

George H. Hess, MD Carson City, Nevada Biomedical Ethics: Morality for the New Medicine. Kenneth Vaux. Harper & Row Publishers, New York, 1974, 134 pp., \$5.95.

This is a difficult book to read. It is full of sentences like this one: "Natural law ethics has been transmuted from its biblical possibility by stoicism, particularly in its propensity to fatality and resignation."

It may be a book for theologians with clinical interests, but despite its subtitle "Morality for the New Medicine," it is not a book for clinicians daily faced with problems of transplants, chronic dialysis, extension of life by machine, and the confirmation of death. Consider these sentences: "Is man's emerging skill in genetic control a usurpation of divine prerogatives, a thinking his thoughts after him, or has man at long last taken hold of his responsibility of co-creativity in cosmic subjugation? Has God yielded this power to man who is finally come of age?"

In his dedication, Vaux alleges that the "magnificent generation of medical students who now make ready to administer to other fellow men" is "incapacitated by an ethical wisdom insufficient to their task?" Incapacitated? Absurd. And even if so, I do not think that reading this book would make much difference. Instead, I recommend Humanistic Perspectives in Medical Ethics by Maurice Visscher, Prometheus Books, 1972; Paul Ramsey's The Patient as Person, Yale University Press, 1970; and the earlier bibliography in the Annals of Internal Medicine by J. R. Elkinton (Ann Intern Med 67 [suppl 7]: 69-70, 1967).

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Lecture Notes on Neurology (4th Edition). Ivan T. Draper. J. B. Lippincott Company, Philadelphia, 1974, 216 pp., \$8,50.

This readable, well-organized little book provides an excellent review of neurology in a very practical manner. Illustrated by simple diagrams, it first reviews the relationship between structure and function in the nervous system, and relates these to the common signs and symptoms of neurological disease. After this topic has been covered clearly and succinctly, the neurological history and examination are disposed of in a brief 15 pages. The approach to this procedure is simple, logical, and practical.

The third section deals with diseases of the nervous system, describing the more common conditions and some less common conditions. Throughout the descriptions of the disease processes, the relation between the pathology and resultant disturbance of function is emphasized. The principles of treatment of each disease are clearly and briefly enunciated. However, the author also covers some of the more common symptoms which beset family practice such as headache, facial pain, and vertigo.

While scarcely a book for a neurologist, this work is the type of practical manual that can be utilized by medical students, family practice residents, and practicing family physicians. It would provide excellent review for examination purposes, as well as practical, usable information for those in practice.

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Current Drug Handbook 1974-1976. Mary W. Falconer, H. Robert Patterson and Edward A. Gustafson. W. B. Saunders Company, Philadelphia, 1974, 257 pp., \$5.75.

This handbook was designed for the nursing profession and, as such, is an excellent reference manual for student nurses, as well as practicing R.N.'s in hospitals and offices. All drugs are listed and categorized as to their therapeutic and pharmacological actions. Easy to read in column form are the following headings: name, source, synonyms, preparations; dosage and administration; uses; action and fate; side effects and contraindications; and remarks.

This work is an excellent reference, but has limited use for the practicing family physician. It offers nothing that cannot be obtained from the PDR or the AMA Drug Evaluation reference.

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