

Oxford Handbook of Clinical Specialties (2nd Edition). J.A.B. Collier, J.M. Longmore. Oxford University Press, New York, 1989, 787 pp., \$22.95 (paper). ISBN 0-19-261816-4.

This delightful small text fits easily into a laboratory coat pocket. It is written in a brief, summative form covering all the major disciplines. The text is by no means comprehensive on any topic, but provides a good source of differential diagnoses and methods of treatment of major illness and diseases.

The text contains many drawings, diagrams, and charts containing pertinent information and data for easy reference. The statistical data are taken primarily from the United Kingdom, and many of the trade name drugs are similar, but not identical, to those of the American market. The occasional portions of the text that have to do with British medical practice and social bureaucracy may not be pertinent to American medical practice, but make interesting reading nevertheless.

The book is divided into ten major divisions that cover most of the elements of family practice. The print is small to accommodate a topic on the left-hand page, with blank right-hand pages for notes and updates. If used as an overview and an aide to the memory, the book should prove valuable to family physicians and allied health professionals, in particular students or residents who like a handy reference while caring for their patients.

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Pediatric Secrets. Richard A. Polin, Mark F. Ditmar. Hanley & Belfus, Philadelphia, 1989, 447 pp., \$29.95 (paper). ISBN 0-932883-14-1.

Pediatric Secrets is an entertaining and practical reference for family practice faculty, residents, and students in hospital-based teaching programs. It is organized using a ques-

tion-and-answer format familiar to all participants in the "rounding" process. Its organization by specialty rather than organ system is ideal for the student learning the core content of various pediatric subspecialties. This organizational format is augmented by an excellent index for the reader searching for the meaning of an unusual eponym, drug dosing regimen, or specific disease process.

The book is embellished with humor and often historical information in the answer portions. Illustrations are appropriate but not excessive in number or design. Many useful charts, illustrations, and decision trees are borrowed from other sources.

While the reference does answer many of the most commonly asked questions in the various pediatric subspecialties, it does not provide a comprehensive review in any of the subject areas. This lack does not limit its usefulness, however. Many of the answers will spur the reader to investigate further in a more inclusive resource, many of which are listed at the end of each section.

While this resource is primarily designed for the hospital teaching setting, the sections on growth, development and behavior, immunization, emergency medicine, orthopedics, and toxicology would also be useful to the practicing family physician.

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Textbook of Physical Diagnosis: History and Examination. Mark H. Schwartz. WB Saunders Company, Philadelphia, 1989, 646 pp., \$39.95. ISBN 0-7216-2475-8.

In the Preface, the author acknowledges that there are already many books on physical diagnosis available in the marketplace. The justification for this new text is that it "focuses on the patient: his needs, his problems, his hopes" and "the importance of the 'old fashioned' doctor's approach to the patient."

The book is structured into two sections: the art of interviewing and

the science of the physical examination. The Table of Contents and the Index allow rapid access to any section of particular interest. The general writing style is very readable with brief, pertinent discussions; ample photographs, tables, and figures; and practical examples of questions, clinical interviews, and patient write-ups.

The book has several notable strengths. The first is a clear message that an accomplished physician has insight into his or her own feelings, attitudes, and vulnerabilities. The history and physical examination are not seen as techniques that are performed by an automaton, but a process that requires technical skill as well as interpersonal awareness. Another strength in the interviewing section is the examples of specific questions about common symptoms, rather than a listing of information that must be acquired. The questions give students ways of phrasing their inquiries to get information as well as to accomplish other goals in the physician-patient relationship. The brief discussions of specific techniques, especially confrontation, are very useful and demonstrate that the history is a therapeutic process as well as an information-gathering process. Another strength is the discussion of patient's responses to illness in general and to specific organ system diseases. This discussion reiterated the need to understand the illness from the patient's perspective, which can be so easily neglected when students are first learning history-taking and physical examination. The physical examination is certainly taught from the generalist perspective, as was the author's goal, for all common examination procedures are included, but subspecialized or esoteric items are omitted. Finally, the sections on clinicopathologic correlations are excellent. There is just enough information to help the early student learn the most common problems in each system and begin to learn differential diagnosis by studying the tables in this section.

The book does have some weaknesses, however. For one, the author

describes prototypic patient responses to illnesses and interviewers. These thumbnail sketches are useful in highlighting some of the critical issues for different types of patients; my only concern is that students may prematurely use these categories as convenient stereotypes. Optimally, students would learn the types of issues that should be raised and assessed during the interview. If, however, students stereotype patients, then patients may be treated in inappropriate ways. An additional concern is the content of the sections on clinical decision making and probability assessment. There are areas of confusion regarding Bayes theorem with some apparent errors in the text. It is encouraging that the author is using this approach for physical examination findings, but any confusion in this area is particularly problematic, since students have a hard enough time with this material as it is.

This book is very useful for those involved with introductions to history taking and physical examination, including instructors, students, and clinical preceptors. It is definitely worth a look by course directors trying to choose among the variety of books of similar size and scope.

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