

Book Reviews

Griffith's 5 Minute Clinical Consult 1998. Edited by Mark R. Dambro. 1310 pp. Baltimore, Williams & Wilkins, 1997. \$54.95. ISBN 0-683-30578-6.

Griffith's 5 Minute Clinical Consult 1998 is the sixth annual edition of this quick medical reference for current medical diagnoses and treatment. The text is a comprehensive quick resource primarily for adult medical and surgical problems. Approximately 585 topics are reviewed in an expanded format that contains sufficient information to confirm these common diagnoses and treat these problems. An additional 414 topics are presented in a shorter, more concise format. More than 300 clinicians contributed to this current edition. The format for the expanded topics includes a consistent 2-page, chartlike format with six major divisions: basics, diagnosis, treatment, medication, follow-up, and miscellaneous.

The range of topics is impressive and provides the busy clinician with a succinct review in a usable format. Diagnostic steps and treatment options appear to represent contemporary practice. The information is practical and based on expert opinion, not on evidence-based methods. Particularly useful is the ICD-9-CM coding information for each problem discussed. The brief reference section includes an Internet reference to this edition's Website. The entire text of this volume will be available on Stat-Ref by midsummer.

Griffith's 5 Minute Clinical Consult 1998 is a convenient resource in a format appropriate for a busy clinical practice. I can recommended this resource in its text, Website, or Stat Ref format.

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The Computer-Based Patient Record: An Essential Technology for Health Care. Revised Edition. Edited by Richard S. Dick, Elaine B. Steen, and Don E. Detmer. 234 pp. Washington, DC, National Academy Press, 1997. \$34.95. ISBN 0-309-05532-6.

This book, developed by the Committee on Improving the Patient Record in Response to Increasing Functional Requirements and Technological Advances of the Institute of Medicine, is appropriate for all family physicians considering computerizing their medical records. One of the better primers in computer-based patient records (CPR), it covers the basics quite satisfactorily.

The first edition of this volume was published in 1991; unfortunately, only a very small portion of the book has been changed since then. In the earlier edition the CPR group at the Institute of Medicine voiced their hopes that CPRs would become widely used in the United States by the year 2001. In the introductory

material to the current volume, the editors note that as a nation we are behind schedule in meeting this goal, but that we are moving forward steadily.

The first volume dealt with the critically important issues of why we should use computer-based medical records, why now, who is currently using computer-based patient records, what technology is available, what further research needs to be done, and what government, medical organizations, and others can do to facilitate the transition to CPRs. These questions, which were addressed admirably well, allowed the reader to grasp within a few pages a subject that had not previously been described in a satisfactory fashion.

One of the most important areas in the original text was the following set of five recommendations:

Recommendation 1: The committee recommends that health care professionals and organizations adopt the CPR as the standard for medical and all other records related to patient care. As they discussed this recommendation, the committee developed 12 very important attributes that CPRs should possess.

Recommendation 2: To accomplish Recommendation 1, the committee recommends that the public and private sectors join in establishing a computer-based patient record institute (CPRI) to promote and facilitate development, implementation, and dissemination of the CPR. The committee at that point went on to explain the mission of CPRI.

Recommendation 3: Both the public and private sectors should expand support for the CPR and CPR system implementation through research, development, and demonstration projects. Specifically, the committee recommends that Congress authorize and appropriate funds to implement the research and development agenda outlined below. The committee further recommends that private foundations and vendors fund programs to support and facilitate this research and development agenda. In this recommendation, the important topics of data standards, security standards, quality assurance, and structure and format of the patient record were discussed.

Recommendation 4: The CPRI should promulgate uniform national standards for data and security to facilitate implementation of the CPR and its secondary databases.

Recommendation 5: The CPRI should review federal and state laws and regulations for the purpose of proposing and promulgating model legislation and regulations to facilitate implementation and dissemination of the CPR and its secondary databases and to streamline the CPR and CPR systems. To some extent progress has been made in accomplishing these original recommendations.

The first two chapters (the only new work added) make up the most useful section of this revised edition.