"PSA testing is recommended for all men aged 50 years and older." References are provided, but the text gives little assistance to the reader who wants to develop an informed opinion based on scientific evidence. For this reason, the *Guide to Clinical Preventive Services: Report of the US Preventive Services Task Force* will continue to be a much more useful reference for most of the needs of the practicing primary care provider.

Michael W. Maples, MD Central Washington Family Medicine Yakima, WA

1993 Pocket Book of Infectious Disease Therapy. By John G. Bartlett. 262 pp. Baltimore, Williams & Wilkins, 1993. \$13.95 (paper). ISBN 0-683-00443-3.

The 1993 Pocket Book of Infectious Disease Therapy is the 4th edition of this pocket-sized paperback text. The author states the goals of the book are "to provide standards of care with particular emphasis on antimicrobial agents, their selection and dosing regimens."

Structurally, the book is divided into four sections: Antimicrobial Agents, Preventive Treatment, Non-bacterial Infections, and Specific Types of Infections. Each section is then subdivided into a number of various topics. The text is written predominantly in brief outline and table formats. The various sections, however, are not very well delineated, i.e., there are no tabs or side-of-page markers for easier identification of the sections by the reader. The print is small, but it is readable.

The information in the text is up to date and includes many of the newer antibiotics, as well as treatment recommendations in such ever-changing areas as acquired immunodeficiency syndrome and human immunodeficiency virus infection. Many of the recommendations are based on those made by notable authorities, such as the Centers for Disease Control and Prevention, Medical Letter on Drugs and Therapeutics, AMA Drug Evaluation, and statements from societies, e.g., the American Heart Association. There are reference notations, where appropriate.

For family physicians, the sections on antibiotics in pregnancy, adult immunization, use of prophylactic antibiotics, and travelers' conditions are very helpful. The book contains valuable information for any physician, as we all treat infectious diseases. It is a handy, quick reference source that compiles a great amount of information in a small volume. Although it is a therapy text, it does include some diagnostic criteria and tests for selected diseases. It is useful for all physicians, from residents to those established in their private practices.

I cannot help but compare this text with another well-known antimicrobial pocket publication. I cannot firmly recommend one over the other but would advise looking at each to make a decision as to which text is preferred as a quick reference guide to infectious disease therapy.

Ralph W. Dickson, MD Mohnton, PA Pediatric Orthopedics, A Guide for the Primary Care Physician. By Richard J. Mier and Thomas D. Brower. 327 pp., illustrated. New York, Plenum Medical Book Company, 1994. \$45. ISBN 0-306-44796-7.

In 1975 I had the good fortune to be assigned to 2 weeks of orthopedic surgery during my 3rd-year general surgery rotation at the University of Kentucky. In addition to being a first-rate teacher, the attending physician, Thomas Brower, bore a striking resemblance to Sid Caesar and demonstrated an equally good sense of humor. Students knew that when Dr. Brower spoke, we would hear either an invaluable pearl or a superb bit of humor. Those 2 weeks instilled in me a love of orthopedics that persists to this day. More importantly, the clinical wisdom that Dr. Brower shared continues to play a major role in my day-to-day practice of family and sports medicine.

As was my early educational experience with Dr. Brower, the text by Drs. Mier and Brower is filled with clinical wisdom. The authors recognize that generalist physicians are in the forefront in pediatric care. In the Preface they note that numerous complaints in this age group are related to the musculoskeletal system and that primary care training should emphasize pediatric orthopedic skills. Unfortunately, in many residency programs pediatric orthopedic skills are not emphasized. Compounding matters is that few texts on pediatric orthopedics have been targeted to the primary care audience. Drs. Mier and Brower have written such a text with the aim of providing "a framework for the effective evaluation of childhood musculoskeletal problems in a practical and problem-based manner." Fortunately, for those of us on the receiving end, their aim was true. For this reason, Pediatric Orthopedics will find a welcome home on

the bookshelf of any primary care physician. The book is divided into 11 chapters that cover topics ranging from examination, to child abuse, to trauma, to sports medicine, to development, and to arthritis. Each chapter is concise, readable, and filled with practical pointers. The chapters would likely be read in their entirety as the clinician encounters a particular problem. The text does not make the error of trying to discuss each problem comprehensively, but rather it focuses on providing the essentials that the first-line physician needs. There are an adequate number of pictures and radiographs to supplement each topic. Organization is excellent, as evidenced by outlines at the beginning of each chapter. References to the individual chapters are not extensive but in most cases include suggested readings that are helpful.

As the authors note, the primary care physician of the future will play an expanded role as government seeks to promote generalists and limit specialists. Children deserve a competent but family-oriented approach to their musculoskeletal problems. This text should help the primary care physician provide nonsurgical orthopedic care that too often has been available primarily in the orthopedist's office.

Karl Fields, MD Greensboro, NC