

words, "a doctor who makes house calls." He also served as a medical college trustee, president of the American Society of Internal Medicine, author and medical editor, and elected member of the Institute of Medicine. His journey in the profession coincided with the latter half of the 20th century. He does, as the subtitle implies, try to draw lessons for the next century, but the main emphases are on health care as he lived it and the evolution of his thinking about his profession. Although recommended readings are listed at the end, the book is not a referenced historical treatise. Instead, its strength and wisdom come from a skilled writer's very thoughtful, candid, and personal reflections on his experience.

Physicians who have lived through the same era will find much that ratifies their experience and effort. Students and residents, if they can find the time, will find inspiration, and as the author hopes, health care policy makers from other professions would gain valuable insight into medical practice. Family physicians in particular will identify with Dr. Felch's vision of the generalist in medicine and, I hope, heed his admonition at the close of the essay titled "The Generalist/Specialist Dichotomy":

I submit that we generalists should take a strategic leaf from the family physician group. We FPs and general internists and general pediatricians should band together to upgrade the image of generalists, reminding the public that we can take care of most human ailments, that our role in delivering first-contact and continuing care really is important and that our method of delivering that care emphasizes its humane and caring elements - things that the public clearly craves.

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Guide to Clinical Preventive Services. Second Edition. Report of the U.S. Preventive Services Task Force. 953 pp. Baltimore, Williams & Wilkins, 1996. \$24 (paper). ISBN 0-683-08508-5.

Disease prevention and health promotion are foundational components of the clinical practice of family medicine. When the US Preventive Services Task Force published its first report in 1989, the guide soon became a widely regarded resource for the effectiveness of clinical preventive service. This new, second edition provides the most up-to-date guidelines available, providing primary care health professionals with key information on the proven effectiveness of preventive services from published clinical research. The guide provides family physicians with an essential tool in the implementation of preventive services in their office and community.

The second edition of the guide includes 11 new chapters, now providing 70 topics, organized into three sections: screening, counseling, and immuniza-

tions and chemoprophylaxis. The underlying philosophy of the Task Force is evident throughout the guide: health professionals should recommend only those interventions for which there is convincing evidence that the benefits will outweigh the potential harm. The practicing clinician will be drawn regularly to the well designed and organized layout for each topic. When first reviewing the guide, however, the reader should take the time to read the "Introduction." In it the overview and methodology are very well described and provide the scientific justification and credibility for the entire guide. The approaches used by the Task Force in their review of the published literature and their grading of the quality of evidence (see Appendix A), are particularly important in putting the guidelines in their appropriate context. Indeed, this methodology serves as the model against which the myriad of other clinical guidelines should be compared.

Each chapter starts with a succinct and readable recommendation for the clinical topic. A 10- to 15-page discussion then follows, addressing the burden of suffering, accuracy of screening tests, effectiveness of early detection, and recommendations of other groups. Each chapter concludes with the Task Force's graded (A through E) recommendation for clinical intervention. The reviewed references are appropriately noted and follow each chapter.

In summary, the second edition of the *Guide to Clinical Preventive Services* represents the current knowledge of the key preventive services relevant to the primary care of individuals, families, and populations. This guide is a highly recommended addition to the library of any family physician.

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Primary Care Orthopaedics. By Victoria R. Masear. 367 pp., illustrated. Philadelphia, W.B. Saunders, 1996. \$55. ISBN 0-7216-5436-3.

Primary Care Orthopaedics was written by faculty, residents, and fellows in the Orthopedic Department of the University of Alabama at Birmingham. The authors' primary goal is to familiarize medical students and primary care physicians with the most common orthopedic conditions. Following chapters covering the orthopedic examination and orthopedic emergencies, the remainder of the text is devoted to individual anatomic regions and the conditions that affect those regions. Developmental conditions, arthritis, tumors, chronic pain, and casting and splinting techniques are also covered.

As is the case with some multiple-authored texts, this book suffers from inconsistency of content from one chapter to the next. Less than 1 page is devoted to neck and back pain, whereas elbow fractures and dislocations are covered in 7 pages. The amount of detail provided for individual conditions varies, and the in-

formation is not well organized, which makes finding answers to specific questions time-consuming. Some conditions that family physicians manage regularly, such as torus fractures of the radius, are not even mentioned.

The quality of the line photographs and radiographs is quite good. Nevertheless, the line drawings are uneven, some being quite detailed and others too simplistic. I found a number of instances in which illustrations did not accompany text information when it would have greatly helped the reader understand the anatomy or a particular injury.

This book achieves its intended goal "to familiarize." It provides a general descriptive overview of a number of orthopedic conditions. Medical students who want to learn more, but are not primarily responsible for managing these conditions are probably the audience best served by this book. Practicing family physicians will find it much less useful because it does not offer a systematic approach to individual conditions encompassing the clinical examination, diagnostic testing, treatment, and indications for consultation or referral—a feature necessary in any primary care orthopedic reference.

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Venous Disorders—A Manual of Diagnosis and Treatment. By G. Beiarco, A.N. Nicolaidis, and M. Veller. 204 pp., illustrated. Philadelphia, W.B. Saunders, 1996. \$35 (paper). ISBN 0-7020-2016-8.

The typical primary care physician will find much of this soft-bound book quite relevant to daily clinical practice. Many areas of *Venous Disorders*, however, deal in such depth that only those physicians with a specialized interest in the basic science of venous disease and its applications to practice would appreciate the academic presentation.

The authors start with a thorough discussion of the anatomy and physiology of the venous and lymphatic systems plus an overview of their pertinence to associated disease processes. The degree of detail here is admirable and appropriate for the vascular specialist. As an example, the discussion gets to the level of endothelial cell function in venules.

Most family physicians will find the chapters covering varicose veins, superficial and deep venous thrombosis, pulmonary embolism, and the prevention of thromboembolism rewarding. I found especially helpful the section that elucidates the perplexing problem of the evaluation and treatment of the swollen limb. Further chapters complete this excellent account of vascular disease by focusing on less frequently encountered problems, including subclavian venous thrombosis, venous lesions involving the genitals, and finally, rare disorders.

The authors have had this text thoroughly illus-

trated with color photographs, diagrams, charts, and many reproductions of Doppler sonograms. Extensive updated bibliographies follow each chapter. A final chapter serves as an appendix of therapeutics used in the treatment of various venous diseases and includes medication selection, dosages, side effects, precautions, and the recommended duration of use.

It is possible to study quickly all the clinically relevant sections of this book, as the style of presentation allows for ease in locating desired material. At the same time, family physicians might find that *Venous Disorders* falls short of effectively answering all of the questions concerning the venous system that arise in everyday clinical practice.

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Exploring Rural Medicine. Edited by Barbara P. Yawn, Angeline Bushy, and Roy A. Yawn. 332 pp. Thousand Oaks, Calif, Sage Publications, 1994. \$24.95 (paper). ISBN 0-8039-4852-2.

Much of America's population is rural and has unique social, economic, and cultural characteristics. Many dedicated health professionals provide care to these often isolated communities. *Exploring Rural Medicine* approaches family medicine topics from a rural perspective. Each chapter is well organized into introduction, subtitled discussions, and summary. Important aspects of disease process, psychosocial factors, diagnosis, and management are included. Chapters are sprinkled with reference tables, case studies, and recommended readings.

The book begins by addressing: "What is rural? How is rural practice different?" and, "What is the future of rural medicine?" The chapter ends with an optimistic tone, "Great opportunities exist in rural areas...for energetic creative physicians." The book quickly delivers three obstetric crises feared by the rural practitioner: dysfunctional labor, fetal distress, and shoulder dystocia. The chapter "Adolescent Pregnancies in Rural America" is an excellent literature review of a complex problem in which teen's perceptions, attitudes, and values are considered. "Environmental Hazards" is well written, offering such cases as a 4-month-old infant with methemoglobinemia from nitrate exposure.

"Treatment of Acute Myocardial Infarction With Thrombolytic Drugs" is a practical discussion helpful to anyone considering working in a rural hospital. "Caring for the AIDS Patient in a Rural Practice" is interesting, organized, and practical with suggestions for keeping up to date. The text then deals with the physician as advisor to patients with terminal illnesses. A review of common cancers and current reasonable therapies is followed by a discussion on how to tell a dying patient the truth while maintaining hope. Important concepts of death—self-determination, family consultation, pain management, and grieving—are included. A nice chapter highlights the importance of