

**Minor Emergencies: Splinters to Fractures.** By Philip Butt-aravoli and Thomas Stair. 544 pp, illustrated. St. Louis, Mosby, 2000. \$34.95 (paper). ISBN 0-323-00756-2.

It has been 15 years since the publication of the first edition, then titled *Common Simple Emergencies*. The authors again direct this second edition primarily toward practicing emergency physicians. Combining their 45 years of experience in the practice of emergency medicine, they have designed a quick reference guide for some of the commonly encountered problems in the acute setting.

There are 179 chapters divided into 11 sections according to system. The format of each chapter is consistently the same, making the information easy to access. The chapters are arranged in the following manner: presentation, what to do, what not to do, discussion, and suggested readings. Most chapters contain excellent illustrations and black-and-white photographs that complement the text. Good detailed instructions for what to do are followed up with equally well-thought-out precautions of what not to do. Key elements are highlighted in boldface type. The references at the end of each chapter provide current resources. The well-organized index is logical and uniformly reliable. The appendix also contains a good section on how to administer oral anesthesia and digital blocks.

I could find only a few minor criticisms. Initially, the title of the book might be somewhat misleading to the buyer. After scanning the topics in the Table of Contents, the reader might question the authors' definition of emergencies; approximately one third of the topics would not be recognized true minor emergencies. Rather, the topics appear to represent those nonurgent conditions that typically plague emergency departments (eg, conjunctivitis, cerumen impaction, vaginosis, diaper rash, etc). A different title might be more appropriate and less misleading, such as "Common Problems Encountered in Urgent Care Centers" or "Common Nonemergent Problems Encountered in the Emergency Department."

Some of the chapters dealing with orthopedic problems would have benefited from the inclusion of more x-ray photographs, especially in the chapters dealing with shoulder dislocations, scaphoid fractures, patellar dislocations, clavicle fractures, and finger dislocations.

Overall, I would recommend this book for any primary care provider who is interested in acute care, and every urgent care center and isolated rural clinic should have this book on its shelf. The topics discussed are typical of what providers do encounter in this setting. The book will serve as an invaluable quick reference for those who want reliable information at their fingertips.

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**Pocketbook of Orthopaedics and Fractures.** By Ronald McRae. 536 pp, illustrated. Philadelphia, Churchill Livingstone, 1999. \$32 (paper). ISBN 0-443-05952-7.

This soft-bound pocketbook, written by a British orthopedic surgeon, is a condensed version of clinical orthopedic and fractures books that have been written by the same man.

In the first 13 chapters, the author describes the orthopedic examination, divided by joint or region. A one- or two-paragraph description of common conditions by region is included in each chapter. Fractures and dislocations are discussed separately in 16 additional chapters.

One half of this book is devoted to examination techniques. There are better quick references for practicing physicians to find this information, such as *Hoppenfeld's Physical Examination of the Spine and Extremities*. Numerous line drawings depict physical signs, anatomy, and nerve function. Often these illustrations are helpful and detailed. Some, though, are overly detailed. Many illustrations have various numbers or letters with arrows pointing to particular features on a drawing, and the reader is required to search through a detailed legend to find the name of that particular structure. This effort becomes cumbersome for many of the drawings.

The information describing general principles of fracture management, including casting, splinting, complications, reduction principles, and fracture healing, is very good and provides an excellent overview of fracture care. Many of the individual fractures, however, are either those not managed by family physicians or are those requiring operative treatment. There are detailed descriptions of reduction techniques for practitioners who work in a setting where they will be doing reductions.

Overall, this book has some useful information, but a great amount of material is not pertinent to a primary care setting. Although the illustrations of physical examination techniques and fracture reduction techniques are especially useful, the evaluation, diagnosis, and management of many common orthopedic complaints encountered in a primary care setting are covered in insufficient detail.

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**Women's Health Care Handbook. Second edition.** Edited by Bruce E. Johnson, Cynda Ann Johnson, Jane L. Murray, and Barbara S. Apgar. 666 pp. Philadelphia, Hanley & Belfus, 2000. \$55 (paper). ISBN 1-56053-356-0.

In the second edition of the *Women's Health Care Handbook*, each chapter has been updated to reflect any new advances and includes additional information on non-

pharmacologic or alternative approaches to women's health concerns. It is a comprehensive but concise compendium of the scope of women's health issues seen in primary care.

Gynecology and medical diseases of special importance for women are covered. The handbook includes age-specific health-promotion recommendations starting with adolescence; such lifestyle issues as parenting, divorce, sexual orientation, and psychologic disorders related to abuse; and relationships.

Each chapter is in outline format and starts with a section called "The Issues." This section discusses the role of each topic in women's health and areas of controversy. Next is a section called "The Theory," which is a brief review of basic information. The final section, "An Approach," provides practical and specific recommendations. This last section reflects, in part, the author's own practice style and experience, which is a mixed blessing in an otherwise wonderful reference. For example, three approaches to breast-cancer screening were described by different contributing authors.

Nevertheless, the feast of useful information offered in this handbook, written by and for family physicians, far outweighs any drawbacks. It should be in every residency and family physician's library.

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**Primary Care Management of Heart Disease.** Edited by George J. Taylor. 658 pp, illustrated. St. Louis, Mo, Mosby, 2000. \$69. ISBN 0-323-00256-0.

Cardiac illnesses are part of a family physician's daily practice. With ever-changing diagnostic and therapeutic advances in the field of cardiology, a reference text pertaining to cardiac issues would be an asset to a practicing physician. *Primary Care Management of Heart Disease* is designed to fill that void in one's medical library.

This hard-bound text is divided into three general parts. The first part on general principles is made up of 10 chapters on topics that include basic pathophysiology, the history and examination of cardiac patients, and various diagnostic tests, such as electrocardiograms, stress testing, echocardiograms, nuclear testing, and catheterizations. The second part addresses a multitude of cardiac illnesses. It is divided into eight sections comprised of 43 chapters. Topics covered include atherosclerotic and valvular disease, arrhythmias, heart failure, and vascular diseases. Additional chapters address ailments and conditions that can affect the heart, such as endocrine, pulmonary, and renal disease, as well as issues of pregnancy, nutritional disorders, and aging. A section is also included on management issues, such as surgical risk and management, intensive care issues, cardiac emergencies, cardiac disability and other legal issues, and palliative care. The last section is an exhaustive compendium of drugs used in cardiology, listed by generic name, including their pharmacology, indications, dosing, costs, side

effects, interactions and cautions, and special considerations.

Each chapter is authored by both a cardiologist and a primary care physician. The chapters covering the cardiac illnesses are divided into sections on epidemiology and etiology, pathophysiology, clinical presentation, management, and treatment. There are references and a bibliography at the end of each chapter. Boldface red lettering delineates the various sections well. The numerous figures and tables that highlight the prose stand out against a light red background. The text is easy to read, and the subject matter is presented in a user-friendly manner. Despite being a comprehensive text, this book does not seem overburdened in minutia. The chapters on the various cardiac illnesses address these topics in a well-organized, easy-to-read format, providing the practitioner with useful current information on the more common cardiac conditions encountered in daily practice. The section on noncardiac illnesses affecting the heart and the chapter on various management issues, such as cardiac disability and end-of-life issues, were nice features.

This text would serve the practicing primary care physician, medical resident, and medical student well as a cardiology reference. It is comprehensive but does not feel overwhelming.

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**Differential Diagnosis of Common Complaints. Fourth edition.** By Robert H. Seller. 442 pp, Philadelphia, W. B. Saunders, 2000. \$29.95 (paper). ISBN 0-7216-8017-8.

Family physicians encounter daily the challenge of the differential diagnosis of common symptoms. It behooves those physicians to be thoroughly familiar with strategies that promote a timely and accurate diagnosis, given the numerous demands for efficiency in contemporary practice settings. Seller orients the 4th edition of his book once again to the patient's initial complaint and the expeditious evaluation thereof.

The essence of this soft-bound book is 36 chapters, each of which describes the evaluation of one common symptom, in alphabetic order, from abdominal pain to weight loss. Every chapter has a standardized format. The introduction includes the most common diagnostic considerations of the symptom under discussion. A section on the nature of the patient reviews the typical profile of the patient with the symptom (age, sex, associated illness, etc). The next section expands on the nature of the symptom according to its duration, acute vs chronic aspect, and typical characteristics. Then sections on associated symptoms, precipitating and aggravating factors, ameliorating factors, physical findings, diagnostic studies, and less common diagnostic considerations follow. An invaluable table summarizing the differential diagnostic possibilities, as well as information from each of the aforementioned sections, appears at the end of each chapter, as does a recent literature documentation.