tions listed above. The physician should not be complacent in the acquisition of drug therapy information or be lulled into a false sense of security, thinking that all of the necessary information can exist in one book.

Kathryn M. Larsen, M.D. Orange, CA

The Art of General Practice. Fourth edition. By David Morrell. 157 pp. Oxford, MA, Oxford University Press, 1991. \$45. ISBN 0-19-261988-8. \$19.95 (paper). ISBN 0-19-261990-X.

This small book is a very personal work. It reflects the author's own experiences, which he has studied carefully during many years of private and academic involvement. There are some appropriate references to other researchers, but generally the reader will appreciate the art of general practice from the author's own perspective and philosophy.

Chapters include overviews of the organization of primary medical care; characteristics of general practice; solving problems in general practice; prognosis; prevention, health education, and the

primary care team; and treatment.

Specifics are relevant to the United Kingdom Health Service, and little attempt is made to compare it with other countries' systems. Thus, the generalizability of the information depends on those general principles of general and family practice that enjoy universality, of which there are many. References to health visitors, however, or cough as the commonest presenting symptom are not directly applicable to North American medicine.

While directed primarily to medical students, there are instances when the author's enthusiasm to make a point might be confusing to the tyro clinician. In one section, cough is the most common symptom in general practice; then, in another, pain is by far the most common. In one instance, interpreting the problems presented to them in terms of their patients' needs is the most important function of general practitioners; then, the provision of medical care in the community is concerned, above all, with effective preventive services.

The book is not intended to be a textbook of general practice. I would recommend the book as a good introduction to general practice for a medical student in the United Kingdom. It would not satisfy the needs of a trainee or resident physician. There are more appropriately referenced introductions to family practice for North American students, but the book does put forward well the universal principles of primary medical care.

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## UNIVERSITY OF MINNESOTA MEDICAL SCHOOL

## RURAL PHYSICIAN ASSOCIATE PROGRAM (RPAP)

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The candidate will be expected to be board certified in family practice. He/she should have experience in rural health care and/or involvement in rural health care initiatives and credentials in clinical research and curriculum development. Qualifications for Assistant Professor include demonstrated involvement in research and educational activities; qualifications for Tenured Associate Professor include professional distinction in research and demonstrated effectiveness in teaching and advising; and qualifications for Tenured Professor include a national reputation in research and evidence of leadership in candidate's professional

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Paul Quie, M.D.
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