

The Guide to Medical Professional Liability Insurance. By Kirk B. Johnson, Martin J. Hailie, and Ilene Davidson Johnson. 146 pp. Chicago, American Medical Association, 1991. \$24 (AMA members) (paper), \$29 (non-AMA members). ISBN 0-89970-440-9.

The Guide to Medical Professional Liability Insurance is a concise, easy-to-read paperback written by members of the Division of Professional Liability and Insurance, American Medical Association. It is a reference source, and the main objective is to present "information the physician should know in an unbiased, concise, and comprehensive manner."

Structurally, the text is divided into nine chapters, which include such topics as the differences between occurrence and claims-made coverages, the description of a malpractice insurance policy, as well as how to evaluate such a policy, what physicians need to do if a claim is filed against them, how much insurance a physician needs, descriptions of insurance organizations, and a section specifically devoted to the special circumstances of an employed physician, including coverage while being a resident in training. There are 10 appendices, which include a checklist on what to do when a claim is made, a list of insurance writers by states and their average rates, and a list of physician-owned companies, as well as data on liability premiums from 1982 through 1989. A glossary concisely defines many of the medicolegal terms used in the text. Finally, a comprehensive index is provided for quick and easy reference.

One excellent feature is the use of case examples in discussing the various topics. In this manner, the medicolegal concepts, which tend to be somewhat abstract, are made more concrete and understandable to the lay reader. Another helpful feature is that key words are in bold print, and the word or concept is then further described in the margins of the text where the word is used. This layout allows for easy reading, as one does not have to turn to the glossary or another reference book to look up terms not fully understood. One drawback, however, is that there is no specific list of references used for the information given, nor is there a list of references for further reading on specific topics. Also, some would find the cost a bit high for a 146-page paperback.

In general, the authors seemingly meet their goal of publishing a comprehensive, easy-to-understand review of medical liability insurance. This topic is not taught very much in medical school or even in residencies. As a recent graduate of a family medicine residency, I found the information to be invaluable to my understanding of professional liability insurance. I would recommend its use in residencies as a source for part of a practice management rotation. Because

it is a concise review of malpractice insurance, I would also recommend it to physicians already established in their practices; it brings up key points about insurance coverage that a currently practicing physician might not have realized. This book is not just for family physicians but for all physicians.

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Instructions for Pediatric Patients. By Barton D. Schmitt. 240 pp. Philadelphia, WB Saunders, 1992. \$32.50 (paper). ISBN 0-7216-3160-0.

Sometimes an idea makes such good sense, it is surprising no one thought of it sooner. Such is the case with Dr. Barton Schmitt's *Instructions for Pediatric Patients*. This book is a collection of 137 educational handouts on a wide variety of pediatric topics. The handouts are bound into a book, but the pages are perforated and are meant to be copied and distributed to parents. Dr. Schmitt covers almost every conceivable topic from what to buy before bringing the new baby home to dealing with adolescent rebellion. The book is divided into seven broad categories: New Baby Care, Feeding and Eating, Preventive Pediatrics, Common Infections of Childhood, Pediatric Dermatology, Miscellaneous Physical Problems, and Behavior Problems. Each handout defines the issue, identifies its causes, suggests what parents can try at home to alleviate the problem, and gives advice on when to call the physician. The information is in easily understood lay terminology at the sixth to seventh grade reading level, and it is neither condescending nor paternalistic.

The premise of the book is that parent education is the key to empowering families, increasing compliance, improving pediatric health care delivery, and reducing physician stress. Dr. Schmitt recognizes that parents are an integral part of the health care team and need to be active participants in the health care delivery to their children. He also recognizes that in the course of a busy office day, many physicians do not take the time to educate parents, which leads to confusion about the problem and its treatment, decreased compliance, an increased number of after-hour calls, and dissatisfaction with the physician. With a handout, parents have a reference sheet that they can read in the office, ask questions about it before leaving, and refer back to it later, rather than depending on memory and perhaps faulty communications in the examination room. Equally important, parents have something to show other family members and friends who may have ideas at odds with the physician's on how to treat the specific issue.

Dr. Schmitt's book is targeted for parents of pediatric patients, but it will be equally useful to residents and practicing physicians. Residents will benefit from the wealth of sound pediatric advice, the type that is not taught in medical school and is often neglected in residency. What foods are most allergenic? How can I stop bedtime resistance in my two year old? Is sugar really bad for my child? Should I make my child stop sucking her thumb? Should I help my child with homework? Practicing physicians will benefit from not having to make up so many educational handouts themselves. The advantage of this book is that the handouts are ready to distribute, cover a wide range of topics, and contain up-to-date medical information and sensible suggestions. Since I received this book for review, not only have I been distributing relevant pages to my patients, I have also been reading it for my own education.

Dr. Schmitt recognizes that there are many different "correct" approaches to pediatric care and that not everyone will agree with 100 percent of what is in the book. He suggests that practitioners use white correction fluid on portions of the master copy that they disagree with and add other suggestions and comments as desired. He also recommends that practitioners put their names and office numbers on each handout.

This is a well-organized book with no serious weaknesses. Almost every common pediatric health issue is covered, with the only noticeable exception being HIV disease. I rarely have a pediatric encounter in the office for which I cannot find good use for one of the handouts in this book. An excellent index makes finding the right handout easy. The introduction gives ideas on how to best distribute the handouts in the office.

Unlike many pediatric texts, this one will not help with the treatment of retinoblastoma or give the differential diagnoses for abdominal mass in a 4-month-old child. For most family physicians and pediatricians, however, it will be useful every day in educating parents and improving health care delivery to children.

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Medical Management of the Surgical Patient. By *Geno J. Merli, and Howard H. Weitz.* 480 pp., illustrated. Philadelphia, W.B. Saunders, 1992. \$29.95 (paper). ISBN 0-7216-3485-0.

This soft-cover book fits into the pocket of a laboratory coat. It is inexpensive and very handy to have when caring for the surgical patient. It is written by clinicians for clinicians, and it succeeds nicely in doing what it intends to do: assist the physician in evaluating and preparing patients for surgery and in providing answers to questions that commonly come up in surgical patient management. Its 19 chapters and eight appendices discuss, in a pragmatic and straightforward fashion, the problems that arise, such as preoperative evaluation recommendations, antibiotic prophylaxis, nutritional needs, deep venous thrombosis and embolus prevention, and perioperative and intraoperative diabetes care.

The index works well, and answers are easy to find. In the orthopedic surgery appendix, for example, there is an easy-to-follow outline of what to expect from a total knee replacement procedure: duration of surgery, anesthesia requirements, expected blood loss and transfusion needs, possible postoperative complications, and procedure-specific medical recommendations. Its purpose is not to teach nonsurgeons how to be surgeons but to help those physicians who participate in the medical care of surgical patients to prepare patients for surgery, anticipate problems, recognize complications, and deal with those that arise.

Family physicians, resident physicians, and medical students are all well served by this book. It is detailed enough to be thorough, yet it is readable and economical in its presentation. The tables are numerous and well organized. I could not think of any problem or question that was not easily found and answered in the book. I highly recommend it for those physicians who care for surgical patients.

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