Clinical Intensive Care and Acute Medicine, 2nd edition. Ken Hillman and Gillian Bishop. Oxford, United Kingdom: Cambridge University Press. 2004. Soft cover, illustrated, 685 pages, \$95.

Clinical Intensive Care and Acute Medicine provides a practical and useful review of essential information for intensive care unit (ICU) clinicians. This book is particularly well-suited for trainees in intensive care, because the descriptions and explanations are fundamental and based on sound pathophysiology principles. The book is organized in a descriptive outline format that facilitates rapid review across the entire scope of critical care medicine. The didactic style, as well as the clear and concise explanations in every chapter, makes this book an ideal introduction for critical care nurses, medical students, therapists, and in-training physicians who are called on to recognize and care for critically ill patients.

The authors emphasize important and evolving concepts, such as the need for a hospital-wide approach to critical care, the early recognition of seriously ill patients, ICU quality assurance, and the systematic assessment of the ICU patient. The first 3 chapters, "A Systematic Approach to Caring for the Seriously Ill," "Organization of an ICU," and "Routine Care of the Seriously Ill," underscore these themes. These chapters are highly clinically relevant and are the portions of the book that are of greatest value to experienced ICU physicians and fellows training in critical care. As explained by the authors in the preface, the title of the 2nd edition of the book was changed to Clinical Intensive Care and Acute Medicine because "... the walls of the intensive care units are becoming more virtual as their staff are being asked to consult on seriously ill patients both before and after ICU admission," and "Increasingly the principals of acute medicine are part of the knowledge base of intensive care medicine."

The text is well written, its contents are easy to read, and desired information can be easily located. Key principles of pathophysiology and management (eg, respiratory failure and principles of oxygenation, in Chapter 16) are accurate and logically sound. The book was written by 2 authors and is organized into 31 chapters. The chapters are divided into sections that deal with either basic pathophysiology principles (eg, fluid therapy and electrolytes, nutrition and metabolism, cardiovascular and respiratory fail-

ure) or specific problems, such as diseases and syndromes commonly encountered in the ICU. The latter generally contain brief topic definitions, diagnostic and management strategies, and relevant information on clinical features and specific disease outcomes. Many chapters also have a problemoriented approach, such as "Interpretation of the Portable Chest Film" (Chapter 17).

The book contains more than 30 well-structured, informative figures and 100 similarly useful tables. There are 8 appendixes, which contain normal laboratory values, cardiorespiratory abbreviations and formulas, as well as a table of therapeutic and toxic drug levels. The index is useful, thorough, and well organized.

Twenty-five of the 31 chapters begin with a summary box that is structured as an objective outline that emphasizes key concepts for that chapter. Nine chapters conclude with a "troubleshooting tips" box that contains a short problem-oriented outline for a particular clinical condition. These are first-rate teaching aids. Instead of a complete bibliography, each chapter ends with a selected reference list that includes Web sites for additional reading. The pros and cons of this approach are well known, but the suggested readings included with each chapter are relevant.

The text is written in straightforward language, and we found no typographical, spelling, or grammatical errors. We do have a few criticisms of the book, such as the omission of ventilator-associated pneumonia as a free-standing topic, and the need for a more thorough discussion of specific treatment strategies related to some topics. Example topics would include disease-specific diagnosis and management "bundles" (such as the "surviving sepsis campaign guidelines for the management of severe sepsis and septic shock"), "tight" glucose control, prophylaxis for deep venous thrombosis, and stress ulcer prophylaxis. However, this is not a major shortcoming, because the content is "unbundled" and embedded within other chapters throughout the book.

In summary, Clinical Intensive Care and Acute Medicine is a comprehensive, well-organized, critical care companion book and a useful practical guide that concentrates on the relevant areas common to all critically ill patients. We especially recommend this book for ICU trainees, at all levels, as well as those who work elsewhere

in the hospital but are called on to provide quality critical care to their patients.

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**Q&A** Color Review of General Critical Care. H Mathilda Horst MD and Riyad C Karmy-Jones MD. (Q&A Color Review Series) New York: Thieme. 2003. Soft cover, illustrated, 192 pages, \$39.95.

**Q&A Color Review of General Critical Care** is a 192-page handbook that provides a collection of 272 questions and answers covering a broad range of topics related to the breadth of illness seen in both medical and surgical intensive care units. The authors' surgical and critical care expertise is complemented by 49 contributors, who supplied their own questions and expertise to this book.

As the title conveys, the questions and answers are illustrated with color images, including detailed images of endoscopy, angiography, radiographs, ultrasounds, and physical findings, to name a few. The images are of high quality and provide useful illustration of the medical and surgical problems.

The book's layout is such that each question is on the front of the page, and the corresponding answer is on the back of the page. I found this format an easy read, as one has quick access to the answers. Both the questions and answers are succinct, making it a fast read of the most relevant facts. There are several question styles, which probably reflects the diversity of the authorship. Some questions are open-ended, such as, "Describe the appropriate workup and differential diagnosis of effusions," and "Discuss thrombolytic therapy in the management of acute myocardial ischemia." Other questions are more directed, with matching or multiple-choice answers, such as, "Match the drug with its side effect," or "Match the photograph to the clinical condition." The most common format is a brief clinical vignette with corresponding images or data that require interpretation to determine diagnosis and management.

In general, I found the answers practical and informative. The types of information