

and gaps in end-of-life care in the United States and emphasizing the recent increase in attempts to improve the quality of that care. The charge to the consensus panel was to identify challenges in and opportunities for improvement of end-of-life care and to offer consensus recommendations on how to better address these problems. Their instructions to the authors were to include at least one clinical case study to demonstrate the practical impact of the recommendations on a physician's practice routines. Other than that common structure, the writing styles and formats differ.

Section I deals with the physician-patient relationship, devoting nearly a third of the book's chapters to that topic, which emphasizes how the strength of this relationship or lack of it can impact care delivery. Scripted phrases are offered, using a case presentation as an example. In contrast to other publications, there are no specific recommended schema or general applications on how to discuss palliative care with patients, or when to do it, particularly when the physician might still be giving curative treatment. Nonetheless, there is an attempt throughout the book to expand the physician's focus beyond the dying patient to those who are seriously ill, asking the physician-reader to say whether he or she would be surprised if a particular patient died in the next 6 months. Identifying such patients serves to increase the physician's awareness of the need to address the various topics in this book. Addressing cultural differences is well described in Section I, as well as the physician's roles and responsibilities in palliative care.

Section II addresses management of the symptoms often seen in the seriously ill, such as pain, depression, and delirium. Section II also covers the common experience of addressing the needs of patients who die in a critical care unit, where caregivers often must switch from rescue efforts to providing comfort care only. The authors do a good job of discussing these issues, including responding to intractable suffering and the ethical dilemmas associated with terminal sedation and a patient's voluntary refusal of food and fluids. The section ends with a practical approach to grief and bereavement following the patient's death.

Section III addresses the legal barriers to end-of-life care, describing the myths and realities, and expanding on previously published material on this important topic. This section also addresses the financial obsta-

cles to providing quality end-of-life care. Two of the chapters were written by Dr Joanne Lynn (a leader in addressing this problem) and her colleagues at the Center to Improve Care of the Dying, at George Washington University. They conclude the book with a chapter on methods by which individual physicians and health care systems can utilize techniques of quality improvement to improve care near the end of life.

This book is well written, its strengths coming from the expertise of the authors and the case examples provided in each chapter. Although it is not intended to cover all aspects of end-of-life care, it is a useful resource for physicians and other health care providers. Although more than half of the articles can be obtained in their previously published form from the local medical library, the book's cost of \$35 is worth the price to have them readily available in one bound version, further enhanced by the additional chapters. Despite its limitations, this book is a good introduction to end-of-life care and should be read by all who are involved in the care of seriously ill and/or dying patients.

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Medical Law, Ethics, and Bioethics for Ambulatory Care, 5th edition. Marcia A Lewis EdD RN CMA-AC and Carol D Tamparo PhD CMA-A. Philadelphia: FA Davis. 2002. Soft cover, illustrated, 259 pages, \$24.95.

Medical Law, Ethics, and Bioethics for Ambulatory Care, 5th edition, is a useful resource guide for health care staff in both ambulatory and hospital settings. Each chapter has identified learning objectives and discussion questions, and most chapters also include a list of definitions, vignettes, and critical thinking exercises. The material should be understandable to health care staff in various disciplines and could be used in training new employees as well as for professional development discussions with experienced staff. The "quick reviews" included throughout the chapters pose ethical and legal questions that challenge the reader.

The book incorporates a large amount of thought-provoking material into each chapter and covers it thoroughly. The book is clearly written and well organized. The table of contents provides detailed headings that are carried over into each chapter. The graphs, charts, and figures are easy to read. I found the charts in Chapter 4 especially helpful in illustrating the trial, misdemeanor felony, and probate case processes. Appendix I provides a variety of codes of ethics specific to physicians, medical assistants, and medical research involving human subjects. Appendix II includes examples of a Washington State health care directive, durable power of attorney, and donor forms.

The book does a good job of describing a durable power of attorney but could have gone a step further to point out that a health care power of attorney can be combined with a general power of attorney form (which focuses primarily on finances). Since not all medical staff are familiar with these documents, it would have been worthwhile for the editors to bring this to the reader's attention and encourage health care staff to review these documents carefully or to have experienced staff available who can review the documents when they are presented by patients and families. One of the most common mistakes made by medical staff is to accept these documents without reviewing them, only to find out later that the document is invalid because the patient never signed it or the document did not include a health care clause. Frequently, patients believe their document includes a health care clause, but medical staff may discover that the document relates only to finances. Such a scenario is problematic, especially if the patient is now incapable of completing a new document. The book accurately points out that each state has established rules governing the use of a durable power of attorney. It would have been helpful to point out that although some states (eg, Washington State) do not require a power of attorney to be notarized, several institutions recommend notarization because the document may not be acknowledged in another state if the patient travels.

I was glad to see a chapter devoted to consent issues. The book identifies some of the problems that arise, especially when dealing with minors and issues of emancipation. The authors also discuss how language can be a barrier to informed consent if an appropriate interpreter is not present. I was hoping to see a broader discussion about

the hierarchy of legal next-of-kin and how the various state laws differ regarding that hierarchy. It is of utmost importance that medical staff in ambulatory and hospital settings understand their state's hierarchy when confronted with a patient who is incapable of making his or her own decisions and no durable power of attorney has been appointed. The medical staff may need consent for a procedure and should not assume that a person who came to the clinic with the patient is the legal next-of-kin. There are instances in which knowledge of the hierarchy of legal next-of-kin is crucial. If the medical staff does not have the hierarchy memorized, an identified person on staff should be consulted.

The chapter on consent briefly mentions guardians. I would have liked to see this chapter further discuss the process of appointing guardians, which is a topic frequently misunderstood and at times frustrating for medical staff. Appointing a guardian can be a time-consuming process and may involve the interim appointment of a guardian ad litem (GAL). GAL duties may differ, as may the extent to which the GAL gets involved in decision-making on the patient's behalf. This becomes extremely im-

portant when the health care team is trying to get consent issues resolved. The health care team should meet with the GAL to gain an understanding of what its role will be and what expectations the GAL has for the medical staff. It has been my experience that not all medical staff understand that GAL is an interim appointment until the legal guardian has been appointed. In addition, medical staff should be aware of the cost of obtaining a guardian, as that can be a deterrent for families. When patients have no family involved, medical staff should know their institution's protocol for seeking a guardianship or identifying other means for addressing this issue.

The strength of **Medical Law, Ethics, and Bioethics for Ambulatory Care** lies in its broad spectrum of topics and reader-friendly quality. The book is to be credited for encompassing such diverse topics as public duties (Chapter 6), medical records (Chapter 8), and reimbursement and collection practices (Chapter 9). Chapter 13, "Genetic Engineering," contains a thought-provoking discussion on advancements in that technology. I was impressed with Chapter 11, "A Cultural Perspective for Ambulatory Health Care," and its recognition of health

care workers who facilitate cross-cultural communication. The chapter presents a thoughtful discussion of the basic components of cultural diversity, including age, gender, sexual orientation, and ethnicity. Chapter 16, "Dying and Death," is to be commended for its focus on the psychological aspects of dying and pointing out that those aspects, although frequently less tangible, may be difficult not only for the patient and family but for medical staff as well.

The book achieves its goal of serving as an exceptional resource guide for understanding the basic concepts of medical law, ethics, and bioethics. It can be used to grasp basic concepts and offers a heightened awareness through case examples. The audience is wider than just ambulatory care staff; the book could be used by clinicians across many disciplines and various levels of experience. It is an excellent reference guide that I will use often when training interdisciplinary staff.

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