school nurse, the public health nurse screening children in the county health department, or the bedside pediatric intensive care nurse who treats and advises CF patients and their families.

This book will help you better understand your CF patients, and you will become a better communicator in your role as a health care provider and educator. It covers the basics, and has everything you need to teach and assist CF patients and their loved ones. The serious team member of a CF center will read this book at home, cite it in the classroom, and (even if you must sew a bigger pocket onto your lab coat!) carry it as a reference in the clinic. The 3rd edition of **Cystic Fibrosis: A Guide for Patient and Family** should be considered the foundation of a CF patient-education library.

Douglas E Masini EdD RPFT RRT-NPS FAARC
Cystic Fibrosis Clinic
Department of Pediatrics
Cardiopulmonary Science Program
East Tennessee State University
Elizabethton, Tennessee

The Washington Manual: Allergy, Asthma, and Immunology Subspecialty Consult. Barbara Capes Jost MD, Khaled M Abdel-Hamid MD PhD, Elizabeth C Friedman MD, and Alpa L Jani MD, editors. (The Washington Manual Subspecialty Consult series, Tammy L Lin MD, series editor). Philadelphia: Lippincott Williams & Wilkins. 2003. Soft cover, illustrated, 166 pages, $29.95.

The Washington Manual: Allergy, Asthma and Immunology Subspecialty Consult provides a comprehensive introduction to the field of allergy and immunology, as would be expected of an entry to the generally solid *Washington Manual* series. When the book arrived for my review, I was immediately delighted at its diminutive size, seemingly designed specifically for toting around in the ubiquitous white-coat pockets of medical students and residents. This soft-bound edition (without spiral binding) will add to its durability and ease of transport. It came as no surprise then, to read in the preface that the book is designed primarily for interns, residents, medical students, and primary care practitioners, but it would make an excellent quick reference for any medical provider. Do not be surprised, however, if the book itself is not visible, because a version is also available in a form suitable for handheld computers.

The book's 21 chapters provide an extensive overview of allergy, asthma, and immunology. Most of the chapters are brief enough to be read in only a few minutes. The chapters are organized in an outline form. Each topic is presented with a brief introduction, typically followed by causes, presentation, and management. The chapters conclude with salient key points that highlight pearls contained within. Scattered throughout each chapter are tables and algorithms that effectively summarize and complement the text. Some of the chapters offer specific references of information, but all chapters include at least a suggested reading section. The selected references are well chosen and among the most germane to allergy and immunology, specifically the citations for the practice parameters of allergen immunotherapy, chronic urticaria, and anaphylaxis.

The subject content is both vast and detailed, with the intent to give a useful clinical overview rather than overwhelm the reader with immunologic mechanisms. Diseases of allergy are weighted most prominently. There is a single section on basic immunology underlying allergic reactions and one on in vivo and in vitro diagnostic allergy testing. Though detailed, both sections are well written and are clearly designed as a practical reference, since the materials and methods are described as if one were reading a training manual. In addition to the mainstays of allergic diseases, pulmonary diseases are also well described; there are chapters on asthma, occupational asthma, hypersensitivity pneumonitis, and pulmonary function testing. Inexplicably, the chapter on pulmonary function tests does not graphically depict any flow/volume curves or spirometry, but obstructive and restrictive physiology is otherwise explained concisely in narrative form. Ocular and dermatologic diseases are also discussed and, rest assured, the challenging subjects of eosinophilia and primary immunodeficiencies are well written.

In future editions, I would recommend separating allergic rhinitis and sinusitis into separate chapters, which would allow expansion of these sections to cover other relevant material, including seasonal pollen analysis and conservative treatment of sinusitis with discriminate use of antibiotics.

The obvious strength of the text lies in its descriptive tables and algorithms, which provide information in a condensed and educational form. A handy table contains the time required to withhold medications before bronchoprovocation studies. Other favorites include a table on cross-reactivity of β-lactam antibiotics and another on latex-containing household products. The algorithm for interpretation of pulmonary function testing and indications for additional testing is clear and simple to follow. The explanation of the diagnostic approach to patients with suspected primary immunodeficiencies is almost intuitively clear. A series of tables leads the practitioner through physical examination findings and infection history to narrow the focus to which subset of immunodeficiency should be considered. By following through the recommended tests and interpretation of results, the reader is directed to the potential diagnosis. Other extraordinarily useful items include a list of historical questions for the workup of drug allergy, and an additional set of questions, along with a diagnostic flowchart, for an occupational asthma evaluation. Finally, any medical student or house staff officer should appreciate the thorough lists of differential diagnoses for elevated immunoglobulin E, sinusitis, atopic dermatitis, anaphylaxis, and eosinophilia, to name a few.

The appendixes contain useful tables on (age-related) laboratory values and potencies of topical steroid formulations. However, the remainder of the medication charts and guidelines are unacceptable and incomplete because of the omission of dosing guidelines for pediatric patients. The subspecialty of allergy and immunology is composed rather equally of internists and pediatricians, and thus the readership of this book is likely to be similarly divided. The chapter on anaphylaxis also should have presented treatment guidelines regarding the nuances of epinephrine dosing for pediatric patients.

A final issue for discussion relates to a challenge for the field of allergy and immunology in general. Many experts disagree on management principles, which makes the consensus statements and practice parameters that have been developed all the more valuable. A multiple-author text is expected to have a few different viewpoints, but inconsistencies should be avoided whenever possible. To their credit, the editors have generally succeeded with that difficult task. For instance, the book suggests exercising caution with patients who are taking

β-blockers, whether they are receiving allergen percutaneous testing or immunotherapy. The distinction between *accepted standards of practice* and *commonly-done practices* should also be emphasized. As an example, repeat skin testing is commonly accepted for patients receiving venom immunotherapy to assess a response to therapy; however, repeat skin testing for those getting aeroallergen immunotherapy is not widely supported as a means to monitor response to therapy.

In summary, this entry to the *Washington Manual*'s subspecialty consult series provides a brief, quick reference for familiarizing the reader with common conditions and practices in allergy, asthma, and immunology. Readers should be able to easily locate information and obtain a solid foundation of knowledge, regardless of the extent of their medical training. It would not be surprising to see this book in many white-coat pockets on the hospital wards near you.

Eric J Schmitt MD
Division of Allergy and Immunology
Department of Internal Medicine
Parkland Memorial Hospital
Southwestern Medical Center
University of Texas
Dallas, Texas

Breath Sounds Made Incredibly Easy! Janice Hausauer RN MSc FNP, Nancy Haynes RN, MN CCRN, contributors. Philadelphia: Lippincott Williams & Wilkins; 2005. Soft cover, illustrated, 208 pages (with CD-ROM), $39.95.

Breath Sounds Made Incredibly Easy! covers core information on respiratory breath sounds beyond what the title implies. The intended audience is novice and experienced nurses in all settings, but advanced assessment skills related to technology used in critical care units is not discussed.

The book begins (Chapters 1 and 2) with an overview of basic respiratory anatomy and physiology concepts and key respiratory assessments to provide nurses the information needed to perform a basic clinical respiratory examination. Clear charts, illustrations, and photographs of the examination nicely supplement the text. Chapter 3 is an introduction to breath sounds. Airflow patterns, sound characteristics, documentation, and nursing-care planning are discussed. Common nursing diagnoses for patients with respiratory problems are briefly explained, as well as nursing interventions and expected outcomes. Although the importance of an individualized, multidisciplinary care plan is stressed, a thorough explanation of specific nursing interventions, such as relaxation and positioning techniques, would be useful for novice nurses.

Normal breath sounds, bronchial breath sounds, and adventitious sounds are reviewed in Chapters 4 through 9. Within each chapter are specific conditions that cause the abnormal breath sounds, and diagrams specifying which area of the lung to auscultate for each respiratory condition.

Respiratory disorders (chronic obstructive pulmonary disease, pulmonary fibrosis, bronchiectasis, atelectasis, acute respiratory distress syndrome, heart failure, pleural effusion, pneumonia, pulmonary edema, tuberculosis, and pneumothorax) are reviewed in Chapter 10. This therapy section is superficial and incomplete for general practice. A more appropriate title for this chapter would be "Common Respiratory Disorders at a Glance," which is a subheading. The following are some recommendations to make this section more useful to readers:

- Page 73–75. Breath sounds in patients with pulmonary fibrosis are "fine crackles," not "bronchial breath sounds." The corresponding breath sounds on the CD-ROM (tracks 16 and 17) are also incorrect.[1,2]
- A brief teaching section on each respiratory disorder is included in each respiratory disorder section; however, a teaching section is not included in the asthma section. Most of the teaching sections focus on the acute care setting.
- Provide appropriate nursing diagnoses for each respiratory disorder (these are not listed and explained, as they are in Chapter 3).
- Providing more algorithms, such as "Understanding Cor Pulmonale" (page 159), would assist the reader to understand disease processes and interventions.
- Organize or categorize conditions by how life-threatening or dangerous they are.
- Include a picture of a thoracentesis in the section on pleural effusion.
- A detailed section reviewing respiratory diagnostic tests such as arterial blood gas values, ventilation/perfusion scanning, chest radiographs, pulse oximetry, and chest physiotherapy treatments would be beneficial, as these are mentioned throughout the respiratory disorders section.

The appendix on auscultation findings for common disorders provides a concise summary, There is a glossary of terms and conditions. The selected references are current. The book includes memory-joggers that reinforce important facts and provide an easy way to remember them. The accompanying CD-ROM contains a variety of breath sound examples, the sound quality and education value of which are good.

The text is clearly written, and I found no spelling or grammatical errors. The "what to do" section on page 150 should be bulleted. The language is easy to understand. Each chapter states specific objectives, and each chapter objective was met. Each chapter ends with a quiz to assess the reader's understanding.

The core content of this book is thorough. Including information on respiratory disorders went beyond the scope of the book.

Christy Chua Patel RN MSc
Section of Patient Education
Mayo Clinic
Rochester, Minnesota

REFERENCES

1. Farzan S. A concise handbook of respiratory disease, 4th edition. Norwalk, Connecticut: Appleton & Lange;1997:177.
2. Wilkens R, Lopez B. Fundamentals of lung and heart sounds. St Louis: Mosby-Year Book;2004:88,91.