

insurance. On page 262 he states, "The most common misconception is that you are covered under the malpractice liability policy of the hospital you work for." He then states that employees are not covered. That has not been my experience. I have been personally involved in many cases in which hospital employees were covered by hospital insurance for acts within their scope of employment. A hospital can act only through its agents and employees, so, for instance, if a nurse administers a wrong medication, the hospital can be sued, because the hospital is responsible for the nurse's negligence, under the legal doctrine of *respondeat superior* (let the master answer for the wrongs of the servant). However, if DeWitt wants to recommend the purchase of malpractice insurance, he certainly can, and should. One reason a person consults an attorney is to obtain good advice, and that recommendation might be such. Yet it should be presented as a recommendation, instead of implying that it is clearly established.

Since this is more of a reference book than one that most people will read cover-to-cover, the detailed table of contents and the index are helpful. The last chapter, which deals with ethical issues, was a nice addition. Sometimes the question is not whether a course of action is legal or illegal, but whether it is ethical, and clinicians should have high ethical standards. It is good to have something written about this important subject.

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Qualitative Research Methods, 2nd edition. Pranee Liamputtong and Douglas Ezzy. South Melbourne, Victoria, Australia: Oxford University Press. 2005. Soft cover, 410 pages, \$59.50.

As the title indicates, this book is about methods of qualitative research. It provides a practical guide to address the most commonly used techniques for collecting and analyzing qualitative data in health science. Its strength is also its weakness. This book is limited in discussion of theoretical perspective and paradigms of qualitative research.

This is the second edition of this title, and 3 new chapters (10, 11, and 15) were added. There are 3 parts and 15 chapters. The parts have no introduction sections to provide an overview of the ensuing chap-

ters, nor are there transition sections to help the reader journey from one chapter to the next. It feels like the chapters exist independently. The reader has to guess from the titles why the chapters were grouped together.

Part 1 initiates a description of the field of qualitative research, starting with the history and philosophy of qualitative research, then discusses criteria for judging the rigor of study findings, including ethical issues and sampling methods. The first 2 chapters describe the foundation of theoretical traditions of qualitative research, including positivism, ethnography, phenomenology, symbolic interactionism, feminism, post-modernism, and hermeneutics. Qualitative research methods commonly used for each tradition are identified, which is valuable information for new qualitative researchers to identify an appropriate method. There is a lot of useful information in Chapter 2, which reviews 12 commonly used qualitative-research sampling strategies. However, the section on rigorous reflexivity (often referred to as trustworthiness) provides limited information. Criterion area and techniques commonly used to establish trustworthiness, such as credibility and negative case analysis, are not included.

Part 2 introduces and addresses 7 methods of quantitative-data collection: interviews, focus groups, unobtrusive methods, narrative analysis and life history, memory-work, ethnography, and participatory action research. These chapters are good in reviewing and summarizing the advantages and limitations of these research methods. Unfortunately, these chapters seem unrelated to each other; there is no overview to provide a holistic perspective on these methods. Some comparison of the methods would help readers summarize the information and choose the right method, so an overview would greatly increase the value and usefulness of this book.

Part 3 is devoted to the application of qualitative research, including researching vulnerable groups, research in cyberspace, analysis processes of qualitative research, and writing qualitative research proposals and reports. This part concludes with discussion of new directions in qualitative research. The new chapter on online research describes computer-mediated communication as a research resource and tool. Chapters 10 and 12 seem to be out of place. Chapter 10, on researching vulnerable

groups, is more closely related to ethical implications of qualitative research, which is discussed in Chapter 2. Ethical issues are discussed all over again in Chapter 11, as they relate to online research; in Chapter 6 ethical issues are discussed in relation to narrative analysis, and in Chapter 12 as they relate to data analysis. Chapter 12, on analysis process, might fit better in Part 2, since all the other information on data analysis is discussed there.

One of the greatest challenges in doing qualitative research is data analysis and interpretation. This book devotes limited space to discussing how to analyze and interpret qualitative data. The book would also benefit from adding a section on the phases of qualitative research. And the authors could have made it easier to access the book's information by providing a more detailed tabulation of chapter content. The index is of limited usefulness; it does not provide complete information on terms used in the book. For example, content analysis is discussed as an analytic strategy used in an unobtrusive method, but the reader would not know that if he or she were only to look at the index under "content analysis."

What makes this book stand out from other books on this subject is that it is easy to read and gives a simple-to-understand introduction to qualitative research methods. It provides broad examples of qualitative-research methods in health-care research disciplines, and readers can learn from these examples how particular qualitative-research methods are used. Also, the length of this book makes it less intimidating than some other books on the subject, though it presents a tremendous amount of useful information. At the end of the chapters there are helpful tutorial exercises and lists of recommended reading on specific qualitative-research topics. Additionally, there is a complete reference list at the end of the book, and a glossary. This book does not belong on every bookshelf but it is a "how-to" guide for beginning qualitative researchers.

Though the primary intended readers are students of health and social sciences, this book could be a good introduction for clinicians who are not familiar with qualitative inquiry. I would recommend it for beginning researchers, but for in-depth discussion of qualitative-research methods and exploration of philosophical and theo-

retical issues in qualitative research, the reader will need to refer to other sources.

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Lung Cancer: Principles and Practice, 3rd edition. Harvey I Pass MD, David P Carbone MD PhD, David H Johnson MD, John D Minna MD, and Andrew T Turrisi III MD, editors. Philadelphia: Lippincott Williams & Wilkins. 2005. Hard cover, illustrated, 934 pages, \$199.

Lung cancer is the leading cause of cancer mortality in both men and women in the United States. This unfortunate truth underscores the importance of creating a comprehensive text devoted to what is also considered a global epidemic. This third edition of **Lung Cancer: Principles and Practice** clearly represents that work. It is an important revision from the previous edition published in 2001. The need for a top-to-bottom revision reflects the rapid evolution of all aspects of this field. With this new edition the authors clearly intended to provide us with the latest and most relevant information, and they recruited active researchers and thought-leaders to write the chapters. The fact that approximately 50% of these contributing authors are new from the previous edition is a reflection of that intention.

The text is well-organized, into 13 parts and 63 chapters, which cover virtually all aspects of lung cancer, from epidemiology and biology to the relevant clinical topics of screening, staging, treatment, and palliation. Although this chapter-heavy format runs the risk of over-organization and therefore repetition, it also creates a resource that is easy to search and extract information when seeking an answer to a specific question. Searching this text for information is made even easier by its detailed, 26-page index.

Generally, each chapter is well-researched and well-written, by at least one author with substantial experience in the topic at hand. Impressively, almost no individuals contributed to more than one chapter, and contributing authors were recruited from all over the country and the world. The large number of research papers cited in the references sections of almost every chapter is impressive and reflects the careful and thoughtful approach taken by each contributing author.

Whenever there is a large number of authors, there is a risk of differences in the structure of individual chapters, and, unfortunately, that does happen to some degree in this text. The uniform inclusion of a summary section in each chapter would have been helpful, especially in the more detailed chapters, in which a wealth of research information must be synthesized and digested. For clinically relevant material it is always desirable for the author to provide recommendations based on his or her interpretation of the evidence. This helpful practice was not utilized enough in this text.

The reproduction of figures was one of the few consistent disappointments. The only color images are in the plates grouped in the center of the text, and I found it cumbersome to have to go back and forth between the chapters and the plates. Additionally, many of the color figures are too small to allow useful visualization of the image details. Black-and-white figures appear in the chapters, and many of these are also too small and/or blurred. There are a number of instances in which the figure legend indicates that there are arrows or arrowheads in the figure but there are none.

The text is written primarily for physicians and should appeal to oncologists, surgeons, pulmonologists, and radiation oncologists. The text should prove informative for both community and university-based physicians, and it is a valuable resource for residents and fellows. Although they are clearly not the target audience, nurses and respiratory therapists who work extensively with patients who have lung cancer will find some of the information of substantial supplemental value.

The text begins logically, with several chapters on the etiology and epidemiology of lung cancer (Part I). Appropriately, the role and treatment of tobacco dependence is a major focus. In Chapter 4, I enjoyed the piece on addressing smoking cessation in patients who have already been diagnosed with lung cancer; this important concept is not commonly covered in many resources. In Chapter 4 it would have been helpful to list resources such as Web sites and literature for patients who would like help with smoking cessation. Additionally, there was no discussion or comment on common alternative therapies frequently considered by individuals desperate to quit smoking, such as hypnosis, acupuncture, and cognitive-behavioral methods. Also, there was no practical comment on the current status of payer

reimbursement for practitioner time devoted to smoking cessation.

Chapter 5 covers genetic susceptibility to lung cancer. Mercifully, this chapter is short, because it reads more like a laundry list of candidate "soiled genes." Chapter 6 is devoted to nontobacco-related causes of lung cancer. This relatively short chapter is the only one that focuses on occupational-exposure carcinogenesis, and I was disappointed that the subject was not covered in greater depth.

The 8 chapters in Part II address lung cancer biology. I especially enjoyed the discussion on epigenetic changes in lung cancer—molecular changes that do not alter the deoxyribonucleic acid (DNA) base sequence, but result in altered gene expression, typically gene silencing. Examples include DNA-methylation and covalent modification of histone proteins. Excellent summaries of other important genetic modifications can also be found in Part II. Another currently important subject is the role of tyrosine kinase abnormalities in non-small-cell lung cancer. It is thought that epidermal-growth-factor-receptor alterations are involved in 40–85% of non-small-cell lung cancers. Chapters 11 and 13 contain excellent reviews of recent studies in this active research topic and include a nice discussion on the mixed results from the therapeutic trials with epidermal-growth-factor-receptor inhibitors (monoclonal antibodies to the ligand-binding extracellular domain [cetuximab] and low-molecular-weight inhibitors of the receptor's tyrosine kinase [erlotinib and gefitinib]) and insights into future approaches on how to integrate therapeutic targets to these abnormalities with existing chemotherapeutic strategies.

In Part III, Pass et al turn their attention toward screening, early detection, and prevention. Chapter 15 has a good summary of historical data on the utility of bronchoscopy and sputum analysis for early detection of lung cancer. Chapter 17 deals with lung-cancer screening. I found this chapter unnecessarily confusing and wordy. Concepts such as "lead-time bias" and "length-time bias," frequently encountered in the literature, are buried and not easily recognizable in the authors' discussion. Additionally, I would have appreciated a greater focus on available results from clinical trials that used low-dose computed tomography for screening high-risk individuals.

Part V covers the clinical presentation, diagnosis, and staging of lung cancer. Most