dle-lobe pneumonia, there was little discussion of aspiration pneumonia. In this instance the opportunity to make a clinically important teaching point was missed.

Radiographic imaging plays an important role in the practice of modern medicine. However, radiologists are often unable to deliver a definitive diagnosis; their readings simply describe the observed findings and often conclude with the dreaded "clinical correlation is recommended." This book seeks to give all clinicians the ability to tie the radiograph findings into the patient's clinical history and establish a unifying diagnosis.

100 Chest X-Ray Problems seems intended for medical students and trainees, but it may also be useful to those already in practice. It seems particularly well suited for non-radiologist physicians, nurses (especially in intensive care settings), and respiratory therapists. The text is unusually succinct, and the book, overall, is an excellent, high-yield review of the art of chest radiograph interpretation. Any reader will find this especially useful for refreshing knowledge of less common findings and building confidence in personal interpretive skills.

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Imaging of Pulmonary Infections. Nestor L Müller MD PhD, Tomás Franquet MD PhD, Kyung Soo Lee MD, editors. C Isabela S Silva MD PhD, associate editor. Wolters Kluwer/Lippincott Williams & Wilkins. 2007. Hard cover, illustrated, 184 pages, $129.

Pulmonary infection remains one of the most common indications for chest imaging. Despite the myriad of infectious etiologies, it is paramount for imagers to recognize common patterns and assist in the diagnosis. Divided into 8 chapters, this 184-page hard-cover book provides a succinct overview of pulmonary infections and their imaging presentations.

The opening chapter introduces core concepts in the imaging of pulmonary infections. There is a brief review of pulmonary host defenses, the changing trends in pulmonary imaging, and the use of radiography and computed tomography (CT) in the imaging of pulmonary infection. The authors, who are well known experts in their specialty, use computer graphic diagrams along with the radiographs to describe imaging patterns commonly seen on CTs (eg, ground-glass, halo sign, and tree-in-bud). There is an overview of community-acquired pneumonia, nosocomial pneumonia, aspiration pneumonia, and pneumonia in the immunocompromised host, and excellent radiographs of those processes. The chapter concludes with a brief discussion of interventional procedures in patients with pneumonia and offers an algorithm for evaluating patients suspected of having a pulmonary infection, to help guide clinicians in taking care of patients with suspected pneumonia.

Subsequent chapters are divided by infectious etiology: bacterial, tuberculosis, nontuberculous mycobacteria, viruses and atypical bacterial infections, infections related to acquired immune deficiency syndrome, and infections in the immunocompromised host. In each 20–30-page chapter the authors follow an easy-to-use, reader-friendly layout. For example, the second chapter, which discusses bacterial pneumonia, begins with common radiologic patterns of bacterial pneumonia and gives examples of the various imaging patterns (eg, lobar, central lobular, tree-in-bud) on both plain radiographs and CTs. Again, helpful computer graphic diagrams are also presented along with the numerous radiographs, to show a schematic picture of the various patterns, which is helpful for residents-in-training. The authors then discuss specific bacteria (eg, *Streptococcus pneumoniae*, *Klebsiella* species), their epidemiology, pathogenesis, and imaging characteristics on radiographs and CTs. Throughout the chapters, useful tables summarize key radiographic characteristics, common complications of the infection, risk factors, and epidemiologic information regarding each particular pneumonia. Each section concludes with a discussion on the utility and limitations of radiography and CT in evaluating the pulmonary infection discussed in that chapter. Over 400 images are high in resolution and are not littered with arrows, nor are the arrows so annoyingly large that the pathology is overshadowed. Over 50 full-color illustrations show histopathologic or microbiologic features that correlate with imaging findings. Additional tables and diagrams complement the imaging findings. At the conclusion of each section there is an up-to-date list of suggested readings.

Thoracic imaging is one of the more difficult radiology specialties to master, but after using this textbook—one that you'll actually want to read—your diagnostic confidence in interpreting everyday chest imaging will increase at the reviewing station. In summary, this is a great text for those who desire a concise edition that includes just enough to whet the appetite for further study and to be able to offer an intelligent diagnosis of the most common disease entities and a differential diagnosis for less common entities. The book also would be useful for pulmonologists who do not wish to spend a lot of money on radiology reference books, for thoracic surgeons or other clinicians who want a quick synopsis of their patient's imaging findings, or for any established radiologist who wants a very readable and portable book for a quick and painless review.

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