

study has come forward essentially unchanged.

Chapter 6, "Hemodynamic Monitoring and Shock," has gone from 15 pages to 25 pages. It offers a balanced presentation of hypovolemic, septic, and cardiogenic shock. Of special note is an all new case study that features an 18-year-old cystic fibrosis patient who develops septic shock. The second case study enables a comparison of septic shock to hypovolemic shock.

Chapters 7, "Pulmonary Thromboembolic Disease," and 8, "Heart Failure," have received minor updates and remain largely as they were in the previous edition.

Chapter 9, "Smoke Inhalation Injury and Burns," underwent an extensive rewrite with current statistics and up-to-date ventilation management strategies such as tracheal gas insufflation and volumetric diffusive ventilation. There is also a new case study.

Chapter 10, "Near Drowning," now has expanded introduction and definitions sections, and a new section entitled "Prevention and Prognosis." There is also a new box that provides short definitions for the near-drowning lexicon. One of the 2 case studies comes with a revised scenario.

Chapter 11, "Acute Respiratory Distress Syndrome," is updated from the previous edition's chapter "Adult RDS" that was consistent with the former accepted definition. This chapter received a well warranted rewrite pursuant to the past decade's progression of knowledge on the management of ARDS. The same case study is used, but some new questions were added.

Chapter 12, "Chest Trauma," is also refreshed with new statistics in its introduction. The section on ventilation is expanded and an all-new case study illustrates the management.

Chapter 13, "Postoperative Atelectasis," got a general touch up.

Chapter 14, "Interstitial Lung Disease," unfortunately still has the same hazy chest radiographs used in the 2nd edition, which makes it difficult to appreciate the difference between a reticular-nodular pattern and the honeycombing in late-stage disease.

Chapter 15, "Neuromuscular Diseases," and Chapter 16, "Bacterial Pneumonia," received general updating.

Chapter 17, "Pneumonia in the Immunocompromised Patient," is much enhanced by the addition of a section on neutropenia secondary to chemotherapy, and another on immunosuppressive drugs. The organization in charge of microbe names recently changed

*Pneumocystis carinii* to *Pneumocystis jirovecii*, and this edition reflects that change, except that *Pneumocystis carinii* slipped through unchanged in the glossary.

Chapter 18, "Sleep Disordered Breathing," (previously titled "Sleep Apnea") has an expanded and updated introduction and more depth and breadth, commensurate with the growth in the related literature. There is also a new case study that discusses titration of continuous positive airway pressure.

Chapter 19, "Tuberculosis," is largely unchanged, though there are some new data in the chapter's introduction.

Chapter 20, "Lung Cancer," received new sections on metastatic disease and paraneoplastic syndromes that were not found in the 2nd edition. Also new are sections on newer imaging and diagnostic techniques. The first case study has new images added, and replacement of the radiograph, which was, apparently, reversed on page 387 of the 2nd edition. The new second case study features a tracheobronchial stenting procedure.

I was pleased to have the opportunity to review this new 3rd edition of one of my favorite textbooks. In all respects it is updated and improved. It will be useful to RTs, medical students, physician assistants, and critical care nurses, and it deserves a place on the reference shelf in any respiratory therapy department. In the past my bachelor-level students have found the 2nd edition user-friendly and enjoyed using it throughout my pulmonary diseases course. I am looking forward to this year's presentation with a new group of students using the 3rd edition.

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**Respiratory Care.** Caia Francis MSc. *Essential Clinical Skills for Nurses* series. Malden, Massachusetts: Blackwell Publishing, 2006. Soft cover, illustrated, 235 pages, \$29.95.

This book is part of the *Essential Clinical Skills for Nurses* series. As the title suggests, the intended readership is beginning and new nurses practicing in the field of respiratory illness. The author is a well-

known and esteemed lecturer from the University of West England.

The book has 8 chapters, each of which ends with a handy multi-point chapter summary. The stated intended readership is beginning and current practitioners who care for pulmonary patients. The book's goal is to provide evidence-based guidelines for care of patients with various pulmonary diseases.

The first chapter is a 20-page overview of the gross anatomy and physiology principles of the respiratory system. The author states that a detailed review is outside the scope of this book. This chapter covers the mechanics of ventilation, pulmonary circulation, transport of gases, and acid-base balance. The author blends basic and more advanced concepts, such as the diagram of gross anatomical features opposite the table on Fick's law of diffusion. Though the presentation of anatomy and physiology is concise, it is not initially apparent how the practitioner can use the information in practice. The author makes 2 brief references (while explaining the composition of inspired air) to altitude and air travel, pointing out how grateful we are for pressurized cabins! This section was improved by the addition of a bit of humor to a potentially dry topic.

Chapter 2 covers asthma. It begins with a brief definition and nice physiological explanation of the disease. As primarily patient practitioners, we found interesting much of the discussion of United Kingdom prevalence and mortality. The chapter presents diagnosis, maintenance therapy, acute crisis, and, most importantly, management after the acute crisis. Another section highlights the importance of assessing and managing the psychological aspects of asthma. Tables 2.4 and 2.5 present guidelines for giving asthma information to the patient, which we think will be helpful for all practitioners, be they community, hospital, or home based. The overview of the British Thoracic Society's 2003 asthma guidelines gives the book a global health perspective.

Chapter 3 discusses in depth the epidemiology and economic impact of COPD in the United Kingdom, the nuances of diagnosing COPD, and both out-patient and in-patient COPD treatments. The case studies blend all these aspects and emphasize the impact on patient and community. As with the chapter on asthma, the space devoted to the psychological care of COPD patients and their families is very well spent and a nice addition to the text.

Chapters 4 covers nebulizer and inhalers. The author provides a cursory overview of the various types of nebulizers and inhalers. Much of the chapter focus is on patient and family teaching. There are photos, diagrams, and a 2-part case study that will be particularly effective for nurses, as it shows very clearly the difference that proper technique can make for the patient. The author points out that hospital-based and community nurses have this opportunity.

Oxygen therapy is covered in Chapter 5, which includes various photos and explanations of delivery systems. We found the explanation of oxygen toxicity a bit confusing. Complications from exposure to high inspired oxygen concentration in the neonatal population versus the adult population are not differentiated. The author also makes reference (page 126) to oxygen toxicity caused by a high level of oxygen in the *bloodstream*, but oxygen toxicity is documented to occur because of a high *inspired* oxygen concentration and the creation of oxygen free radicals in the lung.

Noninvasive and invasive ventilation are covered for the beginning practitioner, as a means of oxygen delivery only. The text lacks a basic overview of mechanical ventilation. Table 5.6 covers advantages and disadvantages of available oxygen masks. We found tables in other texts (eg, Craven RF, Hirnle CJ. *Fundamentals of Nursing, Health, and Human Function*. Lippincott, Williams & Wilkins; 2000, table 33.5) that present this information in a more organized, clear, and concise format.

Lung cancer, surgical intervention, and respiratory infection are addressed in Chapters 6 and 7. These chapters are brief and give the reader a vernal overview of caring for these patients. There is a good diagram of how a chest tube works, and a table of indications for chest tube insertion. Again, the author's attention to the psychological effects of lung cancer diagnosis is well suited for all practitioners, not only nurses. The section on respiratory infection gives brief overviews of the etiology and treatment of pharyngitis, sinusitis, bronchitis, pneumonia, and tuberculosis. Figure 7.1 visualizes where each of these infections occurs within the respiratory tract. There is a very nice explanation of the purified protein derivative test, which practitioners at every level can use to teach patients, families, and other practitioners.

Chapter 8, on respiratory assessment, is very thorough; it covers physical assess-

ment, use and limitations of pulse oximetry, basic blood gas interpretation, and the basics of peak flow and spirometry. It would have been more helpful for this chapter to appear earlier in the book, as it would have lent greater understanding to some of the concepts and data measurements covered in the asthma and COPD chapters.

This is a portable book and so can be used by the beginning practitioner. The case studies are most helpful in illustrating the nurse's ability to impact the care of the pulmonary patient. The book's goal of providing evidence-based practice for caring for patients with pulmonary disease is met with the inclusion of additional resources and citations. Though this book does not cover clinical skills essential for all nurses, it provides an overview of aspects of care needed across the health-care continuum for pulmonary patients.

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**The Respiratory System at a Glance**, 2nd edition. Jeremy PT Ward PhD, Jane Ward MBChB PhD, Richard M Leach MD FRCP, and Charles M Wiener MD. Malden, Massachusetts: Blackwell Publishing. 2006. Soft cover, illustrated, 108 pages, \$32.95.

**The Respiratory System at a Glance** is a part of the *At a Glance* series, which is a British series of medical review books. This 2nd edition includes new topics (exercise and history taking), and the other sections have been revised. The book provides a concise review of pulmonary physiology and the major disease processes of the lungs that is intended for students in the health professions and junior doctors.

The book is divided into 2 main parts. The first part reviews respiratory physiology in "bite-size" chapters (eg, on gas laws, respiratory symbols, diffusion, and ventilation-perfusion mismatching). The second part covers diseases and treatment. There is a much smaller section on history, exami-

nation, pulmonary function tests, and chest imaging.

Like other titles in the series, this is a large (8.5 × 11 inches) paperback in which 2 pages are devoted to each topic. On one page is text, and on the facing page are diagrams, images, tables, and lists that supplement the text. The chapters present succinct overviews of their topics by presenting the key concepts with liberal use of bolded text. There are no in-depth discussions, because each of the 43 chapters is limited to 2 pages. Thus, this is not a stand-alone text; it would be most useful as a review, refresher, or supplementary text for the emphasis of key concepts. Despite the concise format, the authors present the information in a readable manner. Concepts are logically and clearly presented. Abundant effort was made in the physiology sections to include clinical examples that nicely demonstrate points and make connections with the later clinical sections.

The affiliations of several of the authors are with physiology departments, and the book's greatest strength is in the sections on physiology. The general approach to each topic is to discuss cellular mechanisms and related laws of physical science, explain the response in normal and abnormal physiology, and offer clinical examples. For example, the section on carriage of carbon dioxide discusses the body's buffering mechanisms, the Haldane effect, the role of ventilation and ventilatory controls, and the respiratory gas-exchange ratio. Supplemental diagrams include the CO<sub>2</sub> dissociation curve and a diagram of CO<sub>2</sub> uptake and oxygen delivery at the tissue level. The authors are particularly skilled at identifying common sources of confusion among medical students and clearly explaining the concepts (eg, the different effects of changes in ventilation on P<sub>aO<sub>2</sub></sub> and P<sub>aCO<sub>2</sub></sub>). Especially successful are the explanations of diffusion, control of acid-base balance, ventilation-perfusion mismatching, and embryologic and neonatal aspects of the respiratory system.

A similar format was adopted in the part on diseases and treatment, which features the more common respiratory diseases, including asthma, COPD, pneumonia, interstitial lung disease, pulmonary hypertension, pleural diseases, cystic fibrosis, and venothromboembolic disease. However, the authors are less successful at presenting a concise but complete review in these chapters than they were in the physiology sections. The authors had a harder task in the clinical