young resident first encountering cardiac anesthesia. They serve as a road map for the general course of CPB and weaning from bypass. An interesting addition to this section is the two chapters covering teamwork and patient safety in CPB. The second of these is written as a narrative from the point of view of a chief perfusionist. It is an interesting and effective writing style I have not encountered elsewhere. These two chapters represent the global movement to recognize the importance of "system-based practices." This section concludes with a chapter discussing extracorporeal membranous oxygenation for adult patients but only covers its use for respiratory support. Future editions may benefit from a discussion of the use of extracorporeal membranous oxygenation for adult patients requiring circulatory support as well.

The book concludes with five chapters devoted to the care of pediatric patients, an expansion from previous editions where this subject was covered in one chapter. The relative vulnerability of the immature heart and brain is discussed in detail, and these chapters represent an important improvement from the previous edition of this text. The chapter covering extracorporeal membranous oxygenation for infants and children nicely discusses this complex topic.

All points considered, this is an outstanding textbook with few weaknesses or omissions. It is extremely current, with many of the thousands of references having been published in the last few years. Anesthesiologists caring for cardiac surgery patients, cardiothoracic surgeons, and perfusionists are the readers most likely to benefit from owning this book. Fellows training in cardiac anesthesia or surgery will benefit immensely from at least reading selected chapters, although the book reads so well it is not difficult to cover in its entirety. As a reference text, departmental libraries should certainly consider purchasing a copy for their trainees.

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(Accepted for publication January 7, 2008.)

CORRECTION

The fourth sentence of the Results section of the abstract in the article on pages 658–66 in the April 2006 issue of ANESTHESIOLOGY contained a numerical error. The sentence should have read as follows:

The threshold of mean daily value of S100B predicting a poor outcome at 6 months was 0.4 μg/l (sensitivity = 0.50 [95% confidence interval (CI), 0.29–0.71], specificity = 0.87 [95% CI, 0.76–0.95]).

Weiss N, Sanchez-Peña P, Roche S, Beaudeux JL, Colonne C, Coriat P, Puybasset L: Prognosis value of plasma S100B protein levels after subarachnoid aneurysmal hemorrhage. ANESTHESIOLOGY 2006; 104:658–66