## Alan Jay Schwartz, M.D., M.S.Ed., Editor

## Paediatric Anaesthetic Emergency Data Manual.

James Armstrong and Hannah King. Cambridge, United Kingdom, Cambridge University Press, 2015. Pages: 66. Price: \$63.

A special challenge for healthcare practitioners is the emergency resuscitation of infants and children. James Armstrong and Hannah King have published the *Paediatric Anaesthetic Emergency Data Manual* as a guide specifically directed to the treatment of a life-threatening crisis. Its main audience are those involved in anesthetizing pediatric patients; however, the guide would be useful for anyone facing an in-hospital pediatric emergency.

The guide is small, light, and composed of water-resistant paper; however, it is not small enough to fit into a pocket. It is sectioned by arrest, trauma, anesthetic, and medical flowcharts, most of which are emergency treatment algorithms, but some are management guidelines. Pain treatment, fluid management, and congenital heart diseases are examples. The information is helpful; however, to be useful it would need to be attached or located at the site of care. It appears that there is only a hard copy of the information available and no electronic version of the flowcharts that come with the book.

Much of the information is available as a Pediatric Critical Events Checklist on the Society for Pediatric Anesthesia (SPA) website for printing and through a free iTunes app that is managed by the Children's Hospital of Philadelphia. The guide, however, provides more detailed information than the SPA checklists in many sections, and the guide starts with age-appropriate charts from neonate to teen, which are especially useful for the infrequent pediatric practitioner.

The guide succeeds as a single-source summary for a broad range of pediatric care. It is rare to find a compendium that tackles so many pediatric topics without becoming a textbook. The true utility of this text is that it is an excellent reference, so much so that one need not rely on memory during a life-threatening crisis or during the care of a child with one of the many identified congenital anomalies. The formulary at the end of the guide is also quite valuable.

It is especially difficult to choose an organizational format for what is simply a list of medical conditions. The book's division into four categories works; however, during a true time-critical emergency, a familiarity with the book would be required. There are a few informational boxes spread throughout the guide and attached to flowcharts, such as an informational box on the management of hyperkalemia. Because hyperkalemia may occur as a part of multiple separate emergencies, it might be better served to have a separate section devoted to it. I also had a little difficulty with the guide because the color scheme chosen for some of the backgrounds makes the text difficult to read, especially the dark blues and purples. The color coding seems to follow some of the safety labeling of anesthetic medication syringes, but serves more as a nuisance in this context.

Overall, the content of this emergency manual is outstanding, and although the information can be found elsewhere, this book serves as a concise single source. It is definitely a practical, and likely a beneficial, tool for those who want a hard copy at hand in their operating, emergency, or intensive care suite. The authors were clearly thoughtful in including what would be the most effective information for their audience during a pediatric calamity.

**Samuel H. Wald, M.D., M.B.A.,** Stanford University, Stanford, California. shwald@stanford.edu

(Accepted for publication November 8, 2016.)