

Ideally, one could perhaps wish that the editor had chosen to include chapters on acute anemias, surgical emergencies, and infections, as well as an equally authoritative discussion of the clinical aspects in the management of the respiratory distress syndrome.

Even though the coverage of the problem of resuscitation is perhaps too exhaustive for those with only a casual interest, the index and organization of this book make it appropriate for use as a quick reference. It should be recommended reading for all physicians who deal with the newborn.

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Law for the Physician. BY CARL E. WASMUTH, M.D., LL.B., F.C.L.M. Pp. 583 with appendix. Cloth. \$16.50. Lea and Febiger, Philadelphia, 1966.

Dr. Ward Darley, past president of the Association of American Medical Colleges, pleaded in 1952 for inclusion in the medical school curriculum of indoctrination on "the significance of the interplay that is developing between medicine and our socio-economic structure." The aim of the author of this book is to help the physician acquire that knowledge of the social, cultural, and legislative settings in which medical practice is now carried on.

In addition, "Law for the Physician" is a practical reference for the active physician, to aid him in his daily practice. Each chapter is a separate article; the individual physician can find information relating to his specialty. Summaries of court decisions are well utilized to illustrate and develop points under discussion. References at the conclusion of each chapter will be of benefit to those who desire to delve deeper into any particular aspect of the subject.

Model medical staff bylaws as recommended by the Joint Commission on Accreditation of Hospitals are included, as well as a model code of regulations for those physicians desirous of forming business corporations for their medical practices.

The sections on handling experimental drugs (including a model release form), insurance, fiscal management and tax accounting, malpractice actions and hospital liability are all essential reading for every physician involved in active office- and hospital-based practice. Especially noteworthy is the chapter on Medical Care Plans by the former Chairman of the A.S.A. Committee on Economics, Dr. N. G. De Piero, whose expertise in this field is well known.

There is acknowledgment of the presence of Government as the physician's partner in medicine and the legal ramifications it will entail. Recently-publicized developments regarding voluntary hospital-municipal hospital relationships in the City of New York, Medicare and Medicaid have been anticipated by the author.

The chapter on hospital staff privileges, wherein

the responsibilities of the lay board of trustees vs. the medical staff, and the different sets of ground rules for staff membership in public vs. nonprofit corporation hospitals are delineated, is a must for a great many anesthesiologists who tend to remain aloof from hospital activities because of the daily patient load. For example, many of the Society's members do not really understand the function of our Judicial Committee which passes on matters of ethics and not on legal matters which are often referred to it. To quote a decision, "The court is not unmindful of the fact that due to the shortcomings of human nature, an occasional injustice may result, because of the clashes of personality or temperament, possible likes and dislikes, jealousy or differences of opinion. The courts, however, do not sit to remedy every ill caused by the frailties of mankind. Their function is but to vindicate legal rights and redress legal wrongs." Only in a public hospital does the physician have legal recourse for reappointment.

The courts are beginning to show concern whether a hospital may exclude consideration of a doctor of osteopathy under its bylaws, which are arbitrary. They have also tended to remove the immunity rule from all hospitals on the grounds that they are "big business." There is still a gray area in the matter of hospital-based specialties, whether or not they are on salary, as to what their relationship is, that is, master-servant or independent contractor.

Particularly recommended is that section on the relationship in the operating room between the surgeon and the nurse-anesthetist; between the surgeon and the anesthesiologist; between the nurse-anesthetist and her employer (the hospital or the anesthesiologist). There are no simple interpretations of the role of each and in most instances the sharing of responsibility may be considered more an ethical or moral than a legal duty. The author restates the "superior rights" of the surgeon in the "captain of the team" concept. An answer to that concept may be that the anesthesiologist who sees and examines the patient preoperatively and watches over the patient not only in the operating room but in the recovery room and throughout the postoperative stay in the hospital will merit the co-sharing of responsibility and thus make more meaningful his role in the operating room and in the surgeon-anesthetist-patient relationship.

One of the most difficult things to do, the author points out, is define accurately and conclusively the term "malpractice." Acts might be considered negligent in one case and prudent in another. How can we establish the doctrine of "liability of fault" when there are other factors introduced such as conflicting testimony of experts, the doctrine of *res ipsa loquitur*, and the conspiracy of silence on the part of physicians? Very often the defendant makes a poor witness on the stand and colors the decision. The author includes in

his appendix panel plans and inter-professional codes, in an attempt to clarify this issue. Perhaps this may be the answer. Another proposal might be that the Court take the stand: unless malpractice is proved beyond a reasonable doubt and unless it is found that the defendant has had previous difficulties in the pursuit of his profession, the jury should be instructed to return an acquittal; that a general fund be set aside by all insurance companies as a common fund; and that a panel of lawyer, physician and insurer rather than a jury, establish a ratio of payment for injury or death.

The author explains the doctrines of proximate cause in medical malpractice, the necessity of expert testimony, assumption of risk by the patient, imputed negligence, contributory negligence, statute of limitation, and *res ipsa loquitur*. This section makes evident how little the average physician really understands of what a malpractice action entails.

This work is superior to the author's previous textbook, "Anesthesia and the Law," which apparently was spliced together from a series of lectures, and was replete with typographical errors. Much thought, patience and preparation is evident here. We are fortunate to have a true expert who is able to wear two hats and thus explain complex legal data in a simple fashion to the unsophisticated physician who by his calling is unfamiliar with this particular discipline.

If I were to look for a deficiency, it would be that there should have been a mock trial set up, showing how the physician should handle himself in court and examination before trial. Also helpful would have been a chapter devoted to how to prepare oneself as an expert witness for the plaintiff as well as for the defendant. The Law Department of the American Medical Association reports receiving many letters and phone calls from physicians who are almost terrified because they are going to have to be witnesses in trials of law-suits. It would be time well spent to explain that a well-prepared, honest, wide-awake expert witness need never be afraid of any lawyer's examination because he knows so much more about the subject of his testimony than the lawyer can possibly know. General information such as this can allay the physician's fears of appearing in court.

When one considers the change from the traditional image of the family doctor and his patient-family relationship, which no longer exists in today's high degree of specialization, and the recent court decisions, this book becomes a must for every physician's library.

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Obstetric Analgesia and Anesthesia. By CHARLES E. FLOWERS, JR., M.D. Pp. 240, 66 illustrations. Cloth. \$8.00. Hoeber Medical Division, Harper and Row, New York, 1966.

For mother and baby, childbirth has never been safer. Each year we see some further advance in our knowledge and understanding of the birth process. The obstetrician has learned to value collaboration with colleagues in other disciplines, as is well illustrated by the development of new and more effective techniques for the relief of pain in labor.

Drawing largely on his own experience, Dr. Flowers has written this book for obstetricians to help them broaden their knowledge and understanding of the various acceptable methods at present available for the relief of obstetric pain. First, he gives a brief but excellent account of the physiologic factors underlying obstetric analgesia and anesthesia. Then he rightly deals at some length with the various ways in which obstetric and anesthetic techniques contribute to maternal deaths (suitable case histories are given and there are many lessons to be learned here). In this section his findings are very similar to those reported recently in the "Confidential Enquiries into Maternal Deaths" published in the United Kingdom—most important to note are those deaths due to aspiration of stomach contents. The significance of the deaths due to analgesic and anesthetic techniques is that they are to a great extent preventable.

Dr. Flowers considers carefully the factors to be taken into account in choosing a program of pain relief for the individual patient, both for normal labor and for those cases where some obstetric complications have appeared. His views are sound and clearly presented; his meaning is never in doubt. The section about the effects of analgesia and anesthesia on the fetus is especially appropriate at this time, when new drugs and procedures are frequently introduced into obstetric practice.

The chapter on the preparation of the obstetric patient for labor and delivery is sensible and well balanced and avoids the common mistake of giving undue emphasis to one or another of the methods of natural childbirth. Each chapter has a carefully chosen list of international references.

The text is suitably illustrated by numerous line drawings and diagrams of the highest quality. The book deserves a place in the departmental library and indeed in the personal libraries of all practicing obstetricians.

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