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TEE on CD: An Interactive Resource. By Steven Konstadt, Naven C. Nanda. Philadelphia, Lippincott Williams & Wilkins, 2001. Price: \$225.00.

TEE on CD: An Interactive Resource is an excellent edition for anyone's computer library on echocardiography. This interactive CD contains the textbook *Atlas of Transesophageal Echocardiography*, by Naven C. Nanda and Michael J. Domanski, and the textbook *Transesophageal Echocardiography: A Problem-Based Approach*, by Yasu Oka and Steven Konstadt. The interactive CD is edited by Drs. Konstadt and Nanda. The full text of both of these textbooks is incorporated into the CD, plus 30 min of transesophageal echocardiography videos, over 100 multiple choice questions with answers and explanations, and hyperlinks to relevant text, illustrations, and videos. In addition to the over 800 text pages, there are over 2,500 images and 60 videos. There is no doubt that this interactive CD brings the power of information science directly to the desktop for the user's benefit.

The CD was remarkably easy to install on my IBM 300PL desktop computer. The system requirements are Windows 95, 98, or NT with a Pentium 133 MHz or higher processor, 32 MB of RAM, and 10 MB of free hard disk space. Macintosh users must have a power PC or G3 with system 7.6.1 or higher, 32 MB of RAM, and 10 MB of free hard disk space. Given the system requirements, the program runs quite easily and is extremely fast. On the startup screen, one can choose either textbook with a click of a button. The chapters are nicely outlined, and word searches can be performed easily. Hyperlinked text is incorporated into each chapter, allowing easy access to figures, tables, and references.

One of the stronger components of this program is the video library and the self-assessment quiz window. In the video library, one can view multiple images of common and rare myocardial pathology. The self-assessment is particularly helpful for those preparing for the transesophageal echocardiography examination.

As with any computer-based program, some of the images are difficult to see. For some of the images, I had to turn out the lights in my office to bring about a clearer picture to fully appreciate the pathology presented. The majority of the images, however, were quite clear and were easily visualized. There is a printing capability with the images, so that one may make a hardcopy of any particular image. However, the program is designed so that copying an image digitally to the clipboard is impossible.

In summary, I was extremely pleased with *TEE on CD: An Interactive Resource*. The cost is \$225, which is rather steep for a medical textbook, but one must consider that the purchaser is receiving more than simple text. There are, in fact, two text self-assessment programs, a video library, and Web links to transesophageal echocardiography-related subjects. This is a good buy for those serious about maintaining a complete echocardiography library. Information can be readily obtained in a quick and easy manner. I hope that other authors will take a moment to evaluate this CD textbook. The power of this educational tool far exceeds that of a standard textbook. I hope that there will be many more textbooks to follow in a similar style.

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Manual of Pediatric Anesthesia, 5th edition. By David J. Steward, Jerrold Lerman. New York, Churchill Livingstone, 2001. Pages: 559. Price: \$39.95.

Since this is the fifth edition, this book has already served as a reference for many delivering anesthetic care to children during the past 20 yr. Much has changed during this time in the care of children, and the book has evolved and expanded accordingly. Both of the main authors have foundations in the Canadian system, but, in addition, they have a great knowledge of anesthesia care around the world. While the book was originally written as a guide to providing anesthesia during procedures at the Hospital for Sick Children in Toronto, it has been expanded to incorporate many of the varied approaches and new knowledge available in the field in a concise manner. The book is small enough to fit into a lab coat pocket or even scrubs.

The book is organized into two main sections: a general section of basic information and knowledge, which is about 200 pages; and the second part, which is dedicated to the anesthetic management of children during specific procedures. The third section of the book is an appendix dealing with syndromes, drug dosages, and resuscitation. The breadth of the information in the book is similar to that of more complete texts, but the information in larger texts is of much greater depth, with more attention to detail at the expense of compactness. A few pertinent, and in some cases classic, references are provided in just about every section. Many areas of the book have been expanded. The sections dealing with parents and preparation of the family for procedures and hospital stay are welcome additions. They are concise and provide additional references in the area to aid in further understanding. The sections dealing with complex pediatric conditions and minimally invasive endoscopic surgery are also expanded.

A great deal of the book is written in an outline form. Overall, there is limited use of diagrams and tables. There are several areas in the book that seem to lack compartmentalization. An example of this is found in the overlap of the section on physiology and anatomy and the section of techniques and procedures. There is little cross-referencing throughout the entire book, and these two chapters exemplify this problem well. Improvement might have been made by either integrating the two chapters or, ideally, separating them and making them more distinct with good cross-referencing. Fluid requirements are discussed, for example, without discussing intravenous fluid maintenance for surgery or preoperatively, and no cross-reference is made to chapter 4, which does include this information.

A few areas in the book contain treatment recommendations that are truly decreasing in popularity: e.g., the use of a brandy and sugar soother in the regional anesthesia section and the use of intramuscular codeine for pain management for cleft lip and palate repair. In addition, there have been a few procedures in which surgical timing has changed slightly, and this is not reflected in the new edition. These changes in timing are important, as they mostly represent movement toward earlier intervention, which directly affects the anesthesia care of children and the evolution of pediatric anesthesiology.

The section on pharmacology of pediatric anesthesia provides a good, concise overview of the drugs used in pediatric anesthesia with developmental considerations. Another nice overview is in the techniques and procedures chapter of the book. This has a good general overview of the management of the airway, including mask, intubation, laryngeal mask airway, and the difficult airway, with various circuit information.

The regional anesthesia section is good and integrates changes in practice with the discussion of both ropivacaine and clonidine. This section, appropriately, has the most figures in the manual. While this section is cross-referenced with the pain section, it lacks cross-references with the toxicity of local anesthesia in the pharmacology section.

There is a nice section on medical conditions that affect anesthesia. A variety of conditions are covered, from upper respiratory infection and cystic fibrosis to malignant hyperthermia and organ transplantation. Obviously omitted from this section are special considerations for

cerebral palsy, a common pediatric medical problem, and management of the child with a tracheotomy during anesthesia. Also not mentioned is chicken pox exposure and implications for surgery, a particular consideration for the pediatric patient—although less so with the vaccine.

The pain section of the book is fairly basic and is combined with postoperative care. It provides reference to the chapter on regional anesthesia. However, chronic pain management in the pediatric population is not mentioned. Curiously, there is one example of a numerical rating of pain in children but no discussion of how to use it.

The next 200 or so pages of the book are dedicated to the anesthetic management for specific procedures. This section is extensive, covering many different procedures, from invasive neuroradiology to congenital heart surgery. This is helpful in providing information on the general considerations for each procedure, particularly for those unfamiliar with the procedures in children.

The appendices provide good additional information. A well-organized, short overview of many of the more frequently appearing

syndromes in pediatric anesthesia and their potential anesthetic implications is provided. There is also a good overview of drugs and dosages and resuscitation.

Overall, the fifth edition of the *Manual of Pediatric Anesthesia* continues to expand on the goals of the very first edition: to discuss differences in developmental physiology, anatomy, and pharmacology; to present general principles of anesthetic management of children of different ages; and to describe techniques of anesthesia at the Hospital for Sick Children in Toronto. While many areas have been updated, there seem to be other areas of the book that have not been similarly revised. The book would benefit significantly from greater organization with cross-references but still remains a good pocket reference for the trainee in pediatric anesthesia or for the occasional provider of anesthetic care to children.

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