

"medical care" of the surgical patient. It should serve as a useful guide for anesthesiologists, who, as members of the surgical team, participate in the preoperative and postoperative management of the surgical patient. This exceptional book should be available to both the resident and practicing anesthesiologist.

FRANCIS F. FOLDES, M.D.

**An Outline Guide for the Care of Postoperative Cardiac Patients.** BY MERLE E. WHITE, R.N., Cardiac Recovery Room Nurse, The Johns Hopkins Hospital, Baltimore, Maryland. With a Foreword by HENRY T. BAHNSON, M.D., Associate Professor of Surgery, The Johns Hopkins University and The Johns Hopkins Hospital. Cloth. \$6.00. Pp. 108, with 14 figures. Charles C Thomas, Publisher, Springfield, Illinois, 1961.

This book is an outline form of the preparation of the unit, and the care of postoperative cardiac patients. All phases of nursing care necessary for the proper management of the postoperative cardiac patient are covered. It is excellently written for this purpose. However, I do not think this book is of interest to physicians since all of the points covered are quite elementary and well known to persons having a degree in medicine. I would highly recommend this book for the teaching of postoperative care to nurses.

The index is excellent. The printing, paper and binding are far above average.

V. K. STOELTING, M.D.

**Treatment of Cardiovascular Emergencies.** BY ALDO A. LUISADA, M.D., Associate Professor of Medicine, Chicago Medical School; Director, Division of Cardiology, Chicago Medical School and Mount Sinai Hospital, AND LESLIE M. ROSA, M.D., Assistant Professor of Medicine, Chicago Medical School; Research Associate, Division of Cardiology, Chicago Medical School and Mount Sinai Hospital, Chicago, Illinois. Cloth. \$4.95. Pp. 122, with 7 tables. The Blakiston Division, McGraw-Hill Book Company, Inc., New York, 1960.

This small, pocket-sized manual has been designed to aid the practitioner who is con-

fronted with a sudden cardiovascular emergency and must initiate therapy immediately without the opportunity to consult textbooks or the literature for guidance. The book, therefore, deals basically with treatment, but it includes liberal sprinklings of diagnostic considerations and pathophysiological mechanisms.

The introduction presents the five basic syndromes which the authors consider to be cardiovascular emergencies (paroxysmal systemic hypotension, paroxysmal systemic hypertension, paroxysmal dyspnea with hypoxia, sudden episode of precordial pain, and sudden vascular block) and the several developments in therapy which they believe are significant to the successful treatment of these episodes (deep central sedation, antifoaming therapy, hypertensive therapy, hypotensive therapy, anticoagulants, and electrical pacemakers and defibrillators). The mechanisms, clinical recognition, and treatment of specific entities are then covered in individual chapters, a brief summary of treatment being provided at the beginning of each chapter and a limited bibliography of pertinent recent articles at the end of the chapter. These chapters deal, respectively with coronary attacks; attacks of respiratory embarrassment; acute heart failure; hypertensive crises; syncope, shock and vasomotor collapse; pulmonary or systemic thromboembolic phenomena; cerebrovascular attacks; dissecting aneurysm of the aorta; and disturbances of rate and rhythm of the heart. The book concludes with an appendix listing emergency drugs to be carried by the physician.

The good physician, and certainly the anesthesiologist, should find that most of the suggested therapeutic regimens are second nature to him. On the other hand, the young physician, the medical clerk or the intern may find that the potpourri of clinical considerations, pathophysiology, pharmacology and small-print discussions dilute the avowed purpose of the book as an immediate reference guide to therapy. Residents in training in anesthesiology, or those preparing for examinations in the specialty, will find this volume a thoroughly useful review, particularly if they will pursue the references contained in the brief bibliography at the end of each chapter.

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