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**Peripheral Nerve Blocks: Principles and Practice.** Admir Hadzic and Jerry D. Vloka. New York, McGraw-Hill, 2004. ISBN: 0-07-140918-1. Pages: 364. Price: \$99.99.

Is a picture worth a thousand words? If you consider this maxim to hold true for regional anesthesia reference books, then the 364 pages of *Peripheral Nerve Blocks* will offer you more information than the entire text of any encyclopedia. Nearly every page is filled with full-color illustrations and photographs to supplement the superb textual material. However, do not confuse this new volume with a generic anatomy atlas: it offers an enormous amount of detailed didactic information of value to all practitioners of regional anesthesia, regardless of experience level.

The text is divided into 25 chapters, the first seven of which cover topics related to regional anesthesia. The remaining chapters are devoted to specific nerve blocks. In the initial chapters, readers will find the second distinguishing characteristic of this volume: thorough preparation for placing peripheral nerve blocks. Another applicable title for this text would be "Regional Anesthesia: From A to Z." In addition to expected chapters on anatomy and local anesthetic pharmacology, readers will find nearly 80 pages devoted to such often-overlooked topics as training in peripheral nerve blocks, choosing block needles, catheters, and nerve stimulators, patient monitoring, and neurologic complications of peripheral nerve blocks. For practitioners with limited regional anesthesia experience, these chapters offer essential information such as how to set up a regional anesthesia "cart" and "block room." In a methodical fashion, the authors take readers literally step-by-step through the process of preparing to place peripheral nerve blocks. The multitude of pictures not only enliven what could otherwise be less-than-stimulating material but also demystify this critical preparation for practitioners unaccustomed to regional techniques.

The last of these introductory chapters, "Keys to Success with Peripheral Nerve Blocks," offers additional information for practitioners with minimal regional experience, including information regarding patient selection and education, premedication choices and dosages, and intraoperative and postoperative patient management. In addition, an especially informative table (Table 7.2) lists various common surgical procedures and suggested regional techniques for each, along with specific potential benefits and drawbacks. Inexperienced practitioners will find this information invaluable, as few providers pick up a reference book to discover which surgeries are applicable to a specific block (as most texts are laid out) but rather are preparing for a specific surgical procedure and are therefore interested in the applicable regional techniques.

Subsequent chapters each encompass a specific regional block in a coherent order, beginning with the cervical plexus and upper extremity, then thoracic and lumbar paravertebral blocks, and finally lower extremity techniques. Each chapter begins with a section, "Block at a Glance," that gives important basic information such as indications, landmarks, nerve stimulation endpoints, and recommended local anesthetic volume. Next, relevant anatomy is reviewed with an emphasis on both superficial landmarks and underlying structures. A plethora of full-color diagrams and photographs supplement the thorough textual descriptions. Single-injection techniques are reviewed first. Not a single detail of block placement is overlooked, with patient positioning, specific needle gauge and length, maneuvers to accentuate landmarks, local anesthetic skin infiltration, hand positioning, choice of local anesthetic, and perioperative management all thoroughly discussed.

Included in each chapter readers will find the text's third distinguishing characteristic: extensive descriptions of redirection cues. Although most reference materials describe where to place the block needle and the desired endpoint before local anesthetic injection, few provide suggestions to practitioners on what to do when the desired

endpoint (e.g., "twitch") is not reached after the first pass. These redirection cues are provided for nearly every possible undesired obtained response. Performing an interscalene block and finding trapezius muscle twitches? No problem: the authors provide an interpretation (e.g., accessory nerve stimulation), the specific problem (e.g., needle too posterior), and corrective action (e.g., withdraw needle and reinsert anteriorly). These extensive discussions and tables provided for every block remove much of the ambiguity surrounding peripheral nerve block placement, and will enable a high degree of success for even the least experienced practitioners.

After the review of single-injection techniques in each chapter, the authors repeat this thorough description for continuous nerve blocks (i.e., continuous catheters) when applicable. Suggestions for managing the postoperative local anesthetic infusion are also provided. As techniques for perineural catheter placement have evolved relatively rapidly in the past decade, even experienced regionalists will find this information beneficial. Finally, each chapter concludes with a table of potential complications and methods to avoid them, followed by a suggested reading list of peer-reviewed/invited journal articles and additional reference texts.

Additional positive qualities that deserve mention are the superb writing style of the authors and thorough index provided by the publisher. Limitations of this volume are few and pale in comparison to its relative strengths. As with any reference written exclusively by a few authors, personal bias is unavoidable throughout the text. For example, the authors present an interscalene block technique in which the needle is inserted more distal than in the commonly described procedure performed at the level of the cricoid cartilage, although no data are presented to support a benefit over the traditional approach. There are a few inconsistencies or errors throughout the text as well. For example, the authors describe using percutaneous stimulation for brachial plexus location with a current of 4-5 mA in the chapter on axillary blocks and describe the same procedure with a current of 0.4-0.5 mA on the next page. However, these oversights are exceedingly rare, and that they are mentioned at all is a testament to how few limitations this reviewer found of the text in general. So, whether you already have a small library devoted to regional anesthesia or desire a single volume to fulfill your reference needs, this new tome will most probably serve you well for years to come.

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**The Anesthesiologist's Manual of Surgical Procedures, Third Edition.** Edited by Richard A. Jaffe and Stanley I. Samuels. Philadelphia, Lippincott Williams & Wilkins, 2004. ISBN: 0-7817-4332-X. Price: \$129.00.

*Question:* Why publish a Third Edition of this book?

*Answer:* The rapidity of change in surgical care.

For those not familiar with the previous editions of this *Manual*, a few words are in order. Drs. Jaffe and Samuels have now edited three editions of a unique book. With the collaboration of their Anesthesiology and Surgery colleagues at Stanford, they have gathered into one volume a work that has several features. First is a diagram-rich, fact-filled summary of just about every surgical operation. Then comes an outline of a good anesthetic plan for each of those operations. Each section has a list of current references for further reading. There are additional teaching points and patient care tips sprinkled liberally throughout. It is organized into 15 chapters based on types of proce-

dures. The style and quality are surprisingly even throughout the text; a tribute to the editors. However, I would not call it a "manual." It will never fit in your lab coat pocket; it is a full-size, heavyweight reference book. But it is a reference book that provides quick and easy access to information and, dare I say, does not put me to sleep.

House Officers, this book is for you. Most of you did not enter anesthesiology *via* surgical routes; here is the easy way to begin to understand what is happening on the other side of the drapes. In addition, if you read the anesthesia plans and some of the references before each case, you will take better care of your patients and impress your faculty.

Who else could benefit from this book? Faculty members should have it nearby for learning about new operations. Practitioners should reference it for the same reason. Anyone on call who needs quick information to set up for an unfamiliar type of case will want this book. I keep a copy in our Preop Evaluation Center for our colleagues from Internal Medicine who have not been in the operating room since medical school.

The Third Edition is bigger than the previous edition by approximately 150 pages, lists more operations, contains more material in the appendices, and is subtly, though not markedly improved. The Second Edition was not flawed; it was merely 5 yr old. This is the heart of the

matter, though, reflecting rapid changes in surgery and surgical care. The Third Edition merits a spot on your bookshelf because of new material, such as the section on laparoscopic bariatric surgery, the expanded chapter on esthetic surgery, the additional material on Out-of-Operating Room Procedures, and new chapters on Office-Based Anesthesia and Emergency Procedures for the Anesthesiologist.

The appendices deserve mention because of their blend of old, revised, and new material. Appendix H still lists the acronyms and abbreviations used in the text, and I continue to find it helpful. Some of the revisions seem minor at first glance, but nevertheless, improve readability and quality, like the overhaul of the first Table in Appendix A on Diagnosis-Based Preop Testing, and the longer list of Herbal Agents that can cause drug interactions in Appendix F. More importantly, the addition of a new section in Appendix A on perioperative beta blockade is timely and reinforces that patient safety issue.

*Question:* Would I buy the 3rd Edition?

*Answer:* It's already on my shelf.

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