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How to Survive in Anaesthesia: A Guide for Trainees, 3rd Edition. By Neville Robinson, F.R.C.A., and George Hall, M.B., B.S., Ph.D., F.I.Biol., F.R.C.A. Oxford, United Kingdom, Blackwell Publishing, 2007. Pages: 200. Price: \$35.00.

All of us can undoubtedly remember the terror of being in the operating room for the first time. Most could barely recognize the anesthesia machine, let alone know how to properly perform safety checks. Although new trainees have undergone extensive medical training before working in the operating room, very little of that knowledge helps in understanding what it takes to adequately monitor a patient or induce general anesthesia. *How to Survive in Anesthesia* can do for new anesthesia trainees what *Surgical Recall* has done for medical students on their surgical clerkship.¹ In short, it's a great resource to help students or residents quickly acquire a core knowledge of the specialty.

Robinson and Hall state in the preface that this book emphasizes the basic principles of conducting a safe anesthetic. All who have worked with learners recognize that a respect for safety is the first thing that must be taught. Although the book is brief, it is surprisingly detailed in many of the topics regarding safety. For example, the first chapter fittingly addresses evaluating the airway. Although first-time readers may not know how to best *manage* a difficult airway after reading this chapter, they will be much better at *recognizing* one. In addition, the chapter on anaphylactic reactions has a thorough description on how to manage this life-threatening condition. There are also details regarding common surgical conditions that can make a relatively straightforward anesthetic more difficult. For example, in the section addressing laparoscopic surgery, the authors concisely review problems from gas insufflation, complications from trocar insertion, patient positioning, and conversion to an open procedure.

How to Survive in Anesthesia is written in British English. For those training outside of the United Kingdom, this may cause some confusion. In most cases, it is a minor distraction; however, some differences may be less benign. For example, oxygen cylinders are color coded differently in the United Kingdom than the United States. This may lead to uncertainty during the anesthesia machine checkout. Another difference comes in the name of a few drugs, e.g., succinylcholine is called suxamethonium.

The authors chose not to include drug doses, so the medical student or new resident will need an additional drug reference to learn the standard anesthetic medications and their doses. Another caution about the book is that some of the information is not up-to-date. Specifically, the most recent guidelines for advanced cardiac life support are not included in the chapter on cardiac arrest. Furthermore, the advice to not wear gloves when applying adhesive tape during intravenous cannulation is clearly contrary to the concept of Universal Precautions.

As would be expected from an introductory text, the book does not thoroughly cover the subspecialties of anesthesiology, but what it lacks in detail it makes up for in style. The text uses review boxes highlighted with a gray background to help make key concepts and important facts stand out and be readily accessible. These elements, in combination with the simple and humorous writing style used by Robinson and Hall, make *How to Survive in Anesthesia* a quick and enjoyable read. The book is compact and designed to fit in the pocket of most white coats, so trainees can review material between cases or during unexpected delays.

In summary, *How to Survive in Anesthesia* is an excellent resource for new trainees (medical students or new residents) who want a succinct synopsis of the basic concepts in anesthesia. The authors place a premium on safety. The book is designed for fast reading, with an emphasis on recalling key concepts. At a cost of approximately \$35.00, it is easily affordable for trainees on a tight budget.

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Reference

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The New York School of Regional Anesthesia: Textbook of Regional Anesthesia and Acute Pain Management. Edited by Admir Hadzic, M.D., Ph.D. New York, McGraw-Hill, 2006. Pages: 1,259. Price: \$175.00.

As one of the faculty members responsible for covering our Acute Pain Service and Regional Anesthesia rotation, I am often asked by the residents to recommend a textbook. I have always provided a list of a few that I considered adequate with the caveat that there is a vast amount of information available on various regional anesthesia Web sites, thus allowing trainees to earmark their educational allowances for board review materials instead. That is until now. With the recent publication of *Textbook of Regional Anesthesia and Acute Pain Management* by Admir Hadzic, there is now a definitive text for any and all topics related to perioperative analgesia. Dr. Hadzic has taken excellent chapters written by an international group of expert authors and compiled them in an organized manner to produce a comprehensive resource on the subject of regional anesthesia and acute pain management. The result is a continuation of the same high-quality work that we have come to expect from the New York School of Regional Anesthesia, founded by Hadzic and long-time collaborator Jerry Vloka, M.D., Ph.D. (Department of Anesthesiology, Saint Luke's-Roosevelt Hospital Center, New York, New York), in 1994.

The book begins with an interesting review of the historical aspects of local anesthesia that should be of great interest to any practitioner. This is followed by a basic science section that provides a thorough review of the anatomical, physiologic, and pharmacologic basis for neural blockade that make regional techniques possible. There is even a chapter dedicated to embryology and development of the nervous system. In these initial chapters, we receive our first glimpses of the detailed and informative illustrations present throughout the book.

The next part of the book, devoted to the clinical practice of regional anesthesia, is the largest and the one upon which most readers will focus. The chapters enhance and expand on the tutorials found on the New York School of Regional Anesthesia Web site and present a wide variety of regional techniques.* Each block is thoroughly reviewed by recognized experts in the field with discussions of indications, contraindications, relevant anatomy, necessary equipment, variant techniques, perioperative management, and adverse events. Of special note are excellent chapters on regional techniques for tracheal intubation and oral and maxillofacial anesthesia, concepts that are not always present in regional texts. Probably the most impressive features found in this section of the book are the clinical pearls and tables, which emphasize the important information for each block, thus providing essential knowledge for both the novice and experienced practitioner to advance and enhance their regional abilities.

The "how-to" part of the book is then followed by several well-written chapters on new concepts, including ultrasound guidance, that are as current as possible for such a comprehensive text with references

* www.nysora.com. Accessed April 23, 2007.

as recent as 1 yr before publication. The book then focuses attention on special patient populations such as obstetrics, pediatrics, patients with various systemic diseases, critically ill patients, and outpatients. Again, the clinical pearls and tables in these sections provide extremely useful and practical information. Also included in this area of the book are chapters on controversial topics such as regional anesthesia for patients with preexisting neurologic disease and the implications of acute compartment syndrome of the extremities. Opposing arguments are presented that examine these often highly debated issues.

One of the latter parts of the book that is perhaps one of the most essential for those who wish to tailor their practice to emphasize regional techniques addresses the neurologic complications of regional anesthesia. These chapters provide the most up-to-date information on pathophysiology, mechanisms of injury, diagnosis and management, and perhaps most importantly, means of prevention. The final sections of the book focus on practice management topics, including chapters on medical economics, outcomes, and organization of acute pain services. There is an outstanding chapter on procedure documentation. Another interesting chapter is one discussing the controversial topic of preemptive analgesia, again with varying viewpoints presented.

Although I deliberately searched for weaknesses in this book, I was unable to find any significant faults with the content. The only complaint

I can honestly muster is that some might feel that the book may be too large to be comfortably portable. Despite its size, it will serve its purpose well as a reference to be kept at home, in a regional block area, or in an anesthesiology department library or workroom. The New York School of Regional Anesthesia Web site serves as an outstanding supplement to this text. Hopefully, an electronic edition or multimedia version will be in the not too distant future, allowing remote access from any point of care location *via* personal data devices.

In summary, *Textbook of Regional Anesthesia and Acute Pain Management* has set the standard for other regional textbooks to follow. The book is a "must have" for anyone interested in successfully practicing regional anesthesia, from trainees to teachers. It is as comprehensive and current as can be expected from a reference, yet it is extremely readable, artfully illustrated, and well organized. Through it, the reader has access to the vast amount of knowledge and expertise available from many of the world's masters of regional anesthesia and analgesia.

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