
This brief monograph is designed as a review of the specialty of internal medicine for those who are about to take the American Board of Internal Medicine (ABIM) certifying examination. It consists of a series of multiple choice, true and false, and patient management questions in a format similar to that used in the ABIM examination. Brief explanations of the answers are given at the end of each section, and these are referenced should further information be sought.

The author states that the purpose of the monograph is to review the broad and expanding topic of internal medicine and to improve the reader’s skills in the test-taking process. Although the latter goal is achieved to some degree, the former is not. The book is simply a series of questions and answers. Explanations to the answers are far too brief for the reader to gain any significant knowledge to successfully complete the certifying examination.

For readers who merely wish to assess preparedness for the Board examination, this monograph will suffice. The questions are pertinent and the various subspecialty areas in internal medicine are weighted much as they are in the ABIM examination. However, many physicians need more preparation and review for the examination, such as that provided in the Medical Knowledge Self-Assessment Program (MKSAP) syllabus published by the American College of Physicians. Although it is more time consuming than Pieroni’s text, it offers a much better chance of achieving successful completion of the certifying examination.

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This handbook for family physicians on the topic of emergency medicine by Dr. Hocutt, a practicing family physician, is based on the premise that all physicians are occasionally confronted with emergency situations and that family physicians have the responsibility to provide continuing, comprehensive care to their patients, apparently including emergency care. Although most chapters are coauthored by a specialist or subspecialist in the area of interest, Dr. Hocutt is the primary author of every chapter in the book, including the chapter on medicolegal problems. Each chapter is divided into three sections: emergency room management, office emergencies, and management of emergencies “on the street.”

The attempt to write a broad coverage of an area that is now a specialty of medical practice is admirable, but unfortunately fails. The book reads as if it were a collection of notes by medical students or residents from rotations through many specialties, compiled into a book on emergencies that could confront the family physician. The book is a dichotomy: many areas are covered too superficially and other areas assume an expertise that few if any family physicians would have, such as Swan-Ganz catheterization of the heart and measurement of pulmonary capillary wedge pressures. The introduction states that great care was taken to ensure the accuracy of all dosages given in the text. However, there are many omissions (no dose for epinephrine or isoproterenol is given, and no pediatric doses of any drugs except bicarbonate are given) and errors (dose of Solu-Cortef is listed as 10 g) have crept in. Similar errors in dosages and drugs occur in the chapter on infectious diseases. There are many other errors, some of minor and others of major importance (incorrect position for hands in external cardiac massage shown in Fig. 10-4). The sections in each chapter on office and street emergencies are much too superficial and add little or nothing. This reference handbook on emergencies for the family practitioner is an admirable venture, but unfortunately falls short of being either useful or accurate enough to warrant recommendation.

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This in-depth review of the physical examination of the heart and circulatory system includes physical
inspection, examination of the arterial pulse and the venous pulsations, movements of the heart as noted by direct observation, palpation and percussion, and auscultation of the heart. There is a brief chapter on examination of the chest and abdomen as it pertains to the circulatory system. Each chapter details each facet of the physical examination. Many quotes from authors who originally described many of the physical findings add a historic perspective.

Each physical finding for a particular disease is categorized. For example, the carotid upstroke in aortic stenosis is included in the chapter on the arterial pulse. The palpable thrill of aortic stenosis is described under movements of the heart, and the systolic ejection murmur of aortic valve disease is described under auscultation.

However, Chapter Two, on physical appearance, is somewhat weak. Most of the illustrations are of congenital anomalies. Of 27 illustrations in the chapter, only five involve acquired disease; and only one shows a fundus, and that is in a patient with coarctation of the aorta. There are no illustrations of diabetic retinopathy or cholesterol emboli.

This well-written book includes for the most part many illustrations and goes into more detail on examination of the heart and circulation than is usual in a book on physical diagnosis. It not only describes the physical findings but instructs the reader on how to elicit them in an efficient manner. It contains many clinical pearls that are of value in day-to-day clinical practice. A summary chapter listing all of the cardiac diseases with their respective physical findings would have been helpful.

In general, however, this book is well done and I strongly recommend it for medical students, house officers, and cardiology fellows. Its small size makes it attractive for the reader to keep on the wards and frequently refer to it.

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