

*Michael J. Avram, Ph.D., Editor*

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**The Clinical Anaesthesia Viva Book, 2nd Edition.**

By Julian M. Barker, Simon J. Mills, Simon L. Maguire, Abdul-Ghaaliq Lalkhen, Brendan McGrath, and Hamish Thomson. Cambridge, U.K., Cambridge University Press, 2009. Pages: 448. Price: \$66.00.

Preparing for the anesthesia oral board exam brings a shudder to anesthesiologists. In addition to the amount of information one must master, there is the added challenge of learning how to take the exam and understanding what will be expected of you. *The Clinical Anaesthesia Viva Book* is an excellent tool for anyone preparing for the oral boards. The equivalent of the American oral board exam in the United Kingdom is the viva exam. Although the format is not exactly the same, it is very similar, with both exams consisting of short and long format questions. Thus, although this book is designed specifically for the British exam, it can easily be used to study for the American oral board exam.

This book is organized into three chapters. Chapter one is a basic summary of the British vivas and guide for preparation. This chapter contains very helpful advice on how to study solo and also in groups. There are also very helpful strategies for organizing one's thoughts and suggestions on how to deliver a well-phrased answer. The section on the opening sentence was especially helpful, as just beginning one's answer can be extremely anxiety-provoking.

Chapter two, "The short cases," is a series of one- or two-sentence clinical scenarios, with or without some imaging, followed by a series of questions. The majority of the questions focus on preoperative, intraoperative, and postoperative management. However, there are plenty of questions that cover a wide range of topics, including basic science and physiology, pharmacology, disease process, surgical procedure, positioning, analgesia, regional anesthesia, pain syndromes, pediatrics, obstetrics, critical care, and even statistics.

In chapter three, "The long cases ... the one about ...," a much more detailed description of a clinical scenario is given, including the past medical and surgical history as well as information such as laboratory values, electrocardiograms, and imaging studies. Each of these cases is followed by a question asking one to summarize the case or demonstrate an understanding of the major issues related to the management of the case. Finally, there is a series of questions that encompass the same broad range of topics as the second chapter.

The strength of this book lies in its helpfulness in categorizing information to aid in both memorization and thought processes used for the oral exam. There are many highlighted

blocks throughout the book that summarize important clinical facts and present useful tables and charts. The reproduced chest x-ray films and electrocardiograms are good quality and cover the images most likely to be seen on the exam. The summary of the clinical evidence and references are organized and are very up to date.

The only potential problem with this book when using it to study for the American board exam is that it cites British Society Guidelines. Less of a problem is that some of the terminology and nomenclature are different than what is used in the United States. However, these differences can be easily overcome with a brief search, and I found the differences to be interesting, thought-provoking, and sometimes a bit humorous.

In summary, I believe this book is an excellent study guide, not only for the British viva exam but also for the American oral board exam. For practitioners already board-certified and working with residents, it provides useful clinical scenarios and teaching points to discuss. Because this book was easy to read and even provided some occasional humor, I will use it continually to brush up on my clinical knowledge.

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**An Introductory Curriculum for Ultrasound-Guided Regional Anesthesia: A Learner's Guide.**

Edited by Brian A. Pollard, B.Sc., M.D., Med., F.R.C.P.C., and Vincent W. S. Chan, M.D., F.R.C.P.C. Toronto, University of Toronto Press UTPRINT, 2009. Pages: 81. Price: \$109.00.

The burgeoning use of ultrasound imaging to guide the performance of regional anesthesia has breathed new life into an already dynamic and compelling field. The anesthesia residents at my institution have minimal interest in using anatomic landmarks and nerve stimulation alone for guidance in peripheral nerve blocks. It is now *all* about the ultrasound. As a result, there is a considerable demand for quality resources on ultrasound-guided regional anesthesia for primary learning as well as for reference. This text is well-designed to help meet this need on an introductory level. Its target audience will likely extend from trainees at the beginning of their anesthesia careers to well-seasoned practitioners of regional anesthesia who are only recently incorporating ultrasound imaging as guidance for their peripheral nerve blocks.

The text is divided into five sections. The first lays the foundation required for the practice of ultrasound-guided regional anesthesia, a basic science understanding of ultrasound. Because the physics of ultrasound can be tedious and not particularly useful in clinical practice, the authors do not delve deeply into how an electric current will cause a physical transition of a piezoelectrical crystal, for example. Rather, they describe why higher transducer frequencies provide excellent image resolution within superficial tissues and why this is not the case at greater tissue depths. Emphasis on this type of knowledge has direct clinical applications to the attainment of high quality images, and, by extension, successful blocks.

Real-time ultrasound imaging elevates a blurry canvas of whites, blacks, and grays to form a cinematic movie showing anatomic structures, and, like holding a camera, one controls the image by guiding the transducer. The authors discuss practical techniques for manipulating the transducer, such as sliding and tilting, to improve the attainment, interpretation, and overall quality of the images. Their favored practice target is one's own forearms, which have a wealth of structures to examine.

Included in the first section is a discussion on the use of needles in conjunction with an ultrasound transducer. Using the two in combination is a skill to be gained in its own right. The emphasis on this is critical for the successful and safe execution of regional anesthesia with ultrasound guidance. One useful pearl is for the practitioner to avoid "chasing" the needle while using the in-plane technique but to strive always to guide the needle to the target in the existing optimal image.

Only after this introduction are we ready to explore the blocks themselves. The next three sections describe ultrasound-guided nerve blocks in order of increasing complexity. Forearm blocks are discussed along with single-shot femoral nerve blocks as part of the introductory or beginner blocks. The intermediate blocks include the different approaches to target the brachial plexus and sciatic nerve. The final section on peripheral blocks includes a discussion on indwelling peripheral nerve catheters. The fifth, and final, section of the text focuses on ultrasound-assisted neuraxial blocks. The authors make the distinction between "assisted" and "guided," as these techniques are used mainly to help establish landmarks and depth. True ultrasound guidance depends on real-time images.

The recommendations at the end of each chapter are helpful for those wanting or needing further depth in the subject material. The bullet points at the conclusion of each chapter provide a distillation of the most important concepts. The images and illustrations are of high quality and occupy nearly as much real estate as the written text, which is fitting for a book on image guidance. The cross-sectional magnetic resonance images are particularly helpful for those trying to grapple with 2D images in planes they may not be used to visualizing. The book repeatedly highlights the continued need for a solid understanding of anatomy, whether or not ultrasound is employed.

In terms of critique, I will return again to a subject that was a rite of passage for all physicians: physics. Although the discussion that relates to ultrasound energy was made brief by intent, it was still not exceptionally clear. However, this is probably because the subject of ultrasound physics itself is not particularly suited to brevity and thus becomes a bit of an impossible task for an introductory guide. Overall, *An Introductory Curriculum for Ultrasound-Guided Regional Anesthesia: A Learner's Guide* is an easy-to-read, informative text. With an efficiency of words, it remains meaty enough to start feeding the scholarly appetite for ultrasound-guided regional anesthesia and will likely spur further study as well as hands-on practice.

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**Safe Positioning of the Patient for Surgical Intervention.** By Serge Molliex, M.D., and Jacques Ripart, M.D. Paris, France, La Prévention Médicale, 2009. DVD format (90 minutes, 17 chapters). Price: 30€ (electronic download) or US\$45 by check.

The safety and well-being of the surgical patient lies in the hands of the perioperative team from the moment the patient enters the operating room. Proper positioning for the surgical procedure is an essential step that is often underemphasized, even trivialized, yet improper positioning may lead to serious injuries. These relatively rare complications are generally preventable but, unfortunately, continue to occur regularly. *The Safe Positioning of the Patient for Surgical Intervention*, published by La Prévention Médicale, aims to educate healthcare professionals in proper positioning techniques to prevent these injuries.

The 90-min-long DVD is divided into four major sections, each containing multiple chapters that can be accessed directly from the main menu. The first section consists of a short introduction to familiarize the audience with the particularities of the operating room. The second section details multiple operating positions, including, but not limited to, the supine, prone, lateral, lithotomy, and sitting positions. Special considerations, such as particularities of laparoscopic surgery or the difficulties relating to positioning obese patients, are detailed in the third section. Lastly, all possible complications related to positioning, classified by organ system, constitute the fourth section.

The strengths of this educational DVD lie in its thoroughness and use of multiple visual formats to convey its important messages. Indeed, the DVD presents a mix of real life cases that were filmed (*e.g.*, showing the audience how to transition a patient under general anesthesia from a supine to a prone position), in addition to demonstrating positioning

The second edition of the hugely popular *The Clinical Anaesthesia Viva Book* builds on the success of the first by providing a thorough review of short and long case questions typically given to Final FRCA viva candidates. An introductory chapter gives invaluable practical advice on preparation for the viva. *The Clinical Anaesthesia Viva Book* by Julian M. Barker Paperback S\$77.82. Only 2 left in stock. Ships from and sold by Amazon SG. Cambridge Core - Anesthesia, Intensive Care, Pain Management - *The Clinical Anaesthesia Viva Book*. Russell, I. F. 2013. Fourteen fallacies about the isolated forearm technique, and its place in modern anaesthesia. *Anaesthesia*, Vol. 68, Issue. 7, p. 677. CrossRef. Google Scholar. Maulana, Rizal Syauqy, Dahnia and Amani, Rint Zata 2017. Dehydration Level Detection System Based on Urine Condition. p. 207.