
The rising cost of health care and the advent of ever more technologically sophisticated diagnostic tests place a great burden on medical providers to judiciously utilize available health care resources. It is in this 21st century context of cost consciousness versus technological advances that Cost-Effective Diagnostic Imaging: The Clinician’s Guide attempts to mediate between these two competing juggernauts.

The obvious intent of this book is to help all clinicians, especially primary care physicians, order the most cost-effective and medically appropriate imaging tests. The authors make a noble effort to carry out this goal. They accomplish this first by summarizing nicely the array of available imaging tests, explaining their respective nature and utility, in the introductory section. Second, they break down the cost of imaging tests into $ categories (where one $ sign is less than $100 and six $ signs represent anywhere from $3,000 and up).

The book is categorized into eight parts, comprising the major organ systems (eg, gastrointestinal, genitourinary, central nervous system, cardiovascular, etc), allowing the reader to quickly scan chapters of immediate interest. Chapters are typically brief—most are 5–10 pages in length—and follow a set format. Their contents invariably include an introduction of the topic (eg, gastrointestinal bleeding in the adult, mediastinal mass, etc) followed by a section on relative costs. Next is a “Plan and Rationale” section that expands on why certain imaging tests are more appropriate or cost-effective for confirming any particular diagnostic entity. This section outlines the steps the authors recommend readers should undertake to be most cost-effective. Each chapter ends by enumerating conclusions and making helpful additional comments, as needed.

This step by step approach conveys to the reader the other main and rather overt message of the book: cost-effective imaging does not mean doing the cheapest test first.

The book is easy to navigate and read, in general, and is written for a professional medical audience. Some concerns arose during my review of the book that warrant mention:

1. Cited references are often not of recent origin, many being from the 1980s or earlier.
2. Bolding of various sentences, presumably to highlight their importance, may divert the reader from properly understanding the main messages of each chapter.
3. The additional comments section, while occasionally of interest, at other times seems like a non sequitur and more detailed than necessary, bordering on the obscure or esoteric.

The book ends with its final two sections titled “General” and “Breast Imaging.” The “General” section includes topics such as occult bacterial infection, percutaneous guided biopsy, PET and CT scans in cancer staging, and the utility of CT scans in cancer screening. Breast imaging has evolved over the years and due to the emotionally sensitive nature of breast disease and its relatively high prevalence, this expanded chapter is both necessary and appreciated.
This book unfortunately lacks the necessary authority and updated references to be of significant value to academic physician educators. Nonetheless, I am happy to recommend Cost-Effective Diagnostic Imaging for the busy community-based primary care physician or provider as a convenient and easy to use reference guide for choosing the most appropriate imaging tests in the evaluation and management of both hospitalized and office-based patients.

Samuel N. Grief, MD
University of Illinois at Chicago


At only 221 pages, with a straightforward writing style, this book is a quick and easy read that encompasses a broad overview of obstetrics. However, in exchange for its brevity, the level of detail is at times inadequate, and the evidence-based discussions are superficial, when present at all.

The book is divided into five sections: preconception and prenatal care, complications of pregnancy, labor and delivery, complications of labor and delivery, and postpartum management.

The first section covers basic physiology of the menstrual cycle and pregnancy, appropriate preconception counseling, standard prenatal care, and a discussion of medication use in pregnancy. The section on complications of pregnancy includes both preexisting medical conditions that can complicate pregnancy, such as hypertension, diabetes, and HIV, as well as including conditions that can arise as the result of pregnancy, such as preeclampsia, preterm labor, premature rupture of membranes, and bleeding during pregnancy. The section on labor and delivery covers normal labor, induction and augmentation, pain management, and a brief discussion of vaginal operative delivery. The fourth section, complications of labor and delivery, discusses issues of prolonged labor, shoulder dystocia, malpresentations, fetal heart rate monitoring, postpartum hemorrhage, and perineal laceration repair. Finally, the last section on postpartum management discusses routine postpartum management and complications that can arise in the postpartum period, focusing primarily on fever and its causes.

Although this book is concise and simple to comprehend when read chapter to chapter, it does not consistently lend itself well to point-of-care inquiries when faced with a specific clinical question. The chapters are written in paragraph style with preceding headers and do not follow a true outline format. Frequently, key points are buried in the body of the paragraphs, and the information does not always intuitively fit with the paragraph or section header. Further, although the scope of the text is broad, the detail in the text is often insufficient to answer specific questions an experienced practicing clinician may have, in particular with regard to management and treatment guidelines. For these reasons, those who would find this text most useful would be medical students or residents with little prior exposure to obstetrics, who could read this book in its entirety as an introduction to obstetrics. It may also be useful to practicing clinicians who do not practice obstetrics routinely and who wish to brush up on or review obstetric topics.

However, there are a number of factors that do not make the book an attractive option for the learner. Although there are several helpful flow diagrams for decision making, there are no pictures or diagrams. In particular, visual aids would be helpful in the chapters on normal delivery, malpresentations, fetal heart rate tracings, laceration repair, and operative vaginal delivery. There are no references listed at all for chapters 19 through 32 (encompassing normal labor and delivery, complications of labor and delivery, and postpartum management), which is in sharp contrast to the use and listing of references after each chapter for the sections on preconception and prenatal care and on complications of pregnancy. Additionally, there were disturbing typographical inaccuracies in the book, ranging from numerous simple spelling errors to tables being mislabeled in several instances. (For example, macrosomia is misspelled as “macrosoma,” cesarean is misspelled alternatively as “cesarian” and “cesarien,” and coagulopathy is misspelled as “co-agulopathy” and “coagulopathy,” all in the span of two pages.)

Given that the text is included in the Current Clinical Practice series of the publisher, it is surprising that this book did not clearly reference sources of informational points, was lacking references for approximately half of the chapters, had some out-of-date information, and omitted important content that would be expected in an obstetrics basic text. As an example, maternal serum triple screening is discussed for genetic screening; however, the newer quad screening option, which has been available for several years, is not. Nuchal thickness ultrasound measurements are also not discussed, though it is possible that particular Down syndrome screening option may not have been widely known at the time of publication. In the section on diabetes, there is discussion of the use of insulin. However, the text recommends avoidance of oral hypoglycemics, without adequate discussion of observed safe and effective use of glyburide to control gestational diabetics in recent years. For management of incomplete spontaneous abortion, dilation and curettage is acknowledged, but
medical management options, such as use of intravaginal misoprostol, are not discussed. For management of Group B strep, there was no mention of potential GBS resistance to clindamycin and resultantly no advice on utilization of sensitivity testing to guide management in those who are penicillin allergic. In the section on normal labor, there was incomplete mention of the active management of the third stage of labor, which is proven to reduce hemorrhage.

In summary, although there is a good quantity of solid obstetrical information offered in this guide, its usefulness as a practical and dependable clinical tool is weakened by omissions of current care, typographical errors, and a format that does not always lend itself to a rapid retrieval of high-yield information. This book may be used cautiously, if at all, by a reader desiring an introduction and overview of obstetrics. The reader would be wise, however, to verify management recommendations with a second source.

Kirsten Stoesser, MD
University of Utah

All books reviewed in this column are available for purchase through the STFM Amazon portal at www.stfm.org/bookstore. STFM receives a small percentage of each sale made through this portal.
Jim Landis, the editor in chief of William Morrow & Company and a widely respected figure in New York publishing, quit yesterday after what editors and agents described as an irreconcilable personality clash with Howard Kaminsky, the chief executive of Morrow's parent company. A brief company statement said that Mr. Landis's decision "to leave Morrow is the result of disagreements concerning publishing policy." It did not elaborate, and a spokesman, Scott Manning, declined to comment further. A leading literary agent, who said he spoke with Mr. Landis yesterday, said that the editor had resigned because "he has a totally different sensibility from Mr. Kaminsky and felt they could no longer work together." Associate Editor/Broadway Critic. @GregEvans5. More Stories By Greg. 

EXCLUSIVE: Bestselling horror novelist Paul Tremblay, whose A Head Full Of Ghosts is set for a film adaptation directed by Scott Cooper, has signed a three-book deal with the William Morrow imprint of HarperCollins. The publisher has acquired US and Canadian rights to three new books by the writer, the first of which will be The Pallbearer's Club, set for publication in summer of 2022. The novel is described as a horror story about a less-than-successful middle-aged man who reflects on his long-ago involvement with a group who served as volunteer mourners at the funerals of people with no friends. What must a book review contain? Like all works of art, no two book reviews will be identical. But fear not: there are a few guidelines for any aspiring book reviewer to follow. Most book reviews, for instance, are less than 1,500 words long, with the sweet spot hitting somewhere around the 1,000-word mark. (However, this may vary depending on the platform on which you're writing, as we'll see later.) In addition, all book reviews share some universal elements. Following in the footsteps of Jack Kerouac and William Least Heat-Moon, Doane offers a coming of age story about a man finding himself on the backroads of America. Doane's a gifted writer with fluid prose and insightful observations, using The Narrator's personal interactions to illuminate the diversity of the United States.