
Primary Pediatric Care is an excellent choice for the family physician who wants to own one comprehensive, definitive, and relevant pediatrics text. This single volume, impressive in size and scope, has an advantage over other major pediatrics texts in that it is consciously written to meet the needs of the primary care physician.

The scope of this voluminous work defines primary pediatric care in the broadest possible terms and offers a substantial knowledge base and contextual point of view. Easily readable, this text is family-oriented in its philosophy, with a number of features that family physicians will find particularly helpful. Of note are the many practical charts, tables, and illustrations. Many of the symptom-based and problem-focused chapters contain useful tables that define criteria for referral and hospitalization.

Part One of the book establishes the “big picture” context of pediatric care, including a chapter on community-wide approaches to health promotion and a new chapter on managed care. Parts Two and Three cover the process of providing primary care to children in a thorough and detailed manner. The chapter on physical examination is impressive in its detail. The section on preoperative evaluation includes a practical set of guidelines for deferring surgery because of minor illness. Family physicians will especially appreciate the attention given to techniques for working with families, which is covered in several chapters in this part of the book.

The broad scope of this text is illustrated by Part Four, which deals with the reproductive process and perinatal medicine and their implications for pediatric care. The family orientation appears again in the section on the newborn (Part Five). Amidst a detailed discussion of the physiologic adaptations that occur after birth, the authors maintain sight of the fact that babies are born into families and that parents need support. A comprehensive section on psychosocial issues and behavioral problems (Part Six) is followed by a section that covers 70 presenting signs and symptoms (Part Seven). The list of signs and symptoms includes everything from abdominal distention (a separate chapter from the one on abdominal pain) to dental stains, strange behavior, tics, and wheezing. Many common presentations are thoroughly covered and clearly explained. Although some of the presentations covered will only be seen once in a great while by the average family physician, on that rare occasion, it would be helpful to have this text on hand.

Part Eight covers 91 specific clinical problems, this time organized by disease entity, rather than by presenting symptoms. This section complements the previous one well. The last section of the book (Part Nine) covers 25 critical situations and emergencies.

As one would expect from a text with 322 authors, there are some minor variations in the quality of the chapters. Overall, the chapters sampled by myself and two faculty development fellows were rated “excellent” more often than not, with an occasional chapter only coming up to the standard of “good,” based on organization, readability, relevance to family medicine, and whether or not we would be likely to consult the chapter again. While time did not permit reading the entire text, I was able to cover enough to say with confidence that I have made the acquaintance of a remarkable resource, and I look forward to getting to know it well. I suspect that Primary Pediatric Care will soon become a good and trusted friend.

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Common abbreviations used in the text. AIDS acquired immune deficiency syndrome. b.i.d. twice daily BMI body mass index CDC Centers for Disease Control and Prevention CHDÂ  WBC, white blood cell; RBC, red blood cell; ESR, erythrocyte sedimentation rate; MCV, mean corpuscular volume; ALT, alanine aminotransferase; AST, aspartate aminotransferase; HDL, high density lipoprotein; LDL, low density lipoprotein; VLDL, very low density lipoprotein. MMMM Introduction. Jo Ann Rosenfeld, MD. The purpose of this book is to consider the woman and her health needs in her position in her life cycle, her family, and society. Women have historically been the other in medical care.