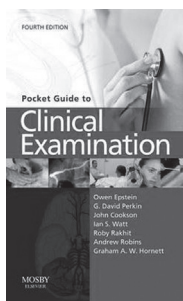


### Charlotte Chen

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Charlotte Chen is a 5th year medical student at Auckland Medical School. She has an interest in anaesthesiology and internal medicine.



### Clinical Examination 4E

Written by: Owen Epstein, G. David Perkin, John Cookson, Ian S. Watt, Roby Rakhit, Andrew Robins, Graham A.W. Hornett

NZRRP: \$135.00

Available from Elsevier Australia –

[www.elsevier.com.au](http://www.elsevier.com.au)

For some, heading into the clinical years is like stepping into a minefield; the preclinical years never seem to be enough to prepare you for what is to come. A new textbook is on the market to help smooth the transition: Epstein and Perkin et al's Clinical Examination. A visually appealing book, the 4th edition of this series is a comprehensive guide to consultation, history taking, general examination and the basic clinical examination of major organ systems. In a market dominated by the popular Australian text by Talley & O'Connor, can this book authored by a group of UK physicians stand up to the test?

Picking up Epstein and Perkin, you may mistake it for Talley's; the two are of similar size and both have blue covers. The book consists of 12 chapters and similar to other clinical exam texts, is organised by organ systems. Each chapter begins with an overview of the anatomy and physiology. Yes, this means the return of the oxygen dissociation curve and all the anatomy you thought was safe to forget. Most should find the anatomy sections helpful, however some may find the physiology to be more comprehensive than need be. The book then dives into the common symptoms relevant to each organ system. The structure of the chapter mirrors how a case history would be taken. Symptoms and their pathophysiology are generally discussed in excellent detail. Interspersed are coloured icon boxes such as "Questions to Ask" and "Differential Diagnosis" for symptoms such as jaundice. Then there are "Symptoms and Signs" boxes for diseases such

as asthma and rheumatic fever. Epstein and Perkin include brief sections dedicated to pertinent points in the history other than symptoms. This includes integration with other body systems, importance of previous diseases, social history, family history and the patient's perspective on the disease. Risk factors for various diseases and epidemiology are also presented. These parts give quite a holistic feel to the book. Finally, we get to the all-important clinical examination section.

There is no significant difference between the UK method of examination and what is expected in NZ. The clinical examination sections start with general examinations (hands, face and skin). The specific examination of the organ system then proceeds with the familiar IPPA structure. Most examination manoeuvres are explained clearly in paragraphs; you are guided through the steps involved in a particular examination instead of being just being given a description of the exam. The explanations are somewhat more comprehensive than those found in Talley & O'Connor. Whether this is an advantage or not depends on how you use your textbooks. Paragraphs are accompanied by quite a number of high quality photographs. Graphs and cartoons presented tend to be simple and easy to understand. As expected, common problems encountered by those starting out such as differentiating between palpation of the kidney and the spleen are covered. Each chapter ends with a section on the examination of the elderly and a chapter summary. These are generally too short and lacking in detail to be useful. This is a point to consider when considering buying this book, because Talley & O'Connor is known for their informative end-of-chapter summaries.

One unique feature of the book is the last chapter on infants and children. It focuses on growth and development and is divided into newborn, toddlers, preschool child, school-aged child and adolescents. This section may not be as detailed as your paediatric textbooks, but should be more than adequate for examining children in a general setting. No doubt many will find this extremely useful.

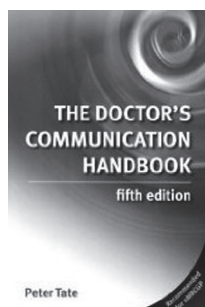
Overall Clinical Examination comes across as a colourful, highly accessible resource. It is geared towards medical students who are just starting out in clinical medicine, and is ideal for preparation before ward rounds, or as reference when writing up case histories. The paediatric section also adds a nice touch. If you are looking for a concise book on the basics of examination, this is perhaps not for you. For those able to utilise the myriad of information presented, you will find the book refreshing and impressive.

## FEATURE : BOOK REVIEW

### Adèle Pope

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Adèle Pope is currently enjoying being a Trainee Intern at Middlemore Hospital. When she is not studying or doing research, she likes playing netball or her cello and is an Asian drama addict (thanks to her sister who lives in Taiwan).



### The Doctor's Communication Handbook.

5th Revised Edition.

Peter Tate

Publisher: Radcliffe Publishing Ltd.

2006

NZRRP\$64

Doctor-patient relationships for dummies? The Doctor's Communication Handbook is not as simplistic as that, but does provide an easy-going approach to patient-centered communication. The author, Peter Tate, has worked as a GP in the UK, as well as an examiner for MRCGP (equivalent to the RNZCGP) and a communication issues lecturer. Tate draws on personal experiences and relevant research for this fifth edition, assisting training GPs and medical students in improving their clinical skills.

The thirteen chapters of the Handbook cover a range of topics, from

detailing how doctors approach patients to wider communication concepts and ethical issues. These chapters improve the reader's awareness of their own perspective when they talk with patients and how patients perceive them. There are some common sense suggestions made in the Useful Strategies and Special Situations chapters, while the chapter on patient categorisation is somewhat obscured by jargon. Fortunately this is not the case for the rest of the text.

Each chapter contains a few points worth remembering before, during and after talking to a patient. The shaded boxes give examples of routine doctor-patient conversations contrasted with a more thoughtful version of the dialogue from the would-be doctor. Some of the suggestions are not practical on a daily basis, such as evaluating consultations by plotting a consultation map. The use of lists and bullet pointing, however, reminds the reader to determine patients' agendas rather than their own and listen to what their patients are saying before diagnosing them.

Doctor-patient communication skills evolve with practise and Tate acknowledges this throughout his book. The Handbook is a slim book, priced at around \$100. It can easily be brought out in a consultation in order to refocus on patient-centered communication. Tate's writing style is honest and engaging, although it can be too conversational at times. The book is most appropriate for those students heading down the GP career path.