
The Society of Critical Care Medicine is a multidisciplinary group of recognized experts in critical care in a variety of settings worldwide. *Fundamentals of Disaster Management* is this group’s latest contribution to crisis medicine. The authors have firsthand knowledge of their subject as evidenced by the practical knowledge imparted to the reader.

The pocket guide is concise and well organized. The cover and pages of this spiral notebook are plasticized, which makes it a true field guide regardless of the conditions in which it is used. It outlines both man made and natural disasters. In addition to practical advice for organizing triage, treatment, and communication, this book delineates how to establish a command center and coordinate and integrate mass casualty care.

Each chapter may be used as part of the whole or separately as needed. When the material found in this disaster manual is read cover to cover, it gives a step-by-step blueprint of the different components that comprise a fully operational disaster management plan. It emphasizes education and training as the cornerstone of a successful team. Priority information comprises the first section of each chapter. This is followed by an overview and classification. Rationale and step-by-step actions are the heart of the discourse. Concluding each chapter is a list of current references and suggested readings.

Tables and flow charts are easy to read and add to the usefulness of this book. The information itself is based on standards required by the Centers for Disease Control and Prevention. Organized response is outlined by individual entities such as local healthcare systems and by their integration into the broader essential components of federal, state, and local government.

Although the text addresses a multitude of scenarios, it is a basic primer about mass casualty triage and initial disposition. As such it does not outline specific surgical or anesthetic interventions. However, all healthcare providers are faced with the realities of today’s potential for disaster, either natural or manmade. This should be basic reading for all anesthesia providers who may one day be faced with such a catastrophic event.

**Lynne M. Van Wormer, CRNA, MSN**
Department Administrator, Anesthesiology
San Diego Medical Center
Kaiser Permanente
San Diego, California


The resurgence of regional anesthesia, particularly peripheral nerve blockade has led to increasing demand for a comprehensive regional atlas. The advent of increasing numbers of outpatient procedures has helped to popularize peripheral nerve blocks with anesthesia personnel and surgeons. Although never demonstrated to be superior to general anesthesia for such procedures, regional anesthesia provides superior postoperative pain control and decreases narcotic administration. Chelly’s text is concise, thorough, and provides an abundance of clinical tips and appropriate indications for peripheral nerve blockade.

This atlas is well organized with sections devoted to general concepts, upper and lower extremity, head and neck, pediatric, and continuous block techniques. The basic fundamentals of peripheral nerve blocks are well described, with reference to equipment, local anesthetics, and patient selection. The strength of the text lies in its comprehensive nature and clinical relevance. The section on upper extremity blocks includes the classic approaches to the brachial plexus as well as infraclavicular techniques. Lower extremity blocks are thoroughly covered including various approaches to the sciatic and popliteal nerves. These various approaches have been reported in the literature recently, and it is convenient to have multiple techniques in one text.

Chelly includes an extensive section on continuous block techniques that may find increasing popularity in practice. The head and neck chapter was felt to be
adequate but offers nothing new to other texts. The section devoted to pediatrics is quite useful; other regional atlases frequently do not include pediatrics. Dosing of local anesthetics and various approaches in the pediatric population help make this a comprehensive text.

The strengths of this atlas lie in its description of a given block with various approaches and clinical pearls to ensure success. Chelly also includes the efficacy of particular blocks with specific surgical procedures, helping the clinician make an appropriate decision. If there is an area of weakness it is in the graphic material used to depict the sensory innervation of the upper and lower extremity. Although the photo selections could have been better, this is an excellent text that is comprehensive and well organized. Peripheral Nerve Blocks is a useful regional reference for any practitioner and is well worth the price.

Nick Keene, CRNA, MS
Chief CRNA
Department of Anesthesiology
Bar Secours, St Mary’s Hospital
Richmond, Virginia

Josh Weiss, MD
Attending Anesthesiologist
Department of Anesthesiology
Bar Secours, St Mary’s Hospital
Richmond, Virginia