The Portable Skeletal X-ray Library
Marshall N. Deltoff, DC, DACBR, FCCR(C)
Peter L. Kogon, DC, DACBR, FCCR(C), FICC
Mosby-Year Book Inc., St. Louis MO, 1998, 371 pages
ISBN 0-8151-2244-6.

Both co-authors have been featured speakers at educational seminars here in Detroit, and throughout North America. Drs. Deltoff and Kogon are exceptional speakers, praised by attendees as providing x-ray instruction and review in an easy-to-understand and practical format. Their lucid educational style comes through in this book, too.

The book is organized according to the mnemonic 'CATBITESS', which divides the various conditions into the following categories: C – congenital, A – arthritides, T – tumors, B – blood, I – infection, T – trauma, E – endocrine, S – soft tissue, S – scoliosis. Although readable cover-to-cover, the book is designed as a manageable reference text.

Conditions commonly seen in clinical practice are emphasized. Each pathology is explained through the use of bullets and point-form facts, which coordinate with the plentiful images, making understanding easy. Radiographic features, clinical presentation, differential diagnosis, and other pertinent points are provided. The radiographs used to illustrate the various entities represent actual cases, and are of exceptional quality.

What a superb reference text! I wish that this book had been available when I was in chiropractic college, but I'm glad that it is available now as a convenient tool to refer to in my office!

Martin J Brown, DC, CCSP
Sterling Heights, Michigan

The Portable Skeletal X-ray Library
Marshall N. Deltoff, DC, DACBR, FCCR(C)
Peter L. Kogon, DC, DACBR, FCCR(C), FICC
Mosby-Year Book Inc., St. Louis MO, 1998, 371 pages
ISBN 0-8151-2244-6.

"The Portable Skeletal X-ray Library" is aptly named. At 371 pages, it certainly fits the definition of portable – and it's only one volume! Yet, all the topics I looked up were presented with good photographs (and/or line drawings) and clear coverage of the material. In other words, the book does not sacrifice detail in spite of its sleek physique

The organization of this portable x-ray library is fantastic. The chapters are organized along the CATBITESS system (Congenital, Arthritides, Tumors, Blood, Infection, Trauma, Endocrine, Soft Tissue, Scoliosis). The table of contents is thorough and useful, as is the fully functional index. But the best touch in the organization of this quick reference manual is the tab on each page that identifies the current chapter. Because of this, thumbing through this text is especially helpful. Using these page tabs, I could set new speed records finding a given x-ray topic.

Each chapter begins with a concise outline (with page numbers referenced), followed by the major headings in the chapter. Under each heading, the information is in a bulleted format for quick reference. The bullet format makes this text a true "quick" reference book.

This book does not try to be all things to all readers. The scope of the book is limited to skeletal x-ray and related soft tissues. The authors have done an admirable job, not just in their thoroughness, but in emphasizing ease of use. It has obvious applications for board exam preparation, everyday practice, and as a classroom text.

"The Portable Skeletal X-ray Library" is not a book you read from cover to cover. It is a reference. And, as a reference, this text excels. The only thing missing is a chapter on normal and abnormal biomechanical findings on x-ray, and possibly more normal films (suggestions for the next edition).

In summary, my copy of "The Portable Skeletal X-ray Library" will have a place next to my viewbox. In fact, this text ought to come as a standard accessory with the purchase of all viewboxes.

Joseph S. Siragusa, DC, FACO
Monroe, North Carolina

Clinical Orthopaedic Rehabilitation
Editor: S. Brent Brotzman
Mosby, 1996
11830 Westline Industrial Drive, St. Louis, Missouri 63146,
402 pages, Hardcover, Illustrated, $138.00,
ISBN 0-8151-1034-0.

During the last two decades, there has been a large increase in the number of rehabilitation clinics directed by medical doctors, physiotherapists, chiropractors, etc. This is as a result of improved efficiency of rehabilitation programs offering patients a faster return to preinjury status. There has been a large number of books published mostly on the fundamentals of rehabilitation, soft tissue injury rehabilitation, and athletic injury rehabilitation. However, there are only a few books offering step by step rehabilitation protocols and even fewer books on the protocols for fractures and postsurgical rehabilitation. Perhaps this is due to the fear of creating a cookbook approach to rehabilitation, and jeopardising the individuality of each patient.

The editor claims that, "This textbook is designed to give the reader well-established rehabilitation protocols used by leading orthopaedic surgeons and therapists in specific specialty areas. Many existing rehabilitation protocols are empirically based; they have been shaped by years of trial and error in large numbers of patients." He further cautions the reader not to use these protocols with a cookbook approach since they do not fit every possible situation or patient, but they are designed to give the reader a framework on which individualized programs can be built.

The text consists of eleven chapters including: Rehabilitation of the Hand and Wrist, Elbow Rehabilitation, Rehabilitation of the Shoulder, Fractures of the Pelvis, Acetabulum, and Lower

Extremity, The Knee, Foot and Ankle Rehabilitation, Rehabilitation After Total Arthroplasty, Rehabilitation of Pediatric Patients, Reflex Sympathetic Dystrophy, Foot Orthoses, and Low Back Disorders. Generally speaking, each chapter (except chapters on Reflex Sympathetic Dystrophy, Foot Orthoses, and Low Back Disorders) includes rehabilitation rational, rehabilitation protocol for fracture, dislocation, and some common soft tissue injuries.

Reflex Sympathetic Dystrophy includes clinical variants, classification, clinical course, psychologic ramifications, rehabilitation, and case studies. This chapter is unique to this book and provides an excellent review of the literature.

Foot Orthoses includes classification of orthoses, subtalar neutral, biomechanics and movement, gait cycle, forefoot position, forefoot mobility, rearfoot position, evaluation for orthoses, fabrication of orthoses, recent advances, and other posting principles.

Low Back Disorders includes: rehabilitation rational, evaluation, treatment, and rehabilitation after disc (HNP) surgery.

Generally speaking, this book only outlines rehabilitation protocols for more common fractures, dislocations and some very common soft tissue injuries. The surgical procedures are explained very briefly and in some instances not explained at all. It seems that the contributors assumed a certain level of knowledge of the reader regarding the surgical procedures and techniques. In most chapters, the authors recorded one, two and rarely three different rehabilitation protocols for the same injury which offers a choice to the reader. One of the best chapters in providing different rehabilitation protocols is the chapter on The Knee. The authors do not go into a detailed reasoning for different exercises used with the different stages of rehabilitation but focus more on the rehabilitation protocols. Chiropractic spinal manipulation is mentioned once in the last chapter (Low Back Disability), however, nothing is mentioned of its effectiveness and is not included in the rehabilitation protocols. Manual therapy is also mentioned once in this chapter as one of many methods of low back stabilization training. Throughout the book a number of braces are mentioned but unfortunately only some are illustrated by photographs and drawings. There are a couple of spelling and typing errors; i.e., "supensory ligament" on page 135 should read "suspensory ligament"; and "seven to 145 days" on page 272, table 6–5, should read "seven to 14 days."

The contributing authors are medical doctors (mostly orthopaedic surgeons), physiotherapists and athletic therapists who all practice in the USA except one from Canada. Although this text has 20 contributors, and therefore, different styles of writing, the authors have kept the reading material fluent. Each chapter is up to date and well referenced. However, there are no assigned numbers to the references. Instead, the authors provide a list of the references at the end of each chapter. This made it difficult to cross-check the statements made by the authors with the references listed. The tables, figures and photographs used in the text are very informative and illustrative. However, there is only one radiograph found throughout the book (figure 8–7). In my opinion utilizing more radiographs (of fractures, dislocations and surgical fixtures and prosthesis), figures and photographs (specially of the different braces) would have made the text more comprehensive.

Overall, this book is a good value for the money and in my opinion any sports sciences' student, professional, and library interested in rehabilitation of fractures and dislocations would benefit from purchasing a copy of this book. As an end note, I also, as did the editor, would like to strongly caution the reader not to use the protocols in this book with a cookbook approach since they do not fit every possible situation or patient, but they are designed to give the reader a framework on which individualized programs can be built.

Mohsen Kazemi, RN, DC
Sports Sciences Resident II, CMCC

Positional Release Therapy:
Assessment and Treatment of Musculoskeletal Dysfunction
Kerry J. D'Ambrogio, George B. Roth.
Mosby-Year Book Inc., 1997,
259 pages, hardcover, illustrated $120.00.
ISBN 0-8151-0096-5

This is an ideal book for the manual therapy practitioner seeking to expand his/her therapeutic arsenal. The book deals with soft tissue injuries and musculoskeletal dysfunction. Eight chapters are presented in a clear manner, divided appropriately into subtopics. The instructional figures and photographs provide for swift assimilation and application of concepts.

The first chapter provides a background on the origin and evolution of Positional Release Therapy (PRT). The second chapter elaborates on the emerging paradigms that are increasingly allied to clinical observations in the field of musculoskeletal dysfunction. Chapter three deals with the effects expected from PRT. This therapy is gentle, nontraumatic and efficient, as the authors illustrate using a myriad of examples of patient types and conditions aided by PRT.

Chapter four delineates the established protocol for treatment that has been continuously refined and developed. The significance of tender points and comfort zones and how they are utilized within PRT are explained. A treatment is then explained, using four comprehensive rules that a practitioner should follow.

The fifth chapter encompasses the PRT scanning evaluation developed by the authors. As in most techniques, treatment is easily performed. The difficulty is where to begin. This chapter establishes a protocol for determining the starting point of treatment.

The sixth chapter divides the body into an upper and lower quadrant. The upper quadrant encompasses the cranium, cervical spine, thoracic spine and rib cage, and the upper limb. The lower quadrant encompasses the lumbar spine, pelvis, hip, sacrum, and the lower limb. Each area of the body involves a discussion of clinical and functional considerations as well as appropriate treatment positions.

The seventh chapter claims that PRT helps to "normalize inappropriate proprioceptive activity and promotes the release

of muscle guarding and fascial tension". This aids in soft tissue flexibility, joint mobility, decreases pain and swelling and increases circulation. Use of other modalities are encouraged in conjunction with PRT. Patient management topics are covered such as, "How do you communicate with patients regarding positional release therapy?" and "What can patients do about posttreatment soreness?". The last chapter describes how practitioners should look to the cause of the dysfunction, the role of exercise, and the art and science of Positional Release Therapy.

Robust research studies that reveal the efficacy of this type of therapy have not been undertaken. The evidence of clinical utility is provided by opinions of experts/authors, anecdote and/or by convention. The text found within chapter seven is at times difficult to read due to blurring and smudging of the ink by poor presswork. Topics are referenced, drawing from the works of Korr, Jones, and Weiselfish. Overall, this book is well written, and imparts many useful tips addressing the release of muscle guarding and fascial tension. For practitioners interested in learning to implement a gentle, nontraumatic technique to address soft tissue dysfunction, this book may be of value.

Jeffrey R Tuling, BSc, DC
Clinical Sciences Resident, CMCC

ACSM'S Handbook for the Team Physician
W.B. Kibler, editor
Williams and Wilkins, 1996
351 West Camden Street, Baltimore, Maryland 21201-2436,
505 pages, softbound, $44.95,
ISBN 0-683-00028-4.

Quick Reference Guide for Sports Injury Management
M.K. Anderson and M. Martin, editors
Williams and Wilkins, 1998
351 West Camden Street, Baltimore, Maryland 21201-2436,
409 pages, spiral bound, $44.95,
ISBN 0-683-30235-3.

Athletes present clinicians with a myriad of situations in which professional expertise is paramount to effective management. When working or travelling with a team or group of athletes, quite often, the doctor or therapist who spends most of his/her time in a clinical setting will be confronted with an issue, condition, or situation which is not commonplace. These two books serve as useful, quick guides to assist the health care professional with the current protocols for safe and effective management.

While not developed or sold together, these two professional references together form a two volume set which will be of great and possibly daily use to both the frequent and occasional sports health care professional. Their small (approximate 20 × 14 cm) format allow them to be easily carried in a field bag by the clinician when working in a sports milieu.

The Handbook for the Team Physician has been produced by thirty contributing authors. Its five sections deal with pre-competition issues, medical concerns of competition, musculoskeletal concerns of competition, post-competition issues and special concerns, respectively.

Well-written chapters outline a broad range of information from conditioning, through ergogenic aids and health care management of sports events to a broad variety of medical conditions and injury etiology and management. The special concerns section has chapters on paediatrics, female athletes, nutrition, medical-legal, psychology and drug use by athletes.

When working with athletes, often the doctor is the only health care professional involved and must act as both diagnostician and therapist. Anderson and Martin's **Quick Reference Guide for Sports Injury Management** is designed primarily for those involved with delivering the scope of services provided by athletic therapists. This handy text will help the sports health care provider manage most situations which can arise at the field or court, but which may not be seen with the same frequency in the office. It is not a text to teach how to examine a knee, ankle, or shoulder. Rather, it provides a series of tips and checklists to remind the clinician of common mechanisms as well as examination and treatment protocols.

This book's seventeen contributors have written four main sections which are sub-divided into twenty-three chapters and three appendices. Individual chapters range through: Protective Equipment (primarily football), Emergency Care, Environmental Considerations, Soft-tissue and other injuries (organized by body part), Medical Conditions, and Drugs and Medications.

The chapters dealing with injuries generally are structured in the following format: injury type, mechanisms, predisposing factors, signs and symptoms, associated conditions, and management protocols. At the end of each injury-related chapter, Special Assessment Considerations sections remind the reader of normal ranges of motion, normal end feels, special tests and neurological testing suggestions.

The point form lists in both books are clear, well-organized and complete. If there is a weakness with these texts, it would be their minimal use of photographs and diagrams. A few more of these, carefully selected and labelled, would provide helpful support for the textual information, without adding to the bulk of the books.

Strengths of the books include their size, which make it difficult to decide to leave them on the bookshelf, their scope, which is quite inclusive and complete, and their excellent organization supplemented by the easy to use indices to facilitate the search for a specific topic.

Given the intent of the editors, which was to produce high quality, comprehensive, usable field manuals, these two books will be of great use to the doctor or therapist who finds him/herself in the sports health care environment on either a frequent or infrequent basis.

JJ Piccininni, BA, BEd, MSc, CAT(C)
Adjunct Professor and Rehabilitation Coordinator, CMCC