volume and describes possible pathways of diagnostic steps in elucidating clinical problems. Essentially it represents a co-ordinated approach of all imaging techniques in the evaluation and management of patients. Algorithms are primarily intended to guide clinicians in conventional approaches since radiologists will carry in their mind their own series and sequence tests (i.e. a personal working algorithm).

The relative merits of plain and contrast radiography, tomography, angiography, CAT scanning, ultrasound and nuclear medicine in relation to particular clinical situations are discussed. There is an honest and forthright approach to the limitations of imaging techniques and sensible discussion of each modality in the build-up of the algorithm. It is possible that a reader may wish to take exception to some of the pathways suggested but this will inevitably depend on the resources available locally to the clinician and radiologist. Nowhere, however, will the reader fail to appreciate the excellent common sense clinical approach.

This volume fills a gap in the library. It co-ordinates information from all branches of imaging in a lucid and straightforward manner in some vital clinical situations. Clinicians with an interest in imaging will not be able to resist this book, especially if they have ready access to CAT scanning. It is not specifically designed as a reference book for radiologists but all practising the art will wish to refer to it. A most excellent volume and compulsive reading.

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Expedition Medicine. A Planning Guide, Third edition, Robin N. Illingworth, Pp.vii + 55. Blackwell Scientific Publications, Oxford, London, Edinburgh, Boston, Melbourne, 1984. £4.95.

This booklet was originally published in 1976 for leaders of the Brathay Exploration Group to which the author is honorary medical adviser. Eight concise chapters cover general medical problems of cold, excessive heat, high altitudes, caving and diving together with less obvious subjects such as insurance (and how to organize it) and the export of drugs. The booklet concludes with detailed lists of equipment and drugs with specific additions for arctic, tropical, ocean and high altitude use.

The author uses his great personal expedition

experience and knowledge as a consultant in accident and emergency medicine to assemble a book that is short, simple yet comprehensive. The emphasis is on the prevention of disease by careful planning; this is not an emergency textbook – nor did it set out to be – and its value is that it sets out so clearly the preparations for expeditions. Here you will find where to order wound dressings, export certificates, the plastic spoon for measuring salt and sugar for an electrolyte solution, where to buy water cleaning pumps, purifying tablets and who needs immunization against rabies – and *much* more. Useful addresses abound.

I recommend it as a standard reference both before a trip and in the field, for doctors, expedition organizers and leaders. It is light, tough and sensible and I won't be without it in future.

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The Harriet Lane Handbook. A Manual for Pediatric House Officers. 10th Edition, edited by Cynthia H. Cole. Pp.x + 377, illustrated. Year Book Publishers, Chicago, 1984. £14.50.

An handbook is essential for the busy paediatric house officer; I used this one for a month and found it invaluable. A section on diagnostic tests includes practical procedures from arterial sampling to peritoneal dialysis, and relevant tests for cardiac, endocrine and metabolic function. Throughout this and other sections of the book relevant and up to date references are given.

The formulary covers a very wide range of drugs, with relevant age group dosages as well as side effects, contraindications and emergency use. The generic and the American trade names are listed. Other useful lists include the use of digoxin, cytotoxics, and antiarrhythmics, plus use of drugs in renal failure and breastfeeding. The therapeutic data section was frequently used, with data on fluid and electrolyte treatment, and acute care of burns, poisoning, and neurological emergencies. For the neonatal officer the perinatal section includes fetal and gestational age assessment, premature growth charts and placement of umbilical vessel catheters. The reference data is crammed full of charts, figures and formulae. The