we are left behind even in subjects in which we were once competent. Nolan and colleagues have produced an informative, up to date, and evidence based guide to the management of common cardiac conditions. The book is concise, readable, well referenced, and makes good use of key points to emphasise important aspects of management. It provides clear "how to do it" guidelines that will educate the novice and reassure the mature.

Each chapter opens with a short background to the topic. I am sure I am not the only one who balks at the plethora of acronyms attached to cardiology trials. Even Snow White drew the line at seven. Here, TAMI, TIMI, GUSTO, GISSI, and the rest are summarised and a clear consensus offered. The chapters on arrhythmia management and post-infarct risk stratification and treatment are particularly good. The protocols for resuscitation follow those of the European Resuscitation Council with the helpful addition of suggestions to answer the question "360J, 360J, 360J, now what?" The advice on when to stop resuscitation attempts is welcome.

The book disappoints in one or two key areas: 2% to 4% of patients with an acute myocardial infarct are discharged from the accident and emergency (A&E) department. The book provides no pointers as to how to improve this and leaves out simple diagnostic aids such as chest pain protocols and multi-lead electrocardiograms. The newer cardiac markers are also not included. Door-to-needle time may be accelerated by the administration

of thrombolytic agents by A&E staff rather than waiting for review by busy junior medical doctors.

Overall, I would recommend this book to any junior physician looking after general medical patients and it has a place within the A&E department for those times when the cardiologists are slow to answer their pagers.

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Emergency Medicine: The Core Curriculum. Edited by Richard V Aghababian. (Pp 1490; \$138.) Lippincott-Raven, 1998. ISBN 0-316-00753-6.

This is a North American textbook of nearly 1500 pages structured around, and addressing, the core content for emergency medicine of the American College of Emergency Physicians.

Its principal aims are to provide a structured study text for trainees preparing for their higher examination, to provide a departmental reference to assist in acute management, to provide a resource for preparation of instruction material for medical students and junior staff, and to provide a list of key references to allow greater study. In all of these aims I believe it achieves its purpose well. It does this despite its layout.

It is very heavy on text and short on diagrams, flow charts, or indeed anything to interrupt the columns of text. As such it will not suit all learning styles, indeed it will probably only suit a minority of them. Of its expressed aims, therefore, I think that it is least successful as a study text.

The layout is not so problematic if the book is being used for a quick review of an individual subject or as a resource for preparation of teaching material. Despite this criticism of its layout, and while it certainly is a burdensome study tool, its content is overall very good although, understandably, North American in orientation. Each subsection of each chapter follows a similar consistent layout and each subsection is followed by the key references. The European literature is well represented in these reference lists.

My initial impression, based on the layout, was not favourable but in use I have come to value the text and commend it as a text that meets its own expressed aims, outlined above.

It is best as a quick review text and for preparation of teaching material but despite my reservations about its style I would commend it to any trainee studying for the Edinburgh Part B in Accident & Emergency or indeed for the FFAEM exit examination.

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