REVIEWS OF BOOKS & SOFTWARE

■ BOOK REVIEW

A Textbook of Family Medicine, 2nd edition. Ian McWhinney. Oxford University Press, New York, NY, 1997, 448 pp, $34.95. ISBN 0-19-511518.

Reading *A Textbook of Family Medicine* immediately brought to mind one particular lesson learned from a professor at my family medicine residency in Casper, Wyoming. Simply put, that lesson was to learn to think. Dr McWhinney makes this aim clear in his preface, indicating that the book is intended to define and conceptualize family medicine rather than to cover a field of knowledge exhaustively.

The first chapter reviews the origins of family medicine and conceptualizes family medicine by introducing philosophical discussions regarding the general practice of medicine, illness, and wellness.

The book moves on to more practical discussions of physician-patient communication and the process of diagnosis or "clinical method." These discussions are really lessons in how to think. The book moves on to review specific conditions in very broad terms, with the same emphasis on clinical reasoning. The book is intended to be read as a whole, rather than as a reference; it is not a *Merck Manual*, rather it is a thought-provoking volume intended to teach clinical reasoning.

A Textbook of Family Medicine is not written to be a quick and easy read. Instead it is a well-written and organized approach to the patient, individual illness, and public health. While it would be, I think, ideally suited to an upper-level medical student or resident, I think that a practicing family physician would find this book useful and inspiring, and a reminder of why we chose family medicine.

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■ SOFTWARE REVIEW

Patient Ed: Patient Education Management System, version 2.0, 1996-1997. Medifor Inc, 647 Washington Street, Port Townsend, Wash 98368; (360) 385-0722.

PRICE: $395 for non-networked computer and one provider. $195 for each additional provider. $195 annual license renewal fee per provider. Compatible with computer networks at additional cost.
HOW SUPPLIED: CD-ROM or set of diskettes.
HARDWARE REQUIREMENTS: IBM PC (or compatible) with a 486 66MHz microprocessor, 16-color VGA video driver, 8MB RAM, 60MB of free hard disk space, Microsoft Windows 3.x in 386 enhanced mode or Windows 95. For this review, *Patient Ed* was loaded on a non-networked IBM-compatible PC operating Windows 95, configured for a single provider.
CUSTOMER SUPPORT: Call (360) 385-0722 for free support 7:30 AM to 5:30 PM Monday through Friday, Pacific Time or through E-mail: techsupport@medifor.com. Support through the Internet is also available.
DEMONSTRATION DISK: No
MONEY-BACK GUARANTEE: No. 90-day limited warranty provided.
RATING: Good

Patient Ed is a program designed to produce medical instructions for ambulatory patients. The program guides the physician through templates that create both instruction forms and computer-generated prescriptions personalized for the patient's treatment.

Patient Ed installs easily from a CD-ROM and comes with a well-written, 134-page users' guide that uses nontechnical language. Once installed, the program loads quickly and displays the main *Patient Ed* window (Figure 1). The provider first enters the patient's name and chooses his or her own name from a drop down menu. There are 12 general medical categories represented in graphic form. The provider chooses the category that corresponds to the patient's diagnosis or reason for the visit. An Educare Template is then chosen from the subsequent screen. An Educare Template is a collection of instructions that includes details on medications and prescriptions, home care, precautions, follow-up (including referrals), illustrations, additional patient resources, common questions and answers, and an ICD-9 diagnosis and code.

There are hundreds of diagnoses and topics to choose from. If the depth of information supplied with the default Educare Templates is not satisfactory, additional information can be added by the provider. Well-adult and well-child topics are organized by age and sex; prenatal visits by trimester.

There were some templates I expected to find that were not available. For example, although there is a template for HIV screening, there is no template for AIDS. There are several templates for diarrhea, but none for vomiting as a lone symptom. Primary dysmenorrhea is covered, but endometriosis is not. In general, most diagnoses encountered in a primary care setting are available.

Figure 2 shows the type 2 diabetes template screen. The template can be customized by the provider into an instruction form specific to the needs of the particular patient. This is easily accomplished by choosing from multiple options with the mouse. For this patient, it is simple to create a 3-page handout with specific instructions and warnings for glyburide, metformin, and acarbose prescribed during this visit; precautions concerning hypo- and hyperglycemia; instructions on diet, alcohol, exercise, and weight; when and who to call for emergencies; when to return for a follow-up appointment; and common questions
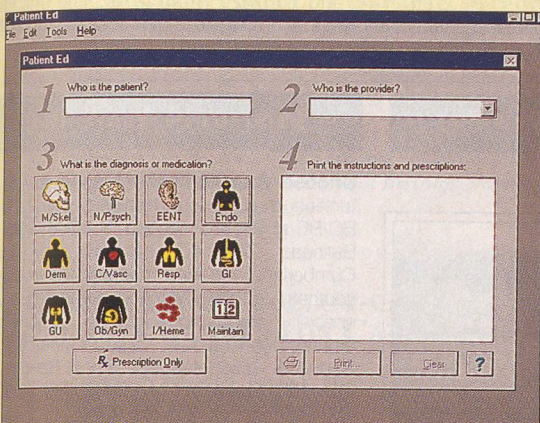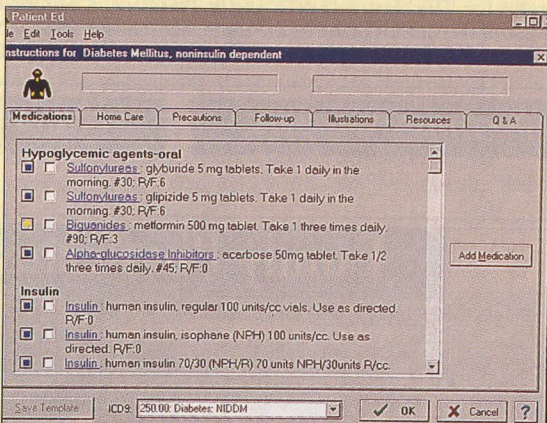
FIGURE 1

Screen showing the *Patient Ed* main screen.

FIGURE 2

Screen showing the type 2 diabetes template.

and answers. If the provider needs to make a referral, the name and address of the specialist and time and date of the appointment can also be printed. The program can be set so that only those specialists who participate in the patient's insurance plan are offered as choices.

The program's other major feature is prescription writing. This feature can be accessed from either an Educare Template or the main *Patient Ed* window. The provider chooses from an extensive database of drugs, both brand name and generic. Supplemental information on many of the drugs can be viewed by clicking color-coded buttons. Such information may include pregnancy warnings, drug interactions, precautions, or critical prescribing information. Using the Editor Program, these messages can be supplemented or customized. Although the medication database is extensive, it does not include complementary medications that some providers may use, such as melatonin or DHEA, or some of the commonly used antiretroviral medications, such as didanosine or stavudine.

When prescriptions are written from an Educare Template, the displayed medications are ones commonly used for the diagnosis. If the provider's favorite medication is not listed on the template, it is simple to add it and save the amended template for the next encounter.

A significant programming oversight involves the layout of the prescription form. The form, by default, includes the provider's DEA number on each prescription but not the provider's license number. State laws vary as to what information must be included on these forms.

For the provider who frequently uses illustrations, a nice database of commonly used anatomic drawings is available. Occasionally, all a provider needs is an illustration. Unfortunately, there is no straightforward way to print an illustration without also printing the instruction form. The program would be improved if the user had the ability to customize the layout of the prescription form.

I was most concerned about how my efficiency would be affected if I used the program during office hours. I was pleasantly surprised to find that my ability to stay on time was minimally affected. It was actually the slowness of my inkjet printer that limited my efficiency. My patients were impressed by the instruction form and especially by the legible computer-generated prescriptions. The forms gave us something concrete to focus on during my summation of their visit and review of discharge instructions. My PC was located just outside the examination room in a common hallway; a setup that left the PC vulnerable to tampering. A screen lockout would have been a welcome feature, but this option was not available.

Patient Ed is a useful tool for practices that value patient education, attractive handouts, and the ability to give the patient specific disease and medication information to take home. Having an extensive list of templates obviates the need to keep file cabinets of up-to-date preprinted material.

Prescription writing is quick, accurate, and legible. Patient acceptance is good. Although the initial customization of each instruction form from the Educare Template may take a little extra time, once the most commonly used templates are saved, the provider's efficiency should be minimally affected. For an office that is contemplating adding clinical computer applications, this program offers a straightforward and useful starting point.

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NOTE: *Patient Ed* version 2.1 was released in February 1998. It includes the Pediatrics module in the Primary Care system (rather than as a separate model) and more than one third of the original content has been updated and revised. Versions 3.x, with additional features, are scheduled for release in March and April of this year.