ISSN 1447-4999

BOOK REVIEW

Air & Surface Patient Transport: Principles & Practice 3rd Edition **Renee S. Holleran. Ed.**

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The book has an obvious American focus to the approach and content of the material. This is fine for the North American market but does not readily lend itself to use in the international market.

Many parts of the world have physician-based transport systems that change the roles and responsibilities of the paramedical and nursing crewmembers. On the whole, the book is useful for providing a basic introduction to the patient transport environment, however, because of the date that it was published – 2003 – it contains some areas that may depict knowledge and practices that are out of date. The pace of change within the medical community is rapid and the impact of evidenced-based practice is leading the way for most areas of patient management to undergo radical and frequent evaluations. As such, the majority of references in this publication (from the 1980s and 1990s) are no longer up to date with current practice in the air and surface patient transport environment.

Unit 1

- Good general introduction to the history and current roles (2003) of the members of the transport team
- Speaks of members, such as respiratory therapists, that don't exist outside of North America

Unit 2

- Good basic introduction to gas laws and challenges of air transport
- The remaining topics are adequately covered but again show the American orientation of the content with the use of terminology that may not be understood by those in other countries

Units 3, 4, 5, 6, 7

- Many of the patient care principles illustrated are still current today, however, some of the procedures depicted have either been discontinued or their efficacy has been challenged.
- There could be a problem with students or novice practitioners utilizing this information to guide their patient care practices

Unit 8

- Again, very US oriented
- Many of the supporting references are 15 to 20 years old and may not be relevant today

Unit 9

- The unit on stress and particularly, the section on critical incident stress and its management should be completely removed from the book
- The principles and practices depicted in the section have been completely repudiated and have been found to be ineffective and harmful

While I would not recommend using the entire book for use in training and education programs for paramedics or nurses, a majority of the chapters could be used in isolation. As the book is very USA centred, it does not lend itself to use outside of North America. More importantly, much of the information is outdated and in certain circumstances, harmful.

Publication Details

Air & Surface Patient Transport: Principles & Practice 3rdEd,

Edited by Renee S. Holleran, Mosby 2003

ISBN: 9780323017015

RRP (inc. GST) \$AUD180.00

Available from:

Elsevier Australia

Phone: 02 9517 8999

Website: www.elsevier.com.au