BOOK REVIEW


Cardiopulmonary Perfusion is an introductory text conceived by the Perfusion Technology Section at the Texas Medical Center and covers a gamut of technical aspects of open heart surgery. Reed’s book is recommended to professionals with a few provisions.

In reading Cardiopulmonary Perfusion other texts should be referred to for further clarity or in pursuit of more detail (only 3 of the 27 chapters in Reed’s book are referenced). Most of the formulas presented in the text are simplified and units of measure are not included. For example, in the Chapter “Flow-Pressure Resistance”, viscosity and length are dropped from Pouiseulle’s equation.

The 27 chapters of Reed and Clark’s text (some of which have been published in the AmSECT Journal previously, e.g. “Hemostasis”, which won the 1975 Polystan Award, “Particulate Contamination in the Bubble Oxygenator” and “Flow-Pressure Resistance”) can basically be divided into four sections: Anatomy (Chapters I through 3), Physiology and Pathology (Chapters 4 through 15), Pharmacology (Chapters 16 and 17) and Perfusion Technology (Chapters 18 through 27). Mastering Reed’s text probably would be necessary preparation for the certification exam.

The chapters on Perfusion Technology treat the “adequacy of perfusion” in four pages; after the recent national meeting it appears that perfusion adequacy is going to be a highly reviewed and researched topic this coming year. Most perfusionists would probably have liked to see more of “how it is done at Texas Heart Institute” in the book.

Cardiopulmonary Perfusion comes at an opportune time with the increasing emphasis on and identification of the perfusionist’s responsibilities in the health care system. Professional certification and recertification are a reality and have been defined by the American Board of Cardiopulmonary Perfusion Technology. Continuing education and self-education are going to be the major thrusts of AmSECT in the coming year. Cardiopulmonary Perfusion is a significant contribution to the education of perfusionists and an aid in preparation for certification. Reed and Clark’s book merits reading by other health professionals (physicians, nurses, lab technicians) involved in the care of the open-heart patient.

Keeping the previous points in mind, Cardiopulmonary Perfusion can be a useful tool to the perfusionist and belongs on his bookshelf beside Galletti’s Heart-Lung Bypass and Nose’s The Oxygenator.

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