Media and Book Reviews

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INTRODUCTION: TAKING THE DIGITAL PLUNGE

When I was a medical student, residents would often say—always with an air of confidentiality—“trust me, you’ll need it.” Then they would reveal a must-have medical book tucked into the pocket of their white coat. Even back then I shuddered at the idea of carrying all those books. There were so many of them! Even less did I want to use a magnifying glass to read the 2-point font such books typically employ. More than anything, I did not want to waste time searching for information. I wanted it ready at a moment’s notice.

Many physicians today are blending smartphones, PDAs, laptops, tablets, and e-readers with their clinical practice. Some of us have been doing this from the beginning of our careers, others are just now wondering what the fuss is all about, and some Luddites are stubbornly holding out (though today this requires a conscious decision).

So what is all the fuss about? Yes, font sizes are adjustable, 100 textbooks do fit in a shirt pocket, and information is indexed and searchable in seconds. Every day since I was a medical student, I have had at my fingertips a complete dictionary (Stedman’s), a drug reference (I started with Epocrates), a couple of internist manuals (Pocket Medicine: The MGH Handbook of Internal Medicine and Harrison’s Manual of Medicine), and a pediatric reference (Harriet Lane Handbook). I realized early on that my electronic reference library represented a different way of doing things because most people at that time were still squinting at tiny printed pages or waiting until after rounds to look for answers to questions that had arisen. And I still work with many attendings who do not use any portable electronic reference device. Often I was the only one who could find answers to clinical questions on the spot, and they were updated answers.

But that’s old news. The fuss, the one worth talking about, is that not too long ago, the game changed. It changed in 3 ways. First, there is new content. Before we were just putting books into our pockets and then into our PDAs. Now we collect “media” rather than books, and this might include a blend of text, video, audio, Web links, computations, or interactive software. This broader definition puts a wider range of useful tools at our disposal. As a medical student, my PDA held a series of high-quality audio clips demonstrating the different cardiac and pulmonary sounds (provided on an audio CD by Littman with my stethoscope). When I thought I was hearing something abnormal, I would open my PDA and listen to an example, to see if there was a match. As an intern I had an iPhone app (Afib Educator) that played a short video demonstrating for patients what atrial fibrillation looked like on a 3-dimensional heart. Now I keep handy a medical calculator (MedCalc) for things like corrected phenytoin levels, creatinine clearance, and NIH Stroke Scale score. I also keep handy an app for interpreting arterial blood gases (Acid Plus).

The second change is that of timing. Staying up to the minute is not only possible but is now expected, and many media offer users the option to auto-update. Drug index apps (Epocrates, mobileMicromedex, Medscape, mobilePDR) do this routinely. I have a fun little app called Eponyms that currently has more than 1,700 entries of common and obscure medical eponyms (Have you heard of Gonda’s maneuver?) that get updated regularly and automatically. Such systems permit physicians instant access to the same information previously found only in the hands of experts.

Finally, the context of the game has changed. It used to be that pocket textbooks served as reminders of facts already known to the owner. It is no longer possible to be the renaissance physician. There are too many details, and the details are constantly changing. Today the goal is to have access to, sometimes for the first time ever, the most updated expert opinions on various subjects. My favorite example is Mediscape, a free product available online and as an app. Mediscape is continuously updated with peer-reviewed articles on seemingly everything. Whenever we have a clinical question on rounds that is outside the knowledge set of the team, my first move is to check Mediscape. Invariably I find something rele-
vant. Many physicians now routinely use the online resource *UpToDate*, which is a subscription service with a similar aim. Thus, because of content, chronology, and context, we have moved beyond merely collecting books to continuously exchanging ideas based on the latest (and hopefully highest quality) available research, and putting those ideas into clinical practice.

We will be changing the name of the Book Reviews section to Media and Book Reviews. This change reflects the paradigm shift that has already happened out there—medical knowledge now comes in all kinds of wrappings. If you are one of the Luddites out there holding on to your printed textbooks in your white coat pocket, it’s time to get an app-capable device. Trust me, you’ll need it.

Disclosure: Dr. Goldenholz serves on the editorial team for the Neurology® Resident & Fellow Section.

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Media and Book Reviews: Introduction: Taking the digital plunge
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