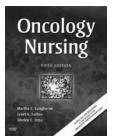
Gerald Bennett, PhD, APRN, FAAN **Associate Editor** 

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Oncology Nursing (5th ed.). M.E. Langhorne\*, J.S. Fulton\*, and S.E. Otto\*. St. Louis: Mosby, 2007, 792 pages, \$75.

ØØ Softcover



Oncology Nursing offers basic oncology information to an audience that includes students, experienced nurses, novice nurses, and other healthcare professionals. The book is updated with the

fifth edition and provides evidence-based practice throughout, as appropriate. A section on geriatric considerations is included in each chapter. In addition, each chapter concludes with a case study and 10 review questions.

Information printed in every textbook is outdated at the time of publication; however, the fifth edition of Oncology Nursing is up to date and addresses the clinical aspects of cancer diagnosis (pathophysiology, genetics, epidemiology, prevention, diagnosis, and staging), the major cancers (e.g., breast, colorectal, lung, pediatric), treatment (e.g., chemotherapy), supportive therapies (e.g., nutrition, psychosocial care, patient education), and symptom management (e.g., fatigue, dyspnea, pain).

In general, Oncology Nursing is well written and gives accurate information. The technical quality of the illustrations and tables in each chapter are appropriate for healthcare professionals. Chapter 2 covers the genetic basis of cancer and gives a concise overview of this sometimes confusing

topic. The chapters on chemotherapy and biotherapy are useful in that they provide a broad overview of the major categories of form) of some of the tools used to measure this patient outcome.

Oncology Nursing has several limitations. It provides little information on complementary and alternative medicine, which is used by a significant proportion of patients with cancer. A chapter devoted to this topic would be helpful for nurses and other healthcare professionals caring for these patients. The questions provided at the end of each chapter are a good way to help nurses test their knowledge of the information that they have read. One of the stated reasons for including the questions at the end of each chapter was to help nurses review for the oncology certification examination. However, most of the questions target the lowest level of the cognitive domain (i.e., recalling information). Although these questions are adequate for testing basic knowledge, they do not challenge the reader to analyze, synthesize, or evaluate important information covered in each chapter. The readers would be well served if higher-level questions were provided in new editions of the book.

Oncology Nursing is published in soft cover and printed in black and white. All illustrations and photos are reproduced in black and white. This makes for a moderately priced and well-written book that is affordable to nursing students and healthcare professionals.

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What Do I Say? Talking With Patients About Spirituality. Elizabeth Johnston Taylor\*. Philadelphia: Templeton Foundation Press, 2007, 151 pages, \$23.96 (paperback and DVD).

ØØ Softcover



What Do I Say? is an interactive workbook and DVD that suggest ways of communicating with patients about spirituality. Oncology nurses frequently are faced with difficult questions such as, "Am I going to die?" In this

book, Elizabeth Johnston Taylor provides a practice ground for framing reflective and helpful answers to these queries.

"Spirituality at its core is relational" and so is nursing. As patients confront their loss of power and mortality, they often have a growing need to feel value, purpose, and meaning in their lives. Healthcare providers are key targets for these discussions and should be prepared to have beneficial, not detrimental, communications with

What Do I Say? is a useful resource for nurses, physicians, allied health professionals, social workers, and clergy. It addresses how to form healing verbal responses to patients' expressions of spiritual distress and informs readers that "the goal of healing, ultimately, is to assist persons to experience existence more fully; to die living, rather than to live dying."

Religious language is throughout the workbook but is distinctly universal and can be applied easily to those of all faiths. It focuses on being a good listener and does not provide a set description or specific answer based on religious bias. Readers are encouraged to reflect patients' spiritual needs, not their own.

In keeping with being able to identify patients' needs, healthcare professionals must have a sense and awareness of their own spiritual boundaries and attitudes. Taylor dedicates the second chapter of the workbook to helping readers identify their own spiritual pains and strengths. Through

Ease of Reference and Usability **Content Level** Media Size Y Pocket size Quick, on-the-spot resource √ Basic 'Y' Intermediate Moderate time requirement  $\sqrt{\sqrt{}}$  Intermediate Desk reference Advanced and complex, pre-OOO In-depth study requisite reading required

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these agents without going into detail about specific drugs. Because some nurses do not give chemotherapy on a routine basis, the information on safe handling of chemotherapy provided general guidelines for practitioners. The chapter on functional status is timely and provides a nice evaluative overview (in table

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