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## **Review of: Medical Response to Terrorism: Preparedness and Clinical Practice, Daniel Keyes ed., 2005**

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Medical Response to Terrorism was written to provide “expert guidance for preparing and responding to terrorist events,” and it largely succeeds. Gathering some of the world’s experts on the medical response to terrorism, this book is a comprehensive and clearly organized resource for those in the medical profession who need to be prepared for the effects of a terrorist attack.

The first part of the book is dedicated to describing the agents most likely to be used by terrorists, and is divided into sections for chemical, biological, biochemical, nuclear, and explosive agents. Each chapter begins with a brief historical overview of the agent in question, an overview of the physiologic effects of the agent, descriptions of the signs and symptoms caused by the agent, and finally the diagnosis, triage and management of exposure. Appropriate personal protection is discussed as necessary. Each chapter concludes with a brief summary and questions and answers.

The second part of the book focuses on preparedness, and is divided into sections for planning, equipment, communications, training, operations, and special considerations. The structure of the chapters in the second half of the book is more variable than in the first half, but such variation is appropriate, as the subject matter does not lend itself to uniformity.

This book suffers from the same problems as any other book on terrorism preparedness. Namely, it is impossible to predict what form a terrorist attack may assume. Emergency physicians are faced with the challenge of studying a vast number of chemical,

biological, and nuclear agents with the hope of remembering the key points of diagnosis and treatment at the time of a terrorist attack. Alternatively, physicians can prepare for a limited number of agents in the hope that a terrorist attack will utilize one of those agents. *Medical Response to Terrorism* addresses this problem by covering a large number of agents in brief while focusing entire chapters on those expected to be used in a terrorist attack.

Furthermore, those agents thought most likely to be used in a terrorist attack are not likely to be familiar to the average emergency physician. The book addresses this problem by including a brief summary of each agent in an easy-to-locate box at the end of the chapter.

The second half of the book has by far the more difficult challenge. The discussion of preparedness must walk the line between vague generalities and lists of necessary equipment. Vague generalities do not tend to give enough information to assist in preparedness, but rather tend to offer platitudes that amount to “you should be prepared.” Equipment lists are also limited in that they cannot always be generalized to your situation. This book walks the line, explaining the needs of preparation with sufficient detail to assist preparedness without resorting to dictating details.

This book succeeds in its goal of being a resource for emergency physicians. As a text, it serves as a good introduction to terrorism preparedness. As a reference text, it is clearly organized and complete enough to merit a place on any emergency department’s bookshelf.

If I had one suggestion to make to the editors of this book, it would be to include a pocket guide or a PDA version for easy reference. The clarity and organization of this book would lend themselves to a quick reference guide.

In summary, *Medical Response to Terrorism* is a good introduction to terrorism preparedness and an excellent reference guide to nuclear, biological, and chemical agents of terrorism. It is not a comprehensive guide and will not make you an expert in terrorism preparedness, but is a good starting point for emergency physicians wishing to be prepared.