by the general psychiatrist. They explain the various positions of agency that often must be taken and unapologetically support the clinician in his or her tasks.

I should have liked a more complete discussion of some topics, such as guilty-but-mentally-ill verdicts and the controversy over pre-arraignment evaluations. Some others were more notably absent, for example correctional psychiatry and the work of the psychiatrist who is an employee of some police agency. Another point of mild concern, perhaps only to this reviewer, was an irritating, random use of both male and female "universal" pronouns from paragraph to paragraph. The universal "masculine," or at least the common (although unwieldy) "his/her," would have been preferable and correct.

It may be impossible to write a basic text that is equally useful to general psychiatrists, clinical trainees, and attorneys. While this is a stated purpose of *Clinical Handbook of Psychiatry and the Law*, I suspect its best use will be for the general psychiatrist or resident. When it is good it is very, very good; when it is not it is thought provoking.


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*Bioethics — A Guide to Information Sources* and *Dictionary of Medical Ethics* represent two among the many current resource texts available to meet health professionals' and educators' demands for immediate, condensed, accurate information about bioethics. *Bioethics — A Guide to Information Sources* is an annotated bibliography covering approximately 1,000 articles and documents in bioethics. The resources of the Bioethics Library of the Kennedy Institute were used to compile the guide to articles dating from 1973 to 1980. The *Dictionary of Medical Ethics* lists by topic alphabetically a wide variety of bioethical issues, cases, decisions, and procedures that may potentially concern the health care professional. For each entry a brief review and description of the problem is given by an expert in the appropriate field. Among the topics covered in both books are such current issues as codes of ethics, the professional-patient relationship,
reproductive technologies, genetic intervention, abortion, research involving human subjects, informed consent, behavior control, organ transplants, death, and dying.

Both books are highly condensed and offer easy access to information that otherwise might be obtained only by plowing through innumerable volumes of the Index Medicus. However, what is gained in terms of time may be sacrificed in comprehension. Neither an annotation nor a short essay can successfully address the moral complexities of various issues and articles. In addition, medical judgment is often confused with ethical judgment as, for example, in this selection from the entry on contraception in Dictionary of Medical Ethics: "The use of the contraceptive pill is associated with an increased incidence of thromboembolic disorder...however the risk is very small and...it is generally regarded as acceptable." (Italics by reviewer) Both texts would be of value in putting together a comprehensive bibliography for a scholarly article. Either would be of limited value in helping one come to some specific resolution of an ethical problem.

Bioethics - A Guide to Information Sources will be a good addition to the hospital or institution's library. Since it is expensive, it is more likely that libraries (rather than individuals) will continue to invest in the updated editions that will undoubtedly be published in years to come. Dictionary of Medical Ethics may be a more valuable resource text for the individual, but caution must be taken not to assume that it represents definitive medical or ethical judgment on the part of the various authors.