

B O O K S

Oncology Patient Education Resource Manual (2nd ed.). Sara Nell Di Lima, Theresa W. Gillespie* (Eds.). Gaithersburg, MD: Aspen Publishers, 2001, 508 pages, \$209.

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The *Oncology Patient Education Resource Manual* is intended to assist nurses in meeting many of the educational needs of patients with cancer and the public. The manual is bound in a three-ring binder and

includes teaching and documentation tracking tools, which can be removed from the binder and copied for patient use. The 10 chapters in the manual are titled Effective Patient Education, Cancer Prevention and Self-Care, Diagnostic Procedures, Cancer by Body Site, Treatment Options, Side Effects of Treatment, Nutrition and the Cancer Patient, Pain Management, Psychological Issues, and Hospice. A list of resources is provided in the appendix. A major advantage of this manual is that it provides much of its information in a low literacy format (i.e., third- and sixth-grade reading levels), as well as in Spanish, to assist in meeting the needs of diverse populations and Joint Commission on Accreditation of Healthcare Organizations standards. The low literacy and Spanish information is available on a CD-ROM for easy printing or modification, such as adding a facility's logo.

In regard to content, the first chapter provides valuable information about the principles of patient education for healthcare professionals. The teaching tools in the specific cancer chapter contain basic, easy-to-understand information; however, some tools, such as gene testing and clinical trials, are quite complex. Useful teaching tools are those about decision making with advance directives, hospice, insur-

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ance issues, diets, gastrointestinal symptom management, noninvasive treatments for pain, and talking with physicians. In the chapter about treatment side effects, the information about chemotherapy is not drug-specific and must be supplemented with additional printed information. Limitations include incomplete information about side effects, conflicting data about screening recommendations, and likely differing opinions as to when to call physicians.

The layout of some of the teaching tools are enhanced with graphics (although terms are not always defined) and bold headings. However, many could benefit with more "white space" and by using shorter sentences and paragraphs and bullets more often for emphasis.

The *Oncology Patient Education Resource Manual* contains an extensive variety of cancer-related information with varying degrees of comprehensiveness. Much of the information in this manual currently is available from other sources, such as the National Cancer Institute, for no or a minimal cost. Hopefully, future editions will add all of the information in the manual to the CD-ROM, not just the low literacy and Spanish teaching tools. This would allow for easier use and transport, as well as easier editing and modifying, compared to the large manual format.

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From Silence to Voice: What Nurses Know and Must Communicate to the Public.

Bernice Buresh, Suzanne Gordon. Ottawa, Canada: Canadian Nurses Association, 2000, 294 pages, \$29.95.

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From Silence to Voice: What Nurses Know and Must Communicate to the Public was written to teach nurses about the power of voice and presence in the media for advancing nursing views, knowledge, and pa-

tient care issues from a nursing point of view. The authors masterfully crafted a guide that is easy to read and details the power of communication and media relations to public voice. This book is intended for all nurses, and although it is not gender-biased, it is a good resource for women who lack the confidence to speak about their beliefs. The authors emphasize that the effectiveness of communication depends largely on writing and speaking skills. They structure the book from general to specific information and discuss barriers, opportunities, and the power of effective voice. This is a captivating resource.

The strength of this publication is in its language. *From Silence to Voice* is replete with everyday examples of why nurses have not historically had a voice or have been largely ignored for substantive review in the media about key healthcare issues. Written as a step-by-step, comprehensive guide, nurses can be empowered to voice their concerns through the written and spoken word using multimedia sources. This is accomplished through a progression of chapters packed with information presented for nurses' use, such as text sources, tables, case studies, and sample letters to illustrate and reinforce the content and learning. This resource is excellent in preparing for media interviews and promoting nursing issues and is a must for every nurse's reading list. The authors draw on their journalism and media experience to capture the real essence of the power of each nurse's voice when relating the value and worth of the nursing profession to the public and other professionals.

No limitations were found in *From Silence to Voice*, and no suggestions for its improvement can be made. An equivalent publication devoted to empowering nurses to end their public and professional silence does not exist. Who can tell the story of nurses better than nurses? This is a timely resource, especially now, considering the challenges nurses currently are facing relative to workforce demands.

From Silence to Voice is well written, proactive, provocative, powerful, and insightful. This text is highly recommended to all nurses and nursing students.

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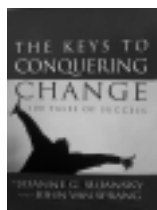
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Keys to Conquering Change: 100 Tales of Success. Joanne G. Sujansky, John Van Sprang. Pittsburgh, PA: KEYGroup, 2001, 269 pages, \$19.95.



Softcover



The *Keys to Conquering Change: 100 Tales of Success* will enable readers to master the skills needed to cope with change. The authors propose that one way to approach managing change is by learning from the experiences of others; therefore, the authors interviewed 100 people and included their stories to illustrate specific points about the change process. Helpful tools or exercises are included after each chapter. The book is divided into eight chapters: Facing Up to Change, The Other Side of Change, Responding to Change, The Power of Attitude, Partnering to Change, The Magic of Coaching, Navigating Through Change, and Making the Most of Change.

This timely publication achieves its stated purpose by providing readers with the tools to help learn how to deal more effectively with change through examples and analysis of their experiences. Although the content is not focused on health care or oncology nursing, the discussion of each of the steps of the change process (i.e., getting ready, navigating, and making the most of it) can be applied readily to most of the work situations oncology nurses face. In addition, the book can help readers to cope with personal changes as several examples are provided about individuals dealing with various life crises.

The book's intended audience includes anyone anticipating change, which includes everyone. The book is casual in its style without excessive use of jargon. The *Keys to Conquering Change* is a relatively easy read unless readers complete all of its exercises.

The strengths of this publication are its readable style and the pertinence of the examples to real life. A personal favorite was the chapter on

"The Power of Attitude" in which the authors categorize individuals regarding their response to change based on what they are *able to do* and what they are *willing to do*. This is a very useful distinction, and the chapter describes the "can and will," "can and won't," "can't and will," and "can't and won't" people everyone has dealt with. But, beyond putting people into these categories, the authors offer tips on coping with attitudes, specifically how to support the "can's" and how to motivate, educate, or curtail the "won'ts."

The *Keys to Conquering Change* offers assessment exercises and action plans that would be most useful for nurse managers, staff nurses, and administrators who work in individual or group settings and deal with nursing shortages. Although this publication does not reveal new information about change, the organization, exercises, and examples provide framework that nurses may use to bring about beneficial change in the current healthcare environment.

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V I D E O

Alicethenics: Exercises to Increase Freedom of Movement After Breast Surgery.

Alice Saland, producer and writer. 2000, 30 minutes, \$19.95 + \$5 shipping and handling. Video can be ordered by calling 505-466-8949 or 888-679-4455 or e-mailing Alicethenics@aol.com.



Alicethenics is a program of exercises for women who have had breast surgery. In her opening introduction, the creator of the exercise program, Alice Saland, performs graceful movements in a peaceful outdoor setting, accompanied

by soothing original music, while discussing her motivation to make the video. She is a cer-

tified personal trainer who was diagnosed with breast cancer on her 57th birthday and "couldn't lift her arm to put on a t-shirt" following a lumpectomy and axillary node dissection in 1999. Using her experience as a former fitness columnist, she consulted with a variety of healthcare professionals, physicians, and occupational, physical, and massage therapists to develop movements designed to increase flexibility, range of motion, and lymphatic flow through a gentle total body workout, paying particular attention to the upper body. Her experience using these exercises in a weekly movement class in a hospital in Santa Fe, NM, was so successful that she decided to produce this video for a broader audience of women who are recovering from breast and axillary surgery.

The 30-minute video is presented in sections in a logical sequence, beginning with gentle warm-up movements and progressing through workout, chair exercises, and mat (i.e., floor) exercises and ending with a brief meditation and visualization. The exercises are designed to create a gentle stretch and stimulate circulation with the main focus on the upper body. Viewers frequently are reminded to do only as much as they feel able. A strong spiritual component to the video is enhanced by Saland's supportive presence, the outdoor setting, soothing background music, and the final calming meditation. The video conveys an overall feeling of serenity.

I viewed this video with several women in a breast cancer support group that I facilitate, and we all had a positive impression. Although I thought the introduction was too lengthy, I was in the minority. The group members did the exercises along with the video and found them helpful and easy to follow. We all thought that *Alicethenics* would be a useful component in ongoing postoperative rehabilitation following breast surgery.

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