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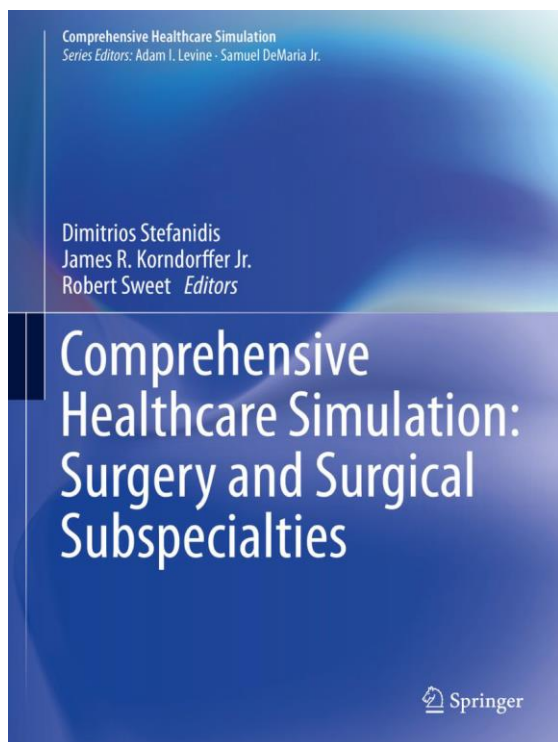
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### Book Review

**Comprehensive Healthcare Simulation: Surgery and Surgical Subspecialties, by  
Dimitrios Stefanidis, James R. Korndorffer Jr., Robert Sweet (Eds.),**

**Publisher: Springer Nature, Year 2019, 401 pages**

**Format: PDF and EPUB: ISBN 978-3-319-98276-2; Softcover: ISBN 978-3-319-98275-5**



Rarely is one granted the indulgence of reading a book from cover to cover across the length of one lifelong day. Early one morning on COVID-19 lockdown, I chose to read 'Comprehensive Healthcare Simulation: Surgery and Surgical Subspecialties' and it was late night when I reached the end, pleasantly fatigued and substantively wiser. I offer this trivia not in extenuation of this review, but merely to state that I found the book both remarkably readable and deeply engrossing.

The publisher's blurb surprisingly deprecates the book as a 'practical guide for the use of simulation in surgery and surgical subspecialties', despite it being so, so much more. The book comprises 31 chapters spread across 400 pages with 200 illustrations, mostly in colour. Sixteen of these chapters are specific to the surgical subspecialties – ophthalmology, plastic surgery, obstetrics and gynaecology, cardiothoracic surgery, urology etc. as

expected, but also robotic, endoscopic, bariatric and minimal access surgery as well as critical care and transplant surgery. (Neurosurgery and anaesthesiology are covered in companion volumes). Despite their specificity, each of these chapters bears lessons of wider interest and the introspective scholar of simulation would do well to learn how his colleagues across the floor do things.

A full fifteen chapters cover fundamental and ancillary subjects such as training, assessment, optimization, logistics, equipment, remediation etc., even funding and centre design. To give you a perspective on both the breadth and depth of coverage, the index extends from *Accreditation* and *Absence from surgical practice* to *Zone of proximal development* and *Z-plasty simulator*. One serendipitous chapter is devoted to taxonomy; not only does a precise lexicon assure us, the readers, that the authors are all speaking the same language, it also ensures that our understanding is not bogged down by prior misconceptions. In addition, there is an exhaustive evaluation of simulation in high-stakes assessment; while we may not agree with some of the contentions, the arguments are lucid, cogent and compelling. The section on non-technical skills includes chapters on feedback and debriefing, teamwork and the psychology of simulation. The short concluding section summarises future trends while upholding the tenet that weaves fugue-like throughout the book; in the words of Dr Ajit Sachdeva, Director of Education, American College of Surgeons, "It's about the curriculum, not the simulator".

This book is one of a series 'Comprehensive Healthcare Simulation' comprising a number of volumes dedicated not only to simulation in the major specialties but also to interdisciplinary areas such as standardized patient methodology, interprofessional team training, mastery learning etc. Having merely riffled through a couple of these

at a colleague's desk earlier, I approached this volume on Surgery and Surgical Subspecialties with some trepidation, prepared to accept the informational voids that beset such encyclopaedic series if one is limited to a single volume. Rest assured that this book is complete in itself. Indeed, I will go further to say that there is no unnecessary overlap of material among the various sections and chapters, a feat of diplomatic coordination when the contributors are all leaders in their fields. The editors, gurus themselves, have ensured that the various chapters fall together neatly and mesh well into a remarkably readable, though no less comprehensive, synopsis of the subject as it stands today. This is not to say that the multiplicity of authors' voices is suppressed by some overarching

'house-style'. The changes in tone from one chapter to the next, the variations in narrative, the differing arguments— from statistical to subjective to apocryphal – all make for riveting reading.

Of course, I realize that the gestalt of this multi-sourced eclectic book may only be appreciated by the random reader who peruses it at a stretch, as I did. I do not advise reading this book the way one would read a Booker nomination, but I aver that it can be done. And that it can be as rewarding.

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