



## Algoritmos en el Posoperatorio de Cirugía Cardiovascular (Algorithms in Postoperative Cardiac Surgery)

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### A NEW TOOL IN THE FIELD OF CRITICAL CARDIOLOGY

In recent years, the concepts of Coronary Care Unit and of Cardiac Recovery Unit as separated academic and medical areas have changed into a single scenario, that of critical cardiology. This academic and medical syncretism imposes the review of medical structures and educational and training programs for future generations of cardiologists. These conceptual and operational changes create the need for new academic structures and educational tools designed for the comprehensive training of the physician specialized in critical cardiology.

"*Algorithms in Postoperative Cardiac Surgery*" is a text designed in tune with this comprehensive approach when addressing the acute cardiac patient. The publication of these contributions is uncommon in our field, particularly in cardiology; therefore the effort of its author and the accompanying professionals is highly valuable.

This book can be analyzed as a medical or a pedagogical tool.

From the medical point of view, it is an agile and easily readable text for the medical professional or tutored physician, as well as a valuable operative resource. The book focuses particularly on the algorithmic diagnostic processes in a dynamic and clear style outlining the therapeutic approach for each circumstance. Strategically, the conceptual axis used by the authors is a series of

questions that, in practice, all cardiologists have asked themselves at the bedside of a critical patient. Thus, the reader focuses on the core of the problem to be solved. On future issues, some aspects of drug therapy and mechanical circulatory support will certainly be developed.

From the pedagogical point of view, the work is based on clearly and didactically organized procedural contents, and a quick access through appealing and easily understandable diagrams.

Some interesting and novel aptitudinal contents should be emphasized, as in the chapter dealing with reporting bad news in the critical care unit.

The conceptual contents are hardly put forward; a logical situation in a text on algorithms in which pathophysiological disquisitions should be concise and focused on therapeutic decisions.

This is not a text for theoretical learning but a very well-designed operative tool and a very interesting supervised training guideline on critical care for cardiologists.

In my opinion, it is a balanced work that achieves the stated goals. I congratulate the authors, and particularly Dr. Mariano Benzadón.

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