stages (which must include bovine serum albumin) helps to reduce background staining.

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- 1 Furness PN, Boyd S. Electron microscopy and immunocytochemistry in the assessment of renal biopsy specimens: actual and optimal practice. *J Clin Pathol* 1996;49:233-7.
- 2 Kalra PA, Coward RA, Aguirreburualde M, Howat AJ. An audit of immunoperoxidase versus immunofluorescence in the detection of immune deposits in renal biopsies. *J Pathol* 1996;178:44A.

Microbiology user satisfaction survey

We were pleased to read the study carried out by Dr Morgan to ascertain the views of her laboratory users in Exeter.¹ We performed an almost identical survey in May 1995. A carefully designed user-friendly questionnaire was administered to all the junior medical staff in our hospital who were members of clinical teams that use our services regularly. Staff in specialties that used our services infrequently, such as anaesthetics, radiology, psychiatry, and biochemistry, were not included. In total, 120 questionnaires were sent out. As in Dr Morgan's study, our questionnaire sought views on turnaround times, quality of reports, accessibility to and quality of microbiological consultations during normal working hours and "on-call", present and future requirements from the service and lastly, the infection control service. Completed questionnaires were made anonymous to ensure genuine replies. The response rate was 54% and nearly all the questionnaires were suitable for analysis.

It was rewarding that the overall appreciation of the quality of microbiology laboratory services offered was good. This included the majority of staff being more than satisfied with the accessibility to and quality of consultations (81% and 87%, respectively), turnaround times for results (77%), the comprehensiveness of technical results (86%), and amount and quality of clinical guidance/interpretation (75% and 84%, respectively) contained in our laboratory reports. Both access to authorised results and the facility for requesting investigations via ward-based computer terminals (in that order of priority) were identified as areas for further development. A hospital-wide development of information technology has been in progress and will fulfil those needs in the very near future. It was important to be reminded that our constant clinical profile at ward level is much valued. The infection control service received a satisfactory score from the majority of its users.

We believe that this survey was a useful exercise in allowing us to establish a base-line from which changes can be made. It has enabled us to examine users' needs closely, identify areas of work that are performed well, plan ahead to improve specific aspects of the service, and reassess our position in the near future. In the present market orientated health service environment, the beneficial effects of positive feedback on all laboratory staff from such a study in terms of boosting morale and encouragement should not be

underestimated. Also, re-auditing after a period of time and implementing changes is very important if the full benefits from this exercise are to be enjoyed. We would recommend this practice to other laboratories.

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- 1 Morgan MS. Perceptions of a medical microbiology service: a survey of laboratory users. *J Clin Pathol* 1995;48:915-18.

Dr Morgan comments:

I was glad to find that Drs Lee and Holliman found similar results in the audit that they did of the views of hospital doctors, and that microbiologists with a high clinical profile are in demand from clinicians. Despite being extremely active clinically at Exeter I was most surprised that even more clinical involvement was requested, a demand that resulted immediately in a microbiologist attending five designated ward rounds in three additional specialties per week.

The extra dimensions of quality that results from the 24 hour input of a medical microbiologist on site were regarded as essential by our customers. We are now capitalising upon this in competition with the private sector for our fund holding contracts.

Unlike Drs Lee and Holliman, however, I found that the fact that only 8.5% of my respondents chose to remain anonymous was particularly helpful, allowing me to discuss controversial points raised directly and clear up some fundamental misconceptions. An example of the latter was the apparent omission of the laboratory to report locorten and sofradex sensitivities in isolates from ear swabs.

Infection control issues were addressed in my survey too and the survey was similarly highly rated by both hospital doctors and general practitioners.

Finally, as Drs Lee and Holliman noted, completion of the audit loop after improvements have been carried out is essential. Indeed, a follow up audit is in progress with an 83% response rate to date. A preliminary analysis shows the quality of service has indeed been recognised as "improved" by 89% of the respondents to date. Two, who felt that there was "no improvement", had actually given us a score of 10 out of 10 ("could not be better").

Such wonderfully positive feedback from customers can boost staff morale considerably and indeed has done so.

terCard, Visa or American Express) stating card number, expiry date, and full name. (The price and availability are occasionally subject to revision by the Publishers.)

MCQ's in Clinical Pathology. Bint AJ, Burt AD, Laker MF, Reid MM. (Pp 202; £8.95.) WB Saunders. 1995. ISBN 0-7020-1782-5.

MCQ's enable knowledge of a wide range of topics to be assessed consistently and rapidly. Many collections of MCQ's have been published but those dealing with pathology usually cover only one of its disciplines. A valuable feature of this book, the authors of which are all connected with the Newcastle Medical School, is that it embraces topics from all the major pathology specialties.

This book should enable undergraduates to identify gaps in their knowledge and understanding of pathology, and to obtain practice at responding to MCQ's. Being clinically orientated, it could also be useful to postgraduate students studying for the MRCP and FRCS. The first 76 pages contain 300 questions, each consisting of a stem followed by five completions that are either true or false. They are arranged in groups of 75 in sections devoted to medical microbiology, histopathology, clinical biochemistry, and haematology. Virology questions are included in the microbiology section and immunology questions in the haematology section. Over the following 119 pages, the answers are provided together with brief explanatory comments.

The presentation and content of questions and answers is very acceptable, but it is disappointing that no questions of the five-choice association type are included because they can be more searching. The common problems of ambiguity in the wording of the questions or of posing questions that cannot be answered unequivocally were rarely detected and the authors are to be congratulated in this regard.

The quality of the publication is pleasing with clear print on smooth matt paper and a soft cover with durable binding.

F V FLYNN

Problems in Medical Microbiology. Holton J, Brink N, Chiodini P, Bendall R. (Pp 80; £14.95.) Blackwell Science Ltd. 1995. ISBN 0-632-03834-9.

At last, a problem orientated study book in medical microbiology. Containing 80 clinical cases drawn from all four sub-disciplines, this text will provide a very useful addition to the texts available to undergraduates.

The cases are well written and realistic, covering a wide spectrum of clinical infectious conditions reflecting modern clinical microbiological practice. The follow up questions probe the students' understanding of clinical and laboratory aspects of the clinical problem. The answers are accompanied by comprehensive explanation allowing the student to learn the principles of microbiology in a clinical context. Each case is well illustrated with clinical photographs, x ray films, photomicrographs, electron microscopy, and plates. There are many excellent photographs, notably the photo- and electron micrographs. The illustrations of agar plates are untidy, however, with labels and laboratory marks that have not been removed prior to photography and this detracts from the overall impression of the book.

The problem orientated approach will appeal in the light of the changes occurring in

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