

MIDDLE ATLANTIC PERSPECTIVE

Newsletter of the National Network of Libraries of Medicine

Middle Atlantic Region New York • New Jersey • Pennsylvania • Delaware

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NOTE:

This is a newsletter. The links and information are up-to-date when published and are NOT updated after the published date.

RESOURCE LIBRARY DIRECTORS AND REGIONAL ADVISORY COMMITTEE MEET

by Mary Mylenki, Associate Director

On February 27, the directors of the region's Resource Libraries and members of the Regional Advisory Committee met at the New York Academy of Medicine. Angela Ruffin, head of the NLM's National Network Office, joined us and gave an informative update on what is happening at the National Library of Medicine. From July 2002 to November 2003, site visit teams which included NLM staff, health professionals, other librarians, and a representative of the RMLs, called upon all eight RMLs. Dr. Ruffin gave us a summary of the results of these visits, which were designed to find out what was going on in the regions and how the RMLs were perceived by their constituents, the NN/LM members. Many of the ideas and suggestions put forth at those meetings have already been acted upon and integrated into our programs.

Following Dr. Ruffin's update, other agenda items included some of the "usual suspects" with which we are all concerned: outreach to the public, via public libraries and otherwise; outreach to the public health workforce; and outreach to the many groups of ordinary people (consumers) out there who need reliable health information.

Last year the RML funded eight Electronic Access Outreach projects within the region; these are now at about the midpoint of their funding cycle. The group was very interested in hearing progress reports on these programs. The various projects encompassed working with public health workers (University of Pittsburgh Health Science Library Services); providing health information in Chinese and an interface for mainly English-speaking health professionals and a Chinese population (New York University Ehrman Medical Library); improving access to continued on p 7

CONGRATULATIONS, AWARD RECIPIENTS!

In October 2003, the NN/LM Middle Atlantic Region announced the availability of funding opportunities in seven different areas, including exhibits, electronic document delivery, and library improvement. We are delighted to announce the awardees in this current go-round. We hope that, after reading through the following, you will be encouraged to apply for awards and/or subcontracts for your institution the next time an RFP is announced.

Library / Technology Improvement Awards

The awards are for the purchase, installation, and/or upgrading of information technologies that will enhance access to health information within hospitals. Up to \$3,500 was available to each institution for costs associated with upgrading technology.

We are pleased to announce awards to the following institutions:

Bayshore Community Hospital, Holmdel, NJ, Tricia Reusing, Medical Librarian

For the purpose of acquiring a web-based public access online catalogue system for the Harry M. Poppick Medical Library. This OPAC is to enhance access to the library's significant health information resources from within the hospital and from its affiliated health care facilities.

Crouse Hospital, Syracuse, NY, Kris Hogan, Librarian

To provide a mechanism for library staff to critically evaluate PDA resources for use in the hospital's clinical and healthcare administration environment and to provide a forum for clinicians, managers, and students to learn about and utilize hand-held devises.

Mercy Hospital of Pittsburgh, PA, Rob Neumeyer, Coordinator of Library Services

To purchase a computer and printer to upgrade the equipment necessary to improve document delivery services to the hospital's professional population.

New York Academy of Medicine, New York, NY, Janie Kaplan, Director of Library Services

To purchase upgraded computers to improve the output of work in connection with the project that resulted in the *Grey Literature Report*.

Pascack Valley Hospital, Westwood, NJ, Elaine Goldman, Medical Librarian

To purchase computers and printers to be used in patient care areas of the hospital, extending its "Digital Library" program. The "Digital Library" affords ready access to electronic information to patients and healthcare professionals within the institution.

St. Christopher Hospital for Children, Philadelphia, PA, Frances Pinnel, Library Director

To purchase a digital sender to enable sending printed documents as email files to desktops within the hospital and to the healthcare community at large through interlibrary loan.

St. Vincent Midtown Hospital, New York, NY, Kalpana Desai, Medical Librarian

To purchase up-to-date computers and monitors, to replace seriously outdated equipment to enable the library to better serve its patrons.

Trinitas Hospital, Elizabeth, NJ, Elisabeth Jacobsen, Library Director

To purchase up-to-date computers and monitors to replace seriously outdated equipment to enable the library to better serve the hospital's residency program and nursing school.

Electronic Document Delivery for DOCLINE Libraries

The awards are to support implementation of Internet and/or Web electronic document delivery (EDD) service or improvement of existing services. Up to \$2,000 was available to each institution for costs associated with implementing or upgrading services.

We congratulate the following institutions and organizations:

Central New York Library Resources Council (CLRC), Syracuse, NY, Jeanette Smithee, Associate Director

The award, made on behalf of St. Elizabeth Medical Center, Utica, and the CLRC Medical Circuit Program serving four small hospitals in the area, is to enable them to purchase Ariel® software and scanners to increase and improve document delivery services to their staffs and residents.

Mercy Hospital of Pittsburgh, PA, Rob Neumeyer, Coordinator of Library Services

The award is to assist the Brady Library to purchase a computer and printer to expedite document delivery services to the ten residence programs supported by the hospital.

Vasser Brothers Medical Center, Poughkeepsie, NY, Mary Jo Russell, Manager of Library Services

The award is to assist the library to purchase Ariel® software and a scanner to implement electronic document delivery and extend professional library services to physicians and allied health care professionals in a three-hospital system covering two counties in the Mid-Hudson Valley.

Technology Awareness Program Awards

The awards are to be used to sponsor a technology awareness program or conference to improve awareness of and access to biomedical information for health professionals and/or consumers. The program is to be at least six hours long and based on technologies relevant to these groups with no limit on the technologies to be demonstrated or exhibited. Up to \$7,500 was available to implement the program.

We are pleased to congratulate the following two organizations:

Central New York Library Resources Council (CLRC), Syracuse, NY, Nancy Howe, Technical Services and Training Manager

The award is to assist the implementation of a *Syracuse Area Consumer Health Information Technology Fair* at a major Central New York shopping mall. Reaching members of the public from Onondaga County and portions of Cayuga, Cortland, Madison and Oswego counties, the focus will be on online consumer health resources for adults. Librarians and other health professionals will be available to answer questions, provide short demonstrations of various online databases, and conduct one-on-one reference interviews.

State University of New York at Buffalo, Lori Widzinski, Digital Media Resources Center, Health Sciences Library

The award is to foster a one-day *Mobile*Computing in Healthcare Fair. With a growing number of mobile computer users on campus, in Buffalo and in Western New York area health care institutions (Erie, Niagara and Chautauqua counties), health science professionals are beginning to adopt programs focused on the clinical and educational use of PDAs, laptops, and notebook computers. The primary goal of the Healthcare Fair is to increase familiarity with this technology among the faculty, staff, and students, as well as to healthcare providers within the community by providing a venue for vendors of mobile technology to display, explain, and demonstrate their products.

Exhibit Awards

These ongoing awards are given to institutions and organizations to exhibit at state or local health association meetings—particularly those that serve NLM targeted populations. Up to \$2,000 is available for costs associated with exhibiting [see http://nnlm.gov/mar/ExhibitAward.html for further details].

Our congratulations go to the following institution:

Stony Brook University, Health Sciences Center Library, Stony Brook, NY, Colleen Kenefick, Director, Center for Healthcare Informatics Education

The award was given to enable the Health Sciences Center Library to exhibit NLM resources at the 29th Annual Long Island Library Conference. The Health Sciences Center staff will use the table-top exhibit available from the RML; distribute NLM fact sheets and brochures; and conduct online demonstrations of MedlinePlus, PubMed, and other NLM databases.

We look forward to working with all of these awardees in their efforts to increase and improve access to health care.

NTCC DISTANCE EDUCATION BREAKTHROUGH

By Maureen Czujak, Assistant Director National Training Center and Clearinghouse

For the very first time, the National Training Center and Clearinghouse (NTCC) conducted a distance learning experiment, broadcasting its PubMed class on February 17, 2004, from the University of Utah at Salt Lake City, UT to Loma Linda University in Loma Linda, CA. To accommodate the different time zones the class start times were rearranged, with the Loma Linda class beginning at 8:00 a.m. and Salt Lake City class at 9:00 a.m. Mary VanAntwerp and Jean Roehrs were the broadcast instructors; Janet Zipser from the National Library of Medicine (NLM) was the observer in Loma Linda; and Maureen Czujak the NTCC observer in Salt Lake City.

Overall, the broadcast was deemed a success. The Loma Linda site used NetMeeting technology, which worked very well with the Polycom technology installed at Salt Lake City. A major problem was encountered around noon when the audio from Salt Lake City began to break up and the attendees in Loma Linda received only every fifth word spoken. The problem took approximately 20 minutes to

correct and was resolved by disconnecting and establishing a new connection from the Salt Lake City site. After that the rest of the class proceeded smoothly and uneventfully. Unrelated to the broadcast technology, participants at the Loma Linda site encountered a bizarre PubMed problem: several of the Loma Linda workstations were unable to display several search features, preventing some of the attendees from completing the hands-on exercises towards the end of the class. Other than that glitch the projection equipment at both sites was excellent, and for future classes the equipment, along with room setup and design, will be taken into consideration.

The contact individuals at both sites, Sharon Dennis and Claire Hamasu at Salt Lake City and Carlene Drake at Loma Linda, along with Janet Zipser at NLM, worked very hard during the preliminary stages to plan the broadcast and test and observe functions during the months leading up to the actual class broadcast. When preparing future classes, the time spent on preparation must be factored in and is definitely not something to be taken lightly.

It was interesting to note that only four questions were asked by participants at both sites—a highly unusual occurrence and quite remarkable; normally participants have numerous questions throughout the class session. Were individuals fearful of the technology? Did they not like to use a microphone? Individuals had a choice of either using the microphone or a web-based software product known as "ActiveClass." For future classes a way must be found to navigate around this apparent apprehension and timidity.

The National Training Center and Clearinghouse and NLM plan to conduct more of these classes on an experimental basis, and are looking for sites that have the technology to broadcast a "live" class, as well as sites that have the capabilities to receive live broadcasts and are willing to hold a class at their institution. If your institution would be interested in hosting a broadcast PubMed class, please contact either Maureen Czujak (mczujak@nyam.org) or Janet Zipser (jzipser@mail.nlm.nih.gov). The NTCC

is looking specifically for sites to broadcast the class *to* and for sites that it does not usually teach classes at. Loma Linda is not usually on the NTCC training schedule; by participating in the live broadcast, the participants at that site were most appreciative that they did not have to drive to Los Angeles, Davis, or San Francisco for NLM training.

¹ActiveClass employs wireless computing via PDA's and laptop computers in order to encourage classroom participation from students who might otherwise not participate. It permits students to "silently" ask questions, answer questions, and provide other types of feedback. The results are aggregated and then broadcast to all the students and the teacher, thereby facilitating and spurring verbal discussion.

NLM REVISES POLICY ON NATIONAL MAXIMUM CHARGE

Background

For many years, to recover the administrative costs associated with ILL transactions, the Resource Libraries have had the option of charging network members for filling a document request, up to a national maximum charge set by the National Library of Medicine. This is currently \$11.00 for mail delivery. Over the past year, NLM and the RMLs have given serious consideration to the request voiced by a number of Resource Libraries that the maximum fee that a Resource Library may charge to fill a document request be raised or perhaps removed altogether.

Discussion

Elimination of the national maximum charge is problematic for a number of reasons. These include the fact that most Resource Libraries do not have current cost data on which to base their charges, and possible unanticipated negative effects which could jeopardize a resource sharing system that currently works well for the majority of NN/LM members.

The RMLs recommended against a new cost study involving all Resource Libraries. Such a study would involve considerable work by many libraries that

have no issue with the current national maximum. However, NLM and the RMLs recognize that the administrative costs incurred by some Resource Libraries may substantially exceed the current maximum. Therefore, NLM has decided to *recommend*, rather than require, a national maximum charge of \$11.00 and to outline conditions under which individual Resource Libraries may exceed this charge. The new policy, outlined below, goes into effect immediately and will remain in place at least through the remainder of the current NN/LM contracts—through April 2006. The effect of the change will be monitored by NLM; if unanticipated negative consequences emerge, the decision will be reconsidered.

New Policy

A Resource Library must provide copies of documents in its collection in response to DOCLINE requests received from NN/LM members in accordance with "fair use" principles.

The **recommended** maximum charge for filling a document request for an NN/LM member is \$11.00. Before instituting a charge that exceeds the recommended maximum, the Resource Library must (1) provide documentation of current costs to its Regional Medical Library; and (2) provide three months' notice to allow sufficient time for interested NN/LM members to change their DOCLINE routing tables before the new charge goes into effect. No notice is needed if the charge is reduced. Please note that separate from the base charge, Resource Libraries may impose surcharges for various extra services, such as faxes, rush delivery, color copies, etc.

We at the RML strongly urge every DOCLINE library to look over the services and fees section of its Institutional Record and update any and all charges and surcharges. If you are unclear as to how to go about the process, call the RML office and we'll walk you through.

¹17 U.S.C. § 107 outlines criteria including four specific factors that courts weigh to determine if what you've done would *lawfully* be considered Fair Use http://fairuse.stanford.edu/commentary and analysis/2003 07 minow.html

DIVERSITY: CLOSING THE HEALTH GAP

by Barbara Cosart, Special Populations Coordinator NN/LM South Central Region

According to the National Center on Minority Health and Health Disparities (NHMHD), a health disparity exists when there is "a significant disparity in the overall rate of disease, including incidence, prevalence, morbidity, mortality, or survival rates in the population as compared to the health status of the general population." Often, the most glaring disparity appears within racial or ethnic minority communities that are disproportionately afflicted with diseases or conditions. Other health disparities can occur within geographic areas where incidence of disease or mortality is higher when compared to the general population, such as some communities of disadvantaged rural whites.

Some examples of known health disparities are:

- * African-Americans experience over twice the rate of infant mortality as compared to whites, and American Indian/Alaska Natives have nearly twice the rate as whites.
- * African-Americans are 30% more likely to die from cancer than whites.
- * HIV/AIDS disproportionately afflict African-American females at a rate 24 times more than white females and African-American males eight times more than white males. The rate is also high for Hispanic/Latino populations--females at a rate of over six times more than white females and males three times more than white males. The rate for American Indian/Alaska Native populations is also higher.

A variety of biological, environmental, and social factors contribute to health disparities. Socioeconomic status and educational level are closely related factors; low socioeconomic status is common to many racial and ethnic minority populations and also affects many white underserved populations. Biology has been found to be a factor in some types of health disparity. For example, 'thrifty genes' contributing to obesity have been found to be a factor in the high rate of diabetes in the Pima

Indians of Arizona. There may also be differences in rates of drug metabolism with certain minority populations. Unfortunately, most medicines have not been adequately studied in minorities, which may contribute to the problem. Access to and quality of healthcare is likely to be a major factor. Care for minorities is often substandard, language and cultural barriers may exist, and issues with trust and discrimination persist. Lack of insurance is a serious barrier to good healthcare for many groups.

Addressing the issue of health disparities is nothing new to the NLM; access to MedlinePlus and MedlinePlus en español is freely available and includes population-specific information, and NLM and the NN/LM continue to work hard to help improve access to the Internet in areas where access is substandard. The NLM also has a long history of working with Historically Black Colleges and Universities to identify environmental hazards and increase awareness and use of toxicology information, with an emphasis on underserved communities.

The NN/LM relies on its Network members to help identify libraries and organizations that could benefit from NN/LM funding, from small Internet connectivity grants to more substantial funding for projects aiming to improve access to health information for specific populations. Here are a few other things you can do to help close the gap:

- * Observe ethnic months at your library and feature relevant health information, such as the Population Groups Topics on MedlinePlus http://www.nlm.nih.gov/medlineplus/populationgroups.html
- * Publicize ClinicalTrials.gov http://clinicaltrials.gov/ Most medicines have not been adequately tested in minority groups and may be less effective or have negative effects which are currently unknown.
- * Exhibit at a meeting of a minority health professionals' association or a local minority health fair.
- * Partner with a hospital, academic, or public library or community-based organization to bring health information to underserved groups. (Remember, we can help you find funding sources.)

* Read the Office of Minority Health's newsletter, *Closing the Gap* http://www.omhrc.gov/OMH/sidebar/omh-publications.htm

Webliograpy

National Center on Minority Health and Health Disparities (NCMHD). http://ncmhd.nih.gov/

Office of Minority Health Resource Center (OMHRC). http://www.omhrc.gov/omhrc/

Closing the Health Gap. http://www.healthgap.omhrc.gov

NIH Strategic Plan to Reduce and Ultimately Eliminate Health Disparities. NCMHD. http://ncmhd.nih.gov/our_programs/strategic/volumes.asp

Population Groups Topics. MedlinePlus. http://www.nlm.nih.gov/medlineplus/ populationgroups.html

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Regional Meeting-continued from p 1

Spanish language health information resources (University of Medicine and Dentistry of New Jersey); and several which are working with a variety of public librarians (Geisinger Medical Center, Danville, PA; Crandall Public Library, Glens Falls, NY; and Carnegie Library of Pittsburgh.)

[We are very pleased that subsequent to this meeting a similar round of funding for the current year has been announced. These new proposals have a due date of June 4, 2004. For complete information see

http://nnlm.gov/mar/aehi rfp2004.html

There is also a "printer friendly" pdf format at http://nnlm.gov/mar/aehi rfp2004.pdf We hope this will inspire more applications.]

The directors had received advance notification of NLM's revised policy on the maximum amount that Resource Libraries may charge National Network of Libraries of Medicine members for document delivery. There was discussion of this new policy, and the consensus was that at present none of the Resource Libraries will seek to raise their base charge for document delivery, but they may institute additional surcharges for special services. (See detailed article, page 5) Other related topics included discussion of access to electronic journals and licensing issues. The directors and RAC members were also interested in discussions of distance training and education and potential collaboration in these areas. Dr. Maxine Rockoff, director of the RML and of the Division of Information Management, led a discussion on initiatives in public health and sought the advice of the RAC and the Resource Library directors regarding regional priorities and potential new initiatives.

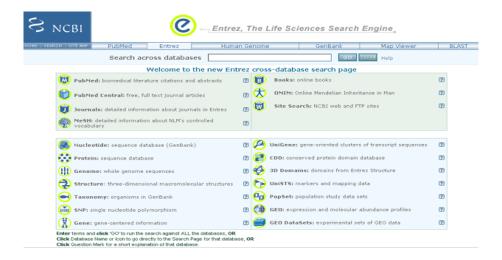
DOCLINE INSTITUTIONAL RECORD REMINDER

We hate to sound like the aunt who bores everyone at family gatherings, but may we remind you that corrections to your Institutional Record in DOCLINE do not occur via mental telepathy or osmosis. You gotta make 'em happen! If your email address, fax number or area code changes, you must correct all screens where applicable in Institutions > Update > Addresses, Names, Membership, Services and Fees, and DOCLINE Options. If you do not, your colleagues will not be able to contact you, nor will they have an accurate idea of any charges or surcharges you impose for document delivery.

NLM DATABASES UPDATE

Entrez Global Query

NCBI has created a new interface, the Global Query System, to search all of its Entrez databases simultaneously. To access the Global Query System, go to: http://www.ncbi.nlm.nih.gov/gquery/gquery.fcgi.



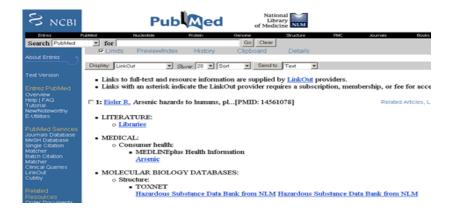
For more information, see: Kenton D. Entrez Global Query: NCBI's New Cross-Database Search Engine. *NLM Tech Bull.* 2003 Sep-Oct;(334):e6.

http://www.nlm.nih.gov/pubs/techbull/so03/so03 global query.html.

Hazardous Substances Data Bank Chemicals Available via LinkOut

PubMed users now have access to information for over 3,000 Hazardous Substances Data Bank (HSDB) chemical substances. Links to these substances were added to LinkOut in September 2003.

For more information, see: http://www.nlm.nih.gov/pubs/techbull/nd03/nd03 technote.html#chemicals.



THE NIH LAUNCHES LIFEWORKS – A FREE CAREER EXPLORATION SITE

http://science.education.nih.gov/LifeWorks

The National Institutes of Health (NIH), Office of Science Education (OSE) has launched "LifeWorks," an interactive Web site featuring more than 100 careers in the health and medical sciences. It is designed as a resource for middle school and high school students, parents, educators, and school guidance/career counselors to explore the diversity of careers in the field. According to the Department of Labor, these jobs are expected to be among the fastest growing jobs in the nation over the next 10 years.

At "LifeWorks," visitors can:

- Search careers to match personal interests, skills, and abilities
- Browse careers by salary, education required, interests, and job title
- Read about real people who have achieved success in their careers
- Learn about certification, licensing, and educational requirements
- Explore job market trends and find links to professional organizations

Select the letter M in the alphabetical listing at http://science.education.nih.gov/LifeWorks.nsf/feature/ index.htm and you will find Medical Librarian as one of the career choices. Select "Interest Area" and you will find that in relating personal interests to favored work environments, "Medical Librarian" is an "artistic" choice.

GOOD NEWS, BAD NEWS

We would like to welcome Manhattan Psychiatric Center, NYUIVK, as a full DOCLINE participant.

We regret that the library at Westchester Medical Center, NYUWCM, closed as of the first week in January 2004. If it is in your routing table, please remove it.

INACTIVE PUBMED CUBBY ACCOUNTS TO BE CANCELLED

Several new features, including automatic e-mailing of stored search results, will soon be added to PubMed's Cubby. In order to continue to provide an efficient NCBI Cubby service, inactive Cubby accounts will not be transitioned to the new system. Cubby accounts that have not been used (logged into) for the past nine months will be canceled in April when the new Cubby system is expected to be installed. There will be a limited period after April during which canceled accounts can be re-activated by NCBI.

http://www.nlm.nih.gov/pubs/techbull/ma04/ma04_technote.html#cubby

NLM TECHNICAL BULLETIN 2004

The following articles from the current *Technical Bulletin* are available on the Web at: http://www.nlm.nih.gov/pubs/techbull/tb.html

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Beta Test on Health Services Research (HSR) Filters for Searching PubMed® - e2

Technical Notes: - e1

Bosnian—New Language for MEDLINE® Citations

PubMed® Adds Three New Language Abbreviations and Changes Two Abbreviations Already in Use

January 2004 PubMed®, NLM Gateway, and *ClinicalTrials.gov* Training Manuals Now Available

Three Additional Journals Participating in PubMed CentralTM

Additional Digitized Back Issues Available in PubMed CentralTM

New E-mail List Alerts Readers to Bookshelf Updates

"Map of locations" Feature Added to ClinicalTrials.gov New Book Added to NCBI Bookshelf
Three More Organisms Added for Gene
Indexing
Eight Entries Added to ToxTown
OLDMEDLINE Moves Back in Time
Changes for PubMed's® Clinical Queries
PubMed® Subject Subset Strategies
Updated

NN/LM, Middle Atlantic Region The New York Academy of Medicine 1216 Fifth Avenue New York, NY 10029

Phone: 212-822-7396 or 800-338-RMLS; Fax: 212-534-7042 E-mail: user name (first initial last name) followed by @nyam.org; url: http://nnlm.gov/mar/

NN/LM STAFF

Director - Maxine L. Rockoff, Ph.D.
Associate Director - Mary Mylenki
Consumer Health Information Coordinator - Rhonda Allard
Education Programs Coordinator - Joan Seidman
Network Programs Coordinator - Joanne Jahr
Outreach Programs Coordinator - Peggy Falls
Technology Coordinator - Denise O'Shea
Administrative Assistant - Dorothy Weyeneth

NATIONAL TRAINING CENTERAND CLEARINGHOUSE STAFF

Assistant Director - Maureen Czujak Online Analyst - Sharon A. Brown Online Analyst -Mary Van Antwerp Assistant for Training Services - Eva Daniels

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