

November-December
2001

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The New England Regional Medical Library Welcomes You!

Welcome to the first issue of the *NER'estah Newsletter*. In it we hope to provide you with interesting articles, links and pictures. We would also like to invite other regional members to feel free to send links and pictures that you would like to see in the newsletter.

Our goal here at the [NER](#) is to provide our readers with an inside look at our on going projects as well as share the many opportunities and learning experiences we have been involved with.

As our group continues to learn about our jobs and responsibilities, communication with our New England constituents, colleagues in other regional offices and staff at [NLM](#) has been of great help. As we evolve as a team we also hope to evolve as a strong newlsetter that will prove informative and interesting to our readers.



*The New England Regional Medical Library Wishes
You Safe and Happy Holidays!*

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Comments to:
Rebecca.Chlapowski@umassmed.edu

[University of Massachusetts Medical School](#)
222 Maple Avenue Shrewsbury, MA 01545
Phone: 800-338-7657
508-856-5979
Fax: 508-856-5977

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Welcome Message from the RML Director

In Spring 2000, staff of the [Lamar Soutter Library, University of Massachusetts Medical School](#), embarked upon an ambitious project to compete for the Regional Medical Library contract for the New England states. The process of going through the competition would help define the future of our library as well as the future of [National Library of Medicine](#) information resources and services in the region. On May 1, 2001, after several rounds of questions and a site visit by the National Library Medicine review team, the Lamar Soutter Library was awarded the five year contract to become the NN/LM ,[NER](#), an indication of how far this library has come in its objective to achieve national distinction. Just a few short years ago, we were at a crossroads in our library's direction, with limited staff, resources and services. Through the tireless efforts of a dedicated library staff and supportive UMass Medical School administration, the library has experienced tremendous growth and renewed vitality, and is fully prepared to carry out the activities described in our proposal response.

During the last 6 months, the RML staff have moved into new office space, all positions have been filled, we have a new website and listserv, we've migrated over to UMass the websites of several other library groups, we've exhibited at state and local meetings of health professionals and consumers, we've executed 3 subcontracts and issued RFP's for our mini-awards program and we redesigned the RAC into a number of working taskforces and committees. Our approach is one of participation and decentralization-involving as many of you as possible in our provision of products and services that meet the needs of health professionals, consumers and librarians in our region. We invite you to join us and look forward to collaborating with you in the five years ahead. I offer a grateful thank you for your support.

ElaineMartin, Director

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A Word About the Name



As we started to plan and develop the newsletter, we had trouble settling on a name for it. We brainstormed several over the course of the summer and early fall, but nothing seemed to fit the tone that we wanted to set. We decided to ask you, our potential readers, to offer suggestions and announced that we would hold an election during the [NAHSL](#) conference to select the name.

We received several good suggestions. One of them, the NER'easter, was on the ballot and received the top number of votes. Several people made the casual suggestion that we "regionalize" it by adding a [New England pronunciation](#) . We liked it so well that you see the adjusted spelling as the title.

As a transplant to New England, I've always found the weather phenomenon called the nor'easter an interesting one. My first experience with one occurred early in my first winter here. It started early on a Saturday morning. We had started off for the mall on that Saturday morning to do some holiday shopping. It was snowing, pretty hard, and I suggested that we turn back. The driver, a brave and intrepid New Englander, said that we had too much to do and drove on. As we entered the center of town, though, he agreed that our trip out and about could probably wait for a few days. We stopped at the video store, stocked up on movies and returned home. It snowed for hours, we lost power and phone service for a day and a half, made tea and coffee in the fireplace, made sandwiches and built a snowman just off of our deck. It was in the aftermath of that storm that we met our neighbors for the first time and that I learned the concept of "snow angels". I also learned that New Englanders are helpful in emergencies and creative in their methods of solving problems.

I hope that this newsletter will give all of us in the New England region a forum for sharing ideas and finding solutions to the information needs of the people in our unique region. And, I hope that you enjoy reading it!

Debbie Sibley, Associate Director



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[University of Massachusetts Medical School](#)

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508-856-5979

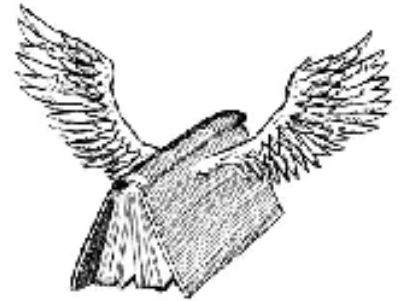
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ILL Advised



On September 28, 2001, the National Library of Medicine ([NLM](#)) put into production "release 1.3" of DOCLINE. [DOCLINE®](#) is NLM's automated interlibrary loan request and referral system. Major enhancements include: [1.] the ability to reflect new Network Delivery methods - "Web (PDF)" and "Web (TIFF)" - when filling requests; [2.] the ability to resubmit retired requests without reentering data; [3.] the ability to select and deselect all cells on the Routing Instructions page; [4.] the ability to immediately receipt requests; [5.] the ability to indicate active/inactive status of a specific library from the screens within [SERHOLD](#); and [6.] compliance with Priority 1 Section 508 standards of the [Americans with Disabilities Act \(ADA\)](#).

Following introduction of the new release, several "glitches" were uncovered and corrected by the DOCLINE Support staff at NLM. The next major release is not expected to be introduced until later next year.

Mark Goldstein, Network Coordinator

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Fun with Internet Privacy and Security

As new technologies and the laws that regulate them change rapidly in the whirlwind of the information age, security and the right to privacy have become important issues to consider for librarians and patrons alike.

Vulnerabilities to confidential information passed over the Internet are many. The frantic rush to produce and acquire internet connectivity often leave users unaware of the urgency to secure their information and activity, while software and hardware released by providers comes replete with security holes left unaddressed in the haste of production. In the name of national security, governments all over the globe are enacting legislation that make ways of protecting privacy illegal or (in the case of demanding back doors to encryption programs) ineffective, and the telescreens of George Orwell's 1984 which "received and transmitted simultaneously" and continuously have become an eerie reality with the public paying to have computers with cable modems, DSL (digital subscriber lines) and web cams installed in their homes.

The focus of this column is to provide an overview of basic Internet security, and to demystify some of the ideas (and their acronyms) that comprise a good approach to keeping private information private. The topic this month is Cryptography. Cryptography is the study of transforming information, or data, into a form that is unrecognizable by anyone without the proper "key" and back again, also called encryption and decryption.

Why are Internet users interested in encrypting their data? Because the very nature of the way the internet transfers information can put it in the hands of just about anyone who wants access to it... Well almost. The Internet is indeed a net of lines connected by nodes by which two destination nodes may have a number of potential pathways between them. It was designed this way, so that in the event of the failure of any number of connecting lines or nodes, information could travel from a source to a destination along some circuitous route. Information transferred over the Internet is chopped up into little TCP/IP (Transmission Control Protocol / Internet Protocol) "packets" that are shot off to travel individually through various routes and routers to their destination address (specified by the TCP/IP), where they are reassembled back into whole files.

The drawback of that technology is that anyone at any network computer along that path

could circumvent the filters that mask traffic that is not designated for their specific address, and "sniff" or access and read that information. If that information is unencrypted plain text, it is open to the world. So, with all of your credit card numbers, bank account information, patient medical records, network passwords, grandmother's top secret cookie recipes, and steamy love letters that you've written to someone you just met in an internet chat room bouncing around the world's computers, the only way to ensure their confidentiality is to encrypt them.

Cryptographic systems can range from a kid's spy decoder ring (not recommended for use on the Internet) that shift text "n" letters in code (if n=2 then dog=fqi), to ultra complex mathematical algorithms that would theoretically take machines with the computing power currently available thousands or millions of years to determine through brute-force cracking, that is, trying every possible key solution in succession until the correct one is found.

Cryptographic systems are either symmetric, where one key is used for both encryption and decryption, or asymmetric where a key pair is used: a public key for encryption and a private key for decryption. Asymmetric cryptographic systems provide the greatest amount of security and flexibility because access to the private key of the public/private key pair is restricted to the user receiving data. Each user generates their own public and private key pairs, sharing only the public key with people that would want to send encrypted data to them. This way, anyone can encrypt data destined for the user with the public key, but only the user and the user alone with the private key can decrypt that data.

Sounds good, and maybe not even so complicated that you'll have a headache for the rest of the week. But HOW, you ask, can you use encryption to protect your confidential information on the Internet right now? Well here are a few simple tips:

1. Always choose a secure password for your user accounts, and change them frequently. Use words/phrases that are not found in the dictionary (that's how brute force attacks can crack password files, by solving the encryption key by comparing passwords to words found in a dictionary). Random characters with non-alpha keys are ostensibly the best, but often impractical. Be creative, you can make mnemonic devices that are spelled phonetically and use non alpha keys like ! for i , 7 for L , 3 for E and so forth. And read your logs! (if you have access to them) to determine if your reported logins match your actual activity.

2. Use SSL (Secure Socket Layer) for transferring sensitive information to and from your web browser. It uses strong encryption/decryption, is bundled with most web browsers and is easy to use. Check out:

<http://home.netscape.com/products/security/ssl/>

3. Use SSH (Secure Shell) to open terminals and transfer files through encrypted protocols where you'd normally use telnet and ftp. Check out <http://www.ssh.com>

4. Use PGP (Pretty Good Privacy) to generate public/private key pairs and to work with your email program to send and receive encrypted mail. Check out <http://www.pgpi.org>

By becoming familiar with some of the encryption software available today and using a little common sense, you can provide a reasonable level of privacy and security for confidential information that you (and your patrons) transfer over the internet and almost certainly prevent all those curious kids out there from starting a global thermonuclear war from your email account.

Shawn Klejmont, Technology Coordinator

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Comments to:
Rebecca.Chlapowski@umassmed.edu

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From the field...

Greetings to folks throughout New England! Over the past 6 months I've had the opportunity to meet and work with a good many of you who have more than a passing interest in consumer health. While most of us are busy in libraries that serve providers and administrators, I hope we are finding our work with consumers to be one of the more satisfying parts of the job.

The Internet and the patient's frustrations with current health care systems have made consumer health one of the most interesting areas in medical library practice. Because consumer health information (CHI) has in some ways been re-discovered, it is an area of growing research. Some of the topics include:

- **Patient empowerment**
- **Patient-provider electronic communication**
- **CHI to special populations**
- **The gap between the techno-haves and the techno-have-nots**
- **The health care economy and information content providers**
- **Evaluation of consumer health information content**
- **Culturally competent caregiving**

From time to time I'll be listing some recent publications that touch upon our work in consumer health information. In addition to highlighting some of the research, one of my goals with this column is to make it an area that features some of the region's interesting consumer health related projects. Here are two quickies:

Holyoke Consumer Health Library Inc: Mt. Holyoke College Science Librarian Sandy Ward is spearheading Holyoke's efforts to establish a consumer health library. The diverse group includes public health workers, librarians, health administrators from area hospitals, libraries, and community organizations. They've secured funding and have made great progress.

Women's Center and Multicultural Library: [Champlain Valley AHEC](#) Information Resource

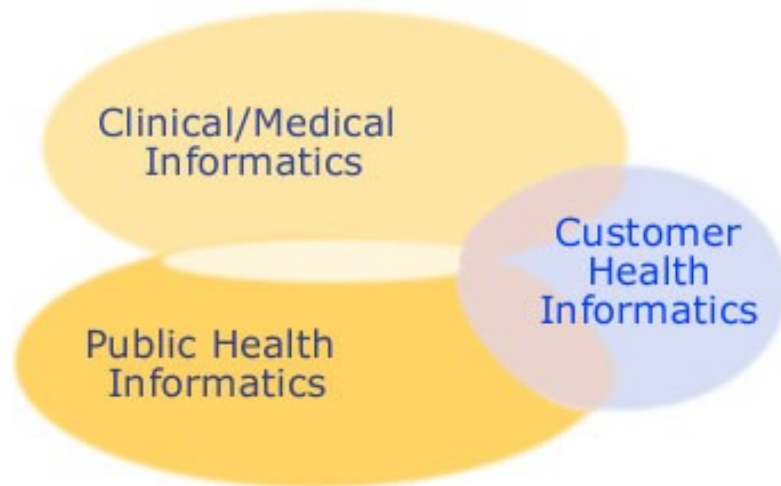


Coordinator Peter Jones is putting the pieces together to establish two (yep, two!) resource centers. One to serve women at a Job Corps program; the other is to be part of a refugee resettlement program. The multicultural library will be housed at a Federally Qualified Health Center (FQHC). The multicultural library is a project with the Vermont Department of Health Office of Minority Health and the Vermont Refugee Resettlement Program. In both libraries students in the health professions will do presentations as part of their rotations. Both collections are collaborative projects designed to increase student experiences and support community health.

I invite folks to send along ideas or write-ups of their own projects. Tell us also about any research articles that you've come across. Have a related book that absolutely everyone should be reading? Let us know...

Meanwhile I'd like to report to you about a conference I recently attended. The annual Conference on Patient Education was held in Seattle and attended by health educators, nurses, physicians, and other health professionals. While this was the conference's 22nd meeting, there were few librarians at hand. Quick highlights:

System Change and Patient Expectations was a talk given by Charles B. Inlander of the People's Medical Society. Inlander railed on the health care industry's unwillingness to shift towards a more consumer centered approach. Inlander stated that the role of the patient educator should be one where the educator is guiding the patient/consumer through appropriate resources and helping the consumer with how best to use the health care system.



Relationship Between Components of e-Health

based on Science Panel on Interactive Communications and Health, 1999

Our role in the patient education process was illustrated nicely in a diagram presented by Robin Mockenhaupt of The Robert Wood Johnson Foundation; my version of it is included here. The

diagram illustrates how customer health informatics intersects with other health informatics areas like public health and clinical/medical systems. Her discussion of *Is the e-Health Frontier Changing the Patient Education Landscape?* pointed out the functions of e-health are under a 5-C model: Content Connectivity Community Commerce and Care.

In this issue I've also included a small list of recent articles and papers that might be of interest to those of us doing consumer health services. Peace and good health to all, Javier.

Javier Crespo, Consumer Health Information Coordinator

Recent Articles and Papers

A small selection of readings related to consumer health information.

Eng, T.R. *The eHealth Landscape: A Terrain Map of Emerging Information and Communication Technologies in Health and Health Care*. Princeton, NJ: The Robert Wood Johnson Foundation, 2001.

From the preface: "The purpose of this document is to summarize the major players, issues and emerging trends and technologies in the eHealth arena..."

Berland, G. *Health Information on the Internet: Accessibility, Quality, and Readability in English and Spanish*. JAMA May23/30, 2001 Vol. 285, No. 20.

Also published as a RAND study "[Proceed with Caution](#)", From the Conclusion: "Accessing health information using search engines and simple search terms is not efficient. Coverage of key information...is poor and inconsistent although the accuracy of the information provided is generally good. High reading levels are required to comprehend Web-based health information."

Harris Interactive Inc. *Ethics and the Internet: [Consumers vs. Webmasters](#)* October 5, 2000.

Report commissioned by the Internet Healthcare Coalition and the National Mental Health Association focused on the experiences and perceptions of the online public and website developer. "...public is less likely to draw distinctions between commercial and independent published information."

Taylor, H. [Cyberchondriacs Update](#). The Harris Poll #19, April 18, 2001, 52% of respondents look for health care using a portal or search engine.

Woloshin S. *Direct-to-consumer advertisements for prescription drugs: What are Americans being sold?* The Lancet, October 6, 2001 Vol. 358, pp1141-46.

There has been growing concern about direct-to-consumer advertisements. This study examined the content and frequency of such advertising.



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Announcement:

We want to remind everyone that we will be starting our annual Membership drive soon. The main purpose of the drive is two-fold: (1.) to verify and update information stored in the **DOCLINE®** system by existing members; and (2.) to foster and forward the participation of smaller libraries into our Regional network, encouraging the expansion of interlibrary loan activity throughout the region.

To accomplish our first task - verifying existing membership information - we would like to have all existing members verify their DOCUSER record information. Also, if you haven't updated your serial holdings (**SERHOLD**), Routing Profile or Routing Table in over a year, now would be an excellent time to do so. And thanks!

Please direct all inquiries regarding Regional Network membership and use of the DOCLINE® system to Mark Goldstein: by phone at 508-856-5964 - or - by email at mark.goldstein@umassmed.edu.

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The WISE guys

This September and October Javier Crespo (Conuser Health Coordinator) along with his colleagues from the [Lamar Soutter Library](#), [UMass Medical School](#)-- Gael Evans, Barbara Ingrassia, and Barbara Winrich had the opportunity to teach Worcester area seniors about "*Navigating the Net for Health Information.*" The seniors were enrolled in a program based at [Assumption College](#) called the Worcester Institute for Senior Education, **WISE** for short. Fifteen people signed up for the class, which was taught in the Psychology Computer Lab at [Worcester State College](#) over the course of five Tuesdays.

Javier and Barbara Winrich taught the first class on September 25th. Needless to say, it was a learning experience for all parties. The class learned about the Internet and the organization of its knowledge base. Barbara and Javier learned what it was like to teach a group of senior citizens the intricacies of mouse control and flashing screens!

The next week [Cyberseniors.org](#) used the class time to introduce their new training module that teaches seniors how to find good health information on the Internet. (Cyberseniors.org has a contractual agreement with the Worcester Senior Center to provide computer training to their members.)

On October 9th Gael and Barb Ingrassia taught the seniors about search engines and how to evaluate web sites. While Gael was expounding about [Google.com](#) and [AltaVista.com](#), Barb made her way around the room from terminal to terminal distributing handouts, answering questions, and calming down the frantic clickers.

Gael taught the class on herbal and alternative/complementary medicine sites by herself, because Barb Ingrassia was away at the annual [NAHSL](#) meeting. This was a daunting task, since there was no one extra to help with the technologically challenged and the challenging technology. In spite of this the class enjoyed surfing such sites as the Longwood Herbal Task Force page displayed by the Shepherd Library at the [Massachusetts College of Pharmacy](#).

Javier taught the final class on October 23rd: [MedlinePlus](#). Barbara Winrich distributed MedlinePlus bookmarks, Medspeak brochures from the [Medical Library Association](#), and the feedback survey. Everyone found our classes to be valuable and the students want us to come back and teach again!

We are planning to offer another series of classes in the 2002 Fall semester.

Gael Evans, Librarian REIS Department
Lamar Soutter Library, University of Massachusetts

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Links to Check out!

Welcome to our links page! This page will be updated with each new issue. If you would like us to add a link please send links to [Rebecca Chlapowski](#) at the New England Region Office.

[NER Funding Opportunities](#)

[Latest Information On Anthrax](#)

[Center for Disease Control and Prevention](#)

[Tugger The DOCLINE Mascot](#)

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