



Colorado Council of Medical Librarians

December 7, 1987

Federal Communications Commission
Mr. William J. Tricarico, Secretary
Office of Opinion & Review
1919 M Street NW - Room 222
Washington, D.C. 20554

RE: INTERSTATE ACCESS CHARGES EXEMPTION FOR ENHANCED SERVICE PROVIDERS.
CC DOCKET 87-215; FCC 87-208

Dear Mr. Tricarico:

The Colorado Council of Medical Librarians (CCML) is an incorporated non-profit consortium of 100+ members. The organizational purpose of CCML is cooperative lending and borrowing of medical library resources for cost containment. Health care providers, patient care, medical research and medical education are all directly affected by the members' commitment to expeditious information retrieval and delivery.

To accomplish the stated purpose above, members of CCML rely upon computer access of many data bases, health information networks, electronic mail services and interlibrary loan networks. Telecommunication costs have already increased with the breakup of AT&T.

In addition, average costs of medical books are \$67.83 per title - UP \$6.86 from 1985. Average cost per journal subscription is \$85.13 - UP \$14.67 from 1985. Operating costs such as binding of serials and software systems continue to escalate. Many library budgets have been cut by 2% or more.

SUMMARY: MEDICAL LIBRARIES SIMPLY CANNOT AFFORD INCREASED ACCESS FEES ON TELECOMMUNICATION NETWORKS. OUR 100+ MEMBERS STRONGLY AND UNANIMOUSLY OPPOSE THE ELIMINATION OF THE EXEMPTION FROM INTERSTATE ACCESS CHARGES CURRENTLY ALLOWED ENHANCED SERVICE PROVIDERS.

Mrs. Anita F. Westwood, President
Colorado Council of Medical Librarians
777 Bannock St., Denver, CO. 80204

CCML HISTORY

submitted by Merrie Jo McNally

During my recent reorganization of the CCML archives I came across a report entitled "A Thumb Nail History of the CCML" written by Teresa Martin. I thought it might be interesting to look back at our roots as we look forward to a new year so I have re-printed the report below:

"It all started in a small work room at Denver Medical Society library in the later part of 1955 from the result of people like Helen Walker, Teresa Martin and others calling Isabelle Anderson and Maxine Beaton for help. Both did very much for the medical library profession in Denver. Ned Eig in his quiet way was also very helpful and the only one with a Master's Degree in Library Sciences. The members of this group were: Isabelle Anderson, Denver Medical Society; Maxine Beaton, Presbyterian; Myrna Barrett, Fitzsimons; Kay Mayer, V.A. Hospital; Ned Eig, National Jewish Hospital; Helen Walker, St. Luke's and Teresa Martin, Mercy.

This was a very close knit group and so helpful to one another. Isabelle Anderson was one of the medical library greats. Mrs. Beaton is highly thought of in the Special Library Association. She has authored several articles.

This early group usually met at DMS or at Presbyterian, usually at DMS. Sometimes at other hospitals. One summer evening in 1956 they met at Mercy Hospital. This evening they gave Teresa Martin a standing ovation for having received 100% rating from MLA accreditation. This good luck was due to the wonderful help she received from this group. She made some of her own books by looking through duplicate journals and tearing out subjects needed for her library. She made sure that every area was covered and up to date.

This group met on Saturday mornings to work on the first CCML Union List.

Mrs. Maxine Beaton and/or Isabelle Anderson were usually the speakers. They were very informative.

A few years later, Margaret Fennell, St. Joseph's and Elsbeth Liebowitz, Children's joined. Both had Masters Degrees in Library Science."

HAPPY VALENTINE'S DAY!!!



REGIONAL ADVISORY COMMITTEE MEETING (November 5-6, Omaha)
submitted by Sara Katsh

For more information, contact Margaret Bandy, Jim Bothmer, or Sara Katsh.

Abbreviations used in this report:

RML--Midcontinental Regional Medical Library Program
RAC--Regional Advisory Committee

I. ONLINE SERVICES, Midlands Online Region

A. New structure for courses conducted by regional staff

1. Fundamentals of MEDLARS Searching (=Initial Training)
2. Follow-Up to Fundamentals (=Advanced Training)
3. Basics of Searching MEDLINE (for health professionals)
4. Training Trainers: Given once a year in conjunction with MLA convention by personnel in region in which meeting is held. Trains search analysts to teach health professionals the Basics course.

5. Workshops (cost-recovery basis)

- a. Back to the Fundamentals
- b. Individual modules from Follow-Up

B. End User Referral Database

List of trainers throughout region, maintained by RML. Number currently stands at 334.

II. NODE MAP

(Plan discussed last year that would enable each health professional in Region 4 to have access to and knowledge of access points for ready reference, computer searches, and document delivery)

Since this plan was devised, NLM announced a similar plan for "Recognition of Network Participation" and creation of a national database. A subcommittee of the RAC met in June to discuss the impact of NLM's plan on the regional plan and to define criteria for determining "Network Participants" and "Information Network Nodes." There will be another survey of libraries in the region to identify levels of participation. A directory of resources will be created, and the program will be publicized to libraries and health professionals. Libraries will receive marketing kits from the RML to help with publicity, and the RML will exhibit at health care association meetings. There was discussion of groups to be reached and methods for encouraging library use (CE for health professionals and librarians, contact with professional schools, use of "sponsors," and unconventional services, such as "electronic libraries.")

III. Regional Communication

A. Discussion of RML publications, exhibits, fact sheets, brochures, OCTASPHERE (now edited by Dorothy Willis), and the annual RML directors' meeting at MLA.

B. OCLC LINK

Since the demise of OCTANET, the region needs a new E-Mail system. The message function to be added to DOCLINE will not be suitable for this purpose. As announced in the report of the last RAC meeting, the RML has decided on OCLC LINK, available through BCR, which offers messaging, bulletin board, and data conferencing functions as well as gateways to several online vendors at reduced telecommunications charges. To date, 21% of former OCTANET online users have received LINK codes. The objective for the first year is 35% and for the second year 50%. An added incentive to use LINK is that BCR will be using it to disseminate ACTION FOR LIBRARIES, network information, etc.

IV. DOCLINE

A. SERHOLD

All SERHOLD libraries are automatically lenders. But a library need not have holdings in SERHOLD to lend on DOCLINE. This means that we could agree to prefix or override routing tables with each others' codes. Of course, there is also the issue of CCML libraries adding holdings to SERHOLD and using DOCLINE instead of ABACUS for local ILL. (No consortium in Region 4 is doing this yet.) If we do choose this option, there are various methods we could use:

1. The RML will do data entry for a per title cost.
2. PHILSOM SERHOLD update. Problem: PHILSOM may phase out union list production. If they do, they could provide a magnetic tape for a new union list or SERHOLD update by another vendor.
3. PC program for data entry and creation of tape from individual disks.

B. Fill-Rate

The RML contract promises NLM a regional ILL fill-rate of 75%. Our region now has a rate of 70%, according to NLM's definition. There was speculation on possible reasons for this, as well as discussion of drawbacks of the definition itself, and the effect of OCTANET statistics on the figures. DOCLINE statistics will continue to be monitored.

C. 1988 DOCLINE Enhancements

1. Message function: Will be limited to approximately 200 characters and must be used only in support of ILL.
2. Multiple routing will default to 20 in all cells. (Now multiple routing is confined to cells 1 and 2, and you must indicate number of routes desired.)
3. DOCUSER file will be made available on ELHILL; i.e., you will be able to search for LIBIDs online (will not be used for data entry).

D. Miscellaneous

1. During Feb-Apr 1988, libraries in this region will be permitted to make changes in their routing tables. Timetables and instructions will come from the RML.
2. 77% of former online OCTANET locations and 30% of former non-online locations have DOCLINE codes.

NOTE: Send your DOCLINE questions and suggestions to Sara Katsh at AORN.

V. Regional Locator Tools

OCTANET was adequate as an online locator tool for the region since it allowed examination of individual libraries' holdings online. Since it is not possible to view a library's holdings on DOCLINE, there is some feeling that we should have a holdings list. One option is for NLM to provide a print or fiche locator tool from SERHOLD. (A free list of any subset of SERHOLD libraries is available.) Another is to get a tape from NLM and "clean it up" locally. A CD-ROM product would permit seeing holdings while online. These options will be considered.

VI. Cooperative Resource Retention

The OCTANET Serials Report produced by the RML tabulated the frequency of journal titles requested from NLM (25%) and the number of referrals within the region. These data will be used as a development tool for cooperative acquisitions in the region. Preliminary statistics seem to indicate that there are very few individual titles frequently referred within the region or to NLM, making it difficult to identify titles that should be added to regional holdings.

Other possible efforts include a monograph and AV report and an approval

plan comparison.

VII. Telefacsimile in Region 4

Since document delivery is the "weak link" in our rapid ILL system, many libraries are considering purchasing FAX machines. A task force composed of members of the RAC will determine policies and guidelines for a regional FAX network, investigating brands, vendors, costs, leasing vs. buying, PC interfaces, etc.

VIII. CD-Based Library Tools

Another RAC sub-group is interested in evaluating CD products (bibliographic databases, monograph catalogs, reference tools) and determining which libraries have which ones. NLM is also reviewing CD products, so these efforts will be coordinated.

REPORT FROM RESOURCE LIBRARY DIRECTORS

submitted by Jim Bothmer

The Resource Library Directors met November 4 to discuss two issues that needed clarification.

Claire Gadzikowski announced that as of April 1, 1988, NLM would raise its interlibrary loan fees to \$7.00 for regular transactions and \$10.00 for telefacsimile requests. All resource libraries in Region 4 will follow NLM's lead. As of April 1, 1988, resource libraries in this region will charge \$7.00 for ILL requests.

[Denison Library will continue charging \$5.00 for loans originating from Colorado libraries.]

The other major topic of discussion concerned preservation. NLM has made preservation of medical materials a priority. Region 1 has been commissioned to do a nation-wide needs assessment on preservation issues. A random sampling of 400 libraries will be undertaken.

NLM will also provide funding for the RMLs to collect, house, and disseminate a small, circulating reference collection on preservation.

All RML directors and associate directors will attend a briefing session on preservation at NLM, and funds have been appropriated for training of the rest of the RML staff. In addition, monies will be available through the RML for resource library directors to travel to regional meetings to discuss preservation issues.

Those were the only two issues that were discussed at the Resource Library Directors' session of the Advisory Committee meeting.

LIBRARIES' SUBSCRIPTION COSTS STACK UP
submitted by Connee Chandler

Libraries' Subscription Costs Stack Up

The issues of the rising cost of magazines at the newsstand raised in Joseph M. Queenan's Sept. 28 editorial-page article, "Major Investment Opportunity at Your Local Newsstand," affect not only individuals, but libraries. The problem he raises about the price increase for the Economist is multiplied by the many thousands of subscriptions held by some large libraries.

Library collections are the front line of our nation's information and educational system. As purchasers of library materials from foreign, as well as domestic, publishers, libraries are uniquely vulnerable to the devaluation of the dollar on the international market. Many librarians find themselves committed to pay for existing subscriptions, leaving no means to pay for increases predicted to be in the 25% to 30% range in the next year or to add important new scholarly journals from any source. In the past few years, the increase in journal prices has been supported by curtailing

book purchases, halving book budgets or by taking other extreme measures that cannot be sustained and still support research.

The board of directors of the Resources and Technical Services Division of the American Library Association passed a resolution at its July meeting to focus attention on the impact of dollar devaluation on library collections and the international flow of information. A cheaper dollar damages the ability of libraries to build effective collections and threatens the nation's ability to educate its youth, conduct its research and inform its citizenry.

MARION T. REID
President, Resources and
Technical Services Division
American Library Association

Chicago

Wall Street Journal 11/24/87 page 29

HARMLESS LIBRARIANS??

submitted by Connee Chandler

A list of jobs that should be subject to drug testing should be developed with the cooperation of government, industry, labor and the medical establishment, says Dr. George Lundberg, editor of the Journal of American Medical Association. This list should "stratify" jobs for their "likelihood of people performing these jobs being at serious risk for causing harm to others," Lundberg says. At a minimum, agreement could be reached that certain jobs require testing, such as airline pilots -- while other do not, such as librarians, Lundberg added. He also reiterated his opposition to the Reagan administration's implementation of random testing because it represents a "guilt until proven innocent approach" that is also not cost-effective.

taken from Workplace Health 17(24) page 10, Nov, 1987

DOCLINE INFO FROM NLM

submitted by Sara Katsch

NLM is currently expanding the number of institutions to which we will refer interlibrary loan requests we are not able to fill from the NLM collection. Specific agreements have been in place to refer requests to American Dental Association, American Hospital Association, American Journal of Nursing Company, National Agricultural Library, and British Library Lending Division, when the titles are in scope and requests instruct us to "refer on". On April 1, 1987, NLM established a new "Search and Referral" unit in the Collection Access Section which will find locations for titles not owned or unavailable and refer requests when indicated. When a request states "refer on", holdings of libraries within the Network, others in the United States, and large collections in other countries will be checked. DOCLINE requests will be referred through DOCLINE when possible, all others will be referred via the mail.

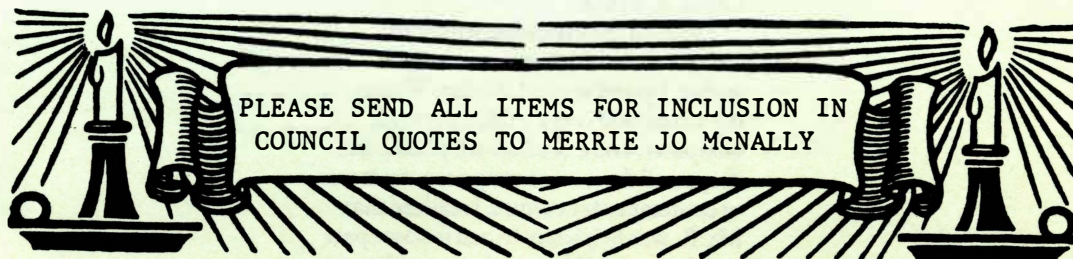
CALLING ALL BRECKENRIDGE RESTAURANT EXPERTS

The MCMLA 1988 Hospitality Committee would like to publish notes on Breckenridge restaurants. If any Council Quotes readers have piquant suggestion for us please contact Martha Burroughs at 839-6672.

NEW DIRECTORY NOW AVAILABLE

The Rocky Mountain Chapter of the Special Library Association has announced the publication of the Directory of Special Libraries and Information Centers. It describes over 300 libraries and information centers in Colorado, South Dakota, Utah and Wyoming including special collections within larger libraries, subject and geographic indexes and lists library software and hardware applications.

Cost of the directory is \$20. Send orders to Rocky Mountain Chapter of SLA, Attn: Resource Directory, P.O. Box 24471, Denver, Colorado 80224-0471.



CASE HISTORY

submitted by Connee Chandler

THE MAN WHO MISTOOK HIS WIFE FOR A DISHWASHER

This takeoff on neurologist Oliver Sacks's collection of essays, The Man Who Mistook His Wife for a Hat, is excerpted from an article written for the New Yorker by Richard Leibmann-Smith.

WHEN SHE CAME into my clinic, Mrs. R. appeared to be a pleasant, slightly plump 35-year-old woman. Her blood lipids, urine protein, cerebrospinal fluid, EEG, CAT scan, and PET scan were all normal.

"Doctor, it's about my husband," she finally said.

Mrs. R. then proceeded to describe a situation so incredible, so far beyond the routine bizarreness to which all neurologists become inured that I had no clinical choice but to invite myself to dinner that very evening.

Surprisingly, like his wife, Mr. R. (Chuck) proved to be a perfectly pleasant, slightly plump 35-year-old. Throughout a lavish and lovingly prepared repast, he revealed himself to be a most charming and cultivated dinner companion, regaling me with an amusing and perceptive disquisition on the early Mnemonist painters and displaying a thorough—even encyclopedic—familiarity with the prime numbers. Schopenhauer himself, I couldn't help but think, would have been delighted with his company. There was not the slightest hint in this lovely chap's demeanor, in short, to provide any adumbration of the harrowing postprandial behavioral abyss into which he was about to plunge willy-nilly.

Indeed, it was only after we were well into the dessert course—a mouth-watering *tarte tatin* that Sartre would have thoroughly enjoyed—that the ominous possibility of "something wrong" began to register on my diagnostic antennae. At that juncture there lay

on the table the full detritus of a fabulous five-course dinner: sticky silverware, plates glazed with *sauce choron*, wineglasses rubbed with the residual sediment of choice vintage Bordeaux and more.

Surely, I thought, Mr. R. will now rise, excuse himself, clear the table, and head toward the kitchen to do the dishes. Instead, to my mounting dread and disbelief, he motioned expansively toward the den and invited me to join him there for cigars, cognac, and perhaps a little routine neurological testing.

I must have looked aghast. What kind of mad, barmy, topsy-turvy, lunatic, Alice-in-Wonderland dreamworld was he living in?

"But who will do the dishes?" I blurted without thinking—a question that would have been unbelievably cruel had Chuck R. the slightest awareness of his blatant impairment.

"Hey, no problem," he rejoined with chilling nonchalance. "Babs'll take care of them."

Nothing in my vast clinical, psychophysical, phenomenological, or philosophical experience could have prepared me for the extraordinary condition of Chuck R. While his mind seemed to have effortlessly grasped the notion of a dish as *something to eat off* (he had, after all, managed to deal with everything from the fruit-cocktail cup to the cake plate without the slightest trace of confusion), the concept of a dish as *something to wash and dry later on* was apparently absolutely alien to his being. His wife had shopped, cooked, set the table, and was even now beginning to clear it. Did he really expect the poor woman to do the dishes as well? (Even Nietzsche, I imagined, would have offered at least to do the wineglasses.) Yet it was clear that the thought that he should perform any such compensatory labor, however inadequate, simply never entered Chuck R.'s skull.

Through the distorting lens of the amber nectar in my upraised brandy snifter, I gazed around the den. Within my visual field was a VCR, a personal computer, and a cordless telephone. But despite all these reassuring accoutrements of contemporary culture, I realized that Mr. R. was helplessly frozen in some past epoch, trapped like a pathetic prehistoric mammoth in the glacial deposits of a gro-

tesque TV-sitcom version of a world that had moved on without him.

POSTSCRIPT

Since originally publishing the strange case of Mr. R., I have been made aware of a surprising number of similar syndromes in the neurological literature. I am especially indebted to Dr. Emma Porter for calling my attention to the almost comically enantiomorphic behavior of a patient in her own practice, a woman who mistook her husband for a lawnmower.

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