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# CHLA

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# ABSC

# NEWSLETTER



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WINTER 1977

## FIRST ISSUE - CHLA/ABSC NEWSLETTER

Most of you receiving this issue will recall a similar publication, almost identical in format, CAN GROUP NEWS, which published its first and last issue way back in April of 1976. Upon formation of the Canadian Health Libraries Association, it was decided to merge CAN GROUP NEWS into CHLA/ABSC NEWSLETTER. Reason? CAN GROUP NEWS was purely an experimental issue designed to fill an informational void until the feeling of Canadian health librarians about a separate and distinct library organization could be tested. The earlier publication, since the Canadian Group of MLA, its sponsor, lacks a treasury, was printed and distributed solely as an act of charity. Also, it was felt that a CHLA NEWSLETTER could address itself to a wider readership than just Canadian members of MLA, while the existence of two such newsletters, with overlapping interests, could not be justified. Now that the CHLA is in the process of being established, presumably as hordes of Canadian health librarians send in their dues for charter membership, we hope to put this newsletter on a regular publishing basis--probably quarterly for the first year, with the second issue planned for April or May. While the first mailing of the newsletter will go out to any potential member of CHLA, subsequent issues will be sent only to those who have paid their dues. To make the Newsletter successful, the editor, based in a lonely outpost in the Atlantic Ocean, solicits and invites your contributions to future issues. Announcements regarding meetings, continuing education opportunities, descriptions of new library facilities or libraries in the planning stages, changes in assignment or jobs, job opportunities in health science librarianship, and similar material, would be of interest. Feature articles on libraries or special library services would also be welcomed. Please send your news contributions to: Richard B. Fredericksen, Editor, CHLA/ABSC NEWSLETTER, Health Sciences Centre, Memorial University of Newfoundland, St. John's, Newfoundland, A1B 3V6.

CANADIAN HEALTH LIBRARY ASSOCIATION

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA





DE: David Crawford  
President

Comme vous savez déjà, un comité, composé de moi-même comme président, Richard Fredericksen, Philippe Lemay, Alan MacDonald, Dorothy Sirois, Martha Stone et Sheila Swanson fut établi durant l'été, 1975 afin d'examiner l'organisation des bibliothécaires canadiens(nes) des sciences de la santé.

Notre comité présenta son rapport final au mois de mai 1976 et il fut discuté aux assemblées du M.L.A. et de C.A.S.L.I.S., Section de la santé au mois de juin. Vu l'agrément donné au rapport par ces deux groupes et les réactions positives reçues lors du sondage l'an dernier, le comité s'est réuni à Vancouver en octobre 1976, et discuta l'exécution des cinq recommandations présentées dans notre rapport final.

Nous avons pris les décisions suivantes:

1. Que les membres du comité devrait constituer le premier exécutif du ABSC. Notre terme finira lors de l'assemblée annuelle au mois de juin 1977. Nous organiserons des élections par courrier pour choisir un nouvel exécutif durant ce temps. J'ai été nommé président, Alan MacDonald a été nommé secrétaire/trésorier et Richard Fredericksen a été nommé rédacteur des publications.

2. Une constitution provisoire fut rédigée. Cette constitution sera révisée avant le mois de décembre 1978 et sera mise aux voix de tous les membres.

3. Nous avons décidé que la première assemblée annuelle aurait lieu à Montréal au mois de juin 1977 juste avant l'assemblée du C.L.A.. Mme Babs Flower a très gentilement accepté de s'occuper des arrangements locaux.

4. On a décidé de publier le premier fascicule des "Nouvelles" du ABSC tôt en 1977 et de publier le deuxième avant l'assemblée annuelle.

5. Comme vous verrez dans la constitution, la cotisation sera de \$15.00 par année. Toutefois pour la période se terminant en juin 1977, le paiement au prorata sera de \$7.50. Si vous désirez être membre de la ABSC et si vous désirez encourager son développement, enjoyez votre cotisation au trésorier aussitôt que possible. Une formule d'application est incluse. Puisque nos fonds sont à sec, nous ne pouvons pas vous envoyer d'autres avis d'abonnement. Alors nous vous prions, de nous envoyer votre chèque dès aujourd'hui.

L'exécutif fera son possible pour contribuer au développement de la ARSC mais l'Association ne peut réussir sans votre appui.



FROM: David Crawford  
President

As you are aware, an ad-hoc committee consisting of myself, as Chairman, Richard Fredericksen, Philippe Lemay, Alan MacDonald, Dorothy Sirois, Martha Stone and Sheila Swanson was established in the summer of 1975 to investigate the organizational needs of Canadian Health Librarians.

Our committee presented its final report in May 1976 and it was discussed at both the M.L.A. and C.A.S.L.I.S. Health Sciences Section meetings in June. Following the acceptance of the report by both these groups and bearing in mind the strong positive response we received by mail, the Committee met in Vancouver in October 1976 and discussed the implementation of the five recommendations in our final report.

We decided on the following points:-

1. That the members of the ad-hoc Committee should form the first Executive of the C.H.L.A.. We will serve only through the annual meeting in June of 1977 and will organize mail elections for an executive during this time. I was appointed President, Alan MacDonald was appointed Secretary/Treasurer and Richard Fredericksen was appointed Editor of Publications.

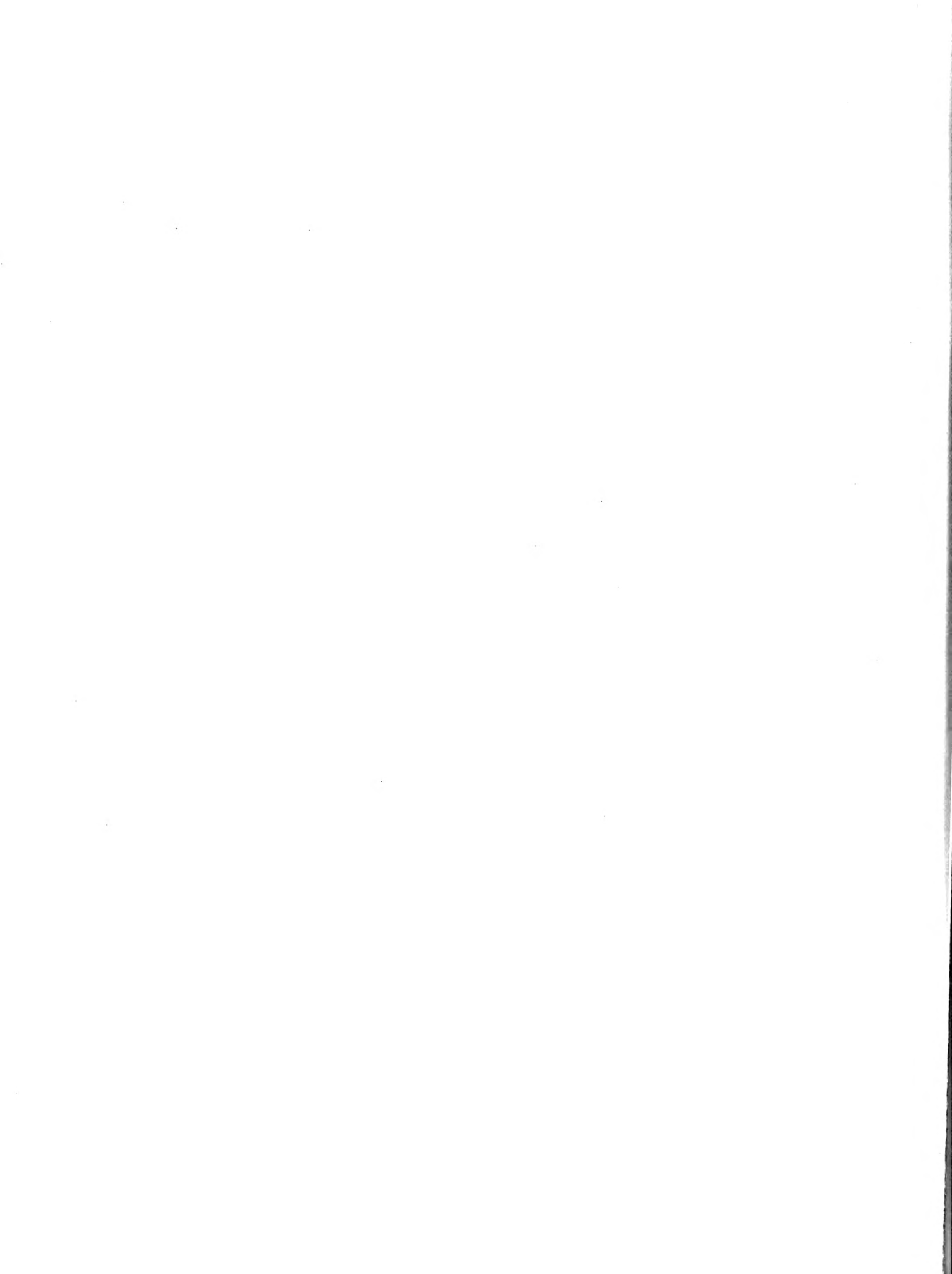
2. An interim constitution was written and appears elsewhere. This constitution will be revised before December 1978 by the elected executive and then be voted on by all members.

3. It was agreed to hold the first annual meeting in Montreal in June 1977 just before the C.L.A. meeting. Mrs. Babs Flower has very kindly accepted the post of local arrangements organizer.

4. It was agreed to issue the first number of the C.H.L.A. Newsletter early in 1977 and to issue the second before the Annual meeting.

5. As you will see from the Constitution, the membership fee will be \$15 per annum; however, for the period ending in June 1977 this will be prorated to \$7.50. If you wish to be a member of the C.H.L.A. and help to foster its growth now is the time to send your membership fee to the Treasurer. A form is attached for this purpose. As we presently have no funding we will be unable to send out subscription reminders so I would ask you to, please, put your cheque in the mail today.

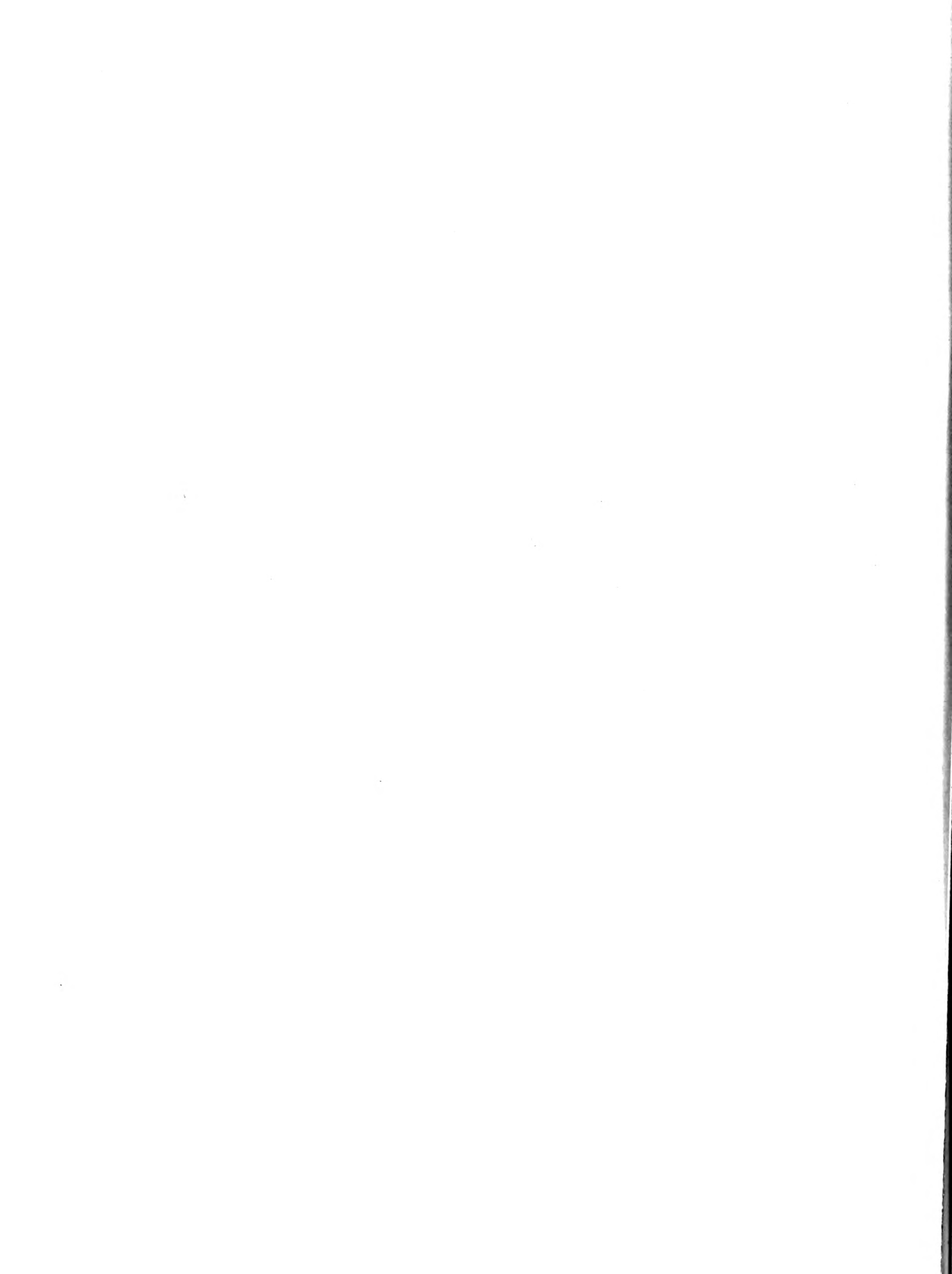
Though the Executive will do all it can to assist in the development of the C.H.L.A. the Association can only succeed if you join and assist us in this important task.



CANADIAN HEALTH LIBRARIES ASSOCIATION

Constitution and By-Laws (November 1976)

- Article 1. The name of the association shall be the Canadian Health Libraries Association.
- Article 2. The purpose of the Canadian Health Libraries Association shall be to promote the provision of quality library service to the health community in Canada by communication and mutual assistance.
- Article 3. Membership shall be open to all persons or institutions interested in the aims of the Association.
- Article 4. The business of the Association shall be conducted and managed by an Executive Committee.
- Article 5. The Executive shall consist of a President and six additional elected members. The first Executive shall hold office from 4 October 1976 until the conclusion of the Annual Meeting in 1977, but future Presidents and Executive Members shall be elected for two year terms of office.
- Article 6. In order to properly phase in the terms of office of future Executives, the President take office at the conclusion of the Annual Meeting in 1977 shall be elected for a full two year term. The three Executive members receiving the highest number of votes shall also serve a full two year term but the remaining three Executive members elected shall serve until the conclusion of the Annual Meeting in 1978.
- Article 7. The Executive shall appoint an Editor of Publications who, if not an elected member of the Executive, shall be a non-voting member of the Executive.
- Article 8. The Executive shall select one of its members to be Secretary/Treasurer.
- Article 9. The Executive shall have the power to appoint Committees.
- Article 10. The fiscal year of the Association shall be June 1 through May 31 except that the initial fiscal year shall be October 4, 1976 through May 31, 1977.
- Article 11. The annual membership fee of the Association shall be \$15. If unpaid three months after the beginning of the fiscal year the dues shall be considered in arrears and the member shall be suspended from membership. For the fiscal year October 1976 through May 31, 1977 the dues payable shall be \$7.50.
- Article 12. The Annual General Meeting of the Association shall be held in the same city and at approximately the same time as the Annual Conference of the Canadian Library Association.
- Article 13. All elections for officers of the Association shall be conducted by mail ballot of all members of the Association. Each member of the Association shall have one vote for each vacant position and the candidate(s) with the highest number of votes shall be declared elected until all vacancies are filled.

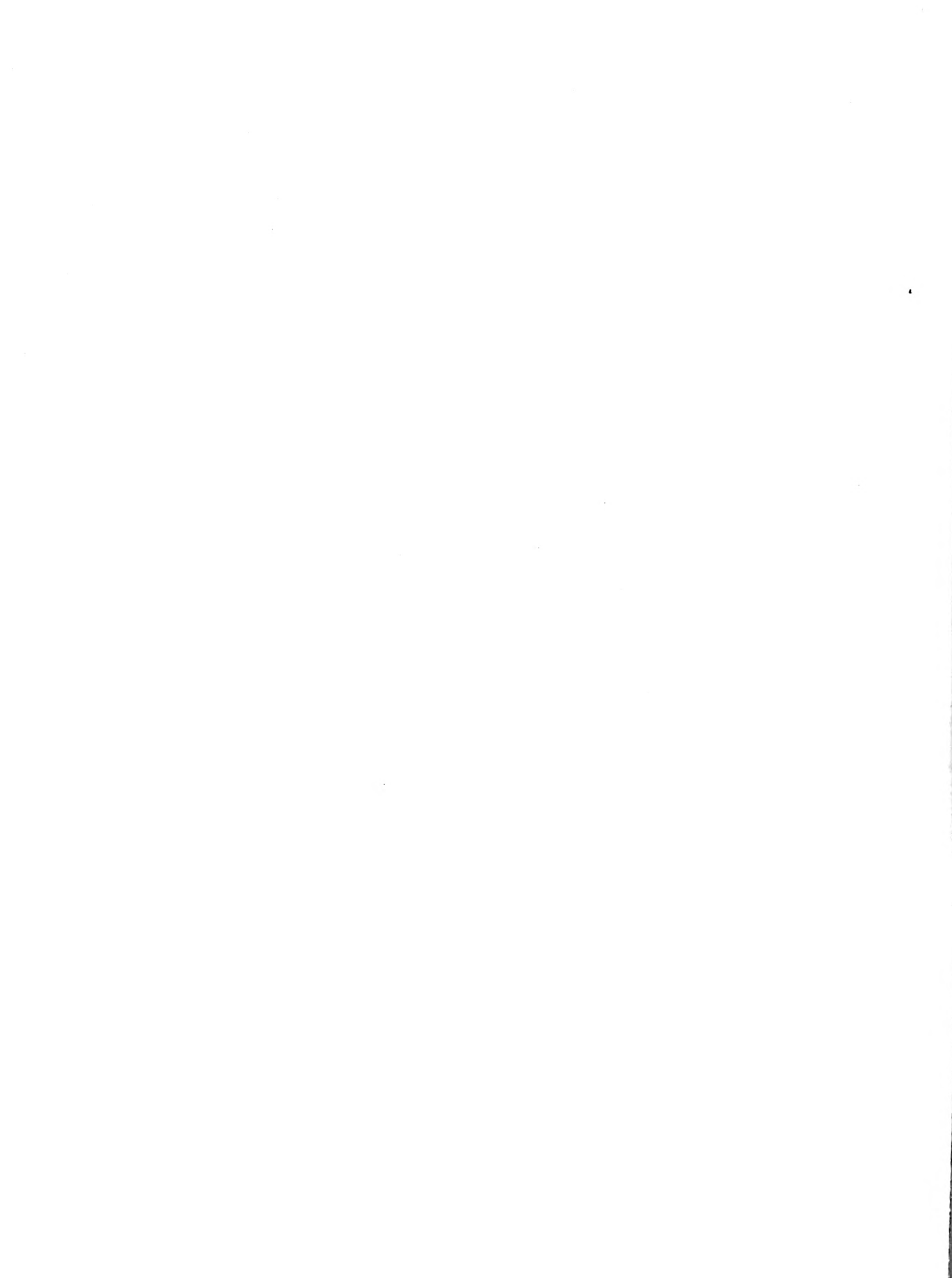


- Article 14. Proposals to amend this constitution or by-laws or to decide on other matters determined by the Executive shall be conducted by mail ballot of all members. A majority of those voting shall be required to carry any proposal.
- Article 15. This constitution and by-laws shall remain in force from October 4, 1976 until not later than December 31, 1978 when a constitution and by-laws approved by a majority of members voting by mail ballot shall take effect.
- Article 16. The conduct of the meetings of the Association shall follow Robert's Rules of Order, Revised, in the latest edition.

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

Statuts et reglements (Novembre 1976)

- Article 1. L'Association sera connue sous le nom "Association des bibliothèques de la santé du Canada".
- Article 2. Le but de l'Association des bibliothèques de la santé du Canada sera de voir à la promotion de la qualité des services de bibliothèque offerts à la communauté de la santé du Canada et ce par la communication et l'aide mutuelle.
- Article 3. Toutes les personnes ou institutions intéressées aux objectifs de l'Association pourront devenir membre de l'Association.
- Article 4. Les affaires de l'Association seront menées et administrées par un Comité exécutif.
- Article 5. L'Exécutif sera composé d'un Président et de six membres additionnels élus. Le premier Exécutif devra siéger de 4 octobre 1976 jusqu'à la clôture de l'Assemblée annuelle de 1977. Toutefois, les Présidents et les membres de l'Exécutif à venir seront élus pour un mandat de deux ans.
- Article 6. Dans le but d'établir la période d'activité des Exécutifs à venir, le Président choisi à la clôture de l'Assemblée annuelle de 1977 sera élu pour une période de deux ans. Les trois membres de l'Exécutif qui auront reçu le plus grand nombre de votes devront aussi remplir un mandat de deux ans, mais les trois autres membres élus de l'Exécutif devront être en place jusqu'à la clôture de l'Assemblée annuelle de 1978.
- Article 7. L'Exécutif devra nommer un Editeur de publication qui, s'il n'est pas un membre élu de l'Exécutif, sera un membre non votant de l'Exécutif.





- Article 8. L'Exécutif devra choisir un de ses membres comme secrétaire-tresorier.
- Article 9. L'Exécutif aura le pouvoir de nommer des Comités.
- Article 10. L'année budgétaire de l'Association ira du 1er juin au 31 mai, sauf pour la première année, où elle ira du 4 octobre 1976 au 31 mai 1977.
- Article 11. La cotisation annuelle de l'Association sera de \$15.00. Si non payé dans les trois premiers mois de l'année budgétaire, le montant dû sera considéré comme arrérage et le membre sera suspendu comme membre de l'Association. Pour l'année budgétaire d'octobre 1976 au 31 mai 1977, la cotisation demandée sera de \$7.50.
- Article 12. L'assemblée générale de l'Association se tiendra dans la même ville et environ à la même date que la Conférence annuelle de l'Association canadienne des bibliothèques.
- Article 13. Toute élection de membre du bureau de l'Association devra se faire Par courrier par tous les membres de l'Association. Tous les membres de l'Association auront droit à un vote pour chaque poste vacant et le(s) candidat(s) ayant reçu le plus grand nombre de votes sera (seront) déclaré(s) élu(s) jusqu'à ce que tous les postes vacants soient remplis.
- Article 14. Toute demande d'amendement aux présents statuts ou règlements ou pour examiner toute autre décision prise par l'Exécutif devra se faire par courrier par tous les membres. Un nombre majoritaire de votes sera nécessaire pour l'approbation de toute demande.
- Article 15. Les présents statuts et règlements seront en vigueur du 4 octobre 1976 au 31 decembre 1978 au plus tard, et alors des statuts et règlements approuvés par la majorité des membres votants par courrier entreront en vigueur.
- Article 16. La conduite des réunions de l'Association devra se faire selon la dernière édition du "Robert's Rules of Order, Revised".



NEW CANADIAN HOSPITAL LIBRARY STANDARDS AVAILABLE

The Canadian Council on Hospital Accreditation has recently published the 1977 Guide to Hospital Accreditation. The expanded section on "Staff Library Services" will undoubtedly be of interest to Canadian health librarians. The editor invites comments on the standards for publication in the next issue of the NEWSLETTER. The price is \$7.50 plus postage and handling. Inquiries regarding the new Guide should be sent to:

Canadian Council on Hospital Accreditation  
25 Imperial Street  
Toronto, Ontario  
M5P 1C1

FUTURE MEETING DATES

- May 30-June 4th, 1977                      Special Libraries Association, Annual Meeting, New York, New York.
- June 9th, 1977                                Canadian Health Library Association, Queen Elizabeth Hotel, Montreal, Quebec. (See preliminary program announcement elsewhere in this issue).
- June 11-16th, 1977                         Medical Library Association, Annual Meeting, Olympic Hotel, Seattle, Washington (See MLA Housing Form and Special Low Cost Travel Information elsewhere in this issue).
- June 14th, 1977                              Canadian Group of MLA (same place as Annual Meeting of MLA). Canadian Group Breakfast and Annual Business Meeting, June 14, 0700-0830. Also, informal cocktail party will be announced later.
- August 8-12, 1977                            MEDINFO 77, Toronto, Ontario. For more information write MEDINFO 77 Organizing Committee, Dr. Jan Brandejs, P.O. Box 8650, Ottawa, Ontario, K1G 0G8.
- October 27-29th, 1977                      North Atlantic Health Sciences Libraries, A Regional Group of the Medical Library Association, Annual Meeting, Montreal, Quebec.
- September 1979                                International Congress on Medical Librarianship, 4th, Belgrade, Yugoslavia.



PRELIMINARY PROGRAMME:

CANADIAN HEALTH LIBRARIES ASSOCIATION

ATELIER 1977: WHERE'S WHAT?

- Place --Montreal's Queen Elizabeth Hotel, June 9, 1977.  
In association with the annual meeting of the CANADIAN LIBRARY ASSOCIATION.
- Personnel --Library personnel in Canadian health facilities, gathered for the first formal annual meeting of the newly-formed CANADIAN HEALTH LIBRARIES ASSOCIATION.
- Purposes --(a) To provide an opportunity for formal and informal exchange among health sciences library personnel on common problems and possible solutions
- (b) To provide information on human and material resources available in our field in Canada.
- (c) To conduct the business of the Association.
- Program
- 8:45 - 9:20 Registration, with coffee and buns
- 9:20 - 9:30 Chairman's Remarks: Welcome, The Association, and Atelier 1977
- 9:30 - 10:30 WHERE'S WHAT?
- A presentation of not more than 10 minutes, including opportunity for brief questioning, given by a representative of each of the following in turn, who will describe something of its activities and information resources:
1. Health Sciences Resource Centre, CISTI
  2. Health and Welfare Canada
  3. Canadian Nurses Association
  4. Canadian Hospital Association
  5. Canada's Own Health Sciences Resources
  6. Universities in Quebec
- 10:30 - 10:50 Coffee
- 10:50 - 11:15 Questions and discussion with and among the WHERE'S WHAT PANELISTS.
- 11:15 - noon Business meeting of the CHLA
- LUNCH



ATELIER 1977: WHERE'S WHAT (Cont'd.)

2:00 - 3:15 Major address with general discussion delivered by a Canadian medical personality

General topic area: the role of the hospital library as a resource for continuing education of health sciences personnel

Possible title: Relay Points for Continuing Education

Formal adjournment by 3:30 p.m. For those who may be interested, however, a short film can be shown at that time, such as MLA's Rx Information (if that has not been overdone for such an audience)

Also, there is the possibility that CISTI's Health Science Resource Centre may offer a MEDLINE refresher course in Montreal just prior to the meeting. More information on this will follow in the next issue. Information supplied by M.A. Flower

Program Organizer  
380 Olivier Avenue  
Westmount, Quebec  
H3Z 2C9

U BETTER JOIN SOON

The CHLA Treasurer, the amazing Alan MacDonald, reports that membership in the fledgling Association now numbers 60 and is growing daily. This will be the first and last "free" issue of the Newsletter. If you wish to receive future issues, you had better join today. Two applications for membership have been thoughtfully included as unnumbered pages at the end of this issue. Forthcoming issues will have many more special features such as: a review of the effects of the Simon Report, 25 years after; listing of valuable publications of interest to Canadian health librarians; a special message from the President of CHLA; an article describing the library and services of a Canadian health library; final plans for the first annual meeting of CHLA; other choice items of news. Send in your dues today!!! Personal and institutional memberships, gladly accepted.





# MLA HOUSING FORM

## 77th Annual Meeting—June 11-16, 1977

### Seattle, Washington

The OLYMPIC HOTEL, headquarters for the 1977 Annual Meeting, is an older hotel of excellent reputation. Featuring recently remodeled rooms and an enclosed walkway to the hotel garage and airport bus terminal.

#### OLYMPIC HOTEL

Single Room .....	\$ 25.00- 38.00
Double (one double bed) .....	\$ 35.00- 44.00
Twin (two twin beds) .....	\$ 35.00- 44.00
Suite (one bedroom) .....	\$ 70.00-200.00
Extra Bed .....	\$ 6.00

The WASHINGTON PLAZA, located five blocks from the Olympic, boasts the most modern rooms in the city with full glass walls in the Tower Wing. Rooms in the Benjamin Franklin Wing are pleasant but not air conditioned. Indoor adjacent parking is available.

#### WASHINGTON PLAZA

		Benjamin Franklin Wing
	Tower Wing	
Single Room .....	\$ 37.00- 43.00	\$ 23.00
Double (one double bed) ..	\$ 45.00- 51.00	\$ 31.00
Twin (two twin beds) .....	\$ 45.00- 51.00	\$ 31.00
Suite (one bedroom) .....	\$ 90.00	
Extra Bed .....	\$ 8.00	\$ 8.00

The SEATTLE HILTON is a modern facility with large guestrooms, only two blocks from the Olympic. Enclosed parking is available.

#### SEATTLE HILTON

Single Room .....	\$ 29.00- 35.00
Double (one double bed) .....	\$ 36.00- 42.00
Twin (two twin beds) .....	\$ 36.00- 42.00
Suite (one bedroom) .....	\$115.00
Suite (two bedroom) .....	\$140.00
Extra Bed .....	\$ 7.00

RATES DO NOT INCLUDE 5.4% SALES TAX

MAIL TO:

**MLA HOUSING BUREAU**  
1815 Seventh Avenue  
Seattle, WA 98101

#### PLEASE OBSERVE THE FOLLOWING:

- Names of all occupants must be provided for all accommodations requested
- Assignments will be made in order received
- Reservations will be held only until 6:00 p.m. of the day of arrival, unless reservations are guaranteed.
- Please be sure to indicate a first, second and third choice of hotel.
- **HOTEL RESERVATIONS MUST BE RECEIVED BY MAY 20, 1977,** to assure availability of accommodations. MLA cannot assist in providing reservations after that date.
- Confirmations will be mailed to you promptly. Phone requests for reservations or changes will not be accepted
- Please notify the Housing Bureau of all changes and cancellations in writing. After June 3, write directly to the hotel.

Confirmation will be sent to:

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

#### CHOICE OF HOTELS

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

#### PLEASE INDICATE PREFERRED RATE WITHIN RANGE SHOWN.

\_\_\_\_\_ Single occupancy, rate range from \$\_\_\_\_\_ to \$\_\_\_\_\_ per day.

\_\_\_\_\_ Double bed, double occupancy, rate range from \$\_\_\_\_\_ to \$\_\_\_\_\_ per day  
(please list both occupants)

\_\_\_\_\_ Twin beds, double occupancy, rate range from \$\_\_\_\_\_ to \$\_\_\_\_\_ per day.  
(please list both occupants)

\_\_\_\_\_ Multiple occupancy for (3 or 4 only) \_\_\_\_\_ persons, rate range from \$\_\_\_\_\_ to \$\_\_\_\_\_ per day.  
(please list all occupants)

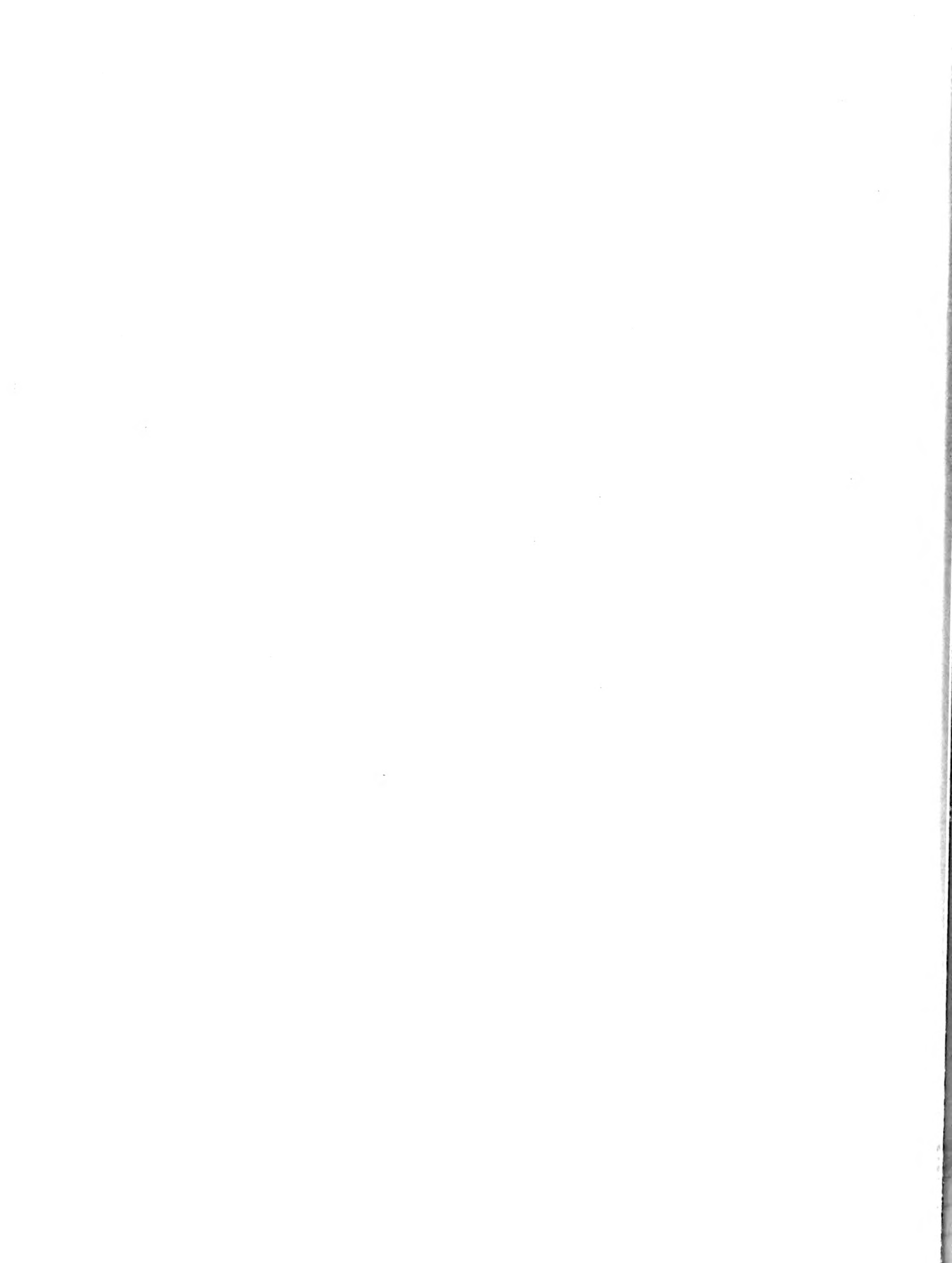
Arrival	AM
Date	PM
Departure	AM
Date	PM

\_\_\_\_\_ Check if you wish a guaranteed reservation. Hotel will contact you requesting deposit.

\_\_\_\_\_ Check if accompanied by a request for adjacent room(s). Families or others requiring adjacent rooms must indicate this on the form and submit required number of forms simultaneously.

Forms Occupied By:

Name	Address	For Bureau Use Only
		Received at Housing Bureau
		Processed to Hotel/Motel
		Confirmed to Guest



SPECIAL LOW COST AIR TRAVEL PLAN FOR SEATTLE MLA MEETING

The Medical Library Association has made available a special reduced group travel rate for those Canadian medical librarians who wish to attend the annual meeting in Seattle. A block of reservations has been booked for Canadians from Toronto to Seattle on Saturday, June 11th, with a return on Friday, June 17th. The special rate will be \$250.00 round trip Toronto/Seattle, a savings of \$106.40 over the normal \$346.50 fare. In order to take advantage of this plan and conform to CAB requirements, members will need to prepay U.S. \$65.00, before May 1, 1977. This amount will be credited to the Seattle hotel where you have made reservations (see facing form for making hotel reservations). In addition, the following requirements must be met:

- Reservation for group rate must be made prior to May 1, 1977.
- A minimum stay of two nights in a hotel is required if a Saturday night is included.
- If a Saturday night is not included, six nights in a hotel are required. The six nights would not have to be restricted to one hotel, but would have to be restricted to hotels on the West Coast.
- Person must use same airline for going and return portion of the trip.
- These rates will apply even if a person wishes to leave for Seattle before June 11th.
- No travel is allowed between 2:00 p.m. and midnight on Friday or Sunday.
- Must go through Toronto to take advantage of this fare.

Those who wish to take advantage of this fare should complete the form below and send it to Conventus, Suite 203, 1518 K. Street, N.W., Washington, D.C., 20005, U. S. A. A cheque or money order for \$U.S. 65.00 should accompany the form. Confirmation and further information regarding air tickets will be sent by Conventus.

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Name \_\_\_\_\_ Street Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Hotel for MLA Seattle Meeting: \_\_\_\_\_

Date Leaving Toronto \_\_\_\_\_ Date Leaving Seattle \_\_\_\_\_

Send To:

Conventus  
Suite 203  
1518 K Street, N.W.  
Washington, D.C. 20005  
U. S. A.



## MANITOBA HEALTH SCIENCE LIBRARIES ASSOCIATION FORMED

A Group of Manitoba health librarians recently organized to form the Manitoba Health Science Libraries Association. The group made the decision to organize on October 21, 1976.

The M.H.S.L.A. is composed of some twenty people who serve health workers from libraries in the hospitals, government agencies, private organizations and the universities of Winnipeg. It was felt tha M.H.S.L.A. would facilitate better use of existing medical resources and improve service to health clientele in Manitoba and particularly Winnipeg. Their first project is to prepare a union list of periodicals located in the participating libraries.

Any correspondence should be directed to: Mrs. R. Kroeker, Librarian, M.A.R.N. 647 Broadway Avenue, Winnipeg, Manitoba R3C 0X2.

## THE OTTAWA-HULL HEALTH SCIENCE LIBRARIES GROUP

Is there a Health Science Libraries Group in your area?

Two years ago as I was labouring in the jungle outpost of a small Ottawa hospital, I was approached by a runner with a message in a forked stick (mail strike again). Deciphering the message, I discovered that I was being invited by Miss Mabel Brown, Chief Librarian of the Ottawa Civic, a large teaching hospital, to attend a meeting of area librarians. Object: the formation of a "Group" for exchange of information and relief parcels. Being abjectly in need of both, I presented myself at this first meeting.

A disparate group gathered around the table at the Dr. George Williamson Library in the Civic. Our intrepid leader, Miss Brown, ably assisted by CISTI's Health Resources Librarian, Mrs. Ann Nevill, in charge of mobile coffee urn, formed the knowledgeable nucleus. Clustered around in various states of bewilderment, were representatives of the large national libraries, 'WHO are these odd people?' the large educational institutes, 'WHAT are these odd people?' and the odd people - namely librarians from the tiny out-ports of the science network. We have met every two months and in a different library each time, since then.

We have never become an homogenous group, and never will - but we have learned to appreciate the common denominator that links us, large and small: our effort to deliver scientific information quickly and accurately wherever needed. We representatives of small libraries have benefited from the warm personal contacts with librarians from the larger libraries. They have gained an appreciation of our problems while tactfully guiding us toward useful solutions. Such matters as interlibrary costs and copyright laws have been discussed in a very helpful way. This willingness to communicate and cooperate has been our intangible reward. A union list of serials held in local hospitals is our tangible result.

After two years and nine meetings we find the efforts increasingly worthwhile. Mrs. Nevill has moved away from our area and we will miss her enthusiasm and diligence. Fortunately, we still have Miss Brown, our Chairman and can look forward to a year of growth. We would be very interested to hear from other such groups in Canada.

Mrs. E. Whyte, Librarian  
Riverside Hospital, Ottawa



THE ASSOCIATION OF CANADIAN MEDICAL COLLEGES  
SPECIAL RESOURCE COMMITTEE ON MEDICAL LIBRARIES:  
ITS ORIGINS, DEVELOPMENT AND CURRENT CONCERNS

Each year since 1968 Canadian medical librarians who are administrators of Canadian medical school libraries have enjoyed the opportunity of meeting together to discuss matters of common concern. A number of opportunities for communication and joint problem solving are offered to Canadian medical librarians by various organizations. The Canadian Library Association and its various special groups, the Medical Library Association and its regional sections, a variety of provincial associations and, most recently and excitingly, the Canadian Association of Research Libraries or its analog in the United States, the Association of Research Libraries, of the Association of Canadian Medical Colleges Special Resource Committee on Medical Libraries provides a unique opportunity, since such a forum brings together those who hold administrative responsibility for their particular libraries. By their active participation in the Special Resource Committee of APMC, medical library administrators have been able to assure that quality library service exists in support of the teaching and research carried on in the medical colleges in Canada. The primary objective of this group remains the furtherance of communication of its members in order to assist in the development of solutions to individual as well as collective problems.

One of the stated goals of the group is to advise the Health Sciences Resource Center of the Canada Institute for Scientific and Technical Information of actions which Canadian Medical School libraries would find of assistance. To this end the Head of the Health Sciences Resource Center holds ex-officio membership in the Special Resource Committee. More recently, in 1975, the Director of the Health and Welfare Library was invited to participate on the same basis. While the primary mandate of the Health and Welfare Librarian is to serve the needs of the federal department, the collections and services of this library are an important national resource for all Canadian medical school libraries. The membership of the Committee consists in the main of the administrative librarians of each of the sixteen medical school libraries in Canada plus an additional librarian in any medical school if requested to attend by the administrative librarian in charge. Librarians in charge of special services related to Health Sciences programs which are relevant to the committee's regional or national activities are also included.

The committee has not been an idle one. The years since its inception have seen the completion of a number of worthwhile programs on the part of the group. Prominent amongst these are the development of "Standards for Libraries in Canadian Hospitals" a joint project carried on by representatives of the Ontario Medical Association, the Special Resource Committee on Medical Libraries and the CASLIS section of CLA. These standards were unanimously endorsed by the Committee in 1974 and subsequently published. A Joint Proposal for Federal Funding of National Research Libraries in Science and Technology has also been prepared. Building upon collections which supported the medical teaching and research programs, this committee has continued to compile and co-ordinate statistical gathering as an aid in planning. These are only a few of the programs in which the committee has co-operated in the past.

Turning to the 1976 Vancouver meeting, committee members enjoyed the opportunity of participating in the plenary sessions which were especially rewarding this year with their emphasis upon the teaching of health sciences students and the training of the cost conscious physician. However, the primary purpose in attending the meeting was to participate in the deliberations of the Special Resource Committee. The agenda prepared by Mrs. Beatrix





Robinow, out-going chairman of the Committee, was extensive and highly relevant. The discussion included a review of the Medline charging policies which vary dramatically throughout Canadian Medline centers both in terms of actual dollars as well as the philosophy of charging; charging for inter-library loans; a national catalogue for audio-visual materials and statistical compilation and comparison for all medical school libraries in Canada. Canadian medical librarians are constantly vigilant of development at the U.S. National Library of Medicine. To this end a resource committee unanimously endorsed the recommendation that Canada Institute for Scientific and Technical Information make every possible effort to make available additional data bases to Canadian centers very soon after they are available to U. S. Medline stations.

Two invited guests enlivened the discussion this year. Mr. William Fraser, Head of the British Columbia Medical Library Service, reported on the development of the service, its prospects and its problems. In his capacity as chairman of the Program Committee for the Medical Library Association meeting in Seattle, he also described informally some of the plans for the 1977 meeting. Mr. Alan Soroka of the University of British Columbia discussed the possible development of the revised Canadian copyright legislation in the light of recent developments in the U. S. courts. Doubtlessly extra-territorial laws will have an indirect effect upon Canadian libraries in the form of increased requests for material from Canadian libraries. Soroka, a lawyer, a librarian, and a government consultant on revising copyright legislation in Canada, personally predicted that Canadian legislation will probably proceed in the direction of a "collective copyright society" to which various educational and other institutions would pay a copyright licencing fee. He did not wish to speculate on the size of the fee. The Canadian copyright situation remains at this stage unresolved.

Another matter that received considerable attention of the Medical Librarians in attendance was the announced major review of the objectives, services and organization of the National Library. Mindful that various user groups as well as the National Library Advisory Board had been asked to participate in the review, the Special Resource Committee charged the incoming chairman with the responsibility of investigating and making input on behalf of Canadian medical college libraries to the National Library review.

This year's meeting was well attended by administrative librarians from Vancouver to St. John's. All Canadian medical school libraries except two were represented during the deliberations. The incoming Chairman of the Group is Frances Groen, McGill University, and the Secretary of the Group is Henrietta Schmidt, Université de Ottawa.

FROM MCGILL:

#### REPORT ON THE MEDLINE EVALUATION STUDY

In the summer of 1975, an evaluation study of the MEDLINE service was undertaken by the Computer Services Librarian of the Medical Library. Because the system had been operating for over two years, it was felt that a formal appraisal of the service was appropriate. A questionnaire was sent to 248 MEDLINE users of whom 50 were S.D.I. subscribers. A total of 160 completed questionnaires were returned, i.e. 64.5% response.

The prime objective of our survey was to find out how satisfied our users were with the MEDLINE service. We also wanted to know who the users were, how they paid for their searches, and how much they were willing to pay should there be any future increase in price. As secondary objectives, we wished to find out how effective our publicity program was, what other bibliographic services our clients consulted, and how they felt about the



appointment system which we had adopted since the inception of the MEDLINE service. Some of the most interesting findings of our study are described in the following paragraph.

In general, our MEDLINE users appeared to be people with a great variety of educational and professional backgrounds in the fields of medicine and allied health sciences. Over 40% respondents were affiliates of the McGill Medical Faculty. The second biggest user group was the hospital staff (18.1%). Most of the respondents (72.5%) considered themselves researchers, compared to 12.5% who considered themselves clinicians. It turned out that over 90% of the users found MEDLINE either of major or moderate value to them. The small percentage (6.2%) who found MEDLINE to be of minor or no value mainly had topics outside the subject scope of the MEDLINE data base. The study also shows that most of our users (over 90%) felt that their presence during the search session was either necessary or useful in getting the best results. It was encouraging to note that there was a great number of positive comments from our users. On-line bibliographic services has indeed established its place in the Medical Library.

To conclude, we were quite satisfied with the MEDLINE study. Since the time of our study, we have added a number of new data bases and are still constantly reviewing on-line data bases that are of potential use to our clientele. Also, we plan to conduct similar evaluation studies on these new on-line services.

Those who are interested in getting a detailed report of the study should contact:

Mrs. Maureen Wong, Computer Services Librarian, Medical Library,  
McGill University, 3655 Drummond Street, Montreal, H3G 1Y6

#### PERSONAL NOTES

Verla Empey has been appointed the Librarian of the Wellesley Hospital in Toronto, replacing Elizabeth Marsland. Ms. Empey was formerly the Reference Librarian with the William Boyd Library of the Academy of Medicine of Toronto.

Patricia Goddard has joined the staff of the W.K. Kellogg Health Sciences Library of Dalhousie University and will serve as its Dental Librarian. She replaces David Noble who moved west to become the Librarian of the Cancer Control Agency of British Columbia.

Berti LeSieur has been appointed Head of Technical Services of the McGill University Medical Library. Mrs. LeSieur has been head of Cataloging at the McGill Medical Library since 1972 and assumed her new duties in October of 1976. She replaces Mrs. Jeanette Rudolph who retired in late 1976.

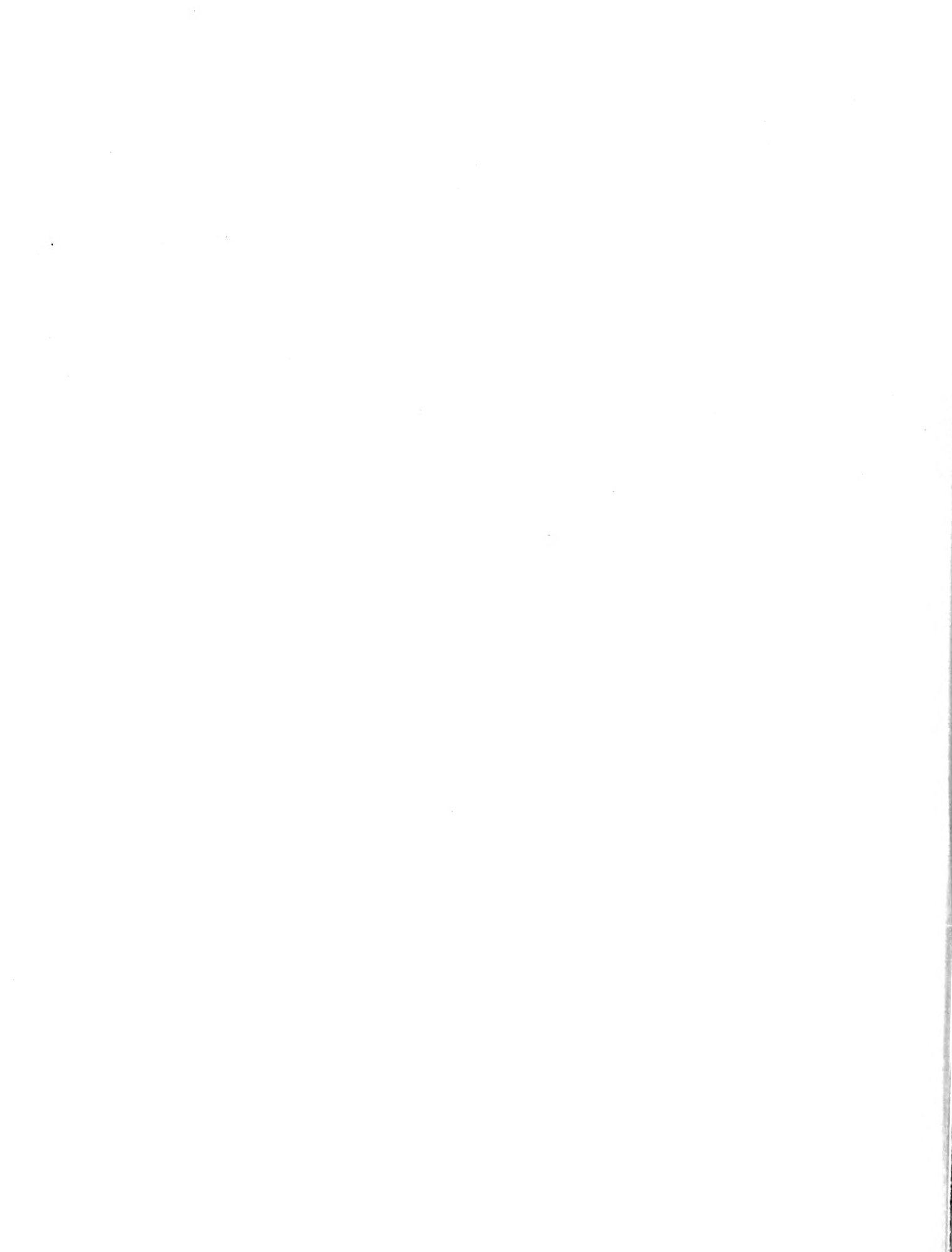
Larry Lewis has been appointed Librarian in Charge, Health Sciences Library of the University of Western Ontario. Larry was formerly the Music Librarian at U.W.O.

Elizabeth Marsland recently retired as the Librarian of the Wellesley Hospital in Toronto.

Marjorie Morphy has been appointed the Reference Librarian of the William Boyd Library of the Academy of Medicine of Toronto.

Dr. M. S. Smith was appointed Reference Librarian of Dalhousie's W.K. Kellogg Health Sciences Library.

Hanna Waluzyniec was appointed Head of Cataloging of the McGill University Medical Library. Ms. Waluzyniec is a graduate of the McGill University Graduate School of Library Science and has been Assistant Medical Librarian at the Montreal Children's Hospital since 1973.



## OTHER BRIEF NOTES FROM THE FIELD

The B.C. Medical Library Service became an operational MEDLINE Centre in late 1976.

The Kellogg Health Sciences Library of Dalhousie has recently established a weekly two hour in-service training seminar for professional staff, reference assistants, student library assistants and staff of local hospital libraries. Topics will include reference tools, summaries of current research, briefings on various teaching programs in the health sciences and activities of other libraries in the Halifax area.

Dorothy Fitzgerald of the Canadian Library of Family Medicine has recently published an article "Library Services for Family Physicians" (Canadian Family Physician 22: 101-116, July 1976). Contained in the article is a "Suggested Core List for Family Medical Centres." Intended as an aid to hospital libraries and family practice medical centre libraries, reprints of the article may be obtained from: Ms. Dorothy Fitzgerald, Canadian Library of Family Medicine, Medical Library, University of Western Ontario, London, Ontario, N6A 5C1.

The William Boyd Library of the Toronto Academy of Medicine was recently expanded as part of a general renovation project of the Academy. Included in the remodeling will be new facilities for the Canadian Society of Aviation Medicine Library and the Arthur Kelley Rare Book Room, both scheduled to formally open in April of 1977. The William Boyd Library, reported in the Canadian Medical Association Journal (116: 98, 8 January, 1977) as being the largest privately owned medical library on the continent, is headed by the ebullient Sheila Swanson.

The Medical Library of Memorial University of Newfoundland recently purchased a computer terminal which will permit it to join the MUN University Library's CLSI circulation system. The system features a light pen for reading bar-coded labels combined with a keyboard/display station and performs the functions of checkout, check-in, renewals, holds, overdue notices and similar circulation functions. The Medical Library expects to have the system operational sometime in the summer of 1977.

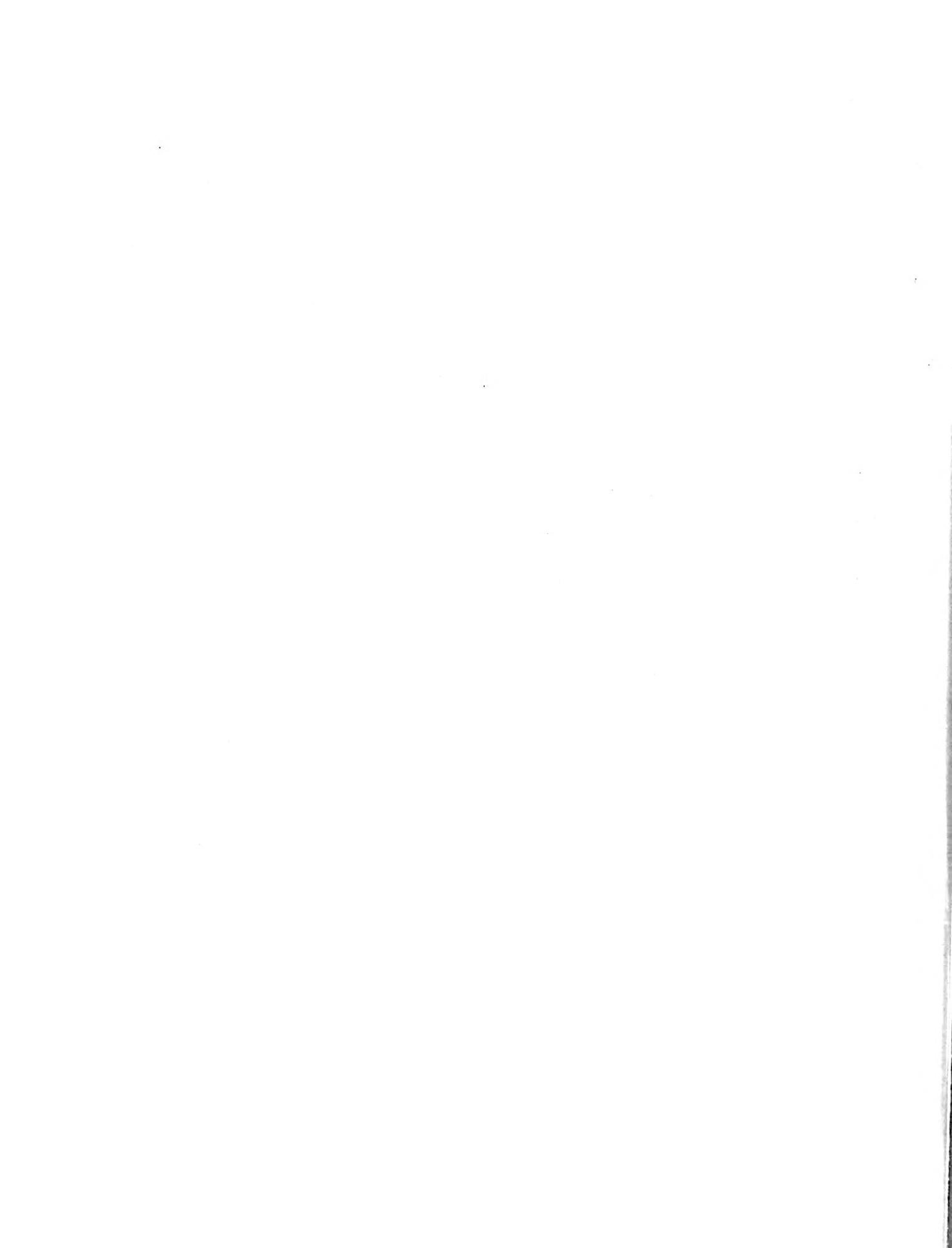
### McGILL MEDICAL AND HOSPITAL LIBRARIANS' ASSOCIATION

The McGill Medical and Hospital Librarians' Association is pleased to announce the forthcoming publication of the second edition of the Union List of Serials in Montreal Hospital Libraries/Catalogue collectif des périodiques dans les bibliothèques médicales d'hôpitaux de Montréal. The first edition came out in 1973 and has been out of print for some time.

The new edition is 25% larger and has over 500 new titles, bringing the total number of titles to about 2400. About half the old holdings statements have been changed. Three more hospitals are participating, making 40 in all.

The master file on magnetic tape, when updated, will be processed by a special program to produce the list in a photocomposed format which will be far more attractive and compact than the standard computer printout.

Subjects covered by the journals listed are: all branches of medicine, administration, criminology, dentistry, dietetics, education, hospital management, nursing, physiotherapy, preclinical sciences, psychology, rehabilitation, social work, sociology, and others.



Announcements with order forms will be sent to Québec and Ontario hospital libraries, CEGEPs, Canadian medical school libraries, and all purchasers of the first edition. Others wishing to receive announcements should write to: Elaine Waddington, Chairman, Union List Committee, Women's Pavilion Library, Royal Victoria Hospital, 687 Pine Ave. West, Montreal, Que. H3A 1A1.

#### LA MCGILL MEDICAL AND HOSPITAL LIBRARIANS' ASSOCIATION

La McGill et Hospital Librarians' Association a le plaisir d'annoncer la parution imminente de la deuxième édition de Union List of Serials in Montreal Hospital Libraries/ Catalogue collectif des Périodiques dans les Bibliothèques médicales d'Hôpitaux de Montréal. La première édition, parue en 1973, est épuisée depuis quelque temps.

La nouvelle édition accuse une augmentation de 25% par rapport à la précédente et contient plus de 500 nouveaux titres, ce qui porte le nombre de titres répertoriés à 2,400. Environ la moitié des entrées ont subi des modifications. Les collections de quarante hôpitaux figurent à ce catalogue collectif, soit 3 de plus que dans la première édition.

Lorsqu'il sera mis à jour, le fichier principal sera enregistré sur bande magnétique. Un procédé de photocomposition permettra la publication d'un catalogue beaucoup plus concis et de présentation plus agréable qu'elle d'un print-out traditionnel.

Parmi les sujets représentés dans ce catalogue collectif se trouvent toutes les spécialités médicales, l'administration, la criminologie, l'art dentaire, la diététique, l'éducation, la gestion d'hôpitaux, les soins infirmiers, la physiothérapie, les sciences para-cliniques, la psychologie, la rééducation, le service social et la sociologie.

Des avis de publication ainsi que des bon de commandes seront envoyés aux bibliothèques d'hôpitaux du Québec et de l'Ontario, aux CEGEPs, aux bibliothèques des facultés de médecine du Canada et à tous ceux qui ont acheté un exemplaire de la première édition. Toute autre personne désirant recevoir un avis est priée de s'adresser à: Elaine Waddington, Chairman, Union List Committee, Women's Pavilion Library, Royal Victoria Hospital, 687 Pine Avenue West, Montreal, P. Que., H3A 1A1.





# CHLA

# ABSC

# NEWSLETTER



2

ISSN 0700-5474

SPRING 1977

## EDITOR REFLECTS ON THE ISSUES

*The present (news) letter is a veru long one,  
simply because I had no leisure to make it shorter*

*-Blaise Pascal*

Thanks are due to all of you for your help, advice, contributions, encouragement and comments. Special thanks are due to Alan MacDonald who is our publisher, proof-reader, and mentor. As far as could be determined from the editor's location in Newfoundland, the first issue enjoyed a moderate success. It is hoped that its receipt prompted at least a few of you to join our fledgling ranks.... Issue number two is replete with many good things, including a Directory of CHLA/ABSC membership. With this in hand you can all proceed to contact your neighbor members and organize local chapters. Also featured....a letter from our President, an article on the BC Medical Library Service, a review of CISTI's Health Sciences Resource Centre and its services, a list of CISTI publications, a potpourri of other choice items PLUS a sprinkling of inspirational quotations throughout the text. Not included in this issue is the promised twenty-five year review of the Simon Report (Simon, Beatrice, Library Support of Medical Education and Research in Canada, Association of Canadian Medical Colleges, 1964). Unfortunately, due to yet another Newfoundland power failure, my calculator malfunctioned at a critical time in determining the anniversary date for this landmark paper. Laborious manual calculations caught the error, but only after the lights went on and the Newsletter was on its way to the printer. The Simon Report is only thirteen... The next issue, providing contributions are received during the summer months, will probably be published by the end of August. This will need to be determined or reviewed by the newly elected executive of CHLA/ABSC who will also appoint a new editor--possibly a person who knows both Canadian languages (the present editor knows neither). Assuming you will all renew your membership for 1977 (see handy form later in this issue) and that

CANADIAN HEALTH LIBRARY ASSOCIATION

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA



many of you will want to make contributions to the next issue, your articles and news items should still be sent to me who will forward them on to the appropriate person: Richard B. Fredericksen/Medical Library/Health Sciences Centre/Memorial University of Newfoundland/St. John's, Newfoundland/A1B 3V6.

CHLA/ABSC INTERIM EXECUTIVE

- President: David Crawford  
Medical Library  
McGill University
- Secretary/Treasurer: Alan MacDonald  
Health Sciences Library  
Dalhousie University
- Editor: CHLA/ABSC Newsletter: Richard Fredericksen  
Medical Library  
Memorial University
- Members at Large:
  - Philippe Lemay  
Canada Institute for Scientific  
and Technical Information
  - Dorothy Sirois  
Montreal Children's Hospital
  - Martha Stone  
Department of National Health  
and Welfare Library, Ottawa
  - Sheila Swanson  
Toronto Academy of Medicine Library

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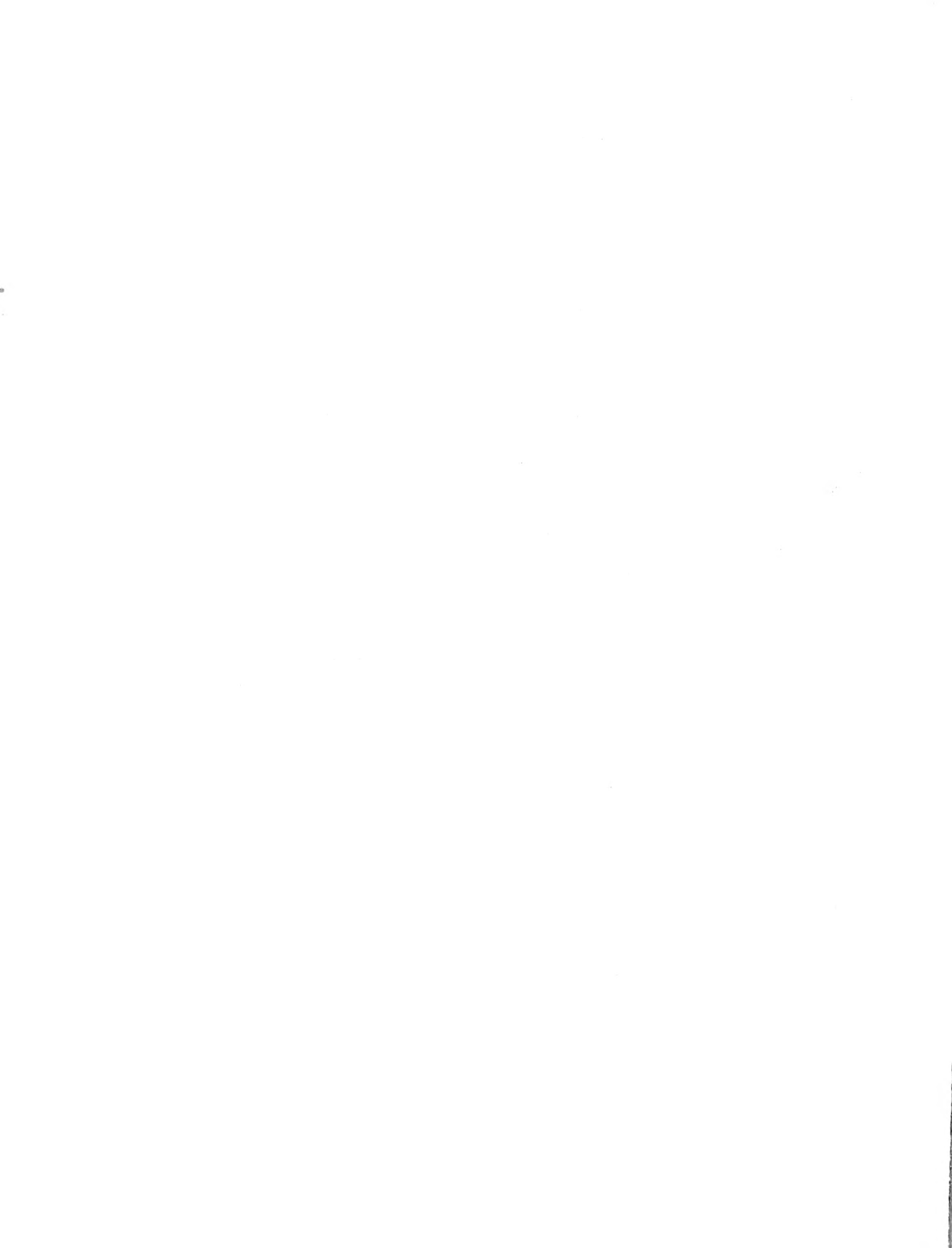
PHOTOCOPYING BANNED: SCI-FI SPECULATION

*Since a means had been found to monitor photoelemetry and laser xerography, detecting violations of the 2005 law, illegal xerography was done on a few ancient photocopiers, running on toner and guts. It was dangerous, but a few librarians, their licenses lifted, had succumbed to the glamour of easy minimum wage, and turned renegade. The risk was high--getting caught with 1/2 ounce of toner meant automatic expulsion to a time warp beyond bibliographic control--but Phlox and others like him continued to play the game, which could only end in the inevitable due date with living death.*

-Revoltng Librarians

\*\*\*\*\*

RENEW YOUR MEMBERSHIP - SEE pp. 27 - 28



## FUTURE MEETING DATES

- May 30 - June 4, 1977 Special Libraries Association,  
Annual Meeting, New York, N.Y.
- June 9, 1977 Canadian Health Library Association  
Queen Elizabeth Hotel, Montreal,  
Quebec (Programs and Registration  
Information being mailed separately)
- June 11 - 16, 1977 Medical Library Association, 77th  
Annual Meeting, Olympic Hotel,  
Seattle, Washington. For further  
information contact MLA Headquarters.
- June 15, 1977 Canadian Group of the Medical Library  
Association. See announcement  
elsewhere in this issue for Annual  
Meeting details.
- August 8 - 12, 1977 MEDINFO 77, Toronto, Ontario. For  
further information write MEDINFO 77  
Organizing Committee, Dr. Jan  
Brandejs, P. O. Box 8650, Ottawa,  
Ontario, K1G 0G8
- October 13 - 15, 1977 Upstate New York and Ontario Regional  
Group of the Medical Library Associa-  
tion. Hamilton, Ontario. For further  
information: Beatrix Robinow, Health  
Sciences Library, McMaster University,  
Hamilton, Ont. L8S 4J9
- October 27 - 29, 1977 North Atlantic Health Sciences Libraries,  
A Regional Group of the Medical  
Library Association. Annual Meeting  
in Montreal, Quebec. Further Infor-  
mation: Fran Groen, Medical Library,  
McGill University, 3655 Drummond St.,  
Montreal, P.Que. H3G 1Y6
- September, 1979 International Congress on Medical  
Librarianship, 4th, Belgrade, Yugo-  
slavia (Advance Notice will enable  
you to budget for it).

\* \* \* \* \*

*Get up to show a patron where a book is located. Move your whole body and not just your index finger.*

*-Revoltling Librarians*



## REPORT OF THE PRESIDENT

Though the Canadian Health Libraries Association has been in existence for only a few months, our Membership has passed the 140 mark and covers most areas of Canada and most types of library. As we approach our first Annual General Meeting, it seems appropriate to describe how I see our Association developing over the next few years.

### Organization

The present Constitution is only valid until December 31, 1978 and was designed only as a framework to allow us to function. With a comparatively large membership and with many members in certain cities or regions, thought should be given to establishing Chapters across Canada and possibly to having the Executive elected, at least in part, by these Chapters. The new Executive will be preparing proposals for our revised constitution within the next year and will submit these to all members for approval in due course.

### Funding

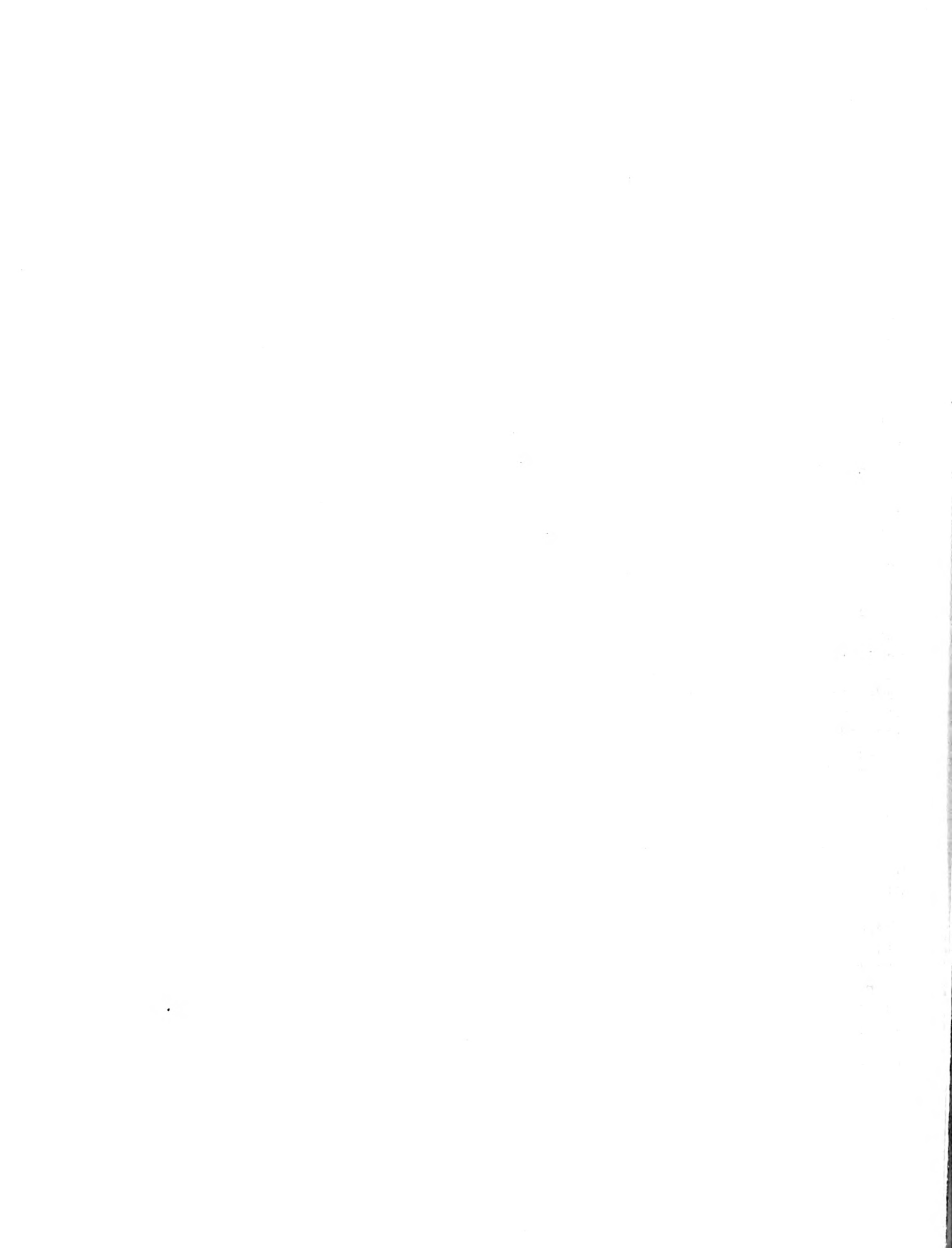
Thought, too, must be given to searching for outside funding to allow us to serve our members properly. Membership fees - even at \$15 per annum - will really only fund a quarterly Newsletter, some additional mailings and the necessary telephone calls. Up until now, many expenses of the Association, and all those of its predecessor the ad-hoc Committee, have been met by the members of the Executive or their institutions. This is an unfair imposition and would, if allowed to continue, tend to restrict membership in the Executive to those coming from large libraries.

### Function

For many years, Canadian health librarians have been divided into several groups and have thus lacked a unified voice on important topics. The existing organizations have certainly tried to co-operate but differences in membership and in emphasis made these efforts clumsy and often not well co-ordinated. It is hoped that CHLA will work closely with other library organizations in the health field in Canada and with this in mind the present Executive was pleased to be asked to comment on a brief being sent by the ACMC Special Resource Committee on Medical School Libraries to the National Library Objectives Survey. Our comments will, we hope, be incorporated in this brief and I hope that the Executive will be able to add the weight of its support of the brief in due course.

Though it is hard to look into the future, I anticipate that such co-operative efforts will increase and that as the CHLA gains in membership, expertise, and stature, we will be able to take the initiative in such matters.

There are many problems common to all health librarians in Canada on which a national association could and should comment. One is the lack of a users' advisory committee for the Health Sciences Resource Centre and another is the perennial problem of hospital library standards. In the latter case, the standards proposed in 1975 and recently published in an amended form by the Canadian Council on Hospital Accreditation should be followed up on a regular basis. Certain library problems do, of course, exist at a local and/or provincial level but it is my view that these are best solved by local librarians or Associations like the Section de la Santé of ASTED in Quebec. We hope





however, that the expertise of the CHLA will be called upon in appropriate cases.

### Newsletter

While forming the Association, it was clearly realised that only a small number of our members would be able to attend the Annual Meetings and for this reason the Constitution allows for mail ballots on important proposals. The Constitution also brings out the importance of our Newsletter as it is through this publication that we can have a useful exchange of information. The Association owes much to Dick Fredericksen who has set such a high standard as the first Editor.

The CHLA is your Association whether you come from a large university library or a one person hospital library. Not everything in the Newsletter or everything discussed at annual meetings will directly concern you, but it is important to remember that health libraries of all sizes and orientations do form an information network and that a network, like a chain, is only as strong as its weakest link. Membership in the CHLA should not only involve sending in a membership cheque. Write to the Executive, write for the Newsletter (articles are published in either French or English), volunteer to serve on Committees. You do have something to contribute and without your contribution the CHLA will die.

David S. Crawford  
President

### RAPPORT DU PRESIDENT

Quoique n'existant depuis quelques mois seulement, l'Association des Bibliothèques de la Santé du Canada compte au-delà de 140 membres venant des différentes régions canadienne et regroupant divers types de bibliothèques. Comme notre première réunion annuelle aura lieu prochainement, il me paraît opportun de décrire comment j'entrevois l'avenir de notre Association durant les prochaines années.

### Organisation

La constitution actuelle expire le 31 décembre 1978, et n'avait pour but que de nous fournir un cadre opérationnel. Le nombre de membre s'accroissant, et également un grand nombre se trouvant dans certaines villes ou régions, l'on devrait songer à la création de chapitres à travers le pays. Possiblement, une partie du Bureau de direction pourrait être élu par ces chapitres. Le prochain Bureau de direction aura pour tâche de préparer durant l'année une révision de la constitution et de la présenter aux membres pour approbation.

### Financement

On se doit de trouver des sources de financement extérieures à l'Association afin de lui permettre d'offrir des services adéquats aux membres. La cotisation, même à \$15. par année, ne permet que le financement d'un Bulletin de Nouvelles trimestriel, quelques envois postaux, et les appels téléphoniques essentiels. Jusqu'à maintenant, certaines dépenses de l'Association, et celles de son prédécesseur, le Comité ad hoc, ont été défrayées par les membres du Bureau de direction ou leur institution. Cette anomalie aura pour effet de restreindre les membres du Bureau de direction à ceux qui oeuvrent à l'intérieur de grandes institutions.



## Objectifs

Depuis plusieurs années, les bibliothécaires du secteur de la santé ont été répartis en divers groupements et ainsi ratant les avantages d'une voix unique sur des sujets importants. Les organismes existant ont certes tenté un effort de collaboration, mais les buts différents n'ont pas permis une coopération efficace. Nous espérons que l'Association des Bibliothèques de la Santé du Canada collaborera étroitement avec les autres organismes du secteur de la santé au Canada. On a sollicité des commentaires de l'actuel Bureau de Direction pour le mémoire présenté par la Comité consultatif sur les bibliothèques des facultés de médecine de l'AFMC soumis à la Bibliothèque Nationale dans le cadre de son Etude des Objectifs. Nos commentaires, nous l'espérons, seront intégrés à ce mémoire et j'ose espérer de le Bureau de direction pourra apporter son appui à ce mémoire en temps opportun.

Bien qu'il soit difficile de prédire l'avenir, j'estime que de tels efforts coopératifs vont s'intensifier et à mesure que l'Association gagnera en expertise et en maturité, elle pourra prendre l'initiative dans l'avenir.

Il y a plusieurs problèmes qui sont communs aux bibliothécaires oeuvrant dans le secteur de la santé au Canada sur lesquels une association nationale peut et devrait se faire entendre. Ainsi la carence d'un Comité consultatif au Centre bibliographique des Sciences de la Santé, le problème des normes pour les bibliothèques d'hôpitaux en sont des exemples. Dans le cas des normes, celles proposées en 1975 et publiées récemment dans leur forme révisée par le Conseil canadien pour l'accréditation des hôpitaux, devraient être révisées régulièrement. Certes, il y a des problèmes qui existent soit au niveau local, soit au niveau provincial ou régional. Ceux-ci sont, selon moi, mieux résolus par les bibliothécaires sur place ou encore par les groupements tel celui des sciences de la santé de l'ASTED pour le Québec. Nous espérons, néanmoins, que l'on fera appel dans les cas pertinents à l'expertise de l'Association des Bibliothèques de la Santé du Canada.

## Bulletin de Nouvelles

Lors de la création de l'Association, il était apparent qu'un petit nombre de nos membres pourrait assister aux réunions annuelles. Pour cette raison, la constitution permet une consultation par courrier sur des sujets importants. La constitution souligne également l'importance du Bulletin de Nouvelles comme véhicule d'information. L'Association doit beaucoup, en ce sens, à Richard Fredericksen, qui comme premier éditeur du Bulletin de Nouvelles a su donner une haute norme d'excellence.

L'Association des Bibliothèques de la Santé du Canada est votre association, que vous soyez employé dans une grande bibliothèque universitaire, ou l'unique employé d'une bibliothèque d'hôpital. Tout ce qui est discuté dans le Bulletin de Nouvelles ou lors de l'Assemblée annuelle ne vous concerne probablement pas directement, mais il est important de souligner que les bibliothèques du secteur de la santé de toutes dimensions ou orientations forment un réseau d'information et un réseau, à l'instar d'une chaîne, à la force de son plus faible maillon. Appartenir à l'Association des Bibliothèques de la Santé du Canada ne devrait pas uniquement se limiter à faire parvenir son chèque de cotisation. Ecrivez au Bureau de direction, faites parvenir vos commentaires et articles au Bulletin de Nouvelles soit en français ou en anglais, offrez vous comme volontaires pour oeuvrer au sein des différents comités, vous avez tous quelque chose à offrir et sans votre contribution l'Association des Bibliothèques de la Santé du Canada va mourir.

David S. Crawford, President



ON WHY WE DON'T CALL IT THE CANADIAN HEALTH SCIENCES

LIBRARY ASSOCIATION

...that's probably where the phrase "library science" got started. Someone said, "Let's start a school of library silence," and he was misheard. How else would the word "science" have gotten mixed up with the library shtick.?

-Revolting Librarians

CAN GROUP OF MLA TO HOLD SEATTLE YAWN-IN

*In my journal, anyone  
can make a fool of himself.*

-Rudolf Virchow

"Complacencies of the peignoir" or matutinal madness? Richard Fredericksen, Chairman of the Canadian Group of the Medical Library Association was luckyenough to get the Group's meeting time announced once again in the Official Program for the MLA Annual Meeting. Luckytoo, for any of you attending the MLA Meeting, is the fact that you will be able to start the day (yawn) on Wednesday, June 15th, by breakfasting with your Canadian colleagues. It is to be held in the Colonial Room of the Olympic Hotel (meeting headquarters), but re-check for final location when you receive your official program in the MLA registration packet. The all important starting time will be 0700 with the necessity to adjourn at approximately 0830. Breakfast will be "continental" featuring coffee/tea and juice, a danish or other roll, plus lots of sleepy camaraderie. For all this you will only have to fork over some \$3.50 for breakfast, tax and gratuity. The amount will be collected at the meeting.

The agenda for this meeting will need to be kept brief, but there are a few important things that will need to be covered:

1. Chairman's introductory remarks.
2. Review of CHLA activities and its annual meeting by David Crawford.
3. Adoption of By-Laws for the Group (draft follows, please bring this to the meeting. Ha! I'll be luckyif you remember to come yourself!). Although constitutional matters are frequently boring and time-consuming, quick passage of this one should be assured by its harmless contents combined with the early morning meeting time.
4. Election of a) Chairman-Elect, b) Nominee for the MLA Nominating Committee

Note: an informal Canadian cocktail party is also under consideration--an announcement regarding this will have to be made sometime at the Seattle meeting.



Since a separate mailing of this announcement to Canadian MLA members will not be possible, please share the above information with any Canadian MLA'er who you know is not a member of CHLA and therefore not a recipient of this issue. Hope to see you all in Seattle!

-Richard B. Fredericksen

CANADIAN GROUP OF THE MEDICAL LIBRARY ASSOCIATION:

P R O P O S E D B Y L A W S

Article I - Name:

The name of this organization shall be the Canadian Group of the Medical Library Association

Article II - Purpose:

The Canadian Group is a special interest group whose purpose is to provide a forum for the discussion of matters of particular importance to Canadian health libraries and librarians.

Article III - Membership:

Membership in the Canadian Group shall be open to anyone who is interested in the unique conditions of health librarianship which prevail in Canada.

Article IV - Meetings:

There shall be at least one annual business meeting during each calendar year. Normally, this meeting will be held concurrently with, and in the same location as, the Annual Meeting of the Medical Library Association. In view of the multiple commitments of the membership, the Annual Meeting of the Canadian Group shall be scheduled at a time which does not conflict with general sessions of the Annual Meeting of the Medical Library Association.

Article V - Officers:

Section 1. Two officers of the Canadian Group shall be elected. The officers shall be a Chairman and a Chairman Elect.

Section 2. Upon election, the Chairman Elect shall serve for two years, the first commencing at the close of the Annual Meeting at which the election is announced. The second year in office the Chairman Elect shall become Chairman at the end of the Annual Meeting, and continue in that capacity through the next Annual Meeting. The term of office of the Chairman shall be for one year from the assumption of office. In the event that a vacancy should arise in the office of Chairman, the Chairman Elect shall serve out the unexpired term and continue on as Chairman for the full succeeding term.





Article V - Officers (Cont'd.)

Section 3. The Chairman shall preside at all meetings of the Canadian Group, and shall perform such other duties as appear necessary to the benefit of the Group. The Chairman shall appoint a Committee Chairman to assist in forming any non-elective committee which may be required from time to time, and shall be an ex-officio member of all such committees.

Section 4. The Chairman Elect, at the request of the Chairman, or in the Chairman's absence or during an inability to act, shall perform the duties and exercise the functions of the Chairman, and shall automatically succeed as Chairman.

Section 5. In the absence of both the Chairman and the Chairman Elect, the immediate Past Chairman shall act as Chairman.

Section 6. There shall be a Secretary appointed by the Chairman to be responsible for the Minutes of the Annual Meeting of the Canadian Group. In the event of additional meetings in the course of a year, a Secretary who is able to attend shall be designated by the Chairman.

Article VI - Elections:

Election to office shall be by a plurality vote of those attending the Annual Meeting of the Canadian Group. In addition to the two officers, the Canadian Group shall elect a candidate for the MLA Nominating Committee by this method.

Article VII - Amendments:

Bylaws shall be amended by a two-thirds majority vote of the membership present at the business meeting of the Canadian Group. An announcement accompanied by any proposed amendments shall be sent to the membership by mail at least three weeks before the meeting where the Bylaws will be discussed.

Article VIII - Rules of Conduct:

The conduct of all meetings of the Canadian Group shall follow Robert's Rules of Order, Revised, in the latest edition.

draft by M. A. Flower and  
R. B. Fredericksen  
19 February, 1977

\* \* \* \* \*

*We envisioned 24-hour service, with librarians living right in the building if they wanted to.*

*-Revolting Librarians*

\* \* \* \* \*

RENEW YOUR CHLA/ABSC MEMBERSHIP

--SEE PP. 27 - 28



ORDER THIRD-EDITION OF HANDBOOK OF  
MEDICAL LIBRARY PRACTICE NOW

The third edition of the "Handbook of Medical Library Practice," by Gertrude K. Annan and Jacqueline W. Felter, 1973, will not be reprinted when the current stock is depleted.

The first volume of the revised edition will not be available until 1979. Those who want a copy of the present edition of the Handbook should order it before the current stock of 750 copies is exhausted. Send orders to the Medical Library Association, 919 North Michigan, Suite 3208, Chicago, Illinois 60611. The cost is \$5.95. Prepayment must accompany all orders.

\* \* \* \* \*

*Actually owning books seems a pointless exercise: to reread them is a waste of time, not to reread them is churlish, and to use them as mere decoration is heresy.*

James Owen Drife  
BMJ 23 April 1977 p. 2077

\* \* \* \* \*

THE HEALTH SCIENCES RESOURCE CENTRE

In today's inflationary world, the need to share resources has become a very important issue for all librarians in Canada and the health sciences are no exception to the present situation.

As one of the national, biomedical information centres, the Health Sciences Resource Centre (HSRC) is your point of access to an organization, the Canada Institute for Scientific and Technical Information (CISTI), which is a central node in the Canadian scientific, technical and medical network.

Under the umbrella of Information Services since 1973, the HSRC's main role has been to coordinate information services for the health sciences both within CISTI and on a national basis, in other words cooperating with other sections to provide back-up library services to medical, pharmaceutical, hospital, dental and nursing libraries throughout Canada, and to individuals needing assistance beyond the scope of local resources.

The HSRC has been handling quick and extensive reference queries, and performing manual and mechanical searches by consulting all available bibliographic sources held by CISTI, such as the MEDLINE/TOXLINE files, and Biological Abstracts and Chemical Abstracts from CISTI's CAN/OLE System. We are now charging \$20.00 per topic for literature searches, but there are no fees for all other types of questions received. If we are unable to supply the information, we will find a source to answer the question. The HSRC also acts as a consultant, providing advice and assistance in the organization of library collections, in the set-up of workshops and other topics, and is an active member of different local, national, and international organizations.



In November 1975, the HSRC was made responsible for the administration of the Canadian MEDLINE Network, and this involves the training of new centres, the updating of the established centres, and the MEDLINE Coordinator must keep all centres informed of all possible changes in the MEDLARS system or at CISTI which could affect their operations. According to our quid-pro-quo agreement with the National Library of Medicine, we are given only eight new codes per fiscal year and because of this, we are becoming more selective in the allocation of new codes. Some of the basic criteria for this selection are: (1) the applicant's staff should have a biomedical background and some experience in using the printed indexing/abstracting journals for searching; (2) the type and the size of the library collection are very important for document support within the requesting institution. If this second criterion cannot be filled, we recommend to the new centre to come to CISTI first for documents.

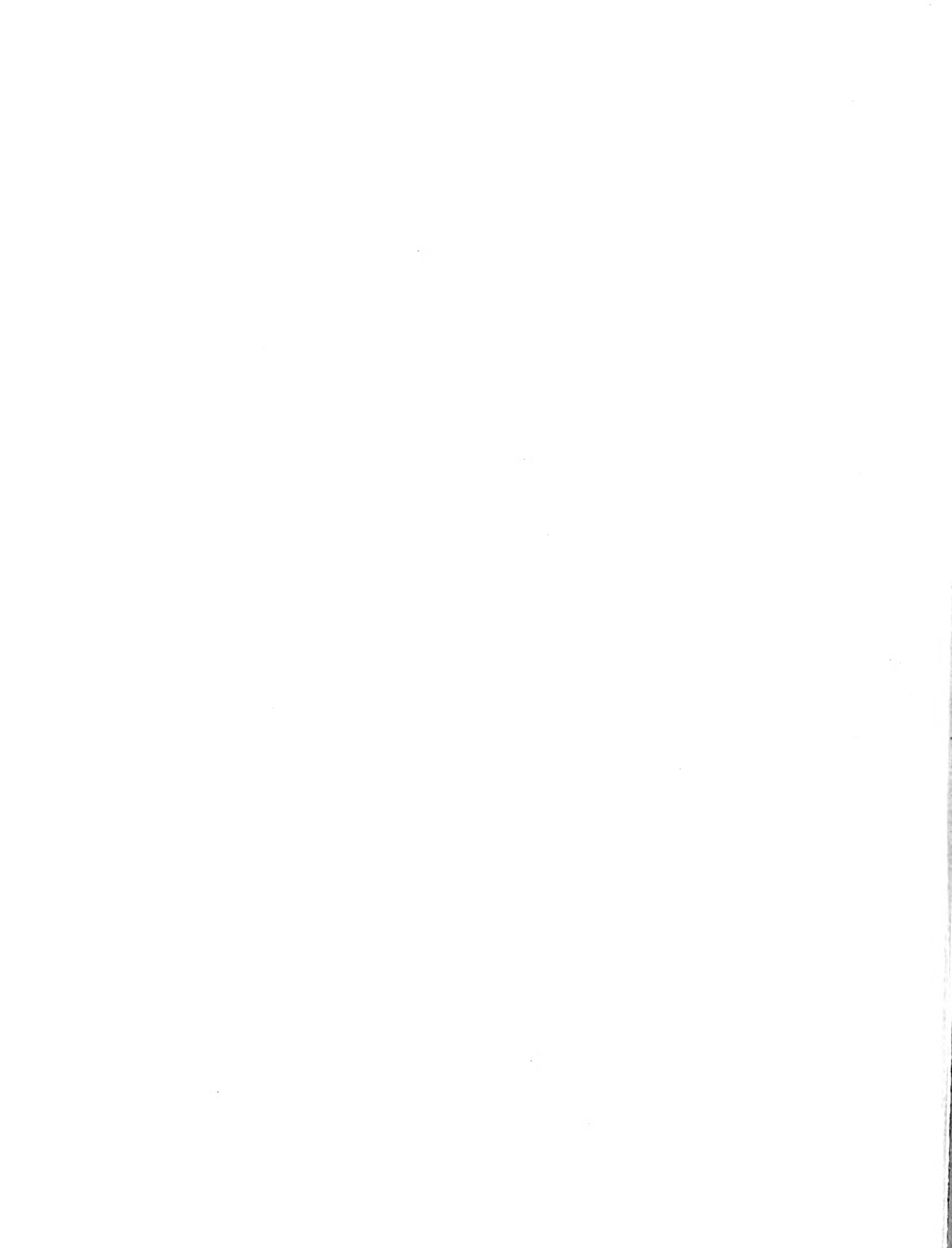
Several publications of interest to the Canadian health science community have been the responsibility of the HSRC since 1969: the Canadian Locations of Journals Indexed in Index Medicus, the monthly Health Sciences Libraries in Canada, and the Conference Proceedings in the Health Sciences held by CISTI. You will find a descriptive list of these publications at the end of this article. This last publication - Conference Proceedings - is now available on CISTI's CAN/OLE System (Canadian On-Line Enquiry System).

With a collection of nearly 1,000,000 volumes and approximately 20,000 journal titles, CISTI acts as the focus of the Canadian interlibrary loan network in science, technology and medicine. You may come to us for locations of monographs and for journal articles in the fields of science, technology and medicine. The minimum charge for photocopies is \$2.20 for up to ten pages and \$0.22 for each additional page. We also have a collection of more than 400,000 NTIS microfiche on scientific, technical and medical subjects; these microfiche can be reproduced at \$2.20 minimum per request for hard copies up to ten pages and \$0.22 for each additional page. Duplicate fiche can be made at \$2.20 per microfiche title duplicated (consisting of one or more fiche).

Finally, I would like to bring to your attention other services offered by CISTI which could be useful to you. These are the Union List of Scientific Serials in Canadian Libraries, reporting the holdings of 247 university, federal, provincial and industrial libraries, the CAN/OLE System, consisting of an on-line retrospective searching of large bibliographic files, such as Biological Abstracts, Chemical Abstracts, Engineering Index, INSPEC, NTIS and some of CISTI's publications (Directory of Federally Supported Research in Universities, Union List, Conference Proceedings), and CAN/SDI (Canadian Selective Dissemination of Information Program) consisting of matching interest profiles against fourteen data bases for current awareness information.

The Canada Institute is offering all of these services to you and you are welcome to use them. If you need more information on any of them, please write to me or call me at (613) 993-2013.

Philippe Lemay  
Head, Health Sciences  
Resource Centre



## LE CENTRE BIBLIOGRAPHIQUE DES SCIENCES DE LA SANTE

Dans ce monde où l'inflation se fait de plus en plus sentir, il est devenu nécessaire de partager nos connaissances et nos ressources, et les bibliothécaires des sciences de la santé ne font pas exception.

Le Centre bibliographique des sciences de la santé, qui est un des centres d'information biomédicale nationale, est votre point d'accès à un organisme, l'Institut canadien de l'information scientifique et technique (ICIST), qui est un membre important du réseau scientifique, technique et médical canadien.

En tant que membre des Services d'information depuis 1973, la responsabilité première du Centre a été de coordonner les services d'information pour les sciences de la santé tant à l'intérieur de l'ICIST que sur une base nationale, et cela en coopérant avec les autres sections afin de seconder les efforts des bibliothèques médicales, pharmaceutiques, hospitalières, dentaires et infirmières établies à travers le Canada, et les individus ayant épuisé leurs ressources locales.

Le Centre répond aussi à toutes les questions de référence reçues et nous pouvons faire pour vous une recherche manuelle et mécanique en utilisant toutes les ressources bibliographiques disponibles à l'ICIST, par exemple les fichiers MEDLINE/TOXLINE et Biological Abstracts/Chemical Abstracts du système CAN/OLE. Pour une recherche bibliographique, nous demandons \$20.00 par sujet, mais il n'y a aucun frais pour toute autre question reçue. Si nous ne pouvons vous aider, nous vous trouverons une autre source d'information. De plus, le Centre est parfois consulté pour offrir de l'information de de l'aide dans l'organisation de collections de livres et d'ateliers et sur différents sujets. Ses membres sont des membres actifs de différentes associations locales, nationales et internationales.

Depuis novembre 1975, le Centre est responsable de l'implantation du réseau canadien MEDLINE et cela suppose la formation des membres des nouveaux centres, la formation continue de ceux qui sont déjà établis, et nous devons aussi les informer de tout changement dans le système MEDLINE, ou à l'ICIST, qui pourrait avoir des répercussions dans leur travail. Selon notre entente quid-pro-quo avec la National Library of Medicine, nous ne pouvons offrir au Canada que huit nouveaux codes par année, et à cause de cela, nous devenons de plus en plus sélectifs dans le choix des futurs centres. Parmi les principaux critères de sélection, il y a ceux-ci: (1) le personnel du demandeur doit avoir une formation biomédicale et une expérience dans l'utilisation des index et résumés pour la recherche; (2) le genre et l'ampleur de la collection de la bibliothèque sont importants et ce afin de pouvoir fournir la documentation sur place. Si ce n'est pas le cas, nous demandons au nouveau centre de s'adresser à l'ICIST d'abord pour tout document.

Nous sommes aussi responsables de la préparation de certaines publications intéressant le milieu canadien des sciences de la santé et ce depuis 1969, dont voici la liste: Bibliothèques canadiennes détenant les périodiques répertoriés dans l'Index Medicus, le mensuel Bibliothèques canadiennes des sciences de la santé - Périodiques, Nouvelles, Informations et les Comptes rendus des conférences sur les sciences de la santé qui se trouvent à l'ICIST. Une liste plus détaillée de celles-ci se trouve à la fin du présent article. La publication Comptes rendus des conférences est maintenant accessible sur CAN/OLE (Canadian On-Line Enquiry).





Avec une collection de près de 1,000,000 de volumes et environ 20,000 titres de périodiques, l'ICIST est le coeur du réseau de prêts interbibliothèques pour les sciences, la technologie et la médecine. Vous pouvez donc vous adresser à nous pour des localisations de monographie et pour des photocopies d'articles de périodique dans le domaine scientifique, technologique et médical. Notre tarif pour les photocopies est de \$2.20 par demande de dix pages ou moins et de 22 cents par page supplémentaire. Nous avons aussi une collection de plus de 400,000 microfiches du NTIS sur des sujets scientifiques, techniques et médicaux, qui peuvent être reproduites au prix de \$2.20 par demande de dix pages ou moins pour le texte imprimé et de 22 cents par page supplémentaire. Un duplicata vous coûtera \$2.20 par titre du microfiche (une ou plusieurs fiches).

Pour terminer, j'aimerais vous signaler d'autres services offerts par l'ICIST qui pourraient vous être utiles, dont: (1) le Catalogue collectif des périodiques scientifiques dans les bibliothèques canadiennes, qui signale l'état des collections de 247 bibliothèques universitaires, fédérales, provinciales et industrielles; (2) CAN/OLE, une service de recherche retrospective en direct dans un vaste fichier bibliographique qui englobe Biological Abstracts, Chemical Abstracts, Engineering Index, INSPEC, NTIS et certaines publications de l'ICIST (Répertoire de la recherche dans les universités subventionnée par le gouvernement fédéral, Catalogue collectif, Comptes rendus des conférences sur les sciences de la santé); (3) CAN/SDI (Diffusion selective de l'information), qui permet de puiser une information courante dans quatorze fichiers à la fois avec un seul profile d'intérêt.

L'Institut canadien vous offre ces services et vous invite à les utiliser. Pour plus de renseignements sur quelque service que ce soit, il suffit de m'écrire ou de me rejoindre à (613) 993-2013.

Philippe Lemay  
Chef, Centre bibliographique  
des sciences de la santé

\* \* \* \* \*

*Greet the patron (your friend and taxpayer) with a smile. Look deep into his (her) eyes. Grok his (her) person.*

*-Revolting Librarians*

\* \* \* \* \*

#### NOTED IN THE LITERATURE

Garfield, Eugene. Le Nouveau Defi Americain. I. Is French Science too Provincial? Current Contents, Clinical Practice V.5, no. 16, April 11, 1977, pp. 6-11.

Garfield writes about the frequency with which scientific articles written in French are cited in the literature. The article above is actually an English translation of the original which was published for the French in French (La Science française est elle trop provinciale? La Recherche 7: 757-60, 1976). The author reports that the original unleashed an outraged storm of protest and that it has been denounced by one as 'pernicious,' as 'linguistic imperialism' by another, and that it even 'questions



the existence of a civilization....' Conclusions of Garland's study were that "the French were primarily cited by the French," and "the insistence of French scientists to publish in French denies the world scientific community the opportunity to read their work casually." The major French scientists published in English and in journals outside of France to assure that their work reached the widest possible readership. While French language Canadian scientific journals are not mentioned specifically, the same observations might conceivably apply. What with the language controversy in Canada, this article should be of interest to our health library readership. Garland plans further comments on the French question in future issues of Current Contents.

ed. note: your monolingual editor was unable to secure a French translation of this article in time for publication.

### CISTI/L'ICIST PUBLICATIONS AVAILABLE

The Canada Institute for Scientific and Technical Information (CISTI) produces the following publications to publicize its resources and services, and to facilitate the use of Canada's resources in the fields of science and technology. Additional information can be obtained by contacting the CISTI Publications Section. Tel: (613) 993-3736.

L'Institut canadien de l'information scientifique et technique (ICIST) prépare les publications énumérées ci-après afin de faire connaître ses ressources et ses services et de faciliter l'utilisation des ressources du Canada dans le domaine des sciences et des techniques. Pour plus de renseignements, s'adresser au Service des publications de l'ICIST. N° de tél.: (613) 993-3736.

#### ABSTRACTING AND INDEXING SERVICES

1974, NRC. No. 13747, \$2.00

#### BULLETINS DE RESUME ET D'INDEX

1974, CNRC n° 13747, \$2.00

#### CISTI PROGRESS REPORT

(Replaces Annual Report)  
Available on request.

#### RAPPORT D'AVANCEMENT DE L'ICIST

(Remplace le Rapport annuel)  
Diffusé sur demande.

#### CANADIAN LOCATIONS OF JOURNALS INDEXED IN INDEX MEDICUS

A listing of journals in the health sciences as covered by the MEDLARS system and their location in Canadian libraries. 1976, 6th edition, NRC. No. 15757, \$10.00

#### BIBLIOTHEQUES CANADIENNES DETENANT LES PERIODIQUES REPERTORIES DANS L'INDEX MEDICUS.

Une liste de périodiques des sciences de la santé recensés par MEDLARS, indiquant dans quelles bibliothèques du Canada ils sont conservés. 1976, 6e édition, CNRC n° 15757, \$10.00.

#### CAN/OLE USER'S MANUAL

1976, 1st edition, NRC No. 15169  
\$20.00

#### CAN/OLE MANUEL DE L'UTILISATEUR

1976, CNRC n° 15170, \$20.00



CAN/SDI PROFILE DESIGN MANUAL

1975, 5th edition, NRC No. 14675,  
\$10.00

CONFERENCE PROCEEDINGS IN THE HEALTH SCIENCES

An index to proceedings of conferences, symposia, workshops and other meetings since 1925. Annual supplements. 1973, 1st edition, NRC No. 13881, \$35.00 (Cumulative Vol.) 1975, Supplement, NRC No. 15247, \$15.00.

DIRECTORY OF FEDERALLY SUPPORTED RESEARCH IN UNIVERSITIES

An annual listing of university based research projects funded by federal agencies and a computer produced subject index. 1976, 4th edition, NRC No. 15300, \$50.00.

ENGLISH TRANSLATIONS OF RUSSIAN JOURNALS

1974, NRC No. 13749, \$2.00.

GUIDE TO SOURCES OF INFORMATION ON TRIBOLOGY

1974, NRC No. 14082, \$2.50 Anne Piternick

HEALTH SCIENCE LIBRARIES IN CANADA, SERIALS, NEWS, NOTES

A monthly listing of health science serials on order at 25 health science libraries in Canada. Annual subscription, \$6.00.

HOW TO GET WHAT YOU DON'T HAVE

A guide to obtaining loans, photocopies or microcopies. 1973, NRC No. 13513, \$2.00 Anne Piternick

INFOSCOPE

Published at irregular intervals, to provide up-to-date information on CISTI's activities and services to users of scientific and technical information. Available on request.

CAN/SDI MANUEL DE REDACTION DES PROFILS

1975, CNRC n° 14676, \$10.00

COMPTES RENDUS DES CONFERENCES SUR LES SCIENCES DE LA SANTE

Un index des comptes rendus de conférences, symposiums, séminaires et autres réunions depuis 1925. Suppléments annuels. 1973, CNRC n° 13881, \$35.00. (volume récapitulatif). Supplément de 1975, CNRC n° 15247, \$15.00.

REPertoire DE LA RECHERCHE DANS LES UNIVERSITES SUBVENTIONNEE PAR LE GOUVERNEMENT FEDERAL.

Une liste annuelle des programmes de recherche universitaire financés par des organismes federaux; l'index des matieres est prepare par ordinateur. 1976, 4e edition, CNRC n° 15300, \$50.00.

TRADUCTIONS ANGLAISES DE PERIODIQUES RUSSES

1974, CNRC n° 13749, \$2.00

GUIDE DES SOURCES DE RENSEIGNEMENTS SUR LA TRIBOLOGIE

1974, CNRC n° 14082, \$2.50 Anne Piternick.

BIBLIOTHEQUES CANADIENNES DES SCIENCES DE LA SANTE, PERIODIQUES, NOUVELLES, INFORMATIONS

Une liste mensuelle des revues des sciences de la santé commandées par 25 bibliothèques canadiennes des sciences de la santé. Abonnement d'un an: \$6.

COMMENT VOUS PROCURER LES DOCUMENTS QUI VOUS MANQUENT.

Un guide d'obtention de prêts, de photocopies et de microcopies. 1973, CNRC n° 13513, \$2.00. Anne Piternick.

INFOSCOPE

Publié à intervalles irréguliers, ce bulletin fait le point des activités et s'adresse aux utilisateurs de l'information scientifique et technique. Diffusé sur demande.



PROBLEMS OF THE NORTH

English translation of Russian Journal "Problemy Severa". 1973, No. 18, \$35.00

PUBLICATIONS OF THE NATIONAL RESEARCH COUNCIL OF CANADA

A cumulative listing of scientific and technical papers of experimental works carried out in the Council's laboratories since 1916. Annual supplements. 1976, 2nd Cumulative edition 1977-1976, NRC no. 15502, \$12.00.

RECENT ADDITIONS TO THE LIBRARY

A semi-monthly listing, by broad subjects, of major acquisitions to the Library. Annual subscription \$10.00.

RUSSIAN JOURNALS

1974, NRC No. 13748, \$2.00

SCIENTIFIC AND TECHNICAL SOCIETIES OF CANADA

1974, NRC No. 14580, \$5.00

SCIENTIFIC POLICY RESEARCH AND DEVELOPMENT IN CANADA

1975, NRC No. 14949, \$3.00 J.D. Babbitt

STANDARDS AND SPECIFICATIONS DIRECTORY

1975, edition, NRC No. 14687, \$3.00

UNION LIST OF SCIENTIFIC SERIALS IN CANADIAN LIBRARIES

A list of titles, holdings and location of over 48,000 scientific, technical and medical journals held by 247 Canadian libraries. 1975, 6th edition, NRC No. 14870, \$80.00

PROBLEMS OF THE NORTH

Une traduction anglaise de la revue russe Problemy Severa. 1973, n° 18, \$35.00.

PUBLICATIONS DU CONSEIL NATIONAL DE RECHERCHES DU CANADA

Une liste recapitulative des articles scientifiques et techniques traitant des travaux effectués dans les laboratoires du Conseil depuis 1916. Suppléments annuels. 1976, 2e édition recapitulative 1970-1976, CNRC n° 15572, \$12.

BULLETIN DES NOUVELLES ACQUISITIONS

Une liste bimensuelle, par grands domaines, des principales acquisitions de la Bibliothèque. Abonnement d'un an: \$10.00.

PERIODIQUES RUSSES

1974, CNRC n° 13748, \$2.00.

SOCIETIES SCIENTIFIQUES ET TECHNIQUES DU CANADA

1974, CNRC n° 14580, \$5.00.

LA POLITIQUE DES SCIENCES, LA RECHERCHE ET LE DEVELOPPEMENT AU CANADA

1975, CNRC n° 14949, \$3. J.D. Babbitt

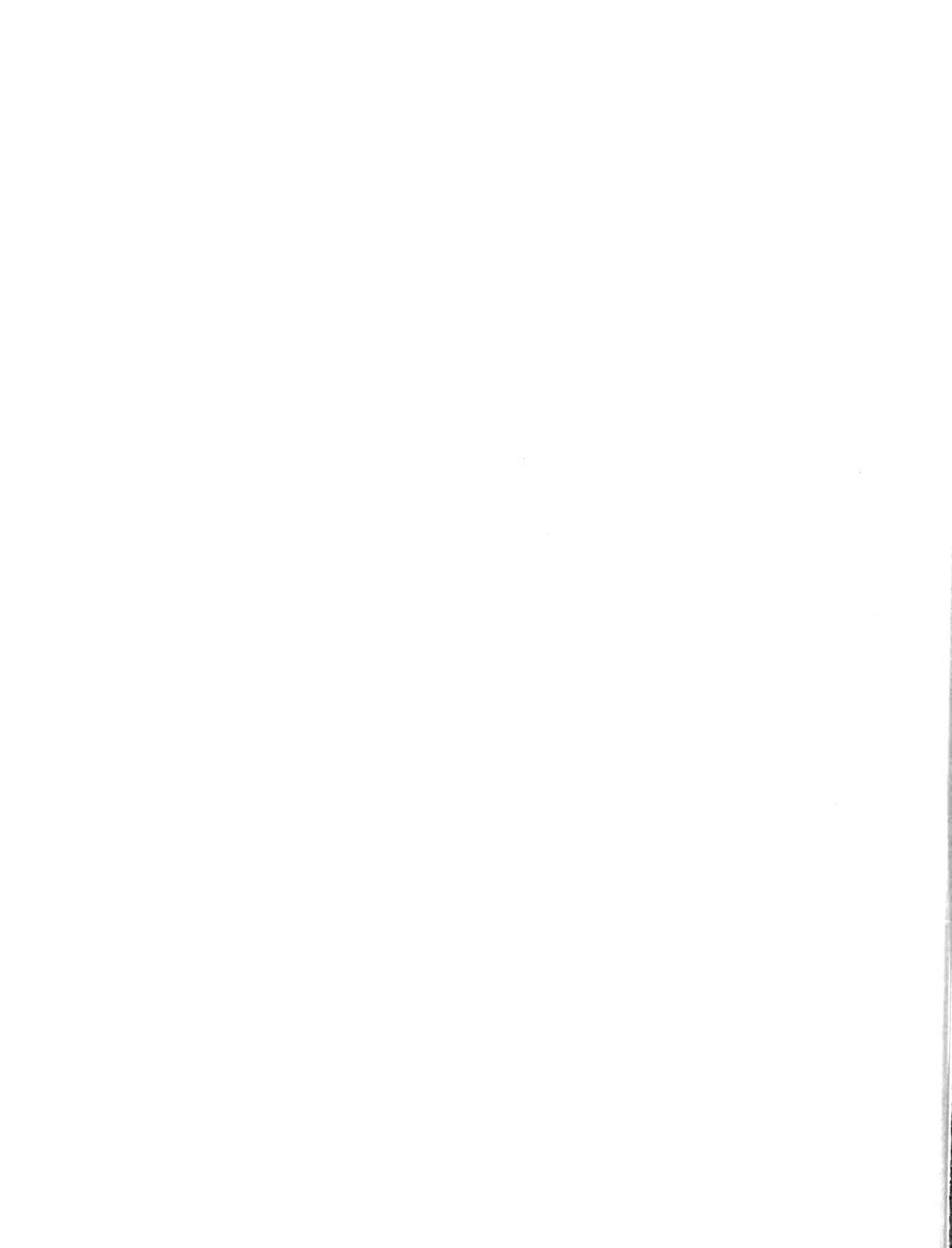
REPertoire DE LA NORMALISATION

1975, CNRC n° 14687, \$3.00

CATALOGUE COLLECTIF DES PUBLICATIONS SCIENTIFIQUES DANS LES BIBLIOTHEQUES CANADIENNES

Une liste de titres donnant l'état de plus de 48,000 revues scientifiques, techniques et médicales conservées dans 247 bibliothèques canadiennes. 1975, 6e édition, CNRC n° 14870, \$80.00

(Cont'd.)





Copies can be ordered by referring to the publication number. Purchase orders and cheques should be made payable to the Receiver General of Canada, credit National Research Council of Canada, and addressed to:

Publications Section  
CISTI  
National Research Council of Canada  
Ottawa, Canada K1A 0S2

Prière de mentionner le numéro de la publication dans la commande, et d'établir les chèques et bons de commande à l'ordre du Receveur général du Canada, au crédit du Conseil national de recherches du Canada. Faire parvenir à:

Service des publications  
ICIST  
Conseil national de recherches du Canada  
Ottawa, Canada K1A 0S2  
N° de tél.: (613) 993-3736

#### A REMINDER TO ORDER NEW MLA BULLETIN INDEX

The decennial index of the "Bulletin of the Medical Library Association" for vol. 51-60 (1963-1972) will be available in July. A limited quantity will be produced and available to those who have prepaid orders through June 30. After that time copies will be available only until the limited supply is depleted.

To reserve a copy, please send your order today to MLA Headquarters, 919 North Michigan Avenue, Suite 3208, Chicago, Illinois 60611. Prepayment must accompany all orders. (\$10 for non-members, \$5.00 for members.)

\* \* \* \* \*

*It's one big room. We're bursting now. Last week we had fifty-eight kids there and there are only seats for fifty-seven. It's a tribute that they like to come there. It's an agonizing night, though, when you have to go around shushing. It's just too much. I'm old-fashioned. I think it has to be a quiet place.*

*"The Librarian" from  
Studs Terkel, Working*

\* \* \* \* \*

#### ONTARIO HOSPITAL LIBRARIES SURVEY

A report has recently been forwarded to the Ontario Medical Association and the Ontario Hospital Association summarizing a survey of hospital libraries in the Province of Ontario which was conducted in 1975. A small committee of the Toronto Medical Libraries Group put together the data from that survey, and the report was presented formally to a joint meeting of the Ontario Medical Association and the Ontario Hospital Association in Toronto on April 20th. Once the report has been accepted, it will be duplicated and made available to the hospital and medical library communities by the Ontario Hospital Association. Title of the report is 1975 Survey of Hospital Libraries in Ontario: summary and assessment. It is dated February 1977, and there are 87 pages.

The survey was sponsored jointly by the OMA and the OHA, and drew a return of 81%. The questionnaire used was designed and tested by a Liaison Committee of the Toronto Medical



Libraries Group in collaboration with the Committee on Medical Library Services of the Ontario Medical Association, and with members of the Executive of the Ontario Hospital Association. It was sent out in two separate mailings by the Ontario Hospital Association.

Data in the returns were compared by the Liaison Committee with the minimum guidelines set forth in the Appendixes to the Canadian Hospital Library Standards as published in Canad. Med. Assoc. J. 112:10:1271-74, 17 May 1975. Generally speaking, and in spite of some notable exceptions, two basic points were established by this comparison: a) an alarmingly high percentage of hospital libraries in Ontario failed to meet even the minimums established for collections; b) personnel and organizational arrangements in these libraries were also far from adequate. Eight recommendations were presented to the Ontario Medical Association and the Ontario Hospital Association for action.

Members of the Liaison Committee of the Toronto Medical Libraries Group which designed the questionnaire and compiled the summary of the returns were: Marianne Brett, Librarian, North York General Hospital, Toronto; Elizabeth Marsland, Librarian (now retired), Wellesley Hospital, Toronto; Sheila Swanson, Librarian, Academy of Medicine, (Toronto); and M.A. Flower, formerly Librarian, Ontario Medical Association, Toronto, Chairman.

(Mrs.) M. A. Flower  
Atelier à votre santé

\* \* \* \* \*

*The main point is this: libraries were essentially crypts for the works of dead men, and the graverobbers were basically gentlemen of leisure with no greater information problems than how to relieve the gout...The most aggravating thing about it all is that, actually, we traditionally have been shushers, and most libraries are still into silence.*

-Revolting Librarians

\* \* \* \* \*

#### PERSONAL NOTES

Doreen Fraser, Assistant Professor, School of Library Service, Dalhousie University, has been granted twelve months sabbatical leave from September 1977 to August 1978, to study the basic elements of gerontology and geriatrics, and to investigate the information and library service needs of persons involved with planning, organizing, and working in these fields. Her interest spans the prevention of disablement, acute and chronic institutional care, rehabilitation, maintenance of daily living, and terminal care, and she is concerned with both the elderly and their families, and the volunteer and professional health workers involved with team care.

She has been greatly helped by the World Health Organization, the King Edward Fund's Hospital Centre in London, the Scottish Health Services Centre in Edinburgh, the College of Family Physicians of Canada, and members of the Canadian Association of Gerontology and the Canadian Institute of Religion and Gerontology in the planning of five months in Britain, three months in Norway, Denmark, the Netherlands, Geneva and Grenoble, two months in the United States of America, and three months in Canada from coast to coast. Upon return to Nova Scotia, she will be involved with planning



and organizational programmes for gerontology and geriatrics, in addition to augmenting her teaching programme, and her work with Medical School's Division of Continuing Medical Education which is interested in geriatrics and gerontological programmes in Camp Hill Hospital, the Federal Department of Veterans' Affairs Hospital in Halifax.

Interspersed with leave activities, Professor Fraser plans to attend the 50th Anniversary Conference of the International Federation of Library Associations in Brussels, the Library Association Medical Section's Meeting in Bath, and the Library Association's Centennial Conference in London.

Claire Turnbull has been appointed to the position of Head of Public Services in the Medical Library of McGill University, succeeding Bonita Jehu. Miss Turnbull holds an undergraduate degree from the University of Ottawa and a degree in library science from the University of British Columbia. She spent three years at the National Library of Canada before being appointed Head of Reference in the Medical Library in 1973.

## THE BRITISH COLUMBIA MEDICAL LIBRARY SERVICE

### INTRODUCTION

Regional medical library services in most Canadian provinces are being developed through universities. B. C. is an exception. It is the only one in which a separately organized province-wide regional service has been developed. In 1962, the B. C. Medical Library Service was established by the College of Physicians and Surgeons to serve all of the registered doctors in the province. In the ensuing years, the Service has become a vital and accessible continuing medical education resource. (1) (2)

### HISTORY

The first institutional medical library in British Columbia was established by the newly formed Vancouver Medical Association in 1906. It numbered among its early benefactors Sir William Osler who, in 1908, wrote from Oxford to the head of the V.M.A. library committee, Dr. John Pearson ".....tell some of the members from me, please, that money invested in a library gives much better return than mining stock. In conclusion, as precept is not nearly so satisfactory as example, I enclose you a small subscription as practical evidence of my good will and good wishes." The Library's Archives file contains an answer from Dr. Pearson thanking Dr. Osler for his letter, but mentioning that there was no enclosure. Dr. Osler's reply is swift and peremptory "....."Herewith my cheque for \$25.00."

During its earlier years, the library was housed in locations which are now considered the choicest of downtown real estate. It began at the corner of Granville and Hastings, moved to the corner of Granville and Georgia and then to Georgia and Hornby before its move in 1951 to the present Academy of Medicine building at Burrard Street and Tenth Avenue.

During the 1950's there were some important developments. U.B.C.'s medical school, begun in 1950, necessitated the growth of the university's medical library under the direction of Doreen Fraser. At the same time, the Vancouver Medical Association was



finding it increasingly expensive to support a library which was now being utilized by physicians throughout the province.

An obvious solution was for the V.M.A. library to amalgamate with the UBC library, but many of the Association's most influential members were not in favour. In 1956 Doreen Fraser produced a survey of the Vancouver Medical Association Library (3), a fifty page document with seven appendices and an extensive bibliography. One of Miss Fraser's far-seeing recommendations was that the V.M.A. library be established as a province-wide service with possible support from the College of Physicians and Surgeons. Two further surveys resulted in a report by Dr. John Dick (4), chairman of the V.M.A. Library Committee, which prepared the way for a proposal to the College of Physicians and Surgeons. Miss Isobel McDonald, the first professional librarian hired by the V.M.A. was active in developing the surveys and the proposals.

In 1959 two referendums were put to the profession. The first referendum establishing the regional service for a two-year trial period was passed by a 72% majority. (5) A second referendum in 1961 giving the College authority to establish the service on a permanent basis passed with a majority of 65%. (6) Terms of the final referendum allowed the College to assess each member \$25 for the library service, \$10 of which would go back to support hospital libraries outside the City of Vancouver.

Miss McDonald left the library in 1961 and the author began his duties as director in March of 1962. In the next year, the library collection was named the Keith Memorial Library in honour of one of the original founders of the V.M.A. library, Dr. William D. Keith. By 1964 the library had expanded its floor area to take in 5400 square feet on the main floor plus storage space at the basement level.

### COLLECTION

The collection of 7,000 books, 530 journal subscriptions, 50,000 journal volumes and 1,000 audio tapes serves a physician population of nearly 4,600. A survey done three years ago found that 43.7% of the province's doctors used the library over a one year period. Since the clientele is largely made up of practising doctors, the collections' content is primarily clinical. Research materials, when they are needed, are often borrowed from U.B.C. However, more than 80% of requests can be met by the existing collection. Relationships with the Woodward Biomedical Library at U.B.C. are amiable and cooperative. The College Library loans to Woodward and its branch at Vancouver General Hospital about one quarter of the number of items it borrows from them. Although there is as yet no formal cooperative acquisitioning, B.C.M.L.S. makes a point of picking up subscriptions to journals such as the U.S. state journals not obtained by U.B.C. An on-going archives collection of material relating to medicine in British Columbia is maintained. The library does have a small collection of old and rare books but this is not being increased.

### SERVICES

An attempt is made to meet quickly and efficiently any information needs of doctors-- questions relating to their practices, talks they are giving to professional or lay groups, papers they are writing and research they are doing, health education of patients, information about meetings, etc. The library staff of four professionals (two part-time) and six support personnel are kept busy throughout the year.

Telephone questions from outside the medical profession, particularly from the public, are frequent. These are most often handled at the time and occasionally referred to





other sources such as the public library.

One of the strengths of the library is the personalized service it is able to offer individual doctors. A good rapport has been built up between library staff and physicians, many of whom have a sense of pride in the quality of the services. As a working relationship this cannot be discounted and is probably the reason that medical society libraries remain alive and vigorous in North America and the U.K.

While the majority of reference requests come by telephone and by mail, doctors often come to the library "in person", while others use the telex. One of the difficulties of doing reference by long distance is the problem of clarifying questions. One solution to this problem may be the installation of a Zenith telephone line.

The library will loan journals for a brief period within Vancouver, but does not generally circulate journals outside the city. The policy of offering one hundred pages of photocopy per year without charge seems to meet most practitioners' needs.

The installation of a Medline service in November of 1976 is a great asset. To date no charge is being made for Medline searches although this policy is under review.

### HOSPITAL LIBRARIES

From the inception of the provincial service one of the major objectives has been the development of medical libraries in the hospitals of B. C. To this end, the \$10 - per - doctor grant for books has, in most cases, served as an incentive for hospitals to build their own collections. It is unfortunate that in a few situations the hospital has, because of the grant, opted out from responsibility for its library. The predictable results are inadequate libraries and disinterested staffs. One of the services instituted for hospital libraries in 1963 was the centralized ordering, cataloguing and processing of books. There are now seventy hospitals receiving this service. The advantage to the local hospital is that staff is relieved of much of the work of locating and ordering books, the books can be easily arranged on the shelves and the collections, as they grow, are completely catalogued by a professional librarian. The disadvantage for the hospital is that it takes longer for books to arrive. Another more fundamental disadvantage to the system is that with a strong central reference service and professional cataloguing supplied, the need for librarians or library technicians in hospitals is not so apparent to administrators. With budgets tight, staff for the library is not a high priority consideration when it often ought to be.

The large hospital libraries within Vancouver do not receive financial grants but do benefit from extensive inter-library loan services. More than 3400 items were loaned to the four largest hospitals in 1976. There were 718 loans to eleven other health institution libraries within Vancouver.

Both Vancouver hospitals and those outside the city receive extensive consultant services from the chief librarian. The larger hospitals seek advice on facility planning, layout, staffing, etc. All hospitals outside the Vancouver area are visited by the chief librarian every two years. These are trouble-shooting visits where a variety of local needs are met: collections are weeded and evaluated, recommendations for purchases are discussed, new books from the central library collection are displayed and new facilities are planned. Whenever possible, the librarian speaks to the medical staff - either formally or informally - to the administrator and to the



staff person in charge of the library. This field work is the ESSENCE of regional service and its most effective public relations.

### EDUCATION AND PUBLIC RELATIONS

Since most of the hospital libraries in B.C. are not managed by librarians but most often by medical records personnel, it is an important part of the service's function to provide guidance and training for the hospital staff people responsible for the library. This is done formally through workshops held at the library in Vancouver and informally during the librarian's visit to the local hospital.

Other educational and public relations efforts include a monthly library page in the B. C. Medical Journal, exhibits at medical conferences, particularly the B. C. Medical Association's annual meeting, and talks given periodically to the medical staff of a hospital during the librarian's visit.

### PRESENT NEEDS AND FUTURE PROSPECTS

In these inflationary times, the Medical Library Service has managed to have a budget surplus for the last two years. The current budget of \$217,000 will seem small to many, but it is a sizeable amount for a private institutional library to raise. Because the library budget must go up each year, there is some uneasiness on the part of members of the B. C. College Council. The question is asked, "How long can the medical profession in this province continue to support such an expensive service?"

When there seemed some chance of the Library Service being absorbed by the B. C. Medical Centre during the NDP provincial government years (1976-75), many physicians at the 1975 Annual Meeting of the College spoke out in favour of retaining the service no matter what it cost. It seems likely that this attitude is still prevalent - doctors in B. C. are willing to pay for the library service they receive. A direction for the future is the encouragement of regional library services to a wider clientele, including all of the health professions. That a need for such service exists is apparent. It is partially being met by the B. C. Health Association and the Registered Nurses Association of B. C. Both associations, from their libraries in Vancouver, will send materials to outlying regions. However, many health professionals - dentists, pharmacists, lab technicians, social workers and others do not have ready access to library materials. Regional health library services in B. C. need to be coordinated and expanded to provide rapid access for all groups.

In B. C. there is a particular need to devise an overall plan to assure the development of adequate hospital libraries. Administrators and health facility planners must be made to see that useful hospital libraries are those that are well-located, well-stocked, and well-staffed. As the pioneer in the establishment of libraries in B. C. hospitals, the B. C. Medical Library Service must take a leading role in their continuing development.

### SUMMARY

The development of Canada's only province-wide regional medical library separate from a university is described. The B. C. Medical Library Service offers direct access to medical information for every doctor registered with the province's College of Physicians



and Surgeons. In addition it provides financial support and consultant services for hospital libraries, extending this to centralized ordering and cataloguing for seventy hospitals outside the Vancouver area. The need to consolidate and extend regional library service to all the health professions is recognized.

C. William Fraser  
Chief Librarian  
Vancouver, B. C.

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6. COLLEGE of Physicians and Surgeons of British Columbia Newsletter No. 24, November, 1961 p. 12.

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#### CHLA/ABSC ANNUAL MEETING IN MONTREAL!

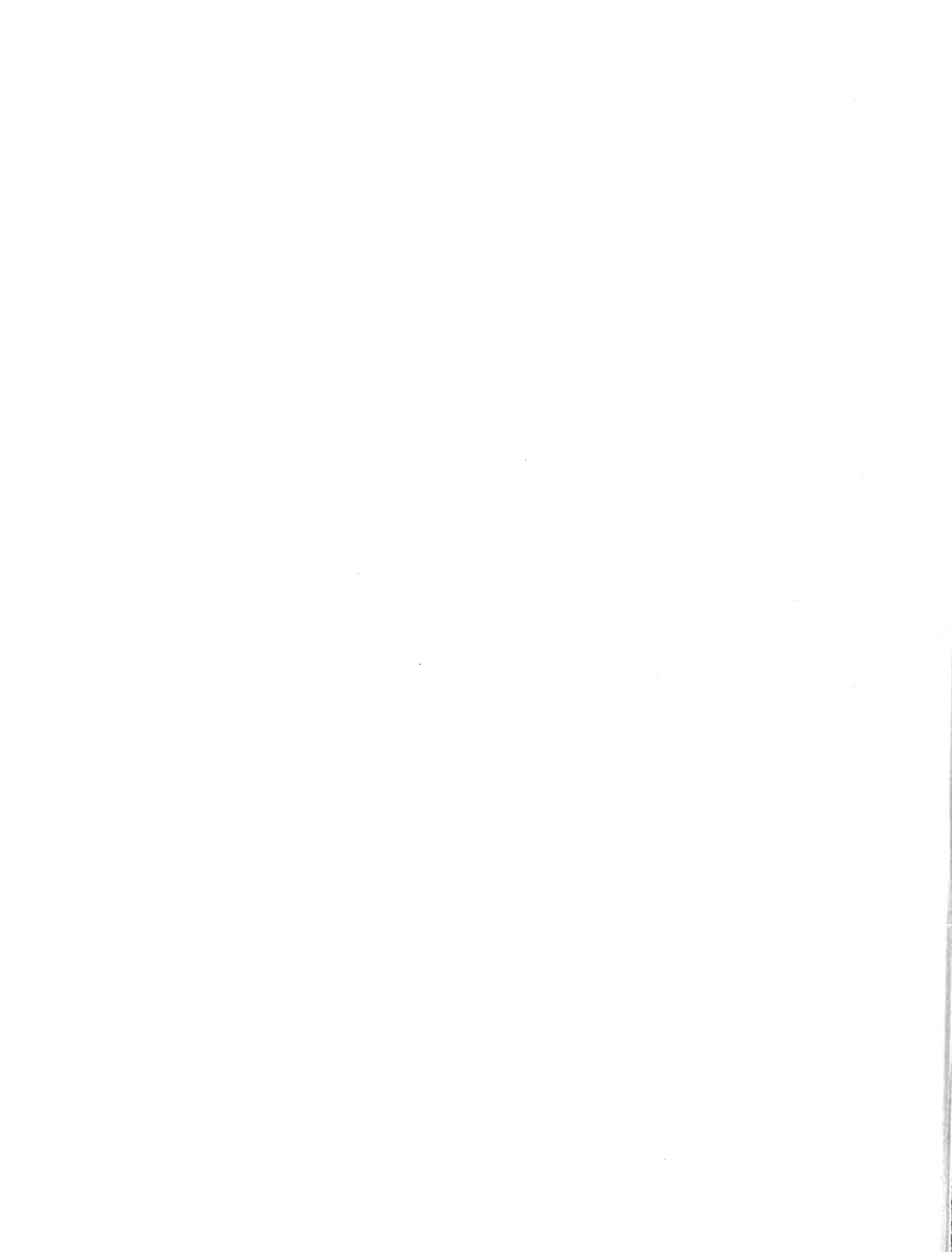
Due to the efforts of Program Chairman Mrs. M. A. (Babs) Flower and our President, the Program for the Annual Meeting has now been finalized and is being mailed under separate cover. You should have received a copy prior to receiving this Newsletter. If you haven't, please write or call David Crawford/Medical Library/McGill University/ 3655 Drummond Street, Montreal, Quebec/H3G 1Y6. 514 392-3059. The meeting is scheduled for June 9th and will be held at the Queen Elizabeth/Le Reine Elizabeth Hotel in Montreal. Don't miss the opportunity to attend the 1st meeting of your Association--one that promises to be very stimulating, indeed!

\* \* \* \* \*

*Imagine yourself in the centerfold of LJ.*

ed. note: or the CHLA/ABSC  
Newsletter

-Revoltng Librarians



## LETTERS TO THE EDITOR

### CHLA/ABSC MEMBERSHIP

After identifying the location of the first 140, or so, members of the CHLA, it becomes clear that we are dealing with two kinds of membership. There are those who are carrying on their library duties in communities where there are few or no other CHLA members and there are those who are working in cities where there are clusters of six or more members (Toronto, Montreal, Halifax, Ottawa, Winnipeg, Edmonton).

In drafting a Constitution and programme for CHLA/ABSC the new executive must concern itself with these communities. The Newsletter will be the obvious vehicle for the isolated member. In the six or so communities where there are groups of members, it would seem realistic to form chapters of some sort so additional members can be attracted in these areas.

I realize that some of these cities already have such groups. Hopefully they would wish to convert their local organizations to CHLA/ABSC Chapters and thus assure that our Association has a firm basis at the grass roots level. To encourage this kind of local organization we might rebate a portion of fees to the local chapters to at least cover some of their basic expenses.

I would hope that members who have views on the concept of chapters or on other aspects of our new organization would convey them to the Executive so that we can continue to accurately reflect the interests of the membership.

P.S.: In our first year of operations we have attracted three kinds of members:

- a) individuals paying their own membership
- b) individuals with membership paid by their institutions
- c) members who are in fact institutional subscribers

I think we should view CHLA/ABSC as an organization of individuals rather than of organizations as this seems most appropriate for the variety of members we now have. When the new constitution is drafted this individuality of members can be permitted by allowing the institution paying the fees to designate their member. But when an institution for their collection also wanted a copy of the Newsletter, they could then enter a subscription rather than hold another membership. We could then stipulate that no member could have more than one vote.

Comments should be sent to the President or the editor.

Yours sincerely,

Alan H. MacDonald  
Treasurer, CHLA/ABSC

### CANADIAN HOSPITAL STANDARDS

The Guide to Hospital Accreditation has endeavored to include standards affecting staff library development. Although the Canadian Standards for Hospital Libraries

(Cont'd.)





were used as a departure point, the Guide fails to include the complete Standards.

This omission will account for much of the confusion which must be experienced by the accreditation team. For instance, Standard I states that,

certain hospital libraries should be  
capable of providing information  
in support of clinical research

What appears in the Guide gives no indication as to which of these libraries should develop to this level. Is that not the whole point of developing standards and guidelines? If the Appendixes to the Standards had been included in the Guide, it would become obvious that Category 1 and 2 hospitals would establish libraries supportive of clinical research.

Standard II presents a good deal of difficulty for interpretation if only the Guide version is consulted. As it is, few people outside of our profession are aware of the differences in training and qualifications between the librarian and library technician. Indeed, a good many administrators in hospitals are not aware of the differences between the medical records librarian and the medical librarian! The interpretation in the Guide certainly does not enlighten the "lay" person. Only the addition of the appropriate appendix from the original Standards will accurately clarify the manpower requirements. The Appendix will also specify the necessary staff according to the Category of the hospital. This will certainly be more useful information for the Council.

These are only two examples of what ambiguities can exist if only the Guide to Accreditation is consulted by the accreditation team in examining library facilities instead of the complete Standards.

What should concern health science librarians in hospitals is whether or not the Standards, complete or incomplete, are ever really looked at when the accreditation team visits.

It has been my experience when visiting small hospital libraries in Ontario that upon accreditation, only a few of the libraries were ever visited. What may be more detrimental, however, is the situation where members of the accreditation team enter the library, notice the books on the shelves, then walk out! This incidence has been recounted to me more than once.

It is highly unlikely that the accreditation of a hospital will ever depend on the existence of a hospital library. However, if it is to be visited by an accreditation team, an evaluation should be done properly. A room with a shelf of books is no indication of quality!

One must wonder at the number of guidelines, standards etc. that the accreditation team has to read before going into a hospital. Many of these standards are directly related to the main functions of the hospital. Although provision of information services is important, it is not a top priority item. Therefore, there is a strong possibility that the Canadian Standards for Hospital Libraries may not be completely read.

(Cont'd.)



In what way then, can we provide the accreditation team with the elements we think are important without risking the chance that the Standards may never be read or interpreted accurately? Perhaps an abridged but complete checklist could be drawn up which would accompany the accreditation team. Of course, the complete set of Standards would be available with the list, but the checklist may cut down the amount of material which must be gone through. By virtue of its format the checklist will not only give a true picture of the practical elements necessary for the day by day operations of the library but it cannot fail to reveal obvious deficiencies such as the absence of Index Medicus or the non-existence of library staff!

Margaret Y. Walshe  
Consulting Librarian  
Ontario Medical Association

In the new edition of their Guide, the Canadian Council on Hospital Accreditation has seen fit to use the Standards evolved by the Joint Working Party and approved by Canadian medical librarians and other bodies. The broad outline has been accepted with some minor variations in wording. This in itself constitutes a step in the right direction. Unfortunately, the numerical appendixes have been left out. These contain the figures which give some significance to the outline and were meant to serve as a yardstick by which the individual hospital, and the Accreditation inspectors, could measure library facilities and practices in comparison with those of similar hospitals.

There is still a great variation in the services offered from one hospital to the next--even among teaching hospitals: regional systems, with one or two exceptions are non-existent and it is obvious that hospital personnel--administrators, physicians, educators are in many areas quite unaware of the resources that may be at their disposal and how to reach them.

It is to be hoped that this Association will continue the effort to have the full Standards, or some up-dated version there-of, accepted by the Council on Accreditation.

The full text of the Standards including the Appendixes was published in Canadian Medical Association Journal V. 112: 1271-1274, May 17, 1975.

Sheila Swanson

#### DISCLAIMER

The staff of the William Boyd Library wish to dissociate themselves from the extravagant claims made by the publicity department of the Academy of Medicine as quoted in the first Newsletter. Although we believe quality to be superior to quantity--and we wonder about the meaning of "private", nevertheless, the desire for informational exactitude inherent in all medical librarians impels us to modesty. Maybe the largest (private) in Canada -?

Sheila (ebullient = boiling) Swanson



## CHLA/ABSC FUND RAISING COMMITTEE FORMED

The interim Executive of CHLA/ABSC has recently formed a Fund Raising Committee whose mandate is to investigate additional sources of funding for Association activities and to report back to the Executive by January of 1978. The Committee will be chaired by Frances Groen of McGill University. The immediate Past President (David Crawford) and the soon-to-be-elected new President will be the two additional members of the Committee.

### MEMBERSHIP REPORT

As of May 16, there were 147 paid memberships in CHLA/ABSC. Seven have already renewed for 1977/78 and 12 new members have joined effective the start of the 1977/78 year. These 159 members are distributed as follows:

Newfoundland	6
Nova Scotia	20
P.E.I.	0
New Brunswick	5
Quebec	38
Ontario	66
Manitoba	11
Saskatchewan	3
Alberta	9
British Columbia	1

All members of record are listed on the following pages.

### MEMBERSHIP RENEWAL TIME (ALREADY!)

Please note that membership renewal or application for the period ending June 1978 is now due. The Treasurer suggests that registration at the annual meeting in Montreal (scheduled for June 9, 1977) will be simplified if members have renewed by that date.

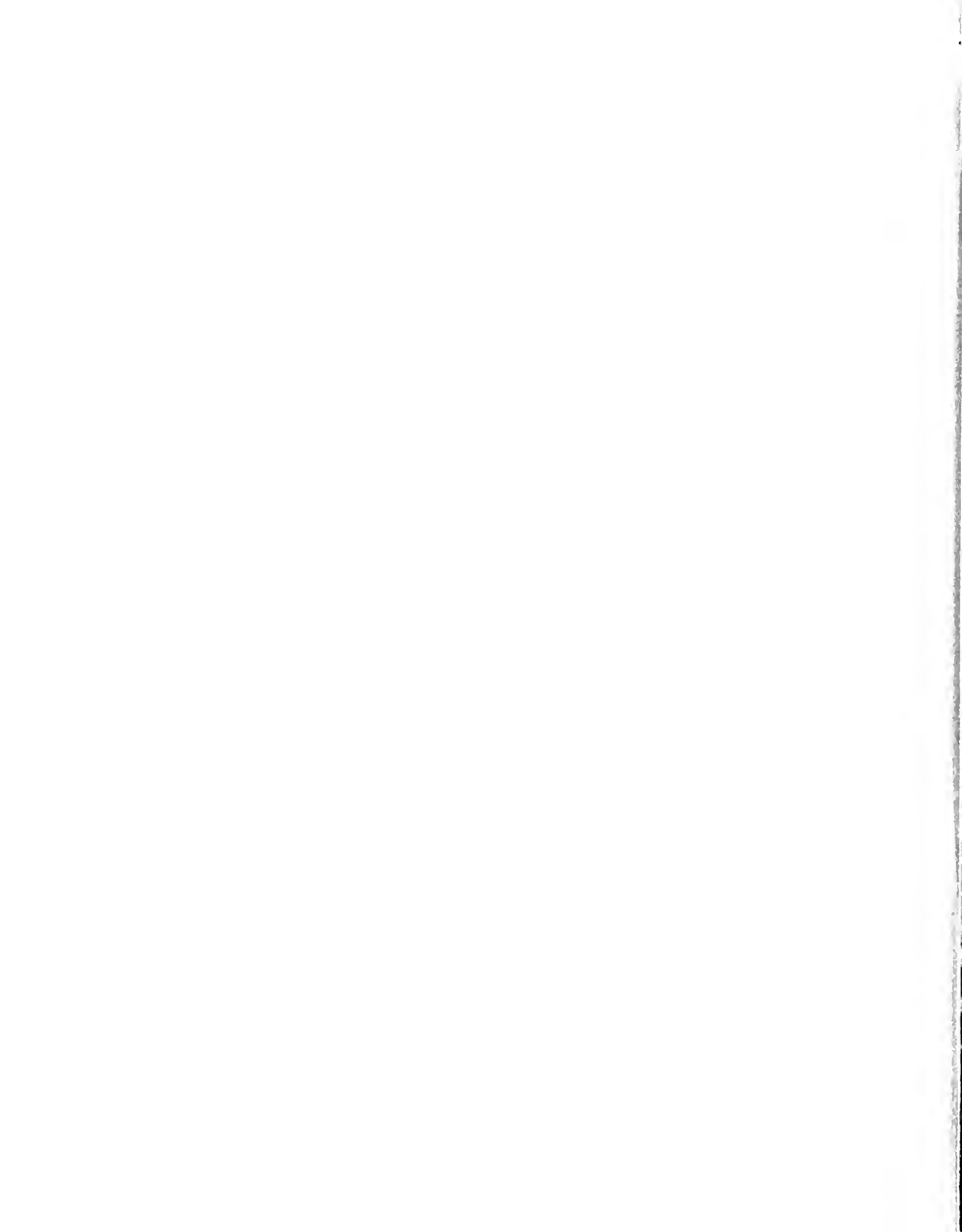
Membership forms are at the back. Renew now!

Help your association by giving a membership form to a potential member.



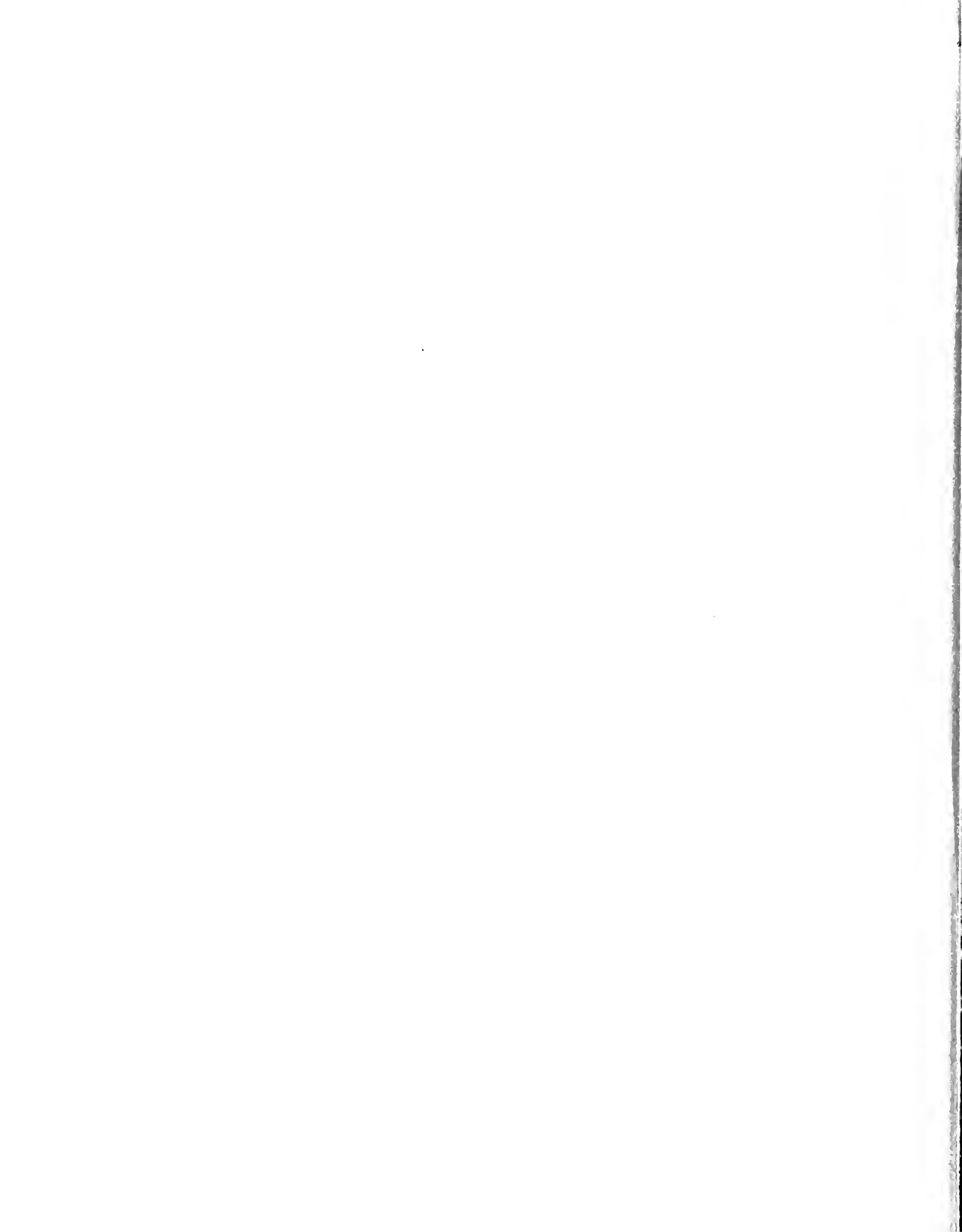
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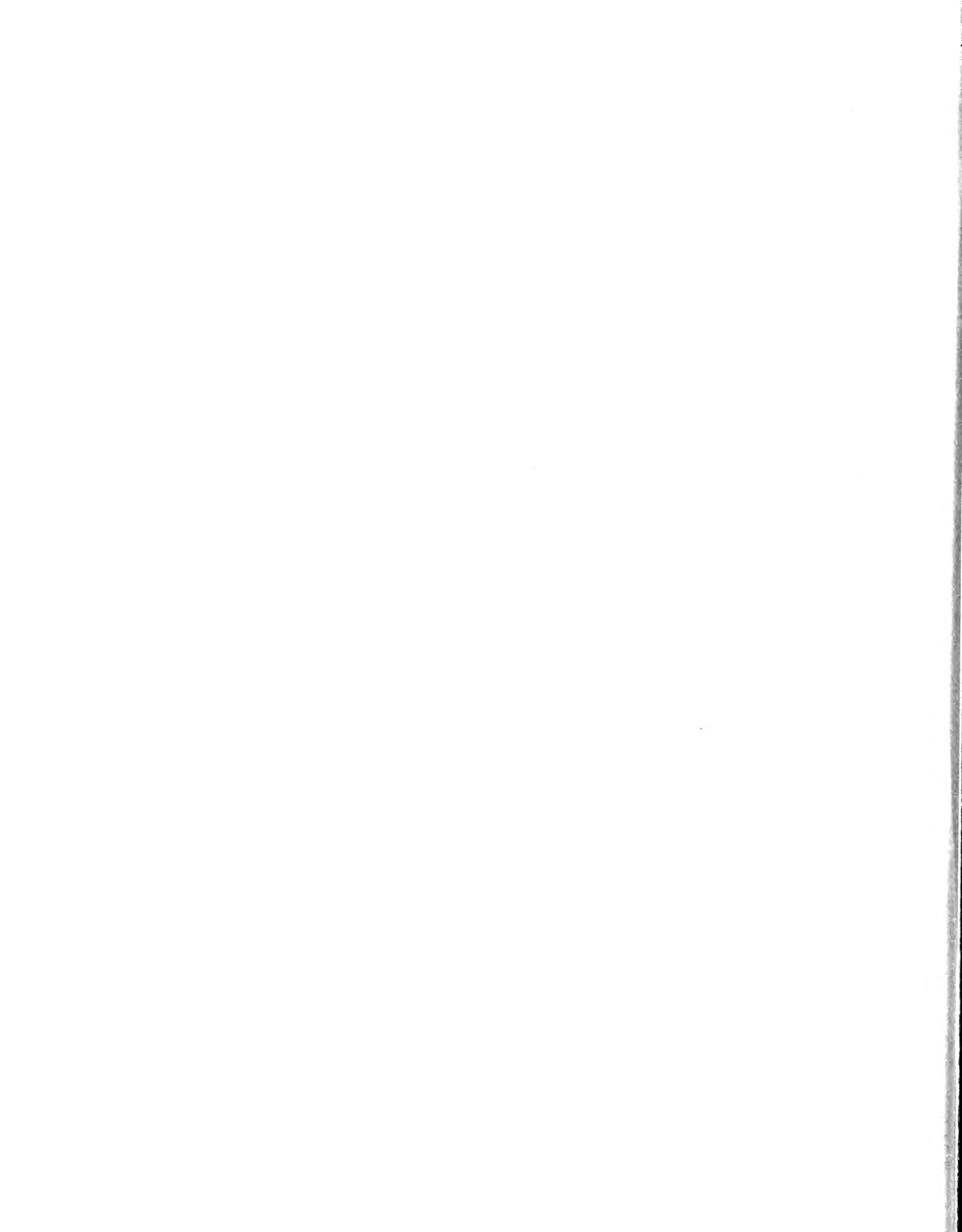
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DEBORAH LAMBERT APT. 803 515 CHAPLIN CRESCENT TORONTO, ONTARIO	77 M5N 2M1	ANGELLA LAMBROU 8195 DE L'EEPEE #1 MONTREAL, QUEBEC	77 H3N 2G2



SANDRA A. LANGLANDS MEDICAL LIBRARY UNIVERSITY OF MANITOBA 770 BANNATYNE AVENUE WINNIPEG, MANITOBA	77	R3E 0W3	MS. SUZANNE LAURIN-CONWAY HEAD LIBRARIAN ALGONQUIN COLLEGE (CJL.BY CAMPUS) 281 ECHO DRIVE OTTAWA, ONTARIO	77	K1S 3N4
LUCILE LAVIGUEUR (P.O.13A-154) MEDICAL LIBRARY ST. MARY'S HOSPITAL 3830 LACOMBE MONTREAL, QUEBEC	77	H3T 1W5	Mlle. AZELINE LEBLANC HOPITAUX ST-JEAN-PORT-JOLI C.P.250 ST-JEAN-PORT-JOLI CO. L'ISLET, QUEBEC	77	G0B 3G0
PHILIPPE LEMAY HEALTH SCIENCES RESOURCES CENTRE CISTI, BUILDING M-55, N.R.C. MONTREAL ROAD OTTAWA, ONTARIO	77	K1A 0S2	Mlle. CLAUDETTE LEMIEUX BIBLIOTHEQUE DE RECHERCHE LABORATOIRES MERCK-FROSST C.P. 1005 POINTE CLAIRE - DORVAL, QUEBEC	77	H9R 4G
MRS. BERTI LESIEUR MEDICAL LIBRARY MCGILL UNIVERSITY 3655 DRUMMOND STREET MONTREAL, QUEBEC	77	H3G 1Y6	MME. MARCELLE L'ESPERANCE 3527, RUE LAFONTAINE MONTREAL, QUEBEC	77	H1W 1V2
MRS. JOYCE MAUSLAND 218 WINDWOOD AVENUE POINTE CLAIRE, QUEBEC	77	H9S 3X8	A. H. MACDONALD APT.403 5713 VICTORIA ROAD HALIFAX, NOVA SCOTIA	77	B3H 2Y3
LINDA MCFARLANE 4 S. ANACK AVENUE TORONTO, ONTARIO	77	M4E 1Z1	MRS. MARGARET E. MACKAY MEDICAL LIBRARY HOSPITAL FOR SICK CHILDREN 555 UNIVERSITY AVENUE TORONTO, ONTARIO	77	M5C 1Y8
MS. JUDI MCKIM SAINT JOHN SCHOOL OF NURSING P.O. BOX 187 SAINT JOHN, NEW BRUNSWICK	77	E2L 3X8	MISS BESSIE MCKINLAY HAMILTON ACADEMY OF MEDICINE LIBRARY 286 VICTORIA AVE. NORTH HAMILTON, ONTARIO	77	L3L 5G1
SR. JULIETTE MERCIER 5 QUESNEL ARTHABASKA, QUEBEC	77	G6P 6N2	HELEN MICHAEL MEDICAL LIBRARY HEALTH SCIENCES CENTRE MEMORIAL UNIVERSITY OF NFLD. ST. JOHN'S, NEWFOUNDLAND	77	A1B 3V4
MS. VALERIE MONKHOUSE APT. 1008 151 BAY STREET OTTAWA, ONTARIO	77	K1R 7T2	MS. MAE MURLEY LIBRARIAN KINGSTON PSYCHIATRIC HOSPITAL P.O. BOX 603 KINGSTON, ONTARIO	77	K7H 2P1
MS. MARJORY L. MORPHY 55 PACIFIC AVENUE, APT.702 TORONTO, ONTARIO	77	M6P 2P4	MS. JAYNE R. MORTENSON 1574 ROBIE STREET HALIFAX, NOVA SCOTIA	77	B3H 3P4
EILEEN A. MURDOCH 166 BASTEDO AVENUE TORONTO, ONTARIO	77	M4C 3N1	MRS. AIMEE MUTHER MEDICAL LIBRARY LAKESHORE GENERAL HOSPITAL 160 STILLVIEW ROAD POINTE CLAIRE, QUEBEC	77	H9R 2Y2
MRS. ANN NEVILL APT.320, 300 MICMAC BLVD DARTMOUTH, NOVA SCOTIA	77	B3A 4L6	MRS. J. NORMAN (P.O.0727) ABBIE J. LANE HOSPITAL 5909 JUBILEE ROAD HALIFAX, NOVA SCOTIA	77	B3H 2E2



MR. FRANK DRAM, LIBRARIAN HEALTH SCIENCES LIBRARY VICTORIA GENERAL HOSPITAL HALIFAX, NOVA SCOTIA	85H 2Y9	77 MRS JOYCE OWERS I.G.A. HOSPITAL ST. ANTHONY, NEWFOUNDLAND	AOK 450	77
LUCIEN PAPIILLON 1057 DE GRENJBLE STE. FOY, QUEBEC	G1V 3A1	77 MISS WENDY E. PATRICK BOTANY/GENETICS LIBRARY MCGILL UNIVERSITY 1205 MCGREGOR AVENUE MONTREAL, QUEBEC	H3A 1B1	77
MISS MARGARET L. PARKIN THE LIBRARY (P.O. 6945) CANADIAN NURSE'S ASSOCIATION 50 THE DRIVEWAY OTTAWA, ONTARIO	K2P 1E2	77 P. E. PELCHAT R.R. #4 NEW GERMANY, NOVA SCOTIA	B0R 1E0	77
G.R. PENDRILL SCHOOL OF LIBRARY & INF. SCIENCE UNIVERSITY OF WESTERN ONTARIO LONDON, ONTARIO	N6A 5B9	77 DENISE POIRIER 214 - 585 WINAKWA WINNIPEG, MANITOBA	R2J 1E9	77
MS. JOAN PRENTICE HEALTH SCIENCES LIBRARY PLAINS HEALTH CENTRE 4500 WASCANA PARKWAY REGINA, SASKATCHEWAN	S4S 5W7	77 MS. BARBARA PRINCE HEALTH SCIENCES LIBRARY DALHOUSIE UNIVERSITY HALIFAX, NOVA SCOTIA	B3H 447	77
MRS. DORIS PRITCHARD DENTAL LIBRARY UNIVERSITY OF MANITOBA 780 BANNATYNE AVENUE WINNIPEG, MANITOBA	R3E 0W3	77 ELIZABETH A. PEID MEDICAL LIBRARY TORONTO WESTERN HOSPITAL 399 BATHURST STREET TORONTO, ONTARIO	M5T 2S7	77
MRS. BEATRIX H. ROBINSON HEALTH SCIENCES LIBRARY MCMASTER UNIVERSITY 1200 MAIN STREET WEST HAMILTON, ONTARIO	L8S 4J9	78 BERNICE L. ROWCLIFFE MEDICAL LIBRARY ST. JOSEPH'S HOSPITAL LONDON, ONTARIO	N6A 4V7	77
MRS. MAE ROWE R.R. #1 DUFFIELD, ALBERTA	T0E 0V0	77 PHYLLIS J. RUSSELL #304 - 11007 - 83 AVENUE EDMONTON, ALBERTA	T6G 0T7	77
MARIE SALVAIL CENTRE DE DOCUMENTATION CORP. PROFESSIONNELLE DES MEDECINS SUITE 914, 1440 ST. CATHERINE WEST MONTREAL, QUEBEC	H3G 1S5	77 HENRIETTE A. SCHMIDT 1862 PLAYFAIR DRIVE OTTAWA, ONTARIO	K1H 5S1	77
CATRIONA DE SCOSSA FACULTY OF LIBRARY SCIENCE RUTHERFORD SOUTH UNIVERSITY OF ALBERTA EDMONTON, ALBERTA	T6G 2J4	77 ANNE SEHEULT APT. 201 - 9 GROSVENOR STREET LONDON, ONTARIO	N6A 1Y7	77
MRS. CYNTHIA SHADBOLT LIBRARY (P.O. 104503) CONNAUGHT LABORATORIES LTD. 1755 STEELES AVENUE WEST WILLOWDALE, ONTARIO	M2N 5T8	77 CATHERINE SHEPHAN MEDICAL LIBRARY HEALTH SCIENCES CENTRE MEMORIAL UNIVERSITY OF NFLD. ST. JOHN'S, NEWFOUNDLAND	A1B 3V5	77
MRS. JUNE SHORE MOHAWK CAAT HAMILTON CIVIC CAMPUS 237 BARTON STREET EAST HAMILTON, ONTARIO	L8L 2X2	77 MRS. DOROTHY SIRDIS APT. 309 4850 COTE DES NEIGES MONTREAL, QUEBEC	H3V 1G5	77





DR. MURIEL S. SMITH 6010 INGLIS STREET HALIFAX, NOVA SCOTIA	83H 1L1	77	MRS. AUDREY D. SOMERS HEALTH SCIENCES LIBRARY MIRAMICHI HOSPITAL NEWCASTLE, NEW BRUNSWICK	E1V 3M4	7
MRS. JOAN STANSELL HOSPITAL LIBRARY HENDERSON GENERAL HOSPITAL 711 CONCESSION STREET HAMILTON, ONTARIO	L8V 1C3	77	MRS. DAWN STEWARDSON FARRAR LIBRARY CLARKE INSTITUTE OF PSYCHIATRY 250 COLLEGE STREET TORONTO, ONTARIO	M5T 1R4	7
RUTH STILMAN - LIBRARY (P.O. 76829) INST. OF COMMUNITY & FAMILY PSYCHIATRY JEWISH GENERAL HOSPITAL 4333 COTE STE CATHERINE MONTREAL, QUEBEC	H3T 1E2	77	MRS. MARTHA B. STONE 513 HILSON AVENUE OTTAWA, ONTARIO	K1Z 6C9	7
MS. DANUTE S. STULGYS 173 FERN AVENUE TORONTO, ONTARIO	M6R 1K2	77	MRS. SHEILA SWANSON C/O ACADEMY OF MEDICINE 238 BLOOR STREET WEST TORONTO, ONTARIO	M5S 1V9	7
MRS. EDITH TAFLER CENTRAL HOSPITAL 333 SHERBOURNE STREET TORONTO, ONTARIO	M5A 2S5	77	LYNN TPUAX 5 MASSEY SQUARE, APT. B11 TORONTO, ONTARIO	M4C 5L0	7
JAKE VANDE BRINK 16001 - 89 AVENUE EDMONTON, ALBERTA	T5R 4R5	77	SYLVIA VAN HAITSKA MEDICAL SCIENCES LIBRARY UNIVERSITY OF ALBERTA EDMONTON, ALBERTA	T6G 2J1	7
MARY ZELDA VIRTUE 52 COLLEGE VIEW AVENUE TORONTO, ONTARIO	M5P 1J5	78	JANE WACHNA (P.O. 3173) LIBRARIAN CANADIAN HOSPITAL ASSOCIATION 25 IMPERIAL STREET TORONTO, ONTARIO	M5P 1C1	7
ELAINE WADDINGTON 7631 OSTELL CRESCENT MONTREAL, QUEBEC	H4P 1Y7	77	MARGARET Y. WALSH LIBRARIAN ONTARIO MEDICAL ASSOCIATION 240 ST. GEORGE STREET TORONTO, ONTARIO	M5R 2J	7
HANNA WALUZYNIC 905 DUNLOP AVENUE MONTREAL, QUEBEC	H2V 249	77	MISS MONICA WEBSTER HEALTH SCIENCES LIBRARY QUEEN'S UNIVERSITY KINGSTON, ONTARIO	K7L 3N6	7
MRS. W. N. WHITE SCOBIE MEMORIAL LIBRARY RIVERSIDE HOSPITAL 1967 RIVERSIDE DRIVE OTTAWA, ONTARIO	K1H 7W9	77	MRS. JEAN COLLINS WILLIAMS ONTARIO MINISTRY OF HEALTH 7TH FLOOR 15 OVERLFA BLVD. TORONTO, ONTARIO	M4H 1A9	7
SR. MARY WILLIAMS 55 WHITNEY AVENUE SYDNEY, NOVA SCOTIA	B1P 4Z8	77	JOHN R. WILSON 706 - 35 WYNFORD HEIGHTS CRES. DON MILLS, ONTARIO	M3C 1K9	7
SHIRLEY WONG 427 BELSIZE DRIVE TORONTO, ONTARIO	M4S 1N3	77	MRS. SHELAGH WOTHERSPOON MEDICAL LIBRARY HEALTH SCIENCE CENTRE MEMORIAL UNIVERSITY OF NFLD ST. JOHN'S, NEWFOUNDLAND	A1B 3V5	7



LIBRARY CHALEUR GENERAL HOSPITAL POSTAL DRAWER "S" BATHURST, NEW BRUNSWICK	77 E2A 4A4	SERIALS SERVICES (K47220) KFLLOGG HEALTH SCIENCES LIBRARY DALHOUSIE UNIVERSITY HALIFAX, NOVA SCOTIA	77 B3H 4H7
LIBRARY DEPT OF HEALTH & SOCIAL DEVELOPMENT ROOM 202 880 PORTAGE AVENUE WINNIPEG, MANITOBA	77 R3G OP1	CENTRE D'INF. SUR LA SANTE DE L'ENFANT HOPITAL SAINTE JUSTINE 3175 CHEMIN SAINTE-CATHERINE MONTREAL, QUEBEC	77 H3T 1C5
MEDICAL LIBRARY (PO 92862) MCGILL UNIVERSITY 3655 DRUMMOND STREET MONTREAL, QUEBEC	77 H3G 1Y6	MEDICAL LIBRARY SERIALS SECTION HEALTH SCIENCES CENTRE MEMORIAL UNIVERSITY ST. JOHN'S, NEWFOUNDLAND	79 A1A 376
LIBRARY (P.O. 48348) MISERICORDIA HOSPITAL 16940 - 87 AVENUE EDMONTON, ALBERTA	78 T5R 4H5	MEDICAL LIBRARY (P.O. 26809) ROYAL ALEXANDRA HOSPITAL 10240 KINGSWAY AVENUE EDMONTON, ALBERTA	77 T5H 3V9
BIBLIOTHEQUE MEDICALE (P.O. 25544) HOPITAL GENERAL DE LA REGIONA DE L'AMIANTE 1717 NOTRE-DAME NORD THETFORD MINES, QUEBEC	78 G6G 2V4	STAFF LIBRARY (P.O. MH-270450) WHITBY PSYCHIATRIC HOSPITAL P.O. BOX 613 WHITBY, ONTARIO	77 L1N 5S9
VANIER MEDICAL LIBRARY 11 SOMERSET STREET EAST OTTAWA, ONTARIO	77 K1N 9A3		



LATE ARRIVALS

Adorian, M. (Mrs.)  
Medical Library  
Centre Hospitalier Jewish General  
3755 Cote Ste. Catherine  
Montreal, Quebec  
H3T 1E2

Baisarowicz, Shan  
1580 Dublin Ave.  
Winnipeg, Manitoba  
R3E 0L4

Boski, Marina M. (Mrs.)  
4132 Melrose Ave.  
Montreal, Quebec

Branton, Sharon (Ms.)  
418 Whitney Ave., Apt. 411  
Hamilton, Ontario  
L8S 2H8

Kwiecinska, Joan (Mrs.)  
1808 Sherbrooke St. West  
Apt. 606  
Montreal, P.Q. H3H 1E5

Sprague, Mary (Mrs.)  
The Library  
The Carleton Memorial Hospital  
P.O. Box 400  
Woodstock, N.B.  
EOJ 2B0

Steedman, Isobel M. (Miss)  
Manitoba Cancer Foundation Library  
700 Bannatyne Avenue  
Winnipeg, Manitoba  
R3E 0V9

Vitek, E.  
199 Roehampton #906  
Toronto, Ontario  
M4P 1R5

Voelker, Linda (Ms.)  
Health Sciences Library  
University of Western Ontario  
London, Ontario N6A 5C1

Health Sciences Library (HX1064593)  
Camp Hill Hospital  
Halifax, Nova Scotia  
B3H 3G2

Library  
Dartmouth General Hospital  
P.O. Box 1016  
Dartmouth, N.S.  
B2Y 3Z7

The George Williamson Medical Library  
Ottawa Civic Hospital  
1053 Carling Ave.  
Ottawa, Ontario K1Y 4E9

Medical Librarian  
Provincial Hospital  
P.O. Box 10  
Campbellton, N.B.  
E3N 3G2



CANADIAN HEALTH LIBRARIES ASSOCIATION

Membership Application

Name.....

Address.....

.....

Postal code.....

I enclose \$15.00 (made payable to Canadian Health Libraries Association) as my membership fee for the period ending June 1978.

PLEASE RETURN THIS FORM TO: -

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W.K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7

---

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

Formule d'Application

Nom.....

Adresse.....

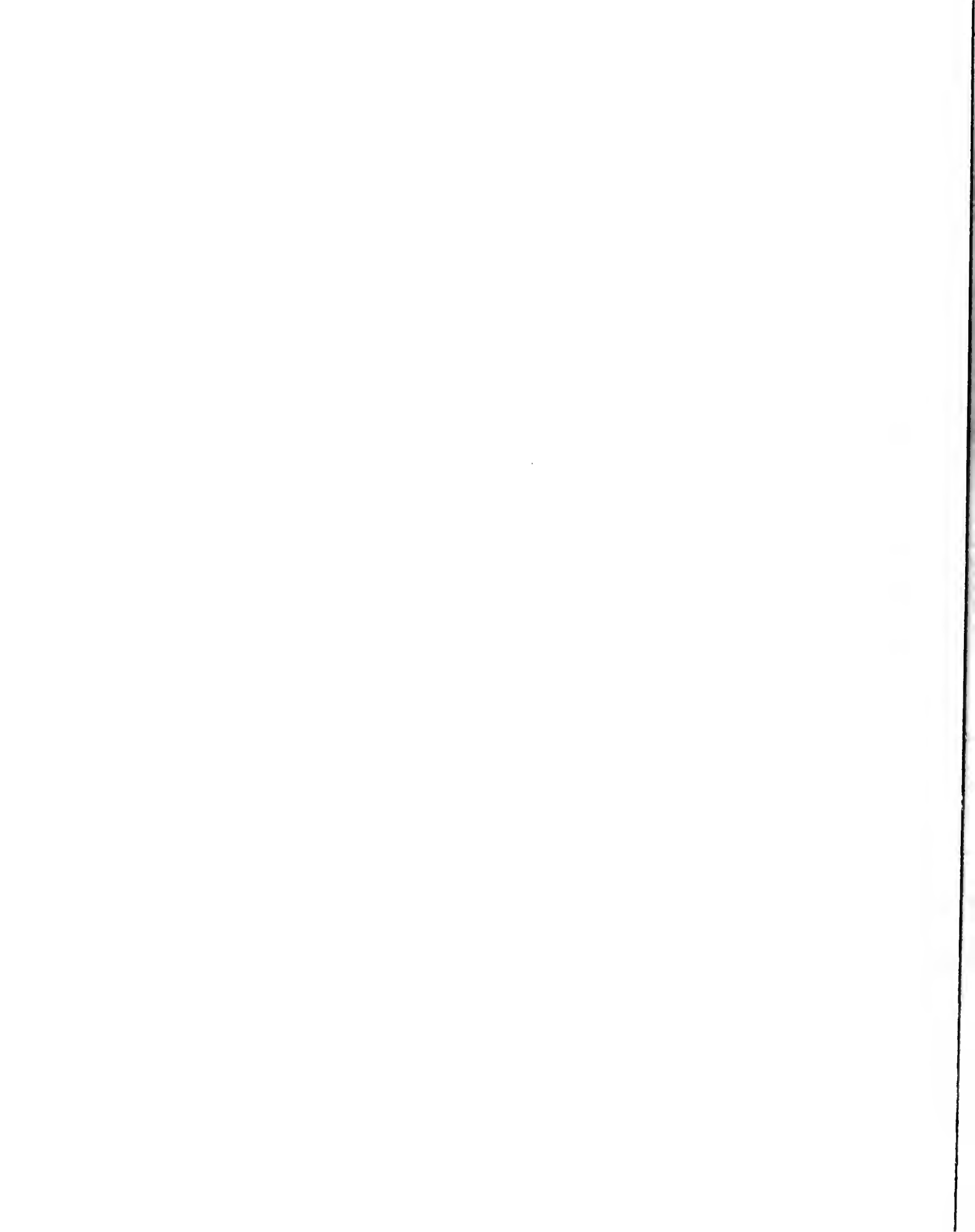
.....

Code postale.....

J'inclus \$15.00 (payable a Canadian Health Libraries Association) comme cotisation pour la periode qui se termine en juin 1978.

ADRESSE DE RETOUR:

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W.K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7



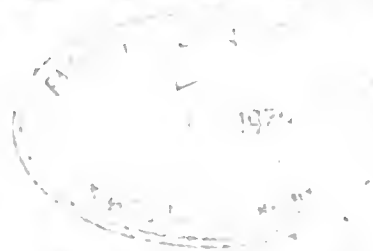


CHLA



ABSC

NEWSLETTER



No. 3

ISSN 0700-5474

FALL 1977

MESSAGE FROM THE EDITOR

After considerable soul-searching along with some persuasion by friends, your Editor has decided to stay on for at least one year....After a long summer away from home and the office, during which time I was unable to actively solicit material, I was delighted to find that there were enough contributions to make a very interesting Fall issue....Obviously your contributions and interest are vital to our continuing success--keep them coming...As you will read in the Minutes of the CHLA/ABSC Executive meeting, an Editorial Committee was established to assist and advise the Editor of the Newsletter. Membership on the Committee presently includes the Editor and David Crawford with the latter as Chairman. One or two additional members may be added in October when this Committee will hold its first meeting. At that time, policies with regard to frequency of publication, deadlines, bilingualism, features and similar items will be discussed....The Editor would like to hear from persons who are willing to volunteer as correspondents or stringers for the Newsletter. Their role would be to gather news at local and regional levels for submission to the Editor. We already have one correspondent for Manitoba. Others are needed for the following regions: the West, (or Alberta and B.C. separately), the Yukon and Northwest Territories, Ontario, Quebec, and the Maritimes. Someone willing to gather news from our Francophone members would also seem to be essential, as would those who would be willing to gather news along topical lines (developments in hospital libraries, media services, etc.). If there are any volunteers out there, contact your editor....The next meeting of the CHLA/ABSC Executive will be in Montreal in early October, as most of the members of the Executive will be in Montreal at that time to attend the meeting of the Special Resource Committee on Medical School Libraries of ACMC....Next issue scheduled for December.

CANADIAN HEALTH LIBRARY ASSOCIATION

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA



## FUTURE MEETING DATES

October 13 - 15, 1977

Upstate New York and Ontario Regional Group of the Medical Library Association. Annual Meeting at the Holiday Inn, 150 King Street East, Hamilton, Ontario. Continuing Education Course offered on Thursday, Oct. 13. Further Information: Beatrix Robinow, Health Sciences Library, McMaster University Hamilton, Ont. L8S 4J9

October 27 - 19, 1977

North Atlantic Health Sciences Libraries, A Regional Group of the Medical Library Association. Annual Meeting in Montreal, Quebec. Further Information: Mrs. Claire Turnbull, Medical Library, McGill University, 3655 Drummond Street, Montreal, H3G 1Y6

June 10 - 15, 1978

Medical Library Association, Annual Meeting in Chicago, Illinois.

mid-June, 1978

Canadian Health Library Association/ Association des Bibliothèques de la Santé du Canada, 2nd Annual Meeting, Edmonton, Alberta (specific date(s) to be announced, but CLA dates are June 15 - 20.

September, 1980

4th International Congress on Medical Librarianship, Yugoslavia.

### CHLA/ABSC FIRST ANNUAL MEETING A HUGE SUCCESS

The first Annual Meeting of the Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada was held June 9, 1977, at the Queen Elizabeth Hotel. David S. Crawford of McGill University, presided over the inaugural meeting as President of the organization. The morning program featured a panel "Where's What?" with panel members discussing the features and services of some of Canada's key health library organizations. The panel included Philippe Lemay (Health Sciences Resource Centre, CISTI), Martha Stone (Health and Welfare), Margaret Parkin (Canadian Nurses Association), Jane Wachna (Canadian Hospital Association), Dorothy Fitzgerald (College of Family Physicians of Canada), and Elaine Waddington (ASTED). Following the panel session, Frances Groen reported on briefs recently submitted to the National Library Objectives Survey and to the Director of CISTI/ICIST. The business session of the meeting saw reports delivered by the President, the Secretary Treasurer and by the Editor of Publications. The afternoon session featured an amusing and informative

talk by Dr. Eleanor McGarry, Professor of Medicine and Chairman of the Life Sciences Area Library Committee of McGill University, entitled "The Role of Hospital Libraries in Continuing Education." Post meeting activities included visits to various health libraries in the Montreal area. The Association owes its thanks to M. A. "Babs" Flower, Local Arrangements Organizer, for a well-organized and interesting meeting.

Next year's meeting will be held in Edmonton, Alberta. While the meeting will be held to dovetail with the Annual Meeting of the Canadian Library Association, the exact date(s) of the CHLA/ABSC 2nd Annual Meeting will be announced in a later issue of your CHLA/ABSC Newsletter.

CHLA/ABSC FINANCIAL STATEMENT

4 Oct. 1976 - 31 May 1977

REVENUE

1976/77	146 Memberships @ \$7.50	\$1,095.00
	1 Partial Membership @ \$7.00	7.00
	2 Donations @ \$7.50	15.00
	Exchange on U.S. Funds	.13
	Interest	4.39
		<u>\$1,121.52</u>
1977/78	16 New Memberships @ \$15.00	240.00
	1 Partial new membership @ \$7.50	7.50
	8 Renewed memberships @ 15.00	120.00
	2 Partial renewals @ \$7.50	15.00
		<u>\$ 382.50</u>
1978/79	1 Renewed membership @ \$15.00	15.00
		<u>\$ 15.00</u>
	TOTAL	<u>\$1,519.02</u>

EXPENDITURES

Secretary - Postage, printing, photocopy, etc.	\$ 50.00
Mailing of Newsletter No. 1	31.39
Printing	57.00
Membership records and labels	54.45
Printing (letterhead, program)	36.85
Election	26.46
Telephone	28.40
	<u>\$ 284.55</u>
Balance on hand, 31 May 1977	\$1,234.47

Alan H. MacDonald  
Treasurer

CHLA/ABSC

MEMBERSHIP REPORT

As of 6 June, 166 persons and institutions have registered for membership in the C.H.L.A. The geographic breakdown is as follows:

Newfoundland	6	
Nova Scotia	22	
New Brunswick	6	
Quebec	40	(incl. Montreal - 32)
Ontario	66	(incl. Ottawa - 15) Toronto - 32) Hamilton - 5) London - 6)
Manitoba	13	
Saskatchewan	3	
Alberta	9	
British Columbia	1	

Alan H. MacDonald  
Secretary-Treasurer

\* \* \* \* \*

*Bring in goodies...Decorate, celebrate. It's always a holiday somewhere  
...Find a garden to lunch in. Sometimes have a departmental picnic.  
Bread, cheese and wine.*

*-Revolting Librarians*

\* \* \* \* \*

CHLA/ABSC

REPORT OF THE ELECTIONS COMMITTEE

147 ballots were mailed on 12 May 1977 to those members who had paid their 1976/77 dues before 11 May 1977.

108 ballots (73.5%) were received and were counted on 3 June 1977 by the ad hoc Elections Committee of Barbara Prince, Muriel Smith and Helen Branny, all members in good standing.

The following are declared elected:

M. A. Flower, Montreal, President by acclamation

(cont'd.)

David Crawford, Montreal for two year term  
Alan MacDonald, Halifax for two year term  
William Fraser, Vancouver for two year term

Philippe LeMay, Ottawa for one year term  
Martha Stone, Ottawa for one year term  
Sheila Swanson, Toronto for one year term

TALLY

Eileen Bradley	32	Alan MacDonald	66
David Crawford	78	Linda MacFarlane	32
Kathleen Eagleton	27	Frank Oram	22
Dorothy Fitzgerald	30	Margaret Parkin	24
William Fraser	61	Phyllis Russell	38
Barbara Henwood	31	Martha Stone	45
Sandra Langlands	24	Sheila Swanson	44
Philippe Lemay	48		

\* \* \* \* \*

*How many commercials, how many movies, how many stories about shushing librarians and hushed up libraries can be presented until no one will be able to perceive anything else, no matter what the truth may be?...Even on Sesame Street recently a librarian moppet made the scene - and Sesame Street is where kids learn the truth and soul of the matter and not the usual stereotyped bullshit, right? So what did the librarian do the whole time on stage?*

*He shushed.*

*-Revoltng Librarians*

*Ed. Note: Remember the Dynamint Television Commercial!*

\* \* \* \* \*

PUBLICATIONS AVAILABLE

COMPTES RENDUS DES CONFÉRENCES SUR LES SCIENCES DE LA SANTÉ  
qui se trouvent à  
l'Institut canadien de l'information scientifique et technique

Supplément de 1976  
Prix: \$15

Ottawa, 1977  
(CNRC n° 16013)

L'Institut canadien de l'information scientifique et technique

est heureux d'annoncer que la publication ci-dessus est maintenant en vente.

Le Supplément de 1976 accompagne le volume 1 de 1973 et les Suppléments de 1974 et 1975, qui signalent les comptes rendus de conférences monographiques conservés à l'ICIST à compter de 1925, puis les comptes rendus de conférences monographiques et périodiques à compter de 1970. Le présent Supplément signale 1,200 comptes rendus de conférences recus de décembre 1975 à la fin de décembre 1976.

Il n'y aura pas de cumulation pour les années 1974 à 1976, et un supplément annuel sera publié seulement.

Prière d'adresser les commandes à la

Section des publications  
Institut canadien de l'information scientifique  
et technique  
Conseil national de recherches du Canada  
Ottawa, Canada  
K1A 0S2

CONFERENCE PROCEEDINGS IN THE HEALTH SCIENCES  
held by  
The Canada Institute for Scientific and Technical Information

SUPPLEMENT 1976  
Price \$15.00

Ottawa, 1977  
(NRC No. 16013)

The Canada Institute for Scientific and Technical Information is pleased to announce that the above publication is available for sale.

This 1976 supplement is a companion to Volume 1, 1973, and the 1974 and 1975 Supplements, which, together, contain monographic conference proceedings held by CISTI from 1925, and both monographs and serials from 1970. The present supplement contains 1,200 proceedings of conferences received from December 1975 through December 1976.

There will be no cumulative volume for the year 1974 to 1976 and we will continue to publish annual supplements only.

Orders may be addressed to:

Publications Section  
Canada Institute for Scientific and Technical  
Information  
National Research Council of Canada  
Ottawa, Canada  
K1A 0S2

## CONSTITUTION DE LA BIBLIOTHEQUE OSLER

Bien que la bibliothèque Osler ait été nommée en l'honneur de sir William Osler (1849-1919), l'un des médecins les plus réputés au Canada, sa collection d'histoire de la médecine s'est constituée au cours des cinquante dernières années, à partir de divers fonds complémentaires au nombre desquels, évidemment, la bibliothèque personnelle de Sir William.

La bibliothèque a été fondée en 1929, lorsque la faculté de médecine de l'université McGill hérita de la collection d'Osler. Au fil des années vinrent s'y ajouter les monographies et revues scientifiques périmées provenant de la bibliothèque de la faculté de médecine. Ces deux collections ont formé le noyau de la bibliothèque Osler telle que nous la connaissons maintenant.

La collection personnelle d'Osler était marquée de plusieurs traits caractéristiques qui se retrouvent chez celles qui s'y sont jointes. En premier lieu, environ la moitié de la collection de 8,000 livres et manuscrits se composait de documents servant à l'interprétation ("secondaires"), soit biographies et histoires de la médecine. La seconde moitié consistait en documentation proprement dite ("primaire"), c'est-à-dire rédigée en autres par des médecins pour utilisation en médecine au cours des siècles. En deuxième lieu, alors que les ouvrages d'interprétation provenaient de toutes les périodes de l'histoire de la médecine, les ouvrages de documentation étaient axés sur les débuts de la médecine moderne, particulièrement aux 15e, 16e, 17e et 18e siècles. Enfin, cette collection était équilibrée, dans le sens où elle comprenait non seulement des livres de médecins et chirurgiens célèbres, tels que Vesalius, Harvey et Boerhaave, mais encore d'auteurs moins connus - mais de valeur historique comparable, dont Symphorien Champier, Robert Fludd et Sir William Petty.

La bibliothèque de la faculté de médecine de McGill, fondée en 1823, a aussi apporté sa contribution, sous forme de transfert, d'environ 8,000 volumes à la bibliothèque Osler. Grâce à sa longue existence et à son orientation pendant le 19e siècle, cette seconde source a également doté la bibliothèque Osler d'un ensemble de caractéristiques. D'abord, elle était riche en documentation du 18e et du 19e siècles, particulièrement en revues médicales. Elle était aussi riche en documentation de langue anglaise publiée au Canada, en Grande-Bretagne et aux Etats-Unis. Ensuite, cette bibliothèque desservant une faculté orientée vers la recherche, ses collections étaient abondantes dans le domaine des sciences et des spécialités médicales. Enfin, elle ne comprenait quasi aucune documentation secondaire.

En bref, les transferts de volume de la bibliothèque de médecine de McGill et le legs de la collection personnelle de Sir William Osler se complétaient, composant une nouvelle collection, diversifiée et équilibrée, de matériel de recherche en histoire de la médecine.

Maintenir et amplifier cet équilibre incombe maintenant aux responsables des dons et acquisitions de la bibliothèque. En pratique cela s'effectue par la recherche et la collecte de documents de toutes les périodes et de toutes les régions géographiques aussi bien que de tous les niveaux de la théorie et de la pratique médicales. De plus, on fait l'acquisition de documents destinés à alimenter la clientèle particulière de la bibliothèque: médecins, étudiants en médecine, étudiants de tous les cycles en histoire et historiens de carrière, dont les intérêts s'étendent à une vaste gamme de points de vue historiques: intellectuel, social, biographique, économique.



Plusieurs dons récents de documents en homéopathie illustrent la façon dont la bibliothèque peut étendre le champ des collections. Il n'y a pas longtemps, l'hôpital Reine-Elizabeth de Montréal, fondé en 1894 comme hôpital homéopathique, a fait don à la bibliothèque Osler de sa collection de documents en homéopathie remontant au 19e siècle. Plus récemment encore, le docteur Harold Griffith, dont la famille oeuvrait pour l'hôpital Reine-Elizabeth depuis deux générations, a fait don de livres, de revues et d'une considérable collection de manuscrits sur l'histoire de l'homéopathie à Montréal et à Québec. Chacun de ces dons représentait un type de documents qui ne figuraient ni dans la collection d'Osler ni dans celle provenant de la faculté de médecine.

Dans un autre sens, l'université Laval a contribué à élargir le fonds de la bibliothèque par le don de plusieurs milliers de monographies françaises du 19e siècle. Dans un autre domaine, toujours, la bibliothèque du pavillon des femmes de l'hôpital Royal Victoria de Montréal a donné à la bibliothèque une collection de manuscrits relatifs à son histoire au cours du 19e siècle ainsi qu'un bon nombre de monographies et revues du 19e siècle en obstétrique et gynécologie. Individuellement, ces dons et les autres peuvent ne pas sembler impressionnants, mais si l'on considère qu'ils se sont multipliés au cours des quelque cinquante années de l'existence de la bibliothèque Osler, ces apports d'archives et de livres, aujourd'hui périmés sur les plans médical et administratif, constituent une partie importante du fonds de la bibliothèque que est du plus haut intérêt pour l'histoire de la médecine.

En plus de bénéficier de dons, la bibliothèque a un programme systématique d'achat de livres et même de manuscrits. Ce programme choisit un domaine particulier de l'histoire de la médecine et, pour un temps, y consacre une certaine somme avant de passer à d'autres domaines. A l'heure actuelle, par exemple, les quatre domaines dans lesquels la bibliothèque concentre ses achats de livres et de manuscrits sont les suivants: a) documentation secondaire en histoire de la médecine et domaines connexes; b) livres et manuscrits traitant de l'histoire de la médecine au Canada; c) documents portant sur le domaine où santé et médecine sont en interaction avec la société; d) livres et manuscrits dont les auteurs sont praticiens de systèmes médicaux non orthodoxes, tels que la phrénologie, l'homéopathie, la chiropractie.

Le grand principe qui a permis d'unifier l'expansion de la collection de la bibliothèque Osler au cours de son demi-siècle ou presque d'existence a été une politique d'acquisition équilibrée suivant la chronologie, le géographie et le domaine, de même que l'intention de rassembler une documentation pouvant servir les intérêts d'une clientèle d'étudiants et de chercheurs axés sur l'histoire de la médecine.

-Philip Teigen  
Bibliothèque Osler

#### THE SHAPE OF THE OSLER LIBRARY

Although the Osler Library is named after Sir William Osler (1849-1919), one of Canada's best known physicians, its history of medicine collection has been built-up over the past fifty years from a number of complementary sources, including, of course, Sir William's own library.

The Library was founded in 1929, when Osler's private collection came to the Medical

Faculty of McGill University. Here, over the years, it was joined by the out-dated monographs and journals transferred from the library of the Medical Faculty. The union of these two collections has shaped the Osler Library as it exists today.

Osler's private collection had several salient features which it passed to its offspring. First, about one-half of the collection of 8,000 printed books and manuscripts consisted of interpretive (secondary) literature, that is to say, biographies and histories of medicine. The other half was documentary (primary) literature, that is, materials written by doctors and others for use in the medical enterprise over the centuries. Secondly, while the interpretive literature ranged over all chronological periods of medical history, the documentary literature was oriented to early modern medicine, particularly of the fifteenth, sixteenth, seventeenth, and eighteenth centuries.

Finally, it was an evenly developed collection in that it included not only books by famous physicians and surgeons, such as Vesalius, Harvey, and Boerhaave; but also the less well-known--but historically no less important--figures, such as Symphorien Champier, Robert Fludd, and Sir William Petty.

The library of the McGill Faculty of Medicine, founded in 1823, has also contributed, by way of transfer, about 8,000 volumes to the Osler Library. Because of its venerable age and its direction during the nineteenth century, this second source also imparted a set of characteristics to the Osler Library. First, it was strong in eighteenth- and nineteenth-century materials, particularly medical journals. Secondly, it was strong in English language materials published in Canada, Great Britain, and the United States. Thirdly, being the library of a research-oriented faculty, it leaned heavily towards the medical sciences and medical specialities. Fourthly, it included virtually no secondary literature.

In short, the transfers from the McGill Medical Library and the gift of Sir William Osler's private collection complemented each other, making a new, versatile, and generally well-rounded collection of research materials in the history of medicine.

To maintain and expand this well-roundedness is the task of the gift and book-purchasing policy of the Library today. This is done by collecting materials from all chronological periods and all geographical areas as well as from all levels of medical theory and medical practice. In addition, it is achieved by collecting materials useful to the Library's constituency: physicians, medical students, graduate and undergraduate students in history, and professional historians whose interests may range over intellectual, social, biographical, and economic aspects of history.

Several recent gifts of homeopathic materials illustrate one way in which the Library is able to expand its comprehensiveness. A short time ago, the Queen Elizabeth Hospital in Montreal, founded in 1894 as a homeopathic hospital, gave to the Osler Library their collection of nineteenth-century homeopathic literature. More recently, Dr. Harold Griffith, the second generation of his family connected with the Queen Elizabeth, contributed books, journals, and a particularly important collection of manuscripts relating to the history of homeopathy in Montreal and Quebec. Each of these gifts consisted of a type of material not found in either Osler's donation or in medical library transfers.

Strengthening the Library's holdings in quite a different area was the gift of several thousand nineteenth-century French monographs from Laval University. In

still another area, the Women's Pavilion Library of the Royal Victoria Hospital in Montreal gave the Library a collection of manuscripts relating to its history during the nineteenth century and a goodly number of nineteenth-century monographs and journals in obstetrics and gynecology.

In themselves, these and other similar gifts may not seem large. But when multiplied over the nearly fifty years the Osler Library has existed, these contributions of archives and printed books, now medically and administratively obsolete, are a major part of the Library's collection, and of the utmost value for the history of medicine.

Besides receiving gifts, the Library systematically purchases books and, occasionally, manuscripts. This is done by identifying a particular area of medical history and then concentrating financial resources on them for a period of time, before shifting to other areas. At the present time, for example, these are the four areas in which the Library is buying books and manuscripts: a) secondary literature in the history of medicine and allied sciences; b) books and manuscripts dealing with the history of Canada; c) materials produced in the area where health and medicine interact with society; d) books and manuscripts produced by practitioners of phrenology, homeopathy, chiropractic, and other unorthodox medical systems.

Unifying the collection development of the Osler Library during the nearly fifty years of existence has been the desire to collect comprehensively by chronology, geography, by subject matter, together with the intention to hold materials useful to the interests of the wide range of students and scholars who study the history of medicine.

-Philip Teigen  
Osler Library

#### CLA HEALTH SCIENCES SECTION NOW DEFUNCT

The Canadian Association of Special Libraries and Information Services abolished its Health Sciences Section at the recent Annual Meeting of the Canadian Library Association held in Montreal. Reason: it was felt that the newly formed Canadian Health Library Association would play a more vital and active role in serving Canadian health librarians and that the new organization would have a broader base of support. Approximately fifteen people attended the funeral services, presided over by Alan (Big Mac) MacDonald.

#### BRITISH COLUMBIA HEALTH ASSOCIATION LIBRARY

The B. C. Health Association Library came on the scene about three and a half years ago. Up to this time there had been a haphazard book, journal and cassette collection, but no plan or organization to it. In May of 1974 a librarian was taken on to develop a library for the B.C. Health Association, which has as its membership the publicly-owned hospitals in the province of British Columbia, and is the counterpart of other provincial hospital organizations.

As British Columbia already had two special libraries at this time to service the physicians (B.C. Medical Library Service, Librarian C.W. Fraser) and nurses (Registered Nurses' Association of B.C. Library, Librarian Mrs. Jean Molson), the B.C. Health Association Library saw itself as meeting the needs of other hospital-and-

health institution workers, both professional and otherwise. In addition, the main emphases of development were to be hospital administration and staff education.

The library is now manned by a librarian, Sue Abzinger and a library technician, Ruth Paterson. It has a collection of books, journals and various formats of audiovisual material: 16 mm. film, audiocassettes, filmstrip-cassette programs, slide-tape programs, and videotape in three formats with dubbing facilities (to accommodate borrowers with different types of hardware). The library is the only health-science one in the province with an audiovisual collection in multiple formats; B.C. still tends to be very much print-oriented.

To give you some idea of the rate of expansion, between January and June, 1977, the library purchased the following materials: 158 books, 3 new journal subscriptions, 7 films, 6 video programs, 9 filmstrip-cassette and slide-cassette programs, and some 48 audiocassettes. As the collection grows, borrowing is correspondingly heavy. Since this is a province-wide service, most requests come in by mail, phone, or telex.

The library has been lucky during its gradual development to be located in Vancouver near the B.C. Medical Library Service and Woodward Biomedical Library at U.B.C., from whom it borrows heavily. Despite growth, the B.C. Health Association Library is not intended to become large, nor will it ever be able completely to meet user needs solely from its own collection, diverse as its clientele is, ranging from hospital medical director to maintenance supervisor. It must rely on an adequate core collection in its main areas of interest, and gratefully turn to other libraries for more unusual needs. It is intended at the same time that the library provide a solid choice of educational A-V resources to health-care workers in member institutions in the province.

-Sue Abzinger  
Librarian

\* \* \* \* \*

*Hey, who was that lady I saw you with last night?  
That was no lady, that was the Sensuous Librarian.*

-Revoltng Librarians

\* \* \* \* \*

#### MLA CANADIAN GROUP MEETS IN SEATTLE

The Canadian Group of the Medical Library Association held its Annual Meeting during the MLA Annual Meeting in Seattle last June. The breakfast meeting was attended by an overflow crowd of more than forty Canadian medical and health librarians. First, David Crawford, immediate past president of the Canadian Health Libraries Association reported on the first Annual Meeting of CHLA held in Montreal. The attendees then considered a draft of the By-Laws for the Can Group. Next, a report on the planned program for the Chicago Annual Meeting of MLA was discussed. The group expressed some concern at the program outlines regarding

group meetings and instructed the Officers of the Group to investigate possible alternatives. The meeting closed with Anna Leith from the University of British Columbia being elected Chairman-Elect and Babs Flower of Montreal being introduced as the incoming Chairman. Babs now has the honour of Chairing the Group, while also serving as 1977/78 President of CHLA/ABSC. Dick Fredericksen, as immediate Past Chairman, will serve as the Group's nominee to the MLA Nominating Committee for the 1978 election. Considering the early morning hour--it convened at 0700 hours, and the fact that not enough breakfasts were supplied, the meeting proceeded quite cordially, with little scorn heaped on the outgoing Chairman, Dick Fredericksen.

Ed. note: for a slightly different view of the MLA meeting be sure to read the following account by Patrick (Fearless) Fawcett.

MLA MEETING HIGHLIGHTS-A PERSONAL VIEW  
(OR, I BROKE IT AT THE LIBRARY CONFERENCE)

The MLA saga actually began with my decision to drive to Seattle instead of flying there like normal people. With another librarian, I left Winnipeg on Thursday, 9 June and headed west in high spirits. Despite almost drowning in a Saskatchewan swimming pool and nearly colliding with a deer in Idaho, the trip was pleasant notwithstanding my companion's knack for slipping through my constant stream of knock-knock jokes. We arrived in Seattle on Saturday evening and checked into the Olympic and I found I had a gorgeous view of the roof of the adjacent hotel.

On Monday evening, when most people were on Blake Island stuffing themselves with salmon, I elected to go bar-hopping with a trio and stuff myself with something more palatable. Since my wife was at CHLA in Montreal, I had neither my waistline nor my manners to worry about and was all set for a great time. Our second sanctuary was a dimly lit club into which were crowded an incredible number of little tables and dimly lit people. Unfortunately, the couple at the table beside me were having a difference of opinion which the fellow seemed to express by periodically belting his date across the face. I took a disliking to this and told him to stop and he took a dislike to me and told me to go forth and propagate. To shorten a long story, with no bouncer in sight the dispute escalated and I soon jumped to my feet which the other chap took to be a challenge. Given the choice between hitting someone or being hit, my pacifist tendencies go right out the window so I belted him as hard as I could.

Fear is a great source of strength.

He went flying backwards and never got off the floor. I got pitched out onto the street (yes, they did indeed have bouncers there!), and discovered my hand was an awful mess. I was beginning a Jacksonian tremble (sort of like Wile E. Coyote and his earthquake pills) so I grabbed a taxi and was taken to the nearest hospital for 3 hours of treatment and good advice. From one lousy punch I managed to fracture my wrist, damage two tendons, innervate one finger, and rearrange two knuckles. The knuckles were stitched back into place, a steel brace attached to my hand and wrist, and everything was taped to excess. And that was the extent of the barroom brawl.

Fortunately, it was too late to phone my wife that night. When I did call on Tuesday

afternoon, I gave a full account of myself and received absolution, along with some of Big Al's newest Newfie jokes. Then with spirits buoyed, I set out with my colleague to drive around Seattle and see something other than the downtown core. I won't belabour with more copious details. Suffice to say that after a pleasant tour of Mercer Island, we were headed north to the U of W campus when someone plowed into the rear of my car. And nothing looks more mournful than a Rabbit with its rear-end smashed in while some three days away from home. Fortunately, despite the hatchback being crumpled shut and the lights smashed, the car was still driveable.

I phoned my wife again. She wasn't very pleased.

Amazingly enough, nothing untoward happened on Wednesday night. I sulked off to the shade of the Space Needle and saw "Star Wars" without the theatre collapsing around me. And on Thursday afternoon we left Seattle and made the three day drive home (about 1,300 miles as the screaming lunar bat flies) quite safely.

Back in Winnipeg, time has healed all wounds. My car is as good as new after \$720 worth of repairs. My hand, a little scarred and very weak, has no permanent damage after weeks of Medlining with just one hand. My staff has wisely refrained from commenting on the cast on my hand, other than a paper tag affixed to my office door on my first afternoon back. It read: Killer Fawcett.

And, to answer the most obvious question no doubt now in your mind: no, I am NOT attending MLA in Chicago. I think I'll go to CHLA in Edmonton instead/

My mummy lives in Edmonton.

Peace,

Patrick J. Fawcett  
Public Services Librarian  
Faculty of Medicine Library  
University of Manitoba

#### MLA MEETING - CANADIAN CONTENT

On a more serious side, Canadian participation in the June MLA meeting was certainly substantial. First and foremost, of course, was the work of the Program Chairman, Bill Fraser of the B.C. Medical Library Service. Bill's many months of long, hard work were clearly evident throughout the excellent program for the meeting. The Canadian Group meeting was listed in the Annual Meeting Program - highlights of that meeting are reported elsewhere in this issue. Eileen Bradley of the University of Toronto served as the moderator for the Concurrent Panel Session on Academic Emphasis. Richard Fredericksen was a member of that panel, presenting an audio-visual travelogue entitled "Oh! Canada! Canadian Health Libraries in 1977." Mrs. M. A. "Babs" Flower was a panel member for Concurrent Session II, Clinical Emphasis, presenting an interesting paper "Toward Hospital Library Standards in Canada." In addition to his normal duties as Program Chairman, Bill Fraser also moderated the General Session on Social and Humanistic Issues in Medicine. Frances Groen of McGill and Doreen Fraser of Dalhousie served as discussion leaders for the informal sharing

sessions. Their discussion group focused on "Canadian Comparisons." In addition to this involvement in the Program, there was, of course, also a great deal of Canadian participation on various MLA Committees. Finally, toward the close of the 1977 Annual Meeting, the Nominating Committee announced that Beatrix Robinow of McMaster University was one of its choices as a candidate for the MLA Board of Directors for the 1978 election. There was, indeed, Canadian content at the MLA Meeting in Seattle.

\* \* \* \* \*

*Ask the patrons for suggestions. Who knows, they may even come up with some good ideas.*

*-Revolting Librarians*

\* \* \* \* \*

#### NAHSL MEETING IN MONTREAL

The Medical Library of the McGill University in Montreal, Canada is hosting the 20th Annual Meeting of the North Atlantic Health Sciences Libraries, Regional Group of the Medical Library Association, to be held in Montreal, Sheraton-Mount Royal Hotel, October 27-29, 1977. The theme is "International Connections".

For further information please contact: Ms. Claire Turnbull, Medical Library, McGill University, 3655 Drummond Street, Montreal, H3G 1Y6, Canada.

#### BOOK REVIEW

Lloyd, Hazel. The Information Needs of Physiotherapists in the Atlantic Provinces With Suggested Working Collections for Small Hospitals. Halifax, N. S. Dalhousie University Libraries/Dalhousie School of Library Service, 1977. Occasional Paper no. 13.

This is a welcome publication and indeed a great aid in filling a long recognized gap in providing information concerning physiotherapy collections. It is, as stated, a "starter" collection for small hospitals under 300 beds and must be regularly revised and expanded to meet the demands of each particular situation. A number of guidelines are set forth for the successful establishment of hospital library service. The list is arranged by broad subject field of interest for easy use. In addition to the basic list, this work provides a good introduction to the field of physiotherapy and discusses the needs and facilities in the Atlantic region. While there are general lists available, providing guidelines for the development of hospital library collections, this publication will prove useful to hospital libraries, especially in Canada.

To order: Dr. Norman Horrocks, Series Editor  
School of Library Service  
Dalhousie University  
Halifax, Nova Scotia, B3H 4H8

\$2.50 + .50 mailing

-Shelagh Wotherspoon  
Medical Library, Memorial Universit

POT POURRI - COLLEAGUES, LIBRARIES

Jean Benson has recently been appointed Head of Reference of the McGill University Medical Library. Mrs. Benson has a B. Sc. from the University of London, and a B.L.S. from the University of Alberta. During her career she has served as a Scientific Information Officer at the Defence Research Board, a school librarian and, most recently, as lecturer in Library Technology.

CHLA/ABSC Received brief mention in two recent library publications: first, in Emergency Librarian (v. 4, no. 6, July/August 1977) attention is drawn to our new "journal" in "Notes from the Other Side of the Irony Curtain;" secondly, in Library Journal (v. 102, no. 15, September 1, 1977, p. 1735) establishment of CHLA is noted by Norman Horrocks in his report of the Annual Meeting of CLA in Montreal.

C. William Fraser, Director of the British Columbia Medical Library Service, will be participating in a seminar on October 8, 1977, as part of the dedication ceremonies for the new Medical Center Library at the University of New Mexico in Albuquerque. Bill's paper is entitled "Library Service to Physicians: A Canadian Experience." Bill should be congratulated on timing his visit to coincide with Albuquerque's famous Balloon Festival.

Helen Michael has resigned as Head of Technical Services of Memorial University's Medical Library in order to take up residence in Toronto, where Helen's husband, David Michael, a singer and entertainer (co-star of CBC's "Kinda Country") will pursue his musical career.

Newfoundland has recently acquired one of North America's newest and most modern MacDonald's hamburger stands, thereby joining the "have" provinces. The restaurant has already taken its place among St. John's better eating spots. One more reason to visit Memorial University's Medical Library which has recently assumed responsibility for services to the MUN School of Nursing.

Claire Turnbull, formerly head of Reference in McGill's Medical Library, has recently been appointed Head of Public Services in that Library. Claire was recently a participant in the CACUL workshop on the Reference Interview at the CLA Meeting in Montreal.

Jane Wachna has been busy with the relocation of the Canadian Hospital Association Library from Toronto to Ottawa. Miss Linda Solomon will be assuming the position of Librarian in the Ottawa location on September 12, 1977. Linda was formerly a librarian for Centraide in Montreal. The new address for the CHA Library is:

The Library  
Canadian Hospital Association  
Suite 800  
410 Laurier Avenue West  
Ottawa  
K1R 7T6



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JOIN OR RECRUIT A MEMBER!

See handy-unpaged-tear-out membership form at back of this issue. Join or give to a non-member to join.

CHLA/ABSC EXECUTIVE

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L'Atelier a votre santé  
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Health and Welfare Library  
Ottawa

Sheila Swanson (one year term)  
Toronto Academy of Medicine Library  
Toronto

\* \* \* \* \*

*Grow something green on your desk and plant surprises in the catalogs (seed packets, happy thoughts - perhaps even a small bottle of Screech).*

*-adapted from Revolting Librarians*

\* \* \* \* \*

## JOB MARKET

### NEWFOUNDLAND

Head of Technical Services --Work in Canada's newest medical school library! This position carries responsibility for all Technical Services operations in the Medical Library including cataloging, serials, acquisitions and binding. Supervises a staff of nine FTE composed of para-professional and clerical staff. Considerable day-to-day involvement in cataloging operations. Some participation in reference services also required. Candidates must have substantial cataloging experience with the National Library of Medicine scheme. Knowledge of serials, acquisitions and binding operations extremely desirable. Salary and level of appointment commensurate with training and experience. Memorial University offers liberal fringe benefits including provision for Special Leave after three years and Sabbatical Leave after seven. Generous moving allowance. Interested, qualified persons should submit a curriculum vitae along with the names of three persons as references. Send to: Richard B. Fredericksen, Medical Librarian, Health Sciences Centre, Memorial University of Newfoundland, St. John's, Newfoundland, Canada, A1B 3V6.

### NOVA SCOTIA

The Health Sciences Library of Dalhousie University invites applications for the position of Reference Librarian. Responsibilities: Information Desk and related activities. Selection and liaison responsibilities with several departments and schools in the Health Sciences. Assist in provision of service to hospital and other health care libraries in Maritimes. Qualifications: Degree from accredited library school. Degree in chemistry, biology or related basic science preferred. Experience: 1-3 years, preferably in reference work. The successful candidate will, under the supervision of the Head, Information Services, perform all the reference duties associated with an academic health sciences library serving schools of medicine, dentistry, nursing, physiotherapy, pharmacy, human communication disorders and physical education including orientation, selection, support of active continuing education programme, mounting displays and operation of bibliographic retrieval service. Library uses Medline, CAN/OLE and Dialog. The candidate will be expected to travel in the Maritime Provinces as part of the Regional Library Service. Salary: \$10,880 - \$12,160. Apply to: Alan H. MacDonald, Health Sciences Librarian, W. K. Kellogg Health Sciences Library, Sir Charles Tupper Building, Dalhousie University, Halifax, N. S. B3H 4H7

### QUEBEC

The Medical Library of McGill University is presently looking for a Computer Services Librarian. This position is classified as a Librarian 2 and the starting salary is \$14,290 per annum. The position reports directly to the Head of Public Services and the person appointed will have primary responsibility for the provision of computer-based bibliographic services to all users of the Medical Library. The services offered at the present are those from the U.S. National Library of Medicine (Medline and its associated data bases), CAN/OLE and CAN/SDI from the Canada Institute for Scientific and Technical

## QUEBEC (Cont'd.)

Information and several of the data bases offered by the Systems Development Corporation and Lockheed such as CAIN, Psychological Abstracts, Biosis Previews and CA Condensates. The position requires a knowledge of spoken French, a library science degree from an accredited Library School and at least one of the following: Two years of experience in a Medical Library, Completion of a one year post-graduate medical librarianship intern program, two years of library experience, at least one of which involved on-line searching or subject specialization in the field of life sciences. This position will open on September 1, 1977 and applications or requests for further information should be addressed to: Claire Turnbull, Head of Public Services, Medical Library, McGill University, 3655 Drummond Street, Montreal, H3G 1Y6.

### MLA SCHOLARSHIP COMMITTEE

At the June meeting of the MLA Scholarship Committee, a proposal based on the suggestions of both regional groups and individuals for the awarding of one of the two MLA scholarships for career development was discussed. The Committee is seeking additional ideas and suggestions on this subject and has prepared the discussion questions which follow for distribution to the various groups of MLA.

In a letter to all regional group chairmen dated August 24, 1977, Elizabeth Petgen, Chairman of the MLA Scholarship Committee stated that:

"This communication is a search for ideas; the scholarship policy for 1978 will not be affected as any proposal for change in the committee's charge must be approved at the Midwinter Board meeting and could not be implemented before the fall of 1978. Publicity describing the MLA scholarships is sent to appropriate institutions in October with the application deadline being March 1. The awarding of the minority scholarship will continue under the current committee charge.

A proposed change in the awarding of one of the scholarships is based upon the assumption that there are a decreasing number of positions in health sciences libraries for entry level librarians and that there are practicing health sciences librarians who could benefit from financial support of special education or research which could ultimately benefit health sciences librarianship as a whole."

Any Canadians who would like to express their opinion of this subject, should complete the form which follows and return it to Mrs. M. A. Flower, Chairman of the Canadian Group for 1977/78.

MLA Scholarship Committee

Discussion Questions Regarding the Awarding of One of the MLA Scholarships

1. The present scholarship supporting an MLS candidate should be suspended.

\_\_\_\_\_ Agree  
\_\_\_\_\_ Disagree

2. The award should be made for mid-career continuing education.

\_\_\_\_\_ Agree  
\_\_\_\_\_ Disagree

3. The award should be made for support of small research projects in health sciences librarianship.

\_\_\_\_\_ Agree  
\_\_\_\_\_ Disagree

4. Support of both mid-career education and research projects is appropriate.

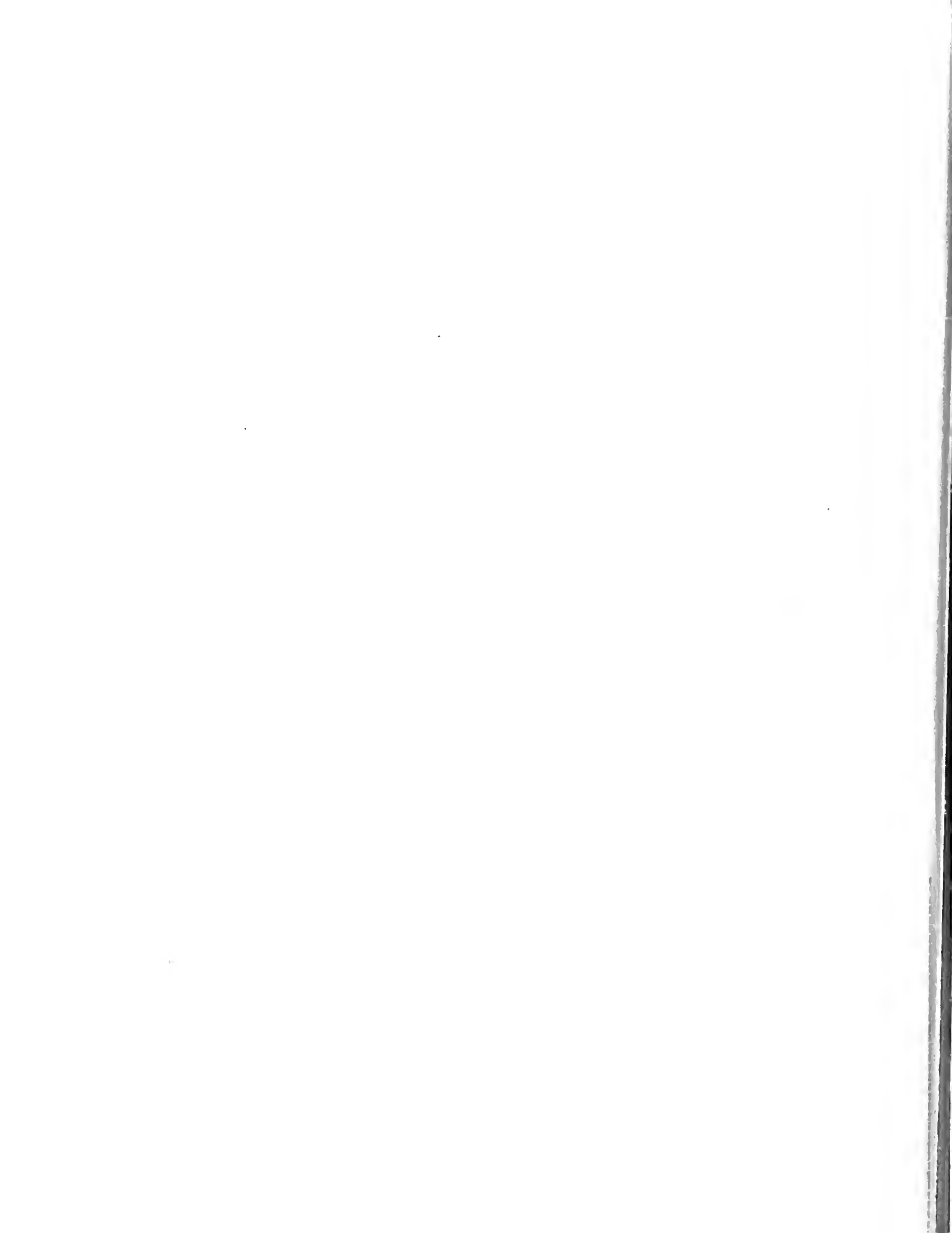
\_\_\_\_\_ Agree  
\_\_\_\_\_ Disagree

5. If either a mid-career continuing education or a research project award is given, check the criteria essential to the selection of a recipient.

\_\_\_\_\_ Five years in professional health sciences librarianship  
\_\_\_\_\_ MLA Membership  
\_\_\_\_\_ Certified MLA member  
\_\_\_\_\_ A combined five years of non-professional/professional health sciences library experience  
\_\_\_\_\_ Five years of professional librarianship plus \_\_\_\_\_ years in a health sciences library  
\_\_\_\_\_ Other (you may wish to address yourself to the question of Canadian eligibility)

Complete and Return this form to:

Mrs. M. A. Flower  
Chairman: Canadian Group of MLA  
L'Atelier a votre sante  
101 Chemin Amberst Road  
Beaconsfield, P. Q.  
H9W 5Y7



MINUTES OF CHLA/ABSC EXECUTIVE/EXECUTIF MEETING

JUNE 14, 1977

Present: M. A. Flower  
David Crawford  
Bill Fraser  
Philippe Lemay  
Martha Stone  
Sheila Swanson

Absent: Alan MacDonald

The Committee met at 3:00 p.m. in MAF's quarters at the Olympic Hotel, Seattle. The following three points were put forward by the Chairman for discussion as key goals for the CHLA in the next two years:

- 1) regionalization
- 2) financing
- 3) Newsletter

1) Regionalization

Although memberships and renewals are coming in at a gratifying rate, increased membership all across the country is essential. Especially in the western provinces the response has been low, and this poses a problem for the next Annual Meeting of the CHLA. Since the Constitution commits the Association to holding its Annual Meeting at the same time and in the same place as the CLA, our next meeting should be in Edmonton. We must have enough members out there to mount such a program. We also need enough membership in each province so that local groups can be developed.

Bill Fraser was established as Chairman of a Membership Committee, therefore, which was to recruit new members. Because of the western imperative, it was suggested that Phyllis Russell might become a member of this Committee, and because H & W Canada provides some travel opportunities to get around the country, Martha Stone consented to join the recruitment team also.

Bill suggested that he would develop a form letter with a personal touch, which could be used by contact people in each province for recruiting new members. The primary thrust would be in B.C. and Alberta, and goal no. 1 would be 300 members.

2) Financing

Since it was announced at the Annual Meeting in Montreal, and in the Spring issue of the CHLA/ABSC Newsletter that a Fund Raising Committee had been formed under the chairmanship of Fran Groen, the question was raised in the Executive Meeting, "Just what are we financing?" Discussion boiled down to the basic requirement that the CHLA must become self-supporting as much as possible. Following are some of the suggestions that were put forward:

- financial support from members in the larger institutions should not be more than temporary, or for special purposes
- travel expenses to get to meetings, for members of the Executive without travel funds
- costs of producing and mailing the Newsletter, and other mailings
- sponsoring particular publications, for example, re-editing Phyllis Russell's publication
- office space or secretarial support
- CE workshops

### 3) Newsletter

Since the Newsletter is crucial to the life of the CHLA, and its quality is equally important, the need for a committee to support the Editor was discussed. David Crawford accepted the Chairmanship of this Editorial Committee, and its composition was left to his discretion, although the Editor of the Newsletter would obviously be a key member.

Although Dick Fredericksen had let it be understood that he did not wish to continue as Editor, David understood that he could perhaps be persuaded to change his mind. It was suggested the MAF write Dick a note formally asking him to continue as Editor for another year.

A general discussion developed concerning some of the features that the Newsletter might contain while building on what Dick has already accomplished. The consensus was that it should attempt to publish quarterly. The bilingual content remains a problem. The consensus here was that at least the official documents of the Association should appear in both languages. Philippe was asked to explore ways in which such documents could be translated. A number of possible features were suggested, such as:

- an Editor's or President's page
- occasional bibliographies or sources
- reviews of Canadian publications

All these ideas were left to the discretion of the Editorial Committee.

### 4. Other Business

The Executive Committee was unanimous in reappointing Alan MacDonald as the Secretary-Treasurer.

Affiliation with CLA has been accomplished through Alan's prompt action, but affiliation with other organizations such as MLA remain to be explored.

The next meeting of the Executive was set for the time of the APMC meeting in Montreal in October, when most members would be in one place. Each of the three committee chairmen will make some form of interim report in October.

The meeting ended at 4:30 p.m.



CANADIAN HEALTH LIBRARIES ASSOCIATION

Membership Application

Name.....

Address.....

Postal Code.....

I enclose \$15.00 (made payable to Canadian Health Libraries Association)  
as my membership fee for the period ending June 1978.

PLEASE RETURN THIS FORM TO:-

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W.K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

Formule d'Application

Nom.....

Adresse.....

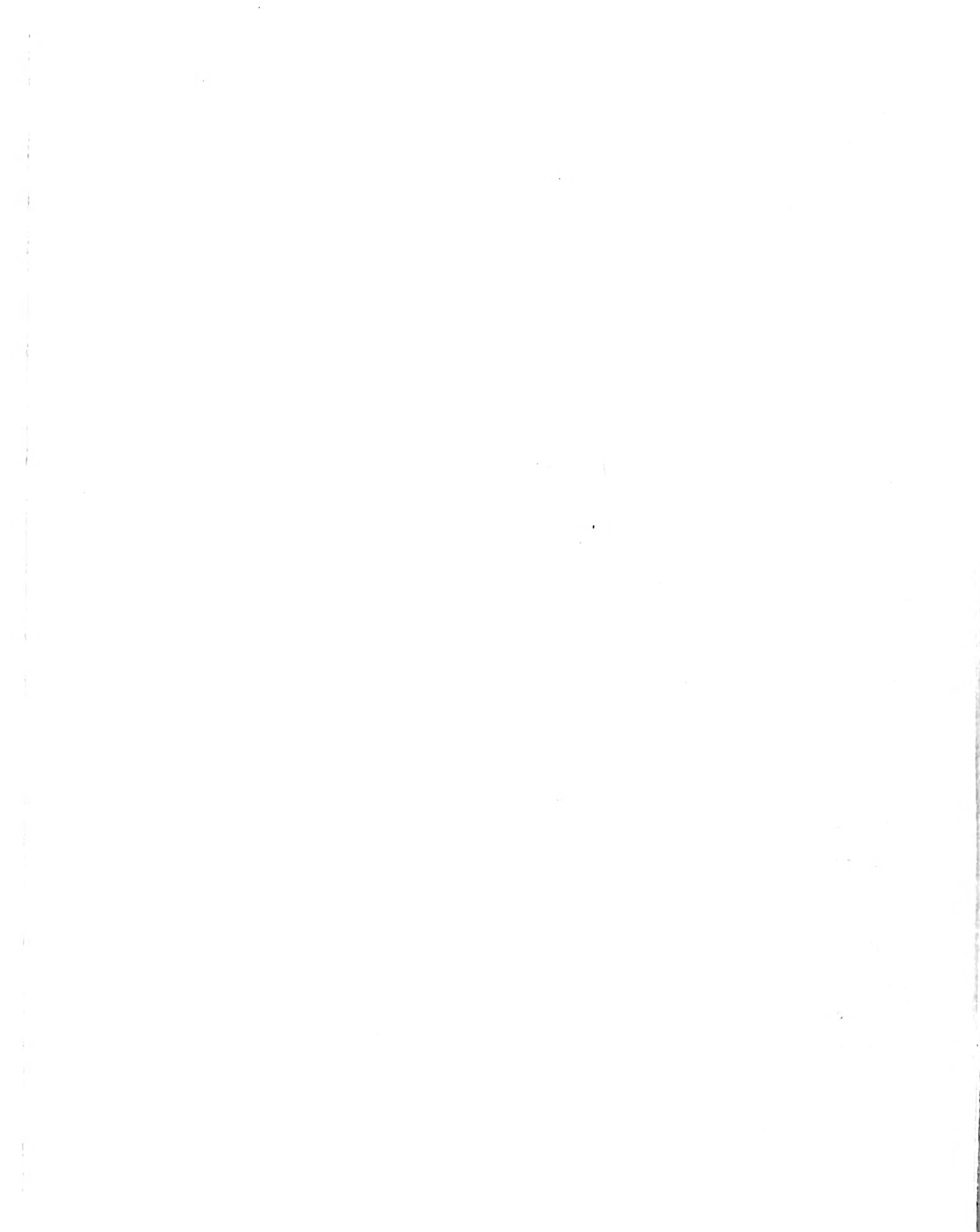
.....

Code Postale.....

J'inclus \$15.00 (payable a Canadian Health Libraries Association) comme  
cotisation pour la periode qu se termine en juin 1978.

ADRESSE DE RETOUR:

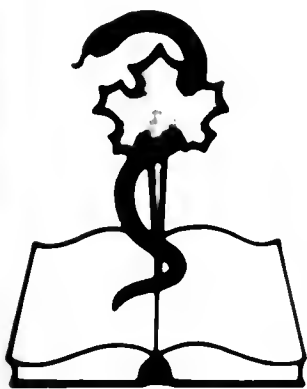
Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7



# CHLA

# ABSC

# NEWSLETTER



NO. 4

ISSN 0700-5174

WINTER 1977

FROM THE EDITOR

*That time of year thou must in me breed  
When yellow leaves, or none, or few do hang  
Upon those boughs which shake against the cold,  
Bare ruin'd choirs, where late the sweet birds sang.*

*William Shakespeare  
Sonnet LXXIII*

In sharp contrast to the barren imagery of Shakespeare, I am pleased to present an issue that has not been defoliated by the grim visage of Canadian Winter. Nor, apparently, has the membership fled to warmer climates, as we have several "birds" who have "chirped in" to make this a leafy, verdant, if not warbling, issue. Our President, Babs Flower, has warmed to the task of doing a regular President's Page, this time offering us a virtual address . . . an inspiring one that reports on the many activities of the CHLA/ABSC Executive since the last issue of the Newsletter. Alan MacDonald, CHLA Secretary, has prepared a proposal relating to the organization of local chapters of CHLA. Read it and respond. Anna Leith has prepared a feature article wherein she shares some very interesting observations about her recent trip to China. Statistics Canada has submitted some material that should be of interest and assistance to us all. It is hoped they will be a regular contributor to the Newsletter. I am disappointed to report lack of response to my call for correspondents to the Newsletter. I will have to actively recruit people to serve in this capacity. It is vital that we build up a network of news "stringers" throughout the land and I shall do this by using persuasive powers, or, this failing, cajolery, arm twisting, trickery and veiled threats. You still have time to volunteer. Our next issue is scheduled for March, 1978. Serials catalogers please note: I have finally learned the correct name of our Association (my Head of Serials tells me we are worse than publishers)! SEASONS GREETINGS AND JOYEUX NOEL!

CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA



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## CHLA/ABSC NEWSLETTER

The CHLA/ABSC Newsletter is published four times a year by the Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Subscriptions are available with membership in CHLA for \$15.00 per year. Correspondence regarding membership and subscriptions should be addressed to: Alan H. MacDonald, Treasurer, CHLA/ABSC, W. K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

The CHLA/ABSC Newsletter is a vehicle for providing increased communications among all Canadian health libraries and librarians, but has a special commitment to reach and assist the smaller, isolated, health library. Feature length articles are accepted describing a wide range of health library topics: organizations, services, networks and consortia, surveys, state-of-the-art reviews. Brief, news-length items accepted include: how-we-did-it reports, news about workshops and continuing education opportunities (forthcoming or recently held), job announcements, new publications, news about colleagues and libraries, miscellaneous items. Contributors should consult recent issues for examples of types of material and general style. Bibliographic references should conform to the format used in the Bulletin of the Medical Library Association, whenever possible. Submissions in French or English are welcome, preferably in both languages. Contributions should be addressed to: Richard B. Fredericksen, Editor, CHLA/ABSC Newsletter, Health Sciences Library, Health Sciences Centre, Memorial University of Newfoundland, St. John's, Newfoundland, A1B 3V6.

Deadline for the Spring issue is March 1, 1978.

## CHLA/ABSC NEWSLETTER

Le CHLA/ABSC Newsletter est publié quatre fois par année par la Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Un abonnement à cette publication fait partie de votre cotisation annuelle de 15.00 dollars en tant que membre de l'ABSC. Pour devenir membre et, pour recevoir cette publication il faut écrire à: Alan H. MacDonald, Trésorier, CHLA/ABSC, W. K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

Le but du CHLA/ABSC Newsletter est de rendre la communication entre toutes les bibliothèques Canadiennes de la santé et les bibliothécaires plus grande mais il veut spécialement rejoindre et aider les bibliothèques isolées et de moins d'envergures. Nous acceptons tout article traitant de tous les aspects bibliothéconomiques du domaine de la santé: organisations services reseau et consortium, enquêtes exposés de synthèse. En résumé les articles nouvelles acceptés peuvent comprendre: des résumés sur la façon dont on est arrivé à trouver une solution a un project, nouvelles sur des ateliers et des cours d'éducation permanente (à venir ou passés) postes vacants, nouvelles publications, nouvelles sur des collègues et bibliothèques, et tout autre sujet. Pour les intérêts, le genre d'article et le sujet publié dans les derniers numéros peuvent vous servir d'exemples. Il serait préférable de suivre si possible le format utilisé dans le Bulletin of the Medical Library Association lorsque vous avez des références bibliographiques à citer a la fin de votre article. Des articles Français ou



Anglais seront les bienvenus mais il serait souhaitable de les écrire dans les deux langues. Vous devez faire parvenir vos articles à: Richard B. Fredericksen, Éditeur, CHLA/ABSC Newsletter, Health Sciences Library, Health Sciences Center, Memorial University of Newfoundland, St. John's, Newfoundland, A1B 3V6.

La date limitée pour le prochain numéro est: Mars 1, 1978.

#### FUTURE MEETING DATES

- |                    |  |
|--------------------|--|
| June 10 - 15, 1978 | Medical Library Association, Annual Meeting, Palmer House, Chicago, Illinois.  |
| June 11 - 15, 1978 | Special Libraries Association, Annual Conference, Radisson Muehlebach Hotel, Kansas City, Mo.  |
| June 13, 1978      | Canadian Group of the Medical Library Association. Breakfast meeting from 0700-0900 hours. Mrs. M. A. Flower, Chairman, presiding. Palmer House, Chicago. Details to be announced. |
| June 16, 1978      | Canadian Health Library Association/ Association des Bibliothèques de la Santé du Canada, 2nd Annual Meeting, Edmonton, Alberta.   |
| September, 1980    | 4th International Congress on Medical Librarianship, Yugoslavia.   |

#### THE PRESIDENT REPORTS

That long-nosed old New Englander, Ralph Waldo Emerson, had a maxim that "the value of life lies in its inscrutable possibilities". Inscrutable possibilities are an alluring prospect for the young, and a good one to grow on. Perhaps they should provide the same impetus for an organization that is young also.

Canadian health sciences librarians have talked among themselves for a long time about their problems as a small specialty within a not-so-large profession in a wide sparsely settled country. That is, when they have had a chance to talk to each other. This tends to happen mostly in urban centres, sometimes exclusively at conferences. But there are many medium-sized to small hospitals scattered through smallish Canadian communities, where not even the public library can provide intellectual resources to any great extent, and where an effort to provide information, medical or not, for professional people is isolated from all the modern computer technology, and all the interpersonal know-how that we tend to assume is available to us all. Even in the communities where these things are

actually reachable, a great many information people find them obscure or difficult to tap. And still all that medical and social science literature comes pouring out of the hopper in a great heap, like a dock pile of sulphur gleaming in the sun.

We have now, in the CHLA/ABSC, an organization that we hope will manage to provide the contacts which will help us move in and take command of that stream of literature, and make it work for the health of the community. An organization which should promote individual contacts among us; exchange of knowledge about how and where to do our jobs; links between the larger communities with the sophisticated expertise and the smaller communities with no expertise at all.

Where there is information that is pertinent to the health problem in hand, our job is to provide the access. One of the tools we have lacked has been a medium through which we can all work together to do this. Now we have the CHLA/ABSC--the linkage. We hope the possibilities are going to be limitless, the prospects "inscrutable".

Since the inaugural meeting of CHLA/ABSC in Montreal in June 1977, the Executive Committee has been working through a series of ideas for the administration and extension of the Association. There was so much ground to cover that the mid-term meeting of the Committee occurred in Montreal in two parts: first, on October 4th, when most members were in Montreal for the meeting of the Special Resources Committee on Medical School Libraries of ACMC, and again on October 29th, when members were back in town for a regional meeting of the North Atlantic Health Sciences Libraries of MLA.

### Membership

A brochure has been developed and printed, which will be distributed to individuals in each province to be used in a membership drive. Hopefully all CHLA/ABSC adherents will become aware of these campaigns, and will do their share. Additional copies of the brochures are available from David S. Crawford, at McGill University, for those who are enthusiastic enough to carry the flag. As of the last report, fully paid-up membership in CHLA/ABSC stood at 208; our first target is 300.

The Membership Committee consists of Bill Fraser, B.C. Medical Library Service; Phyllis Russell, Alberta University; and Martha Stone, Health & Welfare. Bill and Phyllis, assisted by Pam Griffith, Calgary University, have also accepted responsibility for mounting the second Annual Meeting of CHLA/ABSC in Edmonton on June 16th, 1978, with all the problems of program and logistics that that entails. You will hear the drums beating in future issues of the NEWSLETTER.

Another membership issue which has engaged the attention of your Executive Committee is that of the relationship of local groups of library people with the National Association. Under the leadership of Alan MacDonald a position paper has been developed on the affiliation of Chapters with the CHLA/ABSC. This statement will appear elsewhere in this issue of the NEWSLETTER. There are several active groups of library personnel across Canada, especially in the major cities. We are looking forward to a dialogue with these groups--and to the establishment of the first Chapter of CHLA/ABSC. The interaction between the national point of view and the local points of view will inevitably become the basis of all our activities.

This issue is so important to the Association that the Executive Committee will probably recommend a delay in the revision of the CHLA/ABSC Interim Constitution. According to Article 15, the deadline for a new Constitution is December 31, 1978. This may be too soon to sort out the policy on Chapters.

### External Affiliations

CHLA/ABSC must also consider its working relationships with other organizations. Primary among these are CLA, MLA, ASTED and CISTI/ICIST. Currently we hold our Annual Meeting at the same time and in the same place as CLA, and we take part in CLA activities as an Institutional Member, but there are many more levels of interaction possible.

The International Cooperation Committee of MLA has a long history of dialogue with Canadian members of MLA, and currently two CHLA/ABSC members are active on that Committee. Our Association has undertaken a dialogue with the Committee on their position paper on MLA's affiliation with other national library groups. Out of this dialogue our own affiliate relationship will emerge.

With ASTED we have a more direct tie. At the September 1977 meeting of the Executive Committee of the Section des bibliothèques spécialisées de la santé, Ginette Boyer-Caya, de l'Hôtel-Dieu de Montréal, was appointed as their liaison with CHLA/ABSC. She will be a great asset to us as we work through an affiliation policy for our Association.

Our last and most exciting venture into the field of relationships has been a most successful one. The CHLA/ABSC has been in a position to support the initiative of the Special Resource Group of ACMC in their efforts to establish an Advisory Committee which will meet in Ottawa and make recommendations to the Director of the Canada Institute for Scientific and Technical Information (CISTI/ICIST) on the role of the Health Sciences Resource Centre.

Because our support indicated a concern which was national in scope, the principle was accepted by Dr. Jack Brown, and the Advisory Committee has been named. Representatives of CHLA/ABSC are: Bill Fraser, Medical Library Service, Vancouver; Linda McFarlane, Sunnybrook Medical Centre, Toronto; and Alan MacDonald, Medical Library, Dalhousie University, Halifax. Representative of the Special Resource Committee of ACMC is Frances Groen, Medical Library, McGill University, Montreal. Representative of ASTED is Pierrette Dubuc, l'Hôpital Sainte-Justine, Montréal. It is hoped that this Advisory Committee will be convened for its first meeting before the end of 1977, and our aspirations for it know no bounds.

### Newsletter

The Editorial Committee also met in October to lay down its ground rules. Members are David Crawford, Chairman; Alan MacDonald, Production Manager; and Dick Fredericksen, Editor. The decisions they made will be apparent throughout this issue of the NEWSLETTER, but two should perhaps be mentioned: the NEWSLETTER will definitely appear quarterly; and Dick Fredericksen will definitely stay around to edit for two years, instead of one. Both good decisions.

## Financial Committee

An Interim Report was presented to the Executive Committee by Frances Groen, Chairman of the Financial Committee, which has been given the task of fund raising on behalf of the CHLA/ABSC. Other members of the Committee are David Crawford, immediate Past President; and Babs Flower, President.

Having established that the primary purpose in seeking funding was to support the educational goals of the Association, the Interim Report suggested two alternative approaches. One included modest support for activities the CHLA/ABSC has already started, such as the NEWSLETTER, the membership drive, and an active publications program. The second posed the possibility of developing a substantial project toward raising the general level of information services across Canada. Such a project could include:

- Institutes of continuing education for health librarians
- A demonstration health library centre, or centres
- Education in the realities of library service for hospital administrators, chiefs of medical services, and head nurses
- Preparation and dissemination of resource materials.

The more modest educational goals of CHLA/ABSC could also be embedded in such a project.

The decision was made to explore the larger possibilities, and a Committee was established, under the chairmanship of the President, to develop an interdisciplinary advisory group which would include physicians, nurses, hospital administrators and health librarians. The Advisory Group would be asked to work together to mount an invitational seminar in the Spring of 1979, which would explore the real information needs of their colleagues, and would refine program plans to meet those needs.

For want of a better name, the project has been called A Canadian Health Libraries Project--CANHELP. A series of specific proposals for funding will be reported back to the Funding Committee of CHLA/ABSC. The first set of interviews has already been undertaken in Toronto, and the response has been universally favorable. The "value of life" lies here. You will hear more about CANHELP.

Since this is the season to be jolly, may I wish you all a happy holiday season.

(Mrs.) M. A. Flower  
President

## SHOULD CHLA HAVE CHAPTERS?

On behalf of your executive I am pleased to place before you our first proposal on the subject of chapters. We would welcome your comments before the middle of February.

### Purpose of CHLA

To promote the provision of quality library service to the health community in Canada by communication and mutual assistance.

### Functions of a national association

In addition to the usual administrative matters (such as membership, organization, etc.) which a national association undertakes, there are many important issues which can best be dealt with by a national body representing all health librarians in Canada and all types of health libraries. Issues such as Copyright reform, advice to CISTI on HSRC, the National Library review, meetings, colloquia, etc. on topics of general interest, exchange of information by Newsletter, the annual meeting, relations with other National and International organizations, etc.

### Functions of local associations

The primary centre for communication and mutual assistance must be at the local level. Only a local body can facilitate regular contacts of all colleagues who work in the same area. While there are many instances where exchange of experience between locales can be useful, each locality has its own economic, political, social characteristics and staffing which dictate local solutions to local problems. The existence of this need is demonstrated by the present functioning of at least five localized groups of health librarians in Canada (Halifax, Montreal, Ottawa-Hull, Toronto, and Manitoba).

### Affiliation

Why should local groups of health library personnel, either those which are already in operation, or those which may develop in the future, be encouraged to create formal links with CHLA? Both national and local groups are necessary for the exchange of ideas and the support of continuing education programs. Each serves different needs. Neither is capable of undertaking the function of the other in an effective way. A group representing one city, region or province cannot speak for all health libraries in Canada. A national group cannot effectively organize the resources to solve local problems of information exchange and assure development of services. Both groups CAN reinforce and assist each other.

A local group can provide more effective support for its projects, if it has access to the broader experience represented by other local groups with which it may be associated through a national affiliation.

A national group which is firmly based on strong, active local groups, can give more vital leadership based on input from a wide variety of health librarians (not just chiefs), when the need for national action requires it.

For these reasons CHLA should make every effort to encourage the creation of strong local groups among health librarians and their staffs, wherever they may form naturally.

Where these groups are prepared to accept the aims and objectives of the Association, and when such groups so request, the CHLA should formally recognize them as Chapters of the Association.

### Constitutional Matters

While the Interim Constitution does not mention Chapters per se, Chapters may be created under the Committees Section (Sec. 9) until the Constitution is revised.

### Requirements for proposed chapters

1. The group should be organized before requesting Chapter status.
2. The group should represent a single geographic area (city, county, region, province) small enough to allow the large majority of members to attend its activities regularly.
3. There should be no limitations to membership based on the type of service or library in which the member works.
4. The group must have members from at least five different institutions.
5. All officers must be elected by the chapter members and must be paid-up members of CHLA. Chapter membership need not necessarily include membership in CHLA but it would be desirable.
6. The local group should have a Constitution which is compatible with that of the CHLA. (It may be a very simple one).
7. The local group may request chapter status in writing in a letter to the President of CHLA.

### Representation

1. Chapter presidents will be ex-officio corresponding members of the CHLA Executive. They will receive all Executive Committee documentation and will be expected to report to the Executive on Chapter activities.
2. Any chapter may place an item on the agenda of the Executive Committee and may ask a member to speak to that item. (No funding is available at this point for such activities).
3. Chapters should appoint a correspondent to assist the Editor of the Newsletter.

## Finances

1. Each chapter will be expected to cover their basic costs (e.g. coffee, meeting space, etc.) from local resources.
2. Where proposed programs and activities merit, development grants may be made by the Executive up to a maximum of \$5.00 per active CHLA member in the Chapter.
3. Chapters may also request loans as bridging funds to facilitate the organization of workshops, etc.

Send your comments to: Allan H. MacDonald  
Treasurer  
W. K. Kellogg Health Sciences Library  
Sir Charles Tupper Building  
Dalhousie University  
Halifax, Nova Scotia B3H 4H7

### CHLA/ABSC

#### MEMBERSHIP REPORT

##### Members

##### Canada:

Alberta:	11
British Columbia:	11
Manitoba:	15
New Brunswick:	6
Newfoundland:	6
Nova Scotia:	24
Ontario:	77 (incl. London - 10 Ottawa - 21 Toronto - 27)
Quebec:	49 (incl. Montreal - 41)
Saskatchewan:	3

##### Other Countries:

Switzerland:	1
Tunisia:	1
United States:	4

Grand Total: 208

The above represents the membership report as of mid-November, 1977. This represents a net gain of 42 members since the Fall Issue where we reported the membership at 166 persons and institutions. Twelve persons/institutions who were members through June, 1977, allowed their memberships to lapse.

Alan H. MacDonald  
Treasurer

### PUBLICATIONS

The Second Progress Report of the Interdepartmental Committee on Health Statistics. Statistics Canada, February, 1977.

This report contains recommendations for improving the development of health statistics at the Federal level and also reviews progress concerning problems in the collection, analysis and dissemination of National Health Statistics. A number of important health statistical activities of special interest are described. An appendix gives an overall picture of federal health statistical activities.

Copies are limited, but reference copies are available in the regional User Advisory Services Office, who would be able to photocopy selected portions of the Report, on demand.

R. B. Fredericksen

### CORRECTION NOTED

Our apologies to Doreen Fraser and the Dalhousie School of Library Service for omitting her name as the co-author of the book that was reviewed in our last issue. The entry should have read:

Lloyd, Hazel and Doreen Fraser. The Information Needs of Physiotherapists in the Atlantic Provinces With Suggested Working Collections for Small Hospitals. Halifax, N.S., Dalhousie University Libraries, Dalhousie School of Library Service, 1977. Occasional Paper No. 13.

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## GO IF YOU CAN!

### REPORT OF A TRIP TO MAINLAND CHINA

September, 1976

As I look upon my trip to the People's Republic of China almost a year ago I am confused by my impressions; I have difficulty believing that during each minute of every day there are eight hundred million persons living a life so different from ours--yet one that appeared just as satisfactory for them in spite of many limitations from our North American point of view.

In August of 1975 I visited San Francisco primarily to attend an exhibit of archaeological treasures from the People's Republic. The artifacts were unbelievably intriguing; from that time I hoped to visit Mainland China to find out whether today's developments were as fascinating as those of thousands of years ago; and I hoped to see more treasures. The second aspiration was to be somewhat limited because, I understand, many treasures were spirited off by the Nationalists to Taiwan.

In April of 1976, when I learned that I might be allowed to join a group of twenty B.C. Registered Nurses who would be travelling to China in late September, obviously not a good time for a medical school librarian, I hesitated briefly, but decided that opportunities like this might never occur again, and would certainly be well worth the two thousand dollars (roughly) that the trip would cost. Until the day before departure, when our visas were actually in hand, we were not certain of acceptance; and the disastrous earthquake at Tangshan near Peking as well as the recent death of Chairman Mao were threatening our itinerary. On September 21, however, we climbed aboard a Japan Air Lines plane bound for Tokyo, in a state of shock and slight disbelief.

After two days in Tokyo which were crammed with sights and sounds of infinite variety, we boarded a China Air Lines plane, immediately impressed with the sobriety, lack of artifice, and somber demeanor of staff and Chinese travellers alike; this was especially noticeable after the atmosphere of Tokyo. Our inauspicious landing at an almost darkened airport near Shanghai was anticlimactic to the four-hour flight of fantastic anticipation. The dimly lit interior was clean, and almost bare of decoration, except for some banner-like calligraphy in Chinese which we understood proclaimed sorrow at Chairman Mao's death.

After cursory customs and immigration examination, we were welcomed by approximately ten young women who, in spite of their petite size, were strangely determined to carry our overloaded baggage to a bus. These friendly young women were guides (two had travelled from Peking to meet us), translators, language students, a Revolutionary Committee member, and a supervisory nurse.

#### Arrival in Shanghai

In spite of the welcome, the trip to our hotel was somewhat forbidding. I, for one, hated myself for missing the bright lights and gaudy advertising visible along almost every approach to any city in other parts of the world. Our bus bumped along a macadamized highway lined with large trees through which we glimpsed

poorly lit buildings which we surmised might be factories on evening shift (some, we heard later, were apartments). When we actually reached the city we were alerted by the bus driver's honking which was his way of clearing a pathway through multitudes of pedestrians and cyclists who seemed undaunted by relentless noise. Every dimly lit, or unlit, doorway which was an entrance to upstairs living quarters or small, crumbling, or impoverished-looking shops was festooned with black and white bunting or banners, and magnificent hollow papier-maché pom-poms proclaiming deep mourning for Chairman Mao. In the daylight we were to find that every Shanghai resident, including children, wore a black arm-band--but this was not to be the case as we travelled north--less than half would wear it in Peking. Most women in Shanghai, where Mao's earliest significant political activities began, were wearing a white flower pinned in their hair as well--a lovely gesture.

We were promptly to experience, in spite of hope for an immediate meal and sleep, our first of perhaps thirty "brief introductions" which included a formal welcome, an introduction to a program planned for us, history, idealism, politics, or statistics (the latter not always consistent). It was to be at least two days before we arranged an appropriately formal type of reply, since our briefing by our Vancouver travel bureau had been woefully inadequate. Although we understand that the Luxingshe Travel Bureau staff privately referred to "b.i.'s" we were also made aware, at that time, that certain conventions of behavior were expected from us in response to our treatment as honoured guests with special privileges and an invisible red carpet laid out.

The food which was eventually served was varied, and probably extravagant. There was an emphasis on seafood and meat based on a premise, no doubt, that Westerners expected little in the way of a Chinese diet which is preponderantly vegetables, rice, and noodles. We were to be catered to, and were afforded a number of adjustments in this respect, as in many others. The Chinese provided hotel attendants on each floor who were available at most hours for miscellaneous supplies, including thermos bottles of boiling water and tea caddies, and laundry services for charges reckoned in pennies. No task was too much trouble if sufficient notice was given.

When we were left free to investigate the hustle and bustle of Shanghai near our hotel, or taken to visit neighbourhoods and communes, we were aware of our complete misconception concerning grim factory-like buildings or crumbling doorways. The atmosphere was gay and even abandoned. Families lived close to each other in noisy confusion; and carried on a great deal of their living in the fresh air near doorsteps. Washing was stretched along poles protruding from balconies or tree branches which presented a multi-coloured background to children at play, to housewives gossiping, or men and youths intrigued by table-top games. In the light of dawn we ventured down to the Bund park area, barely awake, where we were welcomed to the friendly exercise routine, teased a bit, and then given special assistance in moving our creaking joints.

We were free to travel in buses or taxis; we could take photographs of all except military personnel or establishments. We could investigate anywhere, but were seriously limited by a language barrier. Street signs and maps were easiest to follow in Peking but it was less fun because of a more orderly, almost Western, ambience.

## The Nurses' Group

When we visited communes, hospitals, libraries, museums, villages, neighbourhoods, factories, parks, or historical sites, we had opportunities to ask questions during the "briefing" and "debriefing" sessions. As might be expected from a group of nurses, our hosts, and the travelling nurses, emphasized matters of health and medical care which had advantages in my participation as a member of this group. To my embarrassment, however, a number of "liberated" women asked repetitive queries related to certain areas of Western hang-up which included pre-marital sex, abortion, contraception, nutrition, and divorce. Answers were polite, perhaps occasionally amused, and varied little in response no matter who the respondent might be. It was explained that China had been busy developing a basic system of medical care, not previously or universally available, which was extended to include all of its citizens even in far-flung and isolated areas. Her "Ministry" had not had time to collect countless numbers of statistics, although our informants often told us what diseases were most frequently encountered or were responsible for high mortality rates.

China's socialistic and puritanical approach to attitudes of personal behaviour had probably depressed the incidence of many problems which are rampant in North America and European countries. The replies appeared unrealistic, perhaps evasive, but in China's terms were essentially honest: "No premarital sex! Abortions available upon medical recommendation! Contraceptive information available only to married couples! Zero population growth is an immediate aim; two children families are the most usual! Most persons get an adequate diet!" Repetition of this line of enquiry may have bored and amazed the translators, although we were told that Western travellers were unusually persistent about this type of enquiry. The replies were amazingly consistent and patient.

## Acupuncture Anaesthesia

It was assumed, and rightfully so, that we had come hoping to see a demonstration of acupuncture anaesthesia, and no time was lost. On our first day in Shanghai, shortly after 8:00 a.m. (every bit of our tour was prompt unless we delayed progress), we were driven to a large general hospital, the Lihua, and taken to a changing area where we donned suitable hospital garb. We were then served boiling cups of tea (which was an unvarying precedent--along with cigarettes and occasionally fruit) during our usual "brief introduction", or informational briefing, and given the opportunity to watch an operation in progress through a glass observation dome. The operation was for removal of a fist-size thyroid tumour. Everything was very absorbing: the simplicity of equipment and monitoring; and the dexterity and obvious professionalism of all staff as far as the actual surgery and anaesthesia were concerned. By far the most whimsical part of the whole procedure was a large grey granite kettle with a metal cup over the spout which was passed into the operating theatre to supply sterile water for rinsing and cleaning. Equipment was adequate but somewhat outdated in design - e.g. the lighting was only partially adequate since some of the staff were working in their own shadows.

The patient was a particularly attractive woman who waved to us during her operation, and walked into our briefing room about five minutes after she stood up from the operating table. She spoke with us and replied to questions with charm, smiles, and self-possession. She reported neither pain nor discomfort of

any kind. We were astounded, and incredulous. No recovery room procedures! We were told that a prospective patient must be a suitable candidate on a psychological basis who agreed to the procedure; he/she must have a satisfactory physiological response to acupuncture, and must have a surgical problem for which acupuncture is the anaesthesia of choice. Most of us felt that we might fail on any number of counts, although at least three of our group requested acupuncture therapy in Peking and reported that some success was experienced.

### Implications of the Revolution

This initial dramatic operation was an introduction to a variety of experiences--many exciting or moving emotionally, but also medical, academic, informative, historical, political, or merely pleasurable. None of the travellers in our group rejected the experiences as misleading or dishonest, regardless of any propaganda or difference in attitude from our own. We were there to listen, learn, and experience all that was available, although there was a considerable amount of healthy skepticism which we could express to our hosts without raising any extreme hostility.

In order to appreciate the present, it was helpful to relate it to the past--i.e. where was China now in terms of where it had been? I pictured the past in terms of a number of things that I had read, but particularly Hans Suyin's Crippled Tree which so eloquently described her life in China as a child years before the Revolution. The misery experienced by the poor and the peasant was unspeakable. Modern China seemed to have progressed centuries since those days of excessive greed, inhumanity, and blind adherence to tradition.

Mao's efforts after the 1946 Revolution, and more intensively after the Cultural Revolution, were extended, amongst other programs, toward providing medical care for everyone, particularly for those who might not have received it before. Obviously it was impossible to provide immediately what we might consider as acceptable according to Western standards with a need for different approaches and substitutes for Western organization and methods. One avenue of investigation and application was the exploitation of Chinese traditional medicine and herbs which led to the use of acupuncture for anaesthesia. In some instances we were shown therapeutic uses of moxibustion, cupping, and acupuncture. In the same treatment areas as where Chinese medicine was being practiced, ultrasound and diathermy machines were being used. Whole areas of medical schools and hospitals were devoted to the preparation of both traditional Chinese drugs, and Western (including antibiotics) for injection or oral administration. Ginseng was undergoing intensive use and examination, although many of our group were as skeptical there, as they probably are here, concerning the eventual value of such a universal cure.

### Medical Programs

Some of the hospitals which we visited had up to two thousand outpatients per day. We saw many who sat patiently and quietly in dark, crowded, uncomfortable corridors without complaining; children rarely cried.

Within hospitals, roles of nurses and doctors appeared to be traditional, although a number of male doctors assured us that doctors could, and did, assume the duties of nurses. The high percentage of female doctors did not stress this interchange

of roles; many of them were department heads and medical directors of institutions. The team concept was stressed, and these teams often spent a portion of their year's work in the country on agricultural communes, in factories, or meeting special needs as in the Tangshan earthquake area. We met at least one nurse who had become a physician because of her knowledge, skill and experience.

The most obvious shortage in medical care after the Revolution was amongst the workers and peasants who had not previously received any. In order to bridge this gap--and especially after the Cultural Revolution in 1968--there has been a tremendous program to train "barefoot doctors" who could provide basic medical services in city clinics, factories or country infirmaries. They would serve, then, much as do our public health nurses, or nurse practitioners in public health centres or medical outposts. They are selected from fellow workers, and think of themselves as peasants or workers who perform medical duties. Besides diagnosing and treating simple diseases, or referring elsewhere, their duties include health education, sanitation, preventive medicine such as immunization, and antenatal care and family planning. Their training is short (a few months) and recurrent. Estimates report their number as one million which means a ratio of 1:800.

In great contrast to this was the sophistication of other developments such as cryogenic medical instruments displayed at a Shanghai trade fair; but some of the simple developments were most impressive--e.g. a rolling wooden frame including a seat used for short resting periods which was used by an earthquake victim who was attempting to learn to walk after severe spinal injury. This frame was constructed in the carpenter shop of a general hospital as a simple solution to special needs suddenly thrust upon a hospital which had four hundred unanticipated emergencies.

Co-operative medical services were available in agricultural communes with both professionals and barefoot doctors working in teams. Each work brigade was provided with a clinic. Seventy per cent of the medical care is free in the city or paid for by commune funds in the country. Preventive medicine is placed ahead of other programs so that it appears that the general health of all citizens is constantly improving. In the area of a large commune which we visited there had been six doctors located in pre-revolutionary days ministering only to the wealthy. It was explained that in the same area there were now 52 professional health workers, and 50 barefoot doctors available for the whole population.

After the 1968 Cultural Revolution, medical programs were promoted as a part of the general social consciousness with the following guidelines:

1. All aspects of medical work were to be enhanced
2. Dispersal of information was to be the foremost consideration
3. Western and Chinese medical practices were to be combined
4. Health workers were to be part of a general mass workers' movement
5. Education of health workers was to be shortened and revolutionized.

We could only accept the words of professional and Revolutionary Committee Chairmen that these principles were in effect. There was much evidence of ground roots medical care provided by medical teams and barefoot doctors. "Barefoot" establishments such as small hospitals, examining and treatment rooms, and dispensaries were shown with great pride and a visitor could only be impressed with this evidence of progress.

## Libraries

Rumour has it that libraries in China are inaccessible to visitors because material of questionable nature (Western presumably) is available only for privileged persons, and this information is withheld from the masses. We were, as a matter of fact, never encouraged to visit libraries, but opportunities were arranged although not enthusiastically; my suspicions were that libraries were not necessarily amongst resources to be shown with pride--because they were not yet heavily supported. I might have been mistaken in this supposition, since a natural history museum at Wuhan University was shown with pride, although it mostly contained materials dating back at least as far as pre-revolutionary days.

At Shanghai #2 Medical College Hospital which had 500 to 600 medical students enrolled in a three year program we did visit a medical library--but not all divisions of that. Four hospitals were involved in the training program, and we visited only one. Extensive numbers of other health workers used these facilities; and correspondence courses for 5,000 barefoot doctors emanated from this hospital.

Emphasis was placed on the friendly relationship between faculty and students which was promoted after the Cultural Revolution. Examinations were often of the open-book variety--students often worked in pairs which no doubt indicated a trend to down-grading competition. In every way China was attempting to overcome the elite aspects of the medical profession which were traditional. Yet, paradoxically, the library was separated into two divisions, one for faculty and another for students.

The faculty facility housed 75 to 100 journals in European languages--there were obvious gaps--no signs of the J.A.M.A. or the C.M.A.J.! A half bay housed English language texts published in the last ten years. We could not assess Chinese publications but they were available in approximately a dozen bays. The catalogue reflected conversion of a subject arrangement of materials to the LC "R" although we were unable to determine whether an author-title approach or shelf-list were to be considered. A small technical services room was situated nearby. In my attempt to find out if many books were circulating, I was informed that the faculty was fined for late returns. (Hurrah for the Revolution! The same practice at U.B.C. nearly caused one). There were no users evident during our morning visit.

There was a buzz and hubbub down the hall in the student division, but since the entrance was physically barred by a sullen employee, we shall never know what the facilities included. Our amazement was complete, and an explanation was not offered.

When we visited Wuhan University which is an old establishment overlooking a large industrial city on the Yangtze, we climbed up over two hundred steps so that we might visit the fair-sized library; library science was one of the subjects available there. There were reading rooms crammed with students utterly absorbed in study, but not necessarily using the many floors of book stacks surrounding the study rooms in tier arrangement. The attendants, or staff, appeared to be receptive, although perhaps more custodial than public service oriented. European zoology literature was carefully examined, and although it was not necessarily

current there was an obvious attempt to have a working collection, if not one totally adequate for the extensive research described during the "brief introduction" of at least one hour. The classification was L.C.

### Bethune Influences

It is well for Canadians to realize that if it were not for Dr. Norman Bethune, there would not be the universal welcome extended to Canadians as is the case. Every child of school age, and every adult whom we met, knew of Bethune's contribution to the Revolutionary forces following the Long March and during the Sino-Japanese battles in World War II which led to the establishment of the People's Republic. Every Canadian tour group visits Shichiachuang where Bethune's tomb may be visited. It lies in a Martyrs Park which pays homage to Bethune, five hundred Chinese martyrs, and two East Indian doctors, who all contributed their lives in an outstanding fashion to the revolutionary cause.

In the Norman Bethune Memorial Hospital in Shichiachuang there is a splendid museum depicting Dr. Bethune's activities in China and elsewhere, but especially during his assistance and guidance to the military forces from 1937 until his untimely death in China in 1939. The hospital was established in a mountainous region in 1940; it was moved to its present site in 1947 after the Revolution when the city was liberated. During the U.S. War against Korea the Bethune Hospital sent a team to North Korea in 1950. So go the chances of war! A few months before our visit to China, Dr. Lee, the petite woman who is the administrator of the Bethune Hospital, had visited the Woodward Library to examine a recently commissioned tapestry depicting Bethune operating upon a Chinese soldier in a small temple shortly before his death. She had been returning from Gravenhurst, Ontario, where she had attended the dedication of Bethune's family home as a historical site. Our welcome at the Bethune Hospital, which is a military hospital serving the general population, was particularly warm.

### Concluding Comments

It is impossible to remain within reasonable limits of space and provide even a list of all the factories, museums, shops, parks, or other tourist sights and sounds which we experienced on this trip. My description does little to relay much of the fascination experienced, or the myriad impressions gathered as we travelled. We could not always clearly sort out our impressions, nor determine why the motivations of the Chinese people seemed to stem from an impetus so different from our own. Yet we shared so many attitudes--especially of warmth, humour, and response to sadness.

We were unutterably depressed by certain things which we saw--e.g. the inhuman loads pulled by men--and even women and their children. Ironically we saw the worst of this in Changsha which is just miles from where we visited Mao's birth-place.

We cried along with the director of a deaf-mute school in Shanghai as she told us of the care and attention to the problems of these children which had occurred under Mao's special interest and attention, and undoubtedly the sorrow at his death was heartfelt.

We were amused to notice that opposite our rather elegant Russo-French-style hotel in Wuhan we could see five families at a third floor level living a very complete existence on top of a factory building; their arrangement offered them little privacy (we had elaborate screened verandahs) and so gave us a full view of all comings and goings including that of the family chickens who were obviously living every aspect of their existence at that exalted level.

We were bemused concerning telephones which were consistently coloured, and television programs which were usually in colour--surely not essential for traveller or citizen in a socialist country.

We were amazed at the availability of medicine of Western or Chinese formula dispensed so readily by pharmacist, nurse, physician, or barefoot doctor. Often, in our own cases, diagnosis and therapy were relayed by a guide although we presume that some of the ease we experienced in receiving treatment arose from the fact that we were a Nurses' Group. Some of these medications were astoundingly effective. Eighteen of our group of twenty-one developed severe "colds"--endemic to all Canadian visitors our guides wearily told us. Other than tea and sympathy, which was generously levied, the Chinese were unable to produce anything more effective--an international problem shared with the world.

Most of the treasures which we saw were in the Forbidden City in Peking--the preservation of those during the occupation by the Japanese was a miracle in itself. We were, in addition, treated to a view of a 2100-year-old female corpse in a remarkable state of preservation. She was estimated to be 50 years of age, and had probably died from an acute heart attack as a result of severe obstructive disease of her left coronary artery--still a prevalent disease of modern Chinese civilization. This corpse is housed in Changsha along with a collection of other treasures of the Han Dynasty which was unearthed near that city in 1972.

### Return to the West

Reluctantly we left for the Peking airport at 5:00 a.m. along a cold, dark, unlit road on an unheated bus on October 12. This time we were warmed by the few lights, and noticed early workers cycling for miles to destinations which we better understood. Perhaps we would never feel the same about North America again as we remembered that life could be just as pleasant and challenging on a much simpler scale in a country lying on the opposite shore of the Pacific rim from Vancouver. It had been as different as it was possible to imagine, and yet it reflected many concepts which faced us daily, but applied in different ways.

As we deplaned at Tokyo we were met by a delegation of anxious reporters who hoped to glean comments on the election of Chairman Hua, and the deposition of the Gang of Four. Alas, we had failed to pick up the few clues dropped along the way--and we were unaware of the world-shaking events! We avidly read the teletype reports in the lobby of our Tokyo hotel, as we marvelled at the facilities and sumptuous quarters which we had eyed critically just about three weeks before. Soon we would be adjusted to our previous habits of conspicuous consumption with infrequent twinges of conscience, but we would often reflect on our experiences and wonder if we would absorb more on our next visit. We were determined to see more of the amazing country that had accomplished miracles in less than thirty years.



Special thanks to Barbara Gibson, a travelling companion and former nurse, who is presently the History Librarian at the Woodward Library; she provided critical assistance and accuracy concerning certain details.

Anna R. Leith  
Woodward Biomedical Library  
September, 1977

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September, 1977.

NEWS FLASH!

MLA CANADIAN GROUP MEETING PLANNED

The Canadian Group of the Medical Library Association will again be meeting during the MLA Annual Meeting. It has been scheduled as a breakfast meeting, June 13, 1978, 0700 - 0900 hours. Unfortunately, this information was inadvertently omitted from the preliminary program which will be published in the February issue of the MLA News. Notice of the time, date and place of the meeting will appear in the registration packet and final program.

## MANITOBA HEALTH CONFERENCE

The Manitoba Health Organizations, a co-operative of hospital and health care institutions, holds a health conference in November of every year. The annual conference is a three day continuing education event for health workers in Manitoba which consists of workshops and lectures on a wide variety of topics. This year, in response to a growing interest in, and a need for, libraries in small, rural facilities, the conference included a workshop on the development of hospital libraries. It was co-ordinated by Mrs. R. Kroeker, Consultant Librarian for Grace and Concordia Hospitals in Winnipeg and Ms. S. Langlands, Extension Librarian, University of Manitoba Medical Library.

The daylong workshop, which covered only the rudiments of library organization and development, was quite successful. Nineteen people, from medical records technicians to inservice officers and hospital administrators participated. Almost all indicated an interest in a follow-up workshop as part of next year's conferences.

Sandra Langlands  
University of Manitoba

## NLM CARD SETS AVAILABLE

A firm in Connecticut is in the business of producing complete sets of NLM catalog cards. The sets come with MeSH and are available for \$1.49 per set, \$2.49 per set when the set includes continuation cards. Orders can be submitted in card or list form. They claim that orders are shipped within two weeks. Invoicing upon shipment, with payment in thirty days. For more information, call or write: Medical Library Service, Inc.  
364 Green Hill Road  
Madison, Ct. 06443

Telephone: (203) 245-1388

## CLINICAL LIBRARIANS - WHO ARE YOU?

At sharing sessions on clinical librarianship at the MLA Annual Meeting in Seattle in June 1977 and the NAHSL Meeting in Montreal in October 1977 a need was expressed by those interested in clinical librarianship to know about each other. Since clinical librarianship is a new field, particularly in Canada, it was felt that the sharing of interests and experiences would be valuable to all of us.

If you are interested in clinical librarianship or if you have had experience in the field, you are asked to fill out the form below. The responses will be used to set up a list of resource people in clinical librarianship. The listing will allow librarians who enquire in the future to be alerted to resource people in their own geographical area and will serve as the basis for future communication between clinical librarians in Canada.

Thank you and I will look forward to hearing from you. A selective listing of references on clinical librarianship follows.

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Joanne Marshall  
Health Sciences Library  
McMaster University

## STATISTICS CANADA STATISTIQUE CANADA

### USER SERVICES

The concept of a "national statistical system" in Canada includes the statistical activities of all levels of Government (federal, provincial and municipal), the private sector and the academic world. Statistics Canada plays the central role in this system and produces most of the country's statistical information.

Originally created as the Dominion Bureau of Statistics in 1918, the mandate is to "collect, compile, analyze, abstract and publish statistical information on all aspects of Canada's economy and society". The name of the organization was changed in 1971 to "Statistics Canada", but the mandate has remained the same.

The structure of Statistics Canada was re-organized in 1973 to strengthen the organization and to make the Bureau more sensitive to the needs of data users. One of the most important aspects of the re-organization was the creation of a Marketing Services Field headed by an Assistant Chief Statistician. This Field is the focus of the Bureau's marketing activities in the dissemination of information and the explaining of Statistics Canada's role to the public.

The User Advisory Services Division is part of the Marketing Services Field and is charged with several responsibilities:

1. To provide inquiry services for statistical users across Canada.
2. To encourage the use of statistical information in Canada.
3. To develop feedback mechanisms from statistical users to the Bureau.
4. To serve as the focal point for cooperative programs and discussions between the Provincial Governments and Statistics Canada.

### ASSISTANCE-UTILIZATEURS

Le concept d'un "système statistique national" au Canada s'étend à l'activité statistique de tous les niveaux de gouvernement (fédéral, provincial et municipal), du secteur privé et des milieux universitaires. Statistique Canada occupe la place centrale dans ce système et produit la plupart des renseignements statistique du pays.

Statistique Canada, qui s'appelait Bureau fédéral de la statistique au moment de sa création en 1918, a pour mandat de "recueillir, établir, analyser, résumer et publier des renseignements statistiques" sur tous les aspects de l'économie et de la société canadienne. L'organisme est devenu "Statistique Canada" en 1971, mais son mandat n'a pas changé.

Une restructuration de Statistique Canada en 1973 a renforcé l'organisation et a rendu le bureau plus sensible aux besoins des utilisateurs de données. L'un des aspects les plus importants de cette ré-organisation a été la création d'un Secteur des services de promotion et de diffusion, dirigé par un statisticien en chef adjoint. Ce Secteur est au centre du travail de promotion du bureau en ce qui concerne la diffusion de renseignements et l'explication du rôle de Statistique Canada.

La Division de l'Assistance-utilisateurs fait partie du Secteur des services de promotion et de diffusion et est chargée de plusieurs responsabilités:

1. Assurer un service de renseignements aux utilisateurs de statistiques dans tout le Canada.
2. Encourager l'utilisation de renseignements statistiques au Canada.
3. Établir des mécanismes de retour d'information de la part des utilisateurs de statistique.
4. Servir de point de contact pour les programmes de collaboration et les entretiens entre les gouvernements provinciaux et Statistique Canada.

5. To undertake market research to better understand and meet the needs of data users.

The User Advisory Services Division maintains Regional Offices in eight cities across the country. Each Regional Office maintains a library of Statistics Canada and related material in addition to a knowledgeable inquiries staff who respond to requests for statistical data, and offer advice on the meaning and uses of the data. Over 100,000 requests for information are answered each year, mostly by telephone.

Each Regional Office also has Regional Advisors who perform local liaison activities between Statistics Canada and provincial and local government, the business community and academic institutions. The Regional Advisors promote the use of statistical data through visits, talks and meetings, as well as helping people get in touch with the proper subject matter experts in Ottawa. Other features, of a Regional Office of User Advisory Services, include the development and implementation of feedback programs to keep the Bureau informed of data users' needs and problems, and direct terminal access to the bureau's computer database - CANSIM.

See below.

5. Faire des études de marché pour comprendre les besoins des utilisateurs de données et mieux y répondre.

La Division de l'Assistance-utilisateurs a des bureaux régionaux dans huit villes du pays. Chaque bureau régional est doté d'une bibliothèque de publications de Statistique Canada et de textes semblables et dispose d'un personnel compétent chargé de donner suite aux demandes de renseignements statistiques et de donner des conseils sur la signification et les utilisations des données. Ce personnel répond à plus de 100,000 demandes de renseignements par an, le plus souvent par téléphone.

Chaque bureau régional a également ses conseillers régionaux, qui font du travail de liaison localement entre Statistique Canada et les gouvernements provinciaux et les administrations locales, le monde des affaires et les établissements d'enseignement. Des conseillers régionaux font la promotion des données statistiques au moyen de visites, de causeries et de réunions et aident les gens à entrer en contact avec les fonctionnaires compétents à Ottawa. Parmi les autres traits caractéristiques d'un bureau régional des Services d'Assistance-utilisateurs, il faut mentionner l'établissement et la mise en oeuvre de programmes de retour d'information pour tenir le bureau au courant des besoins et des problèmes des utilisateurs de données et la possibilité d'accès direct par terminal à la base des données mécanographiques de Statistique Canada: CANSIM.

Voir au verso.

REGIONAL USER ADVISORY SERVICES

Central Inquiries  
Service,  
Statistics Canada,  
Ottawa, Ontario.  
K1A 0T6  
(613) 992-2959; 992-4734

St. John's  
Statistics Canada  
P.O. Box 8556,  
3rd Floor,  
Viking Building,  
Crosbie Road,  
St. John's, Newfoundland.  
A1B 3P2  
(709) 726-0713.

Halifax  
Statistics Canada  
1256 Barrington Street,  
Halifax, Nova Scotia.  
B3J 1Y6.  
(902) 426-5331

Montreal  
Statistics Canada,  
Alexis Nihon Plaza,  
1500 Atwater Avenue,  
Montreal, P.Q.  
H3Z 1Y2.  
(514) 283-5725.

Toll-free access to the Halifax Office  
is available from Charlottetown, Moncton,  
Saint John and Sydney by calling the  
operator and asking for ZENITH 22066.  
Throughout Saskatchewan the Regina office  
can be reached by dialing 1-800-667-3524  
and in Alberta the Edmonton office can be  
reached at 1-800-222-6400.

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Statistics Canada  
25 St. Clair Avenue East,  
Toronto, Ontario.  
M4T 1M4  
(416) 966-6586.

Winnipeg  
Statistics Canada,  
Room 500,  
General Post Office,  
266 Graham Avenue,  
Winnipeg, Manitoba.  
R3C 0K4  
(204) 985-4020.

Regina  
Statistics Canada,  
530 Midtown Centre,  
Regina,  
Saskatchewan.  
S4P 2B6.  
(306) 569-5405.

Edmonton  
Statistics Canada,  
10th Floor, Baker Centre Building,  
10025 - 106th Street,  
Edmonton, Alberta.  
T5J 1G9.  
(403) 425-5052.

Vancouver  
Statistics Canada,  
1145 Robson Street,  
Vancouver, B.C.  
V6E 1B8.  
(604) 666-3695.

To subscribe to publications, please  
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Distribution,  
Statistics Canada,  
Room 1405, Statistics  
Canada Building  
Tunney's Pasture,  
Ottawa, Ontario.  
K1A 0T6.

## SERVICES RÉGIONAUX D'ASSISTANCE-UTILISATEURS

Service central de  
renseignements  
Statistique Canada  
Ottawa (Ontario)  
K1A 0T6  
(613) 992-2959;  
992-4734.

St.-Jean (T.-N.)  
Statistique Canada  
Case postale 8556  
3<sup>e</sup> étage,  
édifice Viking  
Chemin Crosbie  
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A1B 3P2  
(709) 726-0713.

Toronto  
Statistique Canada  
25 est, avenue St. Clair  
Toronto (Ontario)  
M4T 1M4  
(416) 966-6586.

Régina  
Statistique Canada  
530, centre Midtown  
Régina (Saskatchewan)  
S4P 2B6  
(306) 569-5405.

Vancouver  
Statistique Canada  
1145, rue Robson  
Vancouver (C.-B.)  
V6E 1B8.  
(604) 666-3695.

On peut obtenir une communication  
gratuite au bureau d'Halifax à partir  
de Charlottetown, Moncton, Saint John  
et de Sydney en demandant à  
l'opératrice le numéro ZENITH 22066.  
En Saskatchewan on communique avec le  
bureau régional de Régina en signalant  
1-800-667-3524 et en Alberta, on peut  
atteindre le bureau régional d'Edmonton  
en signalant 1-800-222-6400.

Halifax  
Statistique Canada  
1256, rue Barrington  
Halifax  
(Nouvelle-Ecosse)  
B3J 1Y6  
(902) 426-5331.

Montréal  
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Place Alexis Nihon  
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H3Z 1Y2  
(514) 283-5725.

Winnipeg  
Statistique Canada  
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Winnipeg (Manitoba)  
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10025 — 106<sup>e</sup> rue  
Edmonton (Alberta)  
T5J 1G9  
(403) 425-5052

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veuillez écrire à:

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Statistique Canada,  
Pièce 1405, Edifice  
Statistique Canada,  
Parc Tunney,  
Ottawa, Ontario.  
K1A 0T6.



STATISTICS CANADA:  
NATIONAL HEALTH DATA

The Health Division of Statistics Canada is responsible for the preparation and maintenance of numerous national health data series. Data are obtained from a variety of sources including individual respondents, health care institutions, provincial governments, voluntary agencies and national associations. Data elements within the series cover a wide range of health related information as well as basic socio-economic and demographic data. The health related components include such areas as vital statistics (births, deaths, marriages and divorces), patient hospitalization information, special disease registries (e.g., cancer, TB, etc.), health manpower occupation groups, as well as an extensive series on the functional and financial characteristics of institutions operating within the health care delivery system. For more details on the type of data available consult the Statistics Canada Catalogue. The Health series are described in catalogue numbers 82-000 to 84-000 inclusive.

Data are obtained in, or converted to machine-readable form by Statistics Canada, which performs rigorous edits and adjustments to establish statistical reliability. The series, some dating as far back as 1961, are stored and maintained on magnetic tape.

Statistics Canada has, from the outset, followed the policy of making copies of their edited tapes available to provincial suppliers of data. Many provinces have taken advantage of this policy to secure copies of their data for subsequent manipulation. Similarly, researchers and others with interest in the health field have been provided access to certain of these tape files, subject to the secrecy provisions of the Statistics Act. In cases where potential individual disclosure exists, tape copies are carefully stripped of identifying information before being released.

STATISTIQUE CANADA:  
DONNÉES NATIONALES SUR LA SANTÉ

La Division de la Santé de Statistique Canada est chargée d'établir et de tenir à jour plusieurs séries de données sur la santé dans l'ensemble du pays. Ces données proviennent de diverses sources notamment du répondant individuel, des établissements de soins médicaux, des gouvernements provinciaux, des organismes bénévoles et des associations nationales. Les éléments des données d'une même série couvrent une vaste gamme de renseignements relatifs à la santé et comprennent également des données socio-économiques et démographiques fondamentales. Les composantes ayant trait à la santé couvrent des domaines comme les statistiques d'état civil (naissances, décès, mariages et divorces), les renseignements sur les patients hospitalisés, les registres où s'inscrivent certaines maladies (comme le cancer, la tuberculose, etc.), les groupes de professions du domaine de la santé de même qu'une série exhaustive de caractéristiques d'exploitation et financières des établissements qui fonctionnent à l'intérieur de régime de présentation des soins médicaux. Pour obtenir plus de détails concernant le type de données disponibles, consulter le catalogue de Statistique Canada. Les séries sur la santé se trouvent dans les publications portant les numéros 82-000 à 84-000 inclusivement.

Les données s'obtiennent ou sont converties sous forme ordinaire par Statistique Canada qui procède à des vérifications et à des rajustements rigoureux visant à établir une bonne fiabilité statistique. Les séries, dont certaines datent de 1961, sont emmagasinées et conservées sur bandes magnétoscopiques.

Depuis le début, Statistique Canada a respecté une politique de coopération en remettant aux fournisseurs des données, dans les provinces, les copies vérifiées de leurs bandes d'ordinateur. Bon nombre de provinces ont profité de cette politique pour en obtenir des exemplaires en vue d'une éventuelle utilisation ultérieure. Les chercheurs et autres personnes qui

Machine readable files are supplied on a high speed magnetic tape provided by the user. Detailed documentation is provided for each tape and in certain instances existing Statistics Canada extraction soft-ware can also be supplied.

Special requests for data files requiring additional manipulation or non-standard outputs may require that the work be performed on a cost recovery basis. These requests are subject to the resource limitations within the ongoing Health Division operations.

With many years of data already in machine-readable form, enquiries regarding access to these files by researchers and others with legitimate interests are welcome. For further details, contact Dr. J. Hauser, Director, Health Division, Statistics Canada, R. H. Coats Building, Ottawa, telephone (613) 995-0780.

s'intéressent au domaine de la santé ont également accès à certain de ces fichiers à condition qu'ils se conforment aux dispositions de la Loi sur la statistique portant sur le secret. Pour éviter toute divulgation de renseignements individuels, les reproductions de bandes magnétiques sont soigneusement dépouillées de tout renseignement pouvant permettre d'identifier qui que ce soit avant d'être mises en circulation.

Les fichiers ordinolingués sont transcrits sur des bandes magnétiques à haute vitesse fournies par l'utilisateur. Chaque bande est accompagnée d'une documentation détaillée et dans certains cas on peut offrir le logiciel d'extraction déjà en place à Statistique Canada.

Dans certains cas le travail devra être effectué contre remboursement des frais, lorsqu'il s'agit de demandes spéciales de fichiers de données qui exigent des opérations supplémentaires ou des sorties non normalisées. Ces demandes sont remplies dans les limites des ressources disponibles dans le cadre des opérations courantes de la Division de la santé.

Etant donné l'abondance des données qui sont conservées sous forme ordinolinguée depuis quelques temps déjà, c'est avec plaisir que nous accueillerons les demandes de tout chercheur ou toute personne dont les intérêts dans ce domaine sont fondés. Prière de contacter M. J. Hauser, directeur de la Division de la santé, Statistique Canada, Immeuble R. H. Coats, Ottawa, Ontario, téléphone (613) 995-0780.

## THE MANITOBA HEALTH LIBRARIES ASSOCIATION

The Manitoba Health Libraries Association has been in existence just one year. In that short time MHLA members have recognized the benefits of co-operating closely with other libraries and as a result have initiated a number of important projects that will affect the health library scene in Manitoba. At the October 17th meeting a number of these projects were discussed.

First and foremost was the decision of the Association to establish a union list of periodicals held by health libraries in Manitoba. Early in 1976 each MHLA library drew up a list of its journal titles, sans holdings, and distributed it to member libraries. These lists, although helpful, have pointed out the need for a more complete listing of health related periodicals. The Association has therefore struck a committee to develop guidelines and a format for a union list. Provincial funding is being sought to support the clerical functions which the task will entail.

In response to the interest of MHLA members past president Mrs. R. Kroeker approached Red River Community College teaching staff about establishing a course on health libraries. "Working in Health Libraries", a diploma course, will be offered in the new year to graduate technicians and those that have health library experience.

The membership also agreed that further information should be sought with regards to becoming a group or regional member of CHLA/ABSC.

Finally, the Association decided that in the future a series of workshops geared to the needs and interests of the membership will be prepared.

Sandra Langlands  
University of Manitoba

## CANADIAN MEDICAL SCHOOL LIBRARY

### ADMINISTRATORS MEET

The Annual Meeting of the Association of Canadian Medical Colleges was held from October 1 - 4, 1977 in Montreal, Canada. This group is representative of the medical schools of Canada and their teaching hospitals. Representatives from federal and provincial governments as well as from the American analog, the Association of American Medical Colleges, also participate in this annual meeting. The Association has a number of Standing and Special Resource Committees. One of the Special Resource Committees is the Committee on Medical School Libraries, consisting of the administrative libraries of Canada's sixteen medical colleges and librarian representatives from Canada's Department of Health and Welfare Library and from the Health Sciences Resources Centre of the Canada Institute for Scientific and Technical information.

Over the past year the activities of this committee of medical library administrators have focussed upon the National Library of Canada and the current review of its goals and objectives by the National Librarian of Canada. The Canada Institute for Scientific and Technical Information functions on the federal level as Canada's national science library, and the Director of the Canada Institute was also involved in this current review of priorities by the National Librarian. The Special Resource Committee on Medical School Libraries prepared two sets of comments and recommendations for this review: one to the National Librarian of Canada, Dr. Guy Sylvestre, and one to Dr. Jack Brown, Director of the Canada Institute for Scientific and Technical Information. The Committee felt especially involved with the statement regarding the Canada Institute for Scientific and Technical Information as we were the only group preparing a statement concerned solely with the services and role of the Canada Institute.

The Committee submitted seven recommendations to the Director of the Canada Institute for Scientific and Technical Information. Among these were the development of a Canadian biomedical library network supported by regional improvement grants, the accelerated development of scientific collections at the national level, the more rapid availability of the full array of services offered by the U.S. National Library of Medicine to foreign consumers of NLM's services, and the establishment of an advisory committee. During the recent Montreal meeting Dr. Jack Brown accepted the invitation to meet and discuss these recommendations. During the course of Sunday afternoon's session, Dr. Brown delineated the priorities and restrictions under which the Canada Institute operates. He reviewed the positive and negative aspects of the federal library situation and emphasized the ongoing concern with collections development and the adequacy of the budget in support of collections. He discussed the monitoring of Canadian journals indexed in Index Medicus. (Canada is in a unique situation here. The indexing of Canadian medical periodicals for Index Medicus and MEDLINE is done at the National Library of Medicine rather than in Canada, unlike most "foreign" MEDLINE users who provide their own indexing). Dr. Brown also discussed the "make or buy" philosophy of library services and operations at the federal level.

The Committee had also recommended the establishment of an Advisory Committee to the Health Sciences Resources Centre to guarantee the continuation of the rapport established between the Centre and the community of health sciences librarians. Dr. Brown accepted this recommendation and is acting immediately to establish such an advisory committee. The Chairman of the Committee was charged with obtaining names from the appropriate bodies representing health science libraries in Canada: The Canadian Health Libraries Association, the Canadian Group of the Medical Library Association, L'Association pour l'Avancement des Sciences et des Techniques de la Documentation, Section de la Santé, and the originator of these recommendations, the Special Resource Committee on Medical School Librarians of the Association of Canadian Medical Colleges.

During the course of its two day meeting the Committee also received reports from the Head of the Health Sciences Resources Centre, Mr. Philippe Lemay and from Mrs. Valerie Monkhouse, representing Mrs. Martha Stone who is Chief of Departmental Library Services, Health and Welfare, Canada. The annual library statistical compilations were also reviewed and considerable discussion revolved around the ranking of libraries by size in publishing the annual statistics relating to medical school libraries in Canada.

The Committee also enjoyed two further presentations. Dr. Philip Teigen, History of Medicine Librarian, Osler Library, discussed the rationalization and administration of historical medical collections. The present status, contents and concerns surrounding the Working Paper on copyright were reviewed by Mr. Alan MacDonald, Health Sciences Librarian, Dalhousie University. Mr. MacDonald is the Special Resource Committee's representative on the Copyright Liaison Group of the Canadian Library Association.

One of the additional benefits to medical library administrators who have participated in the annual meeting has been the opportunity to visit medical libraries in a variety of Canadian locations. This year, the Association of Canadian Medical Colleges determined, largely for reasons of economy, partly for travel convenience, to limit the meeting sites to the central part of Canada. Meetings will henceforth be limited to Montreal, Toronto and Winnipeg. Some regret was expressed by participating librarians on the loss of this opportunity to become familiar with Canadian medical libraries throughout the country.

Frances Groen  
Chairman, Special Resources Committee  
on Medical School Libraries  
Association of Canadian Medical Colleges  
and  
Life Sciences Area Librarian  
McGill University

#### POT POURRI - COLLEAGUES, LIBRARIES

Linda Harvey has recently returned to the Kellogg Health Sciences Library of Dalhousie after a twelve month study leave and leave of absence. Her leave was spent in London, England where she investigated the services provided by libraries serving the Royal College of Nurses, the Queen's Institute of District Nursing, the Royal College of Midwives, the Pharmaceutical Society of Great Britain, and the King's Fund Centre. In addition, she visited several hospital-based drug information centres to learn about the provision of drug information from such centres as well as other practical problems. She brings this valuable experience back to Kellogg where she has assumed the duties of Head, Information Services.

Joe Lavery has been appointed Head of Technical Services at the Health Sciences Library, Memorial University of Newfoundland. He comes to Memorial from the Main Library of Agriculture Canada in Ottawa where he has been serving as Assistant Head of Acquisitions. Prior to his Ottawa appointment, he was a Research Station Librarian with the same department in Summerland, B.C. Joe's undergraduate training was in the biological sciences at the University of Alberta. He earned a B.L.S. from the University of Toronto. He brings with him some ten years of varied professional experience and will make a valuable contribution to the Library which he plans to join in early January of 1978.

Joanne Marshall has been on leave from the Health Sciences Library of McMaster University and plans to return to her position on January 1, 1978. She has been living in Montreal with her husband who is on sabbatical leave. Her own project has involved a clinical study as part of the requirement for a Master of Health Sciences degree.

Memorial University of Newfoundland reports that a new section of its Health Sciences Library has recently been opened. The Library, formerly called the Medical Library, was recently renamed as it assumed responsibility for serving the M.U.N. School of Nursing in late summer. The new wing forms the second portion of a plan that will see the Library completed in three stages. This second stage adds 54 reader stations with 75 double face stack sections. Ultimately, the Library will feature some 316 seats for users with stacking for approximately 110,000 volumes.

## JOB MARKET

### QUEBEC

The Medical Library of McGill University is presently looking for a Computer Services Librarian. This position is classified as Librarian 2 and the starting salary is \$14,560 per annum. The position reports directly to the Head of Public Services and the person appointed will have primary responsibility for the provision of computer-based bibliographic services to all users of the Medical Library. The services offered at the present are those from the U.S. National Library of Medicine (Medicine and its associated data bases), CAN/OLE and CAN/SDI from the Canada Institute for Scientific and Technical Information and several of the data bases offered by the Systems Development Corporation and Lockheed such as CAIN, Psychological Abstracts, Biosis Previews, and CA Condensates. The position requires a knowledge of spoken French, a library science degree from an accredited Library School and at least one of the following: Two years of experience in a Medical Library, completion of a one year post-graduate medical librarianship intern program, two years of library experience, at least one of which involved on-line searching or subject specialization in the field of life sciences. This position will open on September 1, 1977 and applications or requests for further information should be addressed to: Claire Turnbull, Head of Public Services, Medical Library, McGill University, 3655 Drummond Street, Montreal, H3G 1Y6. Starting date for this position is as soon as possible.

The Macdonald College Library of McGill University is looking for a Public Services Librarian, Librarian II level. This position is responsible for Public Services, performs reference tasks, including orientation and user education and computer based bibliographic searches. Assists in the selection of reference books and A/V materials. Qualifications for this position are: Undergraduate degree in a life science preferred. BLS/MLS from ALA accredited library school. Minimum 3 years experience, one at least in reference, some in supervisory capacity. On-line searching expertise preferred. Conversational and reading knowledge of French an asset. Other European languages useful. Apply to: Mrs. M. M. Wright, Librarian, Macdonald College Library, Macdonald College, Ste. Anne de Bellevue, Que. Tel.: 457-6580 loc. 211. Salary: \$14,290 per annum.

McGill University, Life Sciences Library invites applications for the position of Head, Nursing Library, at the Librarian III level in the Life Sciences Library. Full time position. Nature of duties: Under the general supervision of the Life Sciences Area Librarian, the Nursing Librarian is responsible for the organization, operation, and administration of the Nursing Library. Areas of responsibility include circulation, reference, audio-visual services and collections development as well as budget preparation and monitoring. Close working relations with the School of Nursing are an essential aspect of the work of the Nursing Librarian. Qualifications: BLS or MLS plus three years professional librarian experience in either public or technical services, at least one year to include supervisory experience. Salary: \$16,040. Apply in writing to: Mrs. Frances Groen, Life Sciences Area Librarian, 3655 Drummond Street, Montreal, Que. H3G 1Y6.

#### NOTED IN THE LITERATURE

Kamenoff, Lovisa

Retention of Journals in a Community Hospital Library. Bulletin of the Medical Library Association, 65: 446-447, October, 1977.

This is a brief article of primary interest to hospital libraries and librarians. The author reports on an in-house study which evaluated use of a hospital journal collection in order to arrive at rational decisions regarding retention policies. The library under study found that there were some twenty journals in its collection where use warranted retention policies of fifteen years or longer. The author argues against accepting the arbitrary standard of five or ten years and suggests that each hospital library must define its own use pattern before establishing a retention policy.

- R. B. Fredericksen





Stamp

Joanne Marshall  
Clinical Librarian  
Health Sciences Library  
McMaster University  
Hamilton, Ontario L8S 4J9

CLINICAL LIBRARIANS SURVEY

Name \_\_\_\_\_ Address \_\_\_\_\_

Library \_\_\_\_\_ Telephone \_\_\_\_\_

Please explain your interest and/or experience in clinical librarianship:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

fold here

tear along dotted line

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fold and staple  
addressee on reverse side

CANADIAN HEALTH LIBRARIES ASSOCIATION

Membership Application

Name.....

Address.....

.....

Postal code.....

I enclose \$15.00 (made payable to Canadian Health Libraries Association)  
as my membership fee for the period ending June 1978.

PLEASE RETURN THIS FORM TO:-

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7

---

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

Formule d'Application

Nom.....

Adresse.....

.....

Code postale.....

J'inclus \$15.00 (payable a Canadian Health Libraries Association) comme  
cotisation pour la periode qui se termine en juin 1978.

ADRESSE DE RETOUR:

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7



# CHLA

# ABSC

# NEWSLETTER



No. 5

ISSN 0700-5474

SPRING 1978

## FROM THE EDITOR

Several more people have volunteered to serve as correspondents to the Newsletter since our last issue. Their substantial contributions are reflected in the pages that follow. A list of the correspondents appears with the listing of the CHLA/ABSC Executive. You will note that there are still some geographic and topical "vacancies." Any more volunteers? I am sure there are still a lot of interesting activities "out there" that are just not being reported. Our new "Form for Submission of Copy" is included in the back of this issue and should provide a painless way for individuals to submit copy. The "Form" will appear in subsequent issues, and frequently accompany CHLA/ABSC mailings....The "President Reports" feature in this issue focuses on the new Checklist for Staff Library Service developed and adopted by the Ontario Medical Association. Read and study it as President Flower suggests, then write to either the Editor or Mrs. Flower with your views and comments....Manitoba is the only group or region to respond to Alan MacDonald's proposal for chapters which appeared in the last issue. The Executive would be interested in hearing from other groups, as well....The 2nd Annual Meeting Program has now been finalized and appears elsewhere in this issue. We hope for a big, enthusiastic turn-out for our first western meeting in Edmonton.

CANADIAN HEALTH LIBRARIES ASSOCIATION

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA



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Health Sciences Library  
Health Sciences Centre  
Memorial University of Newfoundland  
St. John's, Newfoundland, A1B 3V6

Members at Large:

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Medical Library  
McGill University  
3655 Drummond Street  
Montreal, P.Q. H3G 1Y6

Martha Stone (1 year)  
Departmental Library  
Dept. of National Health & Welfare  
Ottawa, Ontario  
K1A 0K9

C. William Fraser (2 years)  
B. C. Medical Library Service  
1807 West Tenth Avenue  
Vancouver, British Columbia, V6J 2A9

Sheila Swanson (1 year)  
Toronto Academy of Medicine  
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## CHLA/ABSC NEWSLETTER

The CHLA/ABSC Newsletter is published four times a year by the Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Subscriptions are available with membership in CHLA for \$15.00 per year. Correspondence regarding membership and subscriptions should be addressed to: Alan H. MacDonald, Treasurer, CHLA/ABSC, W.K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

The CHLA/ABSC Newsletter is a vehicle for providing increased communications among all Canadian health libraries and librarians, but has a special commitment to reach and assist the smaller, isolated, health library. Feature length articles are accepted describing a wide range of health library topics: organizations, services, networks and consortia, surveys, state-of-the-art reviews. Brief, news-length items accepted include: how-we-did-it reports, news about workshops and continuing education opportunities (forthcoming or recently held), job announcements, new publications, news about colleagues and libraries, miscellaneous items. Contributors should consult recent issues for examples of types of material and general style. Bibliographic references should conform to the format used in the Bulletin of the Medical Library Association, whenever possible. Submissions in French or English are welcome, preferably in both languages. Contributions should be addressed to: Richard B. Fredericksen, Editor, CHLA/ABSC Newsletter, Health Sciences Library, Health Sciences Centre, Memorial University of Newfoundland, St. John's, Newfoundland, A1B 3V6.

Deadline for the Spring issue is April 27, 1978.

## CHLA/ABSC NEWSLETTER

Le CHLA/ABSC Newsletter est publié quatre fois par année par la Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Un abonnement à cette publication fait partie de votre cotisation annuelle de 15.00 dollars en tant que membre de l'ABSC. Pour devenir membre et, pour recevoir cette publication il faut écrire à: Alan H. MacDonald, Trésorier, CHLA/ABSC, W. K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

Le but du CHLA/ABSC Newsletter est de rendre la communication entre toutes les bibliothèques Canadiennes de la santé et les bibliothécaires plus grande mais il veut spécialement rejoindre et aider les bibliothèques isolées et de moins d'envergures. Nous acceptons tout article traitant de tous les aspects bibliothéconomiques du domaine de la santé: organisations services reseau et consortium, enquêtes exposés de synthèse. En résumé les articles nouvelles acceptés peuvent comprendre: des résumés sur la façon dont on est arrivé à trouver une solution a un project, nouvelles sur des ateliers et des cours d'éducation permanente (à venir ou passés) postes vacants, nouvelles publications, nouvelles sur des collègues et bibliothèques, et tout autre sujet. Pour les intérêts, le genre d'article et le sujet publié dans les derniers numéros peuvent vous servir d'exemples. Il serait préférable de suivre si possible le format utilisé dans le Bulletin of the Medical Library Association lorsque vous avez des références bibliographiques à citer a la fin de votre article. Des articles Français ou Anglais seront les bienvenus mais il serait souhaitable de les écrire dans les deux langues. Vous devez faire parvenir vos articles à: Richard B. Fredericksen, Editeur, CHLA/ABSC Newsletter, Health Sciences Library, Health Sciences Centre, Memorial University of Newfoundland, St. John's, Newfoundland, A1B 3V6.

La date limité pour le prochain numéro est: April 27, 1978.

## SHOULD CHLA HAVE CHAPTERS? - MANITOBA RESPONDS

Alan H. MacDonald  
Treasurer CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Sir Charles Tupper Building  
Dalhousie University  
Halifax, Nova Scotia B3H 4H7

Dear Alan:

The Ides of February has come and gone and Manitoba is just now responding to your first proposal on CHLA chapters. Sorry for the delay. At the regular meeting of the Manitoba Health Libraries Association on February 13, the proposal was reviewed and discussed in detail.

We agree completely with your statements on the function of national and local associations and the statement on affiliation. It seems, by the list of local organizations, that the MHLA is the only group presumptuous enough to try to cover an entire province.

In review of the requirements for proposed chapters, as published:

1. The MHLA has been organized in its present form for almost a year. Prior to the approval of our present constitution, "unorganized" meetings had taken place since 1973.
2. Manitoba is a rather large geographic area to allow regular attendance of MHLA activities. Preliminary reports from Sandra Langlands, the U. of M. Extension Librarian, would indicate that there are very few organized health libraries outside Winnipeg and those that do exist are geographically extremely isolated. If government funding for health institutions improves and if we hone our survey and recruitment techniques, we hope to find more health libraries throughout the province. To be optimistic, in future there may be sufficient members in various communities to support subdivisions of a Manitoba chapter.
3. The reading aloud of this requirement brought a variety of strongly positive reactions: applause, profuse nodding of heads and even one shout of "Right On!". We really liked number three!  
(Ed. Note. The requirement referred to states that "there should be no limitations to membership based on the type of service or library in which the member works").
4. To date there are 31 active members representing 27 health libraries in Winnipeg, Brandon and Selkirk.
5. Of the 31 MHLA members, 16 are already members of CHLA. The remaining 15 have been given CHLA membership applications, the brochure and much encouragement to sign up as soon as possible. Failing total CHLA membership: "It was moved that if the intent of point 5 is approved by the CHLA, that the MHLA subsidize, if necessary, members who are elected to the executive."

6. The constitution of the MHLA, approved in May 1977, was patterned after the CHLA constitution by a very forward-looking constitution committee.

The representation outlined in your proposal should encourage communication between the CHLA and the chapters. The MHLA already has a correspondent to the Newsletter; Sandra Langlands was volunteered at the MLA Yawn-In in June, 1977.

Re finances: The MHLA can cover costs of regular meetings and mailings with little or no difficulty. However financial support will definitely be requested to allow the production of our union list of serials. An outline of our project will be submitted to the CHLA executive at a later date. This type of support would be extremely beneficial to a smaller chapter, as would the offer of loans to facilitate workshops.

In brief, the MHLA has approved the first proposal and will officially apply for chapter status in the near future.

I hope our comments will be of use despite their tardiness.

Sincerely,

Barbara Henwood  
President  
Manitoba Health Libraries  
Association

#### CHLA/ABSC MEMBERSHIP REPORT

As of 24 February 1978, we have 252 members, an increase of 44 since the last issue of the Newsletter.

#### THE PRESIDENT REPORTS

There has been a very interesting development concerning hospital libraries in Canada. One of our problems in fostering good library services in hospitals has been the difficulty in developing norms by which these services can be judged by non-librarians along with other services in the hospitals which have more dramatic outcomes. An intensive care unit which does not rally patients can be easily assessed as being inadequate, but an information service which does not reach more than a quarter of the hospital personnel is not so obviously defective. People simply find other sources of information. This whole problem of efficiency and productivity is, of course, exactly what hospital accreditation is all about. And hospital libraries have traditionally had a curious role as bystanders in this process. Now that situation may be changing.

In 1975 a survey of hospital libraries in Ontario was conducted through the cooperation of three separate organizations: the Toronto Medical Libraries Group, the Ontario Hospital Association and the Ontario Medical Association. The summary report of that survey, put together by a committee of the Toronto Medical Libraries Group, established that there were basically two varieties of libraries in Ontario

hospitals, which applied to all kinds of hospitals and all sizes of libraries. There were functional libraries that worked, and there were non-functional libraries that were merely nominal. Unfortunately, there seemed to be more of the non-functional libraries.

The report offered eight recommendations designed to redress that balance. The recommendations were directed at four levels of administration. The first level was, of course, the management of the library in the individual hospital. The second level was regional, where interaction among libraries in hospitals and other institutions is a valid concern. The third level was provincial, where continuing education for health sciences library personnel should be addressed. And the fourth level was national, where the whole matter of standards and accreditation comes to rest. As reported in the CHLA/ABSC Newsletter for Spring 1977, this summary report was presented to the Ontario Medical Association and the Ontario Hospital Association last winter, in the hope that some action might be taken.

The Committee on Medical Library Services of the Ontario Medical Association has been concerned with hospital libraries for over ten years. It was gratified to have, for the first time in those years, some reasonably accurate data on the current number of hospital libraries which are operating in the Province of Ontario, and on their potential for delivering patient care and continuing education information. In reviewing its options for acting on these data, the Committee has chosen the national level as its first line of approach. It has developed a Checklist for Staff Library Services, which it has offered to the Canadian Council on Hospital Accreditation as an option to be used by their accreditation teams, either in addition to, or instead of, the section on libraries in their regular hospital accreditation forms.

To develop this Checklist the OMA Committee used two sources right at hand. The new Checklist is grounded on the questionnaire which was used in the Ontario survey, and the suggested norms are based on the Appendixes published with the Canadian Hospital Library Standards in CMAJ, 17 May 1975. These Standards were the ones used as a background paper in the revision of the library section of the new Guide to Hospital Accreditation published in 1977 by the Canadian Council on Hospital Accreditation, although they did not incorporate the Appendixes.

It is exhilarating to be able to report that the Canadian Council on Hospital Accreditation has accepted the OMA Checklist as a useful document which they will add to their present form and test. This means that the principle has been established, that the CCHA is willing to judge hospital libraries in all the provinces on the basis of norms established by librarians and others, who understand the dynamics of information services. Surely we must all applaud this turn of events. It brings much closer to reality the hope that the calibre of the library may ultimately bear directly on the accreditation or non-accreditation of the hospital which houses it.

Now our turn has come. The OMA Committee on Medical Library Services has forwarded their Checklist for Staff Library Services to the Canadian Health Libraries Association "for comments." Since their next meeting is on March 8th, your Executive Committee has contributed to a report which can be returned to the Committee for

that meeting. That report begins by accepting the principle of basic norms set by knowledgeable people, which the Checklist represents. It goes on to suggest some clarification in wording, some emphasis on library training, and on the services a library should be offering. Inevitably, it tries to come to terms with the minimum quality of the norms.

In the discussion throughout the health library community which surrounded the acceptance of the Appendixes which accompanied the original Canadian Hospital Library Standards, it became very apparent that the minimum concept was a difficult one for many people. It is based on the thorny realism that only minimums can be legislated. Growth and expansion need a structure which will provide support, and minimums can put a floor under that structure. Below that floor, the library will not work at all--and for this very reason, it is a crucial landmark for a non-functional operation. However, figures seem very concrete, and it is difficult to convey that they are free to expand upward, AND SHOULD DO SO. They tend to be looked upon as the top as well as the bottom. In her comments on the Checklist, our ASTED liaison person has brought this out in connection with the minimum acquisition budgets assigned to each hospital Category. And it applies equally to the balance of materials in the collections themselves.

Two aspects of a hospital library are particularly difficult to annotate in a checklist of this sort: the interactive quality of good library service, which derives some of its most pertinent materials from other collections; and the cumulative nature of collections and acquisition budgets, which normally increase by percentage increments annually. In the case of a budget which is adequate for starting a collection, for instance, the same number of dollars ten years later would mean stultification. In the case of a service to a research project, borrowing from other collections would often provide the only possibility for good service. The problem is to state these characteristics in a periodic checklist.

We are publishing the Checklist for Staff Library Services which was developed by the Ontario Medical Association elsewhere in this Newsletter. We hope you will study it, and offer your own comments. These will be compiled and forwarded to the Committee on Medical Library Services as an addendum to our current report. We would like to hear from any hospital librarian who has watched an accreditation team wander into the library, look vaguely at the books, ask a few desultory questions, and drift out again. This new Checklist may actually be the beginning of a new era.

M. A. Flower  
President

#### CHECKLIST FOR STAFF LIBRARY SERVICES

1. Is there an identifiable library? Yes \_\_\_ No \_\_\_
2. Is the library in a central, easily accessible, clearly identified location? Yes \_\_\_ No \_\_\_

CHECKLIST (Cont'd.)

3. Is it used only for library purposes? Yes \_\_\_ No \_\_\_  
If no, do these other activities interfere with the library functions?  
(i.e. if the room is used for meetings, does this mean that the library  
functions are not available during these meetings?) Yes \_\_\_ No \_\_\_
4. Who may use the library?  
All the staff? Yes \_\_\_ No \_\_\_  
Doctors only? Yes \_\_\_ No \_\_\_  
Nurses? Yes \_\_\_ No \_\_\_  
Administration? Yes \_\_\_ No \_\_\_  
Allied Health Staff? Yes \_\_\_ No \_\_\_
5. Is there space and seating for library users to study library materials?  
Yes \_\_\_ No \_\_\_
6. Is there space for the library staff to work? Yes \_\_\_ No \_\_\_
7. (In conjunction with questionnaire #2,3,4)  
Does the library committee meet regularly? (i.e. minimum of quarterly)  
Yes \_\_\_ No \_\_\_ How often? \_\_\_\_\_
8. (In conjunction with #11)  
Is there a regular budget? Yes \_\_\_ No \_\_\_  
a) How much is budgeted? \_\_\_\_\_ per year (Category 1 \$8000  
Category 2 4500  
Category 3 2500  
Category 4 1500  
Category 5) 1000  
(not including salaries)  
see below for an explanation of categories.
- b) Where does this money come from?  
Hospital global budget? Yes \_\_\_ No \_\_\_  
Doctors' donations? Yes \_\_\_ No \_\_\_  
Nurses' donations? Yes \_\_\_ No \_\_\_  
Other (specify) \_\_\_\_\_

LIBRARY SERVICES

9. (In conjunction with #8)  
Is the library accessible at times when the library staff are not there?  
Yes \_\_\_ No \_\_\_
10. (In conjunction with #9,10)  
Are library materials easily accessed? (i.e. catalogued or indexed in some  
manner?) Yes \_\_\_ No \_\_\_

(continued)

CHECKLIST (cont'd.)

The rest of the questions deal with the 5 categories of hospitals individually. Use only the appropriate section. See below for an explanation of categories.

11. Category 1

- a) Library personnel  
Is there a librarian available? Degree? Yes \_\_\_ No \_\_\_  
Other staff? Number and kind? \_\_\_\_\_  
(library technician, 2 clerks)
- b) Number of courses, workshops, seminars etc., attended within the past 12 months? (1) \_\_\_\_\_
- c) Number of current book titles? (1000) \_\_\_\_\_
- d) How many purchases within past 12 months? (50) \_\_\_\_\_
- e) Number of journals? Medical (200+) \_\_\_\_\_  
Nursing (20) \_\_\_\_\_  
Administration (10) \_\_\_\_\_  
Other allied (15) \_\_\_\_\_
- f) Reference sources? Index Medicus? \_\_\_\_\_  
Cumulative Index to Nursing Literature  
or International Nursing Index? \_\_\_\_\_  
Hospital Literature Index? \_\_\_\_\_
- g) Audio-visual resources? Catalogues? \_\_\_\_\_  
Equipment for playback? \_\_\_\_\_

12. Category 2

- a) Library personnel  
Is there a librarian available? Degree? Yes \_\_\_ No \_\_\_  
Other staff? Number and kind? \_\_\_\_\_  
(library assistant, 1 clerk)
- b) Number of courses, workshops, seminars etc., attended within the past 12 months? (1) \_\_\_\_\_
- c) Number of current book titles? (750) \_\_\_\_\_
- d) How many purchased within past 12 months? (37) \_\_\_\_\_
- e) Number of journals? Medical (75) \_\_\_\_\_  
Nursing (10) \_\_\_\_\_  
Administration (10) \_\_\_\_\_  
Other allied (10) \_\_\_\_\_
- f) Reference sources? Index Medicus? \_\_\_\_\_  
Cumulative Index to Nursing Literature  
or International Nursing Index? \_\_\_\_\_  
Hospital Literature Index? \_\_\_\_\_



g) Audio-visual resources? Catalogues? \_\_\_\_\_  
Equipment for playback? \_\_\_\_\_

13. Category 3

a) Library personnel  
Is there a librarian available? Degree? Yes \_\_\_ No \_\_\_  
Other staff? Number and kind? \_\_\_\_\_  
(Clerk-typist)

b) Number of courses, workshops, seminars etc., attended within the  
past 12 months? (1) \_\_\_\_\_

c) Number of current books? (500) \_\_\_\_\_

d) Number purchased within past 12 months? (25) \_\_\_\_\_

e) Number of journals? Medical (35) \_\_\_\_\_  
Nursing (5) \_\_\_\_\_  
Administration (5) \_\_\_\_\_  
Other allied (5) \_\_\_\_\_

f) Reference sources? Abridged Index Medicus or Index Medicus? \_\_\_\_\_  
Cumulated Index to Nursing Literature or  
International Nursing Index? \_\_\_\_\_  
Hospital Literature Index? \_\_\_\_\_

g) Audio-visual resources? Catalogues? \_\_\_\_\_  
Equipment for playback? \_\_\_\_\_

14. Category 4

a) Library personnel  
Is there a library assistant or technician?  
Diploma? Yes \_\_\_ No \_\_\_

b) Number of courses, workshops, seminars etc., attended in the past 12  
months? (1) \_\_\_\_\_

c) Number of current books? (200) \_\_\_\_\_

d) Number of purchases within past 12 months? (10) \_\_\_\_\_

e) Number of journals? Medical (20) \_\_\_\_\_  
Nursing (3) \_\_\_\_\_  
Administration (3) \_\_\_\_\_  
Other allied (3) \_\_\_\_\_

f) Reference sources? Abridged Index Medicus? \_\_\_\_\_  
Cumulated Index to Nursing Literature or  
International Nursing Index? \_\_\_\_\_  
Hospital Literature Index? \_\_\_\_\_

g) Audio-visual resources? Catalogues? \_\_\_\_\_  
Equipment for playback? \_\_\_\_\_

15. Category 5

- a) Library personnel  
Is there a part-time assistant? (minimum of 15 hours per week) Yes \_\_\_ No \_\_\_
- b) Number of courses, workshops, seminars etc., attended in the past 12 months? (1) \_\_\_\_\_
- c) Number of current books? (50) \_\_\_\_\_
- d) How many were purchased in the past 12 months? (3) \_\_\_\_\_
- e) Number of journals? Medical (15) \_\_\_\_\_  
Nursing (3) \_\_\_\_\_  
Administration (2) \_\_\_\_\_  
Other allied (2) \_\_\_\_\_
- f) Reference sources? Abridged Index Medicus? \_\_\_\_\_  
Cumulated Index to Nursing Literature or  
International Nursing Index? \_\_\_\_\_  
Hospital Literature Index? \_\_\_\_\_
- g) Audio-visual resources? Catalogues? \_\_\_\_\_  
Equipment for playback? \_\_\_\_\_

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These 5 categories of hospitals were established for use in the Canadian Standards for Hospital Libraries, and are roughly based on the ACBLF\* standards.

The categories have the following characteristics:

Category 1:

- a) The hospital is affiliated with a Faculty of Medicine of a University.
- b) It is accredited for internship and residency in various specialties.
- c) It maintains research projects.
- d) It has a medical staff of at least 200 physicians, residents and interns, and appropriate supporting staff.

Category 2:

- a) The hospital has two of the characteristics a, b, or c, of Category 1.
- b) It has a medical staff of at least 100 persons, and appropriate supporting staff.

Category 3:

- a) The hospital does not qualify for Category 1 or 2, but has 300-499 beds.

Category 4:

- a) The hospital does not qualify for Categories 1, 2, or 3, but has 100-299 beds

Category 5:

- a) The hospital does not qualify for Categories 1, 2, 3 or 4, and has less than 100 beds.

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\*Association Canadienne des Bibliothecaires de la Langue Francaise.

CHLA/ABSC: 2ND ANNUAL MEETING-

TODAY'S TRENDS IN THE HEALTH FIELD

A program of interest to all workers in health libraries has been planned for the second annual meeting in Edmonton of the Canadian Health Libraries Association/ Association des Bibliothèques de la Santé du Canada. In addition to some interesting local speakers the program promises a business meeting full of lively ideas and livelier discussion.

Time: June 16, 1978, 9:00 a.m. - 4:00 p.m.  
Place: Drayton-Turner Valley Room  
Edmonton Plaza Hotel

PROGRAM

- |             |   |
|-------------|---|
| 9:00-9:30   | Welcome and introduction of the executive   |
| 9:30-10:30  | Dr. T. Shnitka, Department of Pathology, University of Alberta. Trends in Journal Literature Based on New Medical Developments.   |
| 10:30-11:00 | Coffee.   |
| 11:00-12:00 | Second annual business meeting conducted by Mrs. M. A. Flower.  |
| 12:00-1:30  | Lunch   |
| 1:30-2:30   | Miss K. Dier, Faculty of Nursing, University of Alberta. The Nurse Practitioner, New Concepts in Health Care Delivery.  |
| 1:30-2:30   | A mini-workshop on reference services in health libraries. This workshop is geared to persons working in small hospital libraries and will be a concurrent session with Miss K. Dier's presentation. Location: The Director Room, Edmonton Plaza Hotel. |
| 2:30-3:00   | Coffee.   |
| 3:00-3:30   | Report from the Health Science Resource Centre, Canada Institute for Scientific and Technical Info.   |
| 3:30-4:00   | Report from the Librarian, Department of National Health and Welfare.   |
| 4:15-6:00   | An informal social gathering. Location to be announced.   |

Add to your continuing education and meet others working in the health library field. Support the CHLA/ABSC at Edmonton, June 16th!

SEE HANDY TEAR-OUT REGISTRATION FORM AT THE BACK OF THIS ISSUE!

## FUTURE MEETING DATES

June 10 - 15, 1978	Medical Library Association, Annual Meeting, Palmer House, Chicago, Illinois.
June 11 - 15, 1978	Special Libraries Association, Annual Conference, Radisson Muehlebach Hotel Kansas City, Mo.
June 13, 1978	Canadian Group of the Medical Library Association. Breakfast meeting from 0700-0900 hours. Mrs. M. A. Flower, Chairman, presiding. Palmer House, Chicago. Details to be announced.
June 16, 1978	Canadian Health Library Association/ Association des Bibliothèques de la Santé du Canada, 2nd Annual Meeting, Edmonton, Alberta.
September, 1980	4th International Congress on Medical Librarianship, Yugoslavia.

## CLA CONFERENCE 1978

Edmonton, Alberta - June 15 - 20, 1978

Theme: "Strategies for Change: Developing Support for Growth"

For the first time CLA is hosting an Association-wide conference, with sessions open to all members regardless of division affiliation.

Among the speakers at the Plenary Sessions will be Herbert S. White, Director, Research Center for Library and Information Science, Indiana University, who will deal with Management, and Paul Audley, who serves with the Department of the Secretary of State as a consultant on publishing policy who will speak on Publicity and Outreach.

As well as the usual division-sponsored workshops and publisher/suppliers displays, two special features of this year's conference will be the "Corridor of 1001 Ideas" a swap shop of materials and services to enhance and promote services, and the "Library Marketplace," a consultants' forum for experts from all fields of library service who will share their experience with individual members on request and at no fee.

The Local Arrangements Committee, chaired by Rod Banks of the University of Alberta Library, has provided for your enjoyment with a Klondike Breakfast, Pub Night, Casino, Banquet and dance, Inaugural Luncheon featuring Ukrainian food and entertainment, as well as local bus tours and hikes for the exercise-conscious. In addition, special performances of Shelagh Delaney's "A Taste of Honey" will be featured nightly at Edmonton's magnificent new Citadel Theatre, and a film series with librarians as principal characters will also take place

in the Citadel complex.

The registration booklet with detailed information about all conference matters is now in process and you can be assured of a warm welcome from your Edmonton colleagues.

#### CANCER INFORMATION NEWS FROM B. C.

David Noble, Librarian at CCABC, reports that the Cancer Control Agency of B. C. Library will soon be receiving its own MEDLINE code because of their heavy use of the MEDLARS Files. Prior to this they shared a code with B. C. Medical Library Service. This will bring the number of MEDLINE centres in B. C. to five.\*

Of greater interest, a Patient Information Library for cancer patients and their families has been in operation at CCABC for six months. The Cancer Control Agency of B. C. Library from its Patient Information Library provides pamphlets, books and journal articles relating to cancer for patients and families upon request. The Library's information service is also made available to outpatients, in-patients and their families.

A list of the material in the Patient Information Library is available upon request.

\*Also under way on Vancouver Island are discussions--more like loud whispers--for installing a second MEDLINE terminal. The first has been operational at University of Victoria, McPherson Library since last year.

Donna Signori  
Collections Librarian  
University of Victoria

#### WORKSHOP ON AGING, GERONTOLOGY, AND GERIATRICS

The University of Calgary sponsored a one-day workshop, February 8th, on aging, gerontology and geriatrics. In promoting this gathering, President W. A. Cochrane was primarily concerned with the role of the University of Calgary. In the University's provision of expertise and programs which would most benefit the elderly, of ensuring awareness within the University and the community of what was being done, or should be done in this area.

The Ad Hoc Committee chaired by Dr. W. L. Zwerman of the Sociology Department was able to bring together a varied group of concerned participants. More than twelve of the University faculties were represented, as well as librarians. These, along with provincial, municipal officials and senior citizen group representatives, provided lively and sometimes controversial input at the morning and afternoon working sessions.

Dr. D. E. Berghofer, Assistant Deputy Minister of the Alberta Department of Advanced Education and Manpower, Program Services Division, spoke of the resources and funds available to senior citizens from the government. The government, he said, looked to the University to conduct research, to provide leadership and

train students preferably without undue narrow specialization. His main concern was with the segmentation of responsibilities within a technological rather than a humane society.

Professor A. E. D. Schonfield, of the Psychology Department and an internationally recognized author on the subject of aging, spoke of the teaching role of the university. He questioned the qualifications of those teaching gerontology, and the proliferation of courses available on this continent on this 'in' subject such that the branches appeared before the trunk.

Dr. W. R. N. Blair, Associate Vice-President (Academic) outlined the research presently underway at the University and what assistance was available for further research. David L. G. Yule, of Continuing Education, reviewed the University programs available not only to the over-65's but also pre-retirement programs for those 30 years and over. With this background the first set of working groups went into voluble sessions to consider the current status of programs and activities in the area of aging.

The situation was viewed from the inside and outside, along with the status of external programs as they related to the University and its potentials, and the relations between the activities of the University of Calgary and those in the larger community. Particular reference was made to the work of the unique Kerby Centre, a senior citizen's information and housing group, with which the University is involved.

At the afternoon session the government and community groups set the stage for the second set of working groups. Ms. Mary Engelman, Director, Senior Citizens Bureau, Alberta Department of Social Services and Community Health reviewed the objectives and function of the Bureau. She commented on its advisory role to five provincial departments in matters concerning the over-65's. The Bureau supplies staff, and together with the Senior Citizens Council, whose members represent some 27 community organizations, endeavour to establish priorities and co-ordinate programs and other assistance as may be required by the elderly in Alberta.

Ms. Hazel McDonald, President of the Alberta Council on Aging, urged the importance of consulting with and obtaining the participation of senior citizens in all matters affecting them. Help, she said, was needed by custodians as well as by the elderly. Senior citizens needed control of their own lives for the maintenance of self-respect and dignity. She concluded with the remark that it is the senior citizens who have the Ph.D's in living.

Mr. Sid Grimsby, President of the Calgary Council on Aging and member of the Central Council of Calgary at Kerby Centre, spoke of the work of his group in ensuring that the needs of the elderly are publicized and brought to the attention of authorities for action. Once again, objections were voiced about the negative images held of the elderly, and to the warehousing of the aged. Health care designed to restore independence, choice of living arrangements, fraternalization with all age groups, and participation within their local community were seen as key factors in preserving the dignity of the elderly and recognizing them as still valuable members of society.

In essence people's attitudes toward aging and the aged need to be changed. Otherwise, as Margaret Mead pointed out in her autobiography 'Blackberry Winter,' "a society that has ceased to care about its older people and cuts them off from meaningful contact, a society that segregates them, is greatly endangered."

After a final wrap-up with reports and comments from the working groups the Honourable MS. Helen Hunley, Minister of the Alberta Department of Social Services and Community Health addressed the gathering. She had anticipated much of the concerns expressed and commented on the useful report just received from the Senior Citizens Advisory Council. She acknowledged the government's role in planning, the need for the elderly person to be consulted, and for more research in the area. To this end, she announced that a feasibility study would be made into the possibility of establishing an Institute of Gerontology, possibly in Calgary.

In conclusion, President Cochrane announced that the University's Ad Hoc Committee would become a Standing Committee on Aging, Gerontology and Geriatrics. Its purpose would be to follow up on the findings of the meeting and to develop resources and research in this vital area.

The workshop was considered a fruitful one. Not only did it bring together an unexpected variety of persons interested and working in the area, but it also made participants more aware of what could be done both individually and co-operatively to make for more fulfilling later years for all, including themselves.

Pamela B. Griffin  
Medical Library  
University of Calgary

#### HAMILTON-WENTWORTH DISTRICT HEALTH LIBRARY NETWORK

Soon after the establishment of a new Medical Faculty at McMaster University, early in 1967, the Librarian of the new School was asked by the Hamilton District Hospital Council (later Health Council) to form a Library Committee, with representation from all health science libraries in the area. These were the terms of reference:

The Library Committee of the Hamilton District Hospital Council consists of single representatives from the member hospitals and the Academy of Medicine, and the Health Sciences Librarian at McMaster University, with the opportunity of inviting further representatives for advice or to join the Committee as the need arises.

The aims of the Committee are to promote library cooperation and establish a system of communication, with the object of giving good library service to medical, nursing, and paramedical personnel.

#### Activities:

1. A questionnaire was designed and a survey of the library facilities in the area was completed and the results tabulated, showing strengths and weaknesses in resources and personnel.

2. A union list of periodicals was completed and distributed by March 1969. Since that time the List has been converted to computer format and reissued several times. This remains one of the most valuable of the achievements of the Committee.
3. Transport and document delivery. A vehicle leaves several times daily from McMaster and calls at all the main institutions. One telephone line at the McMaster Library is dedicated to the service.
4. Regional Coordinator. In September 1968 the Library Committee recommended to the Council the appointment of a regional coordinator for the libraries in the hospitals and similar institutions, such a person being a trained medical librarian working under the direction of the McMaster University Health Sciences Librarian, and stationed at McMaster. In January 1970 a clerk-typist was appointed, and in June 1970 Miss Linda Woodside (now Mrs. Panton) started as the coordinating librarian. Since that time the salaries of the Librarian and her assistant have been paid on a pro-rated basis by the seven main hospitals, and an annual amount for travel has also been allowed. For the rest the University Health Sciences Library absorbs telephone, stationery, office costs as well as supplying the material resources and any further staff support required for the operation. Functions of this unit include advice and consultation with the hospitals on policy, planning and personnel, help with cataloging, reference questions (including MEDLINE searches) and inter-library loans, and the circulation of and help with periodical exchange lists. Workshops have been held on specific topics, like Medical Subject Headings. In-service training is provided both at McMaster and in the individual libraries. Monthly meetings of the committee serve to keep library workers in touch and provide opportunities for discussion of common problems. By now the group includes the Mohawk College of Applied Arts and Technology with its own Health Sciences Library, and its four Nursing Libraries, the Cancer Clinic, the Addiction Research Foundation branch, and the VON unit, as well as all the hospitals and the Academy of Medicine.

In no way does this network offer an alternative to the "primary contact" library. The hospital and other libraries do all the circulation, reference work, purchasing, cataloging which they can possibly do, but the network supplies help beyond the local level. The Union List of periodicals makes it possible also for the constituent libraries to borrow from one another where feasible and there is a considerable traffic to and fro. There is also a combined list of new books kept in card form at the University and member libraries can refer to this by telephone. A few statistics illustrate the extent of the University involvement:

(Averages per annum, calculated over the last five years)

805 books lent from the McMaster library, 3,578 articles sent (24,888p.)  
 437 items borrowed on Inter-library Loan from outside the area.  
 427 reference questions/literature searches attended to.

#### Northwest Ontario

The McMaster Medical School has been involved with the Northwestern Ontario area for some years, and in line with this the Library has tried to help to provide information and communication between libraries and hospitals in the area.



A half-time Library worker at McKellar General Hospital in Thunder Bay has put together a Union List of periodicals on cards, representing the holdings of the four hospitals, and the two schools of nursing, and the biomedical material in Lakehead University Library. She has also been able to visit many of the small hospitals in the outlying areas and given guidance in the organization of the libraries. In this way health professionals can find access to periodicals and articles anywhere in the area before having to obtain them from the Health Sciences Library at McMaster University, saving time and trouble.

Beatrix Robinow  
Health Sciences Librarian  
McMaster University

#### WORKSHOP ON PATENT LITERATURE

An interesting and informative overview of the subject of patents was presented at a one day workshop held in Edmonton recently. Aply organized by two local library science students, Evelyn Piush and Keith McLaughlin, and sponsored by Edmonton branch of CASLIS and the Faculty of Library Science, University of Alberta, the workshop presented a glimpse into the fascinating world of the Bureau of Intellectual Property. The Bureau handles copyright, trade marks, industrial designs and patents. The main emphasis was, of course, on patents; their nature, form, content and their use as a source of technological information. Speakers included Don Campbell of the Canadian Patent Office, Peter Johnson, attorney and patent agent, and Dr. Carl Reich, a Calgary internist, who spoke on behalf of CIPAC, the Copyright Inventions and Patents Association of Canada. Georg Mauerhoff, of Infomart, discussed on-line computer searching of the patent literature, while the subject of manual searching was covered in a videotape from the Barker Engineering Library, M.I.T. The workshop also included a panel discussion on the acquisition and organization of patents and on the problems of service in this area in both public and special library situations. Panel members were Dr. Sheila Bertram, Faculty of Library Science, University of Alberta, Alan Waugh, head of the Science and Technology Division, Calgary Public Library and Barbara Jordan, librarian for Syncrude.

Sylvia Chetner  
Medical Sciences Library  
University of Alberta

#### U.W.O. MARKS CENTENARY

The University of Western Ontario is celebrating its centenary during 1978. To mark the celebration, the University has published a book on the history of its Faculty of Medicine. The book was written by Dr. Murray L. Barr, entitled A Century of Medicine at Western. The ISBN is 0-919534-00-7, with the book priced at \$15.00 per copy. It is available from:

The Book Store  
University Community Centre  
University of Western Ontario  
London, Ontario, N6A 3K7

## BOOK REVIEW

LAMKIN, Coleen C.

Cataloging policies and procedures for the hospital library.  
Revised; 69 pp. Biomedical Library, University of California,  
Los Angeles, 1977. \$2.00 (U.S.)

From out of the hills of Westwood comes this practical manual which should be of interest and assistance to individuals who are responsible for cataloging in the smaller, one-person health libraries. Written for a person with little or no cataloging experience, the book contains chapters on the cataloging process, card sets, sources of cataloging information, catalog card reproduction, labeling, filing and statistics. An appendix supplies ordering information for most of the medical cataloging tools. Although it lacks an index, most things could be located through the table of contents. The book is clearly written with many examples and is published in a format that permits the addition of notes and other supplementary material. I have not seen the earlier edition, and cannot advise as to whether this revision adds significant new material. For two American dollars, it is recommended as a good buy.

Order from: The Biomedical Library  
Center for the Health Sciences  
University of California, Los Angeles  
Los Angeles  
California, 90024

Price: \$2.00 (U.S.)--postage may be extra.

Richard B. Fredericksen  
Health Sciences Librarian  
Memorial University of  
Newfoundland

### POT POURRI - COLLEAGUES, LIBRARIES

Marjorie Cox, Librarian at the Nova Scotia Hospital (Psychiatric) in Dartmouth, reports that her "libraries" have been successfully moved to their new quarters. The windows look out over the harbour. The patients recreational reading library is taking shape although funds are scarce. A new Health Sciences Library Committee has been formed and Mrs. Cox is busy sorting and cataloguing existing materials and organizing new titles.

The Dentistry Library of McGill University reports that it will soon be joining other McGill libraries in adding the 3M "Spartan" Book Detection System. Dentistry Librarian, Jean Fensom, reports that their book losses have grown to an unacceptable level, with the equivalent of half a year's book acquisitions disappearing annually.

Mrs. Babs Flower has accepted the position of Nursing Librarian, Life Sciences Area, McGill University Libraries commencing April 1, 1978. Mrs. Flower obtained her graduate degree in Librarianship from the University of Toronto, and was certified by the Medical Library Association in 1975. She has previously worked as a Librarian with the Ontario Medical Association and the Canadian Arthritis and Rheumatism Society. Her most recent position was that of Information Co-ordinator, the Workshop, School of Nursing Research Unit, McGill University.

Mrs. Flower is presently President of the Canadian Health Libraries Association and Chairman of the Canadian Group of the Medical Library Association.

In Newfoundland, Richard Fredericksen recently visited hospitals in Grand Falls and Gander to advise on ways they might upgrade their library services. The Central Newfoundland Hospital in Grand Falls now has a full-time library technician, Sandra Lanning, who is busily trying to catalog the various hospital collections. Sandra recently spent several days at the Health Sciences Library of Memorial University learning cataloging routines. The Grand Falls hospital recently became affiliated with Memorial's School of Medicine. In Gander's Paton Memorial Hospital, there is presently no one assigned to look after library services, but the Library Committee there plans to upgrade the Library in the near future.

Richard Fredericksen, Health Sciences Librarian, Memorial University of Newfoundland, has been appointed Director, Lister Hill Library of the Health Sciences, University of Alabama in Birmingham and will be assuming his duties there later this summer.

Philippe Lemay, formerly Head of the Health Sciences Resource Centre of CISTI, is now a Specialist Librarian with the Bibliothèque Scientifique of Laval Université.

On February 7, 1978, Alan MacDonald and Barbara Prince visited Prince Edward Island at the invitation of Dr. Marvin Clarke, the Deputy Minister of Health. Jean McKay, recently appointed Library Technician at the Research, Planning and Evaluation Unit Library of the Department of Health, organized a meeting of librarians involved with health information in the Charlottetown area. Alan MacDonald addressed the meeting on the theme of co-operation and maximum utilization of existing resources and emphasized the support services available through the W.K. Kellogg Health Sciences Library. The future direction and organization of the Research, Planning and Evaluation Unit Library was also reviewed. Jean McKay only works part-time at present. Besides the Unit Library she is also responsible for co-ordinating library services within the Department. She finds her time well-filled as there are 12 library locations, which include the Hillsborough Hospital and the Rehabilitation Centre, for which Jean has already produced a union list of serials.

The new Nova Scotia Rehabilitation Centre in Halifax has appointed Christine MacLellan, as part-time Librarian. This new facility is within easy reach of the W.K. Kellogg Health Sciences Library and so the need is for a basic working collection.

In the Halifax area a group consisting of all librarians involved in health care or education for health care has been meeting to discuss mutual problems, and mutual aid for the past 2 years. The meetings have been informal and arranged as soon as sufficient items for discussion were identified. Each meeting has been held at a different hospital. At the last meeting in November it was decided that a more formal structure would be in order. Frank Oram of the Victoria General Hospital was elected President, and Pat Goddard of the W.K. Kellogg Health Sciences Library was elected Secretary. The group has

produced a newsletter (irregular) and the third issue is planned for March 1978.

Donalda Putnam, who has been active in library circles for many years, attended the meeting with the librarians from the W.K. Kellogg Health Sciences Library. She was formerly Librarian at the Prince of Wales College in Charlottetown. Now "retired" she is working part-time organizing a small library at the Prince Edward Island Hospital. She is also on the Planning Committee for the new hospital, the Queen Elizabeth which will replace the two existing general hospitals. Let's hope she will persuade the Committee to provide a good, central location for the new health sciences library!

Many small hospitals in the Maritime area are developing information resources. In February Beverly Smith (Health Records Administrator) and Peggy Owen (Secretary) came in from the Eastern Shore Memorial Hospital (35 beds) in Sheet Harbour, Nova Scotia, for 2 days of orientation into library procedures at the W.K. Kellogg Health Sciences Library and the Halifax Infirmary Library in Halifax.

Ruth Stillman, Librarian at the Institute of Community & Family Psychiatry, Jewish General Hospital, Montreal, is new Anchor Chairman of MMHLA (McGill Medical & Hospital Libraries Association) starting March, 1978.

Isobel Wallace, Librarian at the Moncton Hospital in New Brunswick, expresses the isolation of many hospital librarians in the Maritime area as in a recent letter she wrote: "I have become a member of CHLA and would love to have some communication with other members in the Atlantic area. Anybody out there got any money-making ideas? - I am open to all suggestions (short of my own printing press). I would also appreciate any help members can give on time-saving techniques which could be applied to help out a one-man-band librarian."

Angela Webb is the new part-time Librarian at the Abbie J. Lane Hospital in Halifax. Angela comes to this job from the library of the Coast-Guard College in Cape Breton where she worked for 3 years. She says she is finding a health sciences library "a whole new picture."

Anne Worrell has recently been appointed as Librarian at Camp Hill Hospital in Halifax. This position combines general duties with those of Drug Information Centre Assistant. Anne reports that one of the tasks to be completed is the cataloguing of the book collection.

## JOB MARKET

### SASKATCHEWAN

Reference Librarian, Health Sciences Library (Librarian I or II).

The University of Saskatchewan Library invites applications for the position of Health Sciences Reference Librarian. The individual holding this position will be responsible to the Health Sciences Librarian. Duties will include general reference, user education, computer-assisted bibliographic searching, and selection in specified subject areas. The successful candidate will have a degree from an accredited library school. Public service experience, including on-line bibliographic searching, is desirable. Candidates with a degree in the life sciences will be given preference. Salary and rank will be commensurate

with qualifications and experience. Salary scales are presently under review. Position available: May 1, 1978. Applicants are requested to send curriculum vitae and to arrange for a minimum of three letters of reference (sent directly by the referee) to be received no later than April 15, 1978. Apply to: J. D. Teskey, Assistant to the University Librarian (Administration), Library, University of Saskatchewan, Saskatoon, Saskatchewan, S7N 0W0.





CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

S E C O N D   A N N U A L   M E E T I N G

PRE-REGISTRATION

WHEN:            16 June 1978

WHERE:           Edmonton, Alberta  
                     EDMONTON PLAZA HOTEL

REGISTRATION FEE:   MEMBERS,   \$5.00; NON-MEMBERS, \$7.00

PLEASE RETURN TO:   Phyllis Russell, Medical Sciences Library  
                                 University of Alberta, Edmonton, Alta. T6G 2J8

NAME \_\_\_\_\_

LIBRARY \_\_\_\_\_

CITY \_\_\_\_\_

AMOUNT ENCLOSED \_\_\_\_\_

(S.V.P. make checks payable to the CANADIAN HEALTH LIBRARIES ASSOCIATION)







CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

C H L A S E C O N D A N N U A L M E E T I N G

16 June 1978

Edmonton, Alberta

HOTEL INFORMATION

While the Edmonton Plaza Hotel will be the headquarters site for our annual meeting, there are two additional hotels in its immediate area which are in easy walking distance from the Plaza. The names and addresses for all three hotels are given below. For those attending the CHLA meeting, it is suggested that you write directly to book your reservations. Since these three hotels will be holding their rooms for CLA members, it is suggested that you state you will be attending the CHLA meeting held in conjunction with CLA in order to obtain reservations.

Chateau Lacombe  
101 St. at Bellamy Hill  
Edmonton, Alberta T3J 0T5

Edmonton Plaza  
10135 100 St.  
Edmonton, Alberta  
T5J 0N7

Hotel MacDonald  
100 St. and Jasper Ave.  
Edmonton  
Alberta  
T5J 0N7

The Editor regrets that he is unable to furnish information regarding room rates in time for publication of this issue.





CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

CHLA/ABSC NEWSLETTER

FORM FOR SUBMISSION OF COPY

1. Name of Individual/Library Reporting (give mailing address):

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2. Personnel Appointments, Activities:

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3. Notable Library News, New Programs, Acquisitions, Grants, Buildings, Services:

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4. Workshops, Continuing Education Activities in your area:

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5. Brief Description of Article You are Writing for Future Submission (give estimated completion date):

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---

Full length articles and news items contributed on this form should be submitted to:

Richard B. Fredericksen  
Editor  
CHLA/ABSC Newsletter  
Health Sciences Library  
Health Sciences Centre  
Memorial University of Newfoundland  
St. John's, Newfoundland, A1B 3V6

Deadlines for 1978 copy: Spring issue, March 1; Summer issue, April 27; Fall issue, September 5.



CANADIAN HEALTH LIBRARIES ASSOCIATION

Membership Application

Name.....

Address.....

.....

Postal code.....

I enclose \$15.00 (made payable to Canadian Health Libraries Association)  
as my membership fee for the period ending June 1979.

PLEASE RETURN THIS FORM TO:-

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7

---

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

Formule d'Application

Nom.....

Adresse.....

.....

Code postale.....

J'inclus \$15.00 (payable a Canadian Health Libraries Association) comme  
cotisation pour la periode qui se termine en juin 1979.

ADRESSE DE RETOUR:

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7



# CHLA

# ABSC

# NEWSLETTER



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No. 6

ISSN 0700-5474

SUMMER 1978

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## ADIEU CANADA

I have recently accepted a position that will take me to the United States and since Alabama seems like an unlikely spot from which to edit a Canadian publication, I have resigned as Editor of the CHLA/ABSC Newsletter. This will be my final issue. It has been a lot of fun to be your first editor--also a great challenge and honour. Thanks are due to all of you who contributed news over the past six issues. I am particularly indebted to Alan MacDonald, David Crawford, Babs Flower and our correspondents for their assistance and input during this time. David Crawford will be assuming the duties of Editor, and the Association is fortunate to have him take on this responsibility. Having served as the Chairman of the Editorial Committee for the past year, he is ably suited for the task. His central location, too, should make production and distribution somewhat easier, while French translations should also be less of a problem than they were in Newfoundland. David will be attending the CHLA/ABSC Annual Meeting in Edmonton, where he will, among other things, be presenting my annual report for 1977/78. I am sure he would be glad to talk with any of you about the Newsletter there, should you have any questions or suggestions. News submissions for the next issue should be sent to: David Crawford/ Medical Library/ McGill University/ 3655 Drummond Street/ Montreal, Quebec, H3G 1Y6.

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CANADIAN HEALTH LIBRARIES ASSOCIATION

ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA





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## CHLA/ABSC NEWSLETTER

The CHLA/ABSC Newsletter is published four times a year by the Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Subscriptions are available with membership in CHLA for \$15.00 per year. Correspondence regarding membership and subscriptions should be addressed to: Alan H. MacDonald, Treasurer, CHLA/ABSC, W. K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

The CHLA/ABSC Newsletter is a vehicle for providing increased communications among all Canadian health libraries and librarians, but has a special commitment to reach and assist the smaller, isolated, health library. Feature length articles are accepted describing a wide range of health library topics: organizations, services, networks and consortia, surveys, state-of-the art reviews. Brief, news-length items accepted include: how-we-did-it reports, news about workshops and continuing education opportunities (forthcoming or recently held), job announcements, new publications, news about colleagues and libraries, miscellaneous items. Contributors should consult recent issues for examples of types of material and general style. Bibliographic references should conform to the format used in the Bulletin of the Medical Library Association, whenever possible. Submissions in French or English are welcome, preferably in both languages. Contributions should be addressed to: Mr. David Crawford, Editor, CHLA/ABSC Newsletter, Medical Library, McGill University, 3655 Drummond Street, Montreal, Quebec, H3G 1Y6.

Deadline for the Fall Issue is September 5, 1978.

## CHLA/ABSC NEWSLETTER

Le CHLA/ABSC Newsletter est publié quatre fois par année par la Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Un abonnement à cette publication fait partie de votre cotisation annuelle de 15.00 dollars en tant que membre de l'ABSC. Pour devenir membre et, pour recevoir cette publication il faut écrire à: Alan H. MacDonald, Trésorier, CHLA/ABSC, W. K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

Le but du CHLA/ABSC Newsletter est de rendre la communication entre toutes les bibliothèques Canadiennes de la santé et les bibliothécaires plus grande mais il veut spécialement rejoindre et aider les bibliothèques isolées et de moins d'envergures. Nous acceptons tout article traitant de tous les aspects bibliothéconomiques du domaine de la santé: organisations services reseau et consortium, enquêtes exposés de synthèse. En résumé les articles nouvelles acceptés peuvent comprendre: des résumés sur la façon dont on est arrivé à trouver une solution a un project, nouvelles sur des ateliers et des cours d'éducation permanente (à venir ou passés) postes vacants, nouvelles publications, nouvelles sur des collègues et bibliothèques, et tout autre sujet. Pour les intérêts, le genre d'article et le sujet publié dans les derniers numéros peuvent vous servir d'exemples. Il serait préférable de suivre si possible le format utilisé dans le Bulletin of the Medical Library Association lorsque vous avez des références bibliographiques à citer a la fin de votre article. Des articles Français ou Anglais seront les bienvenus mais il serait souhaitable de les écrire dans les deux langues. Vous devez faire parvenir vos articles à: Mr. David Crawford, Editeur, CHLA/ABSC Newsletter, Medical Library, McGill University, 3655 Drummond Street, Montreal, Quebec, H3G 1Y6.

La date limité pour le prochain numéro est: Septembre 5, 1978.

## FUTURE MEETING DATES

- June 10 - 15, 1978                      Medical Library Association, Annual Meeting, Palmer House, Chicago, Illinois.
- June 11 - 15, 1978                      Special Libraries Association, Annual Conference, Radisson Muehlebach Hotel, Kansas City
- June 13, 1978                              Canadian Group of the Medical Library Association. Breakfast meeting from 0700 - 0900 hours. Mrs. M. A. Flower, Chairman, presiding. Palmer House, Chicago.
- June 13, 1978                              Association of Academic Health Sciences Library Directors. Parlour A, Palmer House, Chicago, 6:30 p.m. In conjunction with the Annual Meeting of the Medical Library Association.
- June 15 - 20, 1978                      Canadian Library Association Annual Meeting. Hotel MacDonald, Edmonton, Alberta.
- June 16, 1978                              Canadian Health Library Association/ Association des Bibliothèques de la Santé du Canada, 2nd Annual Meeting, Four Seasons Hotel Edmonton, Alberta, Details elsewhere in this issue.
- June 20 - July 13, 1978                      Special Courses in Biomedical Bibliography and Biomedical Librarianship sponsored by Graduate School of Library Science, McGill University. More information given elsewhere in this issue.

TODAY'S TRENDS IN THE HEALTH FIELD

A program of interest to all workers in health libraries has been planned for the second annual meeting in Edmonton of the Canadian Health Libraries Association/ Association des Bibliothèques de la Santé du Canada. In addition to some interesting local speakers the program promises a business meeting full of lively ideas and livelier discussion.

Time: June 16, 1978, 9:00 a.m. - 4:00 p.m.  
Place: Northcote Room  
Four Seasons Hotel

PROGRAM

9:00-9:30	Welcome and introduction of the executive
9:30-10:30	Dr. T. Shnitka, Department of Pathology, University of Alberta. Trends in Journal Literature Based on New Medical Developments.
10:30-11:00	Coffee.
11:00-12:00	Second annual business meeting conducted by Mrs. M. A. Flower.
12:00-1:30	Lunch
1:30-2:30	Miss K. Dier, Faculty of Nursing, University of Alberta. The Nurse Practitioner, New Concepts in Health Care Delivery.
1:30-2:30	A mini-workshop on reference services in health libraries. This workshop is geared to persons working in small hospital libraries and will be a concurrent session with Miss K. Dier's presentation. Location: The Director Room, Edmonton Plaza Hotel.
2:30-3:00	Coffee.
3:00-3:30	Report from the Health Science Resource Centre, Canada Institute for Scientific and Technical Info.
3:30-4:00	Report from the Librarian, Department of National Health and Welfare.
4:15-6:00	An informal social gathering. Location to be announced.

Add to your continuing education and meet others working in the health library field. Support the CHLA/ABSC at Edmonton, June 16th!

MEMBERSHIP REPORT

19 May 1978

1976/77 Members: 147 (Non-Renewals - 9)

1977/78 Members: 255

Newfoundland	7
Nova Scotia	24
P.E.I.	1
New Brunswick	7
Quebec	52
Ontario	94
Manitoba	18
Saskatchewan	4
Alberta	19
British Columbia	22
U.S.A.	4
Other	3

1978/79 Members: 110

Renewals: 101

New: 9

Alan H. MacDonald  
Treasurer

ELECTIONS REPORT

1978/79

Ballots distributed: 255  
Ballots received : 144  
Ballots counted : 138  
Ballots spoiled : 6

	A(3)	B(2)	C(1)	Total
**** Bradley, Eileen M., Toronto	17	16	12	95
Wallace, Isabel W., Moncton	7	4	4	33
Oram, Frank, Halifax	7	5	5	36
**** Henwood, Barbara E., Winnipeg	14	11	9	73
Sinclair, Toni, Windsor	5	-	3	18
Fensom, Jean, Montreal	4	7	8	34
Sager, Lorna, Vancouver	6	5	9	37
McFarlane, Linda, Toronto	15	10	5	70
Solomon, Linda, Ottawa	8	8	12	52
Fitzgerald, Dorothy, London	11	13	10	69
**** Lemay, Philippe, Quebec	26	22	17	139
Parkin, Margaret, Ottawa	7	12	7	52
Lacroix, Eve-Marie, Ottawa	4	7	12	38
Patrick, Wendy, Montreal	7	7	6	41
**** Elected/Elves				

Alan H. MacDonald

E. Christine Hayward



## THE PRESIDENT REPORTS

78-04-30

This is a report of probabilities delivered in the off-season from between stools. Everything on the agenda of the CHLA/ABSC is currently in the file marked "pending", and "winter lingering chills the lap of spring." (Goldsmith: The Travellers) It has been a long year--a very long, cold, wintery year. And outside the window tonight it is snowing and blowing again, with the thermometer (S.I. of course!) registering minus 3. Clearly, however, spring must be due, for last night was the night when all of us dutifully set our alarm clocks for 0230, so that we could wake up and set our watches and clocks ahead one hour for Daylight Saving Time. Spring is, at least, one of the surest of our probabilities.

Perhaps, therefore, a rather short note from the President this time will encourage a bit of vernal euphoria. Let us begin with the anecdote about a recent contest. Persons were asked to submit their completion for the phrase "As Canadian as .....", the grand prize, in typically Canadian fashion, to be an all-expense tour for two to someplace outside Canada. The entries came thick and fast: several versions of "...as a maple leaf, ...as maple sugar, ...as a beaver, ...as hockey, etc." But the judges finally selected the following entries as winners:

Fourth prize: "As Canadian as a Royal Commission"

Third Prize: "As Canadian as John Diefenbaker's French"

Second Prize: "As Canadian as seasonally-adjusted unemployment"

The grand prize, best-of-show, was "As Canadian as possible under the circumstances".

That may represent a pretty good philosophy for these days. And in reality the CHLA/ABSC has been moving ahead as well as possible under the circumstances of newness and distance, with a good deal for us to be pleased about, and most of our plans for the year on the edge of fruition. Which brings us to the immediate future.

We are looking forward to the Annual Meeting in Edmonton, and we hope to see a great many more CHLA/ABSC members there from the western half of the country, than we usually meet. We also hope that a good percentage of travellers will join us in the trek from MLA in Chicago to CHLA/ABSC in Edmonton, even though the spring airline schedule has not yet been issued, and the current route seems to go via Robin Hood's Barn.

The meeting will be held in the Four Seasons Hotel on Friday, the 16th of June, from 9 a.m. to 4 p.m. . . . and then some. A good program is being developed under Phyllis Russell's leadership around the topic of Today's Trends in the Health Field. Dynamic speakers from the Edmonton community will inform us about current developments in medicine and in nursing. There will also be a short workshop available on library concepts for the smaller hospitals. And there will be plenty of time left over for the informal exchanges that are the real value of any such gathering. What we must all remember is that today's trend in health sciences libraries in Canada is us. The Canadian Health Libraries Association is the vanguard for the future progress of all kinds of health sciences libraries in Canada, and the

decisions we make at our Annual Meeting this year, and for the next few years in particular, will actually affect the working lives of all of us. So it is important to be there and to give us your views.

What is on the agenda? Our own members will report to us from Ottawa. In addition, a report on the progress of our overtures for affiliation with MLA and CLA; a bulletin on the advancement of at least three local groups toward Chapter status within CHLA/ABSC, as well as the discussion of Association by-laws which will facilitate such a development; an update on the OMA checklist and its approach to hospital library standards, plus an addendum on the activities of librarians in the psychiatric hospitals in Ontario; a report on the developing CANHELP project, which is gaining enthusiastic support from a number of people; and, of course, a regular accounting from committees, the treasury, and the membership drive--which is beginning to approach our first target of 300. The election results of our mailed ballot will be in by then too . . . and perhaps even the name of our new Editor.

For we must remind you that Dick Fredericksen, Health Sciences Librarian at Memorial University, has accepted a post as Director of the Lister Hill Library of the Health Sciences at the University of Alabama in Birmingham. The May issue of the CHLA/ABSC Newsletter will be his last editorial effort for the Canadian community which he has graced so well. We wish him well, but we are sorry to see him go, because we are very much aware that we have a newsletter at all only because of his initiative and persistence. He leaves behind a publication which is well designed for our needs, broadening in scope and increasing in interest. We do admit, however, that a Canadian winter like this last one could persuade almost anyone to yearn to live down south.

Those of you who manage to reach Chicago for the meetings of the Medical Library Association can perhaps help send Dick off with a flair by checking in at the Canadian hospitality night he is organizing. Keep in mind, too, the Canadian Group breakfast at 7:30 a.m. on Tuesday, June 13th, when Canadian members of MLA will gather for news and companionship. We look forward to seeing you in June: Edmonton .... Chicago .... or somewhere along the highroad.

M. A. Flower  
President

#### NOTICE

Addendum 3 to the Index of Canadian Nursing Studies, 1974 cumulation, has just been released and may be purchased at \$1.00 a copy from:

The Canadian Nurses Association  
50 The Driveway  
Ottawa, Ontario  
K2P 1E2

This Index lists studies by Canadian nurses or about nursing in Canada, by author/source and by subject. The last cumulation was in 1974 and there have been addenda for 1975, 1976 and 1977. The complete set, i.e. the 1974 Cumulation and the three addenda, may be purchased for \$8.00 from the same address.

## AVIS

L'Addendum n° 3 du Répertoire des études canadiennes sur les soins infirmiers, récapitulation de 1974, vient d'être publié et se vend \$1 l'exemplaire.

S'adresser à:

L'Association des infirmières et infirmiers du Canada  
50, The Driveway  
Ottawa (Ontario)  
K2P 1E2

Ce répertoire donne une liste, classée par auteur/source et par sujets, des études canadiennes sur les sciences infirmières ou faites par des membres de la profession. La dernière récapitulation date de 1974 et il y a eu des addenda en 1975, 1976 et 1977. Ces quatre documents (édition 1974 et les trois addenda) se vendent \$8 (même adresse que ci-dessus).

## PATIENT CANCER LIBRARY

Requests for lists of patient-related cancer pamphlets and books used by the Cancer Control Agency of B.C., announced in our last issue, should be sent to:

David Noble, Librarian  
Cancer Control Agency of B.C.  
2656 Heather Street  
Vancouver, B.C.  
V5Z 3J3

## UPDATES TO GUIDE

The following items have been received as updates and additions to the Guide to Canadian Health Science Information, Services and Sources booklet which was recently mailed to the CHLA membership:

### Section III. Library and Health Science Organizations

#### Correction:

The French language name of the Canadian Nurses Association has been revised to Canadian Nurses Association/Association des infirmières et infirmiers du Canada (applies to all sections of the Guide where the name appears).

#### Add:

Canadian Health Libraries Association  
President: Mrs. M. A. Flower  
Nursing Library  
McGill University  
3506 University Street  
Montreal, Quebec  
H3A 2A7

Manitoba Health Libraries Association  
President: Ms. Barbara Henwood  
Health Sciences Centre, GH 103  
700 William Avenue  
Winnipeg, Manitoba  
R3E 0Z3

## Section VI. Selection Sources

Add:

Core list of Medical and Nursing Material Suitable for Rural Hospitals in Manitoba. Extension Service, Medical Library, University of Manitoba, 770 Bannatyne Avenue, Winnipeg, Manitoba R3E 0W3

-10 p. \$1.00

Re Canadian Nurses Association Publications:

Canadian Nurse. Monthly. Lists new accessions to the Canadian Nurses' Association library.

Similar listings are covered in our French language journal as follows:

L'infirmière canadienne. Monthly. Lists new accessions to the Canadian Nurses Association library, with emphasis on French language material.

If the publication is made bilingual then the item in respect to Canadian Nurses Association should be similarly covered. The bibliography service tries very hard to find as much material as possible in the French language for listing.

## Section VII. Reference Sources

Changes/Additions as follows:

The Canadian Nurses Association no longer publishes Countdown.

From a historical point of view, Countdown Canadian nursing statistics, Ottawa, Canadian Nurses Association. Annual 1967-1974.

From 1975 to 1978 these statistics were published by Statistics Canada under the title Nursing in Canada.

From 1979 forward selected statistics on nursing will be included, we understand, in a new publication from the Health Manpower Statistics Section with the title The Compendium of Selected Health Manpower Statistics.

The item on the Index of Canadian Nursing Studies should be revised as follows:

Canadian Nurses Association.

Index of Canadian Nursing Studies/Repertoire des etudes  
canadiennes sur les soins infirmiers, 1974 cumulation.  
Annual Addenda 1975-1978; next cumulation 1979.

Section IX. Canadian Health Science Serials

The Alberta Association of Registered Nurses Newsletter, AARN  
Newsletter is not irregular but is monthly. Similarly there are  
journals of the other ten of our eleven provincial/territorial  
member associations as shown below:

<u>Title (All Free)</u>	<u>Available from/Disponible chez</u>
<u>A.A.R.N.. Newsletter</u>	Alberta Association of Registered Nurses 10256 - 112th Street Edmonton, Alberta, T5K 1M6
<u>R.N.A.B.C. News</u>	Registered Nurses' Association of British Columbia 2130 West 12th Avenue Vancouver, British Columbia, V6K 2N3
<u>M.A.R.N. News</u>	Manitoba Association of Registered Nurses 647 Broadway Avenue Winnipeg, Manitoba, R3C 0X2
<u>N.B.A.R.N. News/Circulaire de T.A.I.E.N.B.</u>	New Brunswick Association of Registered Nurses 231 Saunders Street Fredericton, New Brunswick, E3B 1N6
<u>A.R.N.N News Bulletin</u>	Association of Registered Nurses of Newfoundland 67 LeMarchant Road St. John's, Newfoundland, A1C 2G9
<u>N.W.T.R.N.A. News</u>	Northwest Territories Registered Nurses' Association Box 2757 Yellowknife, N.W.T., X0E 1H0
<u>R.N.A.N.S. Bulletin</u>	Registered Nurses' Association of Nova Scotia 6035 Coburg Road Halifax, Nova Scotia, B3H 1Y8
<u>R.N.A.O. News</u>	Registered Nurses' Association of Ontario 33 Price Street Toronto, Ontario, M4W 1Z2

O.N.Q. News and Notes/Notes et  
Nouvelles O.I.I.Q.

Order of Nurses of Quebec  
4200 Dorchester Blvd. West  
Montreal, Quebec, H3Z 1V4

S.R.N.A. News Bulletin

Saskatchewan Registered  
Nurses' Association  
2066 Retallack Street  
Regina, Saskatchewan, S4T 2K2

A.N.P.E.I. Newsletter

Association of Nurses of  
Prince Edward Island  
188 Prince Street  
Charlottetown, P.E.I.

The C.N.A. French language journal should be listed as:

L'infirmiere canadienne. Monthly. \$8.00  
50 The Driveway  
Ottawa, Ontario  
K2P 1E2

Canadian Nutrition Notes--no longer published.

MMA Reports. No longer published. Replaced by montly newsletter Intercom  
Manitoba Medical Association  
201 Kennedy Street  
Winnipeg, Manitoba  
R3C 1S8

University of Manitoba Medical Journal. 3 issues per year plus  
supplements. \$8.00.  
Dr. Marion Ferguson  
Dean's Office  
Faculty of Medicine  
University of Manitoba  
770 Bannatyne Avenue  
Winnipeg, Manitoba  
R3E 0W3

Section X. Canadian Book Dealers:

Wilson & Lafleur  
39 Notre Dame St. West  
Montreal, Quebec  
H2Y 1S5

Section XII. Library Book Binders:

Add: Smith, Irwin & Conley Ltd.  
P. O. Box 456  
50 Lorne Street  
Smiths Falls, Ontario  
K7A 4T4

Section XII: (Cont'd.)

Universal Bindery (Manitoba) Ltd.  
1338 Clifton Street  
Winnipeg  
Manitoba

-will provide catalogue of supplies on request.

MEDLINE

NOUVELLES

La bibliothèque médicale à l'hôpital Royal Victoria, Montréal, est devenue la première bibliothèque d'hôpital au Canada qui offre MEDLINE, le système automatisé qui donne accès à la banque de données d'Index Medicus. Ce projet a été financé par le Postgraduate Board de l'hôpital.

Les négociations ont été faites avec l'Institution canadienne d'information scientifique et technique (ICIST), la liaison officielle entre les bibliothèques canadiennes et la National Library of Medicine à Washington. Sandra Duchow, la bibliothécaire médicale, et Elaine Waddington, la bibliothécaire de la Women's Pavilion Library, sont allées en janvier à l'ICIST à Ottawa suivre un cours d'entraînement.

Le terminal est maintenant installé à la bibliothèque médicale, et le service à usagers a commencé le 1 février. La réponse a été chaleureuse; 20 recherches ont été faites le premier mois, même avant que la publicité officielle soit faite.

MEDLINE

NEWS RELEASE

The Medical Library at the Royal Victoria Hospital, Montreal, has become the first hospital library in Canada to acquire MEDLINE, the automated system giving access to the data base of Index Medicus. The project was made possible by funds contributed through the Postgraduate Board of the hospital.

Arrangements to acquire MEDLINE were made through the Canada Institute for Scientific and Technical Information (CISTI), the official liaison between Canadian libraries and the National Library of Medicine in Washington. Sandra Duchow, the Medical Librarian, and Elaine Waddington, the librarian of the Women's Pavilion Library, recently went to CISTI in Ottawa to attend a three-day training course in search techniques.

The terminal is now installed in the Medical Library. Service started on February 1. The response has been enthusiastic, with 20 searches being done the first month, even before any official publicity was given to the project.

COURSES IN BIOMEDICAL BIBLIOGRAPHY AND  
BIOMEDICAL LIBRARIANSHIP

June 20 - July 13, 1978

The two courses together help prepare students for the accreditation examination of the (U.S.) Medical Library Association; however, either course may be taken independently. (Each course is valued at 3 academic credits).

BIOMEDICAL BIBLIOGRAPHY covers the history and scope of the biomedical sciences; patterns of communication in the health science disciplines; manual and machine-assisted reference services, with special emphasis on and experience with MEDLINE; the role of major national and international institutions in the area of biomedical bibliography.

BIOMEDICAL LIBRARIANSHIP examines different types of health science libraries; medical schools and organizations in health-related fields; the application of modern library techniques to the management of such libraries; special service problems; current trends.

Both courses will be given in English; some discussion will take place in French.

FEES: Biomedical Bibliography: \$57 course fee  
\$30 laboratory fee (computer connect time)  
Biomedical Librarianship: \$57 course fee

Dormitory accommodation is available on a first-register, first-serve basis.

For further information and registration forms, please write or telephone:

Vivian S. Sessions, Director  
Graduate School of Library Science  
McGill University  
3459 McTavish Street  
Montreal, P.Q., H3A 1Y1  
(514) 392-5947

COURS EN BIBLIOGRAPHIE BIOMEDICALE ET EN  
BIBLIOTHECARIAT BIOMEDICAL

20 juin - 13 juillet 1978

Le fait de suivre ces deux cours aide à préparer les étudiants à l'examen d'agrément de l'Association des bibliothèques de médecine des Etats-Unis; il est toutefois possible de suivre ces cours indépendamment l'un de l'autre.



Le cours de BIBLIOGRAPHIE BIOMÉDICALE traite de l'histoire et de l'étendue des sciences biomédicales, des schémas de communication en sciences de la santé, des services bibliographiques manuels et mécaniques (une partie de cours sera consacrée à l'emploi du système MEDLINE) ainsi que du rôle des principales institutions nationales et internationales en fait de bibliographie biomédicale.

Le cours de BIBLIOTHÉCAIRIAT BIOMÉDICAL examine différents types de bibliothèques de sciences de la santé, différents types d'écoles de médecine et d'organismes touchant à la santé; ce cours traite aussi de l'application de bibliotechniques modernes à la gestion de ces bibliothèques, de problèmes de service particuliers et des courants actuels dans ces domaines.

Ces deux cours seront donnés en anglais; certaines discussions pourront avoir lieu en français.

COÛTS:	Bibliographie biomédicale:	\$57 droits de scolarité \$30 frais de laboratoire (duree de connexion de l'ordinateur)
	Bibliothecariat biomédical	\$57 droits de scolarité

Pour obtenir de plus amples renseignements ainsi que des formules d'inscription, veuillez vous adresser ou téléphoner à:

Vivian S. Sessions, directrice  
Ecole supérieure de bibliothéconomie  
Université McGill  
3459 rue McTavish  
Montréal, P.Q.  
H3A 1Y1  
(514) 392-5947

#### SINGLE-DAILY DOSING: A BIBLIOGRAPHY OF RECENT REFERENCES

Single-daily dosing or once-daily administration of drugs has been increasingly reported in the pharmacy-medical journal literature. This is the concept of administering one high dose of a drug instead of multiple smaller doses to a patient each day. It has been found that with certain drugs, single-daily dosing is safe and efficacious and increases patient compliance with drug therapy regimens.

When requested to compile a bibliography on this topic for one of our faculty members, we found that single-daily dosing was a topic that could not be easily searched in the traditional reference sources available in our pharmacy-medical library (e.g. in International Pharmaceutical Abstracts and in Index Medicus). Having explored the possibility of text-word searching of MEDLINE, we eventually found our greatest number of references by text-word searching of Science Citation Index.

We continually updated our bibliography by scanning the new journals received daily in our library and also by scanning the clinical pages of Current Contents, Life Sciences as each new issue was received. We also scanned issues of Inpharma,

a relatively new (1975) drug information source which presents critical abstracts of the drug therapy literature and which is received by air mail each week. Inpharma highlights the latest drug therapy trends, so we found many references to single-daily dosing through this source. Although Inpharma is indexed quarterly, the single-daily dosing concept is not listed which is a disadvantage for retrospective searching of this source.

Our bibliography is presented in the hope that it will be useful to other health librarians asked to find information on once-daily administration of drugs.

### General

Bezchilbnyk, K. Z., and Bredin, S.B. Once-a-day drug therapy. Can. J. Hosp. Pharm. 30: 157-158, Sept.-Oct. 1977.

Thomas, J., and Ausburn, L. Simplification of dosage regimens and patient compliance of drug therapy. Aust. J. Pharm. 58: 685-690, Nov. 1977.

Weber, C. E., Sather, M.R., and Mace, D.J. Improving patient compliance through use of single daily dosages. Hosp. Pharm. 12: 508-510, Oct. 1977.

### Antacids and Absorbents

Smith, D.R., Chang, B.S., and Johnson, C.E. Aluminum hydroxide: Evaluation of two dosage forms and two dosing schedules in reducing intestinal phosphate absorption. Am. J. Hosp. Pharm. 35: 58-61, Jan. 1978.

### Antibiotics

Klastersky, J., Prévost, J.-M., Meunier-Carpentier, F. et al. Comparative trial of single-dose versus twice-daily sisomicin in bacteriuric patients. J. Clin. Pharmacol. 17: 520-528, Aug.-Sept. 1977.

Landes, R.R. Single daily doses of tobramycin in therapy of urinary tract infections. J. Infect. Dis. 134 (suppl.): 142-145, Aug. 1976.

### Anticonvulsants

Buchanan, R.A., Kinkel, A.W., Turner, J.L. et al. Ethosuximide dosage regimens. Clin. Pharmacol. Ther. 19: 143-147, Feb. 1976.

Cocks, D.A., Critchley, E.M.R., Hayward, H.W. et al. Control of epilepsy with a single daily dose of phenytoin sodium. Br. J. Clin. Pharmacol. 2: 449-453, Oct. 1975.

Livingston, S., Pauli, L.L., and Pruce, I. Single or multiple daily doses of anticonvulsant drugs (letter). J. Pediatr. 90: 853-855, May, 1977.

### Antidiarrheals

Heel, R.C., Brogden, R.N., Speight, T.M., et al. Loperamide: A review of its pharmacological properties and therapeutic efficacy in diarrhoea. Drugs 15: 33-52, Jan. 1978.

## Anti-Inflammatory Agents

- Lawless, J.F., and Stubbs, S.S. Comparative efficacy of once-a-day diflorasone diacetate and t.i.d. hydrocortisone in treating eczematous dermatitis. Curr. Ther. Res. 23: 159-165, Feb. 1978.
- Myles, A.B., Schiller, L.F.G., Glass, D. et al. Single daily dose corticosteroid treatment. Ann. Rheum. Dis. 35: 73-76, Feb. 1976.
- Ronn, H.H. Fluocinonide compared with betamethasone in the treatment of eczema and psoriasis. Practitioner 216: 704-706. June 1976.

## Diuretics

- Hunter, K.R., and Underwood, P.N. Evaluation of once-daily versus twice-daily bumetanide in heart failure. Postgrad. Med. J. 51(suppl.6): 91-95, 1975.

## Hypotensive Agents

- Besterman, E. Once-daily atenolol for hypertension (letter). Br. Med. J. 1: 1403, June 5, 1976.
- Buhler, F.R., Lutold, B.E., Kung, M. et al. Once daily dosage  $\beta$ -blockade: Antihypertensive efficacy of slow release oxprenolol as related to renin and age. Aust. N.Z.J. Med. 6 (suppl. 3): 37-43, Aug. 1976.
- Douglas-Jones, A.P., and Cruickshank, J.M. Once-daily dosing with atenolol in patients with mild or moderate hypertension. Br. Med. J. 1: 990-991, Apr. 24, 1976.
- Frithz, G. Initiation of once-daily pindolol treatment (letter). Br. Med. J. 1: 302, Feb. 4, 1978.
- Frithz, G. Pindolol once daily in the treatment of hypertension. Ups. J. Med. Sci. 81: 151-154, 1976.
- Gabriel, R. Control of hypertension with single daily doses of sotalol hydrochloride. Curr. Med. Res. Opin. 4: 739-742, 1976-1977.
- Gordon, R.D. Initial treatment of the young hypertensive: Thiazide diuretic or  $\beta$ -adrenoreceptor-blocking agent in a single daily dose? Clin. Sci. Mol. Med. 51 (suppl. 3): 631S-633S, Dec. 1976
- Hamilton, S., and Kelly, D. A placebo controlled single blind cross over trial to evaluate the antihypertensive activity of indapamide. Irish Med. J. 70: 462-465, Oct. 21, 1977.
- Harris, A.M., Wollard, K.V., and Tweed, J.A. A study of once daily Tenormin (atenolol) in hypertension: Some implications in patient compliance. J. Int. Med. Res. 4(5): 347- , 1976.
- Harry, J.D. and Young, J. The duration of action of atenolol in man. Br. J. Clin. Pharmacol. 4: 387P-388P, June 1977.

## Hypotensive Agents

- Jain, A.K., Ryan, J.R., Vargas, R. et al. Efficacy and acceptability of different dosage schedules of clonidine. Clin. Pharmacol. Ther. 21: 382-387, Apr. 1977.
- Jeffers, T.A., Webster, J., Petrie, J.C. et al. Atenolol once-daily in hypertension. Br. J. Clin. Pharmacol. 4: 523-527, Oct. 1977.
- Lehtonen, A., and Sundquist, H. Comparison of antihypertensive activity of sotalol and metoprolol administered once daily and every other day. Curr. Ther. Res. 23: 131-135, Feb. 1978.
- Marshall, A., and Barritt, D.W. Drug compliance in hypertensive patients (letter). Br. Med. J. 1: 1278-1279, May 14, 1977.
- O'Brien, K.P., and Stephens, E.J.W. Comparison of a slow release formulation of oxoprenolol with conventional oxprenolol in the treatment of hypertension. N.Z. Med. J. 84: 142-144, Aug. 1976.
- Persoff, D. and Mason, E. Drug Compliance in hypertensive patients (letter). Br. Med. J. 2: 125, July 9, 1977.
- Rosenberg, J., John, T.M., Raina, M.K. et al. Can methyl dopa be effectively utilized in a once-per-day dosage regimen? Apothecary 89: 50 July-Aug. 1977.
- Rosenberg, J.M., Raina, M.K., Sangkachand, P. et al. Dosage of methyl dopa. Hosp. Pharm. 12: 593, Dec. 1977.
- Toivonen, S.I., Mattila, S., Tarpila, S. et al. The efficacy of single dose of pindolol in hypertension. Ann. Clin. Res. 9: 93-96, Apr. 1977.
- Tuomilehto, J., Arstila, M., Savilahti, R. et al. Sotalol and a combination of hydrochlorothiazide and spironolactone in the treatment of hypertension with a single daily dose. Curr. Ther. Res. 21: 668-675, May, 1977.
- Weber, J.C.P., Bird, H., Cosh, J. et al. Once daily treatment of mild to moderate hypertension with xipamid: A controlled study. Br. J. Clin. Pharmacol. 4: 283-288, June, 1977.
- West, M.J., Kendall, M.J., Mitchard, M. et al. A comparison of slow release with conventional oxprenolol: Plasma concentrations and clinical effects. Br. J. Clin. Pharmacol. 3: 439-443, June, 1976.
- Westerlund, A., and Hansson, L. Once-daily treatment of hypertension (letter). Br. Med. J. 2: 877, Oct. 9, 1976.
- Wilson, M., Morgan, G., and Morgan, T. Effect on blood pressure of beta-adrenoreceptor-blocking drugs given once daily. Clin. Sci. Mol. Med. 51 (suppl. 3): 527S-528S, Dec. 1976.
- Wilson, M., Morgan, G. and Morgan, T. The effect of blood pressure of  $\beta$ -adrenoreceptor blocking drugs administered once daily and their duration of action when therapy is ceased. Br. J. Clin. Pharmacol. 3: 857-861. Oct. 1976.

## Hypotensive Agents (Cont'd.)

- Wright, J.M., McLeod, P.J., and McCullough, W. Antihypertensive efficacy of single bedtime dose of methyl dopa. Clin. Pharmacol. Ther. 20: 733-737, Dec. 1976.
- Wright, J.M., McLeod, P.J., and Ruedy, J. Antihypertensive efficacy of single daily dose of methyl dopa. Pharmacologist 18: 187, Fall, 1976.
- Yajnik, V.H., Nandi, J.S., Patel, S.C. et al. Penbutolol in hypertension: A pilot study with single daily doses. J. Int. Med. Res. 5 (4): 236-242, 1977.

## Psychotherapeutic Agents

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Alexander Wong  
Elizabeth Foy  
College of Pharmacy Library  
Dalhousie University

## SAGER'S BOOK SERVICE

For one librarian one job is not enough. Lorna Sager, medical librarian at St. Paul's Hospital (Vancouver), is a splendid example of a supporter of libraries and librarians' need. She recently (within the last year and a half) started a

book service because, as she so directly put it, "I felt there was a place for a bookseller who understood the philosophy and needs of libraries, . . . particularly special libraries." Her current enterprise is not without prior related experience for between the years of 1975 and 1976 she managed a large bookstore in the Okanagan.

Sager's Book Service is not limited to the supply of health or medical materials but covers all subject areas and is extended to major customers such as hospitals, colleges, school districts, government departments, etc. One doesn't have to be an institution to order a book, because this Service claims to offer fast and efficient service to individuals as well. Lorna Sager maintains direct liaison with publishers on an international basis, while bank accounts established in the United Kingdom and the United States help to facilitate immediate action on her orders.

Sager's Book Service is a fitting example of the saying "wherever there is a need, there is a job." The service operates from 931 Baycrest Drive, North Vancouver, B.C. V7G 1N7.

Donna Signori (Miss)  
Collections Librarian  
University of Victoria

#### DENTAL DEVELOPMENTS AT DALHOUSIE

Dalhousie University will soon be starting construction of a new Dental building to be completed by 1980. Enrollment in dentistry and dental hygiene will be considerably increased. Since the new building will be adjacent to the W.K. Kellogg Health Sciences Library in the Sir Charles Tupper Medical Building it has been decided to leave the Dental Collection in its present location in the Kellogg Library. This arrangement makes it possible to give more efficient and economic service since it is possible to draw on the collection, services and technical resources of the Kellogg. Of course there will be a need for more seating and audio-visual carrels and for more duplication in the collection to accommodate the increased numbers of students.

This year the Dental Librarian has begun preparing library displays for Continuing Dental Education courses in order to promote Kellogg Library's Regional Loan Service. The recent Prosthodontics Canada 1978 saw Clinicians from each Faculty of Dentistry in Canada as speakers. Each submitted three references which were copied and put on display. Those attending could request photocopies of the articles which were done during the course. This seemed quite popular.

Our Regional Loan Service makes it possible for dentists and hygienists in the Atlantic Provinces to have information searches done and borrow material by mail.

#### THE PRIORY METHOD

#### HUMANIZING CARING INSTITUTIONS

Extended care and geriatric programs have historically been relegated to the bottom rung of the health care field. Without going into great lengths, we can quickly

conclude that the level of care, physically, emotionally, and socially has, and indeed is, still generally far from what it might be. Usually the acute care philosophy, based on a medical model, organizationally and administratively, has been transferred to the extended care hospitals. In this kind of model, meeting social and emotional needs is usually absent and neglected. Doctors prescribe for symptoms; para-medical and disciplines carry out orders. A person's total human psychological needs in this acute care environment receive little priority. The degenerating process created by the omissions and neglects within this sterile, "sick" hospital environment soon lead to depersonalization, loss of identity, dependency, and loss of ego. Patients soon display all the symptoms of senility, confusion, withdrawal, and eventually a form of social and psychological death develops--the patient becomes a "vegetable". The myth that this deterioration is inevitable is finally beginning to founder.

There have been some exciting inroads made in Alberta and elsewhere, in reversing this institutional, structured deterioration of people who can no longer care for themselves. These changes in a few hospitals have come about by staff who are committed to the philosophy of adding "life to years" rather than "years to life". Often, these exciting and restorative approaches are taking place in Alberta in spite of an acute care, institutional, hospital environment. This clearly indicates to me that there is a strong desire and will to deinstitutionalize and humanize extended care facilities.

There has evolved over the past several years an approach to extended care that not only emphasized the personal, psychological, emotional, and physical needs of patients, but has also structured and reorganized its delivery systems so that a rehabilitative, restorative program is possible. This program has grown out of Mrs. Vera McIver's work at the St. Mary's Priory Hospital in Victoria, B.C. and has become known as The Priory Method.

I would see using this approach that is in effect in four different hospitals in Victoria, as a model and guide for what might happen here in Alberta. In essence, the Priory Method is merely the implementation of Henderson's 14 Principles of Nursing Care. In creating a homelike environment and placing the resident first, above all other considerations, good, sound nursing care does become a reality.

The National Film Board has just completed a long film telling the story of the Priory Method. This film, along with a self-explanation kit, will soon be available for distribution. The Faculty of Continuing Education, The University of Calgary has co-produced this film and is actively involved in working with a number of nursing homes and hospitals in introducing this approach to Alberta caring facilities.

As one ninety-four year old resident of one of the Priory Hospitals said, "Before I came here I just wanted to die, now I look forward to everyday in life." This attitude should be prevalent in all extended care facilities--we know it's not, but there are changes on the way.

A. J. Karch  
Division of Continuing  
Education  
University of Calgary



## MCMASTER GOES TO COM

MEDICAT is an extension of the cooperative on-line cataloging system known as UNICAT-TELECAT of the OULCS. Using the NLM data base as well as data already present in the OUCLS base, the Health Sciences Library of McMaster University will be converting its entire catalog to Computer Output Microfiche. The project has been supported by a grant from the Hannah Institute for the History of Medicine and Related Sciences. The final aim will be to have a union list of all materials in the five medical school libraries in Ontario, along with that of the Academy of Medicine Library and the Ontario Department of Health Library.

## TECHNICIAN WORKSHOP OFFERED

The Ontario Association of Library Technicians is holding a workshop at Erindale College in Mississauga May 25 - 28, 1978. Peter Wolters, Head of Information Services of CISTI and Claire Callaghan, Circulation and Reference Library at McMaster's Health Sciences Library will be program participants.

## TORONTO MEDICAL LIBRARIES GROUP MEETS

The Toronto Medical Libraries Group met on Monday evening, May 8, 1978, at the Sciences and Medicine Library of the University of Toronto. Highlights of the meeting included Linda MacFarlane's report on the formation of an Advisory Committee to CISTI's Health Sciences Resource Centre and Shelagh Swanson's report on CHLA and also a proposed union list of serials. L. Gibson summarized results of a survey on working conditions in metropolitan Toronto Health Libraries. M. Morphy explained some of the features of the Medicat system, while P. Avis reported on the OHA-RNAO workshop for health library personnel.

## POT POURRI - COLLEAGUES, LIBRARIES

EVA BORDA, reference librarian at the Health Sciences Library, University of Western Ontario in London, attended the "Teaching Techniques for Medical Librarians" program held at the Francis A. Countway Library of Medicine in Boston on May 1-5, 1978. The program included a series of interrelated consecutive teaching presentations and practice sessions. We hope Eva will share her experiences from this workshop in the next issue of the CHLA Newsletter.

DOROTHY FITZGERALD, Librarian, Canadian Library of Family Medicine in London, has been invited to Richmond, Virginia for June 2, 1978, by the Medical College of Virginia. Dorothy will be advising the College on ways of establishing an information service for researchers in family medicine during her visit. In addition, Dorothy will soon publish a "Suggested Core Library List for Family Medical Centres" in the July, 1978, issue of Canadian Family Physician. This list is an update of the version which last appeared in the July, 1976 issue of Canadian Family Physician.

ERIC J. FREEMAN, Librarian of the Wellcome Institute for the History of Medicine, London, England, carried out an inspection of library resources in the history of medicine on behalf of Associated Medical Services at the Universities of Ottawa, Toronto, Western Ontario, McMaster University and Queen's University during the month of April, 1978.

JUDY HODGSON, formerly OHA Librarian and Research Assistant, is now working for the Metric Conversion Workshop of the Toronto General Hospital. Judy will initially work only at T.G.H. but then will travel around to various hospitals, running the workshop.

EVE-MARIE LACROIX has been appointed Head of the Health Sciences Resource Centre, replacing Philippe Lemay, who recently returned to the Province of Quebec. Ms. Lacroix comes to this position after three years in CISTI's Research and Planning Division. She was previously employed in the Ames Division of Miles Laboratories. In addition to her undergraduate degree, she holds an M.S. in Science Information from the Illinois Institute of Technology.

JOANNE MARSHALL, Reference Librarian with the McMaster Health Sciences Library in Hamilton, Ontario, will be presenting a paper on clinical librarianship related to the patient at the forthcoming MLA meeting in Chicago. Her presentation is scheduled for Wednesday, June 14th, at 0945 hours. Joanne recently attended a symposium on the Clinical Librarian held in Hartford, Connecticut, in early May. In addition, she has recently had a paper accepted for publication in the Bulletin of the Medical Library Association. Entitled "The Clinical Librarian and the Patient,:" it is scheduled for publication in the October, 1978 issue. Joanne recently received a Master of Health Sciences (Health Care Practice) degree in May of 1978. She is the first librarian to graduate from the McMaster program. Information about the program is available from Joanne upon request.

SR. JULIETTE MERCIER has recently retired as Librarian of the Hotel-Dieu d'Arthabaska, in Arthabaska, Quebec.

The ONTARIO MEDICAL ASSOCIATION LIBRARY has issued December, 1977, updates to the three booklists they compile. There is a suggested list of basic books and journals for a community active treatment hospital plus two supplementary lists, one for medical books and journals, and one for health sciences books and journals. The lists are revised biennially and are available through the OMA Library.

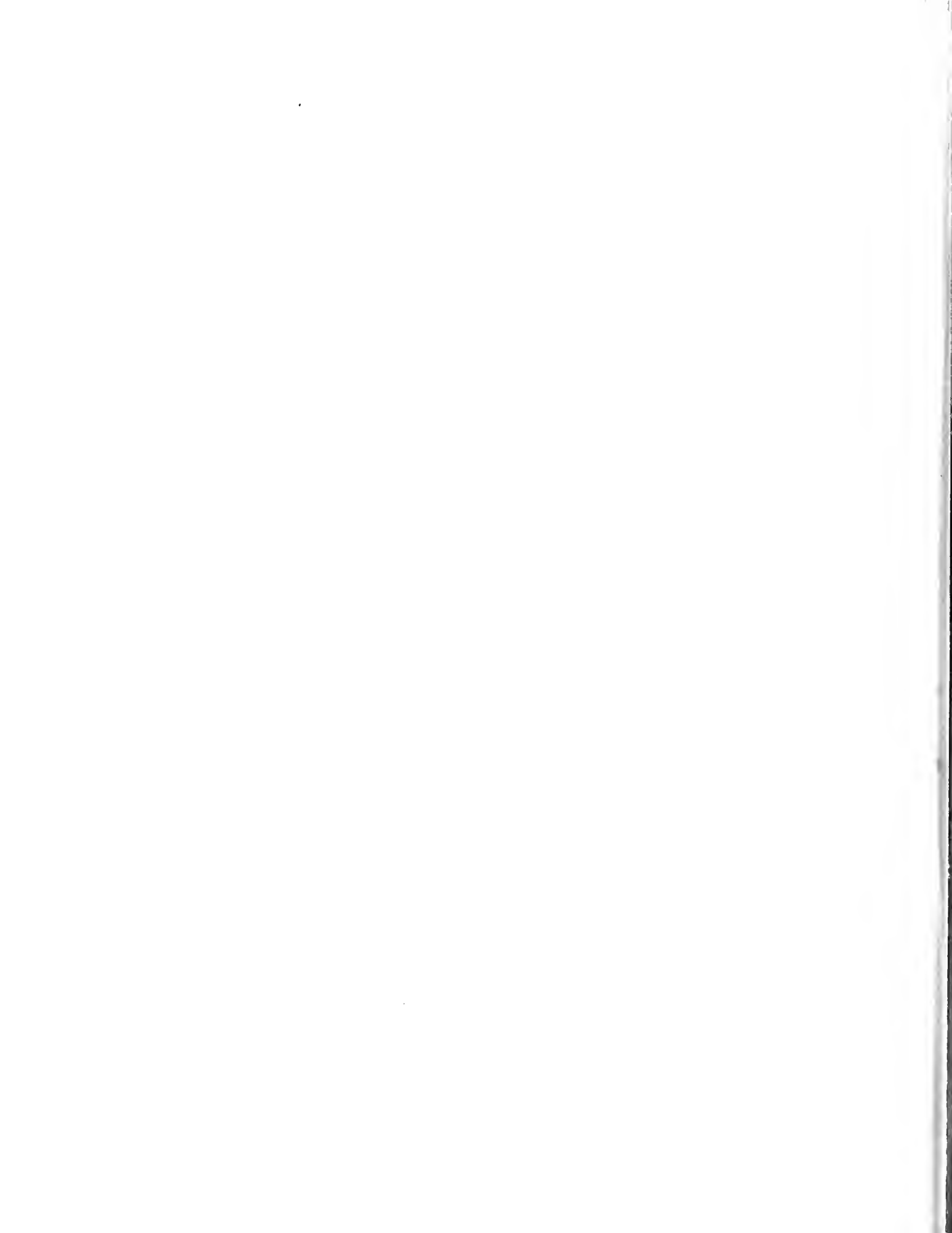
Congrats are due BEATRIX ROBINOW, Librarian of the McMaster Health Sciences Library, on her election to the Board of Directors of the Medical Library Association. Beatrix will commence her three year term of office at the close of this year's Annual Meeting of MLA. Mrs. Robinow is one of the few Canadians to hold such an office in recent years.

MARGIE TAYLOR has accepted the position of manager of library services for the Children's Hospital of Eastern Ontario in Ottawa. She will be assuming her duties in mid-May. Margie was formerly the Health Sciences Education Centre Librarian, of the Mohawk College in Hamilton, Ontario.

## JOB MARKET

### NEWFOUNDLAND

Health Sciences Librarian--Health Sciences Library of Memorial University of Newfoundland. Administers health sciences library serving Schools of Medicine and Nursing and General Hospital. This is a new library facility within the new Health Sciences Centre. The Health Sciences Librarian is responsible to the University Librarian for cooperation and coordination within the University Library system. The Health Sciences Librarian is responsible to the Dean of Medicine for preparation of the budget, planning for effective library services, supervision of a library staff of 21 FTE, provision for province-wide health library services. Qualifications include a degree in librarianship; administrative experience in an academic health library preferred; ability to relate effectively to staff, students and faculty; innovative potential. Salary negotiable and commensurate with past training and experience. Applicants should send their curriculum vitae and the names of at least three referees to: Dr. J. Tomlinson/ Chairman, Health Sciences Librarian Search Committee/ Faculty of Medicine/ Memorial University of Newfoundland/ St. John's, Newfoundland, A1B 3V6. Deadline for applications is June 30, 1978. Appointment available August, 1978.





CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

S E C O N D   A N N U A L   M E E T I N G

PRE-REGISTRATION

WHEN:            16 June 1978

WHERE:           Edmonton, Alberta  
                      FOUR SEASONS HOTEL

REGISTRATION FEE:   MEMBERS,   \$5.00; NON-MEMBERS, \$7.00

PLEASE RETURN TO:   Phyllis Russell, Medical Sciences Library  
                              University of Alberta, Edmonton, Alta. T6G 2J8

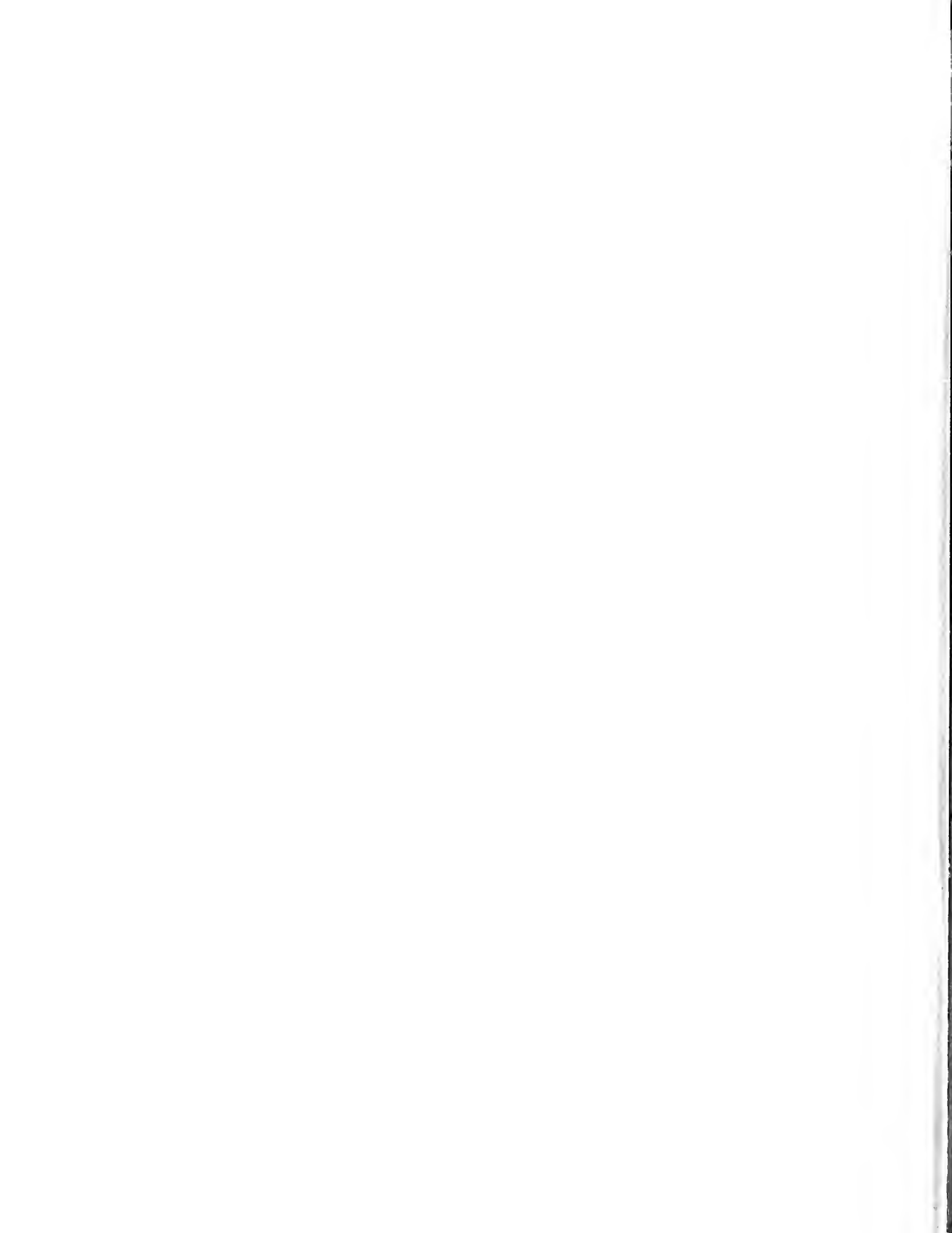
NAME \_\_\_\_\_

LIBRARY \_\_\_\_\_

CITY \_\_\_\_\_

AMOUNT ENCLOSED \_\_\_\_\_

(S.V.P. make checks payable to the CANADIAN HEALTH LIBRARIES ASSOCIATION)





CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

CHLA/ABSC NEWSLETTER

FORM FOR SUBMISSION OF COPY

1. Name of Individual/Library Reporting (give mailing address):

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2. Personnel Appointments, Activities:

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3. Notable Library News, New Programs, Acquisitions, Grants, Buildings, Services:

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4. Workshops, Continuing Education Activities in your area: \_\_\_\_\_

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5. Brief Description of Article You are Writing for Future Submission (give estimated completion date): \_\_\_\_\_

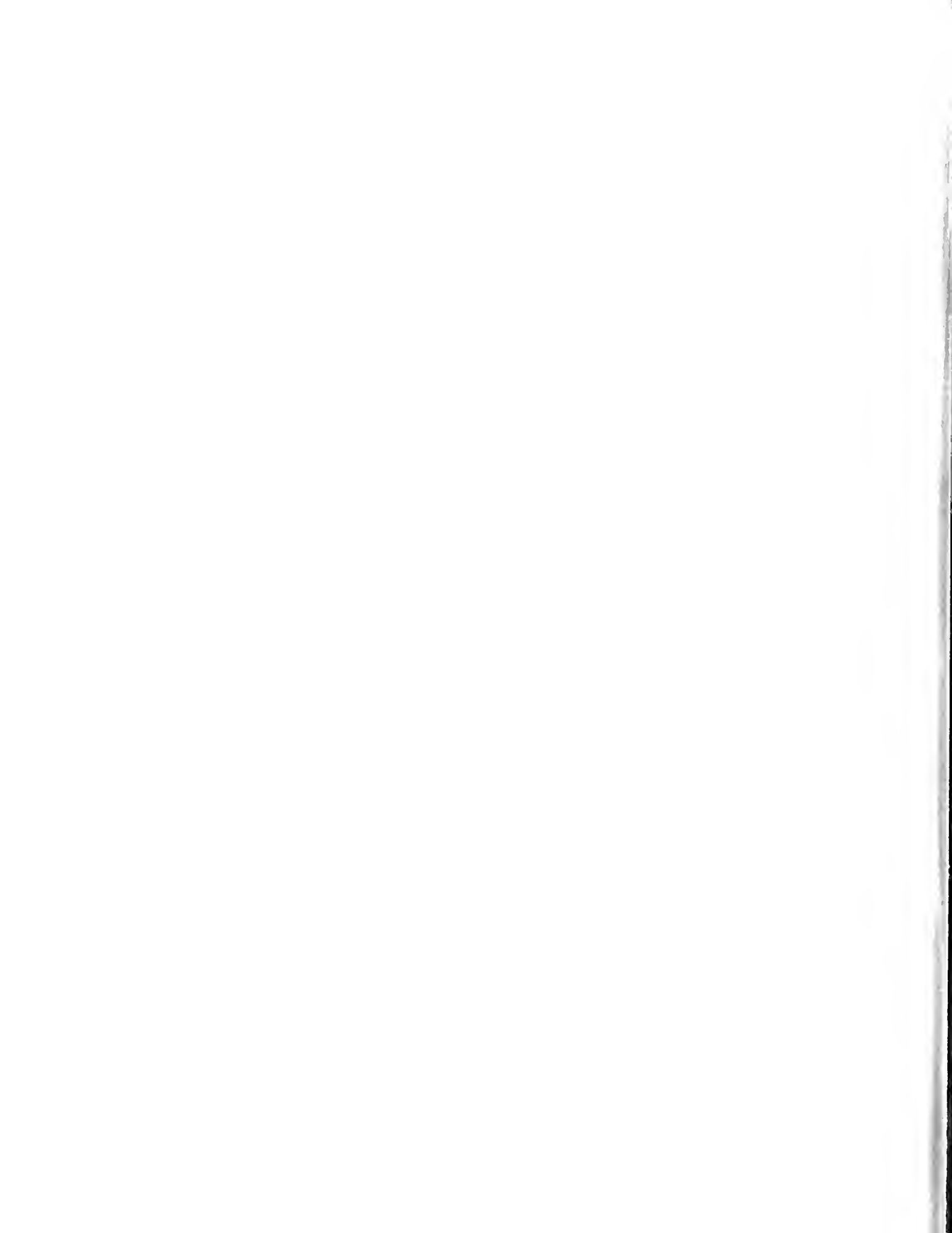
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Full length articles and news items contributed on this form should be submitted to:

David Crawford  
Editor: CHLA/ABSC Newsletter  
Medical Library  
McGill University  
3655 Drummond Street  
Montreal, P.Q. H3G 1Y6

Deadlines for 1978 copy: Spring Issue, March 1; Summer Issue, April 27, Fall issue, September 5.







CANADIAN HEALTH LIBRARIES ASSOCIATION  
ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

C H L A S E C O N D A N N U A L M E E T I N G

16 June 1978

Edmonton, Alberta

HOTEL INFORMATION

While the Four Seasons Hotel will be the headquarters site for our annual meeting, there are two additional hotels in its immediate area which are in easy walking distance from the hotel. The names and addresses for all three hotels are given below. For those attending the CHLA meeting, it is suggested that you write directly to book your reservations. Since these three hotels will be holding their rooms for CLA members, it is suggested that you state you will be attending the CHLA meeting held in conjunction with CLA in order to obtain reservations.

Chateau Lacombe  
101 St. at Bellamy Hill  
Edmonton, Alberta T3J 0T5

Edmonton Plaza  
10135 100 St.  
Edmonton, Alberta  
T5J 0N7

Hotel MacDonald  
100 St. and Jasper Ave.  
Edmonton  
Alberta  
T5J 0N7

The Editor regrets that he is unable to furnish information regarding room rates in time for publication of this issue.



# CHLA

# ABSC

# NEWSLETTER



No. 7

ISSN 0700-5474

Fall 1978

This issue of the Newsletter is the first to be edited outside Newfoundland and comes to you from Montreal. The next and succeeding issues will be edited in Winnipeg as we are happy to announce that Patrick ("P.J.") Fawcett has been appointed editor with effect from issue No. 8.

It has been our pleasure to edit issue No. 7 and this task has been made much easier by the excellent contributions sent in by the Correspondents. The Newsletter is the only contact that many CHLA members have with the organisation and it is our hope that the news and information which follows is both interesting and useful to you.

Contributions to issue No. 8 should reach the Editor before October 28 and should be addressed to P.J. Fawcett, University of Manitoba, Medical Library, 770 Bannatyne Ave. Winnipeg, Manitoba, R3E 0W3.

Cette publication du bulletin est la première qui a été éditée à l'extérieur de Terre-Neuve. En effet, elle vous parvient de Montréal. Les publications suivant celle-ci seront désormais éditées à Winnipeg par M. Patrick ("P.J.") Fawcett, dont il nous fait plaisir d'annoncer la nomination au poste d'éditeur. Il exercera ce poste dès la 8e publication.

Ce fut un plaisir d'éditer la 7e publication du bulletin et notre tâche a été facilitée grâce aux nombreuses contributions envoyées par nos correspondents. Ce bulletin est le seul contact que plusieurs membres de l'ABSC ont avec notre organisation. Nous souhaitons que les nouvelles et les informations suivantes sauront vous intéresser et vous être utiles.

Les contributions à la 8e publication devraient être envoyées à l'éditeur avant le 28 octobre prochain et adressées à M. P. J. Fawcett, University of Manitoba, Medical Library, 770 Bannatyne Ave. Winnipeg, Manitoba, R3E 0W3.

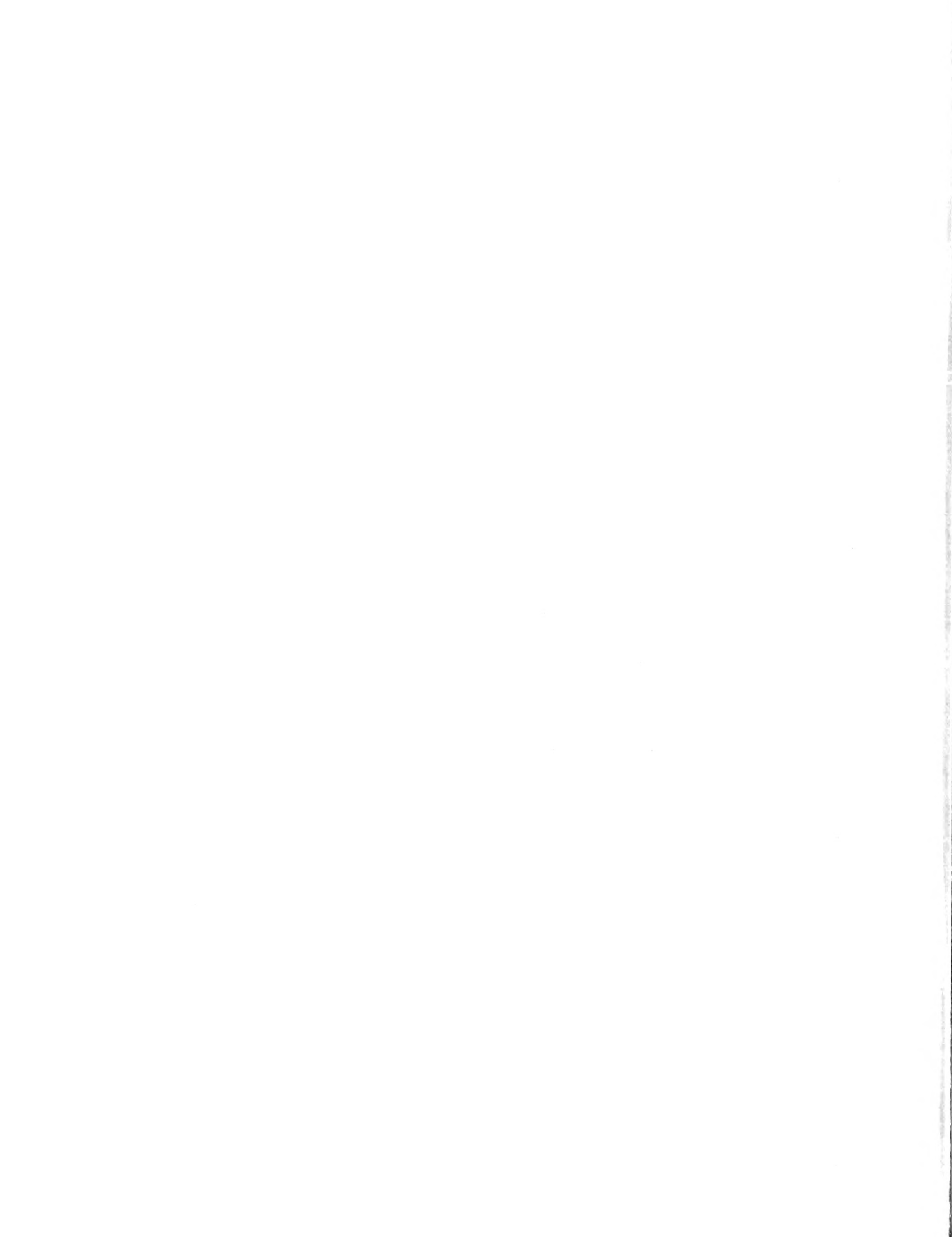
David S. Crawford/Hanna Waluzyniec  
Editeurs



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## CHLA/ABSC NEWSLETTER

The CHLA/ABSC Newsletter is published four times a year by the Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Subscriptions are available with membership in CHLA for \$15.00 per year. Correspondence regarding membership and subscriptions should be addressed to: Alan H. MacDonald, Treasurer, CHLA/ABSC, W.K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

The CHLA/ABSC Newsletter is a vehicle for providing increased communications among all Canadian health libraries and librarians, but has a special commitment to reach and assist the smaller, isolated, health library. Feature length articles are accepted describing a wide range of health library topics: organizations, services, networks and consortia, surveys, state-of-the art reviews. Brief, news-length items accepted include: how-we-did-it reports, news about workshops and continuing education opportunities (forthcoming or recently held), job announcements, new publications, news about colleagues and libraries, miscellaneous items. Contributors should consult recent issues for examples of types of material and general style. Bibliographic references should conform to the format used in the Bulletin of the Medical Library Association, whenever possible. Submissions in French or English are welcome, preferably in both languages. Contributions should be addressed to: Patrick Fawcett, Editor, CHLA/ABSC Newsletter, Medical Library, University of Manitoba, 770 Bannatyne Avenue, Winnipeg, Manitoba R3E 1E5.

Deadline for the next issue is October 28, 1978.

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## CHLA/ABSC NEWSLETTER

Le CHLA/ABSC Newsletter est publié quatre fois par année par la Canadian Health Libraries Association/Association des Bibliothèques de la Santé du Canada. Un abonnement à cette publication fait partie de votre cotisation annuelle de 15.00 dollars en tant que membre de l'ABSC. Pour devenir membre et, pour recevoir cette publication il faut écrire à: Alan H. MacDonald, Trésorier, CHLA/ABSC, W.K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia, B3H 4H7.

Le but du CHLA/ABSC Newsletter est de rendre la communication entre toutes les bibliothèques Canadiennes de la santé et les bibliothécaires plus grande mais il veut spécialement rejoindre et aider les bibliothèques isolées et de moins d'envergures. Nous acceptons tout article traitant de tous les aspects bibliothéconomiques du domaine de la santé: organisations services reseau et consortium, enquêtes exposés de synthèse. En résumé les articles nouvelles acceptés peuvent comprendre: des résumés sur la façon dont on est arrivé à trouver une solution a un projet, nouvelles sur des ateliers et des cours d'éducation permanente (à venir ou passés) postes vacants, nouvelles publications, nouvelles sur des collègues et bibliothèques, et tout autre sujet. Pour les intérêts, le genre d'article et le sujet publié dans les derniers numéros peuvent vous servir d'exemples. Il serait préférable de suivre si possible le format utilisé dans le Bulletin of the Medical Library Association lorsque vous avez des références bibliographiques à citer a la fin de votre article. Des articles Français ou Anglais seront les bienvenus mais il serait souhaitable de les écrire dans les deux langues. Vous devez faire parvenir vos articles à: Patrick Fawcett, Editeur, CHLA/ABSC Newsletter, Medical Library, University of Manitoba, 770 Bannatyne Avenue, Winnipeg, Manitoba, R3E 1E5.

La date limité pour le prochain numéro est: Octobre 28, 1978.





FORTHCOMING MEETINGS



- September 22 - 25, 1978      Annual meeting of the Library Association, Medical Health and Welfare Libraries Group. Nottingham, England
- September 27 - 29, 1978      North Atlantic Health Science Libraries. 21st Annual Meeting. Wakefield, Mass. Information from NAHSL c/o Francis A. Countway Library of Medicine, 10 Shattuck St. Boston, Mass. 02115
- October 15 - 16, 1978      Association of Canadian Medical Colleges/Association des facultes de Medecine du Canada. Special Resource Committee on Medical School Libraries/Comite Consultatif des Bibliotheques des Facultes de Medecine Toronto, Ontario
- October 19 - 21, 1978      Upstate New York and Ontario Regional Group of the MLA meeting. Albany, New York. Information from Dorothy Bross, New York State Department of Health Library. Empire State Plaza. New York, 12201
- October 25 - 28, 1978      ASTED Annual Meeting. Quebec
- June 2- 7, 1979      Medical Library Association, Honolulu Hawaii
- June 8 - 13, 1979      Special Libraries Association, Honolulu, Hawaii
- June 1979      Canadian Library Association and Canadian Health Libraries Association/ Association des bibliotheques de la Sante du Canada, Ottawa, Ontario

MEMBERSHIP REPORT

Members at 31 May 1978	Renewals to 31 Aug 1978	New Members to 31 Aug 1978	Non-Renewals at 31 Aug 1978
Nfld. 7	4	0	2
N.S. 22	18	1	4
N.B. 7	5	1	2
P.E.I. 1	1	0	0
Que. 54	40	4	11
Ont. 93	71	13	23
Man. 18	16	1	2
Sask. 4	4	0	0
Alta. 20	18	1	3
B.C. 22	22	2	0
U.S.A. 4	5	1	0
Other 3	<u>3</u>	<u>0</u>	<u>1</u>
	<u>207</u>	<u>24</u>	<u>48</u>

231

MEMBERSHIP - 255

Renewal notices are enclosed for those who have not yet renewed. This will be the last issue of the Newsletter to be sent to non-renewing members.

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Receipts will be sent out in October to all 1978/79 members of record.

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FINANCIAL STATEMENTS

1 June 1977 - 31 May 1978

Balance on hand 31 May 1977 \$1234.47

REVENUE	Re: 1976/77 Memberships	\$ 15.50
	Re: 1977/78 Memberships	3418.84
	Re: 1978/79 Memberships	2053.93
	Interest	62.28
	Conference 1977	277.00
	Conference 1978	124.00

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TOTAL \$5951.55

EXPENDITURES	Publications	1499.73
	Association Business	327.55
	Membership	334.14
	Elections	132.15
	Conference 1977	91.57
	Memberships	30.00

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\$2415.14

Balance on hand 31 May 1978 \$4770.88

REVENUE	Re: 1978/79	1396.28
	Re: 1979/80	30.00
	Conference 1978	86.57
	Donation	50.00

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\$1562.85

EXPENDITURES	Travel Assistance	300.00
	Printing	27.87
	Conference 1978	192.68
	Memberships	55.00

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\$ 575.55

Balance on hand 31 August 1978 \$5758.18

S'il y a un conseil précieux que nous pouvons offrir aux membres de l'ABSC qui n'ont pas pu se rendre à la deuxième assemblée annuelle tenue à Edmonton, c'est bien celui-ci: "N'essayez jamais de vous rendre à Edmonton à partir de Chicago!". Certains s'y sont rendus à partir de Minneapolis, d'autre à partir de Toronto. Mais, de toute façon, c'est toujours la même histoire: attente aux escales, valises perdues, les déclarations routinières aux douanes. Tout cela fait parti du prestige de voyager, c'est à la fois la source d'anecdotes spirituelles et de revenu de certains écrivains à succès qui s'achètent une île déserte où ils se rendront pour finir leurs jours.

### Tendances

La deuxième assemblée annuelle de l'ABSC s'est tenue, tel que prévu, à la salle Northcote du nouvel hôtel Four Seasons à Edmonton. Le sujet était des plus appropriés: Les nouvelles tendances dans le domaine de la santé. Les conférenciers et les rapporteurs de Santé et Bien-être Social et de l'ICIST se sont adressés aux membres dans cette veine. Le premier conférencier, le docteur Theodor Shnitka, est président du comité de la bibliothèque de la faculté de médecine de l'université de l'Alberta. Il est venu nous parler de son passe-temps favori et comme c'est toujours le cas dans les exposés de ce genre, sa connaissance de la publication de revues professionnelles dans le domaine de la médecine est absolument phénoménale. Les courbes de publications qu'il nous a exposées, grâce à une série de diapositives des plus intéressantes, n'ont laissé aucun doute dans l'esprit de chacun que la tendance actuelle se répétera indéfiniment, malgré la baisse constante de fonds accordés aux bibliothèques pour l'achat de revues professionnelles. En effet, les nouvelles revues ne pourront pas cesser d'être publiées, à la lumière des nouvelles découvertes médicales, en dépit de la situation économique actuelle, car en regroupant le nombre de périodiques publiés, on augmentera par le fait même la qualité des travaux qu'on y retrouve. C'est l'expression de la communauté scientifique, qui ne cesse de s'évaluer et de répandre ses nouvelles.

Le deuxième conférencier était également membre du personnel de l'Université d'Alberta. En tant que professeur adjoint de la faculté des infirmières, Kay Dier a passé les cinq dernières années dans un des nouveaux programmes offerts dans le domaine. Il s'agit du programme d'infirmières cliniciennes de l'Université de l'Alberta. Elle nous a décrit le développement de ce concept et le besoin pressant d'infirmières cliniciennes autonomes dans le Grand Nord canadien, où les soins médicaux sont rares, et dans les pays tels la Thailand, où les soins médicaux sont rares, mais pour des raisons diverses. Elle nous a décrit les problèmes légaux et fiscaux qui ont empêchés l'acceptation des infirmières cliniciennes au Canada et qui ont encouragés les collègues du domaine médical, qui doutent peut-être vraiment de l'autonomie des infirmières, à les rejeter parce que leur statut légal est ambigu dans plusieurs juridictions et parce que leur salaire en tant que personnel paramédical n'est pas couvert directement par le régime d'assurance maladie.

Deux de nos membres à Ottawa nous ont exposé les tendances actuelles dans le domaine des bibliothèques des sciences de la santé. Martha Stone, Chef de la bibliothèque du Ministère de Santé et Bien-Être Social Canada nous a parlé des changements entrepris et projetés dans sa bibliothèque. Certains de ces changements ont été institués en réponse aux coupures de budget et de personnel qui ont suivis les mesures que le Premier ministre Trudeau a annoncé lors de son discours diffusé en juillet dernier. On a par la suite effectué une vérification interne, entraînant tout d'abord une définition du rôle de la bibliothèque face au Ministère et à la communauté des sciences de la santé, et ensuite au développement d'une politique sur laquelle on baserait l'organisation rationnelle de l'entendue de la collection.

Martha nous a également expliqué que la bibliothèque est en train de mettre sur pied une série de lignes de conduites voulant qu'on impose désormais des frais pour les services rendus. Ce concept était jusqu'à présent inacceptable, car les bibliothèques gouvernementales sont financées par les taxes. Mais l'austérité économique actuelle tend à à changer cette façon de penser et il semble que le Conseil du Trésor acceptera cette façon de procéder étant donné les circonstances.

Une autre entreprise qui répond à une lacune dans le service, est la mise sur pied d'un catalogue des publications du Ministre de la Santé et du Bien-Être Social Canada. Ce catalogue sera en circulation dès la fin de l'année 1978 et comprendra une liste de tous les titres des publications qui pourront être dénichées, sur une période d'environ 60 ans, soit de 1917 à 1978.

Jusqu'à date, les tentatives d'offre d'informations de toutes sortes entreprises par un gouvernement fédéral monolithique et dirigées à un public de plus en plus conscient de ses droits en tant que consommateur, n'ont guère été un succès éclatant. Il est toutefois survenu un événement à Ottawa qui pourrait changer les choses. En effet, les directeurs des bibliothèques ont formé un Conseil des bibliothèques fédérales qui est en train d'établir une série de comités permanents pour traiter des responsabilités fédérales envers les usagers de l'extérieur. C'est peut-être ce qu'il nous faut pour combler enfin ce vide qu'est le manque d'information provenant d'Ottawa.

L'autre conférencier d'Ottawa était Eve-Marie Lacroix, Chef, Centre bibliographique des sciences de la santé à l'ICIST. Elle a écrit un article, qui paraît dans ce bulletin, sur les relations qu'aura le centre bibliographique avec les autres organismes des sciences de la santé à travers le Canada. Nous recevrons des rapports du comité consultatif, composé en partie par des délégués de l'ABSC, qui parraine ces nouvelles relations, de la part de Frances Groen, présidente du comité.

## Secteurs

L'ordre du jour de l'Association a été lu par le groupe assemblé à Edmonton et l'atmosphère était à la discussion. Le procès-verbal de la première assemblée annuelle a été lu et adopté. Le rapport sur les élections de 1978, qui a paru dans le bulletin n° 6 de l'été 1978, le rapport du trésorier et les rapports portant sur le statut de membre et, sur les publications ont tous été lus et adoptés.

La question de première importance concernait les secteurs. Le premier avant-projet publié à ce sujet paru dans le bulletin n° 4, de l'hiver 1977 et s'intitulait ABSC devrait-elle avoir des secteurs? A Chicago, lors d'une réunion du MLA le comité exécutif de l'ABSC a révisé cet article d'après les commentaires et les mises en application reçues par le courrier. Le second avant-projet a été lu par M. Alan MacDonald devant les membres de la deuxième assemblée annuelle de l'ABSC, qui se tenait à Edmonton. La proposition qu'on accepte l'introduction de secteurs à l'intérieur de l'ABSC a été secondé par M. David Crawford et adoptée à l'unanimité par les membres présents. L'avant-projet et la proposition sont publiés dans ce bulletin.

La question des secteurs a encore été soulevée par le comité exécutif lors d'une autre réunion tenue à Edmonton, au cours de laquelle on en est arrivé à certaines décisions. Etant donnée que les membres de l'ABSC ont adopté la politique concernant l'introduction des secteurs, telle qu'on en avait discuté et suite aux développements qui s'en sont suivis, cette politique devra désormais être incorporée à l'acte constitutif de l'Association. Cela devrait se faire assez facilement, puisque l'acte constitutif intérimaire, institué à l'origine par le comité spécial d'inauguration, spécifie qu'un acte constitutif permanent doit être ratifié avant la fin de l'année 1978. Lors de la réunion tenue à Edmonton, le comité exécutif a donc fondé un comité en charge de la rédaction finale de l'acte constitutif. Les membres du comité sont Eileen Bradley, Science and Medical Library, University of Toronto; Hanna Waluzyniec, Medical Library, McGill University; et Alan MacDonald, W. K. Kellogg Health Sciences Library, Dalhousie University, président du comité. De par ses fonctions, le président de l'ABSC sera également membre du comité.

Ces membres établiront un nouvel acte constitutif, qui comprendra la politique adoptée sur les secteurs. Ils développeront la mise sur pied de règlements et élaboreront les rouages permettant à notre organisme, d'être constitué en corporation, lorsque le besoin s'en fera sentir. Ils présenteront leur avant-projet au comité exécutif de l'ABSC lorsqu'il se recontera à Toronto en octobre prochain. Le projet final, de même que les révisions que l'on aura jugées nécessaires, sera présenté à tous les membres vers la fin du mois de novembre. Il sera ratifié grâce à un vote effectué par le courrier. Comme vous le constatez, notre calendrier est très serré. Nous souhaitons que les personnes concernées seront présentes jusqu'au bout.

A part la question de réviser l'acte constitutif d'ici la fin de l'année, il ya un autre projet en vue. En effet, le comité exécutif a pris une seconde décision lors de la réunion à Edmonton. Il s'agit de conférer au président de l'ABSC, durant la période de révision de l'acte constitutif, le pouvoir d'accepter provisoirement comme secteurs les groupes qui satisfont les exigences établies dans la politique adoptée à Edmonton. Il y a présentement quatre demandes de statut de secteurs qui nous sont parvenues. Elles seront donc acceptées provisoirement, afin que les groupes concernés puissent planifier leur activités en accord avec l'ABSC et selon la marche à suivre adoptée, jusqu'au début de 1979, lorsqu'on entamera le processus dans les formalités établies officiellement par l'ABSC. C'est donc avec enthousiasme que nous accueillons ces premiers secteurs. Nous envisageons une longue association et surtout une association stimulante.

### Relations extérieures

En plus de nos relations internes avec les secteurs, la préoccupation majeure du Comité Exécutif durant son séjour à Chicago était la question d'affiliation avec la Medical Library Association. Durant les derniers mois, il y a eu beaucoup de correspondance a ce sujet et cette entreprise devait atteindre une conclusion satisfaisante à l'assemblée annuelle de la Medical Library Association, alors que les membres concernés des deux associations étaient présents pour une série de réunions. On a choisi de former un comité spécial composé de trois membres du International Cooperation Committee of MLA, et de délégués de l'ABSC. Martha Stone, Bill Fraser, Alan MacDonald, Sheila Swanson et Babs Flower participèrent tous à un moment ou l'autre. Le comité spécial ne s'est recontré qu'à une seule reprise, mais les deux factions se rencontrèrent à plusieurs reprises pour discuter du protocole.

La proposition d'affiliation de l'ABSC est tout un événement marquant pour MLA et comme toute autre innovation elle est sujette à vives controverses. La question à définir demeurait essentiellement celle-ci: "Que signifie le terme affiliation?" Serait-ce une relation plutôt officielle, ou s'agirait-il au contraire d'un échange plus animé? Etant donné que le MLA tenait à ce que la proposition de l'ABSC devienne le modèle pour les futures associations coopératives avec d'autres sociétés nationales de bibliothèques cette question était, en effet, des plus importantes. Le MLA offrait une accréditation alors que l'ABSC proposait une coopération. Finalement, même si les détails restent encore à être discutés, on a opté pour l'idée de la coopération. L'association des bibliothèques médicales a accepté le concept d'une association mutuelle et active.

Va pour Chicago. Nous devons maintenant porter notre attention à Ottawa et chercher d'obtenir une entente semblable avec la Canadian Library Association. Dans ce cas-ci, nous sommes encore une fois des innovateurs, puisque nous proposons une nouvelle forme d'association.

## Le projet CANHELP

Nous avons déjà discuté du projet CANHELP par le passé. Il s'agit du premier projet d'envergure mis sur pied par l'ABSC. Le comité exécutif et le comité des finances ont étudié les objectifs de l'ABSC et ont conclu que les priorités auxquelles nous n'avons pas encore trouvé de solution sont dans le domaine de l'éducation permanente. Il ne s'agit pas seulement d'un problème de ressources canadiennes dont nos membres ont besoin pour exploiter les bibliothèques, car il nous semble évident que les usagers des services d'information offerts par nos membres ont beaucoup à apprendre sur la façon qu'ils peuvent profiter du service offert par les bibliothèques. Le personnel qui semble avoir le plus besoin de contacts extérieurs avec des gens du même domaine, en plus de matériel spécialisé pour résoudre certains problèmes semblent être situés dans les hôpitaux. Les bibliothèques médicales sont donc devenues notre point de mise pour ce projet.

Durant les derniers mois, la présidente, exerçant ses fonctions de présidente du projet CANHELP, a peu à peu mis sur pied un service consultatif regroupant les principaux professionnels canadiens qui utilisent les bibliothèques hospitalières ou qui sont en charge de celles-ci. Le médecin, l'infirmière, l'administrateur de l'hôpital et le bibliothécaire en sciences de la santé peuvent tous être choisis comme conseillers. Au fur et à mesure que le service consultatif prend de l'envergure, les grandes lignes du programme, qui doit être mis au pied pour appuyer les activités des bibliothèques hospitalières et pour leur fournir tout un réseau de ressources, de catalogue collectifs, de manuels et d'ateliers, se transforment en un programme de discussions collectives qui devrait avoir lieu, si possible, le printemps de 1979. Le service consultatif nous aidera à décider du moment, du lieu, ainsi que des institutions avec lesquelles ce devrait être organisé et des sujets possibles à discuter. Le comité des finances se charge de trouver les fonds pour financer le projet et nous souhaitons que l'Association entière se joindra à nous en un effort national pour créer les éléments nécessaires à l'établissement d'une coopération régionale qui saura durer.

On invitera à ces discussions collectives, des "équipes" de quatre personnes provenant d'hôpitaux de grandeur moyenne choisis dans chaque province. Il s'agira de l'administrateur de l'hôpital, les membres du corps médical et infirmier du comité de bibliothèque et le bibliothécaire de l'hôpital. On retrouvera également des représentants de bibliothèques et des ministères fédéraux et provinciaux concernés, qui se joindront aux représentants régionaux de l'ABSC.

Les discussions traiteront de documentation générale qui a déjà été circulée. L'ABSC, conseillée par le service consultatif, sera responsable du suivi et de l'implémentation des recommandations faites durant la discussion. Ainsi, les résultats émanant de ces discussions pourront décider du rôle que jouera l'ABSC dans les mois et les années à venir. C'est un projet qui s'annonce des plus intéressants.



## Résumé

Le comité exécutif a travaillé très fort durant 1977 et 1978 pour délimiter la direction que prendra l'ABSC au cours des prochaines années et pour établir les fondements d'une organisation solide ayant un regard sur la collaboration nationale tout en demeurant très présente sur le plan régional. Grâce au bulletin de l'ABSC nous cherchons à créer des liens avec chaque membre. Les assemblées annuelles, tenues dans plusieurs villes à travers le pays, et les rencontres amicales, telles que nous avons eues dans le bureau de Bill Fraser après la réunion tenue à Edmonton, nous permettront de connaître éventuellement tous nos membres. Le cadre administratif à l'intérieur duquel nous travaillons, nous permettra d'établir certaines relations avec les groupes de gens travaillant dans les bibliothèques des sciences de la santé au niveau provincial ou autre. Grâce au projet CANHELP, nous espérons pouvoir exposer certains problèmes de base que doivent affronter les diverses bibliothèques des sciences de la santé du Canada. Les réactions retentissantes que nous recevons de la part des membres de l'ABSC nous font grand plaisir et c'est avec optimisme que nous affronterons l'année 1978 et 1979, qui s'annonce difficile mais des plus intéressantes.

M. A. Flower  
Président



### Guide aux sciences de la santé canadiennes

#### Services d'information et sources

Lors de la réunion du comité exécutif de l'ABSC, tenue à Chicago en juin dernier, nous avons discuté du guide et décidé qu'il serait préférable d'en publier dans les plus courts délais une version révisée et plus compréhensive. Ainsi, nous ne publierons aucune mise à jour du guide dans ce bulletin et nous espérons en publier une nouvelle édition dès le printemps 1979.

Il nous fait plaisir de vous annoncer la nomination de Martha Stone, Chef, Bibliothèque du Ministère de Santé et Bien-Etre Social Canada, Ottawa K1A 0K9, au poste d'éditeur. Le comité exécutif a également décidé que le guide serait plus utiles aux membres s'il était publié dans les deux langues officielles et s'il comprenait plus d'information sur le Québec. Ainsi, nous avons demandé conseil à la Section de la Santé d'ASTED, qui nous a suggéré de nommer Dorothy Sirois, bibliothécaire au Montreal Children's Hospital, 2300 Tupper Street, Montréal H3H 1P3, au poste de coéditeur.

Nous tenons à remercier Mme. Stone et Mme. Sirois d'avoir accepté cette tâche. Dorénavant, toutes corrections, tous ajouts et toutes suggestions devront être adressés à l'une ou l'autre de ces dames.

David S. Crawford

12 Président du comité des publications

## THE PRESIDENT REPORTS

There is one bit of priceless information which we can provide for all CHLA/ABSC members who did not make it to the Second Annual Meeting in Edmonton - never try to get to Edmonton from Chicago! Some hardy souls traveled by way of Minneapolis, some by way of Toronto. Either way there was much waiting between flights, lost luggage, Customs routine. But this is the glamour of travel, the basis of witty anecdotes, the source of the income with which successful writers buy up remote tropical islands where they can spend their reclining years. . .

### Trends

The Second Annual Meeting of the CHLA/ABSC took place as scheduled in the Northcote Room of the brand new Four Seasons Hotel in Edmonton. The topic was appropriate: Today's Trends in the Health Field. Both the guest speakers and the reporters from Health and Welfare and CISTI spoke in this vein. The speaker of the morning, Dr. Theodor Shnitka, was the Chairman of the Faculty of Medicine Library Committee at the University of Alberta. He was sharing with us his hobby, and in the tradition of that genre his knowledge of professional journal publication in the medical field was phenomenal. The publication curves he traced with the aid of an exceptional set of slides left little doubt that, even though library funds to buy professional journals continue to shrink further every year, the probabilities are that the present pattern will repeat itself indefinitely, and new journals will not cease to break out in the wake of every medical break-through, founder on economic realities, combine and recombine, while each amalgamation refines further the calibre of work which is seen in print. This is the scientific community expressing itself, judging itself, spreading the word.

The speaker of the afternoon was also a member of the staff of the University of Alberta. An Associate Professor in the Faculty of Nursing, Kay Dier has spent the last five years immersed in one of the recent innovations in the nursing field, the Nurse Practitioner program at the University of Alberta. She described the development of the concept and the need for self-reliant nurse clinicians in the Canadian North, where medical aid is scarce, and in countries such as Thailand, where it is scarce for different reasons. She outlined the legal and fiscal problems which have impeded acceptance of nurse practitioners in Canada, and have encouraged medical colleagues, who may really be doubtful of the nurses' independence, to reject them on the grounds that their legal status is ambiguous in many jurisdictions, and their salaries as part of a clinical staff are not directly recoverable from medicare.

Current trends in the health sciences library field were reported by two of our own members from Ottawa. Martha Stone, Head of the Departmental Library at Health & Welfare Canada, told us of changes underway and projected in her own library. Some of these changes had been inaugurated in response to budget and staff cuts which had been instituted in line with the kind of restraints outlined in the fireside chat delivered by Prime Minister Trudeau at the end of July. These responses included an internal audit of the library which led, first, to a definition of the library's role vis-à-vis both the Department and the health community; and second, to the development of a policy on which to base rationalization of the scope of the collection.

Martha reported another set of guidelines being developed in the never-never-land of fees-for-service. Until very recently this has been an idea unacceptable for a government library which is financed by public taxes. But economic stringencies alter even such situations, and indications are that Treasury Board may well acquiesce to such a philosophy under current circumstances.

An additional response to a well-known gap in service has been the development of a catalogue of the publications of Health & Welfare Canada. This will be available by the end of 1978, and it will include every title that can possibly be unearthed, which was produced between the years 1917 - 1978

A final development in Ottawa augurs well for the future flexibility of a monolithic federal government in its attempts to serve a public, increasingly aware of its rights as a consumer, with information in its many forms. To date this has not been accomplished with spectacular success. Now the library Directors have formed a Council of Federal Libraries, which is establishing a series of standing committees to deal with federal responsibilities to external users. Perhaps this is the mechanism we have been looking for to overcome Ottawa's information gap, so frustrating to us all.

The other speaker from Ottawa was Eve-Marie Lacroix, Head of the Health Sciences Resource Centre at CISTI. She herself is reporting elsewhere in this issue on the changes she anticipates in the relationships of the HSRC with the health sciences communities across Canada. The Advisory Committee, manned in part by delegates from CHLA/ABSC, which is becoming the agent sponsoring these new relationships, will be reported upon by Frances Groen, its Chairman.

## Chapters

The Business of the Association was addressed by the group assembled in Edmonton just before lunch, and the room was hot. The Minutes of the First Annual Meeting in Montreal were read and accepted. The 1978 Election Report, which appeared in the

CHLA/ABSC NEWSLETTER 6:6, Summer 1978, and the 1978 Membership, Publications and Treasurer's Reports were all read and accepted.

The important issue before the meeting was the matter of Chapters. The first policy paper, entitled Should CHLA Have Chapters?, appeared in the CHLA/ABSC NEWSLETTER 4:7-9, Winter 1977. At a meeting in Chicago during the MLA Annual Meeting, the Executive Committee of CHLA/ABSC revised this draft in the light of the comments and the applications which had been received. This second draft was read to the members attending the Second Annual Meeting of CHLA/ABSC in Edmonton by Alan MacDonald, and the motion for adoption was seconded by David Crawford. The draft was accepted unanimously by those present, and appears elsewhere in this issue, along with the Motion to implement it.

The issue of Chapters was addressed again by the Executive Committee at a meeting in Edmonton afterwards, and a group of decisions were made. The fact that the policy on Chapters, as it has been discussed and evolved, is now formally accepted by the membership of CHLA/ABSC means that this policy must now be incorporated into the Constitution of the Association. This is relatively easy to manage, since the Interim Constitution set up originally by the inauguration Ad Hoc Committee specifies that a permanent Constitution must be ratified by the end of 1978. The Executive Committee, when it met in Edmonton, therefore established a Constitution Committee to draft the final form. This Committee consists of Eileen Bradley, Science & Medicine Library, University of Toronto; Hanna Waluzyniec, Medical Library, McGill University; and Alan H. MacDonald, W.K. Kellogg Health Sciences Library, Dalhousie University, who is Chairman. The President is also involved, ex officio.

These members will put together a new Constitution, including the policy on Chapters. They will work out the mechanisms necessary for establishing by-laws, and for becoming an incorporated body, when that is necessary. They will present their draft to the Executive Committee of CHLA/ABSC when it meets in Toronto in October. The final draft, incorporating any revisions deemed necessary, will be presented to the total membership around the end of November for ratification by mail vote. This is a tight schedule, and we hope no one goes missing, or otherwise falls apart before it is done.

Quite apart from the imperative for getting the Constitution revised by the end of the year, another incentive is operating. The second decision taken by the Executive Committee in Edmonton was to empower the President during the interim covered by this process, to accept provisionally those groups as Chapters which meet the criteria laid down in the Chapters policy in Edmonton. There are four applications for Chapter status now outstanding, and these are being dealt with in this manner, so that the groups can carry on their activities in conjunction with CHLA/ABSC in normal fashion between now and the beginning

of 1979, when the official formalities can commence. We welcome our first Chapters enthusiastically, and look forward to a long and stimulating association.

### Outside Relationships

Besides our internal relationships with Chapters, the major preoccupation of the Executive Committee during its activities in Chicago was the issue of affiliation with the Medical Library Association. There has been considerable correspondence over a period of months on this topic, and the endeavor was to effect a satisfactory conclusion during the Annual Meeting of MLA, when the involved members of both Associations were available for a series of meetings. The mechanism chosen was an Ad Hoc Committee composed of three members of the Sub-committee on Affiliation of the International Co-operation Committee of MLA, and delegates from CHLA/ABSC. Martha Stone, Bill Fraser, Alan MacDonald, Sheila Swanson and Babs Flower all participated in one way or another. The Ad Hoc Committee met only once, but the two factions met separately several times to clarify protocol.

The CHLA/ABSC proposal of affiliation is a landmark for the Medical Library Association, and like all innovations, it is subject to considerable controversy. The point at issue has been essentially the meaning of "affiliation". Was it to be a formal, rather dry, tip of the hat? or was it to be a lively interchange? Since the MLA expects the CHLA/ABSC proposal to become the prototype for all future cooperative associations with other national library societies, this became a crucial issue. The MLA was offering recognition; the CHLA/ABSC was proposing cooperation. Although the details still remain to be negotiated, cooperation won the day. The Medical Library Association has accepted the concept of a two-way active association.

That was in Chicago. Now we must turn our attention to Ottawa, and work out way through to a similar understanding with the Canadian Library Association. For them, too, we are a test case, proposing a new form of relationship.

### CANHELP Project

We have talked about CANHELP before. It is the first major project which is to be mounted by the CHLA/ABSC. Your Executive Committee and your Finance Committee have both looked at the objectives of the CHLA/ABSC, and have come to the conclusion that our outstanding priorities lie in the area of continuing education. Not only does our own membership need Canada-oriented resources in order to run their libraries, but it seems apparent that the users of the information services offered by our membership have a great deal to learn about the way libraries can benefit them. The personnel who are most in

need of both contacts with others in the same field and specialized materials to help resolve their problems, tend to be in the hospitals. We have therefore made hospital libraries the focus of our project.

During the last few months your President, acting in her capacity as Chairman of the CANHELP project, has been gradually recruiting an Advisory Group from among the chief Canadian professionals who use and/or are responsible for hospital libraries. Physicians, nurses, hospital administrators, and health sciences librarians are all possible advisors. As the Advisory Group takes shape, the broad general outline of the program that is needed to support hospital library activities and provide them with networks of resources, union lists, manuals and workshops, is being refined into a plan for an invitational seminar, to be mounted, if possible, in the spring of 1979. The Advisory Group will help us decide when, where, in conjunction with what institutions, and presenting which of the possible contents. The Finance Committee will undertake to find funds to underwrite the project, and before we are done, we hope the whole Association will become involved in a national effort to create out of the grassroots the tools to build regional cooperation, and the links to make it work.

Those invited to the seminar will be "teams" of four from a medium-sized hospital selected out of each province: the hospital administrator, medical and nursing members of the library committee, and the hospital librarian. In addition, responsible representatives from university medical libraries across Canada, and from professional associations, and relevant federal and provincial departments, will join regional representatives of CHLA/ABSC.

It will be a "working" seminar, basing its discussions on background papers which have been circulated previously. The follow-up and implementation of the recommendations coming out of this seminar will be the responsibility of CHLA/ABSC guided by the Advisory Group. Indeed, the outcome of this projected seminar could outline the role of CHLA/ABSC for some time to come. It is an exciting prospect.

### Summary

Your Executive Committee has worked very hard during 1977/78 to outline the shape which the CHLA/ABSC will take in future years, and to lay the groundwork for a sound organization with a national outlook and a regional presence. Through the CHLA/ABSC NEWSLETTER we are endeavoring to forge links with individual members. Through our Annual Meetings staged around the country, and through such friendly encounters as the one staged in

Bill Fraser's room after the Edmonton meeting, we will gradually meet you all. Through our administrative framework we expect to develop working relationships with groups of health sciences library people in each of the provinces, and in other jurisdictions as well. Through our CANHELP project we hope to address some of the basic problems confronting health sciences libraires in Canada. We are grateful for the resounding response we are receiving from the members of CHLA/ABSC, and we look forward to another strenuous year of working together with you all in 1978/79.

M.A. Flower  
August, 1978



GUIDE TO CANADIAN HEALTH SCIENCE  
INFORMATION SERVICE AND SOURCES

At the CHLA Executive Committee meeting held in Chicago in June the Guide was discussed and it was decided that it would be better if a revised and expanded edition could be issued as soon as possible. For this reason no further updates will be published in this Newsletter and it is hoped to issue the new edition in the Spring of 1979.

We are pleased to announce that Martha Stone, Chief, Departmental Library Services, National Health and Welfare Ottawa KIS OK9 has been appointed Editor. The Executive Committee also decided that the Guide would be more useful to members if it were bilingual and if it contained more information relevant to Quebec. For this reason we approached the Section de la Santé of ASTED who suggested that Dorothy Sirois, Librarian of the Montreal Children's Hospital, 2300 Tupper Street, Montréal H3H 1P3 be appointed Co-Editor.

We are grateful to Mrs. Stone and Mme Sirois for undertaking this task and any corrections, additions or suggestions should be addressed to either of them.

David S. Crawford - Chairman, Publications Committee

## LES SECTEURS DE L'ABSC

On a adopté une proposition lors de l'assemblée générale annuelle qui, comme vous le constaterez dans les prochaines pages, permet au comité exécutif d'implanter un programme de secteurs. Nous avons déjà reçu des demandes officielles de quatre secteurs possibles et nous les autoriserons probablement sous peu. Vous trouverez ci-après de l'information concernant la formation des secteurs. Pour de plus amples informations à ce sujet, veuillez vous adresser au Président lui-même.

"Il est proposé que l'ABSC approuve, en principe, d'accorder le statut de secteur aux groupes locaux qui satisfont les critères de l'Association et qu'elle conseille au comité exécutif non seulement d'implanter un programme de secteurs, conformément aux critères énoncés ci-dessous, mais aussi d'inclure ces mêmes critères dans toute proposition voulant un nouvel acte constitutif et de nouveaux règlements."

### Exigences

1. Tout groupe demandant le statut de secteur à l'intérieur de l'Association des bibliothèques de la santé du Canada (désignée ci-après par l'abréviations ABSC) doit être officiellement formé avant de faire la demande.
2. Le groupe demandeur ne doit représenter qu'une aire géographique bien déterminée (soit une ville, un comté, une région ou une province) dont la grandeur permettra à la majorité de ces membres d'assister régulièrement aux activités prévues.
3. Toute personne qui s'intéresse aux buts que vise l'ABSC pourra adhérer au groupe demandeur. L'adhésion au groupe ne devra en aucun cas être limitée par le poste qu'occupe l'individu en question, la formation qu'il a reçu ou l'organisation pour laquelle il travaille.
4. Les membres du groupe demandeur doivent appartenir à un minimum de cinq institutions ou organisations.
5. Il est préférable que tous les membres du groupe demandeur appartiennent également à l'ABSC, mais cela n'est pas un critère absolu.
6. Les responsables du groupe demandeur seront élus par ses membres et devront également être des membres payés de l'ABSC.
7. L'acte constitutif du groupe demandeur devra correspondre à celui de l'ABSC.
8. Le groupe demandeur doit faire sa demande de statut de secteur par écrit auprès du président de l'ABSC et fournir l'information suivante:
  - a) nom du groupe
  - b) aire géographique
  - c) noms des institutions représentées par ses membres
  - d) acte constitutif
  - e) noms des responsables actuels.



### Financement du secteur

1. Chaque secteur devra couvrir les dépenses de base encourues lors des réunions à partir des ressources locales (ex. lieu de réunion, publicité, café, etc.).
2. Les secteurs peuvent demander une subvention au Comité Exécutif de l'ABSC pour financer les activités jugées valables. Les subventions maximales accordées par le Comité Exécutif ne dépasseront pas \$5.00 pour chaque membre actif de l'ABSC appartenant au secteur.
3. Les secteurs peuvent demander des prêts auprès de l'ABSC pour faciliter les programmes d'organisation d'ateliers, de publications et d'autres activités éducatives. Le Comité Exécutif étudiera chaque demande d'après le bien-fondé de l'activité prévue.

### Représentation

1. Le premier responsable de chaque secteur deviendra membre non-électeur du Comité Exécutif de l'ABSC et aura droit à toute la documentation reçue par le Comité. Les activités et des demande du secteur seront rapportées au Comité Exécutif de l'ABSC par le représentant.
2. Les secteurs peuvent introduire une question à l'ordre du jour d'une réunion du Comité Exécutif ou de l'assemblée générale annuelle de l'ABSC. Un responsable du secteur peut intervenir lorsque la question est en discussion. Les frais de voyages encourus ne seront pas nécessairement payés par l'ABSC.
3. Chaque secteur devra nommer un correspondant pour assister régulièrement l'éditeur du bulletin de l'ABSC dans son travail.

### Maintien du statut de secteur

1. Chaque secteur doit fournir un rapport annuel au Comité Exécutif de l'ABSC décrivant les activités de l'année et certifiant que les conditions de l'ABSC ont été respectées.
2. Le Comité Exécutif de l'ABSC doit recevoir les rapports annuels de chaque secteur avant qu'il se rencontre, précédant l'assemblée générale annuelle.
3. Si un secteur ne répond plus aux critères établis par l'ABSC, pour quelque raison que ce soit, le statut de secteur lui sera retiré jusqu'au moment où les conditions seront à nouveau respectées.

## CHAPTERS OF CHLA

The following motion was passed at the CHLA/ABSC Annual meeting and as you will note allows the Executive Committee to implement a program of Chapters. Already we have formal applications from four potential chapters and expect to approve these shortly. Information on how to become a chapter is explained in the following statements and further information can be obtained from the President.

"That the CHLA/ABSC approves in principle the granting of Chapter status to local groups that meet the criteria of the Association, and directs the Executive Committee of the CHLA/ABSC to implement a program of Chapters based on the criteria below, and further directs the Executive Committee to include such criteria in any proposals for a new Constitution and By-laws."

### Requirements for Chapters

1. A group seeking Chapter status in the Canadian Health Libraries Association/Association des bibliothèques de la santé du Canada (Hereinafter referred to as the CHLA/ABSC) must be formally organized before applying.
2. The applicant group must represent a single geographic area (city, county, region or province) small enough to allow the large majority of its members to attend its activities regularly.
3. Membership in the applicant group should be open to any person who is interested in the purposes of the CHLA/ABSC. Such membership may not be limited on the basis of the type of position or training of the individual, nor may it be limited by the type of organization in which the individual works.
4. The applicant group must have members from at least five different institutions or organizations.
5. All members of the applicant group need not necessarily be members of the CHLA/ABSC, although this is desirable.
6. All officers of the applicant group must be elected by the membership and must also be paid up members of the CHLA/ABSC.

7. The applicant group must have a constitution which is compatible with that of the CHLA/ABSC.
8. The applicant group must apply for Chapter status in writing to the President of the CHLA/ABSC providing the following information:
  - a) Name of group;
  - b) Geographic area covered by the group;
  - c) Names of the institutions currently represented by the membership;
  - d) Constitution;
  - e) Names of current Officers.

### Chapter Finances

1. Each Chapter will be expected to cover its basic costs of meeting from local resources (e.g. meeting space, announcements, coffee, etc.)
2. Chapters may apply to the CHLA/ABSC Executive Committee for development grants to support or assist proposed Chapter activities of merit. The Executive Committee may make grants to Chapters up to a maximum of \$5.00 per active CHLA/ABSC member in the Chapter.
3. Chapters may request that the CHLA/ABSC provide program loans to facilitate the organization of workshops, publications, or other continuing education activities. The CHLA/ABSC Executive Committee will consider each request on its merits.

### Chapter Representation

1. The Chief Executive Officer of each Chapter will become a non-voting corresponding member of the CHLA/ABSC Executive Committee, who receives all documentation provided to that Committee. Chapter activities and requests will be reported to the CHLA/ABSC Executive Committee through this representative.
2. Any Chapter may place an item on the agenda of an Executive Committee Meeting or an Annual General Meeting of the CHLA/ABSC. An Officer of the Chapter may also speak to that item when it arises. However, the CHLA/ABSC cannot guarantee travel funding for this purpose.

3. Each Chapter will be expected to appoint a correspondent to provide regular assistance to the Editor of the CHLA/ABSC Newsletter.

#### Maintenance of Chapter Status

1. Each Chapter must provide an annual report to the CHLA/ABSC Executive Committee outlining its activities during the current year, and verifying that all CHLA/ABSC requirements continue to be met.
2. The annual report submitted by each Chapter must be received by the CHLA/ABSC Executive Committee before it meets immediately prior to the Annual General Meeting.
3. Should any Chapter no longer meet the necessary CHLA/ABSC criteria, for whatever reason, Chapter status will be suspended until such time as the requirements have been fulfilled.



#### Nouvelles

À cause des dépenses encourues, le comité de publication de L'ABSC a décidé qu'il nous est impossible de distribuer des doubles ou des listes de desiderata. On suggère aux bibliothèques possédant du matériel en double de l'envoyer soit au Universal and Book Exchange à Washington D. C., soit au Canadian Book Exchange Centre à Ottawa.

#### News

The Publications Committee of CHLA has decided that expense makes it impossible for us to distribute duplicate or wants lists. We suggest that libraries having duplicate material send it to either the Universal Serials and Book Exchange in Washington, D.C. or to the Canadian Book Exchange Centre in Ottawa.

AN EVALUATION OF THE LIBRARIAN'S EDUCATIONAL  
ROLE IN PATIENT CARE SETTING

The first Canadian project to evaluate the role of the clinical librarian has been funded by the Ontario Ministry of Health at McMaster University for a one-year period.

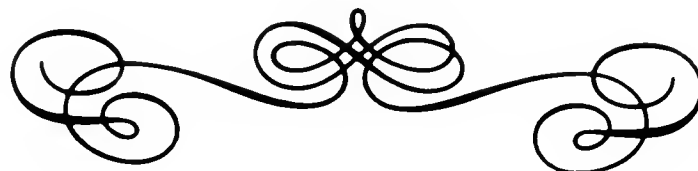
Beginning September 1, 1978, two Librarians based in the Health Sciences Library will provide an information service for patients and health professionals in the Rheumatology and Obstetrics services for a six-month period. Two other clinical settings, yet to be chosen, will be served for the second six-month period.

By participating in selected ward rounds and clinics, the librarians will develop and evaluate patient education packages. Health professionals will also be provided with recent articles from the biomedical literature that have direct relevance to patient care, as a basis for teaching information-seeking skills. Measures of library use and information-seeking habits for treatment and control groups will assess the effect of the librarians' interventions on health professionals. Expected results include:

- (1) improved access to educational materials for patients
- (2) improved information-seeking habits of health professionals
- (3) improved ability of librarians to accurately identify and meet information needs in patient care settings.

This project differs from existing clinical librarian programs in the U.S. and Great Britain in providing an information service for patients and attempting to demonstrate that a clinical librarian can be effective on a part-time basis.

Additional information about the project is available from the principal investigators, Ms. Joanne Marshall and Dr. V.R. Neufeld, Health Sciences Library, McMaster University, Hamilton, Ontario L8S 4J9.



## CONSUMER HEALTH INFORMATION

### A PERSPECTIVE FOR LIBRARIANS

EDWARD W. TAWYEA

It is possible that several thousand years ago someone stood on the Mediterranean coast of Egypt, gazed upon one great building among the lessers and asked this question - "is the Library of Alexandria really relevant?" Whether or not our ancient predecessors had to answer charges of irrelevancy, and of not meeting users' needs, there is no denying the current trend of assessing the usefulness of any given institution, most especially the library. It no longer seems enough to defend the library's existence on vague notions such as preservation of civilization, public good, or the spiritual uplifting of the mass of humanity. Such claims nowadays are only made by public television. Whether for good or bad, libraries must be meeting very definite needs. However, library needs have a way of changing; this is a function of the changeable nature of society in general. It is incumbent upon the professional librarian to perceive shifting needs and creatively respond with appropriate services and programs. In doing so in recent times public librarians have developed programs for the elderly, for shut-ins and the very young. Medical librarians have adopted computerized bibliographic retrieval, S.D.I. and a host of other tools. However, an expanding trend has all but been ignored by both - it involves the need for information to support the education of the public about their bodies, disease, and healthful living. The evidence that this trend exists is strong. It stretches from the individual to the highest levels of federal bureaucracy.

The empirical evidence for a revolution in the attitude of North Americans towards their bodies is overwhelming. The activities once associated only with the "health nuts" are now epidemic. Note the joggers in any public park, the bicyclists on the streets, the rash of health food stores, the "natural" and "organic" labelling on food. What drugstore doesn't carry vitamins in megadoses? What city of any size doesn't have a number of health clubs? Along with this very positive interest in the body has sprung a rather negative attitude toward traditional medicine. No longer content to be given a prescription and told to return in a week, many dissatisfied people are taking more personal control of their health care. On the extreme end of this trend are the proponents of medical self-care. Its advocates insist that much of what the public seeks the advice of health professionals for could be handled by the individuals themselves. It is part of the do-it-yourself mentality. In some ways a call to return to the old days of home remedies. The literature, always a good signpost for any trend, is reflective of this one as well. Consider these titles: Man's Body: An Owner's Manual, Take Care of Yourself, How to be Your Own Doctor - Sometimes,

CANADIAN HEALTH LIBRARIES ASSOCIATION

Membership Application

Name.....

Address.....

.....

Postal code.....

I enclose \$15.00 (made payable to Canadian Health Libraries Association)  
as my membership fee for the period ending June 1979.

PLEASE RETURN THIS FORM TO:-

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7



ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA

Formule d'Application

Nom.....

Adresse.....

.....

Code postale.....

J'inclus \$15.00 (payable a Canadian Health Libraries Association) comme  
cotisation pour la periode qui se termine en juin 1979.

ADRESSE DE RETOUR:

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7









**CANADIAN HEALTH LIBRARIES ASSOCIATION**  
**ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA**

CHLA/ABSC NEWSLETTER  
FORM FOR SUBMISSION OF COPY

1. Name of Individual Library Reporting (give mailing address):

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2. Personnel Appointments, Activities:

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3. Notable Library News, New Programs, Acquisitions, Grants, Buildings, Services:

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4. Workshops, Continuing Education Activities in your Area:

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5. Brief Description of Article you are writing for future submission (give estimated completion date):

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Full length articles and news items contributed on this form should be submitted to:

Patrick Fawcett  
CHLA/ABSC Newsletter  
Medical Library  
University of Manitoba  
770 Bannatyne Avenue  
WINNIPEG, Manitoba R3E 0W3

Deadlines for: Issue No. 8, October 28, Issue No. 9, January 19,  
Issue No. 10, March 2



**CANADIAN HEALTH LIBRARIES ASSOCIATION**  
**ASSOCIATION DES BIBLIOTHEQUES DE LA SANTE DU CANADA**

NOUVELLES CHLA/ABSC  
FORMULE DE SOUMISSION D'ARTICLES

1. Nom de l'individu/bibliothèque faisant rapport (Donnez l'adresse postale):

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2. Changements de personnel, activités:

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3. Nouvelles à noter, nouveaux programmes, services, locaux, nouvelles acquisitions, subventions:

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4. Ateliers, activités d'éducation permanente dans votre milieu:

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5. Description brève de l'article en préparation pour soumission future (estimez une date d'achèvement):

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Tous les articles et faits divers contribués sur cette formule devraient être soumis à:

Patrick Fawcett  
Nouvelles CHLA/ABSC  
Medical Library  
University of Manitoba  
770 Bannatyne Avenue  
WINNIPEG, Manitoba R3E 0W3

Dates limites pour les soumissions: Bulletins No. 8 le 28 octobre, No. 9 le 19 janvier, No. 10 le 2 mars

Our Bodies - Our Selves, these are just a few. There is more than just a bit of the reactionary spirit in all of this. There is a frustration and disappointment with the medical establishment. The spiralling costs and the perceived benefits have not jived, leaving some to strike out on their own, and others to be more critical and inquisitive of their private physicans.

New revelation about morbidity and mortality have been producing some changes within traditional medicine as well. Life expectancy for Canadians, which increased steadily in the first part of this century, has not made any significant improvement in recent years. And whereas, at the turn of the century Canadians died of diseases of short duration and intense severity i.e. acute illness, now, more often than not, they die of conditions of long duration, which frequently incapacitate their victims for years i.e. chronic illness. The shocking fact in all of this is that the major causes of death are preventable. Within this category are lung cancer, emphysema, accidents, cirrhosis of the liver, suicide, and heart disease. Confronted with this situation many health care providers have taken a new direction in their dealings with patients. Rather than merely repairing conditions which might have been prevented, they are attempting to alter behavior that is illness inducing and encouraging that which is health producing. Much of this behavior modification takes place through education, specifically labelled patient or consumer health education. The form of education varies, some takes place in small class settings, some within the examining room, some through mass communication. However, the idea is basically the same: educate the individual on healthy living.

Recognizing similar morbidity and mortality statistics, the United States Federal government has committed itself and resources to an informed consumer as regards health and health care. Through both regulations and the creation of agencies a national trend has been set. Major institutions, such as the Bureau of Health Education and the National Center for Health Education have been set up specifically to facilitate health educating the public. Perhaps the boldest step was the signing of P.L. 94-317, the National Consumer Health Information and Health Promotion Act of 1976. Among a variety of monumental tasks specified by the law were the following directives:

Formulate national goals and a strategy to achieve such goals, with respect to health information and health promotion, preventive health services, and education in the appropriate use of health care.

Incorporate appropriate health education components into our society, especially into all aspects of education and health care.

Increase the application and use of health knowledge, skills, and practices by the general population in its patterns of daily living.

The Act also ordered the creation of a new national agency, the Office of Health Information and Health Promotion to coordinate national efforts in consumer health education. It seems most likely that if it has not already begun to do so, that the Canadian government will soon follow suit.

If we could quickly sketch a picture of this North American health scene it might appear something like this: a portion of the population clamoring for information about their bodies and health, the institutions of traditional medicine recognizing and acting on the need to educate their constituents about their health, and the bureaucracies of the federal and local governments either encouraging or mandating the education of citizens about health and health care. What should the librarian make of all of this? Should s/he even be concerned with it? What, if anything, should s/he do in response? Might not part of the answer to the question of the relevancy of libraries be found in the way in which librarians answer these three questions. Of course, the question of relevancy is itself relative, relative to the population for which the library was created. Therefore, the hospital librarian might ask, why should I be concerned with trends within the population, my clientele is health care providers. The university medical school librarian might similarly claim that his/her users are students and faculty, not the public. This, however, suggests short-sightedness. In the end, health care providers, whether students, practitioners or teachers must respond to the trends of the public for whom they exist. In fact, many clinicians already are interested in health education. They want to be able to sit down and talk with their patients, and to be able to hand that person supportive literature to take home and keep. But, they are overwhelmed by the plethora of disorganized information. Also, for some time public librarians have been recognizing the need for health information literature but have avoided plunging themselves into gathering it because of the technical nature of it. They feel insecure with scientific and health literature. Who then shall take the lead, who has the expertise in this area? It seems that such skills lie almost solely with medical librarians.

The organization of health related information requires a librarian, and the subject matter of the literature demands that this be an individual who is familiar with the health sciences. Who could better accomplish this organizational activity better than the medical librarian? Currently there is no control over the mountains of health literature produced in pamphlet form annually. The "junky" format of the literature seems to defy organization. But it is precisely this format which is appropriate to educating the public, it serves the diabetic who wants to know about insulin injections, the new mother who wants to know about infant care, the arthritic who needs to know about the care of painful joints, or the newly diagnosed m.s. patient who wants to understand his disease. At the same time, audiovisual material to support health education has appeared in great quantity, but is equally disorganized.

There is a desperate need for a concerted effort to bring to this information some kind of order that librarians have brought to the world of books, and to provide easy access and professional reference service.

How, and if medical librarians will respond to the consumer's needs obviously remains to be determined. A university library might cooperate with a city library to provide technical assistance, or it might serve as a referral place from the public library. Hospital libraries might have cooperative arrangements with public libraries that allow their health care providers to make referrals for specific audiovisual or printed information. Or the hospital library might itself be available to provide information requested by a physician's "prescription". There might also be a cooperative arrangement between an organized group of medical and public, school and medical libraries. There are endless possibilities. But there is an immediate need to make a close inspection of the whole area, to identify specific needs, and to begin on a course aimed at fulfilling them. Providing health information is a particularly satisfying activity for it touches people on their most human and common level. And the possibilities of positively affecting both individual and national health through the exercising of those skills peculiar to librarians are great.

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Ed Tawyeà, a graduate of Wayne State University, presently working in the reference department of NorthWestern University in Chicago, wrote the above article at the invitation of the Editors, we hope it will provoke comments in our next issue.

If you are interested in reading or buying any of the books mentioned in the article bibliographic references follow:-

Boston Women's Health Book Collective. Our Bodies, Ourselves. Rev. 2nd ed. New York, Simon & Schuster, 1976.

The Diagram Group. Man's Body: An Owner's Manual. New York. Paddington Press, 1976.

Sehnert, Keith W., and Eisenberg, Howard. How to be Your Own Doctor - Sometimes. New York, Grosset & Dunlop, 1976.

Vickery, Donald M., and Fries, James F. Take Care of Yourself" A Consumer's Guide to Medical Care. Reading, Mass., Addison - Wesley, 1976.

## CRÉATION D'UN NOUVEAU COMITÉ CONSULTATIF SUR LE CENTRE BIBLIOGRAPHIQUE DES SCIENCES DE LA SANTÉ

### ORIGINES DU COMITÉ

En 1977, un mémoire était présenté au Directeur de l'Institut canadien de l'information scientifique et technique (ICIST) en même temps qu'une révision du rôle et des objectifs de la Bibliothèque nationale. Ce mémoire, préparé par le Comité consultatif des bibliothèques des facultés de médecine de l'Association des facultés de médecine du Canada (AFMC) fut approuvé par le Conseil des doyens de l'AFMC, l'Association des bibliothèques de la santé du Canada (ABSC) et par la section canadienne de la Medical Library Association.

Le mémoire recommandait que:

1. le rôle et les fonctions du Centre bibliographiques des sciences de la santé (CBSS) et de son personnel soient révisés et accrus;
2. que le Directeur de la Bibliothèque nationale et le Directeur de l'Institut canadien de l'information scientifique et technique (ICIST) établissent un réseau canadien de bibliothèques biomédicales à partir des réseaux régionaux de bibliothèques biomédicales déjà existants;
3. que la qualité de la collection scientifique de l'ICIST continue d'être une priorité;
4. que l'ICIST essaie d'offrir aux utilisateurs canadiens de MEDLARS les bases de données au même moment qu'elles sont accessibles aux E.U.;
5. que le CBSS prépare une base de données lisible par machine sur les documents audio-visuels offerts au Canada;
6. que l'ICIST fasse connaître d'avantage dans les milieux canadiens ses efforts en matière de coopération internationale;
7. qu'un petit comité consultatif soit créé pour faire des suggestions spécifiques au sujet des actions que le CBSS devrait entreprendre ou promouvoir.

Le but de cet article est de rendre compte de la mise à exécution de cette dernière recommandation, l'établissement d'un comité consultatif sur le CBSS.

### OBJECTIFS ET COMPOSITION DU COMITÉ CONSULTATIF

La première réunion du Comité consultatif a eu lieu le 10 janvier 1978 à l'ICIST. Une violente tempête de neige avait fait annuler la plupart des vols sur Ottawa cette journée là. Tous les membres ont cependant réussi à se rendre à la réunion, ce qui est assez exceptionnel considérant que certains venaient de Vancouver, de Halifax de Montréal et de Toronto. Cette première réunion en était une d'organisation seulement et des points comme le mandat, les objectifs et la durée des nominations furent discutés. M. Jack E. Brown assistait à cette première réunion en tant que Directeur de l'ICIST. Comme l'ICIST est présentement à se nommer un nouveau Directeur, nous avons décidé de nous donner un mandat provisoire, ce dernier devant être approuvé par le Directeur. Dès que le mandat définitif sera arrêté, il sera publié dans ce bulletin.

Pour le bénéfice des membres de l'ABSC, voici les objectifs actuels du Comité consultatif:

- a) agir en tant que groupe d'utilisateur en passant en revue les activités du CBSS en fonction des besoins des différents groupements et organismes des sciences de la santé au Canada;
- b) conseiller le Directeur de l'ICIST sur les lignes de conduites et les décisions concernant le CBSS et permettre la discussion de points spécifiques avec le Chef du CBSS;
- c) conseiller le CBSS sur les projets à long terme;
- d) conseiller le Directeur de l'ICIST sur le choix de Chef du CBSS.

Le Comité se compose de cinq membres par mandat spécial recommandés par l'ABSC, l'Association pour l'avancement des sciences et des techniques (ASTED), Section de la santé et par le Comité consultatif des bibliothèques des facultés de médecine de l'AFMC, ainsi que de deux membres d'office, le Directeur de l'ICIST ou son représentant et le Chef du CBSS.

#### RAPPORT SUR LA RÉUNION D'EDMONTON

La deuxième réunion du Comité consultatif a eu lieu à Edmonton le 19 juin 1978. De nombreux points intéressants, que vous trouverez résumés dans les pages suivantes, y furent discutés.

##### I. Allocation des codes MEDLINE au Canada

Pour le moment, le CBSS est le seul distributeur des codes MEDLINE au Canada. Il fut longuement discuté de la possibilité d'établir de critères pour la sélection des centres MEDLINE comme l'utilisation minimale, l'emplacement géographique et l'ampleur des services rendus aux utilisateurs de l'extérieur. Le Comité consultatif recommande à l'ICIST de ne pas restreindre le nombre de centres MEDLINE dans la mesure où le Canada n'est pas limité par la National Library of Medicine. Il est recommandé de plus que le CBSS dresse un tableau des services que l'ICIST peut offrir aux centres MEDLINE (livraison de documents, recherches de localisation, etc.).

##### II. Répertoire des bibliothèques des sciences de la santé au Canada

Le besoin d'un tel répertoire fut approuvé unanimement par le Comité consultatif. Le Chef du CBSS a déjà commencé à en amasser les données et l'ABSC, l'ASTED et l'AFMC ont commencé à lui envoyer des listes de bibliothèques de sciences santé locales et régionales. Le CBSS a mis cette activité au rang de ses priorités.

##### III. Publications du Centre bibliographique des sciences de la santé

Avant de donner les recommandations du Comité consultatif, il serait bon d'énumérer les publications actuelles de l'ICIST dans le domaine des sciences de la santé: Bibliothèques canadiennes détenant les périodiques répertoriés dans l'Index Medicus, Comptes rendus de conférences sur les sciences de la santé et Bibliothèques canadiennes des sciences de la santé.

Le CBSS est à réviser la 7<sup>e</sup> édition (1977) de Bibliothèques canadiennes détenant les périodiques répertoriés dans l'Index Medicus avec l'intention d'y inclure des listes spéciales d'art dentaire, de science infirmière et de reproduction comme dans List of Journals Indexed in Index Medicus, publié par la U. S. National Library of Medicine. Un projet similaire vise l'étude de la disponibilité au Canada des périodiques répertoriés dans Excerpta Medica. Le Comité consultatif a approuvé ces projets. De plus le Comité s'est penché sur le fait que le Catalogue collectif des publications scientifiques dans les bibliothèques canadiennes (CCPSBC) n'est pas pleinement représentatif des périodiques conservés dans les bibliothèques des sciences de la santé. Afin d'aider le CBSS à déterminer quels titres de périodiques devraient être ajoutés dans le CCPSBC, la Kellogg Health Sciences Library de L'Université de Dalhousie procède présentement à une comparaison de sa collection avec les titres du Catalogue collectif.

Le Comité s'est aussi demandé s'il serait souhaitable d'employer le titre courant au lieu du nom d'auteur collectif dans le CCPSBC et dans Bibliothèques canadiennes détenant...

Comptes rendus des conférences sur les sciences de la santé a été discontinué la collection de l'ICIST étant désormais accessible sur CAN/OLE, la vente de copies-papier étant à la baisse et l'Institute for Scientific Information ayant publié récemment Index to Scientific and Technical Proceedings.

Le Comité consultatif a aussi passé beaucoup de temps à revoir le rôle et la nature de Bibliothèques canadiennes des sciences de la santé (BCSS). Le Comité a recommandé que son contenu soit limité à l'inclusion des nouveaux titres, les nouveaux titres étant ceux de périodiques de moins de 5 ans, et des anciens titres s'ils sont nouveaux au Canada. Le fait que cette publication se limiterait aux "nouveaux" titres a incité le Comité à recommander que le titre redevienne "Périodiques des sciences de la santé en commande" qui en reflèterait plus fidèlement le contenu. Ce changement de titre est aussi rendu nécessaire par l'abandon des nouvelles, des postes vacants et de la bibliographie d'information courante publiés auparavant dans BCSS.

#### IV. Efforts pour obtenir une traduction française des vedettes MESH

Depuis plusieurs années, des efforts ont été faits pour obtenir une traduction française des vedettes MESH de l'Institut National de la Santé et de la Recherche Médicale (INSERM). Cette traduction serait utile non seulement pour les recherches en direct mais aussi pour les catalogueurs qui utilisent la classification de la NLM. Aussi, puisqu'elle a une importance considérable pour le Canada, l'ICIST adressera une demande officielle à l'INSERM pour cette traduction française.

#### COMMENT FAIRE PARVENIR VOS RECOMMANDATIONS AU COMITÉ CONSULTATIF

Il semble évident que le Comité consultatif sur le CBSS continuera à traiter de sujets intéressant directement la communauté des bibliothèques des sciences de la santé du Canada. Le Comité a besoin des commentaires de tous les usagers des services du CBSS s'il veut pouvoir agir comme consommateur vigilant.



Les membres du nouveau Comité consultatif recevront avec plaisir les commentaires de leurs collègues. Pour toute question ayant trait aux services du Centre bibliographique des sciences de la santé, n'hésitez pas à écrire à n'importe lequel des membres listés ci-dessous.

Mme. Pierrette Dubuc  
Bibliothécaire  
Hôpital Ste - Justine  
3175 Chemin Ste - Catherine  
MONTREAL, Québec  
H3T 1C5

Mad. Eve-Marie Lacroix  
Chef, Centre bibliographique des  
sciences de la santé et Secrétaire  
du Comité consultatif  
Institut canadien de l'information  
scientifique et technique  
Conseil national de recherches du Canada  
Edifice M-55  
OTTAWA, Ontario. K1A 0S2

M. William Fraser  
Librarian  
British Columbia Medical Library  
service  
1807 West 10th Street  
VANCOUVER, British Columbia

M. Alan MacDonald  
Health Sciences Librarian  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
HALIFAX, Nova Scotia

Mme. Frances K. Groen  
Life Sciences Area Librarian  
Medical Library, McGill University  
3655 Drummond Street  
MONTREAL, Québec H3G 1Y6

Mad. Linda McFarlane  
Librarian  
Sunnybrook Medical Centre  
2075 Bayview Avenue  
TORONTO, Ontario. M4N 3M5

Le président du Comité consultatif continuera à tenir la communauté des bibliothèques de la santé informée des activités du Comité par le biais de ce bulletin.

Frances Groen  
Président  
Comité consultatif sur le centre  
bibliographique des sciences de la santé

Traduction: Institut canadien de l'information scientifique et technique.

## NEW ADVISORY COMMITTEE ON THE HEALTH SCIENCES

### RESOURCE CENTRE ESTABLISHED

#### ORIGINS OF THE COMMITTEE

In 1977, a brief was submitted to the Director of the Canada Institute for Scientific and Technical Information (CISTI), in conjunction with the review of the role and objectives of the National Library. This statement, prepared by the Special Resource Committee on Medical School Libraries of the Association of Canadian Medical Colleges (ACMC) was endorsed by the Council of Deans of the ACMC, the Canadian Health Libraries Association (CHLA) and the Canadian Group of the Medical Library Association. The brief contained the following recommendations:

1. that the role and functions of the Health Sciences Resource Centre (HSRC) and its staff be reviewed and strengthened.
2. that the National Librarian and the Director of the Canada Institute for Scientific and Technical Information (CISTI) develop a Canadian biomedical library network based on the existing regional pattern of biomedical library centres.
3. that the development of a scientific collection of excellence at CISTI continue to receive priority treatment.
4. that CISTI attempt to make data bases available to Canadian MEDLARS users simultaneous with their availability in the U.S.
5. that HSRC develop a machine-readable data base of audiovisual materials available in Canada.
6. that CISTI's efforts in the area of international co-operation be made more widely known to the Canadian library community.
7. that a small advisory committee be established to make specific suggestions regarding activities which HSRC should carry out or promote.

The purpose of this article is to report on the implementation of the final recommendation, the establishment of an advisory committee to HSRC.

#### OBJECTIVES AND COMPOSITION OF THE ADVISORY COMMITTEE

The first meeting of the Advisory Committee was held on January 10, 1978 at C.I.S.T.I. A raging blizzard cancelled most flights to Ottawa that day. However, all members managed to arrive for the meeting, quite an achievement when one considers that members arrived from Vancouver, Halifax, Montreal and Toronto. This first meeting was an organizational meeting only, and issues such as terms of reference, objectives, and length of service on the Committee had to be addressed. Dr. Jack Brown attended that first meeting in his capacity as Director of C.I.S.T.I. As C.I.S.T.I. is now awaiting the appointment of a new Director, we determined to live with an interim set of Terms of Reference, as these are subject to the approval of the Director. Once these are in their final form, they will be published in his Newsletter.

CHLA members may be interested to know the present objectives of the Advisory Committee which are as follows:

- (a) to act as a user group by reviewing the activities of the HSRC vis-à-vis the need of the various health science communities and organizations in Canada;
- (b) to provide advice, to the Director of C.I.S.T.I. on policies and actions related to the HSRC and provide a forum for discussion of specific issues with the Head of the HSRC;
- (c) to provide advice on long-term planning for the HSRC;
- (d) to advise the Director of C.I.S.T.I. on the selection of a Head of the HSRC.

The Committee consists of five members at large and two ex-officio members. On the recommendation of C.H.L.A., L'Association pour D'Avancement des Sciences et des Techniques de la Documentation (ASTED), Section de la Santé, and the ACMC Special Resource Committee on Medical School Libraries, the Director of C.I.S.T.I. appoints members for a period of two years. Initially, some appointments were made for a longer period of time to assure continuity in the Committee. Ex officio members include the Director of CISTI or his/her representative and the Head of HSRC.

## REPORT ON THE EDMONTON MEETING

The second meeting of the Advisory Committee was held in Edmonton on June 19, 1978. A number of issues of interest were reviewed and are summarized on the following pages.

### I. The Location of MEDLINE codes in Canada

At present, HSRC is the unique distributor of MEDLINE codes in Canada. Considerable discussion has taken place regarding the development of a set of criteria for the establishment of a MEDLINE centre, including questions of minimum use, geographic location and the extent of service provided to external users. The Advisory Committee recommended that C.I.S.T.I. not restrict the number of MEDLINE centres as long as Canada is not limited by the U.S. National Library of Medicine. It also suggested that HSRC prepare a detailed statement on C.I.S.T.I. support available to MEDLINE centres, for example, document delivery and location searches.

### II. Directory of Health Science Libraries in Canada

The need for such a directory was unanimously endorsed by the Advisory Committee. The Head of HSRC is already beginning to gather data, and the CHLA, ASTED, and ACMC are forwarding local and regional lists of health science libraries to HSRC to provide the basis of the directory. This activity is receiving priority treatment at HSRC.

### III. Publications of the Health Sciences Resource Centre

Before discussing the recommendations of the Advisory Committee, it may prove useful to enumerate the present publications of C.I.S.T.I. in the health sciences. These include Canadian Locations of Journals Indexed in Index Medicus, Conference Proceedings in the Health Sciences, and Health Science Libraries in Canada.

Canadian Locations of Journals Indexed in Index Medicus (7th ed., 1977) is being reviewed at HSRC with the intention of including special lists of dental, nursing and reproduction journals such as appear in List of Journals Indexed in Index Medicus, published by the U.S. National Library of Medicine. A related project concerns the investigation of Canadian back-up for serials abstracted in Excerpta Medica. The Advisory Committee reviewed these programs with approval. In addition, the Committee was concerned with the problem that the Union List of Scientific Serials in Canadian Libraries (ULSSCL)

is not fully representative of the full array of services held in health science libraries. To assist C.I.S.T.I. in determining which additional serial titles should be included in ULSSCL, the Kellogg Health Sciences Library of Dalhousie University is comparing its serial holding against those of the Union List. Discussion also included the desirability of employing running title rather than corporate entry in the ULSSCL and its spin-off, Canadian Locations.

Conference Proceedings in the Health Sciences has been discontinued in view of the availability of CISTI holdings on CAN/OLE, the decreasing sales of hard copy, and the newly available Index to Scientific and Technical Proceedings published by the Institute for Scientific Information.

The Advisory Committee also spent considerable time in reviewing the scope and nature of Health Science Libraries in Canada (HSLC). Concerning the content of this publication, the Committee recommended that it should limit its inclusion to new titles, defining new titles as those no more than five years old and should list old titles only if they were new in Canada. The limitation of this publication to "new" health sciences serials on order prompted the Committee to recommend that the title revert to the original name of "Health Sciences Serials on Order", more reflective of the contents of the publication. This need for this title change is also indicated by the omission of new items, job vacancies, and the current awareness bibliography previously published in HSLC.

#### IV. Efforts to obtain a French translation of MESH headings

For several years, efforts have continued to obtain a French version of MESH headings from L'Institut National de la Santé et de la Recherche Medicale (INSERM). Such holdings are useful not only for on-line searching but also for cataloguers using the NLM classification. Thus far, efforts have not been successful. However, since this French translation is of considerable importance to Canada, C.I.S.T.I. will address a formal request to INSERM for this translation.

#### HOW TO ADVISE THE ADVISORY COMMITTEE

It seems obvious from the content of this meeting that the Advisory Committee on HSRC will continue to discuss issues of direct relevance to the community of Canadian health libraries. If the Committee is to function as a vigilant consumer, it requires the comments of all users of the services of HSRC.

Members of this newly formed Advisory Committee welcome comments from their colleagues. If issues related to the services of the Health Sciences Resource Centre are of concern, please write to any of the members listed below

Mrs. Pierette Dubuc  
Librarian  
Hôpital St. Justine  
3175 Chemin St. Catherine  
Montreal H3T 1C5

Mr. William Fraser  
Librarian  
British Columbia Medical  
Library Service  
1807 West 10th Street  
Vancouver, B.C.

Mrs. Frances K. Groen  
Life Sciences Area Librarian  
Medical Library, McGill University  
3655 Drummond Street  
Montreal H3G 1Y6

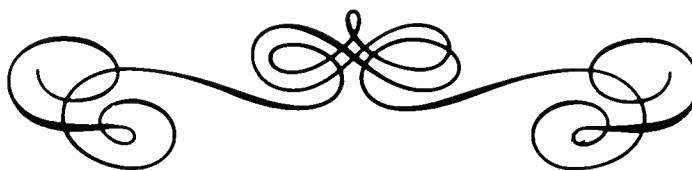
Mrs. Eve-Marie Lacroix  
Head, Health Sciences Resource Centre  
& Secretary to the Advisory Committee  
Canada Institute for Scientific and  
Technical Information  
National Research Council  
Building M - 55  
Ottawa, Ontario K1A 0S2

Mr. Alan MacDonald  
Health Sciences Librarian  
W.K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia

Ms. Linda McFarlane  
Librarian  
Sunnybrook Medical Center  
2075 Bayview Avenue  
Toronto, Ontario M4N 3M5

The Chairperson of the Advisory Committee will continue to keep the health library community informed of Committee developments through this Newsletter.

Frances Groen  
Chairperson  
Advisory Committee on the  
Health Sciences Resource Centre



## CENTRE BIBLIOGRAPHIQUE DES SCIENCES DE LA SANTÉ

Institut canadien de l'information scientifique et technique, Conseil national de recherches, Ottawa.

**Les** ressources et les services offerts par le Centre bibliographique des sciences de la santé ont été décrits dans le numéro 2 du bulletin de l'ABSC. Même si le rôle du CBSS demeure inchangé (coordination des services d'information pour les sciences de la santé à l'intérieur de l'ICIST et pour le pays) plusieurs détails ont changé au niveau des services et des ressources. En contribuant régulièrement à ce bulletin, j'espère vous tenir au courant des opérations du CBSS.

### Administration de MEDLINE

Depuis janvier 1978, l'entente avec la U. S. National Library of Medicine nous permet 75 codes d'accès et l'utilisation illimitée des bases de données MEDLINE.

Il y a présentement 58 centres MEDLINE canadiens et 4 demandes à l'étude. Les centres les plus récents ont été établis dans des hôpitaux et il semblerait que le fait que MEDLINE soit accessible sur place ait résulté en un accroissement de la demande de services bibliographiques de la part du personnel de ces hôpitaux.

Si vous désirez des information sur les bases de données MEDLINE, sur la façon de devenir un centre MEDLINE, ou l'adresse de centres MEDLINE offrant des services dans votre région, veuillez communiquer avec Mary Lynne East, Coordonnatrice de MEDLINE, CBSS.

### Répertoire des bibliothèques des sciences de la santé au Canada

Pour répondre à un besoin senti, le CBSS a entrepris de produire un répertoire complet des bibliothèques canadiennes de sciences santé. Nous avons commencé à compiler une liste d'adresses lisible par machine, en coopération avec l'ABSC, l'ASTED et l'AFMC. La deuxième phase de ce projet sera une enquête qui sera faite au début de 1979.

### Collection d'appoint pour Excerpta Medica

Excerpta Medica devant devenir accessible en direct à partir du 1<sup>er</sup> août, le CBSS a commencé à étudier la disponibilité des périodiques répertoriés dans Excerpta Medica à l'ICIST et au Canada. Ce projet est déjà bien avancé et je pourrai vous en communiquer les résultats dans le prochain numéro de ce bulletin.

Pour tout renseignement sur les programmes et services du CBSS, n'hésitez pas à m'écrire ou à me téléphoner à (613) 993-1604.

Eve-Marie Lacroix

Chef, Centre bibliographique des sciences de la santé

Canada Institute for Scientific and Technical Information,  
National Research Council, Ottawa.

The services and resources of the Health Sciences Resource Centre were described in Issue 2 (1977) of the CHLA Newsletter. Though the role of HSRC remains unchanged, coordinating information services for the health sciences within CISTI and nationally, many of the details of services have changed. By contributing regularly to the Newsletter, I hope to keep you up-to-date on the operation of the HSRC.

#### MEDLINE Administration

Effective January 1978, the quid-pro-quo agreement with the U.S. National Library of Medicine allows us 75 access codes and unlimited access to the MEDLINE data bases, i.e., we pay for what we use.

There are now 58 Canadian MEDLINE Centres, with 4 applications pending. The newest centres are being established in hospitals, and feedback to date indicates that the on-site availability of MEDLINE has resulted in an increased demand for bibliographic services from hospital staff.

If you would like information on the MEDLINE data bases, how to become a MEDLINE centre, or the address of a MEDLINE centre offering service in your area please contact Mary Lynne East, MEDLINE Coordinator, HSRC.

#### Directory of Health Sciences Libraries in Canada

In answer to an expressed need, HSRC has begun a project to produce a comprehensive directory of Canadian health science libraries. As a first step, we have begun to compile a machine readable mailing list, with the cooperation of CHLA, ASTED and ACMC. The second phase of the project is the survey, which will be done in early 1979.

#### Collection back-up for Excerpta Medica

With Excerpta Medica scheduled to become available on-line on August 1, HSRC has undertaken a project to determine back-up within CISTI and in Canada for the journals abstracted by Excerpta Medica. This project is well underway, thus I will be able to report the results in the next issue of the Newsletter.

For information on any of HSRC's programs and services, please write or phone me at (613) 993-1604.

Eve-Marie Lacroix  
Head, Health Sciences Resource Centre



LA BIBLIOTHEQUE DE L'UNIVERSITE LAVAL ET LES BIBLIOTHEQUES DES  
HOPITAUX D'ENSEIGNEMENT AFFILIES.

The relationship between Laval Science Library and the affiliated teaching hospitals' libraries has been existing for several years. Studies have been made in the early seventies to improve this relationship, but with little results. Still, the Science Library maintains its collaboration on some four specific aspects.

L'histoire des relations de la Bibliothèque de l'Université Laval - tout spécialement celles de la Bibliothèque Scientifique - avec les bibliothèques des hôpitaux d'enseignement affiliés date déjà depuis quelque temps.

Au cours des années passées, des efforts furent exercés afin d'élaborer de façon plus concrète les besoins et le rôle que devaient jouer les deux parties en cause, et ce, plus précisément, depuis le début des années soixante-dix. Un premier rapport d'enquête fut présenté en 1971 par la Bibliothèque de l'Université Laval. Trente-cinq recommandations furent soumises au Comité de liaison, formé de représentants de la Faculté de médecine de Laval et des hôpitaux affiliés. Une des recommandations demandait la création d'un réseau de bibliothèques pour le secteur des sciences de la santé, tout en donnant à la Bibliothèque de l'Université Laval le leadership dans cette question avec tous les pouvoirs pour agir en conséquence. Aucune suite n'a été donné à ce rapport. En 1973, le Rapport Bonneau et un Mémoire de l'ASTED recommandait encore une fois la mise en place d'une meilleure structure de coordination entre les bibliothèques impliquées. Malgré tous ces efforts, rien n'a été fait jusqu'à aujourd'hui, et le Ministère des Affaires Sociales ne semble pas très intéressé à développer une politique globale de régionalisation dans le secteur des sciences de la santé.

Il en demeure toutefois que la Bibliothèque Scientifique continue de collaborer avec les bibliothèques des hôpitaux d'enseignement affiliés en leur offrant les services suivant:

- (1) prêt entre bibliothèques et localisation occasionnelle des demandes;
- (2) recherches bibliographiques à l'aide des banques automatisées;

- (3) assistance aux bibliothécaires sur demandes;
- (4) envoie gratuit de la liste des périodiques du secteur scientifique.

De plus, devant la hausse constante des abonnements de périodique, il faudra sûrement penser à étendre cette collaboration au secteur du développement des collections.

Beaucoup a été fait jusqu'ici, mais beaucoup reste encore à faire. L'inertie du Comité de liaison établi en 1971 et le peu d'action des différents ministères provinciaux impliqués n'ont certe pas aider à la situation. Devant ce manque d'appui, la position de la Bibliothèque de l'Université Laval est demeuré stationnaire. Il faudra donc espérer que l'avenir nous réservera de meilleurs succès.

Philippe Lemay  
DRD  
Sciences de la Santé.



#### PREPUBLICATION INFORMATION

A KWOC (Key Word Out of Context) Index to the over 30,000 serials and numbered congresses held by the U.S. National Library of Medicine is due to be published in late 1978 or early 1979. This will be an annual publication available from the Government Printing Office at a cost of about \$20. Details of the exact date of publication and of the publication number will appear in this Newsletter at a later date.

B. C. Health Libraries Association  
Inaugural Meeting 1978

At a time when many associations are coming into being it is not totally surprising that health sciences librarians in B. C. decided to organize. So on May 31, 1978 a long anticipated event, the formation of the B.C.H.L.A., brought together health librarians, technicians, and assistants from Vancouver and surrounding areas. Invitations were extended to Public librarians and representatives from the Library Development Commission as well. A small but enthusiastic contingent from Victoria received special mention from the Association's interim President Bill Fraser in his few but well-chosen words of address. The inaugural meeting held at the College of Physicians and Surgeons in Vancouver, the location of the B. C. Medical Library Service, was primarily a late afternoon social gathering to acquaint fellow health information colleagues and enthusiasts.

The Association's Constitution commendably extends its membership to all persons or institutions interested in the aims of the Association whose purpose shall be to promote effective library service in the Health Sciences within B. C. by communication and mutual assistance. At present the Association receives its direction under an interim executive consisting of two persons: Bill Fraser (B.C.M.L.S.), President and David Noble (B.C. Cancer Control Agency), Secretary/Treasurer.

Of many interesting ideas discussed during the two-hour social function one was the concern of librarians from Public Libraries in being able to aid the lay public in its need for information in the health field. Hospital librarians have long been confronted with the problem of deciding policy for or against the use of their health collections by patients. Today, with the demand for more access to all kinds of information will foreseeably become part of an even greater debate, that of assuming responsibility for unlimited dissemination of health information to the general public.

The formation of the new Association is timely in view of the discussions held in Edmonton during the CLA Conference on the proposal of chapters for the C.H.L.A. The foregoing comments are speculative and may even be challenged at the next meeting, tentatively scheduled for October 1978, to coincide with the annual conference of the Pacific Northwest Regional Libraries Group (MLA) in Vancouver.

I am certain the members of the Association would agree that the future of the B.C.H.L.A. is filled with promise, but most of all it is committed to a lot of hard work, grassroots and--- to politics!!

(Miss) Donna Signori  
Collections Librarian  
University of Victoria Library

## Manitoba

### Continuing Education in Manitoba

In order to provide physicians in northern Manitoba with a direct link to new developments and trends in the practice of Medicine at the Health Sciences Centre in Winnipeg, the University of Manitoba's Northern Medical Unit (NMU) in conjunction with another university department, the Health Sciences Instructional Media Centre, has been sending video cassettes of Grand and Subspecialty Rounds to three northern hospitals closely associated with the NMU on a weekly basis for several months.

As a result of interest expressed by other rural physicians in audiovisual continuing education aids, and enthusiasm expressed by some of the northern physicians who currently make regular use of the video cassettes, the Extension Service of the Medical Library is attempting to make this service available to other groups of rural physicians in Manitoba. Tapes will be mailed, along with a return label, to physicians that have access to a video tape player.

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Following the spring meeting, the members of the executive of the Manitoba Health Libraries Association are:

President	Ms. Sandra Langlands Extension Librarian, Medical Library University of Manitoba, Winnipeg
Vice-Pres.	Mrs. Jill Brown Library Grace General Hospital, Winnipeg
Sec./Treas.	Mrs. Doris Pritchard Head, Dental Library University of Manitoba, Winnipeg
Past Pres.	Ms. Barbara Henwood Library Technician General Centre Library Health Sciences Centre, Winnipeg

REPORT ON THE ASTED JOURNEE D'ETUDE, 1978

The annual "journée d'étude" of the Section de la santé of ASTED (Association pour l'Avancement des Sciences et Techniques de la Documentation) was held at the Université de Montréal on Friday, May 12, 1978.

The day was devoted to the discussion of health sciences library networks and of less formal structures of inter-library cooperation. The guest speaker, M. Germain Chouinard, director of the library of the Faculty of Medicine at the University of Sherbrooke, presented a paper on the feasibility of formation of hospital library consortia in Quebec. He presented some interesting figures on the percentage of total budget allotted to the medical library in various Quebec hospitals.

During the lively discussion that followed, we were made aware of valuable health sciences collections in Quebec libraries. The library of the Ordre des Infirmières et Infirmiers du Québec (4200 Dorechester Blvd. W., Montreal H3Z 1V2) has a good collection of audiovisual materials on nursing which can be borrowed. The Federation des Medecins Ommipraticiens du Québec (1440 St. Catherine St. W., Montreal H3G 1R8) library keeps an up-to-date newspaper clipping file on all aspects of medicine in Canada.

The process of regionalization of hospital libraries in Quebec is starting to get under way. The hospitals affiliated with McGill have had an Association for some years; those affiliated with the Université de Montréal have now started one. Groups are also being formed in Quebec and in the Hull-Ottawa area. Reciprocal exchange of free photocopies of articles has been one of the first steps taken.

The meeting closed with a visit to the Bibliothèque de la santé of the Université de Montréal.

Elaine Waddington, présidente  
Section de la santé  
ASTED

The annual congress of ASTED will take place at the Hotel Loew's-La Cité in Quebec City on October 25-28, 1978. The guest speaker at the luncheon given by the Section de la Santé will be M. Robert Lavoie, director of the Conseil Régional de la Santé et des Services Sociaux of the Laurentides-Lanaudière region.

Rapport de la journée d'étude de la section  
de la santé de l'ASTED, 1978

La journée d'étude annuelle de la section de la santé de l'ASTED a eu lieu à l'Université de Montréal, vendredi le 12 mai, 1978.

La journée a été consacré à la discussion des réseaux de bibliothèques de santé québécois et d'arrangements moins structurés de coopération entre bibliothèques. Le conférencier, M. Germain Chouinard, directeur de la bibliothèque de la Faculté de médecine de l'Université de Sherbrooke, a présenté une adresse au sujet de la possibilité de la formation de consortia de bibliothèques d'hôpitaux au Québec. Il a donné des chiffres bien intéressants à propos de la proportion du budget global d'hôpital donnée à la bibliothèque médicale.

Pendant la discussion chaleureuse qui suivait, nous nous sommes faits conscients de ressources invaluables dans certains bibliothèques de santé québécois. La bibliothèque de l'Ordre des Infirmières et Infirmiers du Québec (4200 ouest Boulevard Dorchester, Montréal H3Z 1V2) a une bonne collection de matériaux audio-visuelles au sujet de nursing, qui est disponible. La bibliothèque de la Fédération des Médecins Omnipraticiens du Québec (1440 ouest rue Ste - Catherine, Montréal H3G 1R8) constitue un dossier de coupures d'articles de journaux et de périodiques qui paraissent au Canada dans le domaine de la médecine.

La conception de réseaux de bibliothèques médicales à travers le Québec commence à se dessiner avec plus de précision. Les hôpitaux affiliés à l'Université McGill sont déjà formés en association depuis plusieurs années, et ceux affiliés à l'Université de Montréal sont en train de former une association semblable. Des groupes similaires commencent à se réunir dans les régions de Hull et de Québec. L'échange de photocopies gratuites est maintenant un fait accompli.

La réunion s'est terminée par la visite à la bibliothèque de la santé de l'Université de Montréal.

Elaine Waddington  
présidente  
Section de la santé  
ASTED

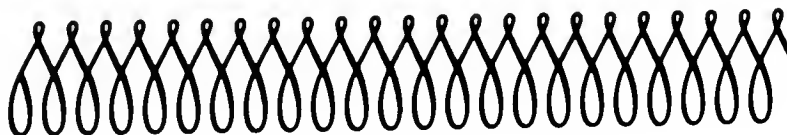


Le congrès annuel de l'ASTED aura lieu à l'Hôtel Loew's-La Cité à Québec le 25-28 octobre 1978. Le conférencier au déjeuner-causerie de la Section de la Santé sera M. Robert Lavoie, directeur-général du Conseil régional de la santé et des services sociaux de la région Laurentides-Lanaudière.

## GAPS, WANTS LISTS & DUPLICATES

Members are reminded of the services offered by the Canadian Book Exchange Centre of the National Library. The Centre accepts any duplicate or unneeded material (address for shipping is 85, Bentley Avenue, Ottawa.) The Centre also produces lists of serials available for the cost of shipping and will accept "wants lists" on 3" X 5" cards. Information on the Centre can be obtained from Canadian Book Exchange Centre, National Library of Canada, 395 Wellington Street, Ottawa K1A ON4.

Members are also reminded of the existence of the Universal Serials and Book Exchange based in Washington, D.C. Though there is a charge for publications supplied this is considerably less than that made by commercial dealer and USBE has a very large amount of health related material (In 1976 Member Libraries sent USBE over 300,000 medical publications). Information on becoming a Member of USBE (\$25.00 per year) is available from USBE, 3335 V Street N.E., WASHINGTON, D.C. 20018.



## PUBLICATIONS

### National Library of Medicine Classification 4th edition 1978

The 4th edition of the NLM Classification was published in August 1978. This is an essential tool for all libraries using the NLM Classification and it has been extensively revised using MeSH subject headings. Copies may be ordered from the Superintendent of Documents, U. S. Government Printing Office, Washington D. C. 20402. The price outside the USA is \$11.90 and the stock number is S/N 017-052-00193-1. Payment must accompany the order and service is improved if a return mailing label is attached.

## NEWS

### CANADIAN GROUP, MLA

On Tuesday morning, June 13th, the Somnabulist Society of Canada met at 7 a.m. for breakfast. Forty-two or forty-three bodies presented themselves (the count was a little hazy, but the conversation was lively). Each table was challenged to report the most exciting library event in their district during the year, and a number of news items came to the surface which have never before reached the ears of the CHLA/ABSC Newsletter Editor.

For some it was MEDLINE, or a new library, or a grant; but for most it was the development of local library groups, sparked by the CHLA/ABSC. It is to be hoped that this early morning enthusiasm can be sustained.

Anna Leith, incoming Chairman, hosted. Martha Stone was elected the new Chairman-Elect. M. A. Flower became the Group's nominee to the Nominating Committee of MLA. And there was enough coffee.

### HOSPITAL LIBRARIANS PLEASE NOTE

A Checklist for Staff Library Services was published in the CHLA/ABSC Newsletter 5:6-10, Spring, 1978. This Checklist was devised by a Committee of the Ontario Medical Association for the use of accreditation teams from the Canadian Council on Hospital Accreditation. We undertook to report to the OMA the reactions of our membership to this document.

So which of you will speak up? We know you are out there. We have heard you mutter about the sideline view of accreditation surveys of your hospitals, as seen from the library. Now is your hour.

Due to an impassioned plea from the Chair at the Annual Meeting of CHLA/ABSC in Edmonton, we have two comments from Winnipeg. Where are the rumblings from Ontario? B. C. ? the Prairies? the Maritimes? Quebec? Dig out the Checklist and work it through. Make this your Labour Day resolution. Mail before September 30th. This is called Participation. M. A. Flower, President, CHLA/ABSC, Nursing Library, McGill University, 3506 University Street, Montreal, Quebec. H3A 2A7.

EVA BORDA, of the Health Science Library, University of Western Ontario recently attended a course on "Teaching Techniques for Medical Librarians" (See Newsletter #6) in Boston. Further information on this course and details of future ones can be obtained from Carole Lipsitt, Education Specialist, NERMLS, Francis A. Countway Library of Medicine, 10 Shattuck Street, Boston, Mass. 02115.

The Biomedical Bibliography and Biomedical Librarianship courses given by Dr. Pauline Vaillancourt at the McGill Graduate School of Library Science during June/July were a great success. They attracted not only library school students but also a number of hospital librarians and staff of the McGill University libraries. They will certainly have helped prepare anyone wishing to write the MLA certification examination.



LINDA SOLOMON, of the Canadian Hospital Association, with the help a summer student is compiling a bibliography of selected materials for the health administrator. The bibliography, will be supplemented by a list of films and cassettes, all of which will be available from the Canadian Hospital Association. The publication will be available for sale in the fall of 1978. This work was made possible by HASEPS (Health Activities Summer Employment Program for Students) grant from Health and Welfare Canada.

MR. P.J. FAWCETT, has recently had an article entitled "Personal Filing Systems Revisited" accepted for publication in the Ear Nose and Throat Journal. Mr. Fawcett is the Public Services Librarian, Medical Library, University of Manitoba.

#### CATALOGUING NEWS

In 1978, NLM has adopted the following series authority: DHEW (NIOSH) publication no... formerly DHEW publication no. (NIOSH)..., since the former now appears on the NIOSH publications. This will create some difficulty for people using the public catalogues, as the DHEW series will no longer all file together.

WHAT IS THE CORRECT NLM CLASSIFICATION NUMBER FOR AUDIOVISUAL CATALOGUES? NLM classifies catalogues of audiovisual materials in the appropriate schedule using form number 18. Some of the titles shown in the NLM current catalog have the letter "Z" preceding the class number. This is incorrect. (Memo from NLM April '78).

#### COLLEAGUES

MS. PATRICIA BUCZKOWSKI, replaced Gail Wise as Library Technician (as of August 1st) at the Ontario Medical Association.

MRS. DENISE POIRIER, Librarian Medical Library, St. Boniface Hospital will be the Manitoba Health Libraries Association correspondent for the CHLA/ABSC NEWSLETTER as of the next issue.

We extend best wishes to the new bride, MRS. PAMELA A. AVIS POLLOCK (formerly Pamela A. Avis) of the Ontario Medical Association.

MS. SUSAN ROGERS, a graduate of the University of Minnesota School of Library Science, will be the volunteer coordinator of the union list of serials project undertaken by the Manitoba Health Libraries Association. She will be based at the Medical Library, University of Manitoba.

MS. ELIZABETH WOODWORTH, has been appointed librarian at the British Columbia Ministry of Health as of July 4, 1978. She was formerly with the Ministry of Recreation and Conservation.

## PUBLICATIONS

"Health Computer Applications in Canada"/ L'Ordinateur au service de la santé canadienne, est un ouvrage de consultation complet sur les utilisations et les utilisateurs des ordinateurs dans le domaine de la santé canadienne. Il paraît chaque année sous le patronage de l'Association médicale canadienne et de l'Association canadienne pour l'avancement de l'informatique dans le domaine de la santé; il est publié par le Bureau d'informatique dans le domaine de la santé, 410 Ouest, avenue Laurier, ensemble 800, Ottawa, Ontario K1R 7T6. Le volume V est maintenant disponible à \$75.00.

"Health Computer Applications in Canada"/L'Ordinateur au service de la santé canadienne, is a comprehensive reference guide to uses and users of computers in the Canadian health field. It is published annually under the sponsorship of the Canadian Hospital Association, the Canadian Medical Association and the Canadian Organization for Advancement of Computers in Health, by the Health Computer Information Bureau, 410 Laurier Avenue West, Suite 800, Ottawa, Ontario, K1R 7T6. Volume 5 is now available at \$75.00.

Nutrition of the Aged. 1978. Proceedings of a symposium held under the sponsorship of the Nutrition Society of Canada and the Monarch Fine Foods Company, in Calgary, Alberta, June 1977. Nutrition Society of Canada. 90p. Dr. T. K. Murray, Bureau of Nutritional Sciences, Food Directorate, Health Protection Branch, Health & Welfare Canada, Ottawa, Ontario. K1A 0L2. FREE.

McGill University has recently published a listing of Serial Holdings in their Botany/Genetics, Dentistry, Medical and Nursing Libraries. This listing contains approximately 6000 titles published since 1850 with full bibliographic information. Available for \$20.00 (prepaid) from: Medical Library, McGill University, 3655 Drummond Street, Montreal, Québec. H3G 1Y6.

"The Women & Health/Mental Health" collection of the former Women's History Library has been published on microfilm by the Women's History Research Center of Berkeley, CA. The microfilm is 14 reels (\$32/reel) of materials on women's physical and mental health and illnesses, sex roles, biology and the life cycle, sex and sexuality, birth control, Black and other Third World women, and more. For further information, contact the Center: Women's History Research Center, 2325 Oak Street, Berkeley, CA. 94708.

National Library of Medicine News. If your library wishes to receive this monthly publication which contains much of interest to all those involved in health libraries write to the following address: Office of Inquiries and Publications Management, National Library of Medicine, 8600 Rockville Pike, Bethesda, MD. 20014.

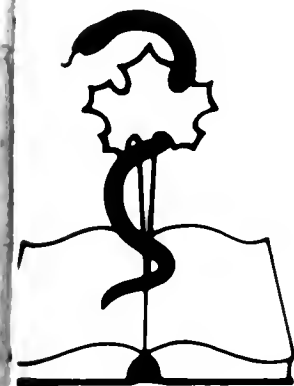




# CHLA

# ABSC

# NEWSLETTER



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NO. 8

ISSN 0700-5474

WINTER, 1978

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This will be the last time you see this cover.

This may also be the last CHLA/ABSC Newsletter.

The choice is yours, beginning on page 3...





CHLA/ABSC NEWSLETTER  
No. 8 1978

Le CHLA/ABSC Newsletter est publié bimestrelle par la Association des Bibliothèques de la Santé du Canada. Un abonnement à cette publication fait partie de votre cotisation annuelle en tant que membre de l'ABSC. Pour devenir membre et, pour recevoir cette publication il faut écrire à: Alan MacDonald, Trésorier, ABSC/CHLA, W.K. Kellogg Health Sciences Library, Dalhousie University, Halifax, Nova Scotia B3H 4H7.

The CHLA/ABSC Newsletter is published bimonthly by the Canadian Health Libraries Association. Subscriptions are available with membership in the Association. Correspondence regarding membership or subscriptions should be addressed to: Alan H. MacDonald, Treasurer, CHLA/ABSC, W.K. Kellogg Health Sciences Library, Dalhousie University, Nova Scotia B3H 4H7.

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## INFORMATION FOR CONTRIBUTORS

The CHLA/ABSC Newsletter is a vehicle for providing increased communications among all health libraries and librarians in Canada, but has a special commitment to reach and assist the smaller, isolated, health library. Feature length articles are accepted describing a wide range of health library topics: organizations, services, networks and consortia, surveys, state-of-the-art reviews. Brief, news-length items accepted include: how-we-did-it reports, news about workshops and continuing education opportunities (forthcoming or recently held), job announcements, new publications, news about colleagues and libraries, miscellaneous items. Contributors should consult recent issues for examples of types of material and general style. Bibliographic references should conform to the format used in the Bulletin of the Medical Library Association, whenever possible. Submissions in French or English are welcome, preferably in both languages. Contributions should be addressed to: P.J. Fawcett, Editor, CHLA/ABSC Newsletter, Medical Library, University of Manitoba, 770 Bannatyne Avenue, Winnipeg, Manitoba, R3E 0W3.

Deadline for the next issue is: 19 January, 1979.

## RECOMMANDATIONS AUX CONTRIBUANTS

Le but du CHLA/ABSC Newsletter est de rendre la communication entre toutes les bibliothèques Canadiennes de la santé et les bibliothécaires plus grande mais il veut spécialement rejoindre et aider les bibliothèques isolées et de moins d'envergures. Nous acceptons tout article traitant de tous les aspects bibliothéconomiques du domaine de la santé: organisations services reseau et consortium, enquêtes exposés de synthèse. En résumé les articles nouvelles acceptés peuvent comprendre: des résumés sur la façon dont on est arrivé à trouver une solution a un projet, nouvelles sur des ateliers et des cours d'éducation permanente (à venir ou passés) postes vacants, nouvelles publications, nouvelles sur des collègues et bibliothèques, et tout autre sujet. Pour les intérêts, le genre d'article et le sujet publié dans les derniers numéros peuvent vous servir d'exemples. Il serait préférable de suivre si possible le format utilisé dans le Bulletin of the Medical Library Association lorsque vous avez des références bibliographiques à citer a la fin de votre article. Des articles Français ou Anglais seront les bienvenus mais il serait souhaitable de les écrire dans les deux langues. Vous devez faire parvenir vos articles à: Patrick Fawcett, Editeur, CHLA/ABSC Newsletter, Medical Library, University of Manitoba, 770 Bannatyne Avenue, Winnipeg, Manitoba, R3E 0W3.

La date limité pour le prochain numéro est: 19 Janvier, 1979.



## FROM THE EDITOR

- PJ Fawcett

There is an excellent reason for the cheap dramatics on the cover of this issue.

Assuming the editorship of a publication, especially during its formative years, is always a delicate situation. A new editor who adds but little to his journal and leaves nearly every form and crease unchanged is obviously lacking in imagination, style or ideas. A newcomer who revises the publication from cover to cover and even contemplates the unspeakable horror of changing its title is regarded with justifiable scorn, and abuse is heaped upon his dynastical tendencies.

Yet a publication has to continually evolve and grow if it is to survive. What Dick Fredericksen began in April, 1976 has grown considerably through a title change and six dynamic issues. Issue #7 originated in Montreal with Crawford and Waluzyniec and introduced the wraparound cover. And issue #8 is the first to come from Manitoba and also introduces a few more refinements in format and style.

As the Association continues to grow, its journal takes on an increasing significance as the prime communication forum for the long string of members between our oceans. It is with growing embarrassment then that your national publication has a unilingual, English title. It is almost as embarrassing as being a librarian and openly advocating a serial title change. The message on the cover then is two-fold: your publication will continue to evolve, for better or for bland, depending upon your involvement. The title may or may not change, depending upon your response.

Are you content with the title CHLA/ABSC Newsletter or do your preferences lean towards a new one? If the latter, what would you suggest as a name for your journal? Would you like to see a new bilingual title, and if so, what? Or would you prefer a unilingual one (Acta Medica Bibliotheca Canadensis, *exemplia gratia*) or even a non-lingual one? (For some demented reason, calling the publication merely 0700-5474 really appeals to me. This last fact alone should generate dozens of suggestions from the membership.)

Regardless of its title, the Newsletter will introduce volume numbering and continuous paging in its first issue of 1979. This will also mark the beginning of bimonthly publication and annual indexes. And, barring acts of God or Canada Post, we will also carry a retrospective index to the first eight issues of the Newsletter, plus its predecessor Can Group News, in our next issue.

The decision on the journal title, retaining or changing (and to what) will be made by the Executive in reflection upon your responses. Ideally, the new journal cover, regardless of title, will be ready for the next issue due in February. Since our present copy deadling is 19 January, and since I also entertain ambitions of having the new cover professionally designed, I will ask that all suggestions, rejections, negations and heated invective be sent to me or a member of the Executive before Christmas. Given the traditional exigencies in our pony express, I would urge you to reply as soon as possible.

The face (sic) of the Newsletter is in your hands.

## THE PRESIDENT REPORTS

- M.A. Flower

The Executive Committee of CHLA/ABSC held its fall meeting in Toronto on 16 October, 1978, since the majority of the members expected to be in Toronto at that time. The meeting was held in conjunction with the Annual Meeting of the Association of Canadian Medical Colleges, which includes a meeting of their Special Resource Committee on Medical School Libraries. Your President enjoyed the privilege of reporting to that Committee this year on the activities of CHLA/ABSC, as part of a series of reports on health library affairs across Canada.

The chief impression which came out of the opportunity to share these reports was an increasing realization of the national role which CHLA/ABSC can play in giving voice to the general concerns of health sciences library personnel everywhere in Canada. Ours is the only organization which speaks for all the various kinds of health libraries in this country. Concerns which have been mounting for a long time have gone unexpressed in any effective way, for lack of an adequate forum.

Advisory Committee to CISTI/ICIST

The Advisory Committee to CISTI/ICIST concerning the Health Sciences Resource Centre is a case in point. Frances Groen has provided the CHLA/ABSC with a report on that Committee, of which she is Chairman. The report appeared in the CHLA/ABSC Newsletter, No. 7, pp. 29-37, Fall, 1978, and it is important that the membership of CHLA/ABSC should recognize the opportunity that is available to us to shape the Health Sciences Resource Centre as cooperating users. We must consider what it is that such a national Centre should or could be doing for us in support of the services we are offering our own users. The CHLA/ABSC has three representatives on the Advisory Committee to CISTI/ICIST. If they are to represent our needs accurately, we are the ones who must keep them informed.

Consequently, we are in process of developing a questionnaire which addresses some of the known needs of our members, aware as we are that library people are addicted to questionnaires! When this one reaches you, we urge you to mark it up and send it in. The Advisory Committee has a winter/spring relationship with CISTI/ICIST; it meets in January and June. Information gathered from the questionnaire can be forwarded to our representatives for consideration at one of those meetings.

Constitutional Revision

As is true at this time of some of our leading provincial and federal politicians, the uppermost concerns at the recent October meeting of the CHLA/ABSC Executive Committee revolved around the current revision of the Association's Constitution. In this connection, the type of organization we are developing came under discussion, and the kind of membership that this development implies. It would seem that the CHLA/ABSC, more than most such organizations, is really a congregation of individuals who are looking for contacts in their own field of endeavour. For them, the Association tends to provide a relay point around which they can make contact with others in the next town, or the next province. The vitality of the Association comes from these individual members and their

enthusiasms. It is a personal commitment and the Association will grow only in relation to the input from its individual personal members, either directly or as part of an active local Chapter. The CHLA/ABSC is not, and is not likely to become, a large impersonal clearing house supported for its usefulness by an array of institutions in the health sciences field. This distinction has become apparent enough to become part of the new Constitution on which the membership will vote this fall.

Another decision which has been made in connection with the discussion of the Constitution is an undertaking to accelerate the progress of the CHLA/ABSC toward formal incorporation. This will facilitate our dealings with other organizations, including financial institutions, and will provide an appropriate structure against which to develop the CANHELP Project. The new scenario of an end-of-the-year mail vote on the Constitution still holds and the Constitution Committee is up to its elbows in "whereas's".

### Other Activities

Membership is holding at the peak level reached in 1977/78, and the handsome new brochure designed by our Membership Chairman, Bill Fraser, can only enhance the stature of the Association. We now need only 50 new members to reach our initial membership target. Why don't YOU participate in the drive? One member per member!

Our first publication, originally called Guide to Canadian Health Sciences and Sources, is moving steadily forward under the able editorship of Martha Stone of Ottawa and Dorothy Sirois of Montreal. With a change in format and a considerable broadening of scope, it will emerge as an entirely new publication. The target date is the Spring of 1979 and the appearance of this publication will usher in, we hope, a new era of Canadian resources for Canadian health libraries, imprint CHLA/ABSC.

Toronto provided us with its most brilliant fall weather this time. Coupled with the warm hospitality offered by our colleagues at the University of Toronto, it seemed auspicious for our endeavours.

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### LE RAPPORT DU PRESIDENT

- M.A. Flower

Cet automne, le conseil de direction de l'ABSC a tenu sa réunion à Toronto, le 16 octobre 1978, car la majorité de ses membres devait s'y trouver à ce moment là. Cette réunion se tenait en même temps que la réunion annuelle de l'Association des Facultés de Médecine du Canada, à l'intérieur de laquelle se tenait une réunion de leur comité consultatif des Bibliothèques des Facultés de Médecine. Cette année, votre Président a eu le privilège de présenter un rapport auprès de ce comité sur les activités de l'ABSC, un rapport parmi tout d'autres sur la situation des bibliothèques de la santé à travers le Canada.

La première impression produite, suite à cette occasion de pouvoir partager avec les membres du comité les points de divers rapports, fut une

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Libraries et le présidente de l'ABSC.

forte réalisation du rôle que peut jouer l'ABSC sur le plan national, en exprimant de façon générale les soucis du personnel des bibliothèques des sciences de la santé du pays. Notre organisation est la seule qui représente toutes les bibliothèques de la santé du pays. Les doutes, qui depuis quelques années se font de plus en plus pressants, n'ont pas été exprimés à cause d'un manque de représentation.

#### Comite consultatif de l'ICIST

Le comité consultatif de l'ICIST sur le Centre bibliographie des sciences de la santé est un cas d'espère. Frances Groen, Présidente du comité, a remis à l'ABSC un rapport sur ledit comité. Ce rapport a paru dans le bulletin de l'ABSC, n° 7, 29-37, à l'automne, 1978. Il est important que nous, les membres de l'ABSC, en tant qu'usagers en coopération, réalisions l'occasion qui nous est offerte de pouvoir former le Centre bibliographie des sciences de la santé. Il nous faut étudier ce qu'un tel centre national peut ou doit faire pour appuyer les services que nous offrons à nos usagers. L'ABSC a trois représentants au comité consultatif de l'ICIST. C'est à nous de les tenir au courant, si nous voulons qu'ils puissent exprimer nos besoins de façon précise.

Ainsi, nous sommes sur le point d'établir un questionnaire qui traitera des besoins comme de nos membres....nous savons combien le personnel des bibliothèques est friand de questionnaires! Lorsque vous le recevrez, veuillez le remplir et le remettre au plus tôt. Le Comité consultatif de l'ICIST se reconte deux fois par année, l'hiver au mois de janvier et le printemps au mois de juin. L'information obtenue à la suite de ces questionnaires pourra être expédiée à nos représentants, afin qu'ils présentent les faits à l'une de ces réunions.

#### Revision de l'acte constitutif

Tout comme certains de vos leaders provinciaux et fédéraux, le principal souci de l'ABSC, lors de sa réunion d'octobre, concernait la révision actuelle de son acte constitutif. Ainsi, nous avons discuté du genre d'organisation que nous tentons d'exploiter et des types de membres qui y sont affiliés. Il semble que l'ABSC, contrairement à plusieurs organismes du genre, est constituée essentiellement d'un rassemblement de personnes privées qui recherchent des contacts avec des gens qui travaillent dans le même domaine. L'Association représente pour eux un endroit d'ou l'on peut communiquer avec des personnes qui résident dans une autre ville ou dans une autre province. L'Association tire sa vitalité de l'enthousiasme de chacun de ses membres. Il s'agit là d'un engagement personnel de chacun, et l'Association ne pourra continuer de grandir qu'avec la participation active de chaque membre, que ce soit sur le plan personnel ou encore par l'entremise des activités d'un secteur local. L'ABSC n'est pas et ne sera probablement jamais un énorme bureau central d'information subventionné par une gamme d'institutions du domaine des sciences de la santé. C'est une distinction qui est devenue suffisamment apparente pour qu'on l'inscrive dans le nouvel acte constitutif. Les membres de l'Association passeront au vote sur la question du nouvel acte dès cette automne.

Une autre décision prise lors de la discussion sur le nouvel acte constitutif est l'accélération du processus de constitution de l'ABSC en société commerciale. Cela facilitera nos rapports avec les autres organisations, y compris les institutions financières, et nous permettra d'avoir une structure appropriée pour l'élaboration du projet CANHELP. Le scénario établi pour le

vote sur l'acte constitutif, qui se fera par le courrier à la fin de l'année, tient toujours. Le Comité pour l'établissement de l'acte consultatif en est à ses derniers "attendu que".

#### Autres activités

Notre affiliation tient toujours au nombre de membres que nous avons atteints durant l'année 77/78. La nouvelle brochure conçue par M. Bill Fraser, président des membres de l'association, est des plus attrayantes et elle ne pourra qu'accroître la réputation de l'ABSC. Il ne nous manque plus que 50 nouveaux membres pour atteindre l'objectif que nous nous étions fixé au début. Pourquoi ne participeriez-vous pas? Un nouveau membre pour chaque membre de l'ABSC!

Notre première publication, intitulée Guide aux sciences de la santé, service d'information et sources, va bon train grâce à l'expertise de nos éditeurs, Martina Stone d'Ottawa et Dorothy Sirois de Montréal. Etant donné qu'on en change le format et qu'on touchera à beaucoup plus de sujets, il s'agira en réalité d'une toute nouvelle publication. Le guide doit paraître à l'automne 1979, et nous espérons que cette publication annoncera une nouvelle ère en ce qui concerne les ressources canadiennes pour les bibliothèques de la santé. La rubrique de l'éditeur sera ABSC.

Cette fois-ci, la ville de Toronto nous a accueillis par une température automnale splendide. En faits la température se maria bien à l'hospitalité que nous ont offert nos collègues de l'Université de Toronto. Serait-ce un bon présage?

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#### CHLA/ABSC ANNUAL MEETING 1979: Input Invited

The next CHLA/ABSC annual meeting is currently in the planning stages. Venue for the meeting will be Ottawa, Ontario, site of the 1979 CLA Convention. This year, the Executive Committee is considering the merits of a two-day meeting with the dates tentatively set as Wednesday-Thursday, 13-14 June, 1978.

The move to a two-day programme would allow for an entire day to be devoted to educational/instructional purposes: workshops, seminars, continuing education courses, etcetera. With this in mind, the Executive is requesting input from the membership as to what they would like to see in the way of Education Sessions. Arrangements might be made with the Medical Library Association for the provision of CE courses, or the Health Sciences Resource Centre at CISTI could be approached to coordinate training sessions. CHLA itself might seek to provide specific courses if a sufficient demand exists.

What courses would you like to see provided? What format would you be interested in? The Executive would like to hear from you.

(For information, the continuing education courses currently available through the Medical Library Association are listed on page 24.)

## THE MLA CERTIFICATION EXAMINATION: An Overview

- Geoffrey R. Pendrill

Since 1950, the Medical Library Association has operated a system for the certification of medical librarians. Originally, it provided for three levels of expertise, but these have now been reduced to a single category. The previous admission requirements also specified either the successful completion of an examination or success in medical library courses at an accredited library school; now an M.L.S. degree is required (without any specific requirement as to courses) together with successful completion of a certification examination, plus the additional requirement of "two years of post-library-degree experience in a health sciences library at the professional\* level" (p.16).\*\* Once granted, certification must be maintained by re-certification at 5-yearly intervals, either by accumulating credits through attendance at continuing education or other approved courses, or by taking the examination afresh.

The examination itself is of the multiple-choice type, containing 100 questions to be answered in four hours. Its purpose is to test for "the competence require of entry-level health science librarians within the first two years on the job" (p.6). Elsewhere in the Certification booklet, it is stated that "the examination tests for knowledge and abilities which may have been acquired on the job" (p.8).

The competencies to be tested are categorised into the three library functions of Public Services, Technical Services, and Administration. These in turn are broken down into various subfunctions, as follows:

## I. PUBLIC SERVICES

1. Reference: manual bibliographic searches, statistical information searches, historical information searches, audiovisual information searches, information service for research team, computerised bibliographic searches.
2. Inter-library loan.
3. Inter-institutional sharing.
4. Circulation: quantitative measure of circulation records, organisation of desk services.
5. Library user instruction.

## II. TECHNICAL SERVICES

1. Ordering, typing orders, vendor relationships.
2. Selection policy, users' needs, evaluation of materials, consulting with faculty.
3. Business procedures, invoices, budget and fiscal control.
4. Standing orders and claiming.
5. Backfiles and out-of-print books, replacement policies

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\*Defined as "actual participating professional experience in library duties of the type described as professional in the Descriptive List of Professional and Non-professional Duties in Libraries of the American Library Association." (p.17)

\*\*Page references in this section are to the booklet on certification issued by the Medical Library Association in 1978.

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6. Classification schemes.
7. Serials cataloguing.
8. Media materials.
9. Analytics.
10. Cataloguing copy, proof sheets, CIP.
11. Subject headings.
12. Card reproduction, ordering catalogue cards.
13. Establishes public catalogue, shelflist, and related authority files.
14. Establishes binding policy.
15. Binding standards.
16. Gathering of journals.
17. Automation of technical services.
18. Handling of donors.
19. Serials control.

### III. ADMINISTRATION

1. Plans budget or prepares preliminary budgeting information for review.
2. Prepares routine or special reports.
3. Sets library goals within the context of the larger institution.
4. Formulates policies to achieve goals.
5. Organises, coordinates, manages and evaluates the operations of the library.
6. Evaluates space allocations for new and/or current space.
7. Selects, trains, evaluates employees, initiates personnel transactions and supervises work of employees.
8. Communicates effectively to others in groups and committees.

The individual functional areas contain respectively 41, 26 and 40 items under these subheadings, although the percentages of examination questions allocated to them are respectively 36%, 30% and 34%.\*

The questions were developed by panels for the three primary functional areas, who had to visualise them in terms of the following environments:

- a. Large academic libraries
- b. Small academic libraries
- c. Large teaching hospital libraries
- d. Small hospital libraries
- e. Special libraries (eg: pharmaceutical companies).

A panel would invent a 'situation' appropriate to a particular environment (such as a 500-bed teaching hospital) and then produce a scenario specifying the series of steps by which a competent medical librarian would respond to the situation. From these scenarios, it would then extract the skills needed for the performance of each step, after which it decided upon the proportion of the examination to be allocated to each area of competency. Sets of questions were then written and tested on two sample populations: experienced medical librarians and students with library experience but without specifically medical library experience. The aim here was to assess the validity of the test questions to isolate competencies that were specifically related to a health sciences setting. The reliability figures for the tests were .83 and .89, which was considered good.

Unsuitable questions were weeded out or modified as a result of these pre-tests and 120 of the original 300 questions were selected and then

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\*In the first examination, these were actually 35%, 30% and 35%.

evaluated in order to establish the pass level. This was one by rating each question on a scale of 1 to 10 in respect of the importance of the knowledge required to answer it for competence in the field. The minimum passing level was based on the lowest rating. For the first examination, 100 questions were selected and minimum passing levels were established for each area, as follows:

Area	Minimum Passing Level (%)	Mean Score
Public Services	51	67
Technical Services	54	66
Administration	56	76
Overall	52	70

Of the 77 candidates who sat the first examination, 63 passed. Ten of the 14 failures were due to inability to meet the minimum passing level in one or more areas, as the requirement is that a passing mark must be obtained in each individual area, not merely in the examination as a whole.

The purpose of the Certification examination is to assess a librarian's actual performance in the field, as opposed to ability for factual recall, i.e. it is competency-based rather than knowledge-based. It is also designed to test minimum competency over all areas of the field.

Because of the limited data bank of questions and the nature of the multiple-choice examination, a tight security blanket is maintained over the whole operation. The question papers are seen only by the Association's Director of Education, and by the candidates (who receive them in sealed envelopes and must return them sealed at the end of the examination). Even the invigilators do not see the questions, and neither does any member of the examination panels see the whole set. It is therefore difficult to judge their merits from the 'outside' other than on the basis of a specimen question from each area, published in the Certification booklet (pp.7-8) and reproduced at the end of this paper.

Examining the first of the sample questions, one might notice immediately that the reason for the hospital librarians' dissatisfaction with the arrangements under which they obtain MEDLINE service are not stated. It might be cost, as details of costs are mentioned in the question. It might, however, be delays in receipt, as details of the distances involved are also given. As a result, there is a degree of ambivalency which does not make the correct answer (#4) necessarily uniquely so; one could envisage (#5) as being equally valid as a first consideration in the identical circumstances.

Rather similar comments could be made about the second question. The correct answer (#4) might not be the least important consideration if the best system commercially available were not compatible with the facilities available to the library. (One recalls how often the original MEDLARS system had to be re-programmed to run on computers other than the NLM's Honeywell!) On the other hand, (#2) might be least important consideration because the necessary specialised personnel were already available in the university's computing centre.

In the case of question 3, the problem of ambiguity does not seem to arise. Here the relationship between compact shelving and floor loading factors is a very direct one which overrides all other considerations, and the examinee should not be subjected to a frenzy of indecision in reaching a choice.

It may seem unfair to judge 300 questions on the basis of this 1% non-random sample, but it is the only evidence available. The necessity of making only a single choice when answering implies that the examinee should not



be unfairly handicapped in doing so, and this means that he should be given enough information to arrive at the correct answer. On the other hand, there were complaints at the Annual Meeting of the Medical Library Association about excessively long and detailed questions and the time required to read them. However, it would seem better for the Examination Committee to err in this direction than otherwise, if the questions are to perform their function effectively. Moreover, when replying to this criticism, the Director of Education stated that most people taking the examination finished well within the allowable time; this may be an indication that the majority of examinees could cope with additional detail in the questions if it were desirable.

With regard to the overall content of the examination, the 107 specific competencies relating to the primary functions and their sub-functions allow it to be extremely comprehensive, and the competencies can be seen to be related to the general exit knowledge of the graduating M.L.S. student. Apart from two items that specifically mention the National Library of Medicine classification and Medical Subject Headings, the competencies are not specifically 'medical', which means that a certain orientation has to be given to the examination questions in order to limit the context to the health sciences. One might, however, query the degree of involvement in some of the stated activities of "entry-level health sciences librarians within the first two years on the job." This applies most of all to the administrative area, where a beginning librarian might have very little opportunity for practical experience in such things as budgeting, personnel selection and supervision, and library planning. Even the keenest young librarian might be very dependent on the far-sightedness and goodwill of departmental heads and/or the chief librarian for such opportunities. One can foresee here that the more perceptive chief librarians will set up a system resembling a rotating internship for new recruits who have a serious intention of taking the Certification examination.

But what of the staff member in a small hospital library? In this case it is true that with fewer people to do the work there is less departmentalism and greater staff flexibility, providing enhanced opportunities for participating in a wider range of activities. But this may in turn be offset by a generally lower level of activity that would deprive the candidate of first-hand experience of such activities as working with a research team, or of "consulting with the faculty", or of learning about the eccentricities of esoteric serial publications, or of becoming familiar with the quirks of automated systems. These are things that cannot readily be learnt at second hand, whether by visiting other libraries, listening to talks or lectures, or reading books and journals.

Certainly the Examination Committee has an unenviable task if it is to develop questions that will truly assess competency rather than book knowledge, and that will be equally fair to candidates from all types of institutions. The 81% pass rate, together with the histograms of the candidates' performance in the first examination, suggest that it has done a good job (although one would need further information about the backgrounds of the candidates to be certain). It is to be hoped that full analyses will be made available by the Association for the first few years of the examination so that its effectiveness can be properly assessed.

Examination questions follow.

## Sample Examination Questions

All questions in the examination are of the objective, multi-choice type. The following sample questions are illustrative of those found in the examination.

### PUBLIC SERVICES

Subfunction: Inter-institutional sharing.

Competency: Implements systems for cooperative sharing.

Question #1. Three hospitals within 20 miles of each other need MEDLINE searches to be performed for their staff. They have been requesting searches on an average of five a month for each institution from the medical school library 150 miles away. There is a charge of \$20.00 for each search. This charge reflects the direct and indirect costs to the medical school library. Librarians from the three hospitals are very dissatisfied with the arrangement and have met together to discuss the problem. Which of the following steps should they take FIRST?

1. Apply to the RML for a shared MEDLINE terminal.
2. Request MEDLINE training at NLM.
3. Curtail MEDLINE services at the hospitals because of cost.
4. Analyze the possibility and financial considerations of providing their own MEDLINE service.
5. Arrange for a courier service to pick up and deliver MEDLINE searches from the medical school.

### TECHNICAL SERVICES

Subfunction: Automation of technical services.

Competency: Chooses a system of automation based on the department's needs and advantages and disadvantages of available systems.

Question #2. A medium-sized medical school library would like to automate its cataloguing operations. A choice must be made between developing its own computerized system or adopting a commercially available system. In making this choice, which is the LEAST important consideration?

1. The ability to obtain the required products from the system.
2. The availability of specialized computer personnel to operate and maintain the system.
3. The availability of sufficient computer time during normal working hours.
4. The computer hardware and software used by the system.
5. The cost of the products obtained from the system.

## ADMINISTRATION

Subfunction: Evaluates space allocations for new and/or current space.

Competency: Assesses the relative merits of alternative plans for housing materials based on usage requirements, growth rate, space limitations and cost estimates.

Question #3. Your library is overcrowded and you are investigating compact shelving systems as a possible solution. The MOST important factor(s) which will influence the decision on whether to use compact shelving is:

1. Cost of the shelving system.
2. Volume of use of material stored.
3. Aesthetic considerations and user acceptance.
4. Floor load capacity.
5. Items 1 and 2.

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Upon receipt of Prof. Pendrill's paper, the editor contacted a number of librarians across the country and solicited their views on the development of the MLA certification examination. Their responses follow.

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## RESPONSE #1: Anna R. Leith

Considering the hard work, careful consultation and deliberation that members of the Examination Committee had expended in devising the Medical Library Association exam, it may well seem presumptuous for me to make any comments. My only justification is that I wrote the examination which was set in April, 1978. I was delighted to pass all sections and even to receive a reasonably good mark for the administration area. As anticipated, it appears to measure the ability of candidates to deal with decision-making or problem solving, in a modern health sciences library, rather than to elicit a resume of endless memorized facts. That is the good part.

I wish that I could attribute certain feelings of confusion which I experienced during and immediately after the exam to the limitations of my own experience or knowledge; there is always the possibility that I should, but I do feel that would be somewhat superficial although simpler than trying to recall what I obviously have tried to forget. There was a definite limitation of time; one hundred queries in four hours may sound fair enough, but the complexity of grasping some of the problems, in a stressful situation (are there any non-stressed exam writers out there?) could have been attributed to one of the following: (Now for the bad part!)

1. Statements in a scenario were sometimes ambiguous. Clarification

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- of at least one aspect of a situation was essential to intelligent selection of the only correct answer.
2. A pertinent fact, or an aspect of the situation, which was essential to making a decision was missing.
  3. There did not appear to be a correct answer available from which to choose. Some part of the statements supplied for selection appeared to render it unsatisfactory.
  4. Unless more information were supplied, there appeared to be more than one solution to the described situation.

Some of my confusion could well be attributed to personal experience which could be in a situation and background so different from the one visualized by the Examination Committee that comparison on the basis of previous experience is actually not possible. Yet, I assume similarity in experience is the basis for requiring a minimum of two years of experience. Perhaps solutions used in my institution (for example, those solving personnel problems) are not applicable to that in other libraries. (Let me not fail to admit that my day-to-day exposure to technical or reference services has limitations in regard to detail, apart from administrative matters.)

Aside from my personal reactions, I am anxious to know how librarians with only two years of experience reacted to many of the questions. On what basis could they have made many decisions, if either their librarianship studies, or limited experience had never exposed them to the problems described, and most certainly not the solution? Perhaps it would be possible to achieve a passing percentage although there were to be a certain number of questions which would be missed by many examinees with limited experience; results would appear to support this theory.

A thorough examination of the marks achieved as related to type and length of the candidate's experience would be more valuable than my speculation. Perhaps a careful review of any questions consistently missed by applicants would ensure a fairer chance for all in the future. After so much planning and preparation, undoubtedly the Examination Committee has plans to re-examine the questions on the basis of achievements by candidates. Most certainly the intent and character of the certification exam appears to be well met--and any criticism which I have implied is meant to point up possible improvements.

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RESPONSE #2: Audrey M. Kerr

The Ad Hoc Committee for the Development of Certification Examinations has worked long on developing a measurement of professional competence in health sciences librarianship. In doing so, they have called upon the experience of medical education experts to devise a valid measuring instrument. Therefore, I am sure they have taken into consideration the three criteria generally used to examine the reliability of multiple-choice questions: difficulty (the percentage of candidates who answer the item correctly), discrimination (its value in discriminating between the more knowledgeable and the less knowledgeable candidates, based on bi-serial correlation coefficients between the item and the

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FORM FOR SUBMISSION OF COPY

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4. Workshops, Continuing Education Activities in your Area: \_\_\_\_\_

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5. Brief Description of Article you are Writing for Future Submission (give estimated completion date): \_\_\_\_\_

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Patrick Fawcett  
CHLA/ABSC Newsletter  
Medical Library  
University of Manitoba  
770 Bannatyne Avenue  
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Issue No. 10, March 2



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Nouvelles CHLA/ABSC  
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University of Manitoba  
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Dates limites pour les soumissions: Bulletin No. 8 le 28 octobre, No. 9 le 19 janvier, No. 10 le 2 mars

CANADIAN HEALTH LIBRARIES ASSOCIATION

Membership Application

Name.....

Address.....

.....

Postal code.....

I enclose \$15.00 (made payable to Canadian Health Libraries Association)  
as my membership fee for the period ending June 1979.

PLEASE RETURN THIS FORM TO:-

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7



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Formule d'Application

Nom.....

Adresse.....

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Code postale.....

J'inclus \$15.00 (payable a Canadian Health Libraries Association) comme  
cotisation pour la periode qui se termine en juin 1979.

ADRESSE DE RETOUR:

Alan H. MacDonald  
Treasurer, CHLA/ABSC  
W. K. Kellogg Health Sciences Library  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H7







total score), and relevance (its value in measuring that which is being taught in the 'educational system').\* Nevertheless, from a position in vacuo--which broadly translates as "I have not sat the exam"--I shall respond to the invitation to comment.

The problem of relevance must be examined on the basis that the test be considered in the context of the educational system which it attempts to measure. The fact that the list of competencies drawn up to cover all the functional areas in health sciences librarianship was submitted to all instructors in that field would appear to ensure that the questions would be relevant to "the competence required of entry-level health science librarians within the first two years on the job". However, as Professor Pendrill rightly points out, the fact that the examination "tests for knowledge and abilities which may have been acquired on the job" requires that in-service training, alone or guided, be properly carried out. A study guide or training standard for the candidates and their employers would be important to ensure that on the job training provides a serious candidate with the ability to prepare adequately.

One of the perennial difficulties with multiple-choice questions is pointed out by Professor Pendrill; it is the possibility of ambiguity. This is the bane of all those who devise questions, for they have been known to even favor the less knowledgeable candidate. However, the unquestioned speed of the computer makes it possible for suspect questions to be identified through statistical analysis showing both the difficulty of the item and its value in discriminating. As long as such analysis is done and questions so identified are deleted from the final scoring procedures, the ambiguous question is not a danger (except perhaps to us candidates for whom the inability to justify our answer makes us emotionally unstable!).

While the idea that the answer to "quis custodiet ipsos custodes" might be "the computer" must be abhorrent to some, I believe that test results that are correlated and analyzed by it will provide a valid measurement of professional competence. As a permanent bank of questions that stand this analysis is built up, the examination will become increasingly useful in judging that competence. Certainly, the examination already addresses itself to the most important quality of competence: a working knowledge of all areas of health science libraries. Successful candidates should be able to bring to their position a knowledge of the complex inter-relationships in a library and an understanding of the impingement of their particular work on the operation of the whole. It is the lack of this over-all view that is all too often seen in those not professionally competent.

The Committee members are to be thanked for starting us on the right road to demand and measure professional competence; it is up to us to require that all health science librarians set out on that road.

\*Hubbard, JP. Measuring medical education; the tests and test procedures of the National Board of Medical Examiners. Philadelphia, Lea, 1971.

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RESPONSE #3: Beatrix H. Robinow

As Chairman for the last three years of the Ad Hoc Steering Committee for the development of the Certification Examinations, I would find it difficult

-BH Robinow is Head, Health Sciences Library, McMaster University.

to give an "outsider's" point of view of the new MLA Certification Examination. Here are some of the aspects of the matter which should perhaps be remembered:

- the new Certification Code was formulated in accordance with the wishes of the membership of the MLA as determined by a questionnaire, and it was agreed to by a two-thirds majority mail vote.
- about an hundred medical libraries of all kinds spent about two years in developing typical and relevant situations in medical libraries. From these situations, scenarios were written leading to a definition of the competencies upon which the questions were based.
- two highly-trained and experienced education specialists were consultants throughout this process, working together very closely with the librarians, and helping to test every item for relevancy and reliability, and working out overall priorities and scores.
- the new Examination Review Committee is continuing the work by developing new questions to enlarge the pool for each succeeding examination and making sure that the examination is based upon the most up-to-date practice.
- the examination can only be a general one since there is only one certificate. Employers of medical librarians are assured that a certified medical librarian will be able to fit into any particular slot, developing further special skills and knowledge as needed.
- minimum passing levels are being critically examined and readjusted.
- one of the objectives of the whole certification and examination system is to give health library workers an extra qualification and certificate recognized by employers throughout North America. This seems to be succeeding, and it should help the librarians to be recognized and their special skills appreciated.

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RESPONSE #4: M. Doreen E. Fraser

Years of experience and hours of labour have gone into the evolution and production of MLA's second Code for Certification and the establishment of an examination. People in both the fields of education and health sciences librarianship have contributed to it. There is no doubt that a soundly based, thorough and careful piece of work has been produced. In reading the MLA booklet which describes the Code and the examination, the influence of sizeable academic/research libraries and large hospitals is evident--the scale is a grand one.

I believe that the Canadian two-year M.L.S. programme will provide a good base, I am aware of complaints by American students and graduates about the inadequacy of their one-year M.L.S. programme and it will be a fortunate student who can take advantage of programmes such as those at Case-Western University in Cleveland which offers some nine courses in the field of health

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sciences librarianship as well as the choice of work/study programmes. The examination is aimed at performance in the field, and functioning competency not academic learning, so that the two years of experience will be a crucial element. On this side of the border particularly, the required experience within a two-year period will likely be difficult to obtain and needs the careful selection of employment under an experienced librarian willing to organize necessary experience opportunities.

An examination is certainly the only fair way to handle the Certification Programme since there is such a variation in the types of courses offered and the approach of the instructors. Being a member of the MLA Teaching Group which has been immersed in discussions over the years, it eventually became inevitable for the Group to recommend that there be an examination since other means were unsatisfactory. Since peer review, continuing education and re-licensure are elements which have increasing impact on medicine and other health professions, it is not surprising that the librarians working with those professions find need for establishing the means for assuring adequate up-to-dateness and quality of performance. The Medical Library Association was the first library association to establish both certification and continuing education programmes in North America, and it is making further history with its examination. There are bound to be teething problems despite the care and effort for examiners and examined alike--and particularly for those who work in isolation and away from terminals, automation, colleagues, sizeable budgets and sufficient staffing. Personally, I have always objected to multiple choice examinations although quite well aware of the ostensible reasons for them. They are extremely difficult to prepare even for a homogenous class, let along for a broad scattering of people, and they are difficult to answer--I frequently wish to qualify! Of the three examples cited, only one has an obvious answer by reason of the presentation of the questions.

The other element concerning the examination relates to foreigners taking the examination--and this includes Canadians. Will the American oriented answer be expected? When the Teaching Group met with Ms. Julie Virgo, Director of the MLA Education Programme, and the Committee working on the examination in 1976, I introduced the problem of valid foreign materials and sources that are used elsewhere than in the U.S.A., and that valid Canadian responses would not necessarily be similar to valid American ones, and were the examiners prepared to accept such answers? There is no evidence that this angle has been either recognized, considered or accepted. Despite the fact that we now have the CHLA and a somewhat different orientation, it is expected that many Canadian librarians will wish to take their measure vis-a-vis American standards but hopefully will not have to 'cook' their answers to suit American examiners.

Although the examination is set for 'health sciences' librarians, one wonders how broadly based is the data bank of questions. Will medical librarians be expected to be knowledgeable about dental, pharmaceutical and nursing materials or will dental, pharmacy and nursing librarians be chiefly questioned about medical materials? Are these librarian-represented on the Certification Eligibility and Appeals Committees? There is nothing to provide this information in the booklet and one has to turn either to the issues of the Bulletin to find out, or write to the MLA Office in Chicago.

Re-certification every five years, 35 hours (3.5 CEU courses) or 7 hours per year, to expend on keeping up-to-date is certainly not unreasonable as the amount of time to be expected of the health sciences librarian who is interested in a personal standard of commitment. Health sciences librarianship

changes over five year periods, as a glance over a file of the Bulletin will show. With the proposed affiliation of CHLA with MLA, continuing education programmes in various regions of Canada can be readily organized. The Medical Library Association's C.E. programmes have improved considerably as a result of review and are now for sale. I trust there can be many successful candidates on this side of the border.

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#### HOSPITAL LIBRARY SEMINAR in NEWCASTLE, NEW BRUNSWICK

- Pat Goddard

Eight hospitals and one nursing home were represented at a day long library seminar at Miramichi Hospital in Newcastle, New Brunswick on 31 May, 1978. The programme was organized by Mrs. Audrey Somers, In-Service Education Director at the hospital. Mrs. Somers is also responsible for the Miramichi Hospital Library. A wide variety of useful materials, such as supply catalogues, patient education pamphlets, indexes, core lists, etc. were on display. Samples were also available to take away.

The programme, which covered library organization, basic inter-library loan procedures and reference sources, patient education, community service and the hospital library in the accreditation procedure, was very ably presented by Mrs. Isobel Wallance from Moncton. She has eighteen years experience in hospital libraries and had very useful tips for the inexperienced among us. Resource persons included Mrs. Pat Goddard from the W.K. Kellogg Library at Dalhousie University representing Regional Loan Service and Ms. Carmelita Thompson, Education Director for the New Brunswick Hospital Association.

There was a great deal of lively discussion of common problems: how to persuade administrators to provide library staff, how to get money for materials, how to persuade hospital medical staff that the hospital library should serve all hospital personnel. A special problem is the lack of availability of up-to-date French language materials suitable for use in the North American setting.

Interest was expressed in following up the seminar with another, one perhaps going into greater depth on cataloguing materials. Tentatively set for late November, this next seminar will be held in Moncton.

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#### For CAMEL RUPTURED read ROMMEL CAPTURED

It seems that all major, scientific journals are susceptible to errors creeping into their pages. Sometimes it's a simple spelling mistake, sometimes a tiny error in fact, and sometimes even a sizeable segment of the text gets completely omitted. While the CHLA/ABSC Newsletter is neither major

nor scientific, it can however lay claim to also printing an article with part of the text omitted.

I received a letter from Donna Signori, Collections Librarian at the University of Victoria Library pointing out an error in an item on page 47 of the last issue of the Newsletter. The article on the meeting of the B.C. Health Libraries Association has part of the third paragraph omitted. The last sentence of said paragraph should have read:

Today, with the demand for more access to all kinds of information, public librarians' interest in providing their patrons with health information will foreseeably become part of an even greater debate, that of assuming responsibility for unlimited dissemination of health information to the general public.

While I appreciate having this drawn to my attention, I should confess that I had read the item twice previously without noticing the strange syntax in the last sentence. With my confidence appropriately undermined, I hate to think how many more mistakes are in this issue and haven't been seen or caught by the proofreading.

- Editor

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### We Bring To Your Attention...

The microfilm of the "Women and Health" collection, as reported in Newsletter #7 (p.49), has been purchased by the Osler Library, McGill University. This collection of fourteen reels was published by the Women's History Research Center of Berkeley and is available from the Osler Library through Interlibrary Loan.

The Toronto Medical Libraries Group met on 10 October, 1978 at the Metropolitan Toronto Library Board, in Toronto. A draft constitution was ratified at this meeting and application will be made to CHLA for affiliate membership. Joanne Marshall from McMaster University gave an excellent presentation on the role of the clinical librarian as it has developed at McMaster. Her talk was both provocative and interesting.

Excerpta Medica held a workshop in Ottawa at CISTI on 18 September, 1978, to introduce the new Excerpta Medica Database, now available to users of the Lockheed System. The session was well-attended by representatives from all over Ontario and Quebec. Principal speaker at the workshop was Dr. Summerfield of Excerpta Medica's Amsterdam offices.

The Ontario Medical Association reports that the OMA/OHA/RNAO Library Workshop scheduled for the spring of 1979 is now in the planning stages. No definite date has been set yet for the workshop, however it will be held in the Sudbury area.

Maurice Alarie, chairman of the Ottawa-Hull Health Libraries Group, informs the Newsletter that the Group has recently applied to the CHLA/ABSC for chapter status. This Group presently has approximately forty members representing 25 institutions in a geographic area which includes cities and towns within a 160 kilometer radius of Ottawa-Hull. The Ottawa-Hull Group offers its members opportunities to meet other librarians in the health sciences field, advice on day-to-day library services and problems, and discussion of a wide variety of topics of current interest to all health science libraries.

On 4 July, 1978, the Bracken Library of Queen's University in Kingston, Ontario, opened its doors. The new library is very conveniently arranged and beautifully appointed. All users and staff are naturally quite delighted with it. The Library occupies two floors of Botterell Hall, a new building just across the street from Kingston General Hospital. There is shelf space for 150,000 volumes, about twice the size of the Library's present collection. There are more than 300 reader spaces, all of them comfortable and located in attractive surroundings.

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#### ANNOUNCING...

A new publication of the Canadian Hospital Association Library. The Health Administrator's Library. Comprehensive bibliography of the materials available in the Canadian Hospital Association Library. Lists all recent acquisitions published between 1970 and 1977, including journals, films, and cassettes. In subject format. Contains author and title indexes.

Available from the Circulation and Sales Department of the Canadian Hospital Association, Suite 800, 410 Laurier West, Ottawa, Ontario K1R 7T6.

Price: \$10.00.

Nouvelle publication de la bibliothèque de l'Association des hôpitaux du Canada. La Bibliographie de l'Administrateur de la Santé. Bibliographie complète de la documentation disponible de la bibliothèque de l'Association des hôpitaux du Canada. Indique toutes les récentes acquisitions publiées entre 1970 et 1977, y compris périodiques, films et cassettes. Sujets groupés par rubrique, avec index des auteurs et titres.

A commander du Service Ventes et Tirage l'Association des hôpitaux du Canada, 410, avenue Laurier ouest, Bureau 800, Ottawa, Ontario K1R 7T6.

Prix: \$10.00.

## COLLEAGUES

MARY ANNE TRAINOR was appointed Acquisition and Serials Librarian for the Health Sciences Library, McMaster University in August, 1978. After graduating from the Faculty of Library Science, University of Toronto in May, 1977, she held a position as cataloguer at the Gulf Canada Research and Development Library in Sheridan Park.

DONNA JENSEN has joined the staff of the W.K. Kellogg Health Sciences Library, Dalhousie University, as a reference librarian with special responsibility for nursing. She obtained her B.Sc. degree from U.B.C. and graduated with her Masters degree from Dalhousie School of Library Science in May, 1978.

DALLAS BAGBY has been appointed as a joint clinical librarian and archivist, each on a half time basis, at the Health Sciences Library, McMaster University for a period of one year, beginning September, 1978. Dallas is on leave from the Special Collections Department of the Mills Library at the Hamilton university.

AUDREY M. KERR, head of the Medical Library, University of Manitoba was recently named Chairman of the Special Resource Committee on Medical Libraries of the Association of Canadian Medical Colleges.

The Abbie J. Lane Memorial Hospital in Halifax has a new staff member in charge of its library, VALERIE OWEN.

MARGARET TAYLOR, manager of library services at Children's Hospital of Eastern Ontario in Ottawa, has recently begun a pilot programme in clinical librarianship at the hospital. She is presently a member of a multi-disciplinary health care team serving the Clinical Investigation and Dialysis Unit. Her pilot programme will be evaluated after an eight months trial period and the results of the evaluation will be made available to other clinical librarians upon request.

VERONA HALL is the new Library Assistant at Camp Hill Hospital, Nova Scotia. She has a joint appointment as the Drug Information Centre Assistant where she previously spent two summers working while attending university.

ALAN H. MACDONALD, presently Head, W.K. Kellogg Health Sciences Library, Dalhousie University has been appointed Chief Librarian of the University of Calgary effective 1 January, 1979.

PNG/MLA -- PACIFIC NORTHWEST REGIONAL GROUP MEETING

- Pamela B. Griffin

Vancouver was at its beautiful best as host to PNG/MLA from October 12 to 14, 1978. Health sciences librarians from universities, regional, hospital and private organizations participated in a comprehensive program during the two and one half days. Members came from Alaska, British Columbia, Idaho, Montana, Oregon and Washington State, as well as representatives from Alberta.

Three well-attended continuing education courses were given on the first day. These courses covered statistical resources, health care administration and patient education.

Allen H. Soroka, Assistant Librarian of the University of British Columbia Law Library spoke on the impact of the new U.S. Copyright Act on Canadian copyright law on Friday morning. He emphasized that the U.S. Copyright Act does not have any extraterritorial effect or apply to Canada except insofar as networks may be concerned. The U.S. act authorizes U.S. libraries to engage in photocopying practices. There are restrictions regarding the number of copies, purpose, and a payment of twenty-five cents per page set by the publishers and paid to a copyright clearing house. Insofar as interlibrary loan is concerned, copying must not be used as a substitute for a journal subscription, and hence the limitation to one copy for study/research purposes. While the Canadian law is presently under revision, he said that the present act which has been in effect since 1924 is more restrictive than the U.S. law. No registration is required as in the United States, instead there is an automatic copyright extending for the life of the author plus fifty years as set by the International Copyright Convention. Canadian law provides for reciprocal agreements with foreign countries which do not adhere to the Berne Convention (eg: the U.S.). The Canadian government is now proposing copyright collectives similar to the American arrangement. Mr. Soroka reported that a study made at the University of British Columbia showed that the majority of things copied were found to be in the public domain.

"Life styles, health and health care systems" was the topic of an illustrated talk by Dr. John Milsum, director of the Division of Health Systems and Professor of Health Care and Epidemiology at UBC. Faulty life styles, he said, were found to be a major contributing factor in premature demise. Poor nutritional habits, insufficient exercise were major culprits while automobile accidents took the highest toll of life. In fact, we are all in rotten shape and are likely to take an unnecessarily early exit unless more attention is given to preventive medicine and hygiene.

Useful and practical talks on advanced reference and data bases for health sciences information were given by three University of Washington librarians. Kay F. Denfield spoke about reference sources in environmental health which provided not only an interesting follow-up to Dr. Milsum, but also a useful descriptive bibliography of appropriate reference tools, indices, and personal contact points -- the latter primarily for American librarians.

Carole Stock spoke on a matter of considerable importance to reference work, but one which is all too frequently overlooked: referral as a reference technique and an essential part of good reference service. To be able to appreciate and understand when and how to refer a query can and should increase the stature of the reference librarian, rather than the reverse. To consult



other librarians and to use outside sources should never be construed as being a sign of personal inadequacy she said. Rather it is indicative of a knowledgeable, experienced reference librarian who is aware of specialized materials and expertise available outside his/her own library which may be more efficient in satisfying the client's requirements. The interview techniques were elaborated upon with particular emphasis being given to judgement in determining whether the person or the question and search data should be referred elsewhere. In any event, there should always be a follow-up on a referral by the initiator to ensure the client's satisfaction.

Barbara Yocom, a health sciences reference librarian, described and compared the uses of Lockheed's DIALOG and SDC's ORBIT data bases for health information searches.

The busy Friday concluded with a banquet and an address by Dr. Lawrence E. Ranta, Director of Research and Counselling Services, B.C. Health Association, Vancouver.

On Saturday, there was an early morning breakfast meeting for MEDLINE search analysts. Regional roundups followed with reports from the four states and two Canadian provinces. Lois Ann Colaianni, president -elect of MLA, briefly reviewed the proposed new group structure for the Medical Library Association and in return received the viewpoints of the assemblage concerning the proposed changes.

The conference concluded with a business meeting and consideration of bylaws for PNWRG. Altogether, it was a fruitful gathering and one which extended and confirmed the all-important personal contacts so necessary for expanding the boundries of a library's own resources and establishing the reference librarian's personal network.

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## MHLA WORKSHOP

The Manitoba Health Libraries Association sponsored a workshop on health facility library services at the annual health conference of the Manitoba Health Organizations, Inc., held in Winnipeg, 1-3 November, 1978. The workshop was coordinated by Mrs. Rena Kroeker, consultant librarian to both the Grace Hospital and Concordia Hospital in Winnipeg, and Ms. Sandra Langlands, Extension Librarian, Medical Library, University of Manitoba.

The purpose of the workshop was to assist individuals with no library training in the task of organizing and maintaining a library in a small health facility. Emphasis was placed on basic techniques involved in setting up such a library, with practical sessions on such things as reference tools and search techniques.

People attending the workshop were mainly from rural health facilities throughout Manitoba. Most expressed concern over their lack of experience in library work and showed much interest in more workshops and contact with library groups such as the MHLA.

## MLA CE COURSES

The following is a current title listing of the Medical Library Association's continuing education courses. Some of these are advanced instruction, some are designed for the novice. Of particular interest to the majority of hospital library staff are: CE 16, CE 22, CE 29, CE 36, and CE 37. Cost of taking these courses is \$30 for a member of MLA and \$45 for non-members.

- CE 4: General biomedical reference tools
- CE 5: Human factors in library administration
- CE 8: A review of the literature of dentistry
- CE 9: Materials for the history of the health sciences
- CE 10: Drug and pharmaceutical information resources
- CE 11: Interlibrary loan and copyright
- CE 12: Indexing and abstracting services in the biomedical sciences
- CE 13: Grant applications and management
- CE 14: Planning health sciences libraries
- CE 15: Literature of nursing
- CE 16: Management of media in hospital libraries
- CE 17: Preservation of library materials
- CE 18: Systems analysis
- CE 19: Application of operations research to library decision making  
(This is a two-day course. Prerequisite: CE 18)
- CE 20: MEDLINE and the health sciences librarian
- CE 22: Planning hospital library facilities
- CE 23: Problems in medical cataloguing and classification (Prerequisite: CE 24)
- CE 24: MeSH and NLM classification
- CE 26: Teaching skills for library educators (This is a two-day course.)
- CE 27: Literature of mental health
- CE 28: Management of reference services
- CE 29: Hospital library management
- CE 30: Basic media management -- Hardware and physical facilities
- CE 31: Basic media management -- Software
- CE 32: Statistical sources for health sciences librarians
- CE 33: Literature of health care administration
- CE 34: Biological Abstracts -- Bioresearch Index
- CE 35: OCLC utilization in health sciences libraries

/ continued

- CE 36: Patient education
- CE 37: Development and operation of a health sciences library consortium
- CE 38: Acquisition of biomedical materials
- CE 39: Women and biomedical library administration
- CE 40: Grant proposal development for health sciences librarians  
(This is a two-day course.)
- CE 41: Introductory data collection and analysis
- CE 42: Working with groups / Leadership skills
- CE 43: Working with groups / Group skills
- CE 44: Library management / Planning
- CE 45: Library management / Marketing
- CE 46: Library management / Budgeting
- CE 47: Audiovisual cataloguing
- CE 48: CATLINE-AVLINe searching

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#### CURRENTLY READABLE

Flower MA

Toward hospital library standards in Canada.

Bull Med Libr Assoc 66:296-301, Jul 1978

From the NIH: Remote access to professionally reviewed materials provided by AVLINE from National Library of Medicine.

J Am Med Assoc 240:1231, 15 Sep 1978.

Thornton JL

100 years of medical libraries.

Br J Hosp Med 19:588-592, Jun 1978.

Rajecki AA, et al.

An introduction to medical/nursing libraries and available resource tools.

Nurs Forum 17:103-112, 1978.

Christensen JB, et al.

A role for the clinical medical librarian in continuing education.

J Med Educ 53:514-515, Jun 1978.

Mapel ME

How to handle the medical library in a non-teaching hospital.

Hosp Top 56:3,28, Mar-Apr 1978

DALHOUSIE UNIVERSITY  
SCHOOL OF LIBRARY SERVICE  
Proposed Two-Week Programme  
16 - 27 July, 1979

Continuing its triennial pattern, Dalhousie University's Division of Continuing Medical Education and its School of Library Service have agreed to offer their third jointly sponsored Workshop, 16-27 July, 1979, should there be sufficient response to this announcement. A minimum enrollment of ten would be necessary.

The programme is designed for staff working in hospitals (administration, medical records, medicine, nursing, therapy) or working with hospitals, for personnel in government health services and in community health service agencies. It is concerned with the basics of organizing, developing and using health information and/or library services, and for those who wish to improve their ability to use more effectively the facilities which are available to them.

Former participants in the 1973 and 1976 Workshops may have need to update or extend their knowledge. It is possible to design specific elements to fit their particular situation.

The programme will be directed by Professor M. Doreen E. Fraser, School of Library Service, who teaches courses in the field of health sciences literature, information and librarianship offered by the School, and who functions as a resource person for the Division of Continuing Medical Education. The staff of the W.K. Kellogg Health Sciences Library will participate in a variety of ways.

Cost is estimated as follows:

Workshop - \$60.00; University accommodation - weekly rate: single \$40.00, double \$60.00; Meals - can be purchased singly or by weekly coupon - \$35/40.00 (1978 rates).

Should you be interested in attending the Workshop, please contact the address below giving: name, position, address and telephone number. The deadline for response is 1 February, 1979. Please also draw this announcement to the attention of others who may be interested.

Prof. M.D.E. Fraser  
School of Library Service  
Dalhousie University  
Halifax, Nova Scotia  
B3H 4H8  
  
(Telephone - (902) 424-3656)

## CHLA/ABSC EXECUTIVE

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Toronto, Ontario M5S 1A5

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Vancouver, B.C. V6J 2A9

Barbara Henwood  
General Centre Medical Library  
Health Sciences Centre  
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Winnipeg, Manitoba R3E 0Z3

Philippe Lemay  
Bibliothèque Scientifique  
Université Laval  
Cité Universitaire  
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Patrick J. Fawcett (Ex-officio)  
Medical Library  
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POSTSCRIPT

(an informal page which proves that editors can't resist having the last word)

The ancient Romans put great faith in the ability of worldly signs to predict a person's success in life. Meteor showers, decisive battles, loud thunderstorms all figured highly in their deliberations.

Within six hours of my officially becoming editor of the CHLA/ABSC Newsletter, twenty-three thousand postal workers went on strike in Canada and the cardinals in Rome elected a new pope. There's definitely a message in there somewhere and it kills me not knowing what it is.

You have in your hands my first issue. Late last night when I was finishing the last page (21, if you're curious) I was praying that this issue could also be my last. Now that morning has come it's dawned on me (sorry...) that it wasn't such an ordeal after all. I'd even be looking forward to the next issue, now only 69 days away, if I had only something to put in it.

In addition to a mail strike and a new pope, as neophyte editor I also received the publishing schedule for the next year. It's an interesting document and answers the question of what I'll be doing the evening of 22 November, 1979. The schedule calls for six issues during the next 11 months and I'm curious to see how we will fill them. For issue #8, I drew upon 19 people for contributions. At this rate, the next six issues will involve 114 people. Assuming a democratic spread, inside of three years the Newsletter will have drawn upon almost every member of the Association for a contribution, which upon reflection seems very appropriate.

Fortunately, the success of this Newsletter does not rest with me. A good editor, regardless of how talented, cannot save a dying publication and a bad editor, now matter how lousy, cannot kill a thriving one. The life of this bulletin is up to you. Your contributions and interest will make it evolve and grow; apathy and refusal to contribute will kill is publication faster than anything I can do.

On page 2, the Newsletter is described as having a special interest in reaching and assisting the smaller, isolated health library. There's a basic problem in this type of audience. The people who write articles are the large-library, academic types for whom publishing is, if not a way of life, at least a visible background to their vocation. The small-library, front-line workers are not as attuned to the publication habit and often shrink when the editorial finger points at them. (Or worse. When I recently berated a single-people-library worker for never writing of her experiences, I received several acidic remarks to the effect that said workers are too busy struggling to survive, let alone create 'the leisure to write' that some academics enjoy. Something about "People who live in glass offices shouldn't throw typewriters...") While I think that the content of this issue is excellent and makes interesting reading, much of it lacks direct applicability to a large portion of the Newsletter's avowed audience.

There's a solution to this and I'm going in search of it. You may be getting a letter very soon asking (id est: pleading on bended knee) you to contribute something for publication. But don't wait to be asked. If you've got an idea for an article, drop me a line--or better yet, write it out and send it to me. Don't worry about being embarrassed; if it's really that awful I'll send it back unused with a polite note.

With your help and your interest, I can help keep the Newsletter an ongoing success. After all, 23,000 postal workers and a new pope can't all be wrong.







