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### NN/LM MCR 2013-2014 Objectives

As part of the MidContinental Region's contract negotiation with the National Library of Medicine, we develop a list of objectives for the year. We want you to know what to expect from us too! The following is a list of our intended objectives for 2013-2014. The objectives encompass services to our Network members as well as our outreach services. These objectives are also on our web site.

#### Assessment and Evaluation

1. Assess needs of health sciences librarians and other organizations in the Region for NLM and NN/LM products and services and share data with NLM and NN/LM.
2. Monitor and evaluate NN/LM MCR programs to assess their effectiveness in improving access to health information.
3. Inform NLM of regional, state, and local activities that contribute to improved connectivity, access and health information resources as a result of NN/LM MCR programs.
4. Prepare reports for NLM site visit and participate in the NER site visit team.
5. Reconstitute Regional Advisory Board and assess the impact of the Board on RML programming and the experience of Board members.
6. Work with Resource libraries, including signing and monitoring implementation of subcontracts for basic services, and assess Resource Library and Coordinator experiences.

#### Education

1. Develop and teach a class for faith community nurses.

2. Write and distribute articles for faith community nurses.
3. Manage and promote EBSCO E-Book collection.
4. Develop resources and train members on preparing continuity of service plans.
5. Investigate opportunities for librarians to become expert searchers.
6. Promote history of medicine resources within the region.
7. Offer "Measuring your Impact" class online.
8. Identify and contribute classes to the MLA Educational Clearinghouse.
9. Provide training on NLM and NN/LM resources and tools.
10. Submit program proposals at local, regional, state, or national events.
11. Use the RML communication tools to promote education opportunities.
12. Provide training on NLM and NN/LM resources and tools to public library audiences.
13. Teach technology classes and learning sessions.
14. Establish a work group to research e-science current practices for librarians and prepare an article for publication.

### Health Information Literacy

1. Award public libraries who have had the best K-12/public library partnerships involving health information.
2. Contribute to "Bringing Health Information to the Community" blog.
3. Exhibit at local, regional, state or national events.
4. Become further involved in the Health Care Education Association.
5. Promote the use of NLM resources to support K-12 school health curriculum.
6. Inform refugee health staff about multiple language resources.
7. Encourage and/or support health information literacy collaborations that reach other networks and relevant organizations.
8. Maintain state library collaborations.

### Library Advocacy

1. Provide resources for librarians to support and improve their business practices in the hospital setting.
2. Support librarians to become change agents in their institutions in health information literacy.
3. Support librarians to become involved in patient safety activities in their institutions.
4. Investigate the value of librarian services in the cost of patient care.
5. Support member librarians and libraries through publications appropriate for and communications with health care organization administrators.
6. Working group members contribute gaming paths for the region.

### Member Services

1. Conduct drills or exercises to test the continuity of service plans on a regular basis.
2. Involve Network members in RML activities.
3. Manage portions of the NN/LM Resource Sharing Plan.

### Technology

1. Provide consultations and assist Network members in developing strategies that address barriers to access.
2. Support the appropriate personnel at Community College Health Information Technology (HIT) institutions to integrate evidence based medicine and consumer health information into their program offerings.
3. Investigate and implement communication technologies.
4. Regularly monitor and disseminate technology developments.
5. Process data and report on the community based organization
6. under-connected pilot project.
7. Maintain NN/LM MCR web site.



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## Why Go to Charleston in November?



Deborah Carman, a librarian at the University of Kansas Medical Center, received a Professional Development Award from the NN/LM MCR to attend the Charleston Conference, Issues in Book and Serial Acquisition, described on the web site as "an informal annual gathering of librarians, publishers, and vendors in Charleston, South Carolina to discuss issues of importance to them all." A few days ago, I had the opportunity to ask her a few questions about her experience and wanted to share her responses with you.

– Rachel Vukas, Kansas/Technology Coordinator

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**RV:** Why did you choose to attend the Charleston Conference?

**DC:** Charleston is the only conference devoted entirely to acquisitions and collection management. My goal was to attend sessions which enable me to make intelligent recommendations on the integration of e-books into our broader collection, including dissemination on campus; to learn from other librarians' institutional practices and experience in creating a lean and relevant collection; and to explore publisher models. This conference is built on the premise that publishers and librarians need to talk to one another about one another's practices. Finally, Charleston is one of those conferences where you wish you had a clone to attend more concurrent sessions. Real "bang for the buck" for those of us with slim budgets for travel and professional development! My director was supportive and the RML provided funding to help with the costs. I appreciate both sources for their support of professional education.

**RV:** What concepts or ideas most interested you?

**DC:** All libraries have (at least) three things in common, acquiring, delivering, and justifying. So, I'll hang some of my favorites on those themes. Acquiring and delivering share some common frustration points, and that's without considering patron access. In the resource market now, we have multiple vendors with multiple platforms, multiple standards for metadata, tagging, and delivering, and multiple solutions which involve their particular tools. In acquisitions and delivery/discovery, we attempt to navigate multiple usage, archiving, and licensing agreements, as well. We would love for our resources to be available to anyone, working anywhere, on any device. One speaker called it the trend toward the "user-centric" resources. We are supposed to make acquisition choices and provide and maintain delivery systems in the midst of the maze. Crazy! The good news is the whole environment is evolving. The down side is evolution takes time. We need to be thoughtful about embracing a short-term "solution" to our long-term issues.

When it comes to justifying our existence, one of my favorite sessions was "What Provosts Want Librarians to Know" (and be able to communicate to their provosts at budget time). The relevant issues discussed by the presenter provosts were: Budget – what do you spend it on? Space – do you really need all of that square footage? Mission – Are you aligned with what goes on here? Students – Are they getting what they need? We have all heard those four questions, I'm sure. But, have you ever been called "the GPS to resources" or the "impresarios of inquiry"? Thank Bradley Creed, of Stamford University in Birmingham, Alabama, for those!

**RV:** How did the programming apply to medical libraries?

**DC:** We all deal with collections. The sizes, specialties, degrees granted, etc. may all contribute to the snapshot of an individual collection at a point in time. We all have stakeholders, shifting responsibilities, and differing amounts of money. However, the underlying principles of collection development, legal responsibilities, and stewardship of resources apply across library types.

**RV:** What one thing from the conference would you like to implement in your own library?

**DC:** The top position on the list, and one that is in process, is producing a thoughtful combination of digital and print resources into a findable, relevant, and usable collection for our students, faculty, and researchers. We have been evaluating every journal title on the shelves, shifting the collection, and attempting to make our e-resources obvious to our users. We will be embarking on an extensive monograph weed and shift, as

well. The best guesses from the publication side say we are trending to collections which are 80% digital and 20% print. We are in the middle of determining what our collection will be, as we continue our evaluation.

**RV:** Would you recommend this conference to other medical librarians? Why?

**DC:** Would I recommend it? Absolutely! Without any reservation. As I mentioned in the beginning, this conference is uniquely focused on collections and acquisitions. You can be part of vendor feedback sessions, how-to sessions, plenary sessions (I mentioned you need a clone.) and meet fellow professionals from the US, Canada, Scotland, Hong Kong, Sweden, Australia, India, and Germany (that's just my list). The 2012 Charleston Conference was the 31st meeting. It began in 1980, with 20 participants who met to begin the conversation among librarians, publishers, electronic resource managers, consultants, and vendors of library materials. It has grown to over 1,400 in 2012. Try it. You'll like it!



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## MedPrint: Saving the last print copies together

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As more and more libraries began transitioning to digital collections there arose a growing concern about preserving the printed copy. Organizations such as the Western Regional Storage Trust (WEST) and the Committee on Institutional Cooperation (CIC), in the Midwest, organized to establish print repository consortia. The National Library of Medicine built upon the National Network of Libraries Medicine and in 2011 inaugurated MedPrint, a national medical serials print retention program.

### What are we saving?

To refresh your memory, MedPrint focuses on 250 core clinical journals, seeking to obtain commitments from at least 12 libraries in the Network to hold on to the full run of a title for 25 years, which will take us into 2036. The National Library of Medicine will hold the 13<sup>th</sup> copy for each of the 250 titles.

### National participation

To date libraries have committed to preserve 244 of the 250 titles. You can see this list at [http://www.nlm.nih.gov/psd/MedPrint\\_titles\\_library\\_count.pdf](http://www.nlm.nih.gov/psd/MedPrint_titles_library_count.pdf). Some titles have reached the goal of 12 commitments. *American Journal of Respiratory and Critical Care Medicine* is being held by 20 libraries, more than for any other title. Six titles, two that started in the 1800's, have found no libraries that are prepared to ensure their print survival...yet. The list of titles with no commitments is available at [http://www.nlm.nih.gov/psd/MedPrint\\_titles\\_no\\_commitments](http://www.nlm.nih.gov/psd/MedPrint_titles_no_commitments).

### In the MidContinental Region

Here in the MidContinental Region we have a few participants. Two Resource Libraries, Creighton University Health Sciences Library and University of Wyoming Libraries, signed agreements to officially retain selected print journal titles. Three additional libraries in the region have marked in DOCLINE the titles that they are willing to retain, however agreements with NLM have not yet been signed. DOCLINE shows that 60 titles held by these five libraries will be retained until 2036.

### Consider participating

1. Review all the documentation on the MedPrint web site. (<http://www.nlm.nih.gov/psd/printretentionmain.html>)
2. Change the DOCLINE record for each of the titles.

Check your holdings against the list of titles. In the DOCLINE record for each of the titles you will retain go the Adding Format screen.

**Adding Format**

Edit Mode

Format:  Text  Electronic Journal  Microform  
 Other

Currently Received:  Yes  No

Retention Policy:  Permanently Retained

Begin Vol.	End Vol.	Begin Year	End Year

Limited Period Only: Latest   
 Month  Year  Edition

Completeness:

National Print Retention:

Will hold title for national commitment  
 No commitment to retain title

Change the completeness field from "N/A or Limited Retention" to "Complete (95%-100% held)."

Completeness:

Click the radio button for holding the title for the National Print Retention program.

National Print Retention:

Will hold title for national commitment  
 No commitment to retain title

3. Sign or have the MedPrint agreement signed. It is available on the MedPrint web site.

## PAPR (Print Archives Preservation Registry)

The latest development is MedPrint's participation in PAPR. PAPR is a product of the Center for Research Libraries. It is a database with information about titles, holdings, and archiving terms and conditions of major print archiving programs. When you sign the agreement to participate in MedPrint, your holdings for these titles will be made available beyond the health sciences library world through PAPR.

For more information on MedPrint you can view a recording by Martha Fishel, Chief of NLM's Public Services Division, November 2012 (<https://webmeeting.nih.gov/p51333642/>) or consult with your state coordinator.

–Claire Hamasu, Associate Director



## Whooo Says



*Dear Whooo,*

*Over the years, I have paid close attention to the numbers of hospital libraries that have been closed. I have tried to keep my supervisor and other managers aware of the importance of the library services I provide to the hospital and medical staff by writing an annual report, doing regular promotions, posting information on our intranet and passing complimentary letters about library services and staff on to appropriate people. Now, my supervisor wants me to figure out the ROI for our hospital library. I wonder if this is connected to the upcoming changes of the Affordable Healthcare Act and the fiscal challenges of hospitals today.*

*Thanks for your help,*

*Curious*

Dear Curious,

I'm so glad to hear from you. I'm impressed with your consistent approach to the marketing and promotion for your library, and your recognition that telling the story of your value has many different parts. Also, I'm so glad you are curious about the link between the substantial changes in the business of healthcare and the financial impact of the hospital library.

I think including the financial piece of the library value story is particularly important now. We all know that the costs incurred by the hospital for running a library are high. However, to isolate that cost without also considering the added value of the librarian's services, how much the library resources are used and the impact of their content on hospital concerns gives a skewed view of this financial investment. Thus, it is the librarian's job to create that complete picture.

Because you are in the MidContinental Region, you may remember that Betsy Kelly and Barb Jones have created three basic calculators for this express purpose; they are the Valuing Library Services Calculator, the Return on Investment or ROI Calculator and the Database Calculator. The Valuing Library Services Calculator is used to determine what the retail value of the services and resources provided by the library is (what would your administration have to pay for the resources and services you provide if the library were not available in your hospital?). If you decide that your administration would not pay for 100% of what you provide, you can divide the result by the percentage you think they would pay. The ROI Calculator and the Database Calculator are used to determine the return or value that the hospital receives for every dollar they invest in library resources. Books and journals are both calculated as a total of what you have in the library; each database must be calculated as a single unit. These calculators may be found at <http://nmlm.gov/mcr/evaluation/calculator.html>. They are accompanied by complete instructions on how to use them and documentation on how the suggested values were determined.

Before you jump in and start plugging numbers into these calculators, Curious, you should realize that this will take some time, planning and political savvy. First, you need to identify who will be interested in these values and who will have the expertise to help you with this work. You and the selected individual (your manager, the Chief Financial Officer or some other interested party) will then need to discuss the specific resources and services provided by your library. Some of the issues you will need to discuss are:

- How do you collect your statistics, and what do you collect?
- What data do your vendors provide in terms of usage statistics?
- Can you isolate individual titles, or are you part of a package or consortium that makes identifying each title difficult?
- If a user accesses a book or journal, what does that mean in terms of content used? Did they read one article, two articles, etc.?
- Do you differentiate between reference question and mediated search? If so, what is the difference in terms of time spent and skill required?
- What is the average salary/wage of your users?
- What is an average workweek for your users? (We established either a 37 or 40 hour workweek as standard, and did not include any time worked over that.)

You both will have to agree on the answers to these and other questions, and to the assigned value for resources and services you enter into the calculator. Be conservative in establishing your values; your results will be significant and much easier to defend if you have not exaggerated or inflated them at all. When you actually enter your data into the calculators, the totals you will see are pretty amazing, and will likely be scoffed at unless you have reached agreement on the definitions and values we have just discussed.

After you have arrived at common definitions and values for your activities and resource usage, gather your existing statistics. If these are complete for your needs, and match the criteria you have defined, you can start to enter numbers into the calculators. If not, you may have to start collecting your statistics and enter them after you have adequate data. I think you will be very interested to see what the numbers show about your activities and resource usage. You should report your findings to your manager and other interested personnel in an annual report, white paper, conversations and any other appropriate method.

One of the nice things about using these calculators is that you can contribute your values to a common collection of data submitted by other libraries. Barb and Betsy have received submissions from most of the states, several provinces in Canada and a library in Spain. Having that information as a benchmark can help

you determine how your library compares to others. With that information, you can plan new activities and services in a more informed way.

I hope this answer is helpful, Curious. If you have further questions, I know that you are welcome to contact either Barb ([jonesbarb@health.missouri.edu](mailto:jonesbarb@health.missouri.edu)) or Betsy ([kellyb@wusm.wustl.edu](mailto:kellyb@wusm.wustl.edu)).

Sincerely,

*Whoooo*



## Information Literacy at ACRL

*Jan O. Rice  
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I was privileged to receive an NN/LM MCR Professional Development Award to travel to Indianapolis in April to attend ACRL. I'd never been to an ACRL meeting and it was great to be surrounded by other academic librarians who share my interests and professional challenges. Since instruction/information literacy is a main focus of my job at the Bryan College of Health Sciences (Lincoln, Nebraska), instruction was also the focus of most of the meetings I attended.

Assessment of information literacy is most definitely a hot topic in the academic librarian world at the moment! To be practiced well, assessment should be integrally tied to learning outcomes and be part of the life cycle of instruction: content delivery / assessment / revision / content delivery. ACRL sessions highlighted both theoretical and practical aspects of assessment of information literacy in higher education.

Farkas, Hinchliffe & Houk presented "Creating a culture of assessment: Determinants of success." In an institution in which there is a "culture of assessment" assessment is a regular part of practice; is done for improvement, not accountability; is user-focused; and decision-making is based on assessment results. Librarians can use assessment data to advocate for their library, demonstrate the value of the library to the larger institution and to hold themselves to the same standards as other academic departments. They stressed that librarians must be trained and have time to do assessment; we should know that assessment results will not be used against us; and we should use assessment results to influence teaching, practice and services. Regional accreditation is often the driving force behind an institutional culture of assessment; librarians should be fully involved in the assessment process of their institutions.

Several libraries have been involved in large-scale information literacy assessment projects. Holliday, Lundstrom, Martin, Fagerheim & Davis presented a poster session, "An information literacy snapshot: Results of a large-scale rubric-based assessment project," based on work done at Utah State University. They examined four courses across the curriculum for information literacy skills. Their assessment results determined the students' strengths and weaknesses. Some of the lessons the librarians learned from their assessment include:

- build reading and thinking time into classroom instruction;
- flip the classroom so that classroom time can be used more effectively;
- and teach research skills earlier in the curriculum.

Based on assessment and evaluation, one of their more important conclusions was that "effective information literacy instruction is not just about what we do in the library classroom, but how it is sequenced across the curriculum."

Cirtten and Seeber presented "Building an instruction arsenal: Using standardized elements to streamline

class planning and ease student learning assessment across the curriculum” which described approaches they have adopted at the University of West Georgia and Colorado State University, Pueblo. They posed two pervasive questions, “How can we deliver unique classes when we don’t have time to plan?” and “If classes are unique, how can we assess an entire program?” Their approach was to have a three-step planning process:

1. define student learning outcomes (SLOs) which become the common denominator across all library instruction;
2. create active learning exercises aligned with specific SLOs, relevant to the students’ coursework; and
3. tailor assessments around each SLO in order to measure the effectiveness of the instruction and reevaluate the appropriateness of the exercises.

Each institution has developed multiple shared presentations supporting their defined SLOs, they have available an arsenal of online activities and an assortment of assessment questions and rubrics. Librarians “mix and match” activities and assessment questions based on the SLOs for their unique classes. By following this process they are able to “build unique sessions out of lots of small pieces ... maximize librarian time [and] scaffold learning outcomes.”

Oakleaf, Belanger and Graham presented research on “Choosing and using assessment management systems: What librarians need to know.” They have evaluated sophisticated campus-wide assessment management systems (AMS) that libraries can use for assessment. Using campus-wide systems helps libraries determine if their instruction is meeting outcomes, and defines needed program-level improvements. Such systems include reporting functions, allow information literacy programs to document progress and programmatic changes and feed into institutional accreditation reports. Key questions include determining if your institution has an AMS, if the library can access the system, how other units on campus are using the system and how the library can connect outcomes, assessments and strategic plans to those of the institution?

Attending ACRL allowed me to see ways in which academic librarians are becoming fully integrated into the curricula of their institutions. I came away with my own arsenal of ideas for outreach, outcomes and assessment to apply within my own institution.




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## Keeping Up With New Tech

One of our daily routines is to scan the many blogs from organizations that discuss what is new in technology. We look at two types of blog posts: health related technology and education delivery. Below is a list of some of the more interesting blogs we follow along with a brief description. If you have any favorite technology blogs not listed here, please share them with us.

### Health Tech

**e! Science News** – <http://esciencenews.com>

This is a great Sunday morning resource. It’s too bad it doesn’t come out until Monday mornings. The web site focuses on practically everything that is new in science, such as: astronomy; biology; environment; health/medicine; math/economics; paleontology; chemistry/physics; and phycology/sociology. Fortunately, they limit what they send you in your email to the top news in each topic. Reading the short articles is sort of a guilty pleasure because they rarely post stuff on health and medicine. However, it is a great place to keep up on what our other scientist colleagues are doing. And a little tidbit of coolness about the site...there is NO human editor who selects the content but rather automated artificial intelligence that scans the web for content.

**FierceHealthIT**

**FierceHealthIT** – <http://www.fiercehealthit.com/>

This is a health IT news site that provides the latest news and information on CPOE (computerized physician order entry), EMR adoption, and HIPPA compliance. This is a great resource for a quick daily scan to learn about new announcements and developments, plus trends and reactions to the changes in healthcare requirements. You can visit their site for archival resources or subscribe to their blog.



**Health Data Management** – <http://www.healthdatamanagement.com/>

If you can get over the “in-your-face” ads and having to register anytime you want to attend a seminar or read a whitepaper, this a super site for keeping up with topics such as: HIPPA, EHRs, clinic & hospital info systems, e-health & e-Rx, IT outsourcing, patient safety, mobile tech, and much more. You can also check out their featured bloggers who might be discussing a hot topic, such as patient portals, HIT, and EHRs. The posts are a blend of opinion with data. The newsletters offer the latest news headlines along with a short blurb and links to the full article.

**Health IT – American Medical News** – <http://www.amednews.com/section/topic&Taxonomywords=815>

Produced by the American Medical Association, the American Medical News (amednews.com) blog allows you to subscribe to individual sections. This section covers health information technology and EHRs from the physician perspective. It contains current news items on the HIT/EHR industry, physician adoption, legislation, Medicare & Medicaid, vendors, and technical information. Other sections available for subscription include social media, education, patient care, and public health.

**Healthcare IT News** – <http://www.healthcareitnews.com>

This is a commercial site but the ads are fairly subtle. They are a part of MedTech Media out of Maine and they have a strong partnership with the non-profit HIMISS (Healthcare Information and Management System) group. They bill themselves as resource healthcare IT executives, but there is good information for anyone wanting to follow news on: IT strategies and tactics, statutory and regulatory issues, and health IT product news.



**HealthIT Buzz** – <http://www.healthit.gov/buzz-blog/>

This authoritative blog is produced by the National Coordinator for Health Information Technology and presents current information about health information technology and the transition from paper to electronic health records. Topics include meaningful use certification, interoperability, nursing use of EHRs and patient involvement. If you're interested in working with your institution's EHR, this blog is for you.

## Education Delivery



**ACRL TechConnect** - <http://acrl.ala.org/techconnect/>

This is a moderated blog produced by a group of academic librarians covering all aspects of library technology. They describe their site as covering innovative projects, emerging tech tools, computer programming, usability, design, and more. You can subscribe to the blog, or search by one of the numerous categories from the main page. A recent post discussed collecting library data and encouraged the adoption of privacy and retention policies. This is an excellent resource for all librarians, not just those employed in academia.



**ALA TechSource** – <http://www.alatechsource.org/blog>

Topics covered in posts from this ALA resource pretty much cover the gamut, but are very library centric. You'll find lots of posts about media tools and resources plus tips on technology instruction. It is sometimes overwhelming, in a positive way, to read all the cool stuff librarians are doing in the area of technology. If you are looking for project ideas or tips on delivering a program, subscribing or scanning the archives is a good use of this resource.



**Dotto Tech Radio** – <http://dottotech.com/>

This is a weekly online streaming radio show out of Vancouver that also has a newsletter. They cover all sorts of technology related topics, mainly for the consumer. They occasionally have guests on the show who are leaders in their field. This is a great site that is an entertaining way to stay on top of consumer related tech news, such as: gadgets, social media tools and usage strategies, mobile apps, how technology can help you be more productive, and much more. They also put their shows on their YouTube channel and have done a nice job of organizing the topics into the categories of productivity, interviews/news, and tips/techniques to help you browse to find what you're looking for.

**iMedicalApps** – <http://www.imedicalapps.com/>

Described as the “leading physician review of medical and healthcare apps,” this site helps you keep up with the apps that physicians and medical students are using. It includes app reviews, items on mhealth news and current industry issues (such as a post about medical uses of Google Glass or a warning from the FDA about medical device hacking), and physician commentaries. We’re all pressed for time, and it’s not necessary to read all of the individual app reviews. Just scanning through the posts helps keep you aware of what’s happening in this area of medicine.

**Krafty Librarian** – <http://kraftylibrarian.com/>

Michelle Kraft’s personal blog about medical librarianship is interesting and quite popular. Although she covers general medical library issues, she tends to focus on technology, including industry news, iPads, reviews of apps and online resources, notes on PubMed, and information about educational webinars.

**Library Hat** – <http://www.bohyunkim.net/blog/>

This intriguing blog is written by Bohyun Kim, Digital Access Librarian at the Florida International University Medical Library, and ranges from technical posts on writing code to thought-provoking articles on e-resource licenses and the open Internet. Other topics have included mobile devices in medicine, building relationships with IT, and productivity. With an average of 2 posts per month, it’s easy to fit in your schedule and definitely worthwhile.

**PR Daily** – <http://www.prdaily.com/Main/Home.aspx>

This is a daily news site devoted to delivering news, advice, and opinion on public relations, marketing, social media, and what is happening in the media world. The articles are easy to scan/read and presented in an entertaining way. They are full of good tips to improve your communications with your users but tend to be repetitive. You may find these resources most useful when you are actually working on a communication improvement project.

**TechSoup for Librarians** – <http://techsoupforlibraries.org/blog>

Another blog from ALA, this is designed for a general librarian audience with the stated goal to “make technology and technology education available and affordable to libraries all over the world.” The focus is on public libraries, but it’s a good place to start if you’re new to technology. A wide variety of topics are covered, including pc trouble shooting, web design, training and instruction, assistive technology, and innovative programs. This site also includes a list of free webinars, a monthly newsletter, and downloadable Cookbooks containing tips and techniques on computer maintenance.

-John Bramble, Utah/Technology Coordinator

-Rachel Vukas, Kansas/Technology Coordinator




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## Computers in Libraries 2013

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Thanks to the NN/LM MidContinental Region Professional Development Award, I was able to attend the Computers in Libraries (CIL) 2013 conference. The conference was held in Washington, DC April 8-10. (Just in time for the cherry blossoms!) In the past, I have attended professional conferences focused solely on

academic or medical librarianship, so I was excited for something new. One of the great things about CIL is it brings together all different types of librarianship. There were government, academic, public, corporate, school and special libraries all represented. Even though our libraries may be very different, we can all learn from each other.

This was especially true in the “Management Metrics That Work” session. This session was moderated by government librarians from the Federal Reserve Bank, the Export/Import Bank and the Agency for International Development. The focus was on collecting and reporting data in a way that best advocates for the importance of the library. Everything from the usual; patron count, checkouts, ILL count, etc., to things I had never thought of; quantify time spent cataloging materials or average hour of computer usage by patrons. They also showed samples of their annual reports. One in particular used a case study outline and infographics. I plan to implement this into my next annual report. I also attended the “Innovative Library Tech: Practice & Services” session. This session was an impromptu panel allowing us all an opportunity to discuss the ways in which we utilize and implement technology into our libraries. Everything from gaming to 3D printing was discussed. Another session, “Negotiating EContent & Tech Licenses” provided a perspective on selling from both the seller and the buyer. This was a very valuable session because it was the first time I heard a salesperson discuss the ins and outs of their sales approach. Because of this session I have a better understanding of the selling process, which will be a tremendous help come renewal time! I also attended the ‘Library Budget Trends & Spending Priorities for 2013’ session. This session reviewed the annual survey of library budgets. As suspected, libraries still face severe budget cuts. I felt lucky to be one of the few people in the room who has not been hit with dramatic cuts.

In addition to the excellent sessions, there were also excellent keynote speakers. The first keynote “Evolving Community Engagement: What would Amazon and Google do?” focused on the importance of customer service and customer relationship management. Because we are all so busy with the responsibilities of our job, we often forget how important it is to not just maintain, but also foster relationships with our users, something Amazon and Google are very good at.

The 2013 Computers in Libraries Conference provided a wonderful variety of numerous topics from technology to reference to management. There was something for everyone. Along with the excellent content of the session and speakers, the conference was also well organized and very well run. I highly recommend the CIL conference!




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## New Dietary Supplement Label Database

This summer a new [Dietary Supplement Label Database](#) (DSLSD) was released to reflect information not only for the consumer, but for researchers, health care professionals, and students.

The goal of the new site is to capture dietary supplement information from nearly 50,000 labels. The initial release will have 17,000 – with 1,000 labels to be added monthly. In comparison, the old DSLSD site contained information on over 8,000 products. The new DSLSD is a partnership between the Office of Dietary Supplements (ODS) and the National Library of Medicine’s (NLM) Division of Specialized Information Services.

### Old DSLSD vs. New DSLSD

Old DSLSD Version	New DSLSD Version
- 8,000 labels	- 17,000 labels to start, up to 50,000
- No label images	- Has label images
- Not indexed with controlled vocabulary	- Uses LanguaL controlled vocabulary
- Data not in public domain	- Data in public domain
- 1,000 new labels per year	- 1,000 new labels per month
- Data from DeLima Associates	- Data and images from Therapeutic Research Faculty (TRF)

### Side by Side Comparison

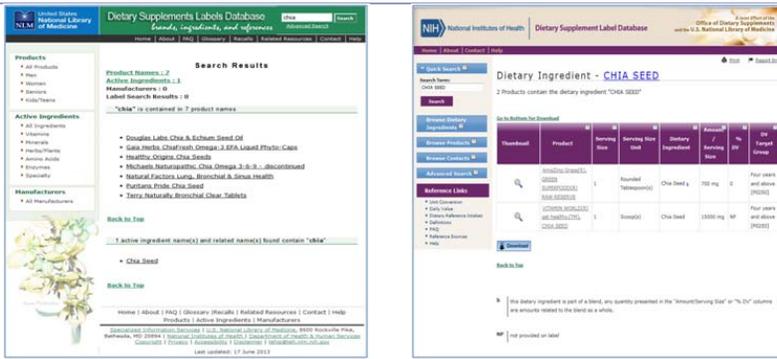


Figure 1 Results page for Chia Seed (old site left, new site right)

## More on the New Site

Each label entry will provide a thumbnail image of the product label (see below), the product name, serving size, serving size unit, dietary ingredient, amount/serving size, percentage of daily values, and target groups.

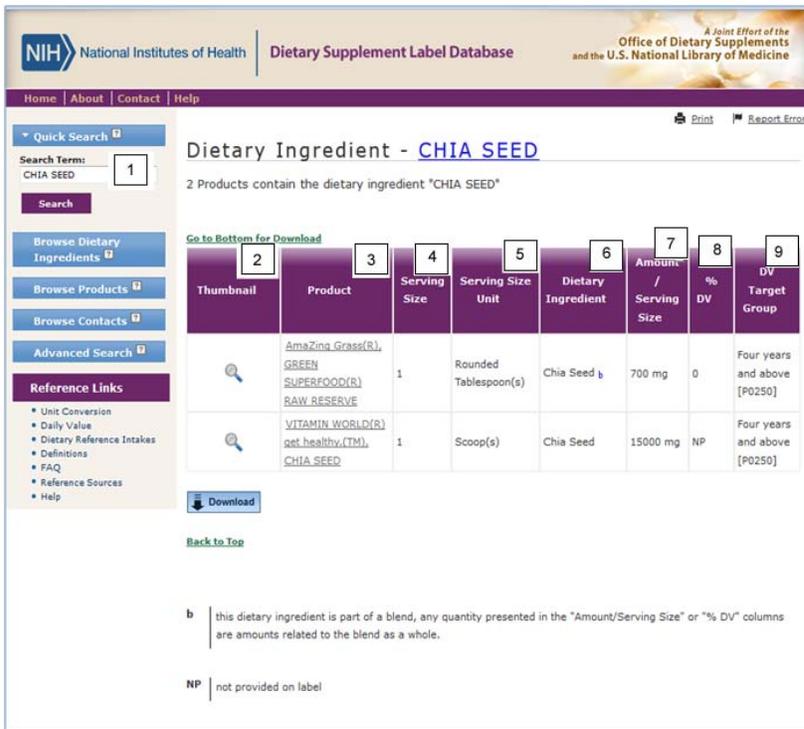


Figure 2 Results page for Chia Seed (new site)

- 1. Search Box** The search box is hidden until you click the down arrow on the Quick Search bar. You can enter an ingredient name or a supplement name. You can also browse by an alphabetical list of ingredients or products, or conduct an advanced search.
- 2. Thumbnail** Placing your mouse arrow over the thumbnail magnifying glass icon will reveal your label. The image below is from the Vitamin World product label (the second entry above).



- 3. Product** For each dietary supplement product in the new site, the user can search the DSLD for all products with a specific brand and/or by the product names.
- 4. Serving Size** One serving of a dietary supplement equals the maximum amount recommended, as appropriate, on the label for consumption per eating occasion, or in the absence of recommendations, 1 unit (e.g., tablet, capsule, packet, teaspoonful, etc). If more than one serving size is listed, that

information will be provided.

5. **Serving Size Unit** A description of one serving's form (e.g., tablet, capsule, ml).
6. **Dietary Ingredient** "Ingredient" refers to the compounds used in the manufacture of a dietary supplement. For instance, when calcium carbonate is used to provide calcium, calcium carbonate is an "ingredient" and calcium is a "dietary ingredient."
7. **Amount/Serving Size** The names and the quantitative amounts by weight of each dietary ingredient.
8. **% DV** Daily Value comprises two sets of dietary standards: Daily Reference Values (DRVs) and Reference Daily Intakes (RDIs). Only the percent Daily Value term appears on the label to make label reading less confusing and to help consumers see how a food fits into an overall daily diet.
9. **DV Target Group** Refers to dosage information specific to certain populations such as adults, children, infants, etc. For supplements, the assumed target is Adults and Children 4 or more years of age.

- .Dana Abbey, Colorado/Health Information Literacy Coordinator



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