



PLAINS TO PEAKS POST



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Advocacy for Hospital Librarians

CCML Advocacy Committee

Concerned by closures and downsizing of hospital libraries in Colorado, the Colorado Council of Medical Libraries (CCML) formed the Advocacy Committee in 2003 to address this problem. The committee chose three courses of action: accreditation for continuing medical education, a letter campaign, and an Administrator of the Year Award.

Accreditation for Continuing Medical Education

Inspired by steps taken in Connecticut in an article written by Gluck and Hassig¹, the committee approached the Colorado Medical Society (CMS). Two members, Margaret Bandy and Karen Wells, met with the Continuing Education Committee to suggest that one person from the committee assist with surveys to determine if hospitals met minimum standards for hospital library services. As many of Colorado hospitals are small, rural facilities that have never had a medical library, Margaret and Karen developed a chart to clarify the standards for the committee. It was important for the committee to convey that participation was intended to be a resource and guide for services, and would not be in any way punitive. Over the next few months, CMS had numerous questions, and the Advocacy Committee was rewarded with a letter stating that a member of the committee would be permitted to assist the CMS Continuing Education Committee with hospital surveys.

Letter campaign

Hoping to reach the administrators directly, the Advocacy Committee wrote a letter to be mailed to hospital administrators. The Regional Medical Library edited this letter and librarians from the region were given the opportunity to send the names and addresses of their administrators to the RML. The letters mailed were signed by the director of the RML. Other RMLs thought this was an excellent idea and offered the letters to their hospital librarians. The letter campaign was repeated as part of National Medical Librarians Month in 2005.

Additional letters were written and mailed whenever a librarian notified the committee of impending downsizing or closure. Welcome letters were sent to the administrators when a facility started a new health sciences library and hired a librarian.

Administrator of the Year Award

Earlier this year, the Advocacy Committee requested nominations for the Administrator of the Year. In October, the award was given to Mitchell Carson, CHE, President and CEO of Longmont United Hospital. "For Recognition of Medical Librarians and Libraries as Essential Components in Quality Health Care and Patient Safety." Longmont United Librarian, Teri Manzanares, and CCML President, Joyce Condon, presented the award at a salsa party at the hospital.

For more information about the work of the CCML Advocacy Committee, go to the CCML Marketing and Advocacy page at (<http://www.ccmlnet.org/marketing.html>). A copy of the poster presented at MLA and MCMLA is also at this site. For more information, contact Jenny Garcia, Chair, at jgarcia@uwyo.edu

¹Gluck JC, Hassig RA. Raising the bar: the importance of hospital library standards in the continuing medical education accreditation process. Bull Med Libr Assoc. 2001 Jul; 89(3):272-6.



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Call to Action!

One of my favorite parts of this job is the chance I have to meet people from our region and from across the country who are working to eliminate health disparities. It really does come down to each individual person - each librarian, each community health advocate, and each health care provider - who works tirelessly to eradicate this injustice in health care. I was fortunate to attend the Office of Minority Health "National Leadership Summit on Eliminating Racial and Ethnic Disparities in Health" in January (<http://www.omhsmit2006.org/>). The Office of Minority Health was established in 1986 after the release of the landmark 1985 Report of the Secretary's Task Force on Black and Minority Health. This summit marked the 20 year anniversary of the office, and was a call to action for the over 2,000 individual attendees to take active steps toward the elimination of disparities for all.

The summit covered a wide range of topics from Health IT to genomics. Several morning plenary speakers announced valuable reports and resources of special interest to medical librarians. On Monday, Michael O. Leavitt, Secretary of Health and Human Services, announced the release of the "2005 National Healthcare Disparities Report" as well as the "2005 National Healthcare Quality Report" published by the Agency for Healthcare Research and Quality (AHRQ) (<http://www.qualitytools.ahrq.gov/>). In addition, the Office of Minority Health has created a "one-stop" minority health data portal on its web site, geared toward assisting researchers, academics, and health professionals with locating minority health data. The site will feature federal, public and private minority health research and data sources that identify data gaps and opportunities for linkages (<http://www.hhs-stat.net/omh/>). Also on Monday, Dr. Stephen Thomas, Director of the Center for Minority Health, University of Pittsburgh, announced the free online Minority Health Archive (<http://minority-health.pitt.edu/>) which will eventually become the "primary repository and archive for all materials related to minority health."

The afternoon was broken up into numerous sessions given by community health advocates and health care providers. I attended the workshop on the use of the Internet, and was pleased to hear from University of Arizona librarian Annabelle Nunez, who talked about her work with the Hispanic Center of Excellence (<http://hcoe.ahs.arizona.edu/index.cfm>). Annabelle is creating the position as she goes, developing a web site of resources and training sessions, as well as working with her community to increase access to health information. Many people at this session had NLM grants and were working on increasing health information to their communities. What a thrill to see all that work going on! There isn't enough space here to tell you of all the wonderful speakers I heard. The Kaiser Foundation has made a health cast available of many of the morning plenary speakers, so you can tune in for yourself (http://www.kaisernetwork.org/health_cast/hcast_index.cfm?display=detail&hc=1616). If you can find the time to listen, I highly recommend viewing as much as you possibly can.

-S. Champ-Blackwell

MCR Regional Buying Consortium Rated a Success!

The RML recently concluded a survey of participants in the MCR Regional Buying Consortium, evaluating the perceived success of the consortium program. This program has been in the development phase for approximately two years, and since August 2005 has licensed two e-resources for members in the MidContinental Region.

The products that are currently being licensed for consortium members are ACP PIER and AccessMedicine. Evidence Matters, a third product for which the consortium has negotiated, has recently been purchased by ProQuest, so the licensing process is currently on hold. More information on this product will be made available soon.

Results from the survey show:

- Members reported high interest in both ACP PIER (58%) and AccessMedicine (37%).
- For Evidence Matters, members reported average interest (32%) with more members voting 3 on a scale of 1-5 than any of the other rankings.
- Members reported that they have received adequate technical support when needed, and that any problems have been successfully resolved (89.5%).
- 85% of members report that communications from the RML on these products have been both timely and effective. In response to comments additional information on this program will be put up on the MCR web site.
- A majority of members (52.6%) are interested in a licensing schedule that runs from January - December.
- 52.9% of participants report that the MCR Regional Buying Consortium has lowered their collection development costs.
- 100% of members report that the MCR Regional Buying Consortium provides a valuable service.

Thank you to all who took the time to fill out this survey and provide feedback. Please contact Barb Jones if you have further questions or interest in this program.

- B. Jones

Quotes from current participants in the program:

"Without the MCR Consortium I would not be able to purchase the access due to high cost."

"I hope this program continues. I am not sure everyone has fully realized the benefits this type of program could provide to the region in terms of costs and product access."

"The program provides a tool for librarians to use for providing cost effective resources. It allows us the opportunity to purchase resources that enhance our informational sources at a lower cost."

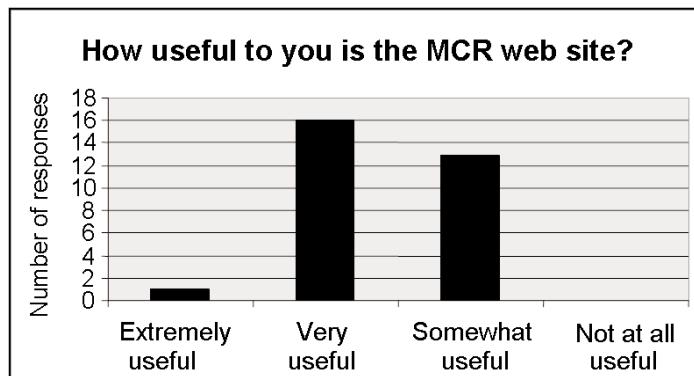
MCR Web Site Update

Results of the Web Site Survey

Last fall, the MCR surveyed members to ask for feedback about the MCR's web site. The survey was conducted online using SurveyMonkey. Participants were solicited through the MCMLA list-serv.

A total of 37 members responded to the survey. Of the 37, 30 members had accessed the web site since the October 2004 redesign. Eleven of the respondents were from hospital libraries, seventeen were from academic health sciences libraries, one was from a public library, and one didn't identify the library where he/she worked. Those who had accessed the web site answered further questions about the web site's usefulness to their work.

Forty-three percent accessed the web site at least once a month. All



of the respondents found the web site at least "somewhat useful."

The most commonly visited pages on the MCR web site are listed below:

- Resources for Medical Librarians (78%)
- RML News and Newsletter (57%)
- Consumer Health Information (53%)

Forty-one percent of the respondents rated the resources for medical librarians page as the "most useful" on the web site.

Eight of the respondents (28%) said that they subscribed to the RML RSS news feed, while ten (35%) said they chose not to subscribe. Eleven members said they were not sure what was meant by an RSS news feed. We expect that this number will change with the rapidly increasing proliferation of blogs and news feeds: subscribing to news

feeds is now one of the most efficient ways to receive information about topics of interest.

See "Web" on page 6

24 Languages Audio Files Project

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In October of 2002, the Eccles Health Sciences Library submitted a successful proposal to the National Network of Libraries of Medicine to fund the creation of online recordings of consumer health information in many languages, working from pdf documents already made available through the 24 Languages Project (<http://medstat.med.utah.edu/24languages>). This effort was prompted by the need for multilingual consumer health information in both visual and audio formats. According to Census 2000 data, over 44 million Americans speak a language other than English at home¹. A 1997 survey found that nearly 10% of all Americans 18 years of age and older experienced vision trouble, even with the aid of corrective lenses². Additionally, the 1992 National Adult Literacy Survey found that over half of respondents born outside of the U.S. could not complete tasks on the most basic English literacy level³. Illiteracy in English and one's own language creates obstacles to health care⁴.

Two years earlier, Spencer S. Eccles Health Sciences Library and the Utah Department of Health began a collaborative effort to address the health information needs of non-English speaking people, resulting in the 24 Languages Project. The Department's Bureau of Primary Care, Rural and Ethnic Health contributed a col-

lection of printed health education brochures in 24 different languages to this endeavor, and the library proposed to complete the work of digitizing these brochures and making them available through the Internet. The Institute of Museum and Library Services provided funding in the form of an LSTA mini-grant to pay for equipment, promotional materials and the man-hours needed to complete the project. The library completed the work and established a web site as a point of access for the brochures in a pdf format. Later, several other partner organizations contributed their high quality, multilingual consumer health publications, and the 24 Languages Project became a nationally recognized, one-stop source for materials addressing a wide variety of health topics.

Project staff recognized the limitations of providing information in a singularly visual presentation. A practical means to overcoming barriers to health information for those who are not served by data in a visual format is to provide online, easily accessible sound recordings of consumer health-related information. The generous funding provided by the National Network of Libraries of Medicine made such an undertaking possible. Project staff located native speakers of most of the respective languages to narrate approximately 200 multilingual health publications. These narrators were primarily located through networks formed with international student associations on the University of Utah campus. Local community organizations, such as the Utah Office of Asian Affairs, also assisted the project team in locating qualified narrators. At the digital recording studio at the Spencer S. Eccles Health Sciences Library, these native speakers read aloud health content already translated into their respective languages. These readings were recorded, digitized, and prepared for web-based availability.

See "Languages" on page 5

Improving Your Computer's Performance: Clearing Cache, Removing Unwanted Programs, and Defragmenting Files

Reprinted from NEReastah: Newsletter of the New England Regional Medical Library. Summer 2005, v5#1 (<http://nnlm.gov/ner/newsletter/19/techtimes19.html#techtime>)

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Most of us move a little slower as we get older. Computers that are just a year old run slower than when they were brand new. However, with computers, there are a few easy things you can do to return some of that "zip", especially when getting started in the morning (booting) and viewing web pages.

A number of issues can slow your computer—unnecessary and fragmented files and programs that automatically run at startup are two problems that are relatively easy to fix. A virus is another possible reason why your computer runs slow. Your organization's Information Technology (IT) or Information Services (IS) department should investigate and repair problems related to a virus that gets past your organization's firewall and virus protection software.

This article addresses some of the steps you can take when your computer is running slowly—before you call your organization's IT department.

Cache Management

No, I am not talking about investing in a 401K or preparing a budget!

Web pages and files are stored in the Temporary Internet File folder on your computer. This speeds the display of frequently visited Web pages because the pages are retrieved from your hard drive rather than the Internet. This Temporary Internet File folder is often referred to as the cache, or the browser's cache. Over time, this file can become large and there can be discrepancies between the version of the page on your computer and the "live" version available on the Internet.

Cache Browser Setting Options

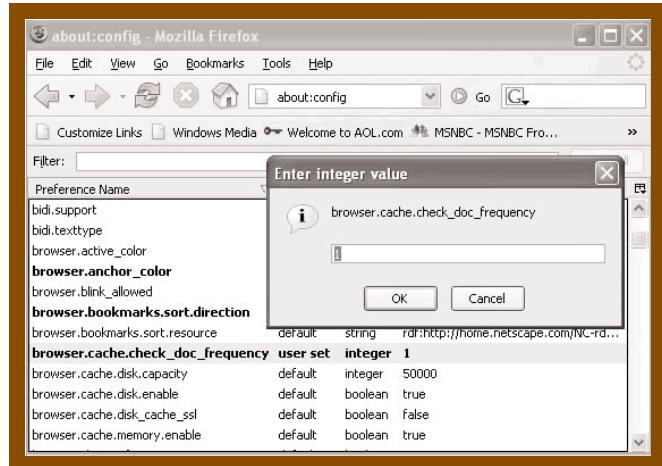
Each Internet browser has slightly different options. However, To eliminate the problem of viewing older versions of Web pages, set the option "Check for Newer Version of Stored Pages" to "Every Visit to the Page". The way this is changed depends on your browser.

Setting Internet Explorer Cache

1. Select Tools.
2. Select Internet Options.
3. On the "General" tab under the "Temporary Internet Files" section, select Settings.
4. Select the radio button, "EVERY visit to the page."
5. Select OK, then OK again.

Setting Firefox Cache

1. Open a second browser window, delete the address in the URL bar and type about:config
2. Press Enter to see Firefox settings.
3. Scroll down to browser.cache.check_doc_frequency
4. Highlight and double click. Change the 3 to 1 in the dialogue box. Click OK.
5. Close window, exit and restart Firefox to enact the change.



Setting Netscape Cache

1. Select Edit.
2. Select Preferences.
3. Select Advanced.
4. Under Cache, select the radio button "Every time I view the page."

Clearing Cache

Below are instructions on clearing cache based on Internet browser type.

Microsoft Internet Explorer

Select Internet Options from the Tools pull-down menu.

1. Select the General tab. In the middle of this page is the Temporary Internet Files section. Press the "Delete Files" button.
2. You are then prompted by the dialog box, Delete files. In this dialog box, you are asked if you wish to Delete all files in the Temporary Internet Files folder. Press the "OK" button.
3. On the bottom of this page is the History section.
4. Press the "Clear History" button.
5. You will then be prompted by the dialog box, Internet Properties. In this dialog box, you are asked if you wish to Delete all files in your History folder. Press the "OK" button.
6. Press the "OK" button on the General tab screen.

Firefox

1. Select Tools and then select Options on the Firefox menu bar.
2. Press the Privacy Icon on the Option menu bar to open the Privacy Properties.
3. Press Clear across from the Cache option.
4. Press Ok to return to the browser main page.
5. Exit and restart the browser.

See "Performance" on page 5

"Performance" continued from page 4

Netscape 7.x

1. From the main menu select Edit, then select Preferences.
2. On the Preference dialog box, open Advanced.
3. Under the Advanced option select Cache.
 - Press the Clear Memory Cache button.
 - Press the Clear Disk Cache button.
 - Press the OK button to continue.
 - The value for Compare the page in the cache to the page on network: should be set to "Every time I view the page".
4. Click the OK button.

Removing Unwanted Programs

Windows 2000 and Windows XP

Follow the steps outlined below to remove unwanted programs when using either Windows 2000 or Windows XP.

1. Click Start, and then click Control Panel.
2. Click Add or Remove Programs.
3. Scroll through the list and examine each program. The list includes how often you use a program and what day you last started it.
4. Click each program you no longer need. Click the Remove button. Follow the prompts to uninstall it. You may have to restart your computer after removing a program. After your computer restarts, repeat the steps above to remove more programs.

Another way to find wasted disk space is to use the Disk Cleanup tool:

1. Open My Computer. Right-click Local Disk, and then click Properties.

"Languages" continued from page 3

adjacent to the existing pdf documents of the same material on the project's web site. Robert Yang, the project's technician, recorded the narrations and prepared them for downloading and streaming, as well as locating most of the narrators.

Project staff, as well as other Eccles Library staff, enthusiastically promoted this new resource. Staff members created a short brochure on accessing the recordings and maximizing their use, as well as attractive bookmarks. Much of the promotional efforts were carried out through "train the trainer" sessions at clinics, public libraries, community centers and other locations. Staff members provided a total of 26 training sessions for 73 service providers. Individuals participating in these events received the new resource enthusiastically, and many mentioned how it would benefit their clients. The project was also featured at several health fairs and professional conferences. Staff members provided over 100 demonstrations of the new resource at these events and promoted the audio files to hundreds of individuals, many of them multi-ethnic health consumers. Many of these individuals also mentioned that the audio files would be quite valuable to them and their families. Thanks to the efforts and enthusiasm of the collective Eccles Library staff, especially the outreach team, many individuals became

2. On the General tab, click the Disk Cleanup button. Disk Cleanup will spend a few minutes examining your disk.
3. The Disk Cleanup dialog box opens. Identify files to remove. Suggested files are Downloaded Program Files, Temporary Internet Files, Microsoft Error Reporting Temporary Files, and the Recycle Bin.

Running Disk Defragmenter

Windows 2000 and Windows XP

You need administrator privileges to defragment a drive or volume. It is relatively easy to defragment your computer by following these steps:

1. Open My Computer, right-click Local Disk, and then click Properties.
2. On the Tools tab, click Defragment Now. The Disk Defragmenter opens.
3. Click your first hard disk, and then click Defragment. Disk Defragmenter will work for at least several minutes, although it may take several hours.

The steps outlined above are some of the actions you can take to improve your computer performance. As mentioned in the beginning of the article, a virus or spyware are other potential reasons why computer may run slowly. However, if you start with these steps, your organizations IT/IS department can focus on the more complex issues.

Please feel free to contact me at penny.glassman@umassmed.edu or 508-856-5974 if you have any questions.

acquainted with the audio recordings and the 24 Languages Project in general.

Several indicators disclose a positive reception of the audio files by service providers and the general public. In the 17-month period after the audio files first appeared on the web site, visits increased by 405%. Based on their research, project staff estimated that the number of web sites with links to the 24 Languages Project more than doubled within this same time period. Feedback has also been quite positive.

In conclusion, project staff felt that the work to create and promote the audio files was very worthwhile. They continually receive positive feedback, and plan to expand both the audio file and pdf collections in the future.

¹U.S. Census Bureau. Census 2000 Supplementary Survey Summary Tables. AT-02 Profile of Selected Social Characteristics: 2000 (http://factfinder.census.gov/servlet/QTTable?ds_name=DP&geo_id=D&qr_name=ACS_C2SS_EST_G00_QT02&lang=en)

²Centers for Disease Control. "Summary Health Statistics for U.S. Adults: National Health Interview Survey, 1997" Vital and Health Statistics, Series 10, Number 205, May 2002 page 33, Table 12 (http://www.cdc.gov/nchs/data/series/sr_10/sr10_205.pdf)

³The 1992 National Adult Literacy Survey: Low Literate Adults Population Diversity Within the Lowest Literacy Level (<http://nces.ed.gov/nal/design/lowliteracy92.asp>)

⁴D J Tunfull, K Nuttall, J Raistrick, T L Jackson. Use of translated written material to communicate with non-English speaking patients. BMJ. 1994 Oct 15; 309(6960):992.

"Web" continued from page 3

The survey then asked for comments from the respondents. A few members said they found the site useful but did not visit it as often as they should. Other members suggested specific improvements for the site:

- More grant and funding information
- Health statistics resources
- Better search engine
- Easier navigation
- Blogs covering other special project areas besides community health
- Online directory of Network members
- Information on "return on investment" in libraries
- Site map
- Better organization for the state pages

Many of these suggestions will be addressed in the new redesign (see below). The new redesign will make the web site more useful and easier to navigate for members. However, we realize that improving the web site is an on-going process and we welcome your feedback at any time.

New Redesign for MCR and NN/LM Web Sites

Last fall, the National Networks of Libraries of Medicine (NN/LM) commissioned the consulting firm American Institutes for Research (AIR) to help the NN/LM improve the national and regional web

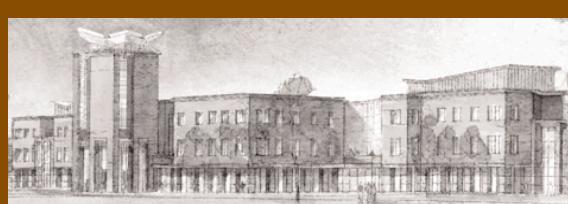
sites. AIR conducted usability tests on all of the NN/LM web sites and made recommendations for a redesign. The goal of the redesign is to present a consistent look and feel for all of the NN/LM sites, both national and regional.

The usability tests were conducted last fall with five volunteers from the MCR: two medical librarians, a public librarian, a health professional, and a consumer. The volunteers liked the look of the current home page but found it difficult to complete many of the tasks requested by AIR. AIR used the results of the usability studies to design templates with a new look and feel as well as an improved navigation system. The templates will be applied to the national site (<http://nnlm.gov/>) as well as the regional sites, including the MCR's (<http://nnlm.gov/mcr/>).

MCR staff is currently working on applying the redesign templates and the new navigation system to our pages. Look for the redesign to be rolled out in early May. The new redesign will allow users to move seamlessly from the MCR site to other regional sites and the national site. We will be soliciting more feedback from members after the rollout so that we can continue to improve the web site. In the meantime, if you have other comments about the MCR web site, please feel free to contact Sharon Dennis, Technology Coordinator.

-S. Dennis

Library Construction Gets Green Light from Colorado Supreme Court



Rendering Courtesy of Denison Memorial Library

The \$35 million University of Colorado at Denver and Health Sciences Center library construction project on the Fitzsimons campus, on hold since January 2004, can move ahead with a recent ruling from the Colorado Supreme Court.

In 2003, Governor Bill Owens signed HB03-1256, which authorized state-issued Certificates of Participation (COPs) funding the first phase of the University of Colorado's educational facilities at Fitzsimons, which included the library. In addition, the bill allowed for the construction of a new correctional facility for the Colorado Department of Corrections.

A lawsuit was filed by the Colorado Criminal Justice Reform Coalition (CCJRC) challenging the constitutionality of HB03-1256. In January 2004, the Denver District Court ruled that the bill was constitutional and dismissed the lawsuit. CCJRC then appealed that ruling to the Colorado Court of Appeals, who also upheld the bill's constitutionality.

Upon the decline of the Colorado Court of Appeals, CCJRC requested that the Colorado Supreme Court review the Court of Appeals decision. The Colorado Supreme Court's decision, announced October 17, 2005, declining to review the decision ended the case, allowing for construction to move forward within the next few months.

The user-oriented, 116,000 square foot health sciences library will have a prominent location on the 578-acre site—the largest medical-related redevelopment project in the nation. The total redevelopment program for Fitzsimons calls for more than 14 million square feet of phased new construction, totaling some \$4 billion in capital outlay.

The new library at Fitzsimons will employ state-of-the-art technology, with an interdisciplinary approach to learning, research and clinical care. The building will feature quiet areas, small group study rooms for collaborative learning, wireless technology, and cutting edge graphic and virtual reality technology. Completion is scheduled for late 2007.

-D. Abbey



Groundbreaking Ceremony on April 10

Training Tips from Marty: The Times, They Are A Changin'

Most of you have had the opportunity to train. Most of you have probably always done that in person. However, "the times, they are a changin'." As our patrons enter our "doors" through electronic portals, it is becoming more necessary to provide training through those same electronic portals.

Over the course of my career, I've had multiple opportunities to design, create, and teach classes/curricula in both business and academic settings. One of the best processes I learned was something called DACum, for Designing a Curriculum. Essentially, you put a group of people in a room, and asked them what they want their students to learn. As people brainstormed these topics, each topic was written on an 8 ½ x 11 piece of paper and tacked on the wall. Once all the topics were identified, the next task was to group them into some kind of order, identifying, let's say, four groups of information. This could be in line with the timeline of your class – i.e. four groups for four weeks of instruction, or four topic areas. Then you set about rearranging your pieces of paper. Each group of information would be put in a row. You'd name the overlying topic and put it on a piece of paper on the left side of the wall. Then you'd arrange your other topics in a chronological order of teaching after it. From then on, you're refining your information. The approach is basic and visual and it works.

Enter the New Era

I had the opportunity to attend the American Society of Training and Development TechKnowledge conference in February. I always think you learn as much checking out the vendor booths as you do hearing speakers, and this was no exception. Trends become apparent as you explore the booths of the exhibit hall.

It's here, that I see part of the future of libraries. The primary emphasis seemed to be in on LMS – Learning Management Systems. Most of us may know these better by some of their brand names: Blackboard or WebCT. There were a wide variety of LMS products on display to meet nearly every need, as well as vendors willing to help businesses develop their training to fit their needs. Now, do I think these vendors have a magic wand that we don't? Certainly not. I do, however, think vendors are finding ways to streamline this development.

Are we, as librarians, on board? It's my pleasure to say, I think we are. About a month after ASTD TechKnowledge, I had the opportunity to attend the week-long MLA CE Institute: Developing Web-Based Instruction. Selection to the institute was based on having previously developed a face-to-face MLA CE class. The objective of this week-long training was to learn to put your class online. Few in our class had experience with this. Depending on the institutions with which they were affiliated, students could elect to use any Learning Management System they liked. I opted for Moodle (open-access software).

Now this may sound like an easy prospect, putting your class online. But think about writing down everything you intend to say in that class. Think about each explicit component: objectives, lectures, learning activities, summaries and homework! Add to that the different forms of communication you should have in place to verify that both you and your students are on the same plane. It's a challenge!

These recent experiences have made me think about making my own face-to-face training tighter and more cohesive. I hope it will do the same for you. And should you have the opportunity, explore online education. I challenge you to take a class online for starters. Be the pupil, and then become the teacher. You could be pleasantly surprised!

-M. Magee

NLM Technical Bulletin January-February 2006

http://www.nlm.nih.gov/pubs/techbull/jf06/jf06_issue_cover.html

Technical Notes: e1

New Clinical Advisory Issued

PubMed®: Sweet 16

Environmental Health Concerns on the Farm: The Newest Neighborhood for Tox Town
New Clinical Alert Issued by National Institute of Allergy and Infectious Diseases (NIAID)

MeSH® Video Available on the Web

New Status Tag for PubMed® Citations

Smallpox Added to PubMed® Special Queries

NLM® and NASA Collaborative Arrangement for Space Life Sciences Data Ceases

NLM Gateway Enhances Search and Display of Meeting Abstracts

Added Security During My NCBI Registration

PubMed® Subject Subset Strategies Updated

Search Tag [ab] Discontinued in PubMed®

New Animated Tutorials Available on the LinkOut for Libraries Web page

PubMed Central®: New Journals Participating and New Content Added - e2

New journals participating and content from already participating journals has been added.

New LinkOut Homepage and Help Manual - e3

New tabbed format and new features improve access.

Transliterated/Vernacular Title Search Added to PubMed® - e4

[TT] tag for Non-English language titles.

Last Author Added to PubMed's® "Sort by" Menu and Single Citation Matcher - e5

New searching and sorting capabilities added to PubMed.

My NCBI Collections: Save PubMed® Search Results - e6

Save search results and create bibliographies.



Skill Kit: Truncation in PubMed® - e7

Exploring this useful feature.

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