

# The Development and Evaluation of a Small Ready-Reference Library Collection for a Rural Practice:

## A Case Study\*

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### ABSTRACT

A demonstration core collection of twenty-four ready-reference sources and five journals was selected cooperatively by a solo practitioner in rural Menifee County, Kentucky, and the University of Kentucky Medical Center Library Field Librarian to fit the ready-reference and current awareness information needs of a primary care solo rural practice in eastern Kentucky.

The collection selections were systematically assessed by the physician to determine their utility in filling the practitioner's information needs with regard to his particular situation in terms of medical experience and level of training, available library and educational resources, and the type of health problems seen in his practice.

This assessment showed that the Rural Demonstration Library Collection completely filled the information needs of the physician 66% of the time materials were consulted and filled his immediate information needs either completely or partially 82% of the time the collection was searched.

This demonstration has shown that, under a specific set of circumstances, a librarian and a solo rural practitioner can effectively work together in identifying health sciences materials which fit the information needs of a solo rural practitioner. It suggests that cooperation between a librarian and a physician is important in meeting information needs.

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THIS paper reports an attempt to (1) determine the ready-reference library materials needs of one rural solo practitioner based on:

- a. The type of health problems seen in the practice,
- b. Available library resources,
- c. Existing continuing education programs,
- d. Years of medical experience, and
- e. Level of training;

(2) develop the collection to fit those needs; and (3) assess the utility of the collection in meeting the everyday medical information needs of the practitioner.

The need for this type of collection had been identified by the University of Kentucky Medical Center Library as early as 1969. It was not until 1976, however, that an attempt was made to fill the need by the careful development of a small ready-reference collection called the Rural Practice Demonstration Library.

Since the opening of the University of Kentucky Medical Center in 1959, the library had promoted the development of continuing education and had increased awareness and availability of educational materials through document delivery, computerized literature searches, and provision of basic reference services. Consultation for hospital library managers was also provided in an effort to spur hospital library development. In addition, the

Kentucky-Ohio-Michigan Regional Medical Library Program sponsors an Extramural Coordinator Program, supported by a grant from the National Library of Medicine, which enables the University of Kentucky Medical Center Library staff to conduct personal visits to most health-related institutions in Kentucky. During these visits it was discovered that the medical center library was providing most or all educational learning materials for the use of rural solo practitioners, because there were either no libraries or inadequate ones locally available to them. Consequently, health personnel were requesting materials from the medical center library from as far away as 200 miles.

Efforts were made by the extramural staff to create or upgrade in isolated clinics and hospitals library collections and services which could be used by local and area health personnel. These efforts were particularly active in eastern Kentucky, which is the most isolated and inaccessible area served. In some cases a small library was established, but in most situations the institutions could not afford to pay for the materials nor for a trained librarian with the expertise to establish and maintain a collection. Meeting information needs was seen as an unessential frill by institutions that were in some instances already struggling for existence. Therefore, the medical center continued to handle most requests from individuals in eastern and central Kentucky.

In a continuing effort to stimulate health sciences library development, the library applied in 1974 for assistance, through a National Library of Medicine Resource Project Grant, to develop a health information network in northeastern Kentucky. This project was approved and funding was made available from May 1975 to May 1978. Through this grant a field office was created in the area and a staff was hired to coordinate the program. Staff members were to assist in developing hospital libraries and in making resources available to all health practitioners in a twenty-county area of eastern Kentucky.

During the organizational period of the grant-funded Health Information Library Program (HILP), a letter was received at the medical center library from a physician just beginning his practice at a small rural clinic located in the HILP region. His request for information on available library services was referred to the HILP Field Librarian, who met with the physician to discuss how HILP could best serve him.

One outcome of these meetings was a common

concern about the availability of a core list of informational materials which contained a few basic but inexpensive ready-reference tools for use by a rural physician. When such a list could not be located, the medical center library requested a reallocation of funds from the original project grant from the National Library of Medicine to provide for the development of an experimental library containing these materials.

The concept of developing a small ready-reference collection for a rural practice received the enthusiastic support of the Menifee County Medical Center (MCMC) Medical Director, who was the physician who had originally requested information.

#### DEVELOPING THE COLLECTION

It was decided that this collection would be developed to fit the information needs of the MCMC Medical Director and his specific situation in terms of: (1) training, (2) experience, (3) availability of library resources, (4) availability of medical specialists as consultants, and (5) patient care services provided. This was done because the librarian and the physician recognized that no one small set of books would fit every situation in a solo rural practice. It was seen as more appropriate to fit the collection to this particular physician's needs and allow others to assess the usefulness of the collection based on their own situation. It was hoped that the role of the HILP librarian in helping the physician select the materials would serve as a model for other librarians seeking to assist rural solo practitioners in developing a ready-reference collection to fit their needs.

In this case the librarian's role was to clarify information needs by finding out: (1) the nature and kind of services provided at MCMC, (2) the training and experience of the director, and (3) the availability of educational resources. This type of information helped the librarian to preliminarily determine the type of materials which should be included in the collection.

From a series of visits with the MCMC Medical Director, the librarian learned that MCMC was a satellite ambulant clinic affiliated with St. Claire Medical Center in Morehead, Kentucky (thirty-five miles from MCMC), and that MCMC provided primary care for rural residents in Menifee County, an area where the major causes of death are arteriosclerosis, cardiovascular disease, and suicide. The librarian also learned that the medical director was a graduate of a large eastern

medical school and had served as an intern for one year. He had joined the Public Health Service after his internship and had already spent one year at MCMC. The director had a small current collection but felt the need for additional on-site resource materials. Even though library materials at St. Claire Medical Center were readily accessible as back-up resources, they were not available on site to the MCMC staff for ready-reference use.

In addition, the MCMC Medical Director had access to a variety of specialists for consultation via a direct, toll-free line from MCMC to St. Claire Medical Center. Monthly continuing education sessions conducted in cooperation with the University of Kentucky Medical Center were also available to the director.

#### *Selection of Materials*

Using the information collected about the physician and his situation, the librarian proceeded to prepare lists of appropriate materials for the collection. The first step in making these lists involved an identification of the specific information needs of the MCMC Medical Director as they related to patient care services. To start, the medical director, based on his personal experience, listed general topics which would need to be covered in the collection. The next step was to identify book titles which provided information on these topics. To identify titles letters were sent to a variety of sources, such as regional medical libraries, medical boards, societies, academies, associations, organizations, and medical schools, asking them to submit recommendations and lists of materials which should be included in a ready-reference collection for a solo rural practitioner. The sources contacted were told that the collection should (1) cover a broad range of topics on primary care treatment; (2) be concerned with diagnosis and treatment, as opposed to research findings; (3) be small and relatively inexpensive; and (4) fill both immediate reference needs and further extend knowledge for relation to other possible diagnoses.

From the sixty letters sent twenty-seven replies were received. None of those responding knew of the existence of a core list specifically designed to fit the information needs of the solo rural practitioner, although a few mentioned the Brandon, Stearns, and Iowa core lists [1-3]. Several of the medical boards named specific titles of books or journals they deemed appropriate for the collection.

The next step was to subdivide the specific titles

recommended and titles listed on existing core lists into subject areas of interest to the MCMC Medical Director. The resultant list of materials was weeded, culled, and evaluated, with substitutions made on the preliminary list if a book of comparable quality was available at a lower cost. Evaluation of the books was based on (1) recommendation by a medical board, (2) the number of times it appeared on core lists such as the Brandon list [1-13], (3) previous use and approval by the MCMC Medical Director, and (4) personal recommendations of specialists. Information on the number of times the selected materials were recommended and mentioned on core lists is to be found in Table 1.

Eventually, a final list of twenty-four books and five journals was prepared which seemed to fit the reference, information, and current awareness needs of this rural practitioner at the lowest cost and with as much comprehensiveness as possible. The cost of the collection totaled approximately \$721.82, including \$597.80 for books and \$124.02 for journals. A list of the titles included in the collection and their publication information is given in the Appendix.

The process of selecting materials for the collection was difficult and raised concern that the task was impossible. The final selection of journals and books was ultimately made by the MCMC Medical Director, because he would be the one to use them and evaluate their usefulness in filling his information needs.

#### ASSESSMENT OF THE UTILITY OF THE BOOK MATERIALS

An assessment of the utility of this collection was conducted over an eight-month period beginning in October 1976 and ending in May 1977, using an originally developed evaluation form, which was filled out by the MCMC Medical Director each time a search of the literature in the collection was made. Information recorded on the form included:

1. The question to be researched;
2. The immediacy of the need for an answer;
3. The source consulted;
4. How well the source consulted answered the question:
  - a. Completely,
  - b. Partially,
  - c. Not at all; and
5. What action was taken if no answer was received.

TABLE 1  
RECOMMENDATIONS FOR MATERIALS INCLUDED IN THE RURAL PRACTICE DEMONSTRATION LIBRARY

Core List Materials*	Brandon [1]	Stearns-Ratchiff [2]	Iowa [3]	A Library for Internists [4]	Model Reference Library [5]	Inke [6]	Moil [7]	Stearns Update [8]	Texas Tech [9]	Timour [10]	West-Wender [11]	West-Wender May [12]	Kirz-Turner [13]	MCMC Director's Previous Use	
<b>Books</b>															
American College of Surgeons	x		x		x						x				
American Society of Hospital Pharmacists			x												
Arndt	x†		x								x			x	
Benson															
Charnley														x	
Children's Hospital			x											x	
De Weese	x†	x		x		x		x							
Dreisbach	x†	x			x	x†									
Flint	x		x		x				x						x
Goodhart	x†														
Gosselin															
Kimming															
Krugman	x		x												x
Marrlott	x			x											
Merritt	x†	x				x†		x							x
Paul	x†	x				x†									x
Schwartz	x†		x			x†									x
Smith	x†		x			x†									x
Vaughan, D.	x†					x†									
Vaughan, V. (Nelson)	x	x	x			x†		x							
Wallach			x												
Washington University			x												
Wintrobe (Harrison's)	x†	x	x			x†									x
Wolcott	x		x												x
<b>Journals</b>															
<i>Annals of Internal Medicine</i>		x	x	x			x	x	x	x†					
<i>Journal of Pediatrics</i>	x†	x	x	x			x	x		x†					
<i>Medical Letter on Drugs and Therapeutics</i>	x			x			x								
<i>New England Journal of Medicine</i>	x†	x	x	x			x	x	x	x†					
<i>Surgery, Gynecology &amp; Obstetrics</i>	x†			x			x	x		x†					

\*Full titles and publication information may be found within the Appendix.

†Highly recommended on list indicated.

TABLE 2  
UTILIZATION OF RURAL PRACTICE  
DEMONSTRATION LIBRARY

	No. of Times	%
Collection consulted	154	100
Immediate answer needed	73	48
Source provided complete answer	103	66
Source provided partial answer	26	16
Source provided either complete answer or partial information	129	82
Source did not provide information	25	16

Tables 2 and 3 indicate the usage of the books by the MCMC Medical Director.

Because of the time, effort, and discipline required to assess this collection, it is inevitable that some questions were researched without a form being filled out. The number of times each source was searched for information and the rate of success in receiving an answer from each source is available in Table 4.

Table 4 shows that *American Hospital Formulary Service*, *Harrison's* (Wintrobe), *Nelson's* (V. Vaughan), and Wallach were the most frequently used texts. They provided a complete answer to questions being searched 83%, 66%, 84%, and 40% of the time respectively. The chart also shows that Dreisbach and Gosselin were never used, with Charnley, Flint, Marriot, Paul, and the Washington University *Manual* being used only once or twice. The frequency of use, of course, does not always indicate the usefulness of the book. Several of the books used infrequently (five times or less) proved to be 100% useful in answering questions. Books falling into this category include: *Children's Hospital Manual of Pediatric Therapeutics*; Flint; D. Vaughan's *General Ophthalmology*; the Washington University *Manual*; Paul; and Wolcott.

The rate of success for each source very much

TABLE 3  
ALTERNATIVES USED WHEN BOOK CONSULTED DID  
NOT PROVIDE ADEQUATE ANSWER

	No. of Times	%
Consulted another book in same collection	17	50
Consulted another book outside of collection	3	9
Specialist consulted	14	41

depends on the nature of the question and on the skill of the searcher in determining which text will provide an answer. Many times the MCMC Medical Director was led from one text to another within the collection, and of course, the first source searched was tallied as having provided a partial answer to the question.

It might prove interesting to have the MCMC Medical Director assess the utility of this collection after prolonged use. The rate of success would probably rise, given increased familiarity with the texts.

The collection as a whole was used a total of 154 times. A complete answer was obtained 103 times, or 66% of the times the collection was searched. Eighty-two percent of the time the collection provided either a complete or a partial answer when searched. The collection failed to answer questions 16% of the times it was searched.

The predominant topics, or subjects, for which the collection was searched were: (1) dosage and side effects of drugs, (2) internal medicine, (3) pediatrics, (4) skin disorders, and (5) interpretation of diagnostic tests. Although these topics dominated the information searches initiated by the MCMC Medical Director, a variety of other topics were also explored.

According to the MCMC Medical Director, a numerical tabulation of the collection's utility in completely answering questions—in this case 66% of the time—does not adequately assess the usefulness of each reference book or the collection as a whole. For example, the MCMC Medical Director stated:

The clinical toxicology book by Gosselin and the poison manual by Dreisbach were rarely used, but should be available to any practitioner where those emergencies might occur. The text by Goodhart on nutrition, while used infrequently, was felt to be important to the collection, because that information is difficult to obtain from a consultant. Similarly, the atlas of dermatology by Kimmig was useful, as the actual appearance of lesions is hard to transmit; thus the color picture became an invaluable tool in an accurate diagnosis.

In addition he added:

The nature of the practice naturally affected the usage of the books. EKG interpretation was available nightly by internists, so only emergency situations demanded use of the book by Marriott. Likewise, X-ray information in Charnley was not often needed because of the availability of a radiologist. The closeness of orthopedic referral obviated the need for in-depth coverage of more than simple fractures. Another book on which the tabulation was misleading was the book by Wallach on laboratory tests, which gave complete answers only 40% of the time.

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TABLE 4  
UTILIZATION AND EVALUATION OF DEMONSTRATION LIBRARY

	No. of Times Consulted	No. of Times Completely Filled Information Need (%)	No. of Times Partially Filled Need	No. of Times Did Not Fill Need
American College of Surgeons	6	3 (50)	2	1
American Society of Hospital Pharmacists	24	20 (83)	1	3
Arndt	7	4 (57)	2	1
Benson	6	3 (50)	3	—
Charnley	2	1 (50)	—	1
Children's Hospital	5	4 (80)	1	—
De Weese	7	4 (57)	1	2
Dreisbach	not used	—	—	—
Flint	1	1 (100)	—	—
Goodhart	4	3 (75)	—	1
Gosselin	not used	—	—	—
Kimmig	4	2 (50)	2	—
Krugman	5	2 (40)	—	3
Marriott	2	2 (100)	—	—
Merritt	9	6 (66)	3	—
Paul	1	1 (100)	—	—
Schwartz	3	1 (33)	2	—
Smith	4	2 (50)	2	—
Vaughan, D.	5	4 (80)	1	—
Vaughan, V. ( <i>Nelson</i> )	13	11 (84)	1	1
Wallach	15	6 (40)	3	6
Washington University	2	2 (100)	—	—
Wintrobe ( <i>Harrison's</i> )	24	16 (66)	2	6
Wolcott	5	5 (100)	—	—
Total	154	103 (66)	26 (16%)	25 (16%)

The value of the book was in pointing the user toward other texts, rather than providing full answers.

Finally, and definitely subjectively, certain texts were not as useful as initially expected. Concerning the obstetrics-gynecology text by Benson, a condensed book was chosen because the medical director does not practice obstetric medicine. However, the information provided in this book was still too brief, with too little detail for the physician's needs. In retrospect, the classic texts in obstetrics and gynecology might have been more useful. There was also redundancy in the texts not initially realized. Information in the emergency medicine book by Flint was covered more thoroughly in the other included texts. The surgery text by Schwartz was probably not vital to the collection. The infectious disease text by Krugman was good, but nearly all the information contained in this book was available in the *Nelson Textbook of Pediatrics* and *Harrison's*. The fracture book by Charnley was probably too complete; adequate direction for fracture work in this practice was available in other texts.

RESULTS OF THE JOURNAL ASSESSMENT

The purpose of making journals a part of the demonstration collection was to provide current

awareness, information, and continuing education in a comprehensive manner on a regular basis. The extent to which journals selected for the collection filled this purpose was determined by the medical director over the same eight-month period of use.

Although it was hoped that the five journals selected—*Annals of Internal Medicine*, *Journal of Pediatrics*, *Medical Letter on Drugs and Therapeutics*, *New England Journal of Medicine*, and *Surgery, Gynecology & Obstetrics*—would provide the kind of updated information needed by this rural solo practitioner, this was not entirely the case. Two of the journals selected—*Journal of Pediatrics* and *Surgery, Gynecology & Obstetrics*—failed to meet the medical director's current awareness information needs. Both journals proved to be too technical and research oriented. *American Family Physician*, *Lancet*, or *JAMA* probably would have been better choices to fill the criteria set for current awareness by providing practical clinical information. *Surgery, Gynecology &*

*Obstetrics* was probably a poor choice to begin with, because the MCMC Medical Director's practice includes very little obstetrics. This error in selection reemphasizes the importance of the consideration of patient care services in the selection of books for such a small collection.

#### CONCLUSION

The success of this demonstration can be weighed in several ways: (1) in terms of answering information needs, (2) in terms of coordination of activity of the physician and the librarian, and (3) in terms of the collection's utility for other solo rural practitioners.

First, the twenty-four ready-reference selections did meet the information needs of the MCMC Medical Director the majority, or 66%, of the times he turned to them. Perhaps more important is the fact that the collection filled the medical director's information needs either completely or partially 82% of the time, with partial answers more completely filled through other books in the collection. In other words, one selection would provide assistance through referral to another selection.

Second, the success of the demonstration can and should be weighed in terms of the usefulness of a coordinated effort between librarian and physician in selecting materials for a solo rural practice. This aspect of the demonstration showed that a useful collection can be developed through a coordinated effort. Cooperation is needed because the physician knows his situation and his information needs, but may not know what materials best and most economically fit those needs. The librarian can assist the physician by identifying appropriate selections and by providing addresses for ordering materials. The librarian may actually be able to order the materials at a lower price. With the lines of communication then open, the librarian can also better serve the physician in his or her utilization of other resources, such as MEDLINE, and other medical libraries through interlibrary loans. In addition, the librarian can help the physician update or upgrade his collection as the need arises.

Finally, the success of the demonstration collection should be assessed in terms of its utility as a core collection for other solo rural practitioners. It was hoped that the collection could be recommended to other rural practitioners as a model ready-reference library. Although this collection was very useful to the MCMC Medical Director, it would be presumptuous to assume it would fill the information needs of other solo rural practitioners.

Particularly because the MCMC Medical Director has so many outside resources and consultants available, his situation may be unique. Other more isolated practitioners might not have similar access to outside resources and would therefore need additional books and journals.

However, these factors do not negate the success of the demonstration ready-reference collection in filling one individual's information needs under a specific set of circumstances.

This demonstration has shown that a librarian and a solo rural practitioner can effectively work together in identifying health sciences materials which fit the information needs of the latter under a specific set of circumstances. It also suggests that cooperation between the librarian and the physician is important in meeting those information needs.

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## APPENDIX

### RURAL PRACTICE DEMONSTRATION LIBRARY\*

#### Books

- AMERICAN COLLEGE OF SURGEONS. COMMITTEE ON TRAUMA. *Early Care of the Injured Patient*. 2d ed. Philadelphia, Saunders, 1976. \$12.50.
- AMERICAN SOCIETY OF HOSPITAL PHARMACISTS. *American Hospital Formulary Service: A Collection of Drug Monographs and Other Information*. Washington, D.C., 1977. \$40.00 initial purchase and \$17.50 for each supplement.
- ARNDT, KENNETH A. *Manual of Dermatologic Therapeutics*. Boston, Little, Brown, 1974. \$8.95.
- BENSON, RALPH C. *Handbook of Obstetrics and Gynecology*. 6th ed. Los Altos, Calif., Lange, 1977. \$9.50.
- CHARNLEY, JOHN. *The Closed Treatment of Common Fractures*. 3d ed. New York, Longman, 1961. \$18.50.
- CHILDREN'S HOSPITAL MEDICAL CENTER, BOSTON. DEPARTMENT OF MEDICINE. *Manual of Pediatric Therapeutics*. Edited by John W. Graef and Thomas E. Cone, Jr. Boston, Little, Brown, 1974. \$8.95.
- DE WESE, DAVID D., AND SAUNDERS, WILLIAM H. *Textbook of Otolaryngology*. 4th ed. St. Louis, Mosby, 1973. \$18.50.
- DREISBACH, ROBERT H. *Handbook of Poisoning: Diagnosis and Treatment*. 8th ed. Los Altos, Calif., Lange, 1974. \$9.00.
- FLINT, THOMAS, JR., AND CAIN, HARVEY D. *Emergency Treatment and Management*. 5th ed. St. Louis, Mosby, 1975. \$14.75.
- GOODHART, ROBERT S., AND SHILS, MAURICE E., eds. *Modern Nutrition in Health and Disease: Dietotherapy*. 5th ed. Philadelphia, Lea and Febiger, 1973. \$35.00.
- GOSSELIN, ROBERT E., ET AL. *Clinical Toxicology of Commercial Products: Acute Poisoning*. 4th ed. Baltimore, Williams and Wilkins, 1976. \$54.00.
- KIMMIG, JOSEPH, AND JÄNNER, MICHAEL. *Freiboes/Schönfeld Color Atlas of Dermatology*. Philadelphia, Saunders, 1966. \$79.50.
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- SMITH, DONALD R. *General Urology*. 8th ed. Los Altos, Calif., Lange, 1975. \$11.00.
- VAUGHAN, DANIEL, AND ASBURY, TAYLOR. *General Ophthalmology*. 8th ed. Los Altos, Calif., Lange, 1977. \$12.00.
- VAUGHAN, VICTOR C., III, AND MCKAY, R. JAMES, JR., eds. *Nelson Textbook of Pediatrics*. 10th ed. Philadelphia, Saunders, 1975. \$32.75.
- WALLACH, JACQUES B. *Interpretation of Diagnostic Tests: A Handbook Synopsis of Laboratory Medicine*. 2d ed. Boston, Little, Brown, 1974. \$7.95.
- WASHINGTON UNIVERSITY SCHOOL OF MEDICINE. DEPARTMENT OF MEDICINE. *Manual of Medical Therapeutics*. 21st ed. Boston, Little, Brown, 1974. \$7.95.
- WINTROBE, MAXWELL M., ET AL., eds. *Harrison's Principles of Internal Medicine*. 7th ed. New York, McGraw-Hill, 1974. 2 v. \$40.00.
- WOLCOTT, MARK W., ed. *Ferguson's Surgery of the Ambulatory Patient*. 5th ed. Philadelphia, Lippincott, 1974. \$27.00.

#### Journals

*Annals of Internal Medicine*  
*Journal of Pediatrics*  
*Medical Letter on Drugs and Therapeutics*  
*New England Journal of Medicine*  
*Surgery, Gynecology & Obstetrics*

\*Book prices given herein were current at the time the demonstration library was developed; they are subject to change.