
BRIEF COMMUNICATIONS

The evolving role of clinical medical librarians*

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The advent of end-user searching raises an issue among librarians concerning its effect on existent Clinical Medical Librarian (CML) programs. Two opposing viewpoints exist regarding this effect: one, that clinicians will no longer need the librarian as their online skills develop, or, second, that CMLs will become more active teachers in addition to information providers.

CML programs are based on at least three premises: that the CML provides information where it is needed rather than being isolated in the library, and that the mere presence of the librarian in the clinical setting serves as a reminder that information is available; that the service is a convenience for those who have neither the time nor the opportunity to research clinical problems for themselves; and that health professionals can use time in a more cost-beneficial manner, treating patients while the librarian conducts database searches to identify relevant materials.

CML programs differ from traditional reference work in that the CML takes the library to the health professionals. The librarian attends daily rounds, grand rounds, and other clinical activities, anticipating questions or conducting immediate research [1]. The majority of the research is done on MEDLINE,

and MEDLINE is the course most often taught to clinicians. Therefore, one can understand why librarians feel anxious about the future of their CML programs.

Yet CML programs are more than rapid-delivery search and photocopy services. Rather than threatening the existence of CML programs, teaching computerized searching and bibliographic skills can make it possible for librarians to expand existing programs and enhance the role of the CML by adding a variety of educational experiences to CML services and creating a more worthwhile relationship with the clinical staff. There are at least five educational services to consider when examining how the CML's role changes as these services are added: online education and training, end-user searching support, tailored instructional programs, library contact person, and research partnership.

ONLINE EDUCATION OR TRAINING

The MEDLINE training course offered at the Texas Tech University Health Sciences Center (TTUHSC) is a basic six-hour introduction to the database with one to two hours of tutored, hands-on practice. It is based on the course developed by the National Library of Medicine (NLM) and can be a starting point for introducing CML-program team members to end-user searching. Shorter courses in Grateful Med and BRS Colleague have been more successful as introductory courses for the teams because these courses can be taught more quickly, usually within two hours. A follow-up approach used successfully at TTUHSC with the Department of Obstetrics and Gynecology has been to have residents and third-year medical students actually perform librarian-assisted searches on BRS Colleague during weekly case conferences. Students report relevant information found in the abstracts or text during the conference. This individualized, hands-on instruction in a clinical learning situation brings into focus the relationship of the literature to clinical practice for all attending the weekly meeting.

END-USER SEARCHING SUPPORT

There can be a considerable time lag between the time a user takes a training course and when the access code is received. This problem might be corrected by having the participant apply for a code four weeks prior to taking the course. The instructors can request that application materials from the MEDLARS Management Service be passed out as people sign up for the course. More often than not, the novice searcher needs support, at first with logging on

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and strategy formulation and later with more complex searches. It is also important for the librarian to introduce the new searcher to alternative databases available on MEDLARS and commercial vendors such as BRS and DIALOG.

The librarian has ready access to information regarding updates to databases and systems. The user, on the other hand, easily gets caught up with workloads and does not have time to keep up with such changes. Therefore, the librarian can take on the role of informing the end user of important changes. This networking can be accomplished by creating an end-user's group; through a regular newsletter, an SDI, or a bibliography service; or through private consultations with end users regarding individual progress.

TAILORED INSTRUCTIONAL PROGRAMS

CML program enhancement can also include offering tailored instructional programs in areas beyond literature searching and library resources. Following the IAIMS concept, the CML can teach health professionals the skills necessary to use time and information resources efficiently, for example, how to tailor reprint-file management to the specific needs of clinical departments. The TTUHSC library staff has developed and taught an elective course, "Critical Appraisal of Biomedical Literature," to medical students since 1984. This course, originally presented in seminar format to medical residents, is being redesigned for nurses. The course is a combination of evaluation of articles based on research, methodology, statistical validity, and practical applicability [2-3]. Librarians have the background in the structure of databases and familiarity with computer software required to teach others how to devise useful systems using existing software. Other offerings could include short courses in computer literacy, database searching, critical appraisal of the literature, and use of developing artificial intelligence concepts and technology for clinical decision making.

Some academic health sciences center libraries already offer a variety of classes in information management. TTUHSC offers three credited courses that serve as a basis to draw upon to tailor courses for CML teams. There have already been offerings to three different clinical departments (Internal Medicine, Obstetrics and Gynecology, and Family Medicine) on searching Grateful Med and BRS Colleague, reprint file management, and critical appraisal of the literature.

LIBRARY CONTACT PERSON

An easy outgrowth of the CML concept is the positive relationship that develops between the librarian and the departmental health professionals and staff. This

relationship benefits all concerned by having the CML orient new residents and faculty to the library using subject expertise to advise in collection development, serving as an advocate in the library for special needs of the department, and helping the departmental personnel feel comfortable in using the library by acquainting them with other library staff members. This positive relationship can develop even further when librarians become an active part of the instructional team and move toward becoming research partners.

THE RESEARCH PARTNERSHIP

The CML gains subject expertise through contact with the department, which increases the librarian's ability to find precise information needed by the team, thus saving time and demonstrating a direct impact of information on patient care. The CML can also help spot flawed studies, as well as help residents and students sharpen their ability to read and evaluate literature, again for the purpose of improving clinical outcomes. As an era of quality-filtered databases begins, close disciplinary links to information consumers are needed to help construct useful databases and services. Clinicians and librarians can jointly research information-seeking behavior to insure the best use of their resources. For example, librarians and clinicians must conduct joint research documenting improved patient care outcomes as a result of information provided by CML services. A side benefit for librarians is that the librarian will become a collaborator for quality health care, working more directly as a member of the health care team.

ADVANTAGES TO THE LIBRARY

The advantages of expanding a CML service to include searching training are promoting the enhanced image of the librarian as educator, forming allies who can assist in the struggle for resources and in other crises, improving library public relations and marketing of services, increasing understanding between library and department, and nurturing potential collegial relationships to assist information-related research efforts. Each advantage leads the patron to view the library and librarians as a more useful, more accessible resource in meeting information needs. Increased understanding of the client groups should also improve the quality of CML services.

CONCLUSION

There are many things a CML can do to enhance involvement with individual departments. The authors predict that the librarian's role will not end when clinicians are taught to search the literature; instead, CML services can be enhanced by providing

additional educational opportunities. The relationship of the CML with clinical departments is truly an opportunity to exemplify what excellence in information services and user education can do to enhance clinical practice.

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FROM THE *BULLETIN*—25 YEARS AGO

A grass-roots look at MEDLARS

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Further advantages of MEDLARS are certainly speculative. We can foresee a very fruitful use in the production of current awareness bibliographies, a service we now offer only on a small scale. Inclusion of monographic material will be a useful cataloging aid. On a more theoretical level we can speculate that computers, and the disciplines of mathematics and engineering associated with them, will be the most powerful tools given libraries since the printing press. Librarians are sometimes reluctant to use new methods. When typewriters were introduced many librarians reacted with horror. Take a man's pen away! Put a machine between him and his work! Unthinkable! Now typewriters literally litter the library landscape. The computer has given us a means to free ourselves from a great deal of mechanical drudgery and thus have time for investigation and experimentation. Boolean algebra and symbolic logic, furthermore, may lead to a solution of basic problems of subject concepts. By working together, all of us will have within our reach the most powerful and varied tools yet devised for reaching our common goal, service to the medical community.

Bull Med Libr Assoc 1964 Oct;52(4):650-1