

Selected List of Books and Journals for the Small Medical Library*

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ABSTRACT

The impact that the hospital librarian's use of management techniques and comprehension of the highly competitive health care environment can have on collection development and resulting information services in his or her library is reviewed in the introduction to this revised list of 600 books and 139 journals. The list is intended as a selection guide for the small or medium-size library in a hospital or comparable medical facility, or a core collection for a consortium of small hospital libraries. Books and journals are categorized by subject; the book list is followed by an author/editor index and the subject list of journals by an alphabetical title listing. Items suggested for initial purchase by smaller libraries are indicated by asterisks. To purchase the entire collection of books and to pay for 1987 subscriptions to all journals would require about \$52,600. The cost of only the asterisked items totals approximately \$21,000.

PARAMOUNT to the ability of the hospital library to meet patron needs is its collection of informational materials, and *still* central to that collection, in our opinion, is *print media*. For that reason, we have again updated the "Selected List of Books and Journals for the Small Medical Library," which first appeared in 1965. The expanding variety of forms in which information is packaged and distributed continues to put pressure on hospital libraries and their librarians. At times, decision making entails not only what information to acquire, but also the format in which to acquire it. Nevertheless, the proliferation of nonprint

media has not noticeably reduced the need for information presented in traditional print formats. Overall, automated information retrieval has increased accessibility to the contents of print media, thereby intensifying the demand for books, journals, and other print formats in the hospital library.

COLLECTION DEVELOPMENT

Even though collection development has been one of the most discussed areas of librarianship for the past decade, the embodiment of the ideal hospital library collection remains an enigma, and it probably always will be. While the principles of collection development may be universal, the applications are unique. In fact, the term "hospital library" does not actually refer to a uniform group of facilities, for hospital libraries vary greatly in size, staffing, user population, financial resources, and services rendered, as do their parent institutions. Each library has to develop its collection keeping in mind the mission statement of its parent institution, its financial resources, and its primary user population. Constraints in collection development vary from institution to institution and from one time to another. Furthermore, user needs, even in comparable settings, are not as homogenous as they might seem to be, and because patrons and their demands change, there must be an ongoing evaluation of the library's informational resources in relation to those changes. In short, it is every librarian for himself or herself when it comes to confronting the problems indigenous to collection development in his or her library. The interests and information needs of the primary user population must be met in the best way possible within the confines of available resources and the purpose for

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which the library was established. This has always been the mission of the hospital library, and the format in which information is provided, be it print, audiovisual, or electronic, is irrelevant—or is it? While that very well may be true as far as the information itself is concerned, can the same be said for the cost factors involved? Are a library's out-of-pocket costs for providing information from a print index comparable to its costs for providing that information from an online database? That problem depends upon the information provided and the indexes and databases involved. There simply are no stringent answers for questions relating to acquiring and disseminating information. But there is one consistent factor that can be identified as predominating collection development in the hospital library—lack of money.

It has been evident for the past three or four years that the gleaming beacon of collection development, tarnished by all its unanswered questions and persisting fiscal woes, has noticeably dimmed in the high-tech aura of the library of the future—the electronic library. Without question, the library of the future, with its automated integrated systems, has replaced collection development as the topic of the day in the health sciences library community. In fact, the electronic library seems to be the long-sought-after panacea to transform libraries of all kinds from their traditional passive warehouse status to dynamic informational resources. With the increased availability of microcomputers, the electronic library has become a possibility even for the smallest hospital library. As hospital librarians theoretically contemplate the character of the hospital library of the future with all its attributes and unforeseen problems, they are beset by the question, "What should the hospital library be today?" Certainly, most hospital librarians are aware of the criteria for the library of the future and of the changes that must take place as far as libraries and librarians are concerned. They are even more aware of the fact that the electronic library will cost money, and from where will that money come? Will administrators be more willing to provide money for automation than for informational resources? So, can it be assumed that the bottom line for both integrated library systems and collection development is the hospital library budget? To that question, we along with many hospital librarians would emphatically answer "No!" Instead, as hospitals enter the era of product-line management and as the American health care system is undergoing rapid change, the survival of the hospital library as an effective entity today and

in the future depends upon the management skills, particularly marketing and finance, of the hospital librarian.

STATUS OF THE HOSPITAL LIBRARY

Traditionally, hospitals in general have prided themselves on being stewards of the public interest. But now, out of sheer financial necessity, the social ethic seems to be secondary to a dominant economic and business philosophy. "Corporatization of health care" and "cost containment" are bywords in the current hospital literature. The highly charged economically competitive environment is a new phenomenon in the hospital field. Hospitals are competing for business—for patients. The patient as a consumer of health care is uppermost in the minds of hospital administrators. Dramatic changes in reimbursement and reductions in public funding are all contributing to a changing set of incentives and priorities. Before the DRG (Diagnostic-Related Groups) approach to third-party reimbursement, hospitals were protected from cost increases, because reimbursements rose by similar amounts. However, that is no longer true, and whether or not the DRG concept will eventually spread to cover total third-party reimbursement is yet to be determined. Nonetheless, it is obvious that hospital costs are being capped and will not be allowed to rise as they have in the past.

So where does this leave the hospital library? It should be remembered that when hospital reimbursement was keeping pace with increased costs, most hospital libraries were not considered priority items in the overall institutional budgets. Unless hospital librarians as a group begin an aggressive marketing of their libraries and biomedical information as essential contributors to patient care, the hospital library may do well to be an "item" on the budget.

The importance of the hospital library as an essential component of health care delivery has been firmly established within the health sciences library community. Unfortunately, one cannot be certain that the same situation exists within the hospital community itself. In the introduction to our 1981 "Selected List" we discussed the importance of the hospital librarian's communicating with the hospital administrator in terms of goals, objectives, cost/benefit relationships, and cost effectiveness [1]. Added to that list now, of course, would be cost containment. Perhaps a review of strategic thinking would be a good place for the hospital librarian to begin [2].

Currently, the hospital library as a topic of

interest in hospital literature is virtually nonexistent. Substantive articles on hospital libraries appear in the *Bulletin of the Medical Library Association*, but not in hospital journals. The same can be said of recent hospital administration books. The standard hospital management book of the 1930s through the 1950s, MacEachern's *Hospital Organization and Management*, contains an extensive chapter devoted to the hospital library [3]. This was, paradoxically, long before the enlightened age of the hospital library. However, we have become aware of a *Handbook of Hospital Administration* that is now in press which does contain a chapter specifically devoted to the health sciences library in a hospital setting [4]. We hope other hospital management books will follow this example.

Publishing articles and book chapters in the hospital literature is a powerful marketing tool that librarians have not made use of to any great extent; this is an avenue that should be pursued vigorously. The hospital library appears in neither the first nor second editions of the American Hospital Association's (AHA) *Hospital Departmental Profiles* [5, 6]. We have learned that there will be a profile of the hospital library included when this work is updated again.

Although a number of standards for the hospital library have been put out by various associations and governmental agencies, the one that is the most important to the hospital administrator and to the hospital librarian is that of the Joint Commission on Accreditation of Hospitals (JCAH). When hospital library standards were expanded and upgraded in 1978 by the JCAH [7], there was a general feeling in the hospital library community that, while the standards could have been stronger, the library *did* become an integral part of the hospital organizational structure, and there was hope that eventually the standards would be strengthened even more. That is not exactly what happened, however. The standards have remained stable since the 1978 revision, but in 1986 the JCAH redesigned the format of the *Accreditation Manual for Hospitals*. The new format includes a numbering system and rating scale with asterisks being used "to denote those standards and required characteristics that are key requirements and, as such, are fundamental to the accreditation decision process" [8]. Neither of the two JCAH standards for the hospital library are marked with asterisks in the 1986 or 1987 manuals. Not only must hospital librarians market the hospital library as an essential component of patient care to their administra-

tors but to their accrediting association as well. Without question, the priorities of most hospital administrators will certainly be the asterisked standards and required characteristics that have been designated by the JCAH.

SURVIVAL OF THE HOSPITAL LIBRARY

Today the hospital library field is in transition. Cost containment is mandating a wise choice of priorities, new ways of doing things, and new concepts of the hospital library in general. First of all, the hospital librarian must recognize that information is a highly marketable commodity, and if it is *strategically* marketed, there will be buyers. Commercial information vendors have already proved this beyond a doubt. For the marketing neophyte, the AHA publication *Marketing Your Hospital* outlines techniques that may be applied to the library as well as the hospital [9]. There are hospital librarians who feel that the hospital has both the duty and the resources to provide free access to information. If such be the case, then financial provisions for "free information" must be included in the hospital budget. But a growing number of hospital librarians have faced the fact that free information does not exist, and really never has existed. Someone has always footed the bill! In a more corporate, business-like hospital library atmosphere, the fee-for-service approach does not seem as contradictory as it would have a decade ago. Money from the library budget should be spent where it benefits the largest number of users; this is a basic premise of collection development. Unless the financial status of hospitals improves dramatically, eventually the funding of information services that are consumed by one person, such as interlibrary loans and online searches, will have to be provided on a cost recovery-for-service basis. Information retrieved from these services is a private benefit and is not available to other users. Fees for service may serve as an alternative source of funding or to expand information services. Charging for consumable information services also lessens the abuse of such services.

While the hospital library will never be revenue-producing in the same sense as surgery or anesthesiology departments, cost recovery can do much to defray the image of the library as an institutional liability. More and more, the hospital library will be held financially accountable for its transactions, and in some hospitals it is already a way of life and has been for a number of years. Cost containment implies that appropriate alternatives be considered.

The electronic library of the future, a realistic alternative to present manual systems, will be a major source of change for which the hospital librarian should be planning today, since it involves the very substance of the library's functions—the catalog, serials records, and circulation. Now is the time to determine the objectives to be achieved by a mechanization program and to define priorities. The best way to do this is to reevaluate everything that is being done and to refocus on the worth and usefulness of procedures, processes, and files on which labor, effort, time—and money—are being expended. Just because something has *always* been done is no reason why it should continue to be done! Attempting to duplicate a cluttered, cumbersome manual operation with automation will result in an inefficient mechanized system. Instead, the hospital librarian should evaluate present operations and future possibilities as well. What is the quality and quantity of service required now and in the future? Is it better to automate now and become an institutional model or to wait and become a part of the hospital's integrated information system? Before making such a decision, it is necessary to develop a feasible strategy and to identify the steps necessary to carry it out within the institutional environment of the library and to be mindful of both the potential and actual barriers that exist. By carefully scrutinizing the present in great detail, it is more likely that the library of the future will boast an automated system that not only exploits new technologies but does so with a balance of cost and effectiveness. An integrated library system does not magically happen just because of the purchase of a microcomputer.

There is usually very little cost-cutting that can be done from the meager informational materials budget of the hospital library. However, reassessing the collection and weighing criteria that are important to the library are steps that will help to improve the use of limited funds. The basic questions are *what* is being used and *who* is using it? These are questions that can be answered more easily in a small library than in a large one. After that determination is made, the hospital librarian must define needs within the parameters of the library's capabilities and mission. The hospital library cannot be all things to all users.

Unless the hospital has its own educational and research programs, the collection should be directed toward clinical medicine, nursing, and other health sciences disciplines at the practitioner level. It should be tailored to reflect the current programs of the institution. The librarian must

compare the amount of user demands for immediate access to information with those satisfied by remote access. The informational value of books versus that of journals should be weighed carefully, particularly in a hospital where little research is under way and day-to-day patient care is the major activity; information in books is presented in a much more utilitarian manner than when it is scattered throughout the journal literature. For many hospital libraries, and specifically those in research-oriented institutions, access development is every bit as important as collection development so that extramural information resources must be identified to supplement the on-site collection. It is *only* the librarian who can decide, after judiciously monitoring information usage, whether his or her library dollars can be most effectively spent on print media, audiovisuals, or electronic database access.

Every hospital librarian should be acquainted with the fact that fully documented budget requests and thoughtfully developed allocation procedures based on demonstrated needs are useful techniques when approaching the hospital administrator at budget time. The inability to identify and to predict costs has been a severe limitation to many hospital librarians when preparing budgets. Identification and anticipation of new and growing constituencies are also essential management techniques in budgeting and strategic planning for hospital library information services. In this era of consumer-oriented health care, patient education very well may become an increasingly important role for hospital libraries and should be seriously considered by hospital librarians because it is also an excellent way to market the library as a member of the health care team.

Yet the major component of a hospital library in relation to patient care is the quality of its informational resources for health care professionals. The list of books and journals that follows is intended to be used as a planning tool for developing or updating a library collection in a hospital or comparable facility involved primarily in patient care. It can also be used as a guide for a core collection for a hospital consortium sharing library resources. Earlier versions of this list have been used not only by hospital librarians, but also by other health sciences librarians, by academic librarians, by public libraries, by physicians for personal book selection, and in teaching programs. The books and journals included in the 1987 list are based upon our having monitored the medical literature over the past two years as well as our many years of

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experience in the health sciences library field. The majority of the recommended publications are clinical in content, although we have included clinically relevant basic sciences books. We are excluding basic sciences journals from our list because most hospital libraries cannot justify the extremely high subscription rates when contrasted with relatively low usage. If basic sciences journals are necessary, they probably should be acquired on a resource-sharing basis with other institutions. Our journal list is not adequate to support research activities. We have aimed to present a well-balanced collection of authoritative English-language books and journals covering the clinical sciences. Most, but not all, of the publications are of United States origin. When two books are of comparable content and authorship, we have purposely chosen the most recent one. Few books published before 1982 have been included.

COMPILATION OF THIS LIST

This list is not meant to represent complete coverage of all quality biomedical literature on the market today; it represents *our* choices. We do want to point out, as we have stated on previous occasions, that "newer" does not necessarily mean "better." Because of our having emphasized new books and new editions, "standards" that have not been updated do not appear. Whenever possible, we have tried to provide inexpensive alternatives to expensive books, but in many subject areas, inexpensive quality books no longer exist. In compiling this list of books and journals, we have taken into account the suggestions, recommendations, and criticisms that we have received from librarians, subject specialists, and clinicians. Price information has been supplied by publishers and vendors and is as accurate as we could obtain at the time of publication, but price increases should be anticipated over time.

We have limited this list, as we have in the past, to books and journals, although we have been asked to add audiovisuals, and recently, microcomputer software. We refrain from complying with this request because both of these media are frequently designed for self-instruction and/or curriculum usage, and therefore, general recommendations are not applicable. Besides that, there is a wide range of variability in hardware and software, and because of technological advances, changes in format and equipment result in a very high obsolescence rate. For these reasons, we believe that recommending audiovisuals or microcomputer

software in "list" format is not realistic. Rather than resorting to a list, a hospital librarian needing guidance in acquiring either audiovisuals or microcomputer software should seek help from another hospital librarian who has initiated a successful program or from an academic media resource center. An excellent article on selecting audiovisuals was published in *Nursing Educator* [10], and the chapter on audiovisual services in *Hospital Library Management* is especially helpful [11].

Approximately \$52,600 would be needed to purchase all of the books and journals (1987 subscriptions) on this list—\$40,600 for books and \$12,000 for journals. Items suggested for first purchase, 204 book titles and 57 journal titles, are designated by asterisks, since many hospital librarians cannot afford or may not need all of the listed publications. To purchase only the asterisked books and journals, the cost is about \$21,000—\$16,000 for books and \$5,000 for 1987 journal subscriptions. Total prices are based on one-volume editions in cases where books have been published in either one- or two-volume formats, and on "nonmember" prices for association publications.

In May 1986, W. B. Saunders Company instituted a net pricing policy instead of designated list prices for their books distributed by vendors, and a single-copy price for books sold directly by Saunders to individuals and libraries. Because of the net pricing policy, prices can vary from vendor to vendor. Since most hospital libraries purchase books from vendors, we felt that we should obtain realistic open market prices on Saunders books from a medical book vendor, and these are the prices we have used, instead of the Saunders single-copy price, both in the book list and in calculating costs.

COSTS

The increases in book and journal prices for titles in this list and its predecessors are shown in Table 1. From 1965 to 1987, there has been an increase of 352% (\$15.00 to \$67.83) in the average price per book title. During the same twenty-two-year period, the average price per journal subscription has increased by 512% (\$13.90 to \$85.13). Nursing books make up more than 9% of the book list, and their inclusion does lower the average of the book prices. The average cost per title for all the books in this list is \$67.83, but when the nursing books are excluded, it increases to \$72.16. In the 1987 list, the average price per title of nursing books is \$31.60, an increase of 5.6% over 1985 (\$29.93).

TABLE I
INCREASES IN PRICE

	1965	1967	1969	1971	1973	1975	1977	1979	1981	1983	1985	1987
	List	List	List	List	List	List	List	List	List	List	List	List
Books												
Average cost per book title	\$15.00	\$16.22	\$17.04	\$19.11	\$21.20	\$23.33	\$28.18	\$34.76	\$42.96	\$55.35	\$60.97	\$67.83
Average book cost % increase*	—	8.1%	5.1%	12.1%	10.9%	10%	20.8%	23.3%	23.6%	28.8%	9.2%	11.3%
Journals												
Average cost per journal subscription	\$13.90	\$14.85	\$17.61	\$20.73	\$23.90	\$29.71	\$35.14	\$40.27	\$52.44	\$59.00	\$70.46	\$85.13
Average journal subscription cost % increase*	—	6.8%	18.6%	17.7%	15.3%	24.3%	18.3%	14.6%	30.0%	12.5%	16.3%	20.8%

*Percentage increases calculated on the average prices of the preceding list.

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The figures stated here apply *only* to publications that appear in this list or have appeared over the years in its predecessors. The average book prices shown in Table 1 are "per title," not "per volume." The average price for the 676 physical volumes which make up the 600-title book collection is \$60.21—\$7.62 less than the "per title" average. In instances when a title appears in either one or two volumes, it has been considered as one volume in the physical volume count. Although the titles vary from list to list, the cost figures are representative of the financial situation facing the small medical library for books and journals. They do not cover the much higher costs borne by the large academic medical library. The tremendous increase in the 1987 subscription prices of foreign journals due to the weak U.S. dollar is not reflected in these figures either.

OTHER SELECTION GUIDES

In addition to our list, which has been updated biennially for more than 20 years, there is a core list of recommended books and journals covering general internal medicine and its subspecialties as well as other areas of interest to internists which is issued by the American College of Physicians. It is titled "A Library for Internists V" and is revised on a triennial basis [12]; the next revision is due in 1988. Librarians in small institutions will find the *MIDCORE List: Basic Books for the Small Hospital Collection*, compiled by Karen Hackleman, Regional Development Coordinator, Southeastern/Atlantic Regional Medical Library, a helpful selection guide that is periodically revised [13]. We do not know of any other lists of recommended publications in clinical medicine that have appeared since 1985.

There are two publications that are useful in collection development, but these are not evaluative and originate from the medical book trade. The first is *Medical Textbook Review*, a comprehensive, annotated guide to English-language medical books compiled to help students, house staff, teachers, and librarians in book selection; it is of British origin and perspective and emphasizes basic textbooks [14]. The second, *Medical Books '87*, brings together information about books from many medical publishers in a convenient format [15] and can be obtained free of charge from various medical book vendors.

Even though we have included a number of reference books in our list, we have not tried to present a comprehensive coverage of reference

sources for the hospital library. Extensive information on reference materials is provided by an *Introduction to Reference Sources in the Health Sciences* [16]. Developing a reference collection in the hospital library is a topic which has interested us for many years, but as yet we have not found the time to follow through on that interest.

The coverage of dental publications in our list is inadequate for hospitals with extensive dental programs. In the past, we had suggested that the dental section of our list be supplemented by the "Selected List of Books and Journals for the Small Dental Library," but it last appeared in 1980 [17] and is out of date. However, we have been told by the authors that they hope to revise their recommended list of dental publications this summer. *Basic Dental Reference Works*, put out by the Bureau of Library Service of the American Dental Association, is a good selection guide for dental reference materials [18].

There are a number of current sources to assist the hospital librarian in selecting nursing publications. Each December, the *American Journal of Nursing* publishes "Books of the Year," a subject listing with a brief description of 40 or 50 of the year's books selected as "best" by nurses having expertise in the various subject areas [19]. We have also compiled a list of recommended nursing books and journals [20] that should be used in conjunction with the nursing section of this list, for here we have included a number of new books that do not appear in our 1986 nursing list but very likely will when we revise it again. The Interagency Council on Library Resources for Nursing compiles "Reference Sources for Nursing" [21], which is updated biennially. This is another list that a hospital librarian can use in developing a reference collection, since it includes not only nursing reference items, but also standard biomedical reference works.

Other sources that will provide the hospital librarian with assistance in developing special subject areas of the collection include our recommended list of books and journals in the allied health sciences [22], a guide to sport science literature [23], a listing (with abstracts) of current management literature for health care executives [24], a review of psychiatric literature [25], a review of the literature on socioeconomic resources in medicine [26], a guide to materials on clinical nutrition [27], a library for emergency medicine [28], and a journal list for health administration libraries [29]. Some of these literature guides are now three or four years old, and we do not know of

any revisions at this time. They should be updated by acquisitions lists from other libraries, newsletters from vendors, and catalogs and brochures from publishers.

The task of developing a patient education collection will likely confront many hospital librarians in the near future. One of the most useful sources we have found is *Health Information from the Public Library*, a subject listing composed predominantly of books, with a brief section listing relevant periodicals [30]. Another guide to health information for the lay public is *The Consumer Health Information Source Book*, an evaluative, annotated listing of books, journals, pamphlets, and audiovisuals [31]. Both of these publications appeared in 1984 and need to be supplemented by current information.

Publication catalogs and lists from such organizations as the American Dental Association, American Hospital Association (American Hospital Publishing), American Medical Association, American Nurses' Association, American Psychiatric Association (American Psychiatric Press), Catholic Health Association of the United States, and National League for Nursing all can be used to advantage by the hospital librarian as selection tools. While most association publications are still relatively inexpensive by commercial standards, their prices do continue to rise.

BASIC TOOLS FOR THE HOSPITAL LIBRARIAN

The Manual for Librarians in Small Hospitals [32] and *Organizing and Administering the Small Hospital Library* [33] are very helpful publications that have been written specifically for inexperienced hospital librarians. *Hospital Library Management* [34], a superb presentation of hospital librarianship and the authoritative work in the field, should be on the desk of every hospital librarian, experienced or inexperienced. More advanced, detailed information on managing, budgeting, reference services, collection development, and acquisition in health sciences libraries can be found in the *Handbook of Medical Library Practice* [35]. The *Bulletin of the Medical Library Association* and the *MLA News* are indispensable for professional development and current awareness. During this time of drastic change in the delivery of health care, it is vitally important for the hospital librarian to keep up with the literature of hospital administration. An uninformed hospital librarian cannot function effectively in the highly charged health care environment of today.

BOOK JOBBERS AND SUBSCRIPTION AGENTS

Purchasing books and journals from reliable medical book jobbers and reputable subscription agents instead of directly from publishers not only avoids reams of unnecessary paper work, but also makes available to the hospital librarian important ancillary vendor services such as newsletters, catalog cards, automated serials control programs, and online ordering. The chief criterion on which both a book vendor and a subscription agent must be judged is *service*. Often institutional purchasing agents tend to see only bottom-line figures when high discounts or extremely low service charges are offered by dealers. Poor service on the part of a book or journal vendor is expensive, despite high discounts or low service charges, and does nothing to enhance the concept of cost containment. This can be a costly oversight on the part of the institutional purchasing agent. The most reliable information regarding the quality of a vendor's service can be obtained from local hospital librarians. A good working relationship between a hospital librarian and a vendor is equally important to both and should be symbiotic in nature. For vendors to perform effectively, it is necessary for librarians to submit accurate, complete order information for books and journals. Having done this, librarians have every right to demand prompt processing of orders, on-time delivery, and up-to-date reporting of delays and nondelivery.

Books from major medical publishers in the United States are generally discounted at 10% by reliable medical book jobbers. Discount rates on books from other types of publishers vary; there may be no discount at all, and at times there may even be a service charge. Some medical and scientific publishers do not give discounts on retail orders from libraries, even though their books can be purchased from jobbers at a discount. Prominent book dealers include: Ballen Booksellers International, Inc., 66 Austin Boulevard, Commack, Long Island, N.Y. 11725; Brown & Connolly, Inc., 2 Keith Way, Hingham, Mass. 02043; Login Brothers Book Company, Inc., 1450 West Randolph Street, Chicago, Ill. 60607 (branches: Login Brothers Ohio, 1550 Enterprise Park, Twinsburg, Ohio 44087, and Login Brothers New Jersey, Box 2700A, 135 New Dutch Lane, Fairfield, N.J. 07006); Majors Scientific Books, Inc., P.O. Box 819074, 1851 Diplomat, Dallas, Tex. 75381-9074 (branches: 3770 Zip Industrial Boulevard, Atlanta, Ga. 30354, and 6632 South Main Street, Houston, Tex. 77030); Matthews Medical Books, 11559 Rock Island Court, Maryland Heights, Mo. 63043;

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and Rittenhouse Book Distributors, Inc., 511 Feheley Drive, King of Prussia, Pa. 19406.

Instead of discounting, subscription agents usually charge a service fee, but if the subscription agent is efficient, the charge is irrelevant compared to the amount of expensive in-house labor that can be saved. Generally, service charges vary from 3% to 9%. Many agents vary their fees with the total dollar amount of the subscription account. As we have said, a low service charge yielding a low performance on the part of a subscription agent is not a money-saving situation for the hospital library; conversely, it can be extremely expensive. Well-known subscription agents include: Ebsco Subscription Services, 1st Avenue at 13th Street, Birmingham, Ala. 35203; Faxon Company, Inc., 15 Southwest Park, Westwood, Mass. 02090; Majors Scientific Subscriptions, P.O. Box 819074, 1851 Diplomat, Dallas, Tex. 75381-9074; and Read-More Publications, Inc., 140 Cedar Street, New York, N.Y. 10006. Both book dealers and subscription agents are noted in alphabetical order.

USAGE CONSIDERATIONS FOR THIS LIST

In this updated version of our list of recommended books and journals for the small medical library, we are using the same subject headings as we did in 1985, with minor exceptions in the book list. Coverage of books on hospitals and health care administration has been expanded under the subject heading of Hospitals and Administration. We have added the category of Sexually Transmitted Diseases and have deleted Photography because no new books have appeared within the last several years.

We recommend the *Index Medicus* and *Cumulated Index Medicus*, but we know that the *Abridged Index Medicus* is adequate for many hospital libraries. This is a choice that has to be made by the hospital librarian and should not be dictated solely by our decision.

Medical Examination Publishing Company, McGraw-Hill, Appleton & Lange, and Wiley all publish well-known series of review and self-study books in the health sciences. If this type of book is being acquired for the collection, we suggest that the hospital librarian contact these companies and request their catalogs, which list these publications that are designed to prepare individuals for state, national, and specialty board examinations.

The previous versions of this list have been used extensively in reprint format, and for that reason, we want to keep this one current as long as possible.

To help do this, we have generally cited new editions that are scheduled for publication in 1987 instead of the previous editions. If a book is needed immediately, the previous edition may still be available and bibliographic data can often be found in our 1985 book list (see footnote, p. 133); price information must be verified. If a new edition is tentatively planned for 1988, the current in-print edition is the one we have cited along with a note regarding the new one. This list, in addition to those that we compile for nursing and allied health sciences, will be updated between the published biennial versions in a newsletter titled *A Major Report* [36], edited by the senior author.

When a book has more than two authors or editors, the notation "[and others]" is made after the name of the senior author or editor. In the index of authors or editors, we have listed only the senior persons; coauthors and coeditors do not appear. When the name of the original author or editor is an integral part of the book title, that name also appears in the index.

Due to mergers, takeovers, and the changing of publishers' names, the imprint on a book may not necessarily be indicative of the publisher presently distributing the book. Therefore, we have tried to cite the books using the names of the publishers who are now distributing them. For example, Appleton-Century-Crofts and Lange Medical Publishers recently merged and have become Appleton & Lange. Therefore, we have designated Appleton & Lange as publisher for all books bearing the name of Appleton-Century-Crofts or Lange Medical Publications in the imprints. As a matter of course, we routinely indicate the publisher from whom a book can be obtained in the United States.

In this period of conscientious cost containment when hospitals are being put under increasing pressure to reduce and hold down expenses as a matter of survival, we hope that this list of selected books and journals will continue to help the hospital librarian to make the best use of the hospital library dollar when purchasing books and journals. Obviously, not all of our decisions can possibly be correct for every library, and the list that follows should be used with this in mind.

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- *109. ROMBEAU, JOHN, AND CALDWELL, MICHAEL D. *Enteral and Tube Feeding*. Philadelphia, Saunders, 1984. \$75.75. (Clinical Nutrition, Vol. 1.)
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- *111. SHILS, MAURICE E., AND YOUNG, VERNON R., eds. *Modern Nutrition in Health and Disease*. 7th ed. Philadelphia, Lea & Febiger, 1987. In preparation.
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