

agencies, insurance companies, and even the benefits coordinators for large employers. Millenson chronicles their issues and relationships in recent years. As a good journalist (a former *Chicago Tribune* reporter who specializes in health care issues), he carefully cites names, actions, dates, and places and deciphers euphemisms.

This is a history of changing power, a history of a true "paradigm shift." The mid-century post-war period of provider autonomy with no accountability for outcomes generated abuses that led to a major social and political backlash. Medicine practiced by tradition and personal opinion led to widespread variability in outcomes (mortality and morbidity), hidden until exposed by outcomes research. "The operation was a success, but the patient died" is no longer acceptable at the dawn of the "Age of Evidence-Based Medicine."

Practice variation is not caused by "bad" or "ignorant" doctors. Rather it is a natural consequence of a system that systematically tracks neither its processes nor its outcomes, preferring to presume that good facilities, good intentions, and good training lead automatically to good results. Providers remain more comfortable with the habits of a guild, where each craftsman trusts his fellows, than with the demands of the Information Age. Collegiality is too often mistaken for quality control. (p. 376)

[T]he number one cause of medical mistakes is not incompetence but confusion. Although outright negligence and incompetence certainly exist, most treatment-related errors are caused by a poorly designed process of care that lacks safeguards to protect against anything less than human perfection. (p. 54)

Millenson cites research sources for the following assertions:

We have seen that only a small percentage of contemporary medical

practices have been scientifically validated. At the same time, effective therapies can take years to make their way into common use. Medical textbooks are frequently outdated, and journals go unread or unheeded. Continuing medical education has proved better at providing doctors with memorable meals or vacation snapshots than at changing their behavior. The consensus conferences on "best practices" sponsored by the National Institutes of Health are no more effective at producing behavioral change than the free meals. Meanwhile, when a group of doctors is asked whether the care in a particular case meets the highest professional standards, the "physician agreement regarding quality of care is only slightly better than the level expected by chance." Research medicine and everyday medicine often seem to exist in separate worlds. The public thrills to stories about a pill that may slow the aging process. But in everyday medicine we are just now examining the best way to perform the hip-replacement surgery that hundreds of thousands of Americans who *are* aging undergo annually at a cost of nearly \$3 billion. . . . In illness after illness and disease after disease we have seen almost random variation in how different doctors treat patients with similar clinical symptoms. (p. 350)

Consumer and third-party payer concern has shifted from issues of access to popular providers to measurable quality of care provided for the lowest cost. In the cost containment battles, who guards quality? Millenson traces the history of various fee for service and prepaid systems, as well as the development of the different quality-tracking efforts and quality improvement programs. Almost every sector of American society appears to be involved—individual patients and practitioners, health care professional organizations, health care corporations, accrediting organizations, government and nongovernment agencies, politicians, the courts, and the press.

Albeit polemic at times, the ac-

count is so thick with documented details that, with its index and notes, it qualifies as a reference book useful in any health sciences library. Originally published in 1997, this edition includes a new afterword that continues the saga.

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KOVACS, DIANE K; AND CARLSON, ANN L. **How to Find Medical Information on the Internet. A Print and Online Tutorial for the Healthcare Professional and Consumer.** Berkeley, CA: Library Solutions Press, 2000. 121 p. \$60.00. ISBN 1-882208-27-7. (Internet Workshop Series Number 10).©

For practicing health sciences librarians who use the Internet on a daily basis, there will be little new in this publication. It is more likely to be of use as a training tool for developing bibliographic instruction classes rather than as a tool for finding health information. Aimed at both consumers and health professionals, the book is about "providing you with skills to be a savvy Internet searcher." It is, as the title says, a print and online tutorial designed to replicate Kovacs' class, complete with lectures, overheads, and exercises. The dual format is meant to assure the information is always current. Every copy of the book has a unique number that enables the owner to log on to the Website and acquire a personal password. This gives the owner six-month access to the online tutorial, including the ability to contact Kovacs as the tutor for assistance with the exercises. The password must be obtained before July 1, 2001.

Three units—"Getting Started," "The Internet as a Powerful Means of Communication," and "Beyond Basics"—form the core of the book.

These sections cover topics such as an introduction to the Internet; evaluating health information on the Internet; using email, electronic discussion lists, and news groups; and using the Internet to find clinical and professional information. Each unit is followed by a series of exercises designed to reinforce the information presented in the units. These exercises can also be completed online and submitted to a tutor for grading or comments. The other major component of the book is the forty-page listing of health-related Websites, "Pulsepoints." A glossary and very short reading list containing three citations are also included.

In its favor, the book is structured logically and provides good, solid information in an easily understood format. The exercises are interesting and support the learning experience. However, it suffers from being neither fish nor fowl. Because it is aimed at both consumers and professionals, the book falls short of successfully addressing the needs of either group. For example, there is no discussion of PubMed in the "Beyond Basics" unit. Internet Grateful Med is used to demonstrate searching MEDLINE, and Medical Matrix is suggested for its comparison chart of various sources of MEDLINE. It seems superfluous even to discuss other sources of MEDLINE when PubMed is available free from the National Library of Medicine.

Similarly, there is no discussion or description of using Medical Subject Headings (MeSH). For medical professionals, clinicians, and researchers, medical databases are still the primary sources of information. A discussion of what is not available on the Internet or even a discussion of free versus fee-based medical information, such as access to electronic journals, would have greatly enhanced this text.

The author lists the types of information available on the Internet, however users often do not know

what else is available for a fee or what may be a better non-Internet source. Similarly, for consumers, it is disappointing that MEDLINEplus only warrants a brief mention in the "Pulsepoints" section under Health Meta Sites but not under Consumer Information and is not used in any of the exercises. The annotation for MEDLINEplus is poor. For example, there is no mention of the United States Pharmacopeia (USP) or the Adam encyclopedia available through this site. Ranking the sites rather than just providing an alphabetical listing would probably be more helpful to novices.

Consumers could benefit from a specific section devoted to explaining the research process and the continuum of medical information available from the very basic to the high-end technical literature. One does not want to quibble with the selection of Websites, as pleasing everyone is impossible, but the lack of emphasis on sites such as MEDLINEplus and PubMed is irksome. Finding only two sites under "Hospital and Other Healthcare Administration" and four under "Grants" is disappointing, but again pleasing everyone is impossible. The inclusion of a basic science resources section for medical researchers in the "Pulsepoints" section may have been a useful addition.

The online tutorial basically follows the book and presents the same information. This reviewer checked the site four times over a six-week period and made the following observations. There are several navigational errors in the online version. Some of them are minor, such as the lack of a direct link to the Unit 1 exercises at the end of the text. Instead, users have to go back to the unit table of contents to get to the exercises.

Other navigational errors are more serious. Unit 2, "The Internet as a Powerful Means of Communication," is divided into four sections. Clicking on the first section, "The Communications Landscape,"

which is supposed to discuss email and electronic discussion groups, just brings up the headings within the section rather than any text. Clicking on the Next button at the end of the page brings the user out of Unit 2 and back to a Unit 1 section on Internet Connections and Getting Started. This link is completely wrong. Also, in Unit 2, the second section, Think Before You Speak, which is supposed to be about etiquette on the Internet and other issues, just brings up a title and no text. In Unit 2, the Table of Contents navigational button does not work. Similar to Unit 1, an option link at the bottom of each exercise to go to the next exercise would be helpful rather than having to go back to the contents page.

Those who undertake the online exercises have the option of submitting them to a tutor for comment. This feature is useful when the tutor is someone like Kovacs. The online Pulsepoints is organized as in the print version, with the addition of sections for sites recently added, deleted, or changed. Information in these sections was kept up to date during the period this reviewer visited the site.

A useful addition available through the online version is searchable access to the Directory of Scholarly and Professional E-Conferences via the section on health and medical electronic discussion lists and news groups. Another Kovacs publication, its scope is much broader than just health and medicine.

One final comment on the online version: it would have been helpful to have the Further Reading citations hyperlinked. All have uniform resource locators (URLs), but none are hyperlinked. This seems like a missed opportunity to lead the user directly to a source.

As stated in the beginning of the review, this publication will be of most interest to librarians responsible for developing and delivering bibliographic instruction programs. With that in mind, there is much

useful material and many ideas for training exercises contained in the text to recommend a purchase for this purpose alone. The online version is primarily intended for those working through the text for self-instruction and is less valuable to librarians with or without the flaws noted above.

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Teaching the New Library to Today's Users: Reaching International, Minority, Senior Citizens, Gay/Lesbian, First-Generation, At-Risk, Graduate and Returning Students, and Distance Learners. Edited by Trudi E. Jacobson and Helene C. Williams. New York, NY: Neal-Schuman Publishers, Inc., 2000. 256 p. \$49.95. ISBN 1-55570-379-8. ©

For those involved in user education and instruction, this new resource is important with its focus on the specific instructional needs of several diverse groups of library users. Writing from the viewpoint of academic librarians, the editors have collected a group of authors whose writings help us understand the unique issues involved in library instruction for international and minority students, gay and lesbian students, first-generation and at-risk students, graduate and returning students, senior citizens, and distance-education learners. Academic health sciences librarians will find the majority of the chapters immediately relevant and extremely useful, and they will be surprised by the sharp insights gained from the remaining chapters.

Separate chapters discuss each of the groups of new library customers named in the book's subtitle: people for whom our traditional library services and new information technologies may present extraordinary

learning challenges. Both theoretical and practical issues relating instruction to the needs of these learners are presented. For many health sciences librarians in hospitals and academic settings, the two chapters on international students will be immediately useful and relevant to daily encounters in the reference area as well as in formal classroom training sessions. They will also find many interesting insights and suggestions in other chapters, such as those on first-generation college students, reentry students, and distance learners.

As with any edited collection covering a wide range of topics, there will be certain chapters of more interest to some than to others, but the quality of the writing here is such that every chapter will offer the germ of an idea for the reader looking for ways to improve the instructional process. It is important to note that the presented information is primarily research based and cites recent studies from the professional literature. Some chapters have more theory than others, but all provide research-grounded reviews of the existing literature and make practical suggestions for applying the research to address the learning needs of the particular student population. The editors have maintained tight control over the overall content of the book, and the quality is surprisingly even. Each chapter has an extensive list of references. The topics are clustered together in five sections of the book, focusing on distinct user groups and diversity issues: international students, multicultural and gender issues, first generation and at-risk college students, reentry and graduate students, and distance learners. The editors provide an introductory chapter for the book as well as brief introductions to each section, tying the work together and providing an excellent grounding for the issues to be discussed. The detailed table of contents, an index, and the liberal use of subheadings within

the text all provide access points to specific pieces of information.

The book pays a great deal of attention to the enormous technological changes that have occurred in our libraries, because for many of these "new" users library technology is so intimidating that it becomes the first obstacle to be addressed in the library classroom or at the information desk. Indeed, the technological changes of most potential value to these students may be the cause of their initial learning problems in the library. The authors stress the need for library instructors to address the students' individual learning needs in order to overcome such problems, and they provide practical suggestions to meet the needs of these particular student groups.

The editors state they have targeted the book toward an audience of academic and public library instructors, as well as library science students. While none of the authors writes from a health sciences library setting, every chapter has something to offer the academic health sciences librarian. This is because the focus here is not on subject matter instruction but on the recognition of the unique learning needs of a variety of new library users. The lessons presented here are applicable for any subject field. While the research basis of the work is one of its strong points, most of the references are limited to reporting research in general academic library settings.

Teaching the New Library to Today's Users is strongly recommended for readers in all public service areas where there is daily interaction with library users from diverse groups. It would also be an excellent training resource for new staff unaccustomed to multicultural environments or needing more familiarity with diversity awareness issues.

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