

## RURAL MEDICAL LIBRARIES

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### INTRODUCTION

The task of correctly defining the term "rural" has been attempted by several authors. A resident living in an area with a population of three or four thousand people might think of the area as extremely rural. His opinion might change, however, after reading in the local newspaper of the existence of a one room school house in McLoed, North Dakota, which only has a population of fifty people. (1) Thus, unless "rural" is defined, each individual formulates his own idea of rurality. Perhaps, Donald M. Crider has best defined "rural" in his article, "Culture and Values of Rural Communities." He explains:

"The modifier, "rural," is used to designate characteristics of physical areas as well as attributes of people. In using the word we refer to combinations of different substantive aspects: ecological, occupational, and sociocultural. In the first instance, the reference is to areas with low population density, settlements of small absolute size, and communities of persons who are relatively isolated from other segments of society. Occupationally, rural refers to involvement in extractive type industries." (2)

With these considerations in mind, and for the purpose of this paper, a population figure of 25,000 or less (as used by The Center for the Study of Rural Librarianship, Clarion, Pa.) was used as a guideline figure for determining rurality. (3)

The Encyclopedia of Librarianship lists several types of medical libraries. They are as follows: 1) Medical corporation

and society libraries; 2) University and medical school libraries; 3) Research libraries; 4) Hospital libraries; 5) Government libraries (Ministry of Health); and 6) Industrial medical libraries. (4)

This paper deals with hospital libraries, and it was written in order to discuss the needs of rural medical libraries by analyzing a library survey conducted in twenty rural hospitals in Northwestern Pennsylvania.

Terry Weech in the article, "Public Library Standards and Rural Library Service," writes that it is evident from the examination of national standards that there is little attention given to rural library services or the rural library." (5)

There is another type of rural library that has been long forgotten--the rural medical library.

"Pennsylvania . . . is the state supporting the largest rural population in the United States--3,363,499 people of the total 1970 U.S. rural population of 11,793,090. (Of this total population, it appears that) . . . 1,359,730 rural residents are 'without' library service." (6)

After receiving answers to a questionnaire which was sent to twenty rural hospitals in Northwestern Pennsylvania, it is also apparent that rural medical libraries lack library service.

The Joint Commission on Accreditation of Hospitals has recommended the following:

"Whenever feasible, all professional library resources within the hospital shall be under the direction of a qualified medical librarian. A qualified medical librarian is an individual who holds a graduate degree in library science from a

school accredited by the American Library Association, and who is certified by the Medical Library Association, or an individual who has documented equivalent training and/or experience." (7)

The results of the previously mentioned survey of twenty rural hospitals in Northwestern Pennsylvania indicate, however, that regardless of these standards, only seven full-time librarians are employed in hospitals in twelve counties in North and Northwestern Pennsylvania.

"To help small hospital libraries in remote, rural areas develop their libraries and services, the role of extension or circuit-rider librarian was conceived." (8)

Coincidentally, the first rural library services were those of traveling libraries much like the circuit rider library program, which operates in a similar fashion. (9) "The concept of the circuit rider librarian was first introduced by the Cleveland Health Sciences Library in 1973. The circuit rider program essentially provides hospitals with a 'librarian on the spot.' The librarian travels each week, making regular rounds in each hospital visiting nursing stations, the laboratory, the pharmacy, and other departments." (10)

In 1976, the Robert Packer Hospital Library, located in Sayre, Pennsylvania, began the circuit librarian program. "Robert Packer Hospital serves a forty-county rural and semi-rural area in Pennsylvania and New York. The librarians travel about 600 miles in Pennsylvania and 550 miles in New York each week. Six hospitals in Pennsylvania use the circuit services." (11)

As the history of rural library services indicates, the first rural services were not free--similarly, there is a fee charged by the circuit librarian. "Costs for services (at Robert Packer) are based on a per bed fee which is calculated each year from the budget . . ." (12) The budget for a circuit program is based on:

- Librarian's salary and fringe benefits;
- Clerical staff's salary and fringe benefits;
- Supervisor's time--10% to 30% salary;
- Travel--miles per week multiplied by the going rate per mile or leased car;
- Conferences and continuing education;
- Supplies such as paper, pencils, and pens;
- Photocopy costs--number of sheets multiplied by the cost per copy;
- MEDLINE costs;
- Telephone;
- Postage;
- Proportion of books and journals; and
- Miscellaneous (approximately 10% or less of total). (13)

E. Jean Antes in the article, "The Rural Area Hospital Can Afford a Librarian," explains that "nursing personnel have utilized the circuit library service (at Robert Packer) more frequently than medical or other requesters. This finding supports the concept that libraries should be available to all hospital and health-related personnel rather than medical staff only. (14) She further mentions that the circuit rider program, which began as a "reference service has developed into almost complete library service. Books are cataloged, journals checked in, and acquisitions recommended." (15) With the belief that the hospital's resources should be extended to serve smaller, surrounding communities and aid in the overall program of health information distribution, the circuit librarian program continues

to supply and keep personnel in touch with the best health-related information available. (16)

Most of the smaller hospitals feel they do not need library services because they are not teaching hospitals. Yet, as Sylvia Feuer explains in the article, "The Circuit Rider Librarian," to "give good patient care, the staff, irrespective of the size of the institution or job teaching commitments, must keep abreast of all new health care developments, including changes in legislation. She also points out the following:

"The physician working in a large urban hospital has many more resources available to him than does a doctor practicing in a rural community. However, they both are treating patients who may have the same illness and require similar care. If the illness is uncommon, the question then arises as to what would be the best way to make available the necessary information for correct diagnosis and treatment. One resource could be the knowledgeable librarian, who, with proper indexes and interlibrary loan capabilities, can furnish the necessary support even though the library collection of the hospital involved may not be adequate." (17)

Inability to hire a full-time professional librarian is only one major deficiency facing rural medical hospitals today. There are several others. Clifford Lange in "Rural Public Library Trustee," has cited lack of staff, insufficient support and equipment, as obstacles to a rural public library's ability to offer adequate services. (18) Rural medical libraries also face these same problems. Another dilemma facing medical libraries "is the concern over accreditation and continuing education for physicians and other health care personnel, which has resulted in the development of certification programs for each specialty." (19) Agnes Roach notes in "The Health Science

Librarian," that "this (development) requires continuing education programs and puts a demand on health science libraries for more materials as well as new formats such as audiovisuals. It also increases the need for library services in rural areas." (20) Hence, administrators should view the circuit rider program as a possible solution to their problem. It appears, however, that this program has not yet spread to North and Northwestern Pennsylvania, as the results of the survey (included in this paper) indicate only two medical libraries (without a full-time or part-time librarian), out of twenty, use the circuit rider program.

There are also two other services important to medical libraries. They are the clinical librarian services, and the LATCH service.

"In the mid-1960's, the health care team emerged as a new concept in the practice of medicine. By 1971, librarians had joined the health care team. Clinical librarians as members of this group attend educational conferences, grand rounds, patient rounds, etc. They also spend time instructing team members in the use of library facilities and tools." (21)

The LATCH program, which stands for "Literature Attached to Charts," is a beneficial service. "Physicians order searches very much as they would any test or treatment for the patient. The result is a few articles relevant to the patient's problem attached to his or her chart." (22)

"In both the field of medicine and information science,

technology is playing an increasingly larger role." (23) That is why today, the major question: "How many volumes do you have in your library?" has changed to--"How many microcomputers do you have in your library?" (24)

Medical libraries have progressed readily since the establishment of the first medical library at the Pennsylvania Hospital in 1762. (25) For example, in today's large medical libraries, "microcomputers, databases, laser disks, computer terminals, multimedia and, of course, information in the form of books and journals . . ." are constantly being used to acquire information and knowledge. (26)

Computers have three main functions in hospital libraries today. They are as follows:

1. Use for library administrative and housekeeping functions.
2. Use for automated bibliographic retrieval.
3. Use for the retrieval of information, with retrieval of such forms of full-text journals as the Annuals of Internal Medicine, The British Medical Journal, The Lancet, The New England Journal of Medicine, or Sabiston's Davis-Christopher Textbook of Surgery, which are online full-text. (27)

Although it has been said that a medical book is out-dated before it is published, books are still important sources of information in medical libraries. "It is not the purpose of a medical book to transmit the landmark discovery in this morning's newspaper, however, it is a tremendous time saver because it correlates information from primary sources and presents the

subject with often both past and present advances. By reading and comparing two or three books on the same topic, one finds different outlooks, interpretations, and viewpoints." (28) Thus, books are still important tools in today's medical libraries, but medical librarians are also important; however, all medical libraries today do not have librarians. Some small hospitals in rural areas do not have libraries. In other instances, however, the medical librarian functions as part of the health care team. "The health science librarian must deal with people, both library staff and other institutional members. Today's health science librarians must be adaptable--ready and willing to accept innovations and to implement them." (29)

The work of various directors of the Medical Library Association from 1971-1979 has resulted in new procedures to certify medical librarians. "Over the four year period 1975-78, the efforts of several committees were coordinated in developing a new certification examination. This exam was given twice in 1978 and from 1979 on will be administered once each year. Although most health science librarians (are) already certified under the previous MLA code, all are faced with recertification." (30)

"In addition to certification for librarians, hospital libraries are also included in the accreditation program for each hospital. The Joint Commission for Accreditation of Hospitals (JCAH) develops and publishes standards for use by the site visit teams in evaluating each institution." (31)



Standard II listed in the Accreditation Manual for Hospitals

reads:

"The provision of professional library services shall be guided by written policies and procedures. Written policies and procedures for professional library services shall be current, and shall relate to at least the following:

- The mechanisms for selection and acquisition of library materials;
- Donations to the library;
- Cataloging and classification of library resources;
- The level of reference and bibliographic services to be provided;
- The regulation of access to, and circulation of, library resources materials, including the mechanisms through which individuals authorized to use the library can participate in all library services provided; the provision of essential library materials when the library is closed or not staffed; and the period that a book, journal, or audiovisual material/equipment may be retained on loan;
- The mechanism for informing the medical and hospital staffs of new acquisitions and services, and their availability;
- The length of time that library materials shall be retained, and the disposition or storage of outdated or unusable books and periodicals;
- The binding of journals, as required;
- Any required records or reports; and
- The functions of the professional library committee, when one exists.

When a qualified medical librarian serves the hospital on a full-time or part-time basis, this individual shall be a member of the (library) committee, with a defined role in committee functions. The committee shall meet as often as required, but

not less than twice annually, to review the library policies and procedures; to evaluate the effectiveness of the library in meeting the informational and educational needs of its users; and to establish priorities in the selection of new texts, the selection or renewal of journals, and the acquisition of other library materials." (32)

To help librarians in the selection of new texts and journals, Alfred Brandon and Dorothy Hill have written an excellent article called, "Selected List of Books and Journals for the Small Medical Library," which offers an up-to-date bibliography of 583 books and 138 journals appropriate for small to medium-sized medical libraries. (33) For librarians needing assistance in collection development and collection management, the authors suggest the following sources:

Bradley, J, Holst R., Messerle, J. eds. Hospital Library Management. Chicago: Medical Library Association, 1983.

Darling, L. The Handbook of Medical Library Practice. Vol. 2. Technical Services in Health Science Libraries. Chicago: Medical Library Association, 1983.

Wender, R.W. ed. Organizing and Administering the Small Hospital Library. 2nd ed. Dallas: Talon Regional Medical Library Program, 1983.

The following were recommended for developing hospital library collections:

Lewis, C.S. Jr. A Library for Internists V: recommended by the American College of Physicians. Ann Intern Med 1985 March; 102; 423-37.

Wender, R.W. et. al. Primary Care Physicians Book List Postgrad Med 1982, Feb: 71:74-83.

Medical Books 1985 can be obtained free from medical book vendors.

A good reference source recommended was the following book

compiled by J. Kesti and E. Graham:

Kesti, J. and E. Graham. Reference Materials and Services for a Small Hospital Library. 5th rev. ed. Los Angeles: Pacific Southwest Regional Medical Library, Biomedical Library, University of California, Los Angeles, 1984.

The authors also recommended Index Medicus and Cumulated Index Medicus instead of The Abridged Index Medicus. (34)

The main bibliographic on-line search system of the National Library of Medicine is MEDLINE. "Medline is a computerized on-line system with more than 600,000 journal articles and selected monographs." (35)

The National Library of Medicine is the true national library of medical sciences. Agnes Roach notes its importance in the article, "The Health Science Librarian," as she writes:

"The activities of the National Library of Medicine have had great effects on medical libraries and have shaped many services offered to health care professionals. All health science libraries in a given area are coordinated by a regional medical library funded by the National Library of Medicine.

One area in which NLM has been a major force is that of technology development. There are now fifteen separate data bases available on-line for information retrieval. These include Medline, four toxicology databases, two cancer data bases, Catline (Catalog on-line), Serline (Serials on-line), Avline (Audiovisual on-line), Histline (History of medicine on-line), Bioethicsline, and Epilepsyline." (36)

Most physicians belong to the American Medical Association. "The American Medical Association is a national federation of 55 state and territorial medical groups. It was founded in 1847 and is today the largest medical organization in the world, with 224,000 members (1979)." (37)

"In addition to the American Medical Association . . . there are a few societies which most physicians belong to, there are

quite a few medical societies, membership in which is achieved on the basis of merit. These included The American College of Physicians, American College of Surgeons, etc., which are nationwide. There are also regional societies such as Central Surgical Association, Southern Surgical Association, etc., membership in which is on a basis of academic achievement and publications. At the top of the surgical hierarchy is the American Surgical Society whose membership is largely comprised of full professors of surgery around the country." (38)

#### RESPONSES TO QUESTIONNAIRE

Cheryl Harris in, "Hospital-based Patient Education Program and the Role of the Hospital Librarian," states that "the hospital library exists to provide information in support of the hospital's major functions, which are patient care, education, and research." (39)

The purpose of the following survey was to determine how many rural medical libraries exist in North and Northwestern Pennsylvania; to ascertain how many full-time or part-time librarians are employed by these hospitals; and, to discover if any libraries in this particular area are currently using the circuit rider librarian, or other extension services in order to support the major functions of the hospital (as mentioned above).

The questionnaire (see appendix) was sent to twenty rural hospitals in North and Northwestern Pennsylvania. A directory of those libraries involved in the survey can be found on page 14-16 of this paper.

In order to obtain immediate responses, the number of questions asked was kept at a minimum of ten, and a self-addressed stamped envelope was included with each survey. Eighteen

hospitals replied.

The first two questions were factual questions dealing with name of hospital, population of area; question three dealt with the number of doctors and nurses in each hospital; question four dealt with hospital size.

The results of the other questions were as follows:

- QUESTION 5: a. Does your hospital employ a full-  
or part-time medical librarian?  
yes, 9; no,9;
- b. If you answered "yes" to the above question,  
please answer: \_\_\_\_\_ full-time, \_\_\_\_\_ part-time.  
full-time, 7; part-time, 2.
- QUESTION 6: If there is not a full-or part-time librarian  
available, how do you provide library service  
for your staff?  
Through the Medical Records Department, 2;  
through administration, 1; Library Committee  
provides services, 1; library charge person  
appointed to provide library services based  
in library, but assumes other responsibilities  
in addition to providing library service, 1;  
none,1; medical library is updated at the  
request of the physicians on staff,1;  
we have a consulting librarian under contract  
for four visits (on site) per year,1; we  
have an MSLS working in Pastoral Care who helps,  
and we use an aide (full-time) in the library, 1.
- QUESTION 7: Is your hospital involved in any extension  
services, such as "the circuit rider librarian  
program"?  
yes,3; no,15 (figure includes those  
with full or part-time  
librarians)
- QUESTION 8: What database system are you currently using?  
none,9; MEDLINE,2; NLM,1;

MEDLARS,2; DIALOG,2; BRS,2;

Two libraries currently using MEDLARS  
are changing to BRS.

QUESTION 9: Are there microcomputers in your library?  
How many? What are they used for?

none,15; one,3 (figure includes one  
being ordered at the Clarion  
Osteopathic Community Hospital)

QUESTION 10: Do you work with a limited budget? Approximate  
budget figure \_\_\_\_\_

no response,7; yes,11;

The results of the survey indicate that rural hospitals in North and Northwestern Pennsylvania are in need of medical libraries and librarians. Fifty percent of the eighteen rural hospitals responding to the questionnaire indicated having either a full-time or part-time librarian. Two libraries reported access to materials through the circuit rider program.

It was interesting to note the various budgets of each of the hospitals' medical libraries. Budgets ranged from \$1,000 to \$25,000. The larger budgets were in the DuBois, Meadville, and Oil City hospitals. Oddly enough, with a library budget of \$25,000, DuBois Hospital only has a part-time medical librarian. Butler, with its 17,026 population, only reported a budget of \$9,500, which is considerably low in comparison with the other hospitals in rural areas with populations over 5,000.

Being so far apart from one another, it seems the nine librarians that work in the North and Northwestern Pennsylvania area could benefit by establishing a Health Science Library

Association similar to the one now existing in Central Pennsylvania.

"The Central Pennsylvania Health Science Library Association is open to all persons who are actively engaged or otherwise involved in library or bibliographic work in medical or allied scientific fields within the Central Pennsylvania region. The Central Pennsylvania region shall be defined as the counties of Adams, Berks, Blair, Bradford, Centre, Clinton, Columbia, Cumberland, Dauphin, Huntingdon, Juniata, Lancaster, Lebanon, Lycoming, Mifflin, Montour, Northumberland, Perry, Schuylkill, Snyder, Sullivan, Tioga, Union and York." (40)

The hospitals within this twenty-four county area are not all rural hospital medical libraries, however, organization of an association of this type, which deals with library problems and resource sharing, would prove quite beneficial to those now existing medical libraries in the rural setting of North and Northwestern Pennsylvania.

#### ROLE OF THE MEDICAL LIBRARIAN

AND

#### THE FUTURE OF THE RURAL MEDICAL LIBRARY

Robert Cheshier in Principles of Medical Librarianship, sees the health science librarian not as a "gate-keeper," but as a "seeker" of information. He feels that the librarian, as "information seeker," must pull together all the available information for the physicians who . . . "once licensed and in practice, . . . must have ready access to the latest medical knowledge." (41)

The health science librarian must also be willing to provide patients with information.

"The growing trend in hospital and medical school libraries (is) to develop collections of information on health care for patients and to disseminate this information via health care workers and through cooperation with local public libraries. The concept of health care as a right has come to be commonly held at the same time that consumerism has become a popular national trend. People are indicating some tendencies to care for themselves and to maintain the quality of their health through physical fitness and proper nutrition." (42)

A. Benedict Schneider in "Specialization," an article written in Cheshier's Principles of Medical Librarianship, makes the following helpful suggestions for health science librarians:

"From the standpoint of the librarian, perhaps the most useful sources of current orientation in (the field are the Journal of the American Medical Association (now called Bulletin of the Medical Library Association) and Medical Economics. The latter, a controlled-circulation throwaway, supported by advertising, is constantly improving in content and quality, and deserves to be preserved in libraries as a chronicle of the rapid change which is currently affecting the organization of medical practice.

As to scientific periodical publications, innumerable journals are produced in all the specialties and subspecialties, usually as organs of special societies. An example chosen at random but typical of the group is Aerospace Medicine, a monthly journal of the Aerospace Medical Association. These usually incorporate original articles, news of organizational activities, abstracts of current literature in the field, and book reviews." (43)

The Northwestern Pennsylvania survey results indicate only three libraries, out of eighteen, contain microcomputers, however, the day will come when there will be a microcomputer in each rural medical library.

"The Lister Hill Center is currently experimenting with a national broad-band inactive communications network for health education programs to promote dissemination of information, increase access to continuing education programs, and the sharing of faculty and curriculum among health professionals. A prototype, computerized information-transfer system using the disease "viral hepatitis" as the initial test model has been constructed. This data bank contains 'substantive' answers to questions posed by practitioners (rather than bibliographic citations) immediately available anywhere there (is) a terminal, thus



substantially decreasing the importance of geographic location. the Lister Hill Center is also working to develop a minicomputer system that would integrate all library functions on file; a computer terminal to integrate currently incompatible computer-assisted instruction systems; and a videodisk that could extend large bibliographic data bases to include texts, color images and audiovisual sequences." (44)

#### CONCLUSION

The fact that the clientele of health science libraries are heavily dependent upon information clearly defines the role of the medical librarian as an information manager. The presence of the librarian in a rural medical library will help to clear the blur which some feel will be brought about by rapid technological changes. "It is the responsibility of the librarian to see that the library is included as an integral part of an automated institutional information management system. To do this effectively the hospital librarian will have to be technologically sophisticated enough to translate library needs to efficient equipment, hardware and software . . ." (45)

The rural medical library has the job of catching up with the electronic library of 1985, but the medium of the knowledge base in even large medical libraries is still--print. And as Daniel J. Boorstin, Librarian of Congress, points out--new technologies and the book are not adversaries but allies in informing the american people. (46) Thus, it is the hospital librarian, ("who is in the unique position of combining professional training in providing information with that of acquiring it,") (47) who will be the key that will open the door to the improvement of rural hospital library services.

Appendix A  
DIRECTORY OF HOSPITALS SURVEYED  
IN NORTH AND NORTHWESTERN PENNSYLVANIA

1. Bradford Hospital  
116-156 Interstate Parkway  
Bradford, Pennsylvania 16701  
Phone: (814) 368-4143
2. Brookville Hospital  
S. Main Street  
Brookville, Pennsylvania 15825  
Phone: (814) 849-2312
3. Butler Co. Memorial Hospital  
111 E. Brady Street  
Butler, Pennsylvania 16001  
Phone: (412) 283-6666  
librarian-Rita V. Liebler
4. Clarion Osteopathic Community Hospital  
1 Hospital Drive  
Clarion, Pennsylvania 16214  
Phone: (814) 226-9500  
librarian-Eleanor C. Barrett
5. Clearfield Hospital  
809 Turnpike Avenue  
Clearfield, Pennsylvania 16830  
Phone: (814) 765-5341
6. Corry Memorial Hospital  
612 W. Smith Street  
Corry, Pennsylvania 16407  
Phone: (814) 664-4641
7. Charles Cole Memorial Hospital  
Rural Delivery 3  
U.S. Rte 6  
Coudersport, Pennsylvania 16915  
Phone: (814) 274-9300
8. DuBois Hospital  
100 Hospital Avenue  
DuBois, Pennsylvania 15801  
Phone: (814) 371-2200

9. Franklin Regional Medical Center  
1 Spruce Street  
Franklin, Pennsylvania 16323  
Phone: (814) 437-7000  
librarian-Lee P. Gilliland
10. Greenville Hospital  
100 N. Main Street  
Greenville, Pennsylvania 16125  
Phone: (412) 588-2100
11. United Community Hospital  
Cranberry Rd.  
Rural Delivery  
Grove City, Pennsylvania 16127  
Phone: (412) 458-5442
12. Kane Community Hospital  
Wetmore Road  
Kane, Pennsylvania 16735  
Phone: (814) 837-8585
13. Meadville City Hospital  
751 Liberty Street  
Meadville, Pennsylvania 16335  
Phone: (814) 336-3121  
librarian-Barbara Ewing
14. Oil City Hospital  
174 E. Bissell Avenue  
Oil City, Pennsylvania 16301  
Phone: (412) 788-4900  
librarian-Jean Lucas
15. Philipsburg State General Hospital  
Philipsburg, Pennsylvania 16866  
Phone: (814) 342-3320
16. Punxsutawney Area Hospital  
R.D. #4, Rte. 36 N.  
Punxsutawney, Pennsylvania 15767  
Phone: (814) 938-4500
17. Elk Co. General Hospital  
94 Hospital Street  
Ridgway, Pennsylvania 15853  
Phone: (814) 776-6111

18. Andrew Kaul Memorial Hospital  
Johnsonburg Rd.  
St. Marys, Pennsylvania  
Phone: (814) 781-7500

19. Warren General Hospital  
2-12 Crescent Park W.  
Warren, Pennsylvania 16365  
Phone: (814) 723-3300  
librarian-Pam Sgalio

20. Warren State Hospital  
Box 249  
Warren, Pennsylvania 16365  
Phone: (814) 723-5500  
librarian-Daryl Ellsworth

Appendix B

SURVEY OF RURAL MEDICAL LIBRARIES IN THE VICINITY OF  
NORTHWESTERN PENNSYLVANIA

1. Name of Hospital \_\_\_\_\_
2. Population of \_\_\_\_\_ . \_\_\_\_\_
3. Number of doctors \_\_\_\_\_ . Number of nurses \_\_\_\_\_
4. Size of hospital \_\_\_\_\_ beds.
5. The Joint Commission on Accreditation of Hospitals has recommended the following:  
"When, feasible, all professional library resources within the hospital shall be under the direction of a qualified medical librarian."
  - a. Does your hospital employ a full- or part-time librarian?  
\_\_\_\_\_yes \_\_\_\_\_ no
  - b. If you answered "yes" to the above question, please fill in the following:  
\_\_\_\_\_ Name of Librarian  
\_\_\_\_\_ Full-time \_\_\_\_\_ Part-time
6. If there is not a full or part-time librarian available, how do you provide library services for your staff?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Is your hospital involved in any extension services, such as "the circuit rider librarian program"?  
\_\_\_\_\_ YES \_\_\_\_\_ NO
  - a. If yes, please explain
8. What database system are you currently using? \_\_\_\_\_  
\_\_\_\_\_
9. Are there microcomputers in your library?
  - a. If yes, how many? \_\_\_\_\_ . b. How are they used? \_\_\_\_\_\_\_\_\_\_
10. Do you work with a limited budget? \_\_\_\_\_ YES \_\_\_\_\_ NO  
Approximate figure \_\_\_\_\_

NOTES

1. "Nation's Lowest-paid Teacher May Lose Job," Bradford Era, 8 October 1985, sec. 1, p. 3.
2. Donald M. Crider, "Culture and Values of Rural Communities," Rural Libraries, Winter 1982, p. 1.
3. Bernard Vavrek, "Information Services and the Rural Library," Library Trends, Spring 1980, p. 564.
4. Encyclopedia of Librarianship, 3rd ed. s.v. "Medical Libraries," by Thomas Landale.
5. Terry Weech, "Public Library Standards and Rural Library Service," Library Trends, Spring 1980, p. 605.
6. Bernard Vavrek, "Information Services," p. 564.
7. Joint Commission on Accreditation of Hospitals, Accreditation Manual of Hospitals: 1981, (MN: Hazelton Foundation, 1981), p. 147.
8. Agnes A. Roach, "The Health Science Librarian: A Member of the Health Care Team Responsive to Emerging Trends," Library Trends, Fall 1979, p. 256.
9. Jean E. Antes, "The Rural Area Hospital Can Afford a Librarian," Bulletin of the Medical Library Association, April 1982.
10. Ibid, p. 234.
11. Ibid, p. 234.
12. Ibid, p. 235.
13. Ibid, p. 235.
14. Ibid, p. 235.
15. Ibid, p. 235.
16. Ibid, p. 236.
17. Sylvia Feuer, "The Circuit Rider Librarian," Bulletin of the Medical Library Association, July 1977, p. 350.
18. Clifford Lange, "Rural Public Library Trustee: A Preliminary Assessment," Library Trends, Spring, 1980, p. 590.

19. Agnes A Roach "The Health Science," p. 255.
20. Ibid, p. 255.
21. Ibid, p. 253.
22. Ibid, p. 254.
23. Ibid, p. 254.
24. Alfred Brandon and Dorothy Hill, "Selected List of Books and Journals for the Small Medical Library," Bulletin of the Medical Library Association, April 1985, p. 177.
25. L. Darling, Handbook of Medical Library Practice, vol. 2. (Medical Library Assn., 1982), p. 198.
26. Alfred Brandon and Dorothy Hill, "Selected List," p. 177.
27. Ibid, p. 177.
28. Ibid, p. 178.
29. Agnes Roach, "The Health Science," p. 260.
30. Ibid, p. 256.
31. Ibid, p. 257.
32. Joint Commission on Accreditation of Hospitals, "Accreditation," p. 148-9.
33. Alfred Brandon and Dorothy Hill, "Selected List," p. 176.
34. Ibid, p. 180.
35. Agnes Roach, "The Health Science," p. 254.
36. Ibid, p. 258.
37. Academic American Encyclopedia, 3rd ed. s.v. "The American Medical Association."
38. Robert G. Cheshier, Principles of Medical Librarianship. (Ohio: The Cleveland Health Sciences Library, 1975), p. 54.

39. Cheryl Harris, "Hospital-based Patient Education Programs and the Role of the Hospital Librarian," Bulletin of the Medical Library Association, April 1978, p. 215.

40. Central Pennsylvania Health Science Library Association. Central Pennsylvania Health Science Library Association Manual: 1984. (Penna.: The Central Pennsylvania Health Science Association, 1984) p. 2.

41. Robert G. Cheshier, Principles, p. 129.

42. Agnes Roach, "The Health Science," p. 259.

43. Robert G. Cheshier, Principles, p. 82.

44. Agnes Roach, "The Health Science," p. 259.

45. Alfred Brandon and Dorothy Hill, "Selected List," p. 177.

46. Ibid, p. 177.

47. Cheryl Harris, "Hospital-based Patient," p. 215.



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