

Medical Library Association

H A N D B O O K O F

Medical library practice

with a bibliography
of the reference works and histories
in medicine and the allied sciences

Second edition, revised and enlarged

Janet Doe, Mary Louise Marshall

Editors

American Library Association

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Handbook of

Medical library practice

Second edition

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*Opinions expressed are those of the authors and do not necessarily represent
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Preface to the second edition

THE LITERATURE OF MEDICINE is probably more extensive and more complicated to follow than that of any other discipline. Those who read it—members of the medical and allied professions—and those who are responsible for its collection, care, and accessibility—medical librarians—all need guidance through its intricacies. This book is intended to make easier the task of the medical librarian in his labors on behalf of the medical worker.

It is less true now than when the first edition of the *Handbook* was published twelve years ago that many libraries have to draw their staff from other than the medical library field, though that condition does frequently still exist. Medical library education has made strides in the last dozen years. Courses at four library schools—Atlanta, Chicago, Los Angeles, and New York—produce together several score of graduates each year. Voluntary certification by the Medical Library Association is furnishing a standard and an incentive which are beginning to raise the general level of qualifications. The fact yet remains, however, that many individuals do enter the medical field from that of general library work, and some still come from related medical occupations, though the latter number is growing less and less.

Whatever the origin of the medical librarian and regardless of his length of experience in the field, he will often need information on goals, on methods, on services, on bibliographic tools, on the historical aspects of his subject field. The newcomer will most frequently want to know what needs to be done and how to do it; the seasoned librarian, better ways of gaining his end and new tools with which to work.

All of these various sorts of information will be found here: what a medical library is and does; the role of the Medical Library Association; the training, qualifications and rewards of the medical librarian; some of the important aspects of medical library administration and planning for a

new building. Then there are the technical processes: acquisition and preservation of medical books and periodicals; medical classification systems; descriptive and subject cataloging of medical books, differing in many ways from that for general literature; the care of non-book materials, pamphlets and reprints, pictures, charts, maps, audio-visual adjuncts; and sources and use of photoduplicated articles and books. Beyond this, one has the application of these processes for the desired results: the medical library's public and internal relations; reference and bibliographic work; and the care and use of historical materials.

It is assumed that most of this *Handbook's* readers are already familiar with general library practices and tools. Emphasis has been placed on the differences that exist between them and those in medical libraries. Such variations are found in many aspects: in the exclusively medical and scientific subject matter, in the overwhelming importance of the periodical literature, in the volume of foreign publications, in a clientele with advanced educational background and urge to continuous reading for learning, teaching, and research purposes, and in the opportunities for historical and bibliographic studies by librarians. The newcomer will learn new points of view, while the experienced worker may find fresh ideas.

Much of the data given here will be useful not only to librarians but to physicians and scientists. Guides to the devious channels of literary research should be welcomed by all who must explore them: the student must be taught to find his way; the practicing physician often wants help; the research man has to keep himself abreast of his colleagues; the teacher must be alert to new ideas. A knowledge of how to use medical library tools and of what services may be expected of the librarian should be vital to all of these.

To both physician and librarian, the extensive Bibliography contained in the *Handbook* should be of practical and constant value. In it are listed the chief reference works of medicine and its allied fields—first, those of science, then of medicine as a whole, and last, those of special subjects. Annotations indicate the characteristics and usefulness of each work. Here one can find the main avenues he should pursue for whatever particular inquiry he must make. For the historian, be he physician, scientist, or librarian, there is provided an even fuller record of the literature available to him, sources of information on medicine in every period, country, and specialty. Anyone interested in the history of medicine will find this Bibliography exceedingly helpful in locating his material and in building his own historical reference collection.

While the early literature of medicine forms but a small part of the

average medical library, its role is growing in importance. An attempt is made here, therefore, to show in a practical way the aims, methods and tools through which may be obtained the maximum use of this portion of the collection. A brief list of reference works most necessary for the history section of a small medical library is given.

It was because all of the information outlined above was either widely dispersed, inadequately covered, or nonexistent that this *Handbook* first came into being. Its inception was due to the initiative and unselfishness of a medical librarian, M. Irene Jones, who had herself felt the need of such a manual. Having compiled data for her own use, she freely turned over her manuscript to a committee of the Medical Library Association in order that the book might reflect the observations and procedures of many libraries instead of a single one. From that committee came the first edition of the *Handbook* in 1943.

In revising it for this second edition, every effort has been made to profit from lessons learned through the first edition. Comments, generously given and gratefully received, have been heeded as far as was practicable. The basic purpose, of course, remains the same as before: to present as simply as possible information useful to those who deal with medical literature, whether librarians, physicians, scientists, or students. As previously, the needs of the majority of medical libraries have been borne in mind. A count of those listed in the *American Medical Directory* for 1950 shows the following distribution by size:

Number of Volumes	Number of Libraries
Under 2,000	76
2,000 to 4,999	75
5,000 to 9,999	72
10,000 to 19,999	50
20,000 to 49,999	61
50,000 to 99,999	22
100,000 and over	13
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Since three quarters of these libraries have under 20,000 volumes, collections of this size continue to be those for which this book is primarily intended. More attention has been given to the needs of libraries in the allied fields of dentistry, pharmacy, and nursing than in the first edition.

Material carried over from the first edition has been brought up to

date. A good deal of it has been rearranged. The type of information previously given in the chapter, "The Medical Library," has been expanded into three chapters: "Medical Libraries," "The Medical Librarian," and "Administration." The former two chapters, "Cataloging" and "Subject Headings," have been combined into one. The previous two lists of reference works, general and historical, have been amalgamated into a single comprehensive Bibliography. Three new chapters have been added: "The Medical Library Association," "Photoduplication," and "Public Relations," and new sections on book preservation and other subjects. To provide room for this augmentation the list of medical libraries abroad has been omitted and the writing throughout has been condensed wherever possible. Entries no longer useful have been dropped from the reference lists.

In spite of the fact that much material is new, the book rests solidly on the labor of the original authors. Judith Wallen Hunt has, unfortunately for the *Handbook*, left the medical library field, but her former chapter on "The Medical Library" supplies much of the data for several of the new chapters. Bertha B. Hallam, who has long been active in the Medical Library Association, has written the new chapter on the Association, while her former chapter forms the basis for "Acquisition and Preservation," by Isabelle T. Anderson. Similarly, Miss Anderson's previous work on subject headings combined with that on cataloging by L. Margueriete Prime (whose presidential duties unfortunately prevented her taking on the additional burden of writing for the *Handbook* at the time it was begun) furnished the groundwork on which Wilma Troxel has built the chapter on these joint topics. Irene Jones has taken full responsibility for the chapter on classification, a responsibility formerly carried by her and Mary Louise Marshall, thus releasing the latter to serve as joint editor. The sad loss by death of Lillia M. D. Trask has necessitated the completion by Eleanor Fair of the revision of the chapter on non-book materials on which they had previously collaborated.

There are changes, too, besides the major ones of content. Difference in format was necessitated by the doubling in length of the Bibliography. The latter, the annotated list of 1965 reference works, should not be confused with the lists of References accompanying each chapter. The form of abbreviations for periodical citations follows that of the *World list of scientific periodicals*. This was chosen because the literature of medicine is a world literature with many possibilities for the confusion of similar titles; it seemed best, therefore, to adopt abbreviations of sufficient clarity to be understood by all.

The extent of the Bibliography, and the large number of entries on a

two-column page, made it advisable in the index to refer to these entries by item number rather than by page. All other matter is referred to in the index by page number. To distinguish between the two methods of numbering, item numbers have been printed in boldface, page numbers in roman.

It is inescapable, in a book whose parts are written by several individuals, that there will be varying opinions expressed, some of them occasionally diametrically opposed. The reader is warned that in such cases he must follow his own best judgment. Further, he should be aware that the various chapters were not all completed simultaneously. Those which were written early will necessarily not cover information as recent as those finished late. Allowances should therefore be made for such discrepancies.

The death of Marion F. Dondale, author of Chapter 1 and a Past-President of the Medical Library Association, just as this manuscript was finished, has brought sorrow to her colleagues and deprived the *Handbook* editors of her energetic and sympathetic support.

We thank Alice D. Weaver, Rare Book Department Head, New York Academy of Medicine, for checking the citations in Chapter 12. We are grateful to Erna Russo, head of the Catalogue Department, for careful supervision of the entry forms for references throughout the volume. The index is the combined work of Florence L. Duvall and Ellen Kerney, both former library staff members of the New York Academy of Medicine, to whom go our thanks. Ilse Bry, Library Associate in charge of the Neuropsychiatric Library, New York University—Bellevue Medical Center, very kindly checked for accuracy all reference numbers in the text with their entries in the chapter bibliographies. Helen Wasil Petrach, Secretary to the Academy's Librarian, has patiently and cheerfully assisted in reading the entire proof.

As was true of the first edition, the present *Handbook* records its debt to those institutions whose librarians have shared the labor of this volume. Even though the main work was done outside of "library time," the stress and strain of emergencies and extra tasks make the contribution of these libraries to the undertaking a very real one indeed. It is with a deep sense of gratitude that we acknowledge such participation on the part of the libraries of the following institutions: Albany Medical College; Emory University School of Medicine; Louisiana State University School of Medicine; Metropolitan Life Insurance Company; New York Academy of Medicine; Tulane University of Louisiana School of Medicine; U. S. Armed Forces Medical Library; University of Alabama Medical Center; University of Illinois, Chicago Professional Colleges; University of Oregon Medical

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School; University of Rochester School of Medicine and Dentistry; University of Tennessee College of Medicine; University of Utah College of Medicine; Vanderbilt University School of Medicine.

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EDITORS

August 4, 1955

A series of unfortunate circumstances has delayed the preparation and publication of this *Handbook*. In all but a few instances, the material dates from October, 1953, or earlier.

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Medical libraries

MARION F. DONDALE

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The literature of medicine and early libraries

THE LITERATURE OF MEDICINE is vital to the advance of medicine. Few medical discoveries have appeared like Athena, full-panoplied from the head of some medical scientist. Most have been the result of communication of ideas and observations of innumerable men by means of the written literature. Nor is the recent literature sufficient, for many of the latest advances have evolved from the rediscovery in the older literature of ideas which contemporaries had overlooked or refused to accept. In our own day, Alexander Fleming reported the discovery of penicillin only to have it lie dormant for ten years, possibly because chemotherapy was in disrepute. Chemicals which killed germs had also killed men. It is often said that medicine was retarded for a thousand years until men dared to challenge the teaching of Galen and return to that of Hippocrates. Theodoric (11) taught at the end of the thirteenth century that pus was not "laudable" but that wounds should heal by first intention. Yet "laudable pus" was produced by surgeons, with few exceptions, for six more centuries. Treating wounds as Theodoric had recommended made possible the remarkable record of surgeons in World War II. No one can estimate the number of lives and limbs lost and the amount of deformity produced through the centuries by disregard of the old literature. Cushing is credited with having introduced in 1918 the method of forcing bloody matter out of the brain through a skull wound at the time of debridement by having the patient strain while holding his breath, yet Theodoric, under similar circumstances, had said, "Let the patient hold his nostrils and mouth closed and have him blow strongly." Theodoric also anticipated Dandy in warning against the use of sedatives in head injuries.

The literature of medicine is vital, too, to the professional careers of its practitioners. The medical school graduate has learned the rudiments of the science but must always remain a student, for the practice of medicine requires constant reading. In a carefully regulated hospital, the record of every patient who dies is reviewed by the doctors of the staff and every conscientious physician secures all the help he can from his colleagues and from the literature in his effort to save or prolong his patients' lives. The Council on Medical Education and Hospitals of the American Medical Association has quoted, in successive revisions of its suggestions for hospital medical libraries (5), an excerpt from an address by Dr. George E. Vincent on the occasion of the celebration of the fiftieth anniversary of the Boston Medical Library. Dr. Vincent said that without recourse to the literature "avoidable mistakes, waste and duplication of effort are inevitable. Doctors become victims of empiricism and routine; imagination and initiative lack stimulus; enthusiasm and energy decline; minds grow sterile that under the quickening influence of the recorded experience of others might have been fruitful." The knowledge of medicine is so vast that no man can master it all, nor can he assemble in his private library all that he may need. The result in medical practice has been specialization; in medical libraries, a phenomenal growth, especially in hospitals and medical societies.

Medical texts have been found in every ancient library uncovered by archeologists. The Edwin Smith surgical papyrus (1600 B.C.) is obviously a compilation of earlier texts, for the compiler explains the meaning of words already obsolete (17). The contents of medical libraries of ancient and medieval times can be envisaged by reading Cecilia C. Mettler's history of medicine (19). Mettler arranged her history by subject, and in individual fields has traced its development in each of the countries of the ancient world and through succeeding centuries by reference to the written literature, from which she has quoted generously. Through the pages of this book, the reader moves along the shelves of a well-classified library, reading the names of the authors and titles of the books which a library of any given century might have contained, with the added pleasure of being able to take one from the shelves and read a bit without the labor of translation.

Little is known of the contents and size of early libraries, but the volume of literature contained in them was so great by the sixteenth century that the need for some means of finding what one wanted became apparent. Bibliographies of medicine prepared in this and each succeeding century reveal the contents of the libraries to which their compilers had access. By the sixteenth century, medical books in Italian, French, and German were appearing in comparatively large numbers, and by the eighteenth, proceed-

ings of societies, the earliest form of periodical literature, were being published. Lynn Thorndike (25) has made a detailed analysis of à Beughem's bibliography of 1681 which shows the wide range of medical subjects covered by books of the period. There is even a complaint that "too many books are printed, confusing and burdening the mind more than they instruct it." (24) That the bibliography prepared by Adolph Carl Peter Callisen between 1830 and 1845 reached 33 volumes, although Callisen limited his work to the literature of slightly more than the preceding fifty years, is an indication of the tremendous output of medical literature in the beginning of the nineteenth century. Three volumes were devoted entirely to the periodical literature, including not only articles from medical journals but those of medical interest in general and scientific periodicals. At the beginning of the *Index-Catalogue of the Library of the Surgeon General's Office, United States Army*, 400,000 subject cards were on file, while at the time of its discontinuance an accumulation of 1,750,000 unpublished references were left.

Physicians from early times were among the learned classes of society, and beginning with Aristotle, we know that many gathered private libraries. Much of our knowledge of physicians' libraries is derived only from sales catalogs, but other such collections are extant in the libraries of institutions, where they may be seen today. William J. Bishop (9) has described the notable libraries of two physicians of Cologne, and he and John L. Thornton (26-27) have discussed the extent of the collections of medical men, particularly in England. The owners of private libraries in Italy seem to have been among the first to bequeath or give their collections to institutions. Giancarlo Guidi (15) lists many private libraries from the thirteenth century to the present day. One of the earliest medical libraries in the American colonies was that of John Winthrop, son of the first Governor of the Massachusetts Bay Colony. Winthrop made a collection, remarkable for the period, of about a thousand scientific and medical books, many of which went to the library of the New York Hospital in 1812 and eventually to the New York Academy of Medicine. The earliest libraries in Virginia were very small, one of the largest being that of Dr. Henry Willoughby, which in 1677 consisted of 44 books of "Phisick" valued at 631 pounds of tobacco. Wyndham B. Blanton (10) has listed authors and titles of the books in several libraries as given in old inventories of estates. Other American libraries have been studied by Keys (16).

It was to be expected that the libraries of physicians in the earlier centuries would contain many incunabula, but approximately from the time of Hunter these collections seem to have taken on a special character and may be described as collectors' libraries. Their contents are the treasures