

**Wednesday, November 11  
General Membership Meeting  
Rocky Vista University**

**Submitted by Stephanie Wiegand**

**Program: On Pharmacology...  
Presented by Michael W. Martin, Ph.D.  
Assistant Dean for Student Services  
Associate Professor and Chair, Division of Pharmacology**

Dr. Martin is a native of Colorado and a graduate of Golden High School. He received a bachelor's of science degree in biological sciences from Colorado State University and a doctorate in biomedical sciences (pharmacology) from the Graduate School of Biomedical Sciences from the University of Texas at Houston.

Dr. Martin is deeply committed to teaching biomedical sciences to medical, graduate, undergraduate, and physician assistant students. He was honored to receive the Educator of the Year Award from the Texas College of Osteopathic Medicine and the Exceptional Faculty Award from the PA studies program. Dr. Martin was heavily involved in developing an innovative TCOM medical school curriculum while serving as acting associate dean for medical education and assistant dean for academic affairs. Dr. Martin also served as clinical adjunct

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## **Program: On Pharmacology...**

**Date of the Meeting:** Wednesday, Nov. 11, 2009  
**Location:** Rocky Vista University  
8401 South Chambers Rd.  
Parker, Colorado 80134

## **Schedule**

8:30 – 9:00 a.m.	Education program
9:00 – 9:30 a.m.	Networking and refreshments
9:30 – 10:30 a.m.	Main program
10:30 – 10:45 a.m.	Break
10:45 – 11:45 a.m.	Business meeting



professor of pharmacology, teaching medical pharmacology to certified registered nurse anesthetists at the Texas Wesleyan and Texas Christian University nursing schools. Dr. Martin has considerable experience serving as a member of both institutional (five years) and independent (12 years) institutional review boards for clinical research. *cq*

### From Denver International Airport/Denver

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Go west on Pena Boulevard to leave the airport (4.7 miles)  
Turn right (west) onto I-70  
Merge onto I-225 South  
Take I-25 South  
Exit at Lincoln Avenue (193) and turn left (east) at the top of the ramp  
Turn left (north) on Chambers Road

### From Colorado Springs

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Take I-25 north to Lincoln Avenue (exit 193) approximately 51 miles  
Turn right (east) onto Lincoln Avenue  
Turn left (north) on Chambers Road

### Treasurer's Report Submitted by Lynda Lillwitz

CCML's 2009-2010 budget has been approved. The allowed expenses are \$10,024.00 and the projected income is \$3,410.00.

CCML's current balance is \$6,902.52. We have had \$2,285.78 in expenses and \$1,001.81 in income since April 1, 2009.



Lynne Fox, education librarian at the University of Colorado Health Sciences Center, was elected on Nov. 3 to Thornton City Council. Congratulations, Lynne!

## And the Nominees Are ...

Elections for new CCML officers are coming, and there are two members on the ticket: Deb Weaver for president-elect and Sara Katsh for secretary. Need a little more information? Here it is:

### **Deb Weaver – President-Elect**

I have worked at the Children’s Hospital Clinical and Research Library (formerly Medical Library) since 2001. In that time, I have held the positions of access services librarian, clinical and instruction librarian, and, since 2007, library manager. I adore my job and am lucky to work with the best staff (library and hospital) in the world! My former life as a microbiologist and medical technologist has given me a real advantage when working with the clinicians here at the hospital. I have been a member of CCML since (I think) 1998, and I’ve been part of the Membership Committee, Internet Committee, Education Committee, Nominating Committee, and MC-MLA 2009 Planning Committee.

My personal life revolves around my wonderful husband and three completely spoiled dogs. I recently got a new puppy (Mona) and, as of October 15, she is sleeping all night long – Yea!

### **Sara Katsh – Secretary**

People say I started the AORN library in 1972, but that’s not exactly true. I took the place of a six-hour-a-week library student (dubbed the “phantom” librarian because she worked after hours and no one ever saw her). You couldn’t really call it a library at that time, either—it was a pile of books and journals in a hallway. I was part-time myself for a few months—straight out of library school—while I was looking for a “real” job. The AORN job soon became very real (and continues to become ever more so). Seriously, AORN is a wonderful association and

great workplace. It’s particularly interesting to be part of the publishing side of things. I am astoundingly lucky to have a dream team in the library, and I admire and enjoy my non-library coworkers, too.

I’ve been a CCML member since 1974. I served as secretary once before, and treasurer at some point. I’m currently the chair of the Library Cooperation Committee and have held that position a few times over the years. I’ve also been a member of that committee as well as the ILL Survey Task Force for every survey. I now serve on the Marla Graber Award Committee and have served on the Nominating Committee. Other committee chairman-/member-ships have included many now-defunct committees (Journal Locator, Isabelle T. Anderson, Strategic Planning, and, my favorite, name-wise, the Committee Exploring Interface Issues). I was in the dearly departed DAHSLC (Denver Area Health Sciences Library Consortium) and served as coordinator a few times. I very much enjoy my work with the MedConnect group (formerly known as SALS) and so appreciate the beneficence of the University Health Sciences Library, the mother ship. In the olden days, I was a trainer for DOCLINE (and its precursor, OCTANET). And I served two terms on what was then known as the Regional Advisory Committee of the Midcontinental Regional Medical Library Program, now NN/LM-MR. I lovingly refer to that time as my six years on the RAC. It didn’t make me any taller, but it stretched me intellectually, that’s for sure.

I feel lucky to be part of the medical library community, and, especially, the Colorado medical library community. I’m forever grateful to my colleagues and mentors in CCML. I’ll try to take good minutes. *cq*

## **Musings By Maxwell**

**Submitted by Dick Maxwell**

As enjoyable as it may be to immerse ourselves in medical, nursing, and management research hour after hour, not to mention enjoying the dialogue that's beginning to flow concerning the new version of PubMed, it's important to give other regions of the brain a workout occasionally. Various fields of science are marching on in their own, sometimes unusual, directions and it can't hurt to stay current on some of it. You never know what might turn up on tonight's "Jeopardy."

So here's a brief, annotated digest of recent news that is at least marginally understandable to normal humans.

Enjoy humming a tune as you work? Occasionally find yourself tormented by a tune that rattles around defiantly in your mind (I'm talking about you, theme to "Gilligan's Island") and seems only likely to go away if you're able to score a hit of electroconvulsive therapy? Researchers from Pompeu Fabra University in Barcelona would like to strip the magic from music in general for you. They've "developed a system to identify common patterns in versions of songs, which will help to quantify the similarity of musical pieces." It's based on mathematical equations and might also be useful to "analyse time series of data in other fields, such as economy, biology, or astronomy." Future Young People's Concerts will require everyone in the audience to have their calculators revved up.

Wonder what's going on outside the neighborhood? Data from NASA's Chandra X-ray Observatory has been combined with that from other telescopes to spot the most distant galaxy cluster yet discovered. It's said to be 10.2 billion light years away and picking up speed as it races away from us. Was it something we said? To clarify, and assuming we can all put aside for the moment the 6,000-year-old universe "theory," 10.2 billion light years is...well, to put it in understandable terms...actually, I have no idea, other than that it's both long ago and far away.

Good news for the multi-species household. According to an article in the Proceedings of the National Academy of Sciences, there's now evidence that infants as young as five months can correctly recognize that humans are the source of speech and monkeys are the source of monkey calls. For those of you to whom this might apply, you can now forego running into the nursery and saying "that wasn't me!" every time Zippy

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## Musings By Maxwell

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screeches over some perceived slight. That should free up some time.

As Jacques Cousteau probably told us a few thousand times, the creatures of the sea have much to teach us. Other than how to travel in schools of several hundred making lightning fast and sharp turns while breathing through gills, I wasn't really sure what he meant until now. Marine biologists at the Littoral Acoustic Demonstration Center have developed a tool that allows them to "spot the rhythms in the chatter of an ocean crowded with the calls of marine animals." They then looked specifically at how whales fit in to that conversation and found that they seem to "change the intervals between...echolocating clicks...to prevent cluttering the echoes." As Natalia Sidorovskaia puts it, "...whales are polite listeners; they do not interrupt each other." This is probably why they refuse to talk to us.

For anyone who sometimes expresses a longing for "the good old days," here's a cautionary note. Oregon State researchers report in Cretaceous Research that they've found embedded in a chunk of amber "a new, real world 'monster.'" Admittedly it lived around 100 million years ago, wasn't very large, and fell from the evolution train anyway, but...brace yourself..."it had a small horn emerging from the top of its head, topped by three eyes that would have given it the ability to see predators coming." They call it the "unicorn fly," obviously trying to create terror where there once was a mystical and benign horse-like thing. I think it's the three eyes on top of the horn that did it for me. Thanks.

Would you like to have a little more speed in that computer that you pound away on most of the day? Good news comes to you from the Los Alamos National Laboratory. It seems that their (super)computer, Roadrunner, is pretty quick, and here we enter the realm of meaningless, science fiction-esque words and concepts that describe things which no one really understands. On Memorial Day, while thousands were plodding along in the Bolder Boulder 10K race, Roadrunner "exceeded a sustained speed of one petaflop/second, or 1 million billion calculations per second." As we all know, peta in computer talk means 1 followed by 15 zeroes, and flop/s means floating point operations per second. My spreadsheet just caught fire.

By the way, this hasn't made it to Best Buy yet, but check with your IT department to see when you'll be able to upgrade. CQ

## New Pharmaceutical Tools From NLM

Submitted by Dana Abbey

The National Library of Medicine (NLM) is developing two free online tools to assist in identifying and tracking prescriptions and over-the-counter medications.

### **Pillboxbeta**

Did you know that adults in the United States average 11.5 prescriptions per year and those over 60 average 15.6? Pillboxbeta provides an easy way to visually identify an unknown tablet or capsule medication based on imprint, shape, or color. The site, currently under development, is designed for consumers, emergency physicians, first responders, and Poison Control Centers. Pillboxbeta contains 5,693 records – 779 have images. In addition to pill images, the site provides links to medication content and labeling as found in the medication package inserts; MedlinePlus for easy-to-read summaries; PubMed for medical literature describing research; clinical trials; and literature on substances that might affect the health of nursing infants. The NLM is working with the Food and Drug Administration and drug manufacturers on a large-scale photography project, so look for more images in the near future. This site, as with all other NLM databases, does not accept advertising. <http://pillbox.nlm.nih.gov>

### **MyMedicationList**

Personal medication records can help to educate and empower consumers and improve patient safety and health quality. MyMedicationList is a prototype Web application being developed by the NLM that helps users manage and track their prescription and over-the-counter medication lists. The program has two options for display: text and pictogram. The pictograph

view is a great feature for those with low literacy – medications can be associated with images and instructions for use. The list can be printed, e-mailed, or brought to medical appointments. This Web tool is not connected with a health institute or organization, is advertisement-free, and is stored locally on the user end. Multiple lists can be created, allowing all family and household members to keep track of their individual medications. <http://mml.nlm.nih.gov>

For more information on prescription, over-the-counter medications, and supplements, visit MedlinePlus at [www.medlineplus.gov](http://www.medlineplus.gov)

For more information about the new tools, contact Dana Abbey at (303) 724-2110 or [dana.abbey@ucdenver.edu](mailto:dana.abbey@ucdenver.edu). *cg*

### TIPS FOR DISPOSING OF MEDICATIONS

When disposing of unused, unneeded, or expired medications:

- Remove from original containers.
- Mix prescription drugs with an undesirable substance, such as used coffee grounds or kitty litter, and put them in impermeable, nondescript containers, such as empty cans or sealable bags.
- Do not flush prescription drugs down the toilet unless the label or accompanying patient information specifically says to do so.
- Look for community pharmaceutical take-back programs that allow the public to take unused drugs to a central location for proper disposal.

## MCMLA in Breckenridge: Comments and Presentations



### T.R. Reid: An Excellent Presentation at an Excellent Meeting

On Oct. 2, MLA Past-President Mary Ryan posted a review on the MLA blog of conference keynote of speaker T.R. Reid's presentation. Following is an excerpt:

"...The program for the Midcontinental meeting was excellent, but one presentation really stands out in my mind. It is the presentation given by T.R. Reid, a former reporter for the Washington Post. During the past several years, Mr. Reid has traveled around the world to study different health care systems. ...

Mr. Reid said that the existing health care systems found throughout the world fall into one of four general categories:

- Beverage model – public payer/public provider. Providing health care is the government's job, and the government pays for the health care through taxes and provides health care. The government owns the hospitals, labs, etc., and pays for health professionals' salaries and for drugs. ...
- Bismarck model – private payer/private provider. ...In this system, everyone must carry health insurance through their employers and split the cost with them. Insurance companies, hospitals, and doctors are private, but insurance companies are non-profit. ...
- National health insurance model – public payer/private provider. In this model, health professionals, hospitals, and labs are private, but the payment is public (based on monthly taxes). The number of specialists is limited, and elective procedures are put on a waiting list. ...
- No health-care-system model – This is also known as the out-of-pocket model, which basically means that those with money can purchase health care, and those without money get no health care unless they barter for it. ...

Mr. Reid says that the U.S. has all four models. ... [There are] three major reasons Mr. Reid gives for having one system:

1. Cost - In the U.S., administrative costs make up 20% of the total cost of health care, while France is at 4%, the U.K. at 5%, Japan at 5.5%, and Canada at 6%. Lowering our administrative costs would save billions of dollars.
2. Preventive care - Having everyone in the same system would provide a much stronger incentive for preventive care, which cuts costs, reduces illnesses, and saves lives. We don't have incentives for prevention in our current system, and insurance companies try to shift the costs to each other or the public. ...
3. Fairness - It's fairer to have one system which covers everyone. These are subjective and moral judgments, but the design of a health care system is a moral issue. ...

Mr. Reid said that the question facing the U.S. is a moral one: Are we going to provide a

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## MCMLA in Breckenridge: Comments and Presentations

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fair system that includes health care for everyone? He said that until we get a consensus on this question, we'll have a difficult time improving our health care system."

To read the full post, see <http://connections.mlanet.org/2009/10/02/midcontinental-chapter-meeting-speaker-on-health-care-reform/>

### **Mary Ellen Bates: "Negotiation Is Not a Four-Letter Word"**

Mary Ellen Bates, the president and founder of the information research company Bates Information Services, presented "Painless (no, really!) Negotiating," which focused on ways librarians (and everyone else) can approach negotiation without dread. Her suggestions include:

- Assume any situation is negotiable.
- Remember that negotiation is not personal; it's a matter of business that need not be confrontational.
- Present requests as wants rather than needs or rights.
- Identify your best outcome and your boss' best outcome.
- Be flexible; consider concessions that will make the outcome beneficial to all parties.
- Think best-case, not worst-case.

For more suggestions and to view the PowerPoint slides that accompanied the presentation, see [http://www.batesinfo.com/mla2009/painless\\_negotiation.pdf](http://www.batesinfo.com/mla2009/painless_negotiation.pdf)

### **Michael Kahn: Changing Librarian's Role, Improving Clinical Care**

In "Action-Oriented Medical Librarianship: Integration with Clinical and Operational Excellence," pediatrician and clinical informatics specialist Michael Kahn described and explained:

- The theorem of clinical informatics
- Computer-based clinical-decision support
- Barriers to using knowledge management to meet objectives
- The changing role of medical librarians: knowledge steward vs. action-oriented medical librarian

Dr. Kahn highlighted ways the role of librarians has changed from static owners and providers of information to active participants in translating information into functional, usable knowledge.

To view the presentation's PowerPoint slides, see <http://www.mcmla.org/meetings/2009/MCMLA-Kahn2009-09-23-FINAL.pdf>

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## Calendar

### January 2010

14 - Executive Committee meeting

18 - Council Quotes deadline

### February 2010

17 - General Membership meeting

## January Health Observances

Cervical Health Awareness Month

Glaucoma Awareness Month

National Birth Defects Prevention Month

National Blood Donor Month

Thyroid Awareness Month

National Folic Acid Awareness Week, Jan. 5-11

## November Health Observances

American Diabetes Month

National Alzheimer's Disease Awareness Month

National Healthy Skin Month

Pancreatic Cancer Awareness Month

Prematurity Awareness Month

Great American Smokeout, Nov. 20

## December Health Observances

World AIDS Day, Dec. 1

National Aplastic Anemia and MDS Awareness  
Week, Dec. 1-7

National Handwashing Awareness Week, Dec. 7-13

**Colorado Council of Medical Librarians**  
**Officers and Committee Chairs**  
**2008/2009**  
**Elected Officers**

President	Shandra Protzko
President-Elect	Stephanie Wiegand
Secretary	Jerry Carlson
Treasurer	Lynda Lillwitz
Past-President	Lilian Hoffecker

**Appointed Officers**

Newsletter Editor	Melissa Kovac
Associate Editor	Kate Elder
Membership Database Coordinator	Paul Blomquist
Parliamentarian	Jerry Carlson
Discussion List Owner	Jeff Kuntzman

**Standing Committee Chairs**

Advocacy Contact	Ellen Graves
Education	Gene Gardner
Membership	Debra Taylor and Paul Blomquist
Internet	Debra Miller
Nominating	Lilian Hoffecker
Marla Graber Award	Lisa Traditi

**Ad Hoc Appointments/Chairs**

Colleague Connection	
Representative	Frank Ames
MCMLA 2009	
Planning	Lynne Fox
Library Cooperation	Sara Katsh

**SIG Conveners**

Consumer Health	Dana Abbey
EBM	Suspended
Medical Paralibrarians	Marie St. Pierre

**Publication Statement**

Council Quotes is a publication of the Colorado Council of Medical Librarians (CCML). CCML / P.O. Box 101058 / Denver, CO 80210-1058. Subscription is a benefit of membership. Editor, Melissa Kovac; Associate Editor, Kate Elder; Contributors, CCML members. Web version is available at: <http://www.ccmlnet.org/>