



*August 2006 ♦ Volume 29 Number 3*

**SEPTEMBER 2006 CCML MEETING: AORN PARTNERS WITH ELSEVIER**

SUBMITTED BY GENE GARDNER

AORN, Association of periOperative Registered Nurses, has recently entered into a partnership with Elsevier, Inc. to publish the AORN Journal, which had previously been published by the Association itself. Several presenters from AORN will discuss the evolution of this partnership, including challenges and benefits, and the history of the AORN Journal. They will also talk about associations as publishers in general and the relationship between an association's library and its publishing arm.

Presenters include Kathryn Alexander, Consultant in Medical Publishing; Deb Reno, Manager of the AORN Editorial Department; Ellen Murphy, AORN Interim Executive Directory and Sara Katsh, AORN Head Librarian.

Come and learn how the publishing world, the association world, the database world and the library world intersect.

Sara Katsh will lead the education pre-meeting program on tools for streamlining Docline use. *cc*

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**THE NN/LM WELCOMES STATE LIBRARIAN TO BOARD**

SUBMITTED BY DANA ABBEY

The National Network of Libraries of Medicine (NN/LM)-MidContinental Region welcomes Colorado State Librarian Gene Hainer to its regional advisory board. The NN/LM shares many common goals with the region's state libraries, and Gene's gracious acceptance will help to facilitate reaching these goals. He will be working in the Consumer Health project area, along with Karen Cole, Director of the Archie R. Dykes Library of Health Sciences in Kansas City, Missouri, and Dana Abbey, Consumer Health Coordinator for the NN/LM at the University Of Colorado Health Sciences Center, Denver, Colorado. Visit <http://nnlm.gov/mcr/> for more information on the MCR. *cc*

**CCML OFFICER NOMINATIONS WANTED!**  
SUBMITTED BY LYNNE FOX

Have a secret ambition to rule the world? Know someone who does?

Start small by serving as a CCML officer! President, Secretary, and Treasurer positions are open for the 2007-2008 year.

Please contact Lynne Fox for information about the positions or to enter your name in the officer nomination process:

Lynne M. Fox, AMLS, MA, AHIP, Education Librarian  
Denison Memorial Library, UCDHSC  
4200 East Ninth Avenue, Box A003, Denver, Colorado 80262  
303-315-4299, [Lynne.Fox@uchsc.edu](mailto:Lynne.Fox@uchsc.edu)  
Thanks! Lynne *ca*

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**SAVE THE DATE: CCHILL MEETING SEPTEMBER 21, 2006**  
SUBMITTED BY DANA ABBEY

Save the date for the next meeting of the Colorado Consumer Health Information Librarians (CCHILL). The CCHILL group provides networking, education opportunities and a forum for discussing consumer health information. At this event you will meet public and medical librarians in the area; learn about the newest updates and enhancements to the National Library of Medicine's Consumer Health databases; and have an opportunity to tell others what you are doing in the arena of consumer health information.

**Colorado Consumer Health Information Librarians (CCHILL)**

**Thursday, September 21, 2006**

**9:00-11:00AM**

**Guest Speaker: Dan Lawrence, Director of the Prevention Information Center**

**Rocky Mountain Center for Health Promotion and Education**

**Prevention Information Center**

**7525 West 10th Avenue**

**Lakewood, Colorado 80214**

**303-239-8633**

The Prevention Information Center (PIC) is a library and information center providing access to a broad spectrum of substance abuse prevention and health promotion topics.

To learn more about the PIC, visit <http://preventioncolorado.org/>. *ca*



## EXEMPLA ETHICS SYMPOSIUM SUBMITTED BY KAREN WELLS

On June 15<sup>th</sup>, Exempla hosted its annual ethics symposium. The theme was “Quality of Life.” We had two speakers, Dr. Edmund Pellegrino, chairman of the President’s Council on Bioethics, at 86 years young, and Dr. Thomas Murray, President of the Hastings Center. Dr. Pellegrino concentrated on the “top down” approach to ethics, which teaches theory, systematic rules, and principles for solving ethical issues. This was balanced by Dr. Murray’s concentration of the “bottom up” or inductive method of performing bioethics that uses the tools but goes beyond rational deductions.

As many of us in our capacities as Librarians also serve as Ethics Committee members, here is my perspective of the symposium, which I hope is helpful to our readers.

Murray’s focus was on *family* dynamics—preferences and values, social support, historical concepts, existing facts, affective attitudes, perceptions, and intuitions, and traditions that have been passed down from generation to generation. Families are marked by close relationships that touch each member’s deepest, most vulnerable, nature. They rely on and require the aid of each other for support and they are determined, influenced, and balanced by each other. Healthy families have attributes such as love, dedication and devotion, affection, tenderness, and kindness, mercy, forgiveness, trustworthiness, and caring—exhibitions of concern for each other. Such families also understand family ongoing dynamics and seek to cultivate healthy family maturation, through exhibiting endurance and stamina to achieve and maintain harmony in these relationships. The greatest example of this special relationship is illustrated in the parent-child relationship. Parents take great pleasure and satisfaction in giving a child what is needed, despite great anguish or personal expense. They will go to endless lengths to take their children to successful maturation.

These intricate and variegated nuances of the interpersonal relationships of families cannot be given full appreciation when we focus chiefly on laws and rules that govern affairs and are enforced by faceless political authorities. Nor can appreciation be obtained by primarily focusing on the rights of *individuals*. These are great tools for dealing with strangers, but are minimally useful with the intimate relations that exist within healthy families. (In unhealthy families, focusing on the rights on individuals becomes tantamount since nurturing characteristics are often lacking.) Similarly, some institutional hospital policies (such as on Futile Care, for example) that are too strict and rigid, may work to narrowly confine healthcare provider’s decisions and actions. Dr. Pellegrino described some bioethics hospital policies as procedurally and organizationally logical, but bioethics without content. He terms it, “Bioethics without souls.” Nor was Murray in favor of them.

The Terry Schiavo case was also discussed. What made the case significant was not the

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limitation or termination of treatment. In fact, Murray noted that 70 percent of deaths in the hospital involve a physician decision to limit or terminate treatment. What made the Schiavo case significant was the media.

The Schiavo case was, in effect, a scenario illustrative of most Ethics Committee cases. Because only 20% of patients provide living wills, it is the family that will have to make decisions for their loved ones.

The Schiavo case was marked by stress and dissatisfaction--conflict and anger between clinicians and clinicians; and clinicians and family members; family members and family members; and the legal system. It was a case replete with family fear and distrust, clinician and nurse frustration, conflicting communications and incompatible appreciations of the patient's condition and prognosis, and a conflict between the application of substituted judgment (what the patient wants,) and best-interest decision making (what a family member wants.)

Strong family emotions must be responded to, acknowledged, and even allowed. And it is in the best interest of the clinician to address emotions early, and not engage in contact and conflict avoidance, but to acknowledge and deal with the family's interest in expressing their strong emotions, in a safe way, and as an *appropriate and expected* thing for any family to do. Further, families should be guided to address the definitions of what constitutes "life," before they can define what "quality of life" is. Then they can discuss "end of life."

Often, however, doctors and nurses are not educated in having end of life discussions and would rather avoid them. But our responsibilities to our patients and families dictate that we develop good communication between clinicians, patients, and family members. The Exempla Lutheran Ethics Committee and the Continuing Medical Education Committee have partnered here to provide quarterly educational noon conferences on ethics. Our next presentation is on "Difficult Conversations." Perhaps you can recommend the same occur at your institution.

Dr. Edmund Pellegrino said every human has an *inherent dignity* of self and soul and that this inherent dignity cannot be lost and that: "*real* medicine begins when technology ends."

I suspect that is one of the reasons why we also strongly advocate for patients through providing lay materials for them and their families. Indeed, our hospitals would do well to regard them not as consumers, clients, end users, or customers. We should regard them as individuals, worthy of great honor, and part of a strong interdependent and living entity, called a *family*, which has inherent dignity as well... Somehow quality takes on a whole new meaning within the concept of family.

I hope you will join us at our annual Ethics Symposium next year. *ca*



**PARALIBRARIANS SPECIAL INTEREST GROUP**  
SUBMITTED BY JIM HONOUR

The Medical Paralibrarians met on Friday, July 7, 2006 and eight people were in attendance, including our guest speaker. Our guest speaker, Deb Weaver, Clinical and Instructional Librarian at The Children's Hospital, shared a fantastic presentation entitled, "Evidence-Based Medicine."

During the presentation, attendees learned that the broader term of Evidence-Based Practice should be used, instead of Evidence-Based Medicine. Attendees also learned about the Cochrane Database of Systematic Reviews. Deb explained the PICO format and shared an example using PICO. Lastly, Deb encouraged us to be involved with our healthcare, as the medical profession cannot "possibly know and

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remember everything." Deb gave us a funny article from BMJ, v.319 (7225): pg. 1618 from 1999, entitled, "Seven Alternatives to Evidence Based Medicine" by David Isaacs and Dominic Fitzgerald. The article is freely available at: <http://bmj.bmjournals.com/cgi/reprint/319/7225/1618>. Deb's PowerPoint is posted on the Paralibrarians SIG page under Past Meeting Briefs for July 7, 2006 on CCML's website.

Jim Honour will be hosting the next meeting at Exempla Saint Joseph Hospital in October. More details will be coming.

Respectfully submitted by,  
Lynda Lillwitz. *ca*



**EDUCATION COMMITTEE PROPOSES CHANGES IN DISTRIBUTION  
OF PROFESSIONAL DEVELOPMENT FUNDS**  
SUBMITTED BY DEB WEAVER

Currently, the CCML Professional Development Funds must be used for "courses, meetings, and programs held in Region 4 of the National Network/Libraries of Medicine. National programs are not covered."

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The CCML Education Committee would like to propose that the guidelines for the awarding of the Professional Development Funds be broadened to include national events. This change will be discussed at the September membership meeting. *ca*

***"Outside of a dog, a book is a man's best friend:  
and inside a dog, it's too dark to read."***

***- Groucho Marx***



**MUSINGS BY MAXWELL**  
SUBMITTED BY DICK MAXWELL

A formerly renowned futurist, defrocked and disgruntled after failing to forecast the Boston Red Sox winning the World Series and guaranteeing a “hurricane free 2005” is hoping to return to his glory days by looking at where health care will be in twenty years. The time frame, he hopes, will allow him some cover in the event that things go in a different direction, while landing him on some talk shows and selling a few books in the short run.

He has been offered a forum here, and what follows are a few choice selections from his soon-to-be-published-if-any-publisher-at-all-can-be-found book, tentatively titled Whither Medicine?: Where Medicine is Going?: Its Direction. He dropped them off on the way to buy a quick-pick lotto ticket.

*The U.S. health care system:*

In 2026, the long-term goal of privatizing everything in this country will have been realized, including, as a shining star, the health care system. There will be two companies, after a great deal of consolidation, competing for your business: Halliburton/HCA, and the smaller Blue Cross-Blue Shield United Aetna Hartford Disney Health and Entertainment Corp. Cash will no longer exist, of course, but that chip in your forearm will have to register adequate assets when it is scanned by the financial greeter in your virtual doctor’s office or the robo-paramedic who finds you next to your automated hover vehicle after the crash. Lack of funds...no treatment. Should you expire as a consequence, one of the few remaining government services, the Soyilent Green Sanitization Service, will respond, eventually. Compassion will not be dead, however, and the chip will notify your next-of-kin’s chip.

*Doctors:*

As some in the profession...sadly lacking vision...fear, physicians will be phased out as active participants in the system. The scanning industry’s accelerated pace of innovation will continue, leading to the domination in the marketplace of the I-See-U from Halliburton Scan Industries LLC. The I-See-U will perform a complete body scan in ten seconds, fully evaluating your health and sending recommendations to your chip, which in turn will make the necessary appointments, request prescriptions, or make final arrangements, as appropriate based on the findings and on your financial status. The human touch will not go away, as the country’s two remaining Registered Nurses will be available to offer comforting words from a selected list at \$380 per syllable.

*Drugs:*

There will be one pill, The Pill, offered by Halliburton Pharmaceuticals. It will be available only by prescription granted you by the I-See-U, and will be prohibitively expensive, allowing natural selection to work its magic. Thanks to more reasonable patent laws, the generic version will be expected sometime after the turn of the next Millennium. For those who are privileged to

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be able to afford it, The Pill will take care of any potential health problems, clearing the arteries, preventing obesity, making a laughing stock of diabetes and stopping cancer in its tracks. To be effective, it will require the user to avoid exercise and eat in excess of 3000 trans-fat laden calories a day. Its effects will be positively enhanced by smoking, showing Woody Allen in his film “Sleeper” to have been a prophet. The cigarette of choice...in fact the only cigarette available...will be the tar and nicotine-enhanced, unfiltered Hally Gold Long, from Halliburton-R. J. Reynolds.

### *Technology:*

While the I-See-U will function as the ultimate diagnostician, there will still be a need for some occasional “hands”-on care. The current generation of robotic devices, such as the DaVinci Surgical System, will be looked back on with fondness and nostalgia by the artificially intelligent, freestanding and self-programming devices of 2026. The I-See-U sends a referral, of sorts, to the “doctor,” which handles all of the scheduling—both its own and yours—rearranging your work schedule at one of the Wal Marts. This presents little challenge, since the I-See-U scanners and the robots are located exclusively in those same stores. The Wal Marts will be so ubiquitous that it will no longer be possible to see one disappear from the rear-view video in your hovercraft without seeing another appear in the forward view. You will work in one, and the one-size-fits-all blue vests will be both wrinkle-free and monogrammed. Should you be one of the majority unable to afford The Pill, the robot will offer reasonably priced surgery, manipulation, or disposal, as appropriate, along with soothing words and a new music which will be capable of lowering your anxiety level and IQ permanently. All “surgery” will be minimally invasive unless the device decides that it should not be. You won’t need to worry about which way it goes, thanks to the music and/or The Pill, which, at the correct dosage, will be a very, very effective anesthetic, which brings us to...

### *Mental Health:*

You will be very relaxed and extremely happy all of the time. The Pill will not be necessary for this. Talk therapy and psychoactive drugs will be distant memories, thanks primarily to the music and video entertainment chip located in your frontal lobe. That chip will also serve to edit and sort your memories, making them quite pleasant, and will provide a targeted, controlled jolt of electricity if wayward thoughts crop up or non-acceptable behavior is contemplated. The I-See-U will have remote access to it, so don’t worry about preventive maintenance.

### *Information:*

You won’t give it a second thought (see above). The frontal lobe chip will offer you the information it determines that you need, if any. The I-See-U will have a subscription to the single remaining medical journal, the electronic “New Google Journal of Medicine,” peer reviewed by the I-See-U and published by Time-Warner-Halliburton-Elsevier. *ca*



# MEMBERSHIP NEWS

## ♪ GETTING TO KNOW YOU ♪

### **Cindy Slater**

Cindy Slater is the U.S. Olympics Committee Library and Archives Manager. She has worked there since 1987. She is not sure when she joined CCML as an individual member, but recalls attending as an institutional member during her previous library employment, in the mid 1980's.

Previous to 1987, Cindy was one of two librarians at Memorial Hospital in Colorado Springs. She worked almost three years at Memorial Hospital, where she left to take a position at the Olympic Library. At the Olympic library there were two librarians when she started; however, the library was downsized in 2005, so she is now the only staff member. She recalls with great fondness how wonderful other CCML members were when she shared that her library was reduced to just her.

Cindy's job requires her to do quite a bit of reference research, and she also maintains a physical library. Her favorite part of her job is the reference research. "It is something I could do all day long!"

*Continued next column..*

What she admits to liking least is the juggling the library needs with an under-funded budget. She admits she is fortunate to not have to turn in budget costs, or maintain tracking of her hours.

For hobbies, Cindy is a true librarian and says she reads a lot. Her favorite books include fiction, current memoirs, and popular science books. She also plays tennis, golf, and goes hiking in the foothills. Since Cindy is single with no kids, nor immediate family near by, she has lots of time for her favorite activities.

Cindy gets to travel some for work. She has traveled for the International Association for Sport Information (IASI) to their meetings, and she is on their executive committee. When she was asked where she thought she might be in 10 years, she said "I can't answer that, but I admit I am looking for some kind of change." She just isn't certain what kind of change she is looking for. She is sure to be a success in whatever she does!

## CALENDAR

### 2006

Sept.	8	Meeting
Oct.	5	Exec Committee Meeting
	16	Council Quotes Deadline
	23	Mailing Deadline
	25	Mailing
Nov.	15	Meeting

### 2007

Jan.	11	Exec Committee Meeting
	15	Council Quotes Deadline
	22	Mailing Deadline
	23	Mailing
	30	Renewal Notices Mailing
Feb.	21	Meeting
Mar.	8	Exec Committee Meeting
	12	Council Quotes Deadline
	19	Mailing Deadline
	20	Mailing
	30	Renewal Notices Return Deadline
Apr.	18	Annual Meeting

### PUBLICATION STATEMENT

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### Sept/Oct Health Observances

September:  
National Food Safety Education Month  
Healthy Aging Month

October:  
National Dental Hygiene Month  
Lupus Awareness Month

## COLORADO COUNCIL OF MEDICAL LIBRARIANS OFFICERS AND COMMITTEE CHAIRS 2005 /2006

### ***Elected Officers***

President	Amanda Enyeart
President-Elect	Gene Gardner
Secretary	Elaine Connell
Treasurer	Sharon Martin
Past-President	Joyce Condon

### ***Appointed Officers***

Newsletter Editor	Deb Weaver
& Assoc. Editor	Kate Elder
Mailing Coordinator	Bettye Snipe
Membership Database	
Coordinator.....	Stephanie Weldon
Parliamentarian	Jerry Carlson
Discussion List Owner	Jeff Kuntzman

### ***Standing Committee Chairs***

Advocacy	Stephanie Weldon
Education	Deb Weaver
Journal Locator	Gene Gardner
Membership	Daphne Hyatt
Internet	Shandra Protzko
Nominating	Lynne Fox
Marla Graber Award	Linda Van Wert

### ***Ad Hoc Appointments/Chairs***

Colleague Connection	
Representative.....	Unfilled
CAL Marketing Committee	
Representative.....	Ellen Graves
Colorado Library Political	
Action Committee.....	Suspended
Library Cooperation.....	Sara Katsh
SIG Conveners:	
Consumer Health.....	Dana Abbey
EBM.....	Suspended
Medical Paralibrarians....	James Honour