## **COLUMN / CHRONIQUE**

## **Current research**

## Compiled by G. Griffith

Allison MM. Comparison of CINAHL® via EBSCOhost®, Ovid®, and ProQuest®. *Journal of Electronic Resources in Medical Libraries*. 2006;3(1):31–50.

CINAHL® database characteristics were examined in three vendor products. A number of unanticipated variations concerning category terms, field tags and their definitions, and search results are noted and discussed. Interface highlights are also explored. Knowing the characteristics of the vendor interface being used allows the searcher to accommodate unique variations when helpful or necessary. Usefulness of interface characteristics and features, display settings, and content are framed by the user's experiences, needs, and preferences. This investigation will be of assistance to those who wish to compare characteristics of three major CINAHL versions and will be of interest and value to any CINAHL user.

Coumou, HC, Meijman, FJ. How do primary care physicians seek answers to clinical questions? A literature review. *J Med Libr Assoc*. 2006;94(1):55–60. UI: 16404470.

Objectives: The authors investigated the extent to which changes occurred between 1992 and 2005 in the ways that primary care physicians seek answers to clinical problems. What search strategies are used? How much time is spent on them? How do primary care physicians evaluate various search activities and information sources? Can a clinical librarian be useful to a primary care physician? Methods: Twenty-one original research papers and three literature reviews were examined. No systematic reviews were identified. Results: Primary care physicians seek answers to only a limited number of questions about which they first consult colleagues and paper sources. This practice has basically not changed over the years despite the enormous increase in and better accessibility to electronic information sources. One of the major obstacles is the time it takes to search for information. Other difficulties primary care physicians experience are related to formulating an appropriate search question, finding an optimal search strategy, and interpreting the evidence found. Some studies have been done on the supporting role of a clinical librarian in general practice. However, the effects on professional behavior of the primary care physician and on patient outcome have not been studied. A small group of primary care physicians prefer this support to developing their own search skills. Discussion: Primary care physicians have several options for finding quick answers: building a question-and-answer database, consulting filtered

information sources, or using an intermediary such as a clinical librarian.

Dunn K, Crow SJ, Van Moorsel TG, Creazzo J, Tomasulo P, Markinson A. "Mini-Medical School for Librarians": from needs assessment to educational outcomes. *J Med Libr Assoc.* 2006;94(2):166–73. UI: 16636709.

Purpose: This study evaluates the outcomes of the "Mini-Medical School for Librarians" or "Medical School Experience", a continuing education symposium designed to improve librarians' understanding of medicine and medical education. Subjects: The subjects are the symposium participants, a group that consisted of 58 medical librarians and other information professionals. Methodology: Pre- and post-symposium self-evaluation surveys gauged participants' self-assessed confidence with the course content. A follow-up survey was administered 6 months after the symposium. A learning action plan recorded both the intended and actual applications of course content to professional settings. Results: The t-test analysis of paired pre- and post-symposium responses reveal a significant positive change in the mean selfassessed confidence with course content immediately following the symposium. Pairings of post-symposium and follow-up survey responses indicate a slight reversal in attendees' confidence in the months following the symposium, but pairings of pre-symposium and follow-up survey results demonstrate that the longitudinal impact of the program on self-assessed confidence with course content was positive and significant. Analysis of the learning action plan revealed a disparity in how participants planned to use the information they learned in the course and how they actually used it. Conclusions: Continuing education programs that address the content and structure of medicine can be an effective means by which to inform both the novice's and midcareer medical librarian's understanding of medicine and medical education.

Kille A. Wikis in the workplace: How wikis can help manage knowledge in library reference services. *LIBRES* (*Library and Information Science Research Electronic Journal*). 2006;16(1). Available at http://libres.curtin.edu.au/libres16n1/Kille\_essayopinion.htm.

This article explores how wikis can be used in library reference services to manage knowledge and why they should be used in this environment. The article begins with a description of wikis, then covers knowledge management and

the systems that support knowledge management, specifically collaborative and conversational technologies. Next, the author discusses how wikis can be used as a knowledge management system and explores the organizational applications. Finally, a discussion follows on how wikis can be used to support knowledge management in library reference services with some examples of wikis as both private and public knowledge repositories and as collaborative workspaces.

Morrison H. Evidence based librarianship and open access. *Evidence Based Library and Information Practice*. 2006;1(2):46–50. Available at http://ejournals.library.ualberta.ca/index.php/EBLIP.

Evidence based practice, whether in librarianship or any other profession, depends on access to the evidence and access to opportunities to share one's own evidence. Open access (OA) is the perfect complement to evidence based librarianship. OA provides the optimum access to the evidence for librarians everywhere and the optimum means of dissemination. This article compares examines access to the library and information science (LIS) literature in the print and electronic media, and the impact of open access.

Medeiros N. House of horrors: exorcising electronic resources. In: Bluh, P, Hepfer, C, editors. *Managing electronic resources: contemporary problems and emerging issues*. Chicago: American Library Association; 2006. pp. 56–66. Full text available as PDF at http://eprints.rclis.org/archive/00006168/.

Providing access to, managing administrative elements of, and exercising authority over licensed electronic resources are challenges of increasing proportion for libraries of all types and sizes. This paper reviews the evolution of end-user access to e-resources. Management of administrative metadata is detailed. The paper concludes with a lament about the near-total lack of control libraries possess regarding their licensed electronic resources and the arsenal libraries will need to counteract this damaging situation.

Ripple AS. Expert Googling best practices and advanced strategies for using Google in health sciences libraries. *Med Ref Serv Q.* 2006;25(2):97–107.

Google is the search engine of choice for most Internet users. For a variety of reasons, librarians and other expert searchers do not always use Google to its full potential, even though it provides capabilities not possible in traditional bibliographic databases and other search engines. Applying expert searching principles and practices, such as the use of advanced search operators, information retrieval strategies, and search hedges to Google will allow health sciences librarians to find quality information on the Internet more efficiently and effectively.

Shedlock J, Walton LJ. Developing a virtual community for health sciences library book selection: Doody's Core Titles. *J Med Libr Assoc*. 2006;94(1):61–6. UI: 16404471.

**Purpose:** The purpose of this article is to describe Doody's Core Titles in the Health Sciences as a new selection guide and a virtual community based on an effective use of online systems and to describe its potential impact on library collection development. Setting/participants/resources: The setting is the availability of health sciences selection guides. Participants include Doody Enterprise staff, Doody's Library Board of Advisors, content specialists, and library selectors. Resources include the online system used to create Doody's Core Titles along with references to complementary databases. Brief description: Doody's Core Titles is described and discussed in relation to the literature of selection guides, especially in comparison to the Brandon/Hill selected lists that were published from 1965 to 2003. Doody's Core Titles seeks to fill the vacuum created when the Brandon/Hill lists ceased publication. Doody's Core Titles is a unique selection guide based on its method of creating an online community of experts to identify and score a core list of titles in 119 health sciences specialties and disciplines. Results/outcome: The result is a new selection guide, now available annually, that will aid health sciences librarians in identifying core titles for local collections. Evaluation method: Doody's Core Titles organizes the evaluation of core titles that are identified and recommended by content specialists associated with Doody's Book Review Service and library selectors. A scoring mechanism is used to create the selection of core titles, similar to the star rating system employed in other Doody Enterprise products and services.