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"Not in Cordasco": An Essay Review

by Margaret Kaiser & Philip M. Teigen



The phrase "Not in Cordasco"has begun to appear in antiquarian catalogs indicating that an item for sale does not appear in Francesco Cordasco's American Medical Imprints, 1820-1910: A Checklist of Publications Illustrating the History and Progress of Medical Science, Medical Education, and the Healing Arts in the United States: A Preliminary Contribution (Totowa, N.J.: Rowman and Littlefield, 1985). Without doubt this phrase will be seen with increasing frequency; perhaps it will even become as familiar as "Not in Osler," "Not in Durling," and "Not in Wellcome."

It is easy enough to say that when "Not in Cordasco" appears in a dealer's catalog, it means that the item is not recorded in American Medical Imprints (AMI) or that the dealer could not find its entry there. But what is the significance of the fact that a 19th- or early 20th-century book is not recorded in Cordasco? And what is the significance of the fact that one is recorded there? To answer these questions we will review in detail the conception, execution, and utility of this large work by examining its scope, coverage, structure, and potential audience. {1}

I. Scope

AMI covers the years 1820 through 1910, 91 years in all. It begins with 1820 because that was the last year of imprints recorded in Robert B. Austin's Early American Medical Imprints: A Guide to works Printed in the United States, 1668-1820 (1961). Oddly, AMI does not start exactly where Austin stopped but duplicates Austin's efforts by recording imprints from the year 1820. Odder still, it records 12 fewer imprints for 1820 than did Austin and adds only one imprint not in Austin, a botanical work (20-559) that may have been out of Austin's scope. Surely, if one is to overlap a predecessor it should be to supplement and/or amend that work, not to republish a less thorough version of it.

The end point for AMI is 1910:

By 1910, a world on the threshold of war was entering the last phase that tied it inextricably to the 19th century which had given it definition and form: in a few years this world was to vanish. In the first decade of the 20th century, American medicine achieved a maturity singularly its own: the German influence was in decline (a decline accelerated during the years of the 1914-1918 War), and if American medicine was still largely pragmatic, it had developed theoretic and research orientations which heralded the new maturity (I:28).

One does not have to agree with the historical interpretation given here because there is no agreement among historians when the 19th century ended. The dates 1910, 1913, 1917, 1919, or even 1899 are equally defensible.

In geography the checklist is limited to United States imprints. This is a valid and inevitable limitation given the amount of material to be covered. Readers should remember, of course, the complex interactions between publishers in Great Britain, United States, and Canada, where sometimes sheets printed in one country were shipped to another and then reissued by a new publisher. However, the unraveling of this and other difficulties awaits the compilation of medical imprint checklists for Great Britain and Canada.

In subject the scope is stated thus:

I have chosen to define the coverage of American Medical Imprints, 1820-1910 very broadly. Within the comprehensively framed subtitle (A Checklist of Publications Illustrating the History and Progress of Medical Science, Medical Education, and the Healing Arts in the United States), I have acted very freely to include any item which could legitimately be related to the medical arts and their progress in the United States.

As in Austin's Early American Medical Imprints, 1668-1820, I have interpreted medicine "in its wider sense to include nursing, pharmacy, dentistry, child care, hygiene, first aid, education and psychology." A few titles on veterinary medicine have been included, but this genre deserves a separate bibliography.... Annual reports (with very few exceptions) have been excluded (I:32).

This definition of scope is not clear. For example, does medicine in its wider sense include phrenology, water-cure, homeopathy? These and other subjects generated enormous numbers of books, pamphlets, and printed ephemera which were widely distributed in the 19th century, but which now have come to be seen as uncongenial to scientific medicine -- although all the more interesting to historians for that. The sub-title to the checklist includes the word "progress" leading one to think that such materials might be excluded -even the most interested historians would hardly consider them part of the "progress" of medicine -- but whether Cordasco feels that way and whether such materials are included one can only guess; we need explicit guidance on this point. Likewise, one cannot dispute Cordasco's claim that veterinary medicine deserves a separate "bibliography" nor his decision to place it outside the scope of this checklist. But it is frustrating not knowing on what grounds veterinary imprints are included or excluded. The same goes for annual reports which, with few exceptions, have been excluded. But exactly which are included and which not? Reports from hospitals and/or medical societies? Reports including research but not those reporting institutional data? There is no explicit statement at all on inclusion of languages other than English. During the 19th century medical books were published in the United States in

German and French, and no doubt in the languages of other large immigrant populations. Are they to be covered by AMI? About all four areas -- fringe medicine, veterinary medicine, annual reports and languages other than English -- we are left in uncertainty.

The scope of the checklist insofar as it records editions, issues, and impressions is un-clear, and what is clearly stated is of questionable utility. The compiler writes, "it is important to note that I have recorded a particular work and its subsequent different editions, but I have excluded separate notices of reprintings (without change) of any of the editions" (I:32). In Philip Gaskell's A New Introduction to Bibliography (1972, repr. with corrections 1974), an edition is defined as "all the copies of a book printed at any time (or times) from substantially the same setting of type, and includes all the various impressions, issues, and states which may have de-rived from that setting" (p.313). For the compil-er to speak of different editions is confusing because editions by definition are different. perhaps indicates that he is using the word edition loosely, in a way similar to 19th-century publishers who used it to refer to issues, impressions, and editions, for any form of publication to which they wished to lend an aura of novelty. Does AMI include editions, impressions, issues in the narrow sense current in bibliographic scholarship today? In a work such as this, which addresses a large and complicated production of books, there is a need for explicit guidance on this crucial matter and a better understanding of the material to be listed, the conceptual tools available for analysis, and greater use of previous bibliographical scholarship on 19thcentury printing and publishing.

The most surprising and no doubt the most controversial aspect of AMI's scope is the inclusion of reprints from medical journals. As the introduction states:

Within the broad patterns of inclusion, one criterion has been inflexibly applied: to be included a printed item must have had an independent, separate pagination. This criterion has allowed the inclusion of the vast off-print literature which is an important and integral part of 19th-century medical publishing; technically, an off-print is a separate printing of the work (article) out of the periodical in which it appeared, with title page, usually in small print runs for the author's personal distribution. Unlike the extract out of the periodical literature, the off-print is almost invariably independently paginated, and thus, a bibliographical entity in its own right (I:32-33).

Listing reprints poses problems for everyone. First is the matter of quantity. Including reprints as separate ("different") editions opens a bibliographical black hole since all medical articles published in the 19th century probably generated reprints. Although there are no exact figures for the number of articles published during the 91 years AMI covers, we do know that the exponential growth of the scientific and medical periodical literature began in the second half of the 19th century. More specifically, John Shaw Billings counted 4,781 journal articles published in 1879 and 4,904 in 1880. [2] Allowing for modest continued growth -- much less arithmetical or geometrical growth -- an estimated

5,000 articles per year in the first decade of this century would mean that there were 50,000 reprints from this decade alone to record. This figure dwarfs the 30,000 entries that have been made. Of course eliminating the reprints without separate pagination would reduce the number. But the repagination of reprints is not the critical factor in determining their bibliographical significance. Rather it is whether or not the type has been reset and in what proportion. If it h been reset then the reprint is a new edition of If it has the work and, following AMI's own rules, could be included. If it has not been reset, then the reprint is a new issue of the article, whether or not it has new pagination and wrappers. stereotyping widespread in the 19th century, the safest assumption to make is that reprints are reissues, not new editions -- until one can examine article and reprint side by side to determine their exact relationship. The consequences of this confusion over edition and issue, are large. First, AMI is filled with material outside its stated scope -- bibliographic noise as it were. Secondly, it raises expectations that it has covered reprints when in fact it has hardly begun to do so. Bibliographers have traditionally separated journalism and the study of imprints, not because the lines are easy to draw or because the two are unrelated. Rather, both fields are so large that practicality has dictated the distinction, except for research of the narrowest scope. AMI is a strong if negative demonstration of the wisdom of this division of labor.

There is a further problem with the reprints. There are two senses to the word "imprint": printer's imprint and publisher's imprint. By the 19th century printers and publishers were generally distinct. Consequently it is important for users of AMI to know whether it records printer and/or publisher imprints — but no explicit information is given. In looking through the two volumes, however, it becomes obvious that AMI records both at different times without distinguishing between them. For monographs and pamphlets, the publisher's imprint is generally recorded but for the reprints the printer's imprint, such as Trow's who printed journals for William Wood & Co., is given. Finally, we are not told when a reprint is being recorded, nor from what journal it came.

There are, then, a multitude of confusions in the stated scope of AMI. Most basic of all is the confusion between book (a physical object) and work (a verbal construct), a distinction under-lying all bibliographical research from the preparation of checklists to textual editing. (3) The word "imprint" in the title -- whether it refers to printer's or publisher's imprint -- suggests that AMI is principally concerned with books and secondarily with works, the intellectual content of books. And yet the title and the statement of scope suggest the principal concern is with works. The title suggests this by including the words "illustrate" and "progress" which shift the focus away from imprints to intellectual contents. Underlining this focus is the fact that these words are used in two other works in the history of medicine, William Osler's Bibliotheca Osleriana: A Catalogue of Books Illustrating the History of Medicine and Science (1929, repr. 1969) and A Medical Bibliography (Garrison and Morton): An Annotated Checklist of Texts Illustrating the History of Medicine (4th ed., 1983), both of which are chiefly concerned with works.

In sum, the stated scope of AMI is incomplete, unclear, and confusing, providing inadequate guidance to experienced and inexperienced users.

II. Coverage

However clear or confused is a compiler's statement of intention (scope) it is the comprehensiveness of the actual coverage of eligible books or works which is the most important measure of a checklist's value. In order to measure this coverage we have looked systematically at records or holdings of a particular library to see whether or not they appear in AMI. In addition we searched to see if relevant entries from three of the American Imprint Inventory checklists and Shoemaker appear in AMI. (4)

One set of samples dealt with subjects, two basic sciences and two medical specialties: surgery (1820-29), anatomy (1830-39), dentistry (1890-99) and physiology (1900-09). Of the 148 titles held by the National Library of Medicine, 84 (57 per cent) appear in AMI. (See Figure 1 and Table 1). We believe this is a low percentage, especially considering how central these four subjects were to 19th- and early 20th-century medicine.

Secondly, we checked 36 reprints by Lewellys F. Barker and 10 pamphlets by various authors. Of these 46 items only 5 (11 per cent) are recorded in AMI. This low percentage is important to note because AMI makes strong claims to include both reprints and pamphlets.

Thirdly, we examined three imprint inventories and Shoemaker for 1820-29. The three inventories were for Chicago, Tennessee, and Michigan. Of the 145 relevant items from them, 42 (29 per cent) are recorded by AMI. Of the 104 relevant Shoemaker imprints 66 (64 per cent) appear in AMI. The American Imprints Inventory and Shoemaker are sound and comprehensive works and must form the foundation of an imprint inventory for any subject. Subsequent scholarship should consolidate these efforts and build on them. Unfortunately, readers cannot rely on AMI but must go back to these basic sources and use them in conjunction with AMI.

Two minor samples were also examined, ten French and German items, only two of which appear in AMI. The second is the ubiquitous Wood's Library of Standard Medical Authors, of which 69 of the 74 are listed. (Strangely, in an Appendix in Volume 2 the missing five works are listed.)

In summary from a sample of 525 items, 268 (51 per cent) appear in AMI (Table 1). This is remarkably poor coverage given the fact that five major medical history libraries within 250 miles of Manhattan (Countway, New York Academy of Medicine, College of Physicians of Philadelphia, Yale Medical Library, and the National Library of Medicine) collectively hold well over a million volumes, among which 19th-century U.S. medical imprints are special strengths. This does not even take into account the Library of Congress, numerous libraries of historical societies, or general university libraries and smaller history of medicine collections which also contain a wealth of imprints that might be included in AMI.

III. STRUCTURE

The compiler of a checklist must not only gather information but also present it clearly and conveniently and in a way that brings out some essential historical features of a subject and its manifestations in print. For example, an alpha-betical arrangement is very convenient and quick to use when looking for an author's production but it does not show anything about changes in the author's work and reception over time or in its publishing and printing history. A subject arrangement's strength lies in quick and easy access to the content of the books or works while a chronological list reveals historical patterns best of all. Of course whatever arrangement is chosen -- and each compiler must carefully weigh the pros and cons of each in terms of his purpose -- they all call for thorough indexing as a way of overcoming the shortcomings of each structural principle. In this way the compiler can provide a variety of approaches for scholars who will often approach the checklist with different purposes.

The arrangement of this checklist can be viewed in two ways: a macrostructure which relates the individual entries to each other and a microstructure which arranges the information within an entry.

The macrostructure consists of three levels of order: 1) entries are arranged chronologically by decade, for example, 1820-29; 1830-39, etc.; 2) within these nine decade-subdivisions (or "alpha modalities" as they are called [p.30]), entries are arranged alphabetically, mainly by author, with a few anonymous works entered by title and some institutional or corporate entries; 3) within level 2, the books by an author are arranged chronologically so that editions of a work by an author are not grouped together. The value of a chronological arrangement for historical study is obvious but alternating chronology, alphabetical arrangement, and chronology creates inconvenience and undermines the historical patterns that might be revealed by a strictly chronological arrangement. In short, the weaknesses of both types of arrangements come to the fore through their admixture.

The microstructure organizes the information within entries. This information consists of personal name entries (institutions are sparsely represented), birth and death dates, title, place of publication, date and pagination, sometimes statements of edition (taken from title-pages, not the result of a bibliographical analysis), locations of copies and serial numbers. Annotations are promised (p.31) but rarely appear.

The names are consistently and accurately established and the provision of birth and death dates will prove valuable to all readers. But there are no "added entries" or "see" or "see also" references for coauthors within the microstructure or the macrostructure. These are serious shortcomings which will lead to much extra searching and the overlooking of works actually recorded. Locations are given but erratically, and the holdings of no single library are consistently recorded. DNLM is frequently listed but not consistently, with the consequence that when an item is recorded as being in the NLM it may be there, but when DNLM is not listed, one may not assume that the item is not at the National Library of Medicine. The brief list of locations and erratic recording of holding libraries means that anyone

wishing to request interlibrary loans or to read a book in a nearby library must turn to the National Union Catalog, write a letter, or reach for a telephone to obtain information about locations.

IV. AUDIENCE

Who might find this work useful? Historians and reference librarians will be frustrated by its confused rationale, poor coverage of the medical literature, inefficient structure, and naive bibliographical analysis. Both types of readers must continue to rely on the National Union Catalog, the Surgeon General's Catalogue, and the various G. K. Hall book catalogs.

Book dealers will find this work a valuable marketing tool. It has serial numbers to provide easy reference in catalog entries and the coverage of the literature is erratic and incomplete enough so that they will frequently be able to label an item as "Not in Cordasco." However dealers and buyers should remember that it is hard to find items in this work because of its difficult structure. In sum, everyone should approach AMI cautiously, not accepting its information without corroboration from books themselves or other reference works which have shown themselves to be reliable.

Endnotes

- 1. Other reviews have appeared in <u>Bulletin of the History of Medicine</u>, 1986, 60:130-132 (Charles Rosenberg); <u>Bulletin of the Medical Library Association</u>, 1985, 73:400-401 (Christopher Hoolihan); and <u>Journal of the History of Medicine and Allied Sciences</u>, 1985, 40:468-4888 (Bruce Fye).
- John Shaw Billings, <u>Selected Papers</u> (Chicago, 1965), pp.118-119.
- G. Thomas Tanselle, "Descriptive Bibliography and Library Cataloging," <u>Studies in Bibliography</u>, 1977, 30:7-15.
- 4. Checklist of Chicago Ante-Fire Imprints, 1851-1871 (Chicago, 1938), Preliminary Checklist of Michigan Imprints, 1796-1850 (New York, 1964), Checklist of Tennessee Imprints, 1841-1850 (Nash-ville, 1941), and Richard H. Shoemaker, A Checklist of American Imprints, 1820-1829 (New York, 1964-1971).

Table 1. Coverage by American Medical Imprints, 1820-1910

Sample	Dates	Source	Number	In AMI	% in AMI
surgery	1820-29	NLM CATLINE	12	11	92
anatomy	1830-39	NLM CATLINE	24	15	63
dentistry	1890-99	NLM CATLINE	54	32	59
physiology	1900-09	NLM CATLINE	58	26	45
Shoemaker	1820-29		104	66	63
L. F. Barker reprints	1894-1909	NLM W7/B255p	36	1	3
French & German books		NLM CATLINE	8	2	25
Wood's Library	1879-86		74	69	93
Tennessee imprints	1841-50		13	4	31
Michigan imprints	1820-50		6	0	0
Chicago imprints	1851-71		126	38	30
pamphlets	1879-92	NLM 4284	10	4	40
Totals			525	268	51

Fig. 1: Subject Coverage

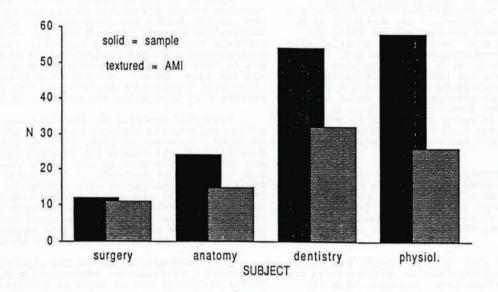
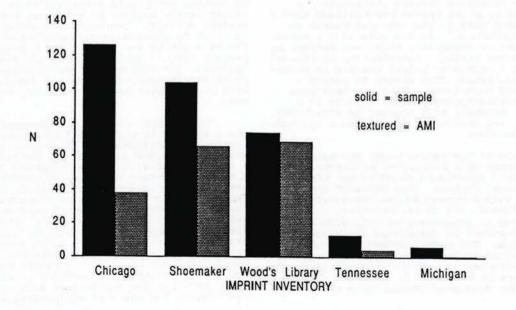


Fig. 2: Imprint coverage



Profile of



Louise H. Marshall

by Joyce M. Fried

Dr. Louise H. Marshall had been in retirement for six weeks from her post as professional associate at the National Research Council when she received a phone call from Dr. William Windle, then editor-in-chief of Experimental Neurology, asking if she would consider coming to UCLA as the journal's managing editor.... Dr. Marshall readily accepted and when she arrived (in 1975) she also became involved in an inventory of scientific personnel in the neurosciences in the U.S. Her collaboration with Dr. H. W. Magoun on that project led her to share his interest in documenting the history of neuroscience and creating a central registry of archival materials. Now known as the Neuroscience History Resource Project,... a proposal for funding is being considered by NIH. This is not the first time that Dr. Marshall's capabilities have put her at the forefront of neuroscience.

Born Louise Hanson, she grew up in Southern California and attended a progressive school in San Diego which, for example, taught cooking to the boys and shopwork to the girls. In the general science class, which she found fascinating, they built turbines, did photography, and learned a lot of biology.

In her junior year in high school, her mother took her and her two brothers to attend school in French-speaking Switzerland. However, when she discovered that the Swiss girls' school Louise attended did not offer mathematics or science, the family returned to San Diego after a year.

Louise was accepted at Vassar College in Poughkeepsie, N.Y., and based on her experience in Switzerland, entered with the idea of majoring in the romance languages. "That was almost a disaster and after receiving a D in Italian (I was paralyzed by the vivacious Italian instructor), I took a look at my other grades and realized that I received my best mark in the required course in elementary physiology." In the late 1920's Vassar offered a major in euthenics, which was defined as the art of better living. Practically, it allowed undergraduate students to select courses in several departments, rather than having to pursue a sequence in one department. This may have been the first interdisciplinary major offered in a college. Dr. Marshall took courses in physiology, bacteriology, and chemistry, leading to a specialization in nutrition.

At the end of her senior year, she asked to stay on at Vassar as a laboratory assistant with the privilege of spending a third of her time taking additional courses. Two years of that arrangement, with a summer at the University of Chicago in between, led to her receiving a Master's degree in physiology in 1932 with a thesis on the effect of irradiated ergosterol on rickets in rats. The summer school experience at the University of Chicago convinced her to pursue further graduate work... In the fall of 1932, she commenced work in Dr. Anton J. Carlson's laboratory at the University of Chicago on a fellowship from Vassar.

In 1934 Louise married Dr. Wade Marshall and joined him on his first job in Washington, D.C., where he was an instructor in physiology at George Washington University. She completed her dissert-

ation on anti-anemic treatment in experimental polycythemia. "I remember doing most of the writing and verification of my bibliography in the old Surgeon General's Library on Constitution Avenue in a building which has since been demolished to make way for the Museum of Science and Industry. The library was a fascinating place. Many of the card catalog entries were handwritten. The librarians sat at desks in the center of the very large room surmounted by a skylight. The walls were lined with balconies and when you put in a request for books you could see the page running around on the various levels to find your book."

Finally in the spring of 1935 Dr. Marshall returned to the University of Chicago to give her seminar and defend her dissertation. After receiving her degree, she felt no special drive to continue with research and teaching. "I had been disappointed that the competition in science, as I saw it, was extremely cut-throat and that science was far from 'pure." However, she received an offer from Vassar to substitute for her former professor of physiology who was on sabbatical....

From 1937 to 1943, Dr. Marshall was in temporary retirement raising a family, a son and a daughter. However, in 1943, when her husband was hospitalized, she became the family's breadwinner and secured a position at NIH in the aviation medicine unit in Bethesda.... At the war's termination, the investigators were allowed to choose the direction of the research they wished to pursue. Dr. Marshall returned to her work on peripheral circulation which she continued until 1965. She studied the effects of chronic simulated altitude exposure on renal function in dogs....

[Dr. Marshall] welcomed the opportunity ... to become a professional associate at the National Research Council and to serve as executive secretary of the newly appointed Committee on Brain Sciences. [The Committee's] first task was to supervise the revision of the medical subject headings (MeSH) in the behavioral sciences for NLM. The second project was to conduct a survey for the International Brain Research Organization of research facilities and manpower in brain sciences in the U.S.... The last project her committee was assigned during its 10-year existence was to develop background materials to be used as authoritative sources by teachers, the media, and science writers. The committee chose four fields in which to commission monographs that identified the antecedents and brought the history up to the present time -- chlorpromazine and schizophrenia, epilepsy, the influence of early experience in child development, and behavior modification. In 1975 Dr. Marshall reached mandatory retirement age...

"In the fall of 1975, I was asked to contribute a chapter on the history of neuroscience for the Macy Foundation's two volumes of essays on American medicine prepared for the bicentennial. I collaborated with Robert Frank and Dr. Magoun on that chapter which laid the groundwork for the latter's plans to write a history of American neuroscience from the turn of the century. It became apparent that there was much more material available than we could ever use. With funding from NLM we embarked on a two-year project in which I visited more than a dozen archival centers, looking for material to document the history. The differences in archival centers and the time spent in locating correspondence pointed up the need for a central registry of archival material, the funding for which is now pending....

Excerpted, with the author's permission, from BRI Bulletin, from (Brain Research Institute, UCLA), volume 7, no. 5, summer 1983.

What's a friend for? by Mary L. Westermann

Friends of the Library groups are certainly not new. However, many libraries which do not have a Friends group rarely take the time to study the feasibility and desirability of forming such an organization. Why organize a Friends of the Library? What can such a group do for us?

There are many reasons in its favor. Sandy Dolnick summarizes them in The Friends of the Library Sourcebook: (1),

1. Money -- Friends have traditionally raised

funds for projects or acquisitions in excess of the general library budget.

2. Services -- There is no limit to the services that a truly dedicated volunteer group can provide.

3. Public Relations -- Each Friend is a walking public relations vehicle for the library

4. Advocacy -- an informed, active citizen lobby can be the strongest weapon the library has.

5. Community Involvement -- An organized Friends group is living proof of the library's value to the community.

It is important to remember that financial support should not be the sole reason to form the Friends group. O'Neill points out that "the importance of non-financial goals should not be minimized.... Not all Friends organizations succeed in raising enough money to justify all the effort and time involved if money were the only concern." {2} Goals and purposes of the organization should be considered carefully and thoughtfully outlined. Keep in mind the reasons for your group's existence when formulating programs and

Now that you have decided on the purpose of your group, where do you begin to formalize the existence of such an organization? The first step you must take is to meet with a core group of dedicated individuals who are willing to take the time and energy necessary to mobilize your Friends of the Library. This is perhaps the most important step in the planning process, since the help and dedication of such people are essential to gaining the support needed to begin.

Once your initial planning, goal-setting and organizing is complete, you are ready to pursue such legal necessities as the formulation of bylaws, incorporation and obtaining your tax-exempt status. It is at this point that consultation with legal counsel is strongly advised. Since legal fees can be costly, check within your institution for counsel that may already be available, or within your community for a lawyer who would consider the donation of his/her time for such a worthy cause as the formation of your group. If neither one of these options is available to you, check with your local bar association for referral to a lawyer who is familar with local and state laws concerning incorporation and nonprofit organizations. By-laws will need to be drawn up before "articles of incorporation" are filed with the appropriate agency in your state.
Once your incorporation is complete, you can file with the Internal Revenue Service for your taxexempt status as a non-profit corporation. As a "Section 501(c)(3)" charitable organization your Friends group will be exempt from federal taxes, and in most cases state taxes as well, and should

be able to receive contributions on a tax-deductible basis. Such matters are routine for a competent lawyer, so it is highly advisable that you retain and maintain the services of such an individual.

Now that you are recognized as a bona-fide Friends of the Library group, what should be considered when beginning fund-raising and public relations activities? To begin, it will be necessary to establish specific fund-raising goals. An addition to an existing library, renovation, purchase of equipment or the initiation of a new library service are among the many goals common to Friends groups. Besides fund-raising, such goals as membership promotion, the recruitment of volun-teers and the initiation of lobbying activities are important public relations goals that should be considered. Publicity such as bookmarks, membership brochures and announcement on public radio and television will all help begn your fundraising campaign. Membership categories and fees should be established prior to the start of your public relations efforts.

Actual fund-raising can take many forms. Your membership dues and donations will provide your initial form of support. For many groups, the used-book sale is one of the first money-raising projects. Book and author luncheons, auctions or cocktail parties continue to be popular fund-raising events. The Special Libraries Association has recently published an excellent guide to fundraising in special libraries entitled How to Be a Fund-Raiser. (3) Available from SLA for \$10, thi this book will be a helpful adjunct to your activities. When designing your activities, be creative, and above all plan carefully.

Although a well-planned course of action can help the formation of your Friends group go smoothly, you should keep in mind a few caveats. Sandy Dolnick outlines ten commandments that Friends should follow if they are to work together effectively for the benefit of the library. (4) These are:

- 1. The library director must want a Friends group.
- 2. The library staff must be willing to work with Friends.
- 3. All parties involved ... must realize the time commitment required.
- 4. The library must agree which of its resources (space, staff time, paper, phones, etc.) will be used by the Friends.
- 5. A committed core group must exist.6. The authority to which the library director reports (Board of Trustees) must be aware of the Friends group and must believe it is needed.
- 7. Communication must be open to all groups involved in the use of the library; the Friends should not have an exclusionist policy.
- 8. All those involved must understand that Friends do not make policy.
- 9. The library must inform the Friends what role or roles they wish the organization to play:
- social, financial, educational, etc.
 10. All those involved must understand that trustees and Friends have separate functions.

Finally, all those considering the formation of a Friends of the Library group should contact the Friends of the Library USA (c/o American Library Association, 50 East Huron Street, Chicago, IL 60611) for their most helpful books, pamphlets and fund-raising ideas.

O'Neill summarizes: "To be sure, a Friends organization is not an unmixed blessing. Library administrators contemplating the establishment of such an organization ought to weigh carefully the disadvantages as well as advantages such an organization might offer.... But if the initial investment is considerable, so too are the potential returns." [5] Indeed, we all benefit from such groups; however, we must realize that they do not come into existence without hard work and dedication.

References:
1. Dolnick, Sandy, ed. Friends of the Library
Sourcebook. Chicago, ALA, 1980 pp.1-2.
2. O'Neill, R. K. "On the Organization, Governance, and Value of Friends of the Library Organizations." Library Occurrent, August, 1979. p.232.
3. How to Be a Fund Raiser. Washington, DC, SLA, 1985.
4. Dolnick, Sandy, ed., op.cit., p.2.
5. O'Neill, R. K. op.cit., p. 236.

LETTER TO THE EDITOR



Dr. Malvin E. Ring, DDS, MLS, FACD -- whose voice we were pleased to hear, some months ago, in a Public Radio interview apropos of his recent history of dentistry -- has asked us to publish the following:

The short item in the most recent Watermark about the supposed daguerreotype of Crawford Long brings forth this letter of protest. The writer referred to Long as "...the discoverer of modern anesthesia." I, as well as all dental historians and most prominent medical historians take strong exception to this. Although Long may have administered ether to a patient or patients as early as 1842, it in no way makes him the discoverer.

In order to be a discoverer of a new technique, he must satisfy three criteria:

- 1) he must find something not generally known
- he must be aware of the significance of his find
- he must communicate his find to others.

Crawford Long was apparently not aware of the significance of his find and he decidedly did not communicate it to anyone in the scientific community until after Morton's demonstration of ether anesthesia in 1846, four whole years after he claimed to have used it. In fact the eminent medical historian Dr. William Welch said of Long: "We cannot assign to him any influence upon the historical development of our knowledge of surgical anesthesia or any share in its introduction to the world at large." (Emphasis mine.)

There is only one person who meets all of the criteria of discovery: Horace Wells, the dentist of Hartford, Connecticut—who, in December 1844, demonstrated anesthesia through the use of nitrous oxide gas. Even Morton cannot be considered the discoverer, because merely improving upon the agent used does not make one a discoverer. Dr. Owen Wangensteen considers Wells the discoverer for, as he says in his fine book on the history of surgery, "Now more than 130 years later, it probably would be in the spirit of fairness to cite Wells with Morton for division of the honor of discovery. In fact, the use of ether has disappeared in many clinics, and nitrous oxide, used in 65 per cent of anesthetic procedures, is the more durable legacy."

President's column by Dorothy Whitcomb

Depending on which date you use, we find ourselves at least 10 years old as an organization. Preliminary meetings of the Association were held in 1974 and 1975. The Watermark published its first issue in October, 1976, with the new constitution and a list of the 29 founding members. Here we are 10 years later, having grown out of our infancy, finding ourselves now a feisty and self-confident teen-ager of an organization, ready to face new challenges and growth.

I've been asked to look back and look forward a bit, to help us know ourselves a little better. What have we accomplished? Where are we going or where should we try to go? All I can do is give you my version. Let's share what your ideas are.

Nancy Zinn wrote our first "President's Column" with some thoughts on possible goals and functions for us. She spoke of our concerns about preservation issues. She mentioned education for medical rare book librarianship, and the development of continuing education for our highly specialized field. She has shown a continuing interest in making known the riches of our collections and the policies which govern their use. She also referred to publication of guides and bibliographies of our collections prepared by members, and special topics in history-of-medicine librarianship. In fact, in our first issue, Lisabeth Holloway shared her view of our task: to make Watermark a continuing contribution to a "manual of medico-historical librarianship."

To get started, I read right though Watermark, and I was very impressed by how well we have managed to address the goals and produce so much helpful information for our professional development. I recommend the process to all of you. There is a record of the promotions, career changes, deaths, and our growing membership. An essential service performed by Watermark was the announcement of meetings, minutes, election results, and other business of the body. In earlier issues the "Directory of Libraries in the History of the Health Sciences" appearted serially. How wonderful if that project could be continued and expanded! In recent issues, entries for the "Exhibits Clearinghouse" have been published, another very useful product.

Some particularly helpful articles stood out for me. Others might pick a different set. I devoured Nancy Zinn's report of her survey of what we do and how we do it. Phil Teigen's thoughtful article about medical libraries and history-of-medicine libraries is ammunition for me as I defend my collection and its special contribution in our Center for the Health Sciences. Deborah's thoughts on librarians and collectors, Bruce Fye's challenges for the 80's, Robert Skinner on Histline, Barry Wiedenkeller on appraisals, are favorites. It is hard to stop! Go back and feast. There is an index in Volume V (4):3-7, April, 1982.

Surely one of the important goals we have attained remarkably well is the welding of our scattered membership into a loyal support group. Our new feature in Watermark, "Ex Libris," fills an important role in bringing us closer together and keeping us in touch. Since Volume VIII we have lots of good news. Thanks to Glen and her hardworking area reporters.

It is clear that <u>Watermark</u> has served an indispensable function. We all owe Lisabeth Holloway a great debt of thanks for leadership and much hard work. The rest of your officers have come and gone. She is our gift that keeps on giving, with humor, patience and all sorts of skills. On behalf of all of ALHHS, I want to express our deep appreciation and admiration for your talents, Lisabeth.

And now a glance ahead. I do not have any blinding flashes of insight. If the project should appeal, we could very well do a more elaborate survey, based on the one done by Nancy Zinn, as she suggested at the time she reported the results of her first one. When we complete Volume X of Watermark, we should have a cumulated index to all the useful information in our "manual in the making." Does anyone have a good indexing software package or expertise in compiling indexes? I would like to commend to you the Murray Gottlieb prize. A list of previous winners is available in Volume I (4), along with a little about who may compete. The most recent information about this prize may be found in MLA News, #183, March 1986. The committee which awards the prize is listed in the 1985/86 directory on p.12 in the Standing Committees. This one is just made for us!

I foresee that the luncheon presentations we make at the AAHM meeting, if we continue to be successful in competing for this opportunity, will be another good source of information we can exploit on our collections' resources. As time goes on, we will have a valuable product. They make good copy for Watermark.

Although I have no concrete suggestions, I feel we need to be thinking about how we can bridge to our sister organization, the History of the Health Sciences Section of MLA. While there is not complete overlap by any means, many of us belong to both, and most of the benefits of our membership in ALHHS would be valuable to this other group. We are doing some things to make ourselves known nationally, like appearing in the Encyclopedia of Organizations and getting into Abbey Newsletter. We may be able to recruit new members from HHSS, as well as introduce HHSS opportunites to ALHHS members, as we continue to make ourselves better known to the library world. The two groups have some common interests and goals, so we should not duplicate effort but find ways to augment each other.

I will be contacting you before long for elections which come at the beginning of the year. Please send me nominations for Steering Committee members. You are welcome to nominate yourself! Keep in touch!

ALHHS



NEXT MEETING

THURSDAY, April 30, 1987. Philadelphia. Our members are reminded that next year's meeting will take place for the first time on Thursday rather than Wednesday. (AAHM will begin on Friday and run through Sunday. This change has been made to accommodate some AAHM members whose institutions now reimburse only for the lower weekend hotel and travel rates.)

We will meet at 9 A.M. at the College of Physicians for a tour of the collections; then by prearranged transportation to the Pennsylvania Hospital for business meeting, lunch, and a tour

of the collections. These are the two major collections in medical history in the city, and both have undergone major reorganization and refurbishment since ALHHS last visited them at its organizing meeting in 1976. After this, members will be offered a choice of escorted tours to local collections of interest -- Jefferson, Hahnemann, the American Philosophical Society, and probably some others to be announced later.

Put the date on your calendar.

ADDRESS CHANGE .

Dr. Malvin E. Ring 2 Roby Drive Rochester, N.Y. 14618 (716)-442-3977

OFFICERS OF ALHHS

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President. Dorothy Whitcomb, Librarian, History of the Health Sciences, Middleton Medical Library, University of Wisconsin, 1305 Linden Drive, Madison, WI 53706. (608)-262-6594 or 2402. Secretary-Treasurer. Janet Kubinec Sutton.

Secretary-Treasurer. Janet Kubinec Sutton. Address: Mrs.Ernie Sutton, c/o HQ, V Corps, Surgeon, APO NY 09079. (US postal rates prevail for APO addresses.)

Editor. Lisabeth M. Holloway, 58W. Tulpehocken Street, Philadelphia, PA 19144 (work phone M W F (215) 629-0300, ext 185; home 843-5253).

Archivist. Dorothy Whitcomb.
Steering Committee. Vicki Steele (resigned); Elizabeth B. White, Director, Houston Academy of Medicine - Texas Medical Center, Houston, TX 77030 (713)-797-1230, ext. 139; Deborah Woolverton, Collection Manager, History of Medicine & Rare Book Collection, Medical & Chirurgical Baculty of the State of Maryland, 1211 Cathedral Street, Baltimore, MD 21201 (301)-539-0872. Publications Committee. Chairman: Glen P.

Publications Committee. Chairman: Glen P. Jenkins, Howard Dittrick Museum of the History of Medicine, 11,000 Euclid Avenue, Cleveland, OH 44106 (216)-368-3649. Members: Anne Donato, Joan R. Echtenkamp, Margaret Jerrido, Vicki Steele (resigned), Mary Teloh, Dorothy Whitcomb, Beth White, Deborah Woolverton; Lisabeth Holloway, ex officio.

Committee on Genre Terms. Chairman: Nancy Zinn, 1410 - 21st Avenue, San Francisco, CA 94122 (415)-666-2334. Members: Ferenc Gyorgyey, Mary Ann Hoffman, Paul Hessling.

Local Arrangements Committee, 1987: Lisabeth Holloway, Sam Davis, Tom Horrocks, Margaret Jerrido, Caroline Morris, Barbara Williams. Local Arrangements Committee, 1988 (New

Orleans): Mary Teloh.

OFFICERS OF THE ASSOCIATION, 1975/76-1986

- 1975/76 President, pro tem., Lisabeth Holloway Secretary, pro tem., and Editor (1977), Judith Overmier
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President, Dorothy Whitcomb Secretary/Treasurer, Janet Kubinec Sutton Editor, Lisabeth Holloway Archivist, Dorothy Whitcomb Steering Committee, Victoria Steele, Elizabeth White, Deborah Woolverton

Conservation News compiled by Deborah Woolverton



Preservation Section Established at NLM. The National Library of Medicine has established a Preservation Section in the Public Services Division. The Section is headed by Margaret Byrnes, who joined the NLM staff in August, 1986 after spending five years as Head of the Preservation Department at the University of Michigan Library in Ann Arbor. The Preservation Section is charged with implementing NLM's Preservation Plan. manages both in-house and contract preservation activities such as binding and preservation microfilming. The Section also cooperates with the History of Medicine Division in the preservation of the historical collections. Section staff cooperate in preservation programs with other research libraries; evaluate developments in preservation techniques, equipment, supplies and programs; and provide consultation and guidance to biomedical libraries on preservation issues and

methods. For further information contact Margaret Byrnes, Head, Preservation Section, Public Services Division, National Library of Medicine, 8600 Rockville Pike, Bethesda, MD 20894 (301-496-8949).

Publications. Display and Publicity Ideas for Libraries by Linda Campbell Franklin. Jeffer-son, NC, McFarland, 1985. 272 pp. Contains drawings, bibliographies, directory, and index. Available from McFarland and Company Inc., Box 611, Jefferson, NC 28640 (919-246-4460) for \$14.95 + \$1.50 shipping.

Descriptive Standard for Modern Manuscripts.
The Republique Française Centre National de la
Recherche Scientifique (C.N.R.S.) and the Institut
des Textes et Manuscriptes Modernes (I.T.E.M.) have jointly developed a descriptive standard for literary, scientific, philosophical or musical manuscripts from the 18th to 20th centuries. The standard is intended to standardize terms and simplify description in a way which adequately accounts for the most significant characteristics The standard is available in of a manuscript. English from I.T.E.M., Rue de Richelieu, 75084 Paris, France.

Conservation Directory. The 1986-87 AIC Directory has recently been published by the American Institute for Conservation of Historic and Artistic Works. The directory contains basic information about AIC and lists individual and institutional members, by name, geographic location, and speciality. Also included are lists of conservation training programs, other conservation associations, and granting agencies. For more information regarding the AIC Directory, please write AIC, 3545 Williamsburg Lane, N.W., Washington, DC 20008 (202-364-1036).

Calendar of Conservation Events. Second Annual National Archives Preservation Conference: "Preservation Photocopying in Archives & Libraries," December 9, 1986. For more information contact Alan Calmes, Preservation Officer (NSF) National Archives, Washington, DC 20408 (202-523-1546).

April 30-May 1, 1987. "Conservation and Management of Photographic Collections," conducted by Northeast Document Conservation Center at Connecticut Historical Society, Hartford, Conn. For more information contact Gay Tracy, NEDCC, Abbot Hall, 24 School St., Andover, MA 01810.

Upcoming collection care workshops by the Conservation Center for Art and Historic Artifacts (CCAHA) in Philadelphia:

January 17, 1987: "Storage of Library and Archival Material."

February 14, 1987: "Matting and Framing."

March 14, 1987: "Exhibition Techniques, Packing and Shipping."

More information from CCAHA, 264 South 23rd St., Philadelphia, PA 19103 (215-545-0613).

June 5-19, 1987. "Preservation Management Institute for Archives," presented by Northeast Document Conservation Center, and supported by SAA. For more information contact NEDCC, 24 School St., Andover MA 01810 (617-470-1010).

Protective Wrappers. The October 1986 Abbey Newsletter v.10, no.5, contains instructions for making protective wrappers with magnetic closures. The article contains directions and step-by-step illustrations. Supply lists and suppliers are also listed.

Ex Libris



compiled by Glen Jenkins, et al.



For this anniversary issue, I contacted some of the original members listed in our first Watermark who are still members today, to ask for news from their libraries ten years later. Original members' replies will be designated by *.

MAIN ENTRIES and EXITS *

The National Library of Medicine is pleased to announce the appointment of Peter B. Hirtle to the position of Curator of Modern Manuscripts in its History of Medicine Division. Mr. Hirtle started in July, 1986 in the position held by Dr. Manfred Waserman for many years. Immediately before coming to the Library, Hirtle had worked as an archivist/historian for the Center for the History of Microbiology in Catonsville, Md. He has also taught the history of science and tech-nology at Stanford University and at the University of Alabama in Birmingham. Hirtle has a Master's degree and was a Ph.D. candidate in history at the Johns Hopkins University, and is completing an MLS degree, with a concentration in archives and manuscripts, at the University of Maryland.

Mary Ann Hoffman, Curator of Special and General Collections at Wright State University, announces the appointment to the staff of Robert A. Ritchie, who has worked at the Library for the past two years as archivist for the McFarland Grant, and previously was archivist for the Kettering Foundation.

The Library of the College of Physicians of Philadelphia has appointed as Historical Cataloger Fred W. Jenkins, a recent graduate of the library school at the University of Illinois at Urbana-Champaign. Besides an M.S.L.S., Fred also holds a Ph.D. in classical philology.

The Regents of the University of California have appointed Nancy Zinn* the University's representative to the California Heritage Preservation Council. This group acts as advisor to the State Archives.

Vicki Steele has accepted a new position with University Libraries of UCLA. Starting immediately she will be Head of Development for the entire system. Congratulations, Vicki, we shall miss you. Your success in collection development has been an inspiration to us all. And on behalf of the Publications Committee, I thank you very much for your enthusiasm and support.

Nancy Rucker will be resigning her position as History of Medicine Librarian for the Mayo Foundation Library in July, 1987. Nancy will be married in a few weeks and after her husband finishes his residency next June will move temporarily to Houston, where her husband will complete a six months' fellowship. Nancy would like you to know that her position will be available in early summer.

EVENTS

Nicholas Dewey announces a repeat of his popular "Osler Re-Visited" conference (first held in September '84) to take place from April 5 to 12, 1987 at Merton College, Oxford. Again, it is to be followed by a post-conference tour of Osler's Norfolk -- Sir Thomas Browne and all that! Write him for details at BCM-Box-Dewey, London WClN 3XX. The telephone is 01-387-0486.

FELLOWSHIP ANNOUNCED *

The M. Louise Carpenter Gloeckner, M.D., Summer Research Pellowship for 1987 is available at the Medical College of Pennsylvania for research using materials in its Archives and Special Collections on Women in Medicine. The grant of \$1,200 will be made to one applicant selected by the Award Committee. No restrictions are imposed on eligibility, and students and other beginning researchers are encouraged to apply. Deadline for receipt of completed applications is February 16, 1987. For application, write the Archives and Special Collections on Women in Medicine, The Medical College of Pennsylvania, 3300 Henry Avenue, Philadelphia, PA 19129.

POSITION AVAILABLE *

Head, History & Special Collections Division, UCLA Biomedical Library. Large academic biomedical library with rich historical collections supported by generous endowment income seeks qualified applicants for the Head of the History and Special Collections Division. Responsible for administering all division operations including supervision of 1.25 FTE divisional staff. Evaluates and selects historical source works in health and life scien-ces, new serials, and current imprints. Provides in-depth historical reference service. Lectures on the use of source works and reference materials. Prepares historical exhibits. Additional responsi-bilities may include rare book cataloging and preservation-related assignments.

A professional degree from an accredited library school is normally required. However, a person with other appropriate degrees or equivalent experience may also be appointed. Graduate study (M.A. or Ph.D. level) in an appropriate academic field and a working knowledge of major western European languages are desirable. Prior academic library experience in rare book librarianship and familiarity with the history of medicine or science are highly desirable. Effective oral and written communications skills and the ability to work successfully with faculty, donors, students, and members of the library staff are essential.

Salary range: \$24,012 - \$49,656, based on qualifications and years of experience. Excellent fringe benefits. Pesonal interview required. Applications received by Janury 5, 1987 will be given first consideration. Send résumé and list of references to: Alison Bunting, Biomedical Librarian, UCLA Biomedical Library, CHS, Los Angeles, CA 90024. An Equal Opportunity/Affirmative Action Employer.

CALENDAR *

Joan R. Echtenkamp reports 1986-87 speakers and topics for the History of the Health Sciences Lecture Series at the Claude Moore Health Sciences Library, University of Virginia, Charlottesville, as follows: Oct. 2, Joan Jacobs Brumberg, Ph.D.,

Director, Women's Studies Program, Cornell University, on "The Emergence of a Modern Disease: From Anorexia Mirabilis to Anorexia Nervosa." Nov. 20, H. C. Erik Midelfort, Ph.D., Dept. of History, University of Virginia, on "Witchcraft and the Melancholy Transformation of the Insanity Defense." Peb. 12, W. Curtis Worthington, Jr., M.D., Medical University of South Carolina, "Town and Gown in the Medical Center in the Early 19th Century: The Charleston Experience." Apr. 9, John Parascandola, Ph.D., History of Medicine Division, NLM, on "The Search for Magic Bullets: Chemotherapy in the 20th Century."

From Mary Claire Britt comes report of the fall and winter lecture-series in the history of medicine at the University of Alabama Medical Center: Nov. 3, Charles D. Kochakian, Ph.D., "The Pathway from 'The Male Hormone' to Anabolic-Androgenic Steroids." Nov. 21, Robert Kroc, Ph.D., "Sex Research, the Thyroid, and the Pharmaceutical Industry." Feb. 20, Robert Joy, M.D., "Dominique Jean Larrey."

ACQUISITIONS *

Inci Bowman* writes from the Moody Medical Library that they have been chosen as the repository for the archives of the American Occupational Therapy Association (AOTA). This includes correspondence, minutes of meetings, committee reports and audiovisual records documenting AOTA's development since 1917. A guide to the archives, compiled by Bowman, will be published soon. In recognition of the Library's role in protecting, preserving and fostering the history of occupational therapy in the United States, a certificate of appreciation was awarded by the AOTA.

Nancy Zinn*, reporting for Special Collections, U.C. San Francisco, announces the receipt of two kymographs previously used by students in the School of Medicine, UCSF. One is a "Harvard-type" clockwork kymograph, accompanied by tracings; the other, a sprink kymograph. The sprink kymograph formerly belonged to James M. D. Olmsted, M.D., who had come to the School from the University of Toronto in 1927. According to Dr. Ralph H. Kellogg, UCSF Professor of Physiology, the kymograph "was designed to rotate once, very rapidly, while adjustable contacts at the base provided a timed electrical stimulus to a muscle, the twitch of which was recorded on the moving smoked paper by a light lever. Using two contacts at an adjustable interval, one could show temporal summation of contractions or alternatively identify the refractory period of the nerve innervating the muscle."

Tom Horrocks announces that the College of Physicians of Philadelphia has acquired the papers of St. John Watkins Mintzer, M.D. (1829-1894), a 19th-century Philadelphia physician and businessman. Mintzer, a graduate of both the Philadelphia Medical College and the Eclectic Medical College of Philadelphia (his wife, Frances C. Wallace, was a graduate of Pennsylvania Medical College in 1881), taught briefly at the Eclectic Medical College and also tried (unsuccessfully) to establish an American Medical Museum in Philadelphia during the 1850's. In addition to his medical practice, Mintzer engaged in various business enterprises before and after the Civil War. He served as a surgeon for the Union side, and left a fine collection of Civil War material.

From Vanderbilt, Mary Teloh reports acquisition of Simon de Vallambert's <u>Cinq livres de la</u>

manière de nourir et gouverner les enfans des leur naissance (Poitiers, Marnesz & Bouchetz, 1565), the first work on pediatrics in French. This work, dedicated to Catherine de Medicis, queen mother to Charles IX, contains the best chapter on infant feeding heretofore published. Vallambert was the first to mention a baby-feeding apparatus and recommended almond-milk, blancmange, and sweetened broth as dietary supplements for underweight infants. He attacks the usual advice that the nurse should prechew the infant's food.

Christopher Hoolihan reports that the Edward Miner Library of the University of Rochester School of Medicine and Dentistry has recently completed processing the papers of the school's Myodynamics Laboratory, a research facility founded in 1926 by orthopedic surgeon Russell Plato Schwartz (1894-1965), to establish mechanisms for the accurate recording of human gait. Initially intended as a means of studying the mechanisms of human locomotion, the Laboratory's gait studies were gradually extended to the diagnosis of gait disorders, and later, with funding from Rochester shoe companies, to the design of shoes better adapted to the dynamics of the foot. The 28 linear feet of material includes publications and reports pertaining to the Laboratory's research, complete series of gait studies in their various formats; reports, correspondence and contracts with numerous European and North American shoe companies which applied functional principles to the design of shoes; eight boxes of negatives of equipment, personnel, shoes, patient studies, etc.; and more than a hundred reels of motion picture films dating from the 1930's to the early '60's. To obtain an inventory of this collection, write Christopher at 601 Elmwood Avenue, Rochester, NY 14642.

NEWS NOTES

Bill Beatty* (Northwestern) responds that since he had already reported some items in the last issue, he is "newsed out." "Why, at sixty," says Bill, "the time passes more quickly while newsworthy events happen less frequently, I haven't figured out. At any rate, best wishes for the celebration of the first decade and my hopes for many more."

In October the Cleveland Health Sciences Library offered a course to Hospital Librarians on organizing and maintaining a hospital archive. The course was designed for Hospital Librarians who have been asked to "do something with these old records," and will be listed on MLA's Continuing Education roster. Glen Jenkins* is the instructor.

Nancy Rucker, responding for Jack Key,*
reports that an article describing their rare book
collection in Mayo, a new publication of the Mayo
Foundation, resulted in a substantial amount of
money being left to the Library. Nancy sent along
a copy of the article, which was not only interesting to read, but beautiful to see.

QUERIES *

Dorothy (Dot) Mims, Medical College of Georgia, would like to know if anyone else owns a TWO-volume edition of Mascagni's Prodromo della Grand Anatomia (Firenze, Marenghi, 1819). Most copies are described as one volume, folio, 194 pages, cii (102) pages, with 20 plates of microscopical anatomy by Antonio Serantoni. Dot would

like any information on this title, either in one volume or two. Jeremy Norman states that "Choulant/Frank 317-318 gives the impression that there are two separate volumes to the <u>Prodromo</u>; however, this is not the case in any other bibliography consulted."

MEMBERS' PUBLICATIONS

The Houston Academy of Medicine - Texas Medical Center Library has published a guide to the manuscript collection of Hilde Bruch, M.D.,

the renowned investigator into eating disorders, especially anorexia nervosa, and author of well-known books, such as <u>Don't Be Afraid of Your Child</u>. A <u>Guide to the Papers of Hilde Bruch</u>, prepared by Randy Sparks, contains a biography, an inventory of the collection and an index to her office files and correspondence. Priced at \$20, including postage and shipping, it is available from Historical Research Center, HAM-TMC Library, 1133 Anderson Blvd., Houston, Texas 77030. Further information from Elizabeth Borst White, Director (phone 713-797-1230, ext. 139).



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