Dear Members and Friends,

This issue of the Watermark is devoted to those of us who are responsible for archives and manuscript collections relating to the health sciences. There are many new problems in the management of archives which are peculiar to our field. A few years ago, for example, patient records were rarely collected for historical purposes. Now examinations of social trends, studies on the impact of medical technology and a quantitative approach to history have made patient records desirable historical documents. At the recent AAHM Luncheon sponsored by ALHHS, historians and archivists alike crowded together to share their mutual concerns about the use and protection of patient records.

Our workshop launched the discussion, but it is by no means the end of it.

Our summer issue is also intended to underscore a concern expressed by our membership during the annual meeting that many of our colleagues who are archivists at hospitals and other medical institutions do not recognize us as an organization which addresses their problems. It has been pointed out that even the name of our organization suggests that our purpose is to serve librarians and not archivists. Over the next year we hope to contact more archivists and let them know about the Association. Perhaps a name change is in order. I hope that all of you will think about this during the coming months and be ready to discuss this in Baltimore.

It was wonderful to see so many of you in Birmingham. Personally, I have come to appreciate the true meaning of "Southern Hospitality" and all that it implies. I hope you have a great summer!

Glen Jenkins
President, ALHHS

Applying "Documentation Strategy" to Medical Center Archives: Some Introductory Considerations

by Paul G. Anderson
Washington University
School of Medicine Library

"Documentation strategy" is a concept that presently receives a great deal of attention and debate in the archival profession. It has been defined by Helen Samuels of MIT as "a plan formulated to assure the documentation of an ongoing issue, activity or geographical area... The strategy is ordinarily designed, promoted, and in part implemented by an ongoing mechanism involving records creators, administrators, (including archivists), and users. The documentation strategy is carried out through the mutual efforts of many institutions and individuals influencing both the creation of the records and the archival retention of a portion of them. The strategy is refined in response to changing conditions and viewpoints..." (1) The origin of the concept may be traced to arguments in the 1970's for "activist" acquisition policies, with important refinements added in the early 1980's by the findings of the Joint Committee on Archives and Science and Technology. (2) Current authorities on documentation strategy besides Samuels include Larry J. Hackman and Joan Warnow-Blewett. (3) Thus far, no explicit applications to the management of medical archives have appeared in the literature.

All arguments for archival activism are grounded to some degree in dissatisfaction with the traditional acquisition practices of governmental and institutional repositories. Traditional archival management is based foursquare on the principle of provenance, which tends to define historical evidence in terms of certain records retired from certain administrative offices. Documentation strategy does not necessarily call for abandoning the principle as it pertains to arranging and describing materials. It does, however, entail a rethinking of how both the scholarly and the general public might better be served by reexamining choices and adopting new approaches to them.

In the case of an archives of a school of medicine, for example, a traditional acquisitions policy could be limited to records of chief administrative offices and decision making bodies, for example, file series from the office of the dean and minutes of the executive faculty council. To these might well be added the personal papers of a selected number of prestigious faculty and various categories of ephemera and memorabilia. (4) A documentation strategy for this same repository could begin by questioning whether or not the principal functions of the school, namely academic instruction and research, are being covered adequately. It very possibly could identify other areas of the school's operation that have lasting impact for which archival documentation is needed, for example, personnel and financial management and community and political involvement.

In addition to examining a particular choice of records and suggesting others, documentation strategy can address such matters as better connections with a records management system (if one exists at all) and improvement of storage facilities. Other questions worth consideration include the possibility of seeking new sources of support through advisory boards and friends groups and whether or not the archives should engage in creating historical evidence through such means as oral history and photograph and video coverage.

Because the health sciences and health care fields encompass
so much intellectual and social activity, no one archives can come close to documenting it all. This is why the cooperative aspect of documentation strategy has such potential significance. Repositories serving different kinds of health institutions, e.g., hospitals, research institutes, colleges, need to become more aware of each other’s programs and support each other’s work. A single medical center or university could house several specialty archives. For example, there is a growing awareness of the significance of preserving clinical records for long-term research purposes, but for legal and ethical reasons, only a hospital archives might be eligible to retain such data. The records of grant-funded programs of the teaching faculty who staff the hospital could be retained by an associated university’s archives. A joint documentation strategy could at least bring together the intellectual controls for these record groups.

One concrete expression of documentation strategy in practice today is the discipline-based history center, whereby one organization acts to solicit and direct the placement of archival materials in various repositories. Such centers have been developed to great success among archivists of the history of physics and chemistry. No such center yet exists for the health sciences, but discussions have been held about founding one. This was one of the topics considered by a Conference on Documenting Modern Medicine sponsored by the National Library of Medicine and the American Association for the History of Medicine and held at NLM in June 1988.

A more definitive study of the applications of documentation strategy to medicine will appear in a forthcoming work, Managing the Documentation of Modern Medicine which is being compiled and edited by Nancy McCall and Lisa Mix of the Alan Mason Chesney Medical Archives of the Johns Hopkins Medical Institutions. The work will incorporate findings of a recently concluded three-year national records survey of academic medical centers conducted by McCall and Mix that was funded by the National Historical Records and Publications Commission, plus contributions from experts in the fields of records management, archival management, and medical history.


Historical Collections of the Kornhauser Health Sciences Library University of Louisville
by Sherrill Redmon, Archivist

As a new member of ALHHS, I am pleased to be invited to describe the Kornhauser Historical Collections in The Watermark. Spreading the word about our program is one of the duties that we archivist and special collections curators have trouble getting around to. With a patron waiting for the next box of manuscripts and an administrator tapping his fingers while I put the finishing touches on the annual report, I sometimes put outreach opportunities in the To Do When Time Allows folder. We all know what that means.

The University of Louisville’s Kornhauser Library preserves a valuable body of historical manuscripts documenting the history of medical training and health care practices in Kentucky during the nineteenth and twentieth centuries. The holdings include archives of the University of Louisville School of Medicine from its founding (as the Louisville Medical Institute) in 1837 to the 1960s. Similar records of the U of L’s four largest rivals, which she absorbed in 1908, reside here, too. So do records of local schools of dentistry, nursing, and public health. The school records are mainly enrollment registers, catalogs and annual announcements, medical journals published by the schools, faculty articles, lectures and addresses, student notebooks, photographs, and memorabilia such as class tickets and diplomas. We also collect records of local and state hospitals, health departments, medical societies and other professional organizations.

In addition to university and other institutional records, the unit also boasts a growing body of personal papers of Kentucky physicians, dentists, pharmacists, nurses, and health administrators, many of whom have achieved national prominence in their fields. Notable among them are Daniel Drake, Charles Caldwell, medical educators Lunsford P. and David W. Yandell, Kentucky public health pioneer and AMA organizer Joseph N. McCormack and his son and successor Arthur T. McCormack, neurosurgeon R. Glen Spurling, and psychiatrist S. Spafford Ackerly. Cardiologist and bibliophile Emmet Field Horine donated his extensive collection of nineteenth century manuscripts, printed primary sources, and books relating to anesthesiology. The library particularly values the thousands of biographical sketches, reports, notices and articles from nineteenth century newspapers and journals gathered by the WPA historical research project to produce Medicine and its Development in Kentucky (1940).

In its more than 150 years of operation, the library has also assembled an outstanding collection of rare medical and scientific books and journals, antique medical and dental instruments, and other artifacts. The specially designed Joan Titley Adams History Room is named for the Kornhauser Library director who masterminded its inclusion in the plans for the Kornhauser Library in the late 1960s. It houses the surviving volumes from the original medical school library--all acquired before 1850--and fine book collections focusing on the history of psychiatry and phrenology.

Until 1981, maintenance of the library’s special collections depended on scraps of time and inspiration wrested from the busy schedules of historically-minded librarians and occasional
medical and dental faculty members. Without space or staff, about all they could do was to accept and acknowledge donation, identify and remove archival materials from the general collections, and protect the materials behind locked doors. When I joined the staff on a half-time basis to establish a more systematic archival management program, I inherited a diamond very much in the rough. It has taken library director Leonard Eddy and me a lot of hard work, but our house is in reasonable order now. Reference services have quadrupled. Nearly all of the mystery packages have been eliminated and their contents boxed and labeled and reduced to some level of intellectual control. With help from NEH, we have preserved the crumbling WPA Records on microfilm. Small grants from a local foundation have enabled us to create a computer-generated index to some 30,000 alumni of the city's medical colleges. This has greatly facilitated our ability to respond to the scores of genealogical inquiries we receive every year which open with "My grandfather went to medical school in Kentucky..." 

A great deal remains to be done in the way of reappraisal, processing a growing backlog of manuscripts collections and archives, and coming to grips with our artifact collection, so the next time you come to Louisville you won't catch us eating bonbons and watching the soaps.

The department's hours are 8 to 5, Monday through Friday, but since I am only in the office two or three days a week, we encourage visitors and researchers to notify us in advance. If necessary, we can arrange for materials to be consulted after hours and on weekends. For more information, contact me or Leonard Eddy (Kornhauser Library, University of Louisville, Louisville, Kentucky 40292, phone (502) 588-5775).

Medical Librarian as Archivist: I
by Jodi Koste, Archivist
Tompkins-McCaw Library
Medical College of Virginia/Virginia Commonwealth University

So you've just inherited your institution's archives, the personal papers of a local physician, and the records of a county medical society. Where do you go and what do you do? Sit down, relax and read on!

While there are many similarities between archival administration and librarianship there are also substantive differences. The archivist or manuscripts curator handles unique materials ranging from handwritten documents on parchment to magnetic computer tapes. He or she acquires collections, appraises the materials to determine their administrative, legal, fiscal or historical value, and arranges and describes them to facilitate their use. In addition, the archivist or manuscripts curator is responsible for the physical preservation of the materials in his or her custody and for providing reference service or access to these unique items.

There is, of course, a wide range of published literature to consult. For the basic archival functions you may wish to review Maynard Brichford, Archives & Manuscripts: Appraisal and Accessioning; David B. Gracey II, Archives & Manuscripts: Arrangement and Description; Lucile Kane, A Guide to the Care and Administration of Manuscripts; Sue E. Holbert, Archives & Manuscripts: Reference and Access; and Mary Lynn Ritzenhaler, Archives & Manuscripts: Conservation. Those desiring a more general overview may wish to consult Richard H. Lytle, ed., Management of Archives and Manuscript Collections for Librarians; Ann Pederson, Keeping Archives, and Maygene F. Daniels and Timothy Walch, eds. A Modern Archives Reader: Basic Reading on Archival Theory and Practice.

There are a number of groups you may contact for assistance. The largest archival association in the United States is the Society of American Archivists (SAA), a professional organization founded in 1936. SAA has an active publications program, sponsors workshops and other activities, and keeps the profession abreast of educational opportunities available in the United States. SAA meets annually in the Fall. The 1989 meeting will be held in St. Louis, Missouri from October 23 through October 28. Traditionally, SAA offers a number of preconference workshops. This year they have scheduled a two day workshop entitled, "Archives: An Introduction." For further information contact the Society of American Archivists, 600 S. Federal, Suite 504, Chicago, Illinois 60605, (312) 922-0140.

In addition to SAA, there are over fifty regional archival organizations in the United States and Canada. Some of the larger and more active regional associations are the Mid-Atlantic Regional Archives Conference (MARAC), the New England Archivist (NEA), the Midwest Archives Conference (MAC), and Society of California Archivist (SCA). Many of these organizations sponsor introductory programs and workshops on basic archival functions. For the regional association in your area consult the SAA's Directory of Regional Archival Organizations.

Many colleges and universities offer courses in archival administration and related subjects. Columbia University School of Library Service often offers an introduction to archives and manuscripts in its summer Rare Book School. Some larger archival agencies offer their own introductory courses or institutes. The National Archives and Records Administration (NARA) sponsors the Modern Archives Institute which will be held this year in Des Moines, Iowa, from July 31 to August 11. The Institute is designed to provide an overview of archival principles and functions.

Medical Librarian as Archivist: II
by Mary R. McCarl, Director, Jefferson County Medica Society/University of Alabama at Birmingham Health Science Archives

I have just finished attending my first meeting of the Medical Libraries Association. I was particularly struck by a poster session by Elizabeth E. Coldsmit of Capital Health System, Harrisburg Hospital, Harrisburg, Pennsylvania, and Beth A. Evitts of the Hospital Library, York Hospital, York, Pennsylvania, where they recounted their experiences as "lone arranger" in their small hospitals, the first, and for many librarians, the only brush with archives that they will ever have. The booth was crowded with anxious and interested librarians, seeking information about a new and exotic sub-specialty.

From my perspective, as an archivist attending my first meeting in medical librarianship, this anxiety was caused by the fact that archival material is by definition both unique and
untidy. It does not seem to lend itself to easy storage, access, or intellectual manipulation. I was struck, in my wanderings through the exhibits at the meeting, how much medical librarians are taught and teach others to retrieve and manipulate books, and especially articles, already cataloged in the specialized on-line bibliographic databases. Archives are different: you have to learn to wing it with archival material. Yet there are aids available to standardize the recording of the archival records; books and guides of various sorts are available through the Society of American Archivists, (600 South Federal, Suite 504, Chicago, IL 60605; (312) 922-0140).

Your first call to act as an archivist will probably come from someone in the public relations office, who has been reminded that an important medical center anniversary is coming up. With a vague idea that librarians are systematic souls, they will either expect you to have the historical material already arranged, or they will arrive with large cartons of unsorted material and expect you to immediately put it in order.

Do not panic, but follow the first rule in archival arrangement, "respect des fonds," or respect of the original administrative order. Administrative records of all modern bureaucracies are governed by the same rules of arrangement: by function, chronologically, or alphabetically. Follow or recreate this arrangement. If some material seems to be of unusual value or interest, resist the temptation to pull it out of its original order. Rather, refer to it in notes or indices. From a storage point of view, you will probably want to separate photographs and other graphic material from the papers. Again, cross-reference them with the papers. All this can be done using a simple, business oriented relational database on a micro computer. It is a strictly in-house arrangement for the convenience of your own administrators.

Yet suppose you wish to reach a national audience, and to attract historical researchers. How does your material relate to the records of other medical centers? By the end of 1989 we should be able to fit medical center records into a national context. Nancy McCall, of the Archives of Johns Hopkins, is finishing the book that will do just this. She and her associates requested information from 115 modern medical centers in this country, centers with medical schools and teaching hospitals. She is concerned with material on a much more complex level, material that is governed by complicated federal regulations and rules of privacy. She is working with archives in depth. Archives in depth have to be handled by full-time professional records managers and archivists. The basic definition of archives is that they are the obsolete paperwork of an institution. The rule of thumb concerning 20th century institutions is that at any one time 60% of the paperwork is administratively useful, 35% is discardable as soon as it is read, and only 5% is truly archival. Every item once had an administrative function; many of them retain fiscal and legal value even they are no longer necessary for day to day administration. Some medical center records are governed by federal regulation that overrides local considerations. To organize the orderly flow of this material requires going into the offices of origin and intervening, as it were, prenatally. This is beyond the duties of the medical librarian turned archivist. You should concentrate on the documents that show birth, and growth of the whole institution, the import-
Brief Notes on Security
by K.E. Donahue
History & Special Collection
Biomedical Library
UCLA

Marking documents, manuscripts, prints, and rare books is a much discussed topic. Today the surfacing consensus is, to quote the “Guidelines for the security of rare book, manuscript, and other special collections: a draft” (RBMS Security Committee) “marking is essential.” We all recognize the reasons for marking and we all also recognize the problems a marking program poses. It is terribly labor intensive and most libraries and archives don’t have the staff to do it retrospectively. Rare book collections can stamp books as they are received, but retrospective stamping is daunting for large collections. For manuscript collections anything other than selective stamping of high visibility items may be impossible. Institutional archives may not need to stamp anything other than photographs, since often archival material is relatively well identified as belonging to the institution that generated it.

For my own information, I surveyed Special Collections and Archives on the UCLA campus and found the following. Starting with my own collection, we stamp all rare books on the verso of the title page with our Library of Congress code. We have started and almost completed a retrospective stamp of all rare books using student assistants. The general Special Collections does not stamp rare books yet, but is planning to do so. Manuscripts with high recognition value are stamped. The University Archivist said they do not stamp. He said eventually they might do the photographs, since they tend to be susceptible to theft. Everyone agreed that unfortunately property stamping is necessary.

Recommended Reading:

Sources for Conservation/Preservation Supplies

Conservation Materials, Ltd.
Post Office Box 2884
1165 Marietta Way
Sparks, Nevada 89431
(702) 331-0582
catalog available

Conservation Resources International, Inc.
8000-H Forbes Place
Springfield, Virginia 22151
(703) 321-7730
catalog available

DEMC0
Post Office Box 7488
Madison, Wisconsin 53707
catalog available

Gaylord Bros. Inc.
Box 4901
Syracuse, New York 13221-4901
catalog available

Hollinger Corporation
Post Office Box 8360
Fredericksburg, Virginia 22406
catalog available

Light Impressions
439 Monroe Ave.
Post Office Box 940
Rochester, New York 14607-3717
(800) 828-6216
catalog available

Pohlig Bros. Inc.
Century Division
Post Office Box 8069
2419 E. Franklin St.
Richmond, Virginia 23223
(804) 644-7824
catalog available

Talas
213 West 35th St.
New York, New York 10001-1996
(212) 736-7744
catalog available ($5.00--prepayment requested)

University Products
Post Office Box 101
South Canal St.
Holyoke, Massachusetts 01041
(800) 628-1912
catalog available

The Official Museum Directory
Contains an appendix of museum products and services with an index.
ALHHS ALHHS ALHHS ALHHS

Current Officers
President--Glen Jenkins
President-Elect/Steering Committee--Philip Teigen
Secretary-Treasurer--Elizabeth B. White
Editor, Watermark--Judith Overmier
Steering Committee Member at-Large--Lilli Sentz
Steering Committee Member at-Large--Barbara Paulson

Steering Committee Member at-Large--Philip Teigen

Ad Hoc Committees and Other Appointments
Membership Officer--Mary Ann Hoffman
Archivist--Dorothy Whitcomb
ALHHS Program Committee Chair--Edward T. Morman
AAHM Luncheon Workshop Coordinators--Judith Overmier,
Nancy Zinn
Publications Committee:
Nancy Zinn, Chair
Janice Braun (Conservation)
Estelle Brodman
Samuel A. Davis
Katharine E.S. Donahue (Ex libris)
Joan R. Echtenkamp
Glen Jenkins
Margaret Jerrido (Bibliographies)
Lucretia McClure (Book Reviews)
Mary H. Teloh
Dorothy Whitcomb (Rare Book Trade)
Elizabeth B. White (Membership)
Judith Overmier, Editor

Association of Librarians in the History of the Health Sciences
Annual Meeting
Birmingham, Alabama - April 27, 1989

Glen Jenkins, President, called the meeting to order and
thanked everyone who had worked so hard to make this meeting
a success. Particular thanks were given to Mary Teloh, Mary
McCarl, and Tom Horrocks for their parts in planning the
program, in assisting with the local arrangements, and in preparing
the AAHM lunch session on patient records and historical research.

Nancy Farnham, Terry King, Mary McCarl, Sherrill Redmon,
Anne Toohey, Sheila Shaftel, and A.J. Wright were each
recognized because this was the first ALHHS meeting that they
have attended.

Elizabeth White, Treasurer, reported on the Association’s
finances. At the end of March, 1989, there was $4,124.53 in the
ALHHS credit union account. This account draws interest for
ALHHS (approximately $40.00 per quarter) and allows all the
bills to be paid easily with money orders. Our Association now
has 97 voting members, but several of these may soon be
dropped from our role for non-payment of dues.

Since Judith Overmier, editor of The Watermark, and other
members are able to solicit ads from many rare book dealers, our
publication is self supporting. Currently The Watermark is
mailed to 138 individuals, libraries, or subscription agencies.

Nancy Zinn announced that the Publications Committee will
meet after the business meeting to discuss the topics to be
covered in The Watermark for the next year. She also asked that
the full list of members of the Publications Committee be listed
in the next issue of The Watermark.

Nancy Zinn also reported that the work of the Committee for
Genre Terms and Standardized Citations was finished. The
genre terms were submitted to the RBMS of ACRL and our
recommendations for standard citations had been submitted to
the Library of Congress. A motion was made, seconded and
passed that this committee be thanked for their work and dis­
missed.

Mary Ann Hoffman, newly appointed as a membership
recruiter for ALHHS, asked for help in finding new members.
She would appreciate receiving the names of individuals who are
potential members or getting ideas from members on recruiting.
A membership brochure will be among the first projects to be
finished. The brochure with a letter will be sent to various
groups of individuals to tell them about ALHHS.

Tom Horrocks talked for a few minutes about the AAHM
lunch session on patient records and historical research. There
will be four panelists, two historians and two archivists. Sixty
people have signed up for this discussion.

John Parascandola’s announcement that the National Library
of Medicine’s 17th century catalog has been published was met
with applause and hurrah. This catalog, one volume on acid free
paper, has 13,000 citations and is available from the Government
Printing Office for $45.00.

John also talked about the preservation microfilming project at
NLM. The History of Medicine Division is responsible for the
books selected for this program. The monographs from 1871-
1913 are in the worst condition. The current program is able to
film about 250 titles/week. There may be additional funds
available for microfilming and conservation of special collec­
tions at sites other than NLM. Anyone interested in this program
should write to Margaret Byrnes, Head Preservation Section,
National Library of Medicine, 8600 Rockville Pike, Bethesda,
MD 20894.

Another development is the transfer last summer of the his­
torical film collection from NMAC to NLM. All pre-1970 films
will be cared for in the History of Medicine Division. Classic
films will be stored in their vault. Sarah Richards is in charge of
the Historical Film Collection.

Glen Jenkins announced the results of the Spring election.
Barbara Paulson is a new member of the ALHHS Steering Com­
mittee. Phil Teigen is the new President-Elect and/or Steering
Committee Member at Large. Elizabeth White was reelected as
Secretary-Treasurer.

Dorothy Whitcomb reported on a purchasing consortium for a
large collection from Kohler on the Health of Towns. Several
libraries agreed to purchase portions of the collection so that it
would be available in the United States. After the titles were
divided among the institutions the costs were prorated to each.
The unique arrangement allowed institutions access to materials
they needed but which no one institution could afford.

Ed Morman talked for a few minutes about next year’s
meeting in Baltimore. The dates for the meeting are May 10-13, 1990. The hotel will be across town from Johns Hopkins but he will try to arrange our meeting so that we all get a chance to see the Institute and historical collections. The theme for the ALHHS program will center on new developments in preservation with several speakers from the Baltimore area.

John Erlen announced the Society for Health and Human Values usually reserves 4-6 slots in its program for historical papers. This Society has about 700 members, a journal, Medical Humanities Review, and has met in the past with AAMC. This group is looking for another medical meeting with common goals to join for complimentary meetings. Kathy Donahue asked if ALHHS might consider having a corporate membership in the Society to tie our organizations closer. She also suggested more information about the Society and its annual meeting could appear in The Watermark.

John Parascandola is chair for the jury to select papers for the Murray Gottlieb Prize which is presented by the Medical Library Association to the health sciences librarian for the best, unpublished essay on the history of medicine or allied health sciences. Papers for consideration for the 1991 award must be received by Sherry Montgomery, 1989-90 Awards Committee Chairman, Leon Levy Library, University of Pennsylvania, School of Dental Medicine, 4001 Spruce St., Philadelphia, PA 19104-6041 by December 15, 1989. Individuals can contact the Awards Committee Chairman for more specific information about criteria for this award.

The last item of business was the discussion about proposed changes in the Constitution and By-Laws for ALHHS. Lucretia McClure presented the work of the Committee on the Constitution which included herself, Inci Bowman, and Dorothy Whitcomb. The Committee moved that the new Constitution be adopted as it was printed in The Watermark. This was seconded by Emil Frey and discussion followed. Some of the changes mentioned were adding education to the statement of purpose, omitting the dollar amount for the dues, and the provision of a nominating committee. The question was called and by unanimous vote of the 21 members present the decision was made to send the new constitution to the full membership for a mail ballot this summer. A two-thirds majority of the voting membership is needed to accept the new constitution.

Ed Morman asked that the Steering Committee and membership might consider changing the name of ALHHS. The "librarian" part of the name might not reflect the broad interests of our full membership. He asked that there be some discussion of this issue in The Watermark. Perhaps a letter to the editor would be appropriate if someone feels strongly about the issue or has an alternate name to suggest.

The meeting was adjourned by Glen Jenkins.

EXTENSION OF VOTING DEADLINE

The deadline for the return of ballots on our Constitutional Revisions has been extended to August 1, 1989. We need a 2/3 majority of voting members to approve the changes.

PLEASE VOTE.
emphasized several potential problems, such as how to gain access to patient records, how to analyze the ever-increasing volume that is found in twentieth-century clinical records, and how to interpret the sometimes sketchy information contained therein. Dr. Howell then discussed potential prospects for the use of patient records. He emphasized the desirability of learning how medicine was actually practiced by examining records of physicians who did not publish or do research. He also discussed how clinical records can help historians understand the relationship between medical theory and medical practice. Dr. Howell closed his presentation by referring to the importance of patient records for his own research into the study of the development of medical technology in twentieth-century America.

Dr. Pressman outlined two ways a historian can approach patient records. One, a macrolevel or sociological approach, affords a statistical or demographic reading of the patient population as a whole from coded digests of the records. This allows the historian to analyze changes in the social function of the hospital, as its clientele shifts, either clinically or socioeconomically. In addition, the historian has a basis by which to assess how the treatment of any individual patient compares to their natural "control" population. This latter goal works best with collections that have not been sampled, but are preserved in their entirety. Another approach, according to Dr. Pressman, is the microlevel or historical narrative where the individual patient record is examined as an historical artifact in itself. From such a reading of selected records that span the duration of the institution, the historian can reconstruct something akin to a "tree ring" analysis, making visible infrastructure changes such as the introduction of the case record, organizational shifts, new types of treatments, etc. By looking within a particular record, continued Pressman, historians can learn how that patient was reconstructed by the medical and bureaucratic apparatus; e.g. what went into the clinical history, and how important were family wishes in determining when a patient was discharged? Dr. Pressman closed his talk with brief remarks concerning his use of patient records in his research into the history of psychotherapy in America.

Mr. Bragg spoke about the McLean Hospital's access policy regarding its patient records. Although the Hospital is not opposed to historians using its patient records, Mr. Bragg stressed that the Hospital's prime responsibility was to its patients, thus the historian must understand the Hospital's concern for the confidentiality of clinical records (in this case, psychiatric records). Mr. Bragg outlined the strict procedure which a historian must follow if he or she wished to consult patient records at the Hospital. Once permission is granted, the Hospital has the right to review the historian's manuscript before it is published, in order to protect itself as well as the patient's confidentiality.

Ms. McCall, on the other hand, did not see the access to patient records as the critical issue; she was more concerned with what the historian does with the information after gaining access. Regarding access to clinical records, Ms. McCall raised an interesting point: there are a number of individuals in a hospital community who have access to these records and who are not required to go through the process of gaining access as historians must do. She has found that historians in general are honest and can be trusted.

A lively discussion followed the last speaker. Historians, archivists, librarians, and physicians offered many important comments and raised a number of provocative questions.
any contemporary medical problem), included the difficulties of writing contemporary history, the changing definitions of disease, the role and experiences of stigmatized groups, the relationship of medical research and society, of medical research and practice, of the government's role in directing, encouraging and funding such research, and funding and providing social services, the wide range of therapeutic processes and personnel (including quack remedies), among others. These all are questions for historical study, and require that the original source materials be available and accessible.

Speakers on the last part of the program included Peter Hirtle, from the National Library of Medicine, Ramunas Kondratas, from the Smithsonian Institution's National Museum of American History, and myself. Peter spoke eloquently of the major problems with preserving governmental records in the absence of a coordinated policy which articulates the need for identifying and saving records of all types. The Freedom of Information Act and the privacy act also mitigate against the saving of candid, information-rich records and access to them.

Ray Kondratas focussed on the importance of three-dimensional objects to the historical record. Medicine, particularly in the 20th century, is rich in technological developments, examples of which must be preserved. The Smithsonian is looking at the technology of AIDS research, the therapeutics currently being explored and used (both conventional and alternative), and planning for the acquisition of equipment, medicines, "gadgets" etc. They, too, are experiencing the space crunch which afflicts every collecting institution, and calls for well-thought out policies on which to base collecting decisions.

My assignment was to outline the role of university and other agencies in documenting the AIDS epidemic. I gave a brief introduction to documentation strategy, a process currently being investigated by the archival community. It calls for the participation of a wide variety of agencies and institutions in defining the collecting field (whether a subject or geographical region, for example) and developing procedures for record identification, preservation and access. Universities, by virtue of their goals and activities can provide leadership and expertise as well as space for collections. Other groups, beginning with the records' creators, and including state and local historical societies, state and municipal archives, social service organizations, community support agencies, need to be part of the process.

Historians tend to want to cast their nets broadly to preserve all the records relevant to their subject(s). While medical libraries have come only lately to an awareness of the need to collect contemporary papers and archives associated with the history of medicine, they will have to add this responsibility to existing obligations, generally without also receiving additional staff or funding. The history of the activities associated with the response of a community, a state or a region to a medical emergency such as AIDS can only be documented through the cooperation of many different organizations and individuals. Historians must be partners with librarians and archivists in this enterprise, and contribute their perspective to decisions on what to keep, and how much to keep. Universities, historical societies, state archives and records creators must find locations for such records and provide organization and access to them. If we needed cooperative efforts, this is the time.

**EX LIBRIS EX LIBRIS EX LIBRIS**

by Katharine E.S. Donahue

**New Acquisitions**

Our corresponding libraries report significant additions of manuscripts and books to their respective libraries.

**John Parascandola,** History of Medicine Division, National Library of Medicine reports the acquisition of an important manuscript of the minutes of the Company of Physicians of Padua from November 1, 1382 to June, 1414. Entries include materials on the admission of new members, the duties of members, and proposed reforms. Since this guild of physicians regulated the practice of medicine in Padua in the fourteenth and fifteenth centuries, the manuscript should provide significant insight into the medical profession in early Renaissance Italy.

The Owen H. Wangersteen Historical Library of Biology and Medicine has acquired a manuscript collection of seven generations of a French surgical dynasty. It includes the papers of Pierre Pamard (c. 1669-1729), Nicolas Dominique Pamard (1702-1783), Pierre Francois Benezet Pamard (1728-1793), Jean Baptiste Antoine Benezet Pamard (1763-1827), Jean Baptiste Marie Pamard (1764-c. 1822), Paul Antoine Marie Pamard (1802-1872), and Alfred Pamard (1837-1920).

"The Pamard manuscripts preserve personal and professional papers for each generation, beginning with the 17th century founder Pierre Pamard, and extending to the seventh generation, Alfred Pamard, surgeon at Avignon at the beginning of the 20th century.

The archives include medical school lecture notes, diplomas, awards, and membership certificates, drafts of papers and books, case records in the thousands, public health notices and statistics, remedies and recipes, correspondence, legal papers, diaries, speeches, drawings, poems and stories. Material from the late 18th to early 19th century dominates. There is a concentration in ophthalmology, with perhaps a third of the case records in this specialty, but there is also good material in vascular surgery, nervous diseases, genitourinary diseases, lithotomy, breast cancer, and other tumors, plastic and orthopedic operations, operative gynecology, pediatrics, anesthesia, electrophysiology, and vaccination. The personal health diary and correspondence files of J.B. Antoine B. Pamard extend the range of the collection to social history, documenting family life and the medical infrastructure of the Midi in the early 1800's. As remarkable as the surgical dynasty itself, is the preservation of so much of its documentation in a single repository at the University of Minnesota."

**Barbara Paulson,** Special Collections, Health Sciences Library, Columbia University has added the papers of David Webb Hodgkins to their collection. Hodgkins (1834-1898) graduated from the New York College of Physicians & Surgeons in 1863, and served as a Union Army medical officer. His papers include letters to his parents while he was a student at P & S, and an account of a naval battle off Wilmington, North Carolina, in 1864.

The History & Special Collections Division of the Louise Darling Biomedical Library, UCLA has received as a gift two files of correspondence between Dr. Elmer Belt of UCLA and
Dr. Charles Huggins, surgeon. Dr. Huggins, the only surgeon to win the Nobel Prize, determined that prostate cancer is hormonally related.

The local history collection of the Dana Medical Library, University of Vermont, has been enriched by the addition of a rare pamphlet, An Introductory Address Before the Students and Trustees of the Vermont Academy of Medicine, Delivered at the Opening of that Institution, Castleton, March 11, 1840 by Horace Green. Joanna Weinstock and Cathy Goddard did not know of any other institutions holding copies. Any other copies out there?

Cory Oysler of the History of the Health Sciences Library and Museum, University of Cincinnati reports adding the two-volume set, Obstetric Tables (1835) by George Spratt. This edition includes hand-colored plates with pop-up obstetric illustrations and moveable parts. Elizabeth Ihrig of The Bakken: a Library and Museum of Electricity in Life, writes that two early German works on electricity and magnetism were added to The Bakken. J.G. Kruger's Zuschrifft an seine Zuhorer...seine Gedanken von der Elektricitat... (Halle, 1745) is an extremely early work on electricity in medicine and especially interesting in complement to the 1744 edition acquired last year by The Bakken. Other works by Kruger are held in the collection. The second work of note is C. Hansteen's Untersuchungen über den Magnetismus der Erde (Christiania (Oslo), 1819). It contains Hansteen's theory of terrestrial magnetism.

The Historical Collections of The Claude Moore Health Sciences Library at the University of Virginia recently received two additions to the extensive Philip S. Hench Walter Reed Yellow Fever Collection owned by the Library. These supplementary materials, gathered by Dr. Philip S. Hench and donated by his son, Dr. P. Kahler Hench, shed additional light on the landmark experimental work conducted by the U.S. Army Yellow Fever Commission in Cuba during the early years of this century. Of particular interest are an autograph letter written by Dr. Walter Reed to his wife, a cache of materials covering part of Major Jefferson Randolph Kean's tenure at Camp Columbia (one of the principal sites of the Commission's research), and a wealth of correspondence documenting the general coordination and provenance of the Hench Collection. For further information please contact Joan Echtenkamp Klein, Historical Collections Librarian, The Claude Moore Health Sciences Library, Box 234, University of Virginia Health Sciences Center, Charlottesville, VA 22908.

Vanderbilt Medical Center Library (History of Medicine Section) recently completed the processing of the papers of Ernest W. Goodpasture, M.D., 1886-1960. Dr. Goodpasture was an internationally known pathologist, Dean at Vanderbilt from 1942-1947, and Scientific Director of the Armed Forces Institute of Pathology, 1955-1960. During his 30 years at Vanderbilt University, Goodpasture's research dealing with the isolation and identification of viruses yielded the first practical method for the mass production of vaccines. The Goodpasture papers include correspondence, manuscripts, reports, and speeches chronicling Goodpasture's research and professional activity from 1917-1960. A register for this collection is available from: Mary H. Teloh, Special Collections, Vanderbilt Medical Center Library, Nashville, TN 37232-2340.

Rounding out our section on new acquisitions comes word from two libraries of the addition of large collections or libraries. Reva Hurtes of the Mary & Edward Norton Library, Bascom Palmer Eye Institute reports purchasing two large European ophthalmological libraries and thus adding close to 3000 items to their historical and rare book collection. The books range in date from the 15th century to the 19th century. All have been entered into OCLC. Congratulations. According to Jonathan Erlen of the Falk Library of the Health Sciences, University of Pittsburgh, they will be receiving a major rare book collection in the history of surgery from the estate of Dr. Mark Ravitch. To quote Dr. Erlen, "I am not certain as to the contents of this gift but I know that it will be both sizeable and will contain a number of very rare items." We will await further word and details.

Finally, in the realia department, the History & Special Collections Division of the Louise Darling Biomedical Library has acquired a 16th century wood block used to print one of the illustrations from the 1565 edition of Mattioli's Commentarii in sex libros Pediacii Dioscoridis... It was purchased in honor of the late Jacob Israel Zeitlin of Zeitlin & VerBrugge Booksellers.

Main Entries

Dr. Judith Overmier, Curator of the Owen H. Wangensteen Historical Library of Biology and Medicine, has accepted a position in the School of Library and Information Sciences Studies at the University of Oklahoma. She will be teaching history of books and printing and rare book librarianship starting August 15.

Cory Oysler is currently the Acting Director of the History of the Health Sciences Library and Museum, University of Cincinnati during Billie Broadus' sabbatical.

Cathy Goddard is the new reference librarian at the Dana Medical Library, University of Vermont. In addition to reference responsibilities, she will be involved with the historical collections and their retrospective conversion to the NOTIS system and into OCLC.

Analytics

The Preservation Department of the New York Academy of Medicine has been awarded a $25,000 New York State Discretionary Grant. The grant is to cover a condition survey and rehousing of a portion of the Academy's portrait collection.

The Falk Library of the Health Sciences, University of Pittsburgh, is creating a doctoral level course for the Graduate School of Public Health entitled "Historical and Sociological Perspectives in Public Health" which Dr. Jonathan Erlen will co-teach with a colleague in the sociology department beginning in the fall semester.

A Grants-in-Aid of Research Program has been reestablished at the Bakken in order to encourage the use of the collections. Funds are available (up to $1000) for research at all levels at The Bakken. Applications or inquiries should be sent to John E. Senior, Director at the Bakken, 3537 Zenith Ave. So., Minneapolis, MN 55416.

Judith Overmier, Mary Ann Hoffman, and John Parascandola (chair) are on the Medical Library Association's Murray Gottlieb Essay Jury. They urge us to submit our unpublished essays on the history of medicine and allied sciences. Many
ALHHS members have won the Gottlieb Prize, including Chris Hoolihan, Robin Overmier, and Estelle Brodman.

Billie Broadus, Director of the University of Cincinnati History of the Health Sciences Library and Museum is on Sabbatical from January through June, 1989. She is editing the Civil War letters of Benjamin L. Askue, an infantryman, cook, and nurse from Ashtabula, Ohio for future publication. She was also the Program Chair of the History of the Health Sciences Section of the Medical Library Association which met in May in Boston.

Several exhibit items from The Bakken: To mark the beginning of trout season, The Bakken mounted a display of some fine renaissance books on fish by Gesner, Salviani, Rondalet and Belon. Also on display was a rare copy of Oppian's Halieutika, printed in Italy in 1478. Two of the Bakken's books went to help make up part of an exhibition at the downtown Minneapolis Public Library, supplementing "Revolution in Print: France, 1789." The two books were Benjamin Franklin's Autobiography, first edition in French, Paris, 1791; and M.J. Brisson's Dictionary of Physics, Paris, 1790.


Edited by Katherine Mandusie McDonell, IHS medical research historian and curator of the Indiana Medical History Museum, the 262-page publication examines Lindsay's most important surgical cases during 20 years of practice, which he had recorded in four pocket-sized, leather-bound notebooks. Also included are 50 photographs illustrating Lindsay's original notes, medical instruments of the period and surgical techniques.

And last, but certainly not least, Lucretia McClure is the new President-Elect of the Medical Library Association.

Queries
From Samuel Davis of the Scott Memorial Library, Thomas Jefferson University, Philadelphia, PA 19107 (215 928-7966) comes the following request: "Can anyone part with a copy of R. Max Geopp's state board questions and answers, especially the Nursing state boards, for our Jeffersoniana collection? Please contact me if you can help us, to avoid duplication."

From the Dana Medical Library, University of Vermont, Burlington, VT 05405: Contact Cathy Goddard. "We are preparing to organize our collection of medical instruments--how have you organized and labeled instruments? Grouped by subject, by accession number or...?" (Sounds like a question for a member of the Medical Museums Association).

Calendar
June 2-23, 1989, Rare books and Manuscripts Section ACRL/ALA. Dallas, Texas. "Local History, Global Village: Regional Collecting, Regional Collections."


July 9-21, 1989, Western Archives Institute. Location: UCLA. For information: Laren Metzer, Western Archives Institute, 1020 "O" Street, Room 130, Sacramento, CA 95814. (916 445-4293).

September 5-8, 1989, Rare Books and Manuscripts Section, ACRL/ALA. Newnham College, Cambridge, England. "The International Antiquarian Book Trade."


NLM/AAHM CONFERENCE ON DOCUMENTING MODERN MEDICINE
by Peter B. Hirtle and John Parascandola

BACKGROUND
On 16 and 17 June, 1988 the National Library of Medicine (NLM) and the Committee on Archives and Manuscripts of the American Association for the History of Medicine (AAHM) co-sponsored a working seminar of the documentation of modern bio-medicine. The conference was originally conceived as one of the Library's responses to a recommendation in the NLM Long Range Plan. The plan calls for the Library to give increased attention to the collection and preservation of manuscript materials documenting the history of modern medicine. At the same time, the plan recognizes that it is impossible for any single library to collect the mountains of paper comprising the unpublished record of the development of modern bio-medicine.

Serious questions have recently been raised about whether the traditional approach to the documentation of modern medicine--individual libraries collecting the records of prominent individual scientists and physicians, and in some cases the records of professional medical organizations--will preserve the materials future historians will need to tell the full story of medicine in this century. Currently developments in medicine are played out in a wide variety of environments, including universities, hospitals, research institutions, and pharmaceutical and biotechnology companies, as well as among individual practitioners. Research advances themselves are often the result of team efforts, rather than the product of individual work. Furthermore, the form of material used in medicine has expanded to include film, videotape, machine-readable records, and data files, among others. There is so much material available, and of such different content and quality, that the primary concern must not be just to save more, but to save better: to make sure that a representative sample of all relevant material is collected.

To this end, and with the endorsement of the AAHM, NLM organized the working conference on modern biomedical documentation. Its purpose was to bring together a small selected group of historians, archivists, and medical librarians interested in the problems of historical documentation to discuss issues and identify needs relating to the collection, preservation and use of archival source materials for the history of biomedicine. A background collection of readings was distributed to participants before the conference began in order to give all participants a shared vocabulary. Included as required readings were articles by Helen Samuels and Joan Warnow-Blewett on the theory behind documentation strategy; Rosemary Steven's overview of contemporary medical practice found in the Oxford Companion to Medicine; and Paul Anderson's article on the
"Appraisal of the Papers of Biomedical Scientists and Physicians." The JCAST report, Understanding Progress as Process, and the Haas, Samuels, and Simmons guide Appraising the Records of Modern Science and Technology were also suggested as recommended readings. (Full references for these works are provided at the end of this report.)

Because the meeting was designed as a working seminar rather than as a formal conference, attendance was kept intentionally low; only twenty-two individuals from outside NLM participated in the meeting. Attendees were not asked to prepare formal papers. The conference began with an opening session featuring three introductory talks. Each of the following four sessions was devoted to discussion of a specific problem area, with two individuals asked to make introductory remarks and to co-chair the session. The final session of the conference was devoted to a general discussion of needs in the field.

CONFERENCE PROCEEDINGS

After introductory remarks from Dr. John Parascandola, the conference opened with a spirited introduction to modern archival appraisal theory from Helen Samuels, Institute Archivist and Head of Special Collections at the Massachusetts Institute of Technology. The abundance of modern records, she suggested, makes traditional means of collecting records insufficient. Instead she argued for the potential usefulness of a documentation strategy for medicine. In documentation strategy one decides first what you need to know in order to document a particular field, and then works to save that material. If successful, a strategy can help manage existing records and may even suggest records which need to be created through such means as oral histories.

Dr. Joel Howell followed with a discussion on "Contemporary Medical Practice: Implications for Archivists" from his special perspective as both a creator and user of medical documentation. Howell put into explicit fashion the concerns which sparked the conference: the increasing amount and the variety of medical documentation available (in printed, graphic, and electronic forms), and the need to understand historically more than just the famous doctors, but also allied health professionals and patients. At the same time, working against the future historian’s interests are privacy and legal concerns.

The third introductory talk was by Julia Sheppard, Archivist of the Contempary Medical Archives Centre (CMAC) at the Wellcome Institute. She reported on the genesis and development of the CMAC. To date they have been primarily involved in surveys of records in other institutions, and have welcomed acquisitions when they are offered. The reaction of the conference attendees was that a similar center in the U.S. would be a welcome addition to the historical scene. Notice was taken, however, that the thrust of the CMAC has been primarily reactive rather than proactive, as Samuels called for at the beginning of the session.

After the three introductory talks, the focus of the meeting turned to particular documentary problem areas. The first specific session dealt with hospital records, at which both Nancy McCall and Joan Krizack spoke on their current research projects. No documentary area appears to embody as many problems as do hospital records because of their bulk, variety of formats, and legal restrictions. Heated discussion ensued, with no agreement on how one approaches the documentation of hospitals, nor on the place that sampling or electronic storage might play in the management of hospital records.

The session on biomedically related records in the Federal Government was led by Dr. Kenneth Thibodeau, at that time NIH records manager, and by Dr. Victoria Harden, NIH Historian. Since World War II, the Federal government has played an increasingly important role in biomedical research, both in its own laboratories and through funding of research in other institutions. What Harden and Thibodeau revealed, however, was that the government’s record keeping is far from monolithic. While federal records management in principle results in the effective control of large groups of material, in practice it has been less effective when applied to research (as opposed to administrative) files.

Elizabeth White of the Historical Research Center of the Texas Medical Center Library and Nancy Zinn from the University of California, San Francisco Library led a session on what role medical libraries can play in the documentation of medicine. Both stressed the need for a clearly defined collection development policy which focuses on either a regional or subject specialization. Zinn, for example, reported on a UCSF project in which the library works with local groups to try to insure that the records on the AIDS crisis in San Francisco will be identified and preserved.

The fourth session on specific issues was devoted to the place of discipline-based history centers in medicine. Centers for the history of physics and chemistry have been leaders in the development of policies for the documentation of science; it has been suggested that similar centers in medicine could be invaluable. Dr. Gert Brieger of Johns Hopkins and Dr. Jack Pressman of the University of California, San Francisco discussed briefly the plans for centers devoted to twentieth-century medicine at their respective institutions. The group could come to no consensus, however, on whether a Center for the History of Medicine is possible or even desirable; some felt that the range of activities which constitutes modern bio-medicine is too great to be encompassed by just one center.

NEEDS IDENTIFIED

The conference closed with an identification and discussion of some of the major needs in the field. Conference participants perceived the following as the most critical needs:

1. To identify who should be educated about the importance of archives/manuscripts, and by whom.
2. To identify the kinds of documentary studies that will help us better understand the institutions and the records involved in the health care field.
3. To identify mechanisms that will foster continued discussion and analysis of the documentation of modern medicine.
4. To know what documentation concerning modern medicine exists in archives and where (a guide to archival resources).
5. To identify organizations and agencies (both generators of documents and those interested in various aspects of medical history) that could provide financial and/or moral support to assist in documentation efforts.
6. To establish mechanisms to improve communication between archival institutions.

7. To evaluate whether or not a national coordinating plan is called for in dealing with the problems of documenting modern medicine.

8. To establish mechanisms to deal with the special problem of patient records (number, confidentiality, sampling).

9. To find ways to provide basic advice on medical archives practices and procedures to those who require it.

10. To evaluate the potential value and feasibility of a center for the history of medicine similar to other discipline centers (such as the Center for the History of Chemistry).

We welcome your comments on the needs mentioned above. Are there other needs that you would like to see included? Would you eliminate or modify any of the items listed above? Do you have information on current projects which are addressing any of these needs, or suggestions for mechanisms to do so? Address your comments to: John Parascandola, Chief, History of Medicine Division, National Library of Medicine, Bethesda, MD 20894.

Background Readings for the NLM/AAHM Conference on Documenting Modern Medicine


Joan K. Haas, Helen Samuels, and Barbara T. Simmons, Appraising the Records of Modern Science and Technology: A Guide. (Cambridge, Mass.: Massachusetts Institute of Technology, 1985.)