Charles Loomis Dana, M.D. (1852-1935), was one of the world's foremost neurologists at the turn of the century, having published more than two hundred articles in the fields of neurology and psychiatry from the 1870s until his retirement in 1934. He served as the President of the New York Neurological Society and the American Neurological Association; he was President of the New York Academy of Medicine from 1905 to 1906 and Chairman of its Committee of Public Health Relations from its founding in 1911 until 1928.

The New York Academy of Medicine's holdings are rich in primary and secondary source materials relating to the medical and literary career of Dr. Dana. In the Fall of 1996, the Woodstock Historical Society of Woodstock, Vermont, donated five linear feet of unpublished materials relating to the medical career of Charles Loomis Dana. This served as a valuable addition to the Academy's already strong holdings on Dana, including his case books dating from 1918 to 1929; virtually all of his publications; the Archives of the Committee on Public Health; papers of the New York Neurological Society, the American Neurological Association, and the Charaka Club; and the general archives of the Academy.

Charles Loomis Dana

Charles Loomis Dana was born in Woodstock, Vermont on 25 March 1852, the son of Charles Dana and Charitie Scott Loomis. He attended Dartmouth College in neighboring New Hampshire, where he graduated with an A.B. in 1872. He then moved to Washington, D.C., where he served as private secretary to Justin S. Morrill, U.S. Senator from Vermont. While in Washington, his interests in science grew, and he began performing research work with the department of zoology at the at the Smithsonian Institution.

As early as 1873, Dana began the study of medicine, and while in Washington he matriculated at the Columbian University Medical School (now George Washington University Medical Center), Georgetown Medical College, and Dartmouth's Medical Department. The Columbian University granted him an M.D. degree in 1876, and a year later he received a second M.D. from the College of Physicians and Surgeons in New York, where he finally settled.

Dana soon began work in Bellevue Hospital, where he was trained by Austin Flint, Sr., and E. G. Janeway; this association with Bellevue would con-
continue throughout his career. It was in the wards at Bellevue that he laid the groundwork for his research into neurology, for which he would later gain international renown. During this period, he became associated with George F. Shrady and began writing a long string of articles for the Medical Record which appeared between 1879 and 1888. He also served at Ellis Island during this time in the U.S. Marine Hospital Corps and gained a professorship in physiology at the New York Women’s Medical College.6

Dr. Dana soon began to focus on the field of neurology and gained an appointment as Professor of Diseases of the Mind and Nervous System at the Post-Graduate Hospital and Medical School from 1884 to 1895, and in 1895 he joined its Board of Directors. He joined the New York Neurological Society in 1881, of which he eventually served as President from 1886 to 1888 and in 1907. The following year he joined the American Neurological Association, of which he served as President in 1892. Dana was involved in the case of Charles J. Guiteau, the assassin of President McKinley, which began his career in forensic medicine. From 1902 until his retirement he served as Professor of Nervous Diseases at Cornell Medical School.7 In 1909, he helped found the New York Neurological Institute8 and became a member of its Board of Trustees in 1911.9

In 1892, the first edition of his well-known work, Diseases of the Nervous System, appeared. New editions appeared every three years until the tenth edition in 1925, an astounding feat in the field of neurology. The only edition which contained sections on psychiatry was the 6th, but Dana was dissatisfied with their coverage of the topic and eliminated them from further editions.10 Among Dana’s other publications on neurology were articles on chorea, Parkinson’s disease, stroke, epilepsy, neurosyphilis, psychoneurosis, myasthenia gravis, drug and alcohol addiction, and the relationship between spinal cord degeneration and anemia. Dana also published a significant amount in the humanities, especially in the history of medicine, including his well-known work, The Peaks of Medical History (New York: Paul B. Hoeber, 1926).11

Charles Loomis Dana was active in his practice and at the Academy until his retirement in 1934. He died of a pulmonary hemorrhage in Harmon, New York on 12 December 1935.12

THE CHARLES LOOMIS DANA PAPERS, CASE BOOKS, AND CORRESPONDENCE

In the Fall of 1996, the Woodstock (Vermont) Historical Society donated to the New York Academy of Medicine five linear feet of papers relating to Charles Loomis Dana and his medical career. These papers contain a valuable amount of information about Dana, particularly in the form of notes for publications on topics as varied as Prohibition, euthanasia, aphasia, telepathy, hypnotism, and the history of medicine. Also included are illustrations used

---

**TABLE OF CONTENTS**

“Charles Loomis Dana: A Guide to the Academy’s Holdings” 1
“Dealing with Archival Materials Contaminated by Lead Paint Dust” 7
“Digitizing Patient Information and Laboratory Research...” 13
From the Editors 17
RBS Winter Session 1998 17
“Doctors at the Gate” Exhibit 19
Position Announcements 20
ALHHS News 21
New Members/Directory Changes 22
On the Web 24
From the ‘Net 27
Ex Libris 30
in Dana’s well-known work, *The Peaks of Medical History*.

The Academy also owns a set of Dana’s case books and correspondence from 1918 to 1929, comprising about three and a half linear feet of material. These collections are extensive, containing detailed patient histories; correspondence from patients, fellow physicians, lawyers, and government officials; diagrams; and interviews. Topics which come up in the notes are as varied as those of a neurologist of his era could be, with discussion of hysteria, homosexuality, alcoholism, neurasthenia, rheumatism, insomnia, depression, and paranoia. Such detailed records of a physician's practice from this era are difficult to find; the fact that they are the records of such a noted member of his field makes them of even greater significance.

**THE ACADEMY ARCHIVES**

In 1886, Charles Loomis Dana became a Fellow of the New York Academy of Medicine and served throughout his life in a wide variety of activities at the Academy. He was chairman of the Section on Medicine in 1887, Orator in 1894, and Vice President from 1901 to 1903. He served as President from 1905 to 1906 and Chairman and founder of the Committee for Public Health Relations from 1911 to 1928, and as a Trustee from 1907 until the time of his retirement in 1934.

Nothing speaks more about the Academy's debt to him than a motion passed by the Academy's Council just after his death in December, 1935:

"The Council of the New York Academy of Medicine desires to record its deep sense of loss in the death of Dr. Charles Loomis Dana, a former president of the Academy. ..."

He served as a member of the Council for term after term. Not satisfied with such contributions, he finally conceived the idea of the creation of a Committee on Public Health and became its first Chairman, which offices he held over a period of twenty years, until his retirement from active work. It is well recognized that this Committee under his wise guidance has been an unusually faithful servant to the City of New York, and the credit therefore belongs to Dr. Dana.

Dr. Dana, in whatever capacity, was wise in counsel, constructive in thought and resourceful in effort. The Academy is greatly his debtor and the Council thus testifies as to the regard in which he was held."

Dr. Dana’s Presidency was an active one. During his tenure, he saw the creation of the Section on Public Health, and he proposed the establishment of the Committee of Public Health, which he would later found himself in 1911. He appointed a special committee to promote legislation for the proper labeling of all medicines containing narcotics and protested against the City Board of Health’s order to inspectors not to issue summonses for non-compliance with an ordinance against unnecessary smoke. Even during years when he was not President, the Minutes of the Board of Trustees and the Academy Council are full of references to Dana’s contributions to the governance of the Academy during the first third of this century.

Dr. Dana was also member of several Sections and Committees of the Academy, and his reports and other actions are well represented in archival collections at the Academy. An example is the Academy’s Committee on Alcohol, whose Minutes from 1910 to 1912 contain three reports by him on “Industrialists,” “Employees,” and “Breweries” (all 1911). The Minutes of the Section on Neurology and Psychiatry (1885-1928) also have numerous...
references to him, including a flier advertising a discussion of scleroderma by Dana and his colleagues, Abraham Jacobi, Bernard Sachs, and Joseph Collins. The most important archival collection at the Academy for the study of Dana’s career, however, is the Archive of the Committee for Public Health Relations.

ARCHIVE OF THE COMMITTEE FOR PUBLIC HEALTH RELATIONS

As mentioned above, the Academy Council’s motion to honor Dr. Dana soon after his death makes special mention of his role in founding and leading the Committee on Public Health Relations. Since its inception in 1911, the Committee on Public Health has acted as an important catalyst for change in health care in New York City. Working closely with the City Health Department in its early years, the Committee performed studies and made recommendations which were heeded not only in the City, but in other parts of the country and abroad. In the first ten years, the Committee advised New York on its Departments of Sanitation, Health, and Hospitals; ambulance service; domiciliary care of the indigent sick; health centers; the Office of Chief Medical Examiner; medical standards for city employees; and the city budget.

The Archives of the Committee for Public Health Relations contain more than thirty letters, memos, and reports by Dana on a wide variety of issues including highway accidents, cancer, municipal hospitals, influenza (1918), poliomyelitis, salvarsan, twilight sleep, venereal diseases, water pollution, the Office of Chief Medical Examiner; medical standards for city employees; and the city budget.

The New York Neurological Society placed on deposit at the New York Academy of Medicine Library its Minutes from 1874 to 1935, about one linear foot of material. As many prominent members of the Society were also Fellows of the Academy and participated in its Section on Neurology and Psychiatry, joint publications and meetings were frequent, making the two archives complementary.

The Academy Library also has virtually all publications of the Society in its collections including the Transactions of the New York Neurological Society (both volumes, 1894-1896); eleven editions of the Constitution, By-Laws, Officers, and Members dating from 1881 to 1935; and a joint publication by the Society and the Academy’s Committee on Public Health, Report on Poliomyelitis with Especial Reference to the Epidemic of 1916 (New York: s.n., 1917).

The Academy also holds many of the early papers of the American Neurological Association, which was based in New York and of which Dana was President in 1892. Included are Minutes of the Council and Executive Sessions from 1874 to 1909 and collections of memorabilia, including a set of pen and ink caricatures of several of its most prominent members (ca. 1920). The Library also holds complete sets of the Transactions of the American Neurological Association from 1875 to 1894 and the Journal of Nervous and Mental Disease, which served as the Association’s official organ from 1895 to 1918.

THE CHARAKA CLUB

In November 1898, Charles Loomis Dana invited his colleagues Joseph Collins, Ward Andrews Holden, Bernard Sachs, and Frederick Peterson to his home to discuss the founding of an organization dedicated to the study of “the literary, artistic, and historical aspects of medicine.” The Medico-Historical Club grew and began holding several meetings a year at which members presented papers on medicine and humanities, including historical papers and even original literary works such as poetry. In March 1900, the name was formally changed to the Charaka Club, after an ancient Hindu healer, Charaka, who symbolizes medicine in India much as Hippocrates does in the West. In many senses the Club became a sort of fraternity, with arcane rituals, symbols, and a closeness among its members, all of whom were physicians with strong interests and backgrounds in the humanities. The Club is often considered to be important in the history of American neurology, as four of the five founders were neurologists.
Dana served as the Charaka Club’s president from 1898 until 1909 and was considered by many to be the glue which held the organization together in its early years. The Academy Library owns the Minutes of the Club from 1902 to 1934. Many of these Minutes, now bound, were taken in Dana’s hand on his own stationery. Included are some pieces of ephemera, including a finely printed pamphlet by Dana expressing his appreciation to the Club for the oil painting of him it commissioned and donated to the Academy in 1916. This fine oil portrait of Charles Loomis Dana by the prominent painter Celia Beaux now hangs in the Academy’s Reception Room just off the Main Entrance Hall.


PRINTED MATERIALS

The Academy Library has virtually all of Charles Loomis Dana’s publications, with over 30 monographs and over 150 pamphlets, most of which are offprints of Dana’s journal articles.

The Academy’s collection of Dana’s printed works consist not only of materials on neurology and psychiatry but also includes his publications in the medical humanities. Charles Loomis Dana’s two brothers, John Cotton Dana and Henry Swan Dana, operated the Elm Tree Press in their hometown of Woodstock, Vermont, which enabled Charles to publish many of his humanities writings. The Academy Library has collected many Elm Tree Press books edited by him and his brother John Cotton Dana, no fewer than six of which reflect Dana’s life-long interest in Horace, including A Book of Satires by Q. Horatius Flaccus (1916) and The Letters of Horace for Modern Readers (1911). Dana’s personal copy of his well-known work, The Peaks of Medical History, contains rare photographs of the doctor in his youth pasted on the fly leaves (shelved in Americana).

Because a majority of Dr. Dana’s works are not yet in the Academy’s online catalogue, the best way for searching the Library’s holdings of his materials is in the printed versions of its card catalogues, which list items by author and subject. A complete list of his more than two hundred published articles can be found in the Journal of Nervous and Mental Disease, Volume 83, No. 5, May 1936, pp. 628-37.

CONCLUSION

Charles Loomis Dana, M.D., was a great leader in American neurology at the turn of the century, and his life and work are worthy topics of investigation. The New York Academy of Medicine and its staff in Historical Collections welcome scholars to explore its rich holdings on the life of this important physician and his enormous contributions to medicine.

Michael North
The Grolier Club
New York, New York

Endnotes


5 Ibid.

6 Ibid.

7 Ibid, p. 623-4.


9 B. Stookey, “Historical Background of the


11 Ibid., p. 628-37.

12 Ibid., p. 622.

13 Van Ingen, p. 299.

14 Ibid., p. 474.

15 Ibid., p. 475.

16 Ibid., pp. 299ff.

17 Ibid., p. 475.

18 The New York Academy of Medicine Library, Public Health Archives: Correspondence, Reports, Documents, etc. from the Files of the Committee on Public Health, New York Academy of Medicine, 1911-1968 (New York: The New York Academy of Medicine, 1974), pp. i-ii.


20 Ibid., p. 16.

21 Stookey, pp. 708ff.


25 Sachs, p. 57.


27 Sachs, p. 17,


31 See under the subject heading “Dana’s operation,” The New York Academy of Medicine, The Subject Catalog of the Library (Boston: G. K. Hall, 1969-1974), Volume 8, p. 23.
DEALING WITH ARCHIVAL MATERIALS CONTAMINATED BY LEAD PAINT DUST

INTRODUCTION

Even though there is heightened awareness of environmental hazards in this country, little attention has been devoted to the study of hazards in archival, manuscript, and book collections. As a result, the staffs of archival, manuscript, and rare book collections are particularly vulnerable to whatever health hazards may be present in their respective holdings. Users who conduct research with these collections are also at risk. Contaminants that may be found in books and documents include bacteria, fungi, radioactivity, asbestos, and other dustborne hazards such as lead. In most instances books and documents have been contaminated over time by hazards that are present in the sites where they have been stored. Therefore, an important precaution when documenting the provenance of new accessions is to try to gather as much information as possible about the history of their various storage locations.

My overall objective in this paper is to make archivists, manuscript curators, and librarians more aware of the health hazards that may be found in the collections that they manage; the training of these professionals does not adequately prepare them to confront health hazards in their holdings. A more specific aim is to provide archivists, manuscript curators, and librarians with basic information about how to identify and deal with lead dust hazards in their collections. Materials stored in areas with lead-based paint on ceilings and walls are at the greatest risk for lead contamination. Therefore, concentrated work such as processing documents and conducting research with an affected collection is particularly hazardous with the lead-contaminated records. Although our remediation efforts significantly reduced the levels of lead contamination, they did not completely eradicate the presence of lead dust. As a result, we have had to explore a variety of options for preservation of the materials and protection of staff and users. Because the initial remediation phase of this project took place eight years ago (1989), I have provided updated recommendations in this paper which reflect current information from environmental health specialists.

BACKGROUND

This paper is based largely upon a project undertaken by the staff of The Alan Mason Chesney Medical Archives to remediate lead-contaminated dust from a collection of laboratory records. The records had been stored in a laboratory with crumbling lead-based paint. For detailed information about the Medical Archives project, visit the following Web site: The First International Cyberconference on the Psychobiology of Curt P. Richter <http://www.med.jhu.edu/confer/pbl/ricabout.htm>. See the poster session, “Assessing the Physical State of the Research Records,” for an account of how we dealt with the lead-contaminated records. Although our remediation efforts significantly reduced the levels of lead contamination, they did not completely eradicate the presence of lead dust. As a result, we have had to explore a variety of options for preservation of the materials and protection of staff and users. Because the initial remediation phase of this project took place eight years ago (1989), I have provided updated recommendations in this paper which reflect current information from environmental health specialists.

HAZARDS OF LEAD CONTAMINATION

Lead is a toxic metal that is known to damage the digestive, renal, and central nervous systems. Damage resulting from lead exposure varies according to the levels of exposure and the age and gender of those affected. Studies indicate that exposure to lead is particularly harmful to developing fetuses and children. Children can be poisoned by lead dust that is brought home by family members who have contaminated clothing and equipment from their workplaces. Moreover, recent research shows that exposure to low or moderate levels of lead may have more deleterious effects on adults than previously thought.

Lead primarily enters the body by inhalation and ingestion. In archives, manuscript collections, and libraries one threat to staff and users is the continuous and cumulative effects of exposure to lead dust. Therefore, concentrated work such as processing documents and conducting research with an affected collection is particularly hazardous. Lead paint is one of the major sources of lead exposure in the United States now that there has been significant reduction of lead contamination in air, water, and food. Definition of lead-based paint hazards now includes deteriorating lead-based paint, settled dust which contains particles of lead paint, and lead con-
Modelling lead remediation gear at the Alan Mason Chesney Medical Archives

taminated soil. Deteriorating lead paint in older buildings contributes to high levels of lead in settled dust, which is a major source of exposure for adults and children. In the United States since 1978 there has been a ban on the use of lead in the manufacture of residential paints. However, lead in paint and dust still poses a problem in older non-residential buildings such as libraries and archival repositories.

RESOURCES FOR LEAD REMEDIATION

At this time in the United States there is significant grant funding and a strong infrastructure of expertise for dealing with lead contamination. However, most of these resources are devoted to issues involving lead contamination in housing and the environment. To date I have not been able to find information about handling lead contamination of archival materials or, more to the point, paper products. Nor have I been able to identify grant sources that would fund lead remediation of archival materials or paper. In the meantime, archivists may wish to consult the available lead contamination literature because it does contain helpful basic information. The Department of Housing and Urban Development (HUD), the Environmental Protection Agency (EPA), and the National Lead Information Center (NLIC) have published standards and guidelines for dealing with lead contamination. Their Web sites on lead issues are found at: <http://www.hud.gov/lea/leahome.html>(HUD), <http://www.epa.gov/opptintr/lead/index.html>(EPA), and <http://www.nsc.org/ehc/nlic/viewnlic.htm> (NLIC). Printed guidelines and brochures on lead issues are also available from these organizations. In addition, the National Lead Information Center operates a hotline; the toll-free number is 1-800-LEAD-FYI.

SCOPE OF THE PROBLEM

Since there were, and still are, no guidelines for dealing with lead contamination of archival materials, we had to devise our own remediation plan when we began work in 1989. Major factors in our plan involved advising remediation contractors about the care required in handling fragile archival materials; protecting Medical Archives staff as they assisted remediation contractors; and exploring remediation procedures that might be used for paper. Because paper is a highly porous material, it presents particular remediation challenges. To complicate matters, most of the paper records to be remediated were assembled in layers of extremely brittle paper, and large quantities of lead dust had accumulated around the edges of the layers. Because of the brittleness and fragility of the paper layers, standard vacuuming remediation was particularly risky. In developing a remediation plan our priorities were to protect the staff from exposure to lead dust and the archival materials against damage from remediation. We therefore consulted a variety of experts: lead remediation contractors, risk managers, environmental and occupational health specialists, industrial hygienists, physicians specializing in hematology and pulmonary medicine, paper and book conservators, and other archivists, librarians, and curators of manuscripts.

STEPS IN REMEDIATION OF LEAD-CONTAMINATED ARCHIVAL MATERIALS

1. Assessing Archival Storage Areas and Materials for Contamination

If you suspect lead dust contamination of archival documents, be prepared to initiate preliminary testing of dust samples from these materials. If the results of these preliminary tests indicate the presence of lead, arrange for more sophisticated tests to identify the source, extent, and level of contamination.

- Learn about the age and condition of the buildings in which the archival materials have been stored: Buildings built before 1950 are at high risk for lead paint dust hazards. If you receive a collection that you suspect may have lead dust contamination, visit or acquire information about the building and particular space in which the collection was stored.

- Use a self-test kit for lead contamination to conduct preliminary testing: These kits are available in most hardware stores; however, they test
only for the presence of lead and do not specify the level of lead contamination. They are useful only as preliminary indicators of lead dust contamination.

- If the self-test kit indicates presence of lead, arrange for more comprehensive testing of archival materials and the site in which they are stored: Have an occupational health technician or a risk assessor gather a broad range of dust samples, and have a reliable laboratory, such as a state-run lead laboratory, test the collected samples.

- If laboratory test results indicate extensive presence of lead dust at highly elevated levels, consult an occupational health professional specializing in lead dust hazards and a certified risk assessor: Seek advice on how best to protect staff members who will be handling contaminated materials. Ascertain the levels and extent of lead dust contamination in the affected archival materials and identify all other hazards, such as asbestos or structural weaknesses, that may be present in the storage area. In neglected buildings there are usually multiple hazards.

- Report evidence of lead contamination to the appropriate occupational health authorities at your institution: In disclosing evidence of lead contamination to authorities, document the source and extent of the contamination and describe the types of remediation procedures that will be needed.

2. Projecting a Preliminary Remediation Plan and Budget

If there is a significant source of lead dust within a building and/or within a collection of materials, estimate the scope and cost of a remediation undertaking. By projecting remediation costs you will be able to determine whether your institutional or departmental budgets can absorb the expense or whether you will have to seek outside funding. By having a realistic idea of projected remediation costs you will also be in a better position to negotiate a contract with a remediation company.

- Identify and assess contaminated articles: Identify and tag the most severely affected areas of the environment and the articles therein. You must have a reliable assessment of the extent and level of contamination before you can begin to estimate the full scope and cost of remediation. Decide whether you will remediate contaminated articles in situ or remove them to another area for remediation. If articles are to be removed they should be transported from the contaminated site in sealed polyvinyl bags. Check with an occupational health specialist for recommendations on how to pack contaminated materials.

- Select remediation sites: Locate sites that may be used for remediation projects and specify the construction materials and air handling equipment that will be needed. Selection of a space in which remediation is to occur depends largely on the scale of the project. For a small-scale project with moderate levels of lead contamination you may be able to seal off a section of a room or to build a temporary remediation structure within a room by using polyvinyl sheets. The objective is to create an isolated unit of negative pressure in which remediation of materials may be conducted. For a larger-scale project with higher levels of lead contamination, it may be necessary to construct a larger unit with a specialized ventilation system and other engineering controls.

- Determine what remediation equipment is required: Project the range of remediation equipment that will be needed. For maximum remediation efficiency and greatest protection against the spread of dust particles, you will need to use HEPA vacuums, which contain high-efficiency filters that trap micron-sized particles. In most cases remediation contractors have their own HEPA vacuums, so you would not have to consider purchasing these. However, in some instances, you may be required to buy or rent HEPA vacuums.

- Procure remediation supplies: If a number of hard surfaces such as metal bookcases and leather bindings are coated with lead dust, you will need a trisodium phosphate (TSP) solution or a non-TSP alternative for wet-wiping these surfaces.

- Obtain protective gear: Whereas contractors usually supply protective gear for their workers, it may be necessary to rent or buy protective gear for the archives staff that will be involved in the remediation undertaking. Protective gear includes respirators, disposable coveralls, surgical bonnets and booties, and latex gloves. In contractual services you will most likely be charged directly or indirectly for cost of protective gear.

- Consider conservation requirements: Consult with paper and book conservators about special
procedures, equipment, and supplies that may be needed to safeguard the handling of fragile archival materials.

3. Selecting a Lead-Remediation Contractor

It is important to determine whether the contractors you are considering meet EPA standards. Under Sections 402 and 404 of the Toxic Substances Control Act (Title IV) the EPA has been required to establish a regulatory framework governing lead-based paint activities to ensure that individuals in such activities are properly trained and certified, and that training programs are accredited. HUD also publishes standards for lead remediation contractors. Many states now require contractors to be trained and certified. Check with your state and local governments for lead remediation regulations and lists of certified contractors. Have a paper conservator advise prospective contractors concerning the special care and handling of archival materials.

• Check licenses, credentials, and references: With the help of an occupational health specialist, check the licenses and credentials of bidding contractors for compliance with EPA and HUD standards. Check with former customers of the bidding contractors about the quality of their work.

• Review proposals: With the help of an occupational health specialist and book and paper conservators, review proposals for soundness of work plan, protection of staff health, safe handling of archival materials, and feasibility of budget.

• Negotiate a contract: In consultation with an occupational health specialist and the financial and legal officers of your parent institution, select a contractor and negotiate the terms of the contract to meet the specific needs of your project.

4. Monitoring the Health of Staff Members

In most instances, large institutions such as academic health centers and universities have policies and facilities for monitoring employee health. If your institution does not have provisions for monitoring employee health or if the provisions for monitoring employee health are inadequate, you should take responsibility for seeing that all members of the remediation team receive appropriate monitoring (and treatment, if necessary).

• Consider pre-testing of pulmonary function: Evaluation of pulmonary function is usually only required when staff members will be wearing respirators.

• Require pre-testing of blood lead levels: Before remediation procedures begin, be sure that all staff members who will be involved have had their blood tested for presence of lead. One of the most important features of testing blood lead levels is that the blood samples be sent to accredited laboratories for analysis.

5. Defining Occupational Safety Procedures for the Remediation Project

With the help of an occupational safety specialist, prepare a safety procedures manual for the archives and contractual staff. When completed, this manual should be reviewed with the staff and posted in several highly visible locations. The following topics should be covered:

• Wearing of protective equipment and gear: Describe the proper ways to wear respirator, coveralls, caps, booties, and gloves.

• Handling of contaminated materials: Specify when and where contaminated articles are to be handled.

• Removal, disposal, and storage of protective gear: Outline steps for removal and storage of respirators and removal and disposal of coveralls, caps, booties, and gloves.

• Directions for personal hygiene: Stress hazards of hand-to-mouth contact in smoking, eating, and application of cosmetics. Emphasize the importance of frequent washing of hands.

6. Defining Conservation Procedures

With the help of a paper conservator, prepare a procedures manual for the handling of archival materials. This manual should be directed toward both archives and contractual staff. When this manual is completed, it should be reviewed with the staffs and posted in several highly visible locations. The manual should also address:

• Wet-wiping procedures for bound volumes: Specify the particular solution and process that is to be used to remove lead dust from leather-bound volumes and other smooth surfaces.

• HEPA vacuuming of bound and unbound documents: Specify the vacuuming procedures for cloth and paper bindings and the various types of unbound paper documents that may be encountered.
7. Post-Remediation Testing of Affected Areas

After the contractor completes work, arrange for post-remediation testing. Be certain to find a qualified individual to gather air and wipe samples and an accredited laboratory to analyze the samples.

- Do a gross physical assessment: Survey the remediation site and the materials remediated for any visible signs of dust. Identify and mark the areas where dust is visible.

- Conduct wipe-tests: Be certain that the person conducting the wipe tests takes samples from a range of surfaces throughout the remediated area and from surfaces that may have visible traces of dust.

8. Post-Remediation Testing of Staff

If you were satisfied with the arrangements for pre-remediation testing of staff, follow the same course for post-remediation testing. If you were not pleased with the manner in which pre-remediation testing was conducted, seek more reliable arrangements for the post-remediation testing. Be certain to obtain and keep the results of pre-remediation testing.

- Test for blood lead levels: Results of pre-remediation blood lead levels should be compared with post-remediation samples to see whether there are signs of lead elevation. Individuals who show elevated blood lead levels should be referred to a physician for further testing and for treatment if necessary. Referrals should be made to physicians who specialize in the treatment of lead toxicity.

- Test for pulmonary effects: Results of pre-remediation tests should be compared with results of post-remediation tests. If results indicate that pulmonary damage has occurred, the affected individual should be referred to a physician specializing in pulmonary disorders.

9. Exploring Possibilities for the Preservation and Handling of Affected Materials

Because paper is a highly porous material, post-remediation testing will most likely indicate a remaining presence of lead dust. However, there are many variables in the remediation of lead dust from archival materials. For instance, bound volumes usually fare better in remediation processes than do loose records. In most instances smooth bindings can be thoroughly and safely remediated by a combination of vacuuming and wet-wiping. Because bindings function as protectors, the inside pages seldom show signs of contamination. Cloth and paper bindings and unbound materials which have been exposed to high levels of lead dust represent the worst case scenario. Lead particles become embedded in the weave of the cloth and the pores of the paper and cannot be thoroughly or completely removed by HEPA vacuuming. Irreplaceable rare and unique items with significant post-remediation levels of lead contamination pose some of the most serious post-remediation problems. If these affected items cannot be safely handled, encapsulation is one option. If deacidification and encapsulation are not viable, another option may be to concentrate on preserving the content of the records by transferring it to other media and then disposing of the contaminated originals. Alternate options include:

- Deacidification and encapsulation of original materials: Precautions must clearly be taken to protect archives staff, users, and any others who may come in contact with materials that have residual lead dust after remediation. If only a few items show post-remediation levels of lead contamination, you may wish to consider deacidification and encapsulation of the articles. However, projects that entail large-scale de-acidification and encapsulation are very costly.

- Preserving the content of original records: If deacidification and encapsulation are not viable, you may choose to preserve the content of original records through transfer to photographic, microfilm, or digital media and then dispose of the contaminated originals.

10. Developing a Feasibility Plan for the Preservation of Affected Materials

In developing a feasibility plan you will have to do various risk-benefit assessments. The reservation plan that is most affordable may be your only viable solution.

- Project costs for preserving all affected materials: Consider costs for deacidification and encapsulation as well as processes for transferring content to other media. Get the total picture of the preservation costs.

- Project costs for preserving materials on a selective basis: Define a rationale and a process for sampling and selecting documents for physical preservation or transferral to other media. Project costs for the various forms of selective preservation.
• Explore funding opportunities for preservation of affected materials: Although at present there is no specific funding that is devoted strictly to the preservation of archival materials with lead contamination, there may be other types of preservation funding that would include transfer of content to other media. For instance, there is considerable funding now available for digital projects.

CONCLUSION

The lead remediation project at Johns Hopkins is offered here only as an example of one remediation experience. Much basic research remains to be done by environmental health scientists and by book and paper conservators before any definitive guidelines can be established for lead remediation of archival materials. Only after basic research findings are known and disseminated will it be possible to develop specific methods and to identify materials for use in the safe and effective removal of lead paint dust from paper-based articles. Given the level of funding that is available for lead remediation research, we urge environmental health scientists and paper conservators to work together to find ways to tap these resources and to pursue research problems involving lead contamination of archival materials.

Nancy McCall
The Johns Hopkins Medical Institutions

ACKNOWLEDGMENTS

For assistance in preparing this paper, I wish to thank the following individuals: Dr. Mark Farfel, Director of Lead Poisoning Prevention Research at the Kennedy-Krieger Institute, and Dr. Deborah McClellan, Department of Pharmacology and Molecular Sciences, The Johns Hopkins University School of Medicine.

[Editors' note: A version of this paper was originally presented on 29 August 1997 at the session, “Toxins, Poisons, Carcinogens: Problems with Contaminated Records,” during the sixty-first annual meeting of the Society of American Archivists in Chicago, Illinois.]

Endnotes

1 See Preventing Lead Poisoning in Young Children: A Statement by the Center for Disease Control, U.S. Department of Health and Human Services, October 1991.

2 See Guidelines for Evaluation and Control of Lead-Based Paint Hazards in Housing, Department of Housing and Urban Development, 1995.
DIGITIZING PATIENT INFORMATION AND LABORATORY RESEARCH DATA FOR ARCHIVAL REFERENCE AND RESEARCH

INTRODUCTION

This project developed from research conducted by Nancy McCall and myself as part of the Bentley Research Fellowship Program for the Study of Modern Archives. The project examines key issues in the digitization and electronic network communication of two main types of records in the health fields: clinical records and laboratory documentation.

Research began early in 1995, and although the Bentley project has concluded, we continue to explore the issues and refine our models.

Our research protocol consisted of two case studies:

1. Designing an electronic model for reference and research use of historical clinical information—patient records (1915-1975) of the Brady Urological Institute (BUI) of the Johns Hopkins Hospital.

2. Designing an electronic model for reference and research use of historical scientific data—experimental and observational data (1920-1975) from the Psychobiology Laboratory of Curt P. Richter.

Our choice of these two record groups was based on several factors. The two collections share some common elements and present unique challenges. Both are discrete sets of non-current records, covering about the same period of time. In both cases, we received encouragement from our institution to do something with these records.

Each case study involved a pilot project, testing various ways of digitizing samples of records in the two collections. The ultimate goal of the case studies was to develop electronic models for reference and research use of clinical records and laboratory records — generalizable models that may be adapted by other archival programs with documentation from the health fields. A key strategy in both case studies was working with potential users of the records and experts in the relevant fields of study. With the urological records, we worked closely with three members of the department of urology (including the chairman), as well as some historians of twentieth-century medicine. With the psychobiology records, we worked with scientists from Hopkins and from outside institutions, people who had known or worked with Curt Richter, and historians of science. Because of the differences in the two sets of records, we have taken two different approaches to making the records available via the Web.

BRADY UROLOGICAL INSTITUTE (BUI) PATIENT RECORDS

From 1912 until 1977, the BUI maintained a discrete set of patient records, separate from the Johns Hopkins Hospital patient records system, with each patient assigned a unique BUI Patient Number. The patient files contain official BUI records, autopsy records, charts, correspondence, and occasional photographs. The original records are stored in an offsite warehouse. While the records were being created, the staff of the BUI also created a diagnostic index to the records. This consists of a list (on index cards) of BUI Patient Numbers for each patient in a particular diagnosis.

The Brady records present several issues. First, physical access to the records is difficult. The records are stored offsite; they are brittle, in some cases falling apart. More important were issues of privacy and security. Patient records are, by their very nature, confidential. Urological records are especially sensitive. This led us to the approach of having an in-house system, putting the records on an intranet rather than on the Internet. Our plan was to do an electronic version of the diagnostic index, and eventually link from the index to the records. The ultimate goal for the BUI records is to create a database with a Web-like interface, linking to actual images of the records. In preparing our database, we were fortunate to have some existing tools, in both the diagnosis index and a records survey done several years ago. (In preparation for a processing project, our staff had done a drawer by drawer inventory of the records.) This helped create the initial electronic version of the index.

The electronic index has evolved through several stages. In 1992, the Medical Archives contracted with a firm in Virginia to prepare a database of the diagnostic index. Their FoxPro database enabled searches on diagnoses, but was of limited use. It was essentially an electronic duplication of the index cards; one had to know the exact diagnosis in order to do a search. This was a problem because names of diagnoses have changed over time. In 1996, the database was converted into Microsoft Access. This provided some flexibility, allowing for searching by
partial terms. A limitation to both of these versions of the index was that they resided on a computer in the Medical Archives, so that users had to come to the Archives in order to use the database.

The database is now in its third stage, an intranet Web site accessible only from computers with a Johns Hopkins address. Users can search the database by diagnosis or by patient number. In the diagnosis search, a user can input a word or words and get a list of all diagnoses containing that term. Clicking on a diagnosis name will yield a list of all patient numbers in that diagnosis. Clicking on a patient number will provide links to images of the record (where available) as well as a list of all other diagnoses for that patient. A user can then click on one of those diagnoses and in turn find other patients. (So, for example, a user could determine if two or more diagnoses often turn up together in the same patients.)

For the pilot project, we decided to focus on some key diagnoses, and digitize only those records. We worked with Dr. Patrick Walsh, Director of the Brady Urological Institute, and Dr. Steven Docimo, Assistant Professor of Pediatric Urology, to select the diagnoses. They recommended that we select records of patients who had been diagnosed with posterior urethral valves (also called congenital valves). Their choice of diagnostic entity was based upon the historical importance of the early cases that were recorded (1915-1975) and the ongoing clinical interest in the diagnosis and treatment of posterior urethral valve conditions at Johns Hopkins.

We scanned images of each page (including photographs) from six complete patient files in the posterior urethral valve diagnosis. More recently, we have imaged some records of patients who received adrenalectomies. While the entire diagnosis index database is now on the intranet site, only those two diagnosis groups are linked to images of the records. We hope to produce more images of the records and link those to the database as resources become available.

**PSYCHOBIOLOGY LABORATORY DATA**

The records comprise over 50 years of research data (1,115 cubic feet) from the psychobiology laboratory of Curt P. Richter. Richter was a pioneer in several fields of psychobiology, the most notable being biological clocks and ingestive behavior. Richter left behind over 50 years of research data, meticulously collected, based on observations of over 20,000 animals. The records date from 1920-1975, and consist mostly of log books, activity charts, and Esterline Angus charts, documenting Richter’s experiments. (Examples of these three types of records can be seen at the URL http://www.med.jhu.edu/confer/pbl/sample.htm.)

Logbooks: There are approximately 800 logbooks, each containing a month of numerical data on each animal in Richter’s colony. Each page contains the monthly data for a given cage number (e.g. the logbook for January 1954 starts with a page for cage #AR1, giving the numerical data for the animal in that cage for that month). The data in the logbooks vary according to experiment, but generally the following are noted: intake of food and drink, physical activity, sleep patterns. The laboratory staff would use several months of logbook data to chart the activity of individual animals in specific experiments.

Activity charts: Each chart is a graphic representation of several months of data on an individual animal. The numerical data recorded in the logbooks was used to generate the activity charts. Each animal behavior is charted in a unique color (e.g. green is usually used to display water intake); the number of lines on the chart vary according to experiment, with more elaborate experiments displaying as many as ten different lines. Most of the charts contain, in addition to the graphs, notes and diagrams by Richter. Thus, the activity charts present the entire picture of each experiment. The charts measure 13" by 22", and there are approximately 20,000 of them. (See Figure 1.)

Esterline Angus charts: These charts display several months of data recording a single behavior (usually running activity, but sometimes food or water intake) of an individual animal. The animals’ activity cages were connected to Esterline Angus recording devices which produced daily strip charts graphing the animals’ activity. Laboratory assistants would sort the strip charts according to cage and animal number, and then iron the strips onto a poster board. The charts measure 22" by 28", and there are approximately 20,000 of each chart.

Digitizing the laboratory records presents several challenges, the greatest having to do with the physical condition of the records. The charts are oversized, making them difficult to scan on a traditional scanner. The documents are also contaminated with lead dust (as is anything that was in the laboratory, though documents are much harder to clean than objects). Nancy McCall’s paper (in this issue of *The Watermark*) discusses the lead hazard in greater detail.
We contacted vendors and tested a variety of digitization processes on the charts and the logbooks, including making images of the charts and the logbook pages, and keying the numerical data from the logbooks into files. The imaging processes included both scanning the charts directly, and photographing the charts and scanning a transparency. The best images came from scans of high-quality 4x5 transparencies. The cost for this type of image is $25 per chart (and with 20,000 of each chart it would be quite costly to digitize the entire collection). With the logbook data, we had ASCII files made of the numbers recorded in the logbooks. To ensure accuracy, the numbers were keyed in three times. The cost of triple-keying the logbook data was $8 per page. It should be noted that these costs do not include preparation (including selecting the documents for digitization and cleaning the documents where necessary) or quality control checks.

Another roadblock to digitizing this collection is the lack of auxiliary documentation, including research protocols. Richter did not prepare written research protocols, so it is necessary to go to publications (done after the fact) to put the data in context. Those who are familiar with Richter's work can decipher the logbooks, but there are some notes or column headings that elude them.

To explore these issues further, in July 1996, we held a conference via the World Wide Web. We invited scientists, archivists, librarians, historians, and students to participate. The cyberconference Web site is still active, at the URL http://www.med.jhu.edu/confer/pbl/ricabout.htm. The aim of the cyberconference was to get feedback from individuals in a variety of fields. There were over 50 registrants (about half of them scientists), representing nine countries.

The Web site includes some introductory material and several poster sessions, covering the scientific and historical aspects of Richter's work, uses of the psychobiology data, and physical issues involved with the records. Visitors to the Web site are invited to comment on the poster sessions via an interactive E-mail program. The poster sessions can be accessed directly at http://www.med.jhu.edu/confer/pbl/ricpostr.htm.

The poster session that generated the most interest was "Enhancing Access to and Use of Richter's Data." This session demonstrated various ways of digitizing and presenting the data: different types of images, ASCII files of the numbers, charts produced from the numerical data, and one possible database structure. We asked cyberconference participants to comment on the potential uses of the data in its various forms. Those who responded had strong opinions about their preferences. Scientists want raw data (e.g. logbook numbers), preferably in ASCII rather than a software-dependent system. They want to be able to manipulate the data using their own software. For example, one can put the logbook data into a spreadsheet program and create a graph much like the activity chart. (This is demonstrated in the poster session). Some participants were concerned at the lack of research protocols and contextual information. Some scientists expressed interest in using data from specific experiments, but generally, they would prefer to collect their own data, using more precise data-collection methods that are now available. A problem was that we made only a sample available on the Web site, and those that want to use the data want more of it.

Some of our plans for the future include cultivating a wider user group for the psychobiology data, and making potential users aware of the research possibilities in the data. Already a scientist has used some of the data from chronobiology (biological rhythms) experiments for a comparative study. Other researchers have expressed interest in the following topics: the use of wild animals as research subjects (Richter caught wild rats from the streets of Baltimore for his experiments); Richter's map of the autonomic nervous system; and the data from mineral appetite experiments.

Our current plan is to prepare a proposal for digitizing the data associated with Richter's landmark work, *Biological Clocks in Medicine and Psychiatry*. We have received permission from the publisher to do an online version of the book with accompanying data. We chose this work for several reasons. It is his most cited work and cuts across
several of his disciplines. His references to the data are precise, so the records will be easy to identify.

**CONCLUSION**

Though our approaches to these two sets of records were different, our basic goal was the same—to create a Web-based database which links images to text. Creating such a database involves the following steps:

- devise the database structure
- digitize textual data through triple-keying or OCR
- produce relevant, high-quality images
- link images with text in a Web-like interface

In developing the database, issues of software compatibility, security, and privacy must be resolved. Archivists will need to collaborate with (or become) database developers, experts in informatics, and Web designers. This specialized workforce should be involved from the early stages of a digitization project.

Part of the user group for clinical and scientific data has high expectations. For example, clinicians want high quality images of patient records; scientists need accurate data and images that can be easily read and interpreted. It is important to communicate these needs to vendors, and to test a variety of digitization processes to find the one that best suits the material at hand.

Obviously, one of the biggest obstacles to digitizing a large collection of data is the high cost involved. In addition to the costs of digitizing the material, the work involved in preparing the records for digitization and in planning and creating a database requires a substantial outlay of resources. There must be enough interest in the records to justify the expense. This is why it is important to involve potential users of the records in digitization plans.

Our approach has been to make a sample available and invite comment from potential users. This methodology involves finding the appropriate audience for the data, and making these people aware of our projects. Ideally, the user group will be multidisciplinary, including clinicians, scientists, historians, students, and educators. The wider the user group, the more potential use for the digitized records.

We have also found it helpful to get the potential users involved in finding funding for digitization projects. In the case of the BUI records, the archives received some direct funding from the department of urology. With both sets of records, clinicians and scientists have helped to identify potential sources of funding, and have helped with grant proposals by writing supporting letters, contacting funding sources, and lending their expertise as consultants to the projects.

Lisa Mix
The Johns Hopkins Medical Institutions

[Editors' note: Versions of this paper were originally presented on 2 May 1997 at the session, "Digitizing Patient and Laboratory Data: Implications for Archivists," during the Mid-Atlantic Regional Archives Conference Spring 1997 Meeting in Charlottesville, Virginia, and on 30 August 1997 at the session, "STAT! Making Health Information Available on the Internet," during the sixty-first annual meeting of the Society of American Archivists in Chicago, Illinois.]
FROM THE EDITORS

Twelve hours ago we were sitting on a train traveling back to Richmond from New York City. While tired, we were also exhilarated having experienced the splendor of the Big Apple at Christmas time. We journeyed north to meet with Lilli Sentz and Ed Morman to discuss the future of The Watermark. We are pleased to report that Lilli will be the next editor of the ALHHS newsletter. The New York Academy of Medicine has agreed to be the host institution for The Watermark. We are delighted that the newsletter will be in such capable hands following the Spring issue.

The JKs have been busy traveling in the last three months. As a team we went to Philadelphia to visit with Tom Horrocks in his last week of work at the College of Physicians of Philadelphia. We are so pleased that Harvard hired our friend and colleague. Philadelphia’s loss is Boston’s gain. We look forward to seeing Tom in his new surroundings and taking in a game at Fenway Park. Our visit did put us smack in the middle of the Million Woman March and made for an even more interesting visit to the City of “Brotherly” Love.

Our next trip north was back up Interstate 95 to Wilmington, Delaware for the Fall 1997 Meeting of the Mid-Atlantic Regional Archives Conference (MARAC). At the conference we were participants in the session, “Archivists, Primary Resources, and Political Action.” We were joined on the panel by fellow AAHM members Suzanne White Junod and Paul Lombardo. The panel examined the intersection of primary resources, history, and health care policy using examples from the Tuskegee Syphilis Study, the FDA investigation of the tobacco companies, and enforced sterilization.

With our New York trip behind us, we look forward to a couple weeks at home to finish out the fall semester, prepare for the holidays, and complete this issue of The Watermark before we both individually begin our holiday travels. This issue includes papers from the annual meeting of the Society of American Archivists held in Chicago last August and the Spring 1997 MARAC Meeting.

As you turn your calendars to 1998 be sure that you have paid your ALHHS dues to ensure that you will continue to receive The Watermark. Our best wishes for a happy and healthy 1998.

Happy Holidays,
Joan Echtenkamp Klein
Jodi Koste

RBS WINTER SESSION 1998

Rare Book School (RBS) Winter Session 1998 offers several five-day, non-credit courses on the history of bookbinding and book illustration at the University of Virginia, in Charlottesville, VA, in January and March 1988. The Winter Session courses, all of which have been offered for many years at RBS, are identical in content to the RBS summer session versions. Students make a full-time commitment to any course they attend, from 8:30 am to 5 pm, Monday-Friday; most students also attend an informal dinner on the Sunday evening before their first class on Monday. In addition to the formal classes, there are early-evening public lectures and other events throughout the week. The tuition for each five-day Winter Session course is $595. Reasonably-priced hotel accommodation is readily available nearby. For an application form, write Rare Book School, 114 Alderman Library, University of Virginia, Charlottesville, VA 22903-2498; or fax (804) 924-8824; or email biblio@virginia.edu; or telephone (804) 924-8851. Electronic copies of various other RBS documents can be accessed through our World Wide Web site: http://poe.acc.virginia.edu/~oldbooks/bap.html

JANUARY 1998 SESSION
MONDAY 5 JANUARY-FRIDAY 9 JANUARY

11 European Bookbinding, 1500-1800. How bookbinding in the post-medieval period developed to meet the demands placed on it by the growth of
printing: techniques and materials employed to meet these demands; the development of temporary bindings (for example, pamphlets and publishers’ bindings); the emergence of structures usually associated with volume production in the c19; the dating of undecorated bindings; the identification of national and local binding styles. Instructor: Nicholas Pickwoad.

Nicholas Pickwoad is a book conservator in private practice. From 1992 to 1995, he was Conservator at the Harvard University Library, before which he was Advisor to the [English] National Trust for Conservation. This will be the 18th time he has taught his celebrated course at RBS.

12 Book Illustration to 1890. The identification of illustration processes and techniques, including wood cut, etching, engraving, stipple, aquatint, mezzotint, lithography, wood engraving, steel engraving, process relief, collotype, photogravure, and color printing. The course will be taught almost entirely from the extensive Book Arts Press files of examples of illustration processes. As part of the course, students will make their own etchings, drypoints, and relief cuts in supervised laboratory sessions. Offered again in the March session. Instructor: Terry Belanger.

Terry Belanger founded RBS in 1983 at Columbia University. Since 1992, he has been University Professor and Honorary Curator of Special Collections at the University of Virginia. In 1997, the Book Arts Press, which he founded in 1972, celebrated its 25th anniversary.

MARCH 1998 SESSION
MONDAY 9 MARCH-FRIDAY 13 MARCH

31 Book Illustration to 1890 (Session II). For description, see no 12. Instructor: Terry Belanger.

32 Publishers’ Bookbindings, 1830-1910. The study of publishers’ bookbindings, chiefly in the US, but with frequent reference to England, and occasional reference to Continental developments. Topics: the rise of the edition binder; design styles and how they developed; new techniques, machines, and materials introduced in the c19; the identification of rarities; the physical description of bindings; the preservation of publishers’ bindings. The course will make extensive use of the Book Arts Press’s notable collection of c19 and early c20 binding exemplars. Instructor: Sue Allen.

Sue Allen is recognized as the foremost authority on 19th-century American book covers. Her research, lectures, writings, and exhibitions guide librarians and conservators in the selective preservation of English and American bindings of the 19th and early 20th centuries.

Terry Belanger
University of Virginia

48 EAST 57TH STREET
Phone 212.308.0018

New York, NY 10022
Fax 212.308.0074

Specializing in Early Printed Books and Manuscripts in the History of Medicine, Science and Travel from the 15th to the 18th Century.

catalogues available upon request
"DOCTORS AT THE GATE" EXHIBIT

As part of the Bicentennial Commemoration of the U.S. Public Health Service (PHS) in 1998, an exhibit entitled "Doctors at the Gate: The U.S. Public Health Service at Ellis Island" will be on display at the National Museum of Health and Medicine, Armed Forces Institute of Pathology, Washington, D.C. from 5 February through 21 June 1998. The exhibit will focus on the role played by the PHS in the medical inspection of arriving immigrants at Ellis Island from the time that it opened in 1892 until more restrictive laws greatly slowed the flow of immigrants to the United States in 1924. It will also discuss the care provided on the Island to those immigrants who required hospitalization.

The Office of the PHS Historian and Media Arts Branch of the Program Support Center, Department of Health and Human Services, collaborated with the Museum in the preparation of the exhibit. Professor Alan Kraut of American University, an expert on immigration history, served as a consultant. A number of individuals and institutions provided artifacts, photographs, and information for use in the exhibit.

The National Museum of Health and Medicine is located at the Walter Reed Army Medical Center, Georgia Avenue and Elder Street NW, Washington, D.C. For Museum hours and directions, call (202) 782-2200.

John Parascandola  
U.S. Public Health Service

A Public Health Service doctor examines the eyes of an arriving immigrant for trachoma. (Courtesy of the National Archives)
POSITION ANNOUNCEMENTS

The College of Physicians of Philadelphia is accepting applications for the following full-time position, available 1 December 1997.

HISTORICAL REFERENCE LIBRARIAN

Responsibilities: Under the supervision of the Director of the Library, the Reference Librarian provides public service duties relating to the Historical Library. These duties include quick and extended reference assistance to researchers, processing photographic orders, and other projects assigned by the Director.

Qualifications: M.A. degree (preferably in History) or MLS degree and/or working experience in a special collections library is required. Communication skills and an ability to work with the public are essential. Knowledge of medical history and its resources is preferred. Knowledge of a foreign language is helpful.

The Institution: The College of Physicians of Philadelphia is a private medical society, a not-for-profit educational and cultural institution dedicated to promoting a greater understanding of medicine and the roles of the physician in contemporary society. It carries out its mission through various programs and services, including the Library, the C. Everett Koop Community Health Information Center, the Exhibition Gallery, the Mutter Museum, and the Francis Clark Wood Institute for the History of Medicine. Since its founding in 1787, the College has been actively involved in community service, particularly in the area of public health. The College’s Historical Library is recognized as one of this country’s premier research collections in the history of medicine, containing some 300,000 volumes of pre-1966 books and journals, more than one million manuscripts, and an estimated 20,000 photographs and prints.

To apply: Please submit letter of application, resume, and the names of three professional references to Director of the Library, College of Physicians of Philadelphia, 19 South 22nd Street, Philadelphia, PA 19103. NO PHONE CALLS.

EOE.

CURATOR OF HEALTH SCIENCES SPECIAL COLLECTIONS, UNIVERSITY OF WISCONSIN HEALTH SCIENCES LIBRARY

The Health Sciences Library at the University of Wisconsin-Madison is recruiting a candidate to assume management responsibilities for the Library’s historical collections. We are looking for someone to provide leadership and expertise in rethinking focus of the collection and someone with a service perspective consistent with today’s information-intensive environment. Knowledge of preservation practices, budget analysis, staff development, and how information technologies will transform utilization of the scholarly record are integral to this position.

A major responsibility will be working with the Director of the Health Sciences Library, the Director of the History of Medicine Department, the Director of the Institute for the History of Pharmacy and campus-wide archival committees to address campus-wide issues related to archival concerns and historical collections. The successful candidate is expected to promote and support historical scholarship, the continuity of the scientific record, and promote service across a diversified campus, complementing science and other historical programs (including the State Historical Society). The Curator reports to the Director of the Health Sciences Library, serves as a member of the Library’s management team, serves on relevant professional committees, actively participates in fund-raising programs, and teaches segments of selective courses.

Historical collections at UW-Madison are among the nation’s most well-known and support active History of Medicine/Nursing/Pharmacy programs. Combined Library holdings exceed 31,000 volumes including historical reference, monographic works, journals, rare books, and specially-handled items between 1851-1913.

Qualifications: The successful candidate will bring to this position broad knowledge in one or more subject areas (e.g., medicine, nursing, pharmacy, public health or a combination of health-related areas) along with experience in managing historical collections, preservation practices, and successes in obtaining funding and working with peers. The individual must exhibit understanding of the relevance of historical collections to the academic mission of the institution and the value of such collections and services to scholarship beyond the University. The candidate will be expected to have excellent interper-
sonal, oral, written, computer, and instructional skills; strong analytical skills; and progressively-responsible management experience in an academic or research environment.

Preferred: Evidence of scholarly and professional activity; understanding aspects of collaborative collection management in a more virtual (computer-oriented) service environment; and knowledge of the practical aspects of managing rare books and manuscripts will be required. Team-teaching experience, the ability to network people, coordinating ability, computer/imaging skills; fund raising skills, and enthusiasm are highly desirable.

Requirements: A Master's degree is required in either the History of Science or Library Science. An advanced degree (PhD) in the History of Medicine or Science combined with a Master's Degree in Library Sciences is preferred. Candidates with (1) dual master’s degrees in History of Science and Library Science or (2) Master's degree in Library Science with requisite experience in the History of Medicine (or Nursing or Pharmacy); (3) Master’s degree in Archives Management with equivalent experience related to History of Medicine/Health Sciences; or (4) a combination of the above will receive strong consideration.

Minimal salary of $35,000.00 is commensurate with background, knowledge, and experience. For additional information, please contact Karen Dahlen, Director of the Health Sciences Library, (kdahlen@biostat.wisc.edu) UW-Madison or Hal Cook, Professor of History of Medicine, (hjcook@facstaff.wisc.edu) regarding additional information about this position. Applicants are encouraged to submit a cover letter addressing interests in this position along with current vitae and names, addresses, telephone numbers, and e-mail addresses of three professional references who can best address applicant’s knowledge and skills. To ensure consideration, applications should be sent to Diana Slater, Associate Director, Health Sciences Library, University of Wisconsin, 1305 Linden Lane, Madison, WI 53706 by 4 January 1998. Unless confidentiality is requested in writing, information regarding the applications must be released upon request. Finalists cannot be guaranteed confidentiality. The University of Wisconsin is an Affirmative Action/Equal Opportunity Employer.

ALHHS NEWS

ANNUAL MEETING

The Annual Meeting of the ALHHS will be held in Toronto, May 7, 1998, at the Sheraton Conference Centre in Toronto in conjunction with the Annual Meeting of the American Association for the History of Medicine. As in previous years, members of ALHHS are invited to a welcoming reception and dinner on Wednesday evening. Details of the events will be announced in the Spring issue of The Watermark. See you in Toronto.

MEMBERSHIP

A big thanks to the 118 of you who have mailed in your 1998 dues and address information forms as of 11 December! The names of current members whose dues remain unpaid at the end of February 1998 will be removed from the mailing list, so this is their last issue of The Watermark. If you don't want that to happen to you, mail in your check and a completed information form. If you need a copy of the information form that was mailed out at the beginning of October, please write, e-mail, or call Elizabeth Ihrig, ALHHS Secretary-Treasurer at: The Bakken, 3537 Zenith Ave. So., Minneapolis, MN 55416; eihrig@aol.com; (612) 626-1931 or (612) 927-6508.

Elizabeth Ihrig
Secretary-Treasurer

OLD and RARE MEDICINE

Catalogues Issued Regularly

170 BEACH 145TH STREET
NEPONSIT, NEW YORK 11694
Tel. No. (718) 318-0737
NEPONSIT, NEW YORK 11694
FAX No. (718) 318-5750
NEW MEMBERS

ALHHS welcomes:

Jennifer L. Kane
Collections Manager/Assistant Archivist
Dittrick Medical History Center
Cleveland Medical Library Assn.
11000 Euclid Avenue
Cleveland, OH 44106-1714
(216) 368-3648
FAX (216) 368-0165
jk4@po.cwru.edu

Linda A. Lohr
Manager, Robert L. Brown History of Medicine Collection
SUNY at Buffalo
Health Sciences Library
B5 Abbott Hall
3435 Main Street
Buffalo, NY 14214-3002
(716) 829-3024
FAX (716) 829-2211
lalohr@msmail.buffalo.edu

Frances R. Overcash
Hospital Archivist
Children's Hospital Archives FE-151
300 Longwood Avenue
Boston, MA 02115
(617) 355-5286
FAX (617) 734-7763
OVERCASH@A1.TCH.HARVARD.EDU

Christine A. Ruggere
Curator, Historical Collection
Institute for the History of Medicine
Johns Hopkins University School of Medicine
1900 E. Monument Street
Baltimore, MD 21205
(410) 955-3159
FAX (410) 502-6819
ruggere@welchlink.welch.jhu.edu

DIRECTORY CHANGES

Estelle Brodman
FAX (609) 448-5380

Jane Brown
FAX (803) 792-8619

Stanley Burns
Burns@inch.com

Margaret Burri
margaret@mail.medchi.org

Robert Campbell
Bookseller
Ex Libris Books
1628-B Sherbrooke W
Montreal QC H6H1C9
Canada

Susan B. Case
Visiting Special Collections Librarian
Spencer Research Library
The University of Kansas
Lawrence, KS 66045-2800
(785) 864-4334
FAX (785) 864-5803
scase@ukans.edu

Ranes Chakravorty
ranesc@pol.net
rcc9u@virginia.edu

Robin Chandler
chandler@library.ucsf.edu

Judy Chelnick
Room 5003, MRC 627
Zip code: 20902
chelnick@nmah.si.edu

Lois Densky-Wolff
(973) 972-7830
FAX (973) 972-7474

Jack Eckert
Historical Society of Western PA
1212 Smallman Street
Pittsburgh, PA 15222
(412) 661-3169 (home)

Janet Fisher
fisher@etsu-tn.edu

Raymond Giordano
area code: 978
antiqsci@ma.ultranet.com

Toby A. Appel
Zip code: 06520-8014
toby.appel@yale.edu

Steve Bean
beans@ada.org
Bernard Gordon
Associate Professor
Northeastern University
14 Holmes
Boston, MA 02115
FAX (617) 965-0459
BGORDON@LYNX.NEU.EDU

S. Richardson Hill
PFrench@UAB.edu

Thomas A. Horrocks
Associate Director for Special Collections and Curator of Rare Books
Francis A. Countway Library of Medicine
Harvard University, 10 Shattuck Street
Boston, MA 02115
(617) 432-4142
FAX (617) 432-0693
thorrock@warren.med.harvard.edu.

Glen Jenkins
area code: 440

Elton R. Kerr
ELTONKERR@compuserve.com

Malcolm Jay Kottler
area code: 781

Lucretia W. McClure
FAX (716) 873-3688

Jeffrey P. Martin
FAX (216) 368-0165

Constance Menninger
(785) 350-5757
FAX (785) 273-9150

Erich Meyerhoff
(212) 263-8280

Edward T. Mormon
Associate Academy Librarian
for Historical Collections and Programs
The New York Academy of Medicine
1216 Fifth Avenue
New York NY 10029-5293
(212) 822-7314
(212) 722-7650 (fax)
emorman@nyam.org

Patty Mullins
e-mail: Patty_M@texmed.org

Michael North
Cataloguer
The Grolier Club
47 East 60th Street
New York, NY 10022
(212) 838-6690
FAX (212) 838-2445

Ynez O'Neill
YVONMHI@ucla.edu

Judith Overmier
ROVERMIER@OU.EDU

Joanne Phillips
(617) 628-5000 ext. 2039
jphillip@emerald.tufts.edu

Nigel Phillips
nigel.phillips@dial.pipex.com

Bruce Ramer
(212) 772-6211, 772-6212

Lilli Sentz
Special Projects Librarian
New York Academy of Medicine
1216 Fifth Avenue
New York, NY 10029-5293
(212) 822-7313
FAX (212) 722-7650
LSENTZ@HEALTH.NYAM.ORG

Barbara Stephens
(913) 588-7244

Carol Stoops
Federal Reserve Bank of Minneapolis
90 Hennepin Avenue
Minneapolis, MN 55480-0291
(612) 204-6339
FAX (612) 204-6199
carol.stoops@mpls.frb.org

Jack Termine
jtermine@netmail.hscbklyn.edu

Barbara VanBrimmer
zip code: 43220
FAX (614) 292-9919

Pamela Van Hine
Add to address: P.O. Box 96920
zip code: 20090-6920
FAX (202) 484-1595
ON THE WEB

by Lisa A. Mix

Thanks to all of you who have sent me the URLs for your institutions' Web sites. In the coming issues of The Watermark, "On the Web" will be featuring Web sites of institutions of ALHHS members. So, E-mail me your URLs at <lmix@welchgate.welch.jhu.edu>.

HAWAII MEDICAL LIBRARY ARCHIVES
AND RARE BOOK COLLECTIONS
http://hml.org/WWW/archives.html

The Hawaii Medical Library's Archives and Rare Book Collections contain over 5,000 photographs and 431 linear feet of rare books, papers, oral histories, and medical artifacts. Though the collection is small, the staff uses it to maximum advantage in presenting information on the Web site, resulting in an excellent resource for studying the history of medicine in Hawaii. Furthermore, some smart linking makes this site a good starting point for finding Web sites concerning both the history of medicine and the history of Hawaii.

The site is well-constructed and easy to navigate. The first page begins with a brief introductory paragraph followed by a table of contents; each subsequent page follows this format consistently.

The real "meat" of the Web site lies in the three sections listed under "Hawaii Medical Library Archives": "In Memoriam - Doctors of Hawaii"; "Medicine in Hawaii: Oral History Series"; and "Medicine in Hawaii: The World War II Experience".

"In Memoriam - Doctors of Hawaii" is a biographical dictionary of over 600 doctors who practiced medicine in Hawaii from the early nineteenth century until 1985. Each entry consists of a brief biographical sketch, with many of the entries linking to a jpeg photograph of the individual.

If an oral history of the physician is available,
the entry gives a link to a description of the oral history.

“Medicine in Hawaii: Oral History Series” is a series of videotaped interviews with 26 Hawaii doctors. The Web page on the oral history series provides capsule descriptions of each interview, including the individual’s dates, the date and place of the interview, and a brief summary of topics covered. Links to photographs and biographical sketches (from “In Memoriam”) are given where available.

“Medicine in Hawaii: The World War II Experience” provides a comprehensive resource for studying the Hawaii medical community’s response to the attack on Pearl Harbor and the events that followed. The “World War II Pearl Harbor Attack Diary,” based on logs kept immediately after the attack, is displayed as a table, showing times of messages and events; it is a minute-by-minute account of the events of 7–10 December 1941. Also included are “Remembrances of December Seventh,” originally published in the Hawaii Medical Journal from 1947–48. This is a series of interviews with physicians who were in Honolulu at the time of the attack, recounting their personal experiences (links to the physicians’ biographical sketches are provided where available). This section also provides starting points for further research, with a bibliography of sources available at the Hawaii Medical Library, as well as a list of links to other Web sites concerning Hawaii and World War II.

One of the overall strengths of this Web site lies in its links — both within the site and to outside sites. On the home page are three groups of links to external sites: “Medical Archives and Special Collections,” linking to a select group of archives and special collections in the health fields; “Archives, Exhibits, and Special Collections in Hawaii;” and “Other Archives and Special Collections.” Each link is accompanied by a brief summary of the site.

EDWIN V. GLASER RARE BOOKS
POST OFFICE BOX 1765
SAUSALITO, CALIFORNIA 94966
PHONE: (415) 332-1194
FAX: (415) 332-5024

Rare, important, and historic books in . . .
MEDICINE, SCIENCE, TECHNOLOGY,
BIBLIOGRAPHY, THE HISTORY OF IDEAS,
AND 16th- AND 17th-CENTURY BOOKS
IN MANY FIELDS
Catalogues issued . . . Visitors by Appointment . . . Quotations solicited
Established in New York in 1964

Smart linking is also a hallmark of the Web site of the Archives’ parent institution, the Hawaii Medical Library <http://hml.org/>. The home page provides links to “Health Related Web Sites in Hawaii and Around the Pacific,” “Links to Other Hawaii Information Sources,” “Links to Other Medical Resources,” and “Search Tools and Starting Points.” Particularly useful is the “Find it Fast” page, which lists search engines and directories, with an emphasis on the health fields.

OTHER WEB SITES OF INTEREST
NOTE: Some of these sites have been listed before, but the URLs have changed in the meantime; The updated listings follow.

American Association of Nurse Anesthetists
http://www.aana.com/archive/archiveTOC.html

American Philosophical Society
http://www.amphilsoc.org

Archives for Research on Women and Gender (University of Texas, San Antonio)
http://www.lib.utsa.edu/Archives/

Clearinghouse of Image Databases
(maintained by the University of Arizona)
http://dizzy.library.arizona.edu/images/clearinghouse/clearinghouse.html
Indexes, Abstracts, Bibliographies, and Table of Contents Services
http://info.lib.uh.edu/indexes/indexes.htm

International E-mail Directory of Historians of Pharmacy

International Society for the History of the Neurosciences
http://bri.medsch.ucla.edu/archives/ishnhome.htm

Making of America
(University of Michigan Digital Library Initiative)
http://www.umdl.umich.edu/moa/

Medical/Health Sciences Libraries on the Web
http://www.arcade.uiowa.edu/hardin-www/hslibs.html

National Museum of Health and Medicine

Native American Health History Database
(University of New Mexico's Health Sciences Center Library)
http://falstaff.unm.edu:80/na/main_na.html

Ready, 'Net, Go! Archival Internet Resources
http://www.tulane.edu/~lmiller/ArchivesResources.html

GEORGIA ARCHIVES INSTITUTE

Designed for beginning archivists, manuscript curators, and librarians, the 31st annual Georgia Archives Institute will offer general instruction in basic concepts and practices of archival administration and management of traditional and modern documentary materials. The Institute, held in Atlanta, GA from 8–19 June 1998, is sponsored by the School of Library and Information Studies at Clark Atlanta University, the Georgia Department of Archives and History, the Jimmy Carter Library, and the University Center in Georgia. David B. Gracy II, Governor Bill Daniel Professor in Archival Enterprise at the University of Texas at Austin will be the instructor during the first week. Topics will include acquisition, appraisal, arrangement, description, reference, and legal and administrative issues. Kathleen Roe of the New York State Archives will speak on the MARC format, and Hilary A. Kaplan of the Georgia Department of Archives and History will speak on preservation. The remainder of the Institute is devoted to a practicum experience, during which students disperse to several local archival institutions.

Tuition is $500. Enrollment is limited and the deadline for receipt of application and resume is April 1, 1998. Tuition does not cover transportation, housing, or meals. Housing information is available upon request.

The Society of Georgia Archivists gives one scholarship for the Institute consisting of full payment of tuition. For application or information, please contact Dr. Donald Oehlerts, 3110 Nottaway Court, Chamblee, Georgia 30341.
FROM THE ‘NET
compiled by Eric v. d. Luft

The next annual meeting of the American Pediatric Society, Society for Pediatric Research, and Ambulatory Pediatric Association — collectively called Pediatric Academic Societies — will be on May 1-5, 1998 at New Orleans. Last year we began a new session “Historical Perspectives,” and this year too, the council of these societies have approved inclusion of such a session.

For additional details about the meeting, registration, etc., contact: APS/SPR/Central Office, Suite B-7, 3400 Research Forest Drive, The Woodlands, TX 77381. E-mail: <aps-spr@mail.mdpcnet.com>. For history session related questions contact Dr. Tonse Raju <udupa@uic.edu> or Dr. Gail Demmler: <gdemmler@bcm.tmc.edu>.

(CADUCEUS-L 18 September 1997)

The AANA Archives Anesthesia Apparatus Exhibit is now on permanent exhibit at the American Association of Nurse Anesthetists (AANA) Archives. The exhibit is open to AANA members and the public by appointment (Monday-Friday, 8:00 am to 4:00 pm). The Archives is in the AANA Executive Office which is located at 222 South Prospect Avenue, Park Ridge, IL. If you have any questions please direct them to: Lee C. Fosburgh, MLIS, MA, Archivist, AANA Archives, 222 S. Prospect Ave., Park Ridge, IL 60068-4001; (847) 692-7050, ext. 3006; <lfosburgh@nsilsilus.org>, <http://www.aana.com>.

(AARCHIVES 18 September 1997)

New list: H-LIS — History of Library and Information Science, sponsored by H-Net, Humanities On-line, Michigan State University. H-LIS is a moderated internet discussion forum on the History of Library and Information Science. It is open to any-one with a mature and abiding interest in the interdisciplinary study of libraries and information broadly construed to include literacy and reading, print culture, libraries and archives, computerization and automation, information retrieval and documentation, and electronic information and communication. The H-LIS electronic discussion group and Web site will consider all geographic regions and time periods in an effort to enhance understanding and interpretation of the LIS past. Although there are other electronic discussion lists targeted to librarians, information scientists, and archivists, H-LIS provides a central resource for the organization and dissemination of material related to the history and culture of LIS. As such, its audience includes not only librarians, information scientists and archivists but also historians interested in a wide variety of information-related topics.

The H-LIS list is edited by Suzanne Hildenbrand, Associate Professor, School of Library and Information Studies, State University of New York at Buffalo, <lshilde@ACSU.Buffalo.edu>. H-LIS will be moderated to filter out extraneous messages (like requests for subscription) and items that do not belong on H-LIS. They may belong somewhere else, or in the judgment of the editors they do not aid the scholarly dialogue. The editors will not alter the meaning of messages without the author’s permission. The list is advised by a board of scholars.

Logs and more information about H-LIS can also be found at the H-LIS Web site, located at <http://h-net.msu.edu>.

To join H-LIS, please send a message to: <listserv@h-net.msu.edu>.

H-Net is an international network of scholars in the humanities and social sciences that creates and coordinates electronic networks, using a variety of media, and with a common objective of advancing humanities and social science teaching and research. H-Net was created to provide a positive, supportive, equalitarian environment for the friendly exchange of ideas and scholarly resources, and is hosted by Michigan State University. For more information about H-Net, write to <H-Net@H-net.msu.edu>, or point your web browser to <http://h-net.msu.edu>.

(SHARP-L 22 September 1997)

For more information, contact James H. Cassidy, phone: 301-496-5405; e-mail: <james_cassedy@ocschost.nlm.nih.gov>.
(CADUCEUS-L 26 September 1997)

Anesthesia History Association announces the Third Annual Resident Essay Award. This award will be presented at the AHA’s annual dinner meeting held in conjunction with the American Society of Anesthesiologists October, 1998, annual meeting in Orlando, Florida.

The 1997 first prize winner was Dr. David C. Lai, from the University of Rochester Medical Center for his essay, “Polymath Beneath the Firedamp: The Story of J.B.S. Haldane.”

The recipient of the 1998 Residency Essay Award will receive a $500.00 honorarium and the manuscript will be presented at the Spring 1999 Meeting of the Anesthesia History Association and subsequently published in the Bulletin of Anesthesia History.

A 1500-3000 word essay related to the history of anesthesia, pain management or critical care should be submitted to: Doris K. Cope, M.D., Clinical Director, University of Pittsburgh Medical Center, Pain Evaluation and Treatment Institute, 4601 Baum Blvd., Pittsburgh PA 15213-1217.

The entrant must have written the essay either during his/her residency or within one year of completion of residency. Residents in any nation are eligible, but the essay must be submitted in English.

Entries must be received on or before 15 August 1998.
(CADUCEUS-L 29 October 1997)

Symposion in Wolfenbuettel (Germany): “The Library as a Cultural Institution,” September 28-29, 1998, Herzog-August-Bibliothek Wolfenbuettel, Bible Hall; Chairman: Dr. Uwe Jochum, Fachreferent / Subject Specialist, Universitaet Konstanz, Bibliothek, 78457 Konstanz, Germany. Tel.: 07531 / 882842. Fax: 07531 / 883082. E-mail: <uwe.jochum@uni-konstanz.de>.

There is no doubt that due to the implementation of data systems libraries throughout the world are in a stage of radical change: the former libraries with walls and splendid buildings that housed millions of books printed on paper are now changed into libraries without walls that circulate texts as data files via international networks. This conversion is not only thought of as the end of the good old library, but also as a radical new start.

If you wish to attend the Wolfenbuettel Symposion please write to: Dr. Werner Arnold, Herzog-August-Bibliothek, Postfach 13 64, D=9638299 Wolfenbuettel, Germany. Tel. 05331 / 808303. Fax: 05331 / 808173. Email: <arnold@hab.de>.

Please note: all lectures will be held in German, but you may of course contribute to the discussions in your native language.
(H-LIS 29 & 30 October 1997)

Call for papers: “Women, Science, and Health in Post-War North America: Comparative Canadian-American Perspectives, 1940-1980,” a special conference to be held at York University, Toronto, Ontario, Canada on October 16-17 1998.

Proposals for papers are welcomed on topics relating to the gendered contours of scientific medicine, alternative therapies, institutions and the state, as well as on women’s experiences as patients, practitioners and policy-makers in post-World War II Canada and/or the United States.

Papers must consist of original work not already published or in press.

Preference will be given to papers that address comparative themes or will facilitate comparative discussion.
Please send a one-page abstract and brief c.v. by February 1, 1998 to: Dr. Georgina Feldberg, Director, Centre for Health Studies, 214 York Lanes, York University, 4700 Keele St., North York, Ontario, Canada M3J 1P3. Phone: 416-736-5941. Fax: 416-736-5986.  
(H-LIS 31 October 1997)

I am continuing to update “Medical History on the Internet” at URL: <http://www.anes.uab.edu/medhist.htm>. I am no longer maintaining the plain text version.

A.J. Wright, Dept. of Anesthesiology Library, School of Medicine, University of Alabama at Birmingham, meds002@uabdpo.dpo.uab.edu  
(CADUCEUS-L 7 November 1997)

The third meeting of the International Society for the History of the Neurosciences, will be held in the historic town of Annapolis, Maryland, at the harbor, Sunday, June 7 through Tuesday, June 9, 1998.

A block of rooms is reserved at the Annapolis Marriott Waterfront hotel at a favorable convention rate; there is an arrangement for students willing to room together. All attendees will be expected to make their own room reservations, no later than 45 days in advance of the meeting in order to obtain the convention rate (by April 22, 1998).

Please contact for further details about the meeting, hotel, city and the Chesapeake Bay venue (and for) program ideas, proposals, abstracts, etc.: Harry A. Whitaker, Ph.D., Professor and Head, Department of Psychology, Northern Michigan University, Marquette, Michigan 49855; Office: (906) 227-2937, X-2935; Fax: (906) 227-2954; e-mail: <hwhitake@nmu.edu>.

The meeting announcement and call for papers is also available on the World-Wide Web. Point your browser to: <http://bri.medsch.ucla.edu/archives/call1998.htm>.

(HISTNEUR-L & CADUCEUS-L 18 November 1997)


Meetings are held at the East Bank Club, Chicago. 6:00 pm dinner, 7:00 pm lecture. For registration and more information, call: 773-947-2829.  
(CADUCEUS-L 18 November 1997)

Introducing NURHIS-L: An International forum for the discussion of Nursing History

NURHIS-L is an electronic mailing and discussion list for the discussion of nursing history. Topics of interest include issues which can promote dialogue, interaction, and collaboration related to historical research, nurse leaders and historical figures, and historical nursing archives and artifacts. Participants include nurse historians, nurses, students, historians, and librarians interested in nursing history.

To enhance the scope of discussion, postings to NURHIS-L can also include announcements of interest, such as news, seminars, and conferences.

To subscribe to NURHIS-L, follow this two-step process: (1.) Send this exact message, with no extra characters: To: LISTSERV@UConnVM. UCONN.EDU Subject: (blank) Message: SUB NURHIS-L Florence Nightingale (use your own name) You will receive a message to confirm your request. (2.) When you receive this first confirmation message (which will take minutes to hours), “reply” to the message. State “ok” (no quotes, no extra characters) on the first line. Send the message back. You should receive a second confirmation message stating “You are now subscribed to the NURHIS-L list.” This means you can now post to the list, and will receive others’ postings.

Please forward this message to friends and colleagues If you do not have time to subscribe now, these instructions can be bookmarked at http://www.nursing.ucconn.edu/nurhis-l.html

We welcome you to NURHIS-L, and look forward to your continuing participation. Carol Daisy, RN, PhD (Daisy@UConnVM.UConn.Edu); Sherry LaCoursiere, RN, MS, CCRN (SPL95001@UConnVM.UConn.Edu); Mary Ann Cordeau, RN, MS (MACordeau@aol.com); Eleanor K. Herrmann, RN, EdD, FAAN (Herrmann@UConnVM.UConn.Edu); Olga Maranjian Church, RN, PhD, FAAN (Church@UConnVM.UConn.Edu) List Owners, NURHIS-L  
(CADUCEUS)
EX LIBRIS
by Elaine Challacombe

MAIN ENTRIES

Many changes are currently taking place in the history of medicine collections due to the many recent retirements. Following is a partial update of new personnel as well as where institutions are in the process of hiring.

Thomas Horrocks began his appointment as Curator of Rare Books and Manuscripts in the Countway Library, Harvard University. His new e-mail address is thorrock@warren.med.harvard.edu

The University of Texas Galveston has been convening meetings with consultants from across the country and the state to determine the best professional qualifications desired in the person hired to fill the vacancy left by Inci Bowman’s retirement. The formal hiring process is not yet begun.

The University of Wisconsin Madison has posted the position for Curator of the Health Sciences Special Collections. Applications are due to Diana Slater of the U of WI Health Sciences Library, 1305 Linden Drive, Madison WI 53706, by 4 January 1998. Ms. Slater can be reached at (608) 263-5333.

Christine Ruggere is the new Librarian at the Historical Collection of the Johns Hopkins University. Christine replaces Ed Morman who has moved to the New York Academy of Medicine.

Positions which have not been filled and for which there is no information are the positions at the Robert L. Brown History of Medicine Collection, State University of New York at Buffalo and the Special Collections of the University of Medicine and Dentistry of New Jersey.

Edwina Walls Mann of the Historical Research Center of the University of Arkansas Medical Sciences Library informs us that the Library’s History of Medicine Associates have begun an Adopt-a-Book program fashioned after the New York Academy of Medicine’s successful program. Of the fifteen books selected for adoption by individuals, departments, or colleges, eight have already been adopted.

Martha Stone of the Treadwell Library, Massachusetts General Hospital announces the publication of an historical brochure, “A History of Treadwell Library: Informing the Future since 1847,” in celebration of the 150th birthday of the Library’s founding. Organized in time-line fashion, the brochure is an interesting account of library activity and growth since the beginning. Copies can be obtained from Martha Stone, Coordinator for Reference Services, Treadwell Library, Massachusetts General Hospital, Boston. Martha’s e-mail is stone@medex.mhg.harvard.edu; (617) 724-2780; FAX (617) 726-6784.

ANALYTICS

A. J. Wright, 1998 Chair of the Organizing Committee for the Anesthesia History Association submits a call for papers for the spring meeting to be held 6–7 May in Toronto, Ontario, Canada. Abstracts for twenty-minute papers are invited on historical aspects of anesthesia, critical care medicine, and pain management. Abstracts in medical humanities and/or ethical topics that relate to the history of one or more of those broad areas are also invited.

Abstracts should be no longer than one 8 ½ by 11 sheet of paper. If possible, abstracts should indicate the research problem, sources used, and methodological approach, and may contain no more than ten references.
Abstracts may be submitted by mail, fax, or electronic mail (in plain text format). Disc submission in DOS-compatible form is also permitted.

Deadline for submission is 31 January 1998. Address inquiries and abstracts to: A. J. Wright, MLS, Chair, AHA98 Spring Meeting Organizing Committee, Department of Anesthesiology Library, University of Alabama at Birmingham, 619 19th Street South, JTT965, Birmingham, AL 35233-6810; (205) 934-6502 (voice); (205) 975-5114, ext. 403 (voice); FAX (205) 975-5963.

CALENDAR


EXHIBITS

Open at the New York Academy of Medicine now through 13 March—“Toward an Urban Health Agenda” The sixth and final exhibit commemorating the 150th anniversary of the Academy, features archival and contemporary materials depicting current strategies and historical efforts by the Academy to improve the health of urban populations.

Opening 1 April—“By Reason of Insanity: American Psychiatry and the Trial of Charles Guiteau” Featuring material from the Oskar Diethelm Library, the research collections of the History of Psychiatry Section, Cornell University Medical College, this exhibit will review the insanity defense in the trial of President Garfield’s assassin. Smaller exhibitions, organized in conjunction with events taking place at the Academy, will include “The History of Urology” (January through April) and “Milestones in the History of Asthma” (May through July).

Archives and Special Collections at Columbia University’s A. C. Long Health Sciences Library opened its new exhibit “Open Wider Please: The Evolution of a Profession” on 25 November. The show highlights the emergence of dentistry as a separate discipline and profession over the course of 2,500 years. On display from the holdings of the department are a 1610 edition of Hippocrates; a 1472 Augsburg print of St. Apollonia, the patron saint of toothache sufferers; the first English translation (1634) of Ambrose Pare’s works, open to illustrations of dental tools he invented himself; the second edition (1746) of Pierre Fauchard’s path breaking “Le Chirurgien Dentiste”; and the patient casebook and ledger of an anonymous dentist practicing in Peru, Illinois in 1854-56.

The exhibit was co-curated by Stephen E. Novak, Head, Archives & Special Collections and Steven I. Gold, D.D.S. of the faculty of the Columbia University School of Dental and Oral Surgery. The show was made possible with a generous donation from the dental school. It runs through 13 March 1998. Access to the A. C. Long Library is generally limited to members of Columbia University and the Columbia-Presbyterian Medical Center, but those wanting to view the exhibit may call Archives & Special Collections to arrange admission.

On Thursday, 30 October 1997, the National Library of Medicine at the National Institutes of Health opened its new exhibit, “Frankenstein: Penetrating the Secrets of Nature.” The exhibit features artifacts associated with resuscitating the nearly dead from the early nineteenth century, early efforts at blood transfusion experiments conducted with “animal electricity,” and other attempts to reanimate dead bodies. Other parts of the exhibition include posters and pacemakers, masks and monsters, comics and cartoons, books and brains, all illustrating the ways in which people have coped with their desires, hopes, and fears of medical science.

“Frankenstein: Penetrating the Secrets of Nature” can be viewed at the Library Monday through Friday, 9:00 am to 5:00 pm. (With extended hours on Thursday, till 9:00 pm) and Saturday 8:30 am through 12:30 pm. The exhibit will run through 15 August 1998.
The Watermark is issued quarterly to members of Archivists and Librarians in the History of the Health Sciences and is edited by Joan Echtenkamp Klein and Jodi Koste.

Membership information may be obtained from Elizabeth Ihrig, ALHHS Secretary/Treasurer, Bakken Library and Museum, 3537 Zenith Avenue, South, Minneapolis, MN 55416; (612) 927-6508; FAX (612) 927-7265; E-MAIL eihrig@aol.com.

Production deadlines are 1 March, 1 June, 1 September, and 1 December.

Submissions may be sent to: Joan Echtenkamp Klein, Historical Collections, The Claude Moore Health Sciences Library, Box 234, University of Virginia Health Sciences Center, Charlottesville, VA 22908; (804) 924-0052; FAX (804) 924-0379; E-MAIL jre@virginia.edu or Jodi Koste, Special Collections and Archives, Tompkins-McCaw Library, Box 980582, Richmond, VA 23298-0582; (804) 828-9898; FAX (804) 828-6089; E-MAIL jlkoste@vcu.edu.

Submissions for Ex Libris should be sent to: Elaine M. Challacombe, Wangensteen Historical Library, Bio-Medical Library--Diehl Hall, 505 Essex Street, SE, Minneapolis, MN 55455; (612) 626-6881; FAX (612) 626-2454; E-MAIL e-chal@maroon.tc.umn.edu.