



New England Sounding Line



The newsletter of the National Network of Libraries of Medicine, New England Region, Jan. - Feb. 1997, Vol. 6, No. 5

Spring Cleaning: Coupons are History in Region 01/08!

by John A. Stey, Associate Director

It's approaching 60 degrees here in Farmington in February! What a treat it would be to actually have a real spring this year.

Coupons can no longer be used for ILL transactions in Region 08 or in Region 01. While you are spring cleaning, if you still have any ILL coupons, they must be returned to the New York Academy of Medicine for reimbursement by March 31, 1997. After this date, they are worthless. The EFTS Advisory Committee recommends that each network member make its own decision on whether or not to join the EPS system in Region 01. We are currently investigating how to make EFTS a singular system that will handle electronic billing for inter-regional transactions. To contact the NYAM for more information on the coupons, call Ann Paietta at 1-800-338-7657 and press 2.

There will be a Regional ILL/Document Delivery Meeting on April 11, 1997 at the Publick House in Sturbridge, MA. This meeting will address issues and concerns of resource libraries and primary access libraries. We hope to have a presentation by a representative from NLM to discuss DOCLINE and other NLM document delivery initiatives. Check the NNLM-NER listserv for more details in the future.

The RFP for Outreach Projects was sent out to all network members in February. The due date for proposals is April 15, 1997. If you know of a non-network member, or health related organization that would be interested in writing a proposal, please have them call the network office at the above number for a copy. We encourage all to consider submitting a proposal. Think collaboration and take a look at Marion Levine's Grants Gallery column for some helpful hints on proposal writing.

The NN/LM NER staff are busy making preparations for NEHA and other road trips in the region. If you or someone you know would like to have a Internet or Internet Grateful Med class or demonstration, contact Kimberly Lavoie, Outreach Coordinator at klavoie@nso2.uchc.edu.

We look forward to seeing you at NEHA or MLA in May.

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Connecticut Maine Massachusetts New Hampshire Rhode Island Vermont

Check us out on the World Wide Web at <http://www.nnlm.nlm.nih.gov/ner/>

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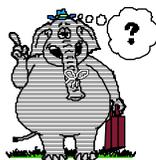
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John Stey, *Editor*
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DOCLINE Facts

*presentation given by Edward Donald, Network Coordinator
summary by Sam King, St. Francis Hospital and Medical Center*

EFTS & EPS (Electronic Payment System-Region 1):



If you do business involving charges with Region 1 libraries and you wish to use an electronic billing system, both libraries will have to belong to the same system. You may encourage them to join EFTS or you may join EPS. To set up an EPS account, you must supply your DOCLINE password and id to the New York Academy of Medicine so that they can access your data. You do not have to send or upload any data to NYAM.

Any problems such as incorrect billing, will have to be resolved between the two libraries involved.

NOTE: The New York Academy of Medicine is no longer supplying coupons. You have until March 31, 1997 to redeem your coupons at the Academy (either cash refund or set up a deposit account). After this date, the coupons can not be redeemed or used to open an EPS account.

For further information on EPS, including documentation, contact Ann Paietta at 1-800-338-7657 and press 2.

Routing Tables:

The idea behind the routing table is to make life easier for you. You should avoid prefixing, the sending of your request to one particular library, as it defeats the purpose of the system. The reason holdings are reported to SERHOLD® is so that the system can match your request with a potential lender and you don't need to look it up in a serials union list. Let the computers do the work for you.

If a particular library appears to be receiving a majority of your requests, consider moving them to a higher cell to give others a chance to fill your request.

You should take a look at your routing table at least every two years. Contact Ed Donald at the NN/LM, 800-338-7657, for further information on making revisions. You may make minor changes over the phone or by e-mail; 860-679-4793 (direct number) or donnald@nso.uhc.edu

Hours of DOCLINE service:

DOCLINE is in operation during the hours of 7:00 a.m. - 10:00 p.m. Monday-Friday and 7:00 a.m. - 5:00 p.m. on Saturday. However, Saturday is not considered a working day when calculating time-triggered actions. The holidays the system is down are also listed on page 1-1 of your DOCLINE manual.

Time Triggered Actions:

You have until midnight of the following work day (M-F) on which the request was sent to your library to receipt it in RECEIPT or it will be moved on to another library. Once you have receipted it, you have four additional work days to mark it as filled in LEND or it will be moved on to another library. You will be reminded on the Welcome Banner after three days to mark the loan as filled as you will only have one more day before it is moved on.

DOCLINE Enhancements

by Edward Donald, Network Coordinator



DOCLINE

By now, I'm sure that you're aware that DOCLINE has had a few enhancements added to it and I know you'll be interested to learn there are still a few more on the horizon.

The biggest change is in the BORROW function. The first thing you'll notice is that the FORM field has changed. The options of (P)hotocopy, (L)oan, and (F)ax have now become (C)opy, the default, and (O)riginal. Once you've decided on the form of the ILL, you're greeted with the new DELIVERY method prompt. This allows you to identify the specific delivery method for each request. You can choose from (M)ail, (F)ax, (A)riel, and (K)Pick-up with the default being (M)ail. The two new faces here are the Ariel and pick-up options. The latter is pretty straight forward, but Ariel deserves a closer look. If you choose Ariel as the delivery method of choice, your request will only route to those libraries in your DOCLINE routing table that have an Ariel address listed in their DOCUSER record. This seems to have caused some concern. "If I put down Ariel as the method of delivery I want, the request will then skip over all of those local in-state libraries that could potentially fill my request but don't have Ariel". NLM recommends that you select Mail as the delivery method and continue to use the Comments field to indicate alternative methods of delivery (Ariel or fax). Most institutions read the comments for clarification and instructions. The risk you run is the lender may make the decision to fax it or pass it on if they don't have Ariel. Remember though, if the request routes to NLM, it will be filled by the delivery method selected since once a request reaches NLM, delivery method is read by machine. If you really want it by Ariel, a carefully designed DOCLINE routing table will give you the control you want. You can check DOCUSER for libraries that use Ariel and then incorporate them into the same DOCLINE cell structure that you already have. For example, in cell 1 put a local reciprocating Ariel using library. In cell 3 put a larger reciprocating Ariel using library. In cell 5 put larger charging Ariel users and so forth. This works the same way as the old (F)ax option did. If you indicated (F)ax, it would only route to those libraries that indicated in DOCUSER that they routinely faxed requests. In addition, you may request (E)mail or (P)rinter if your organization supports these technologies. Refer to the Enhancements Notes for more info on these. You should have received a copy but they are available on the web at:

<http://www.nlm.nih.gov/psd/cas/docline/docsysnw.html>

or call the office and we'd be happy to fax you a copy.

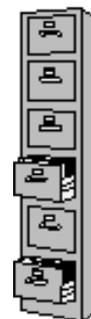
Another change is that the MEDLINE/HEALTH UI/LD ORDER prompt has been shortened and modified. The new prompt, ENTER UI/LD ORDER allows you to enter any UI from MEDLINE®, AIDSLINE®, CANCERLIT®, SPACELINE®, HealthSTAR®, HealthSTAR75®, PREMEDLINE® and OLDMEDLINE®. The system automatically converts non-journal citations to monographic entries. These will then route on your Monograph/Audiovisual/Non-SERLINE routing table.

To mirror the changes in BORROW, LEND now has a new look as well. You will see options indicating that you filled the loan by Mail, Pick-up, Fax, and Ariel. Of course, to reject a loan as unfilled, you still need to pick N/A/REJ which is now option 7. You may have had a question about options 5 and 6, NOT AVAILABLE. This may be a little confusing. For example, if the journal is not available for whatever reason, your impulse may be to pick one of these. Actually option 5 is to be used if you fill the request by e-mail and option 6 is if you fill it by sending it to a dedicated Internet connected printer. Since these technologies aren't widely available, they aren't indicated by name. This wording is being currently looked at and will most likely be changed in the near future.

The only change in RECEIPT you'll notice is that the delivery method is now displayed at the top of the request. You may also see an address or phone number if the request is to be sent via Ariel or fax. A voice phone number would then be given in case you have questions.

Another change that's taking place involves the requests being filled by the National Library of Medicine. They are in the process of switching to a new document delivery system, *Relais*. As a result, they will no longer be reading the COMMENTS field for instructions such as "NLM Don't fill" or "Please Fax". Therefore, it will be necessary to utilize the Start-Stop function to prevent requests from going to NLM. Otherwise they will fill them and bill you for it. "What about requests routing on my M/A/N table?" you ask. Well, currently you need to monitor the progress of the request in STATUS and cancel it after it's routed to cells A-D. "That's too difficult" you reply. The good news is that a Start-Stop function for the M/A/N table is in the works. It should be available with a future set of enhancements to the system. Stay tuned.

If you have any questions, concerns, or feedback, please let me know.



Giving Credit in EFTS

by Edward Donnal, Network Coordinator

I think back to my high school accounting class and remember being confused about Debits and Credits. I suppose some of the problem arose because I associated credit with credit cards and I knew that charges on them was money I owed. However, Credits are actually money coming to me and the Debits are charges against my account. So when you're looking at your monthly EFTS account report, the Debit sheet shows the loans which you requested and are now paying for and the Credit sheet shows the loans that you filled and are billing others for.

Cracks were made for things to fall into and so on occasion there may arise a situation where you were incorrectly charged or perhaps you billed someone else for a loan you shouldn't have. It is a simple matter to correct the problem. On the next monthly upload, simply send a duplicate record for the loan in question EXCEPT replace the dash with an exclamation point and put a minus sign in front of the \$10 charge. For example:

RQNO:ABC!0123456789

CHRG:-10.00

Now I'm mentioning this because the office has been consulted on this procedure in a few instances. However, the latest two versions of QuickDOC® have an option to do this for you and there may be situations out there where the problem is corrected without our knowledge. What I would like to bring to your attention is what you'll see on your statements. For example, library X needs to credit back \$10 to library Y and either uses QuickDOC or manually creates the record and uploads it. On the Debit statement for library Y, they will see the request number but it will have a ! in it. At present, the charge will be in parentheses but we are looking at changing it to actually show the minus sign. This may be mixed with other requests that are in fact charges against your account for loans filled by others. However, if you do the math you will in fact see you were credited back the money. The reason these "refunds" appear on the Debit sheet is because they were sent in by another library. The Credit sheet only shows charges that you submitted against other accounts and is bringing money into your account. I'd be happy to explain this to you if you are still confused or actually come across it. Just give me a call.

You may never see this situation, but I just wanted to let you know that it may be possible. Over the last year we have been fine tuning the reports to make them easier to read and more helpful to you. If you have any other suggestion or comments, please feel free to let us know.

EFTS MEMBERS JOINING

This is a listing of the organizations establishing EFTS accounts from November 27, 1996 to February 18, 1997. For questions, more information or to set up an account contact the office at 860-679-4500.

LIBID	SERHOLD CODE#	ORGANIZATION	DATE JOINED
10010H	NYD	NYU Kriser Dental Ctr.	1/9/97
06111A	NCT	CT Children's Medical Ctr.	1/14/97
05478A	NWM	Northwestern Medical Ctr.	1/14/97
06320B	LMH	Lawrence & Memorial Hosp.	1/14/97
02908A	JPA	Rhode Island College	1/15/97
19174B	PEM	University of Pennsylvania	1/28/97
01201A	BKM	Berkshire Medical Ctr.	2/3/97
06776A	NMH	New Milford Hospital	2/5/97
11733A	SSB	SUNY Stony Brook	2/6/97
02186B	CYL	Curry College	2/6/97
04011A	RMB	Mid Coast Hospital	2/11/97
10021E	RKF	Rockefeller University	2/11/97
02114A	ERI	Schepens Eye Research	2/18/97

EFTS MEMBERS LEAVING

These organizations have been removed from EFTS.

01040C	PHH	Providence Hospital	1/1/97
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There is a complete listing of EFTS participants on the NN/LM NER homepage:

<http://www.nnlm.nlm.nih.gov/ner/>

We want to hear from you!

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5370.
(860) 679-4793 or
donnal@nso.uhc.edu

Please submit items by
April 18, 1997 for the
March - April issue.

More grant opportunities!

by John Stey, Associate Director



The Health Resources and Administration's (HRSA) Office of Rural Health Policy has announced that FY97 funds are available for a number of grants under the Rural Health Outreach, Network Development, and Telemedicine Grant programs.

Rural Health Outreach Grants fund the development of innovative new service delivery systems in rural areas, supporting the development of new services and the enhancement of existing services. Network Development Grants fund the planning and development of vertically integrated networks in rural areas. Guidelines for the Telemedicine Grant program will be announced soon. The deadline for applications is March 31.

To receive an application kit, contact HRSA Grants Application Center, 40 W. Gude Dr., Suite 100, Rockville, MD 20850, (888) 300-4772. Guidelines are available on the Rural Information Center Health Service Web site at:

<http://www.nal.usda.gov/ric/richs/>

or the Office of Rural Health Policy at (301) 443-7440.

We Know Who You Are

The Network Membership survey was sent out by the NN/LM in October of 1996. To date only 40% of Network Members have returned this survey. There was a follow up postcard reminder sent out in December. If you haven't responded and need another copy or want to check if yours was returned, contact the NN/LM office at 860-679-4500. If we don't hear from you, you'll probably be getting a call from us. The information is important as it improves the accuracy of the DOCLINE system. This is even more pertinent with the new enhancements. Further more, we will be issuing a printed directory this year and we'd really like to have your current information. When you get new staff, a new phone number or ILL information changes, please let us know so we can keep your record up to date.

DOCLINE Class

Do you have questions about the new enhancements in DOCLINE? Are you new to the position and don't know what Prefixing is? Come to a DOCLINE training class to find the answers. It will be held in Sturbridge, MA, on Friday April 11, 1997 from 4:30-6:30 p.m. following the ILL meeting. Please call Ed at (800) 338-7657 or (860) 679-4793 for more details and to let him know you're coming.

GRANTS GALLERY

by Marion Holena Levine, Assistant Director

In the Fall, the NN/LM NER gave network members the opportunity to apply for small outreach subcontracts for innovative projects that would improve access to information or promote new technology. The maximum award was \$25,000. Nine proposals totaling \$138,373 were received and 4 were funded. John Stey has already given you an overview of each of the successful proposals in the November/December 1996 issue of *New England Sounding Line*. I thought you might be interested in knowing what the successful proposals had in common to assist you in developing those good ideas you have into future NN/LM NER outreach proposals.

- 3 out of the 4 had a title page that caught your eye. By using different sizes of type, an appropriate quotation, a map of New England or an illustration of a loon, these cover pages stood out.
- 4 out of the 4 followed the proposal instructions scrupulously. Each item required, e.g. Statement of Need, Target Population/Geographic Area, was highlighted in some way - either bolded, underlined, or larger type so the section heading stood out on the page.
- 4 out of the 4 completed and included the Budget Attachment 2 from the proposal instructions. By completing this, reviewers could easily see what was requested and how much was requested in each category. Omitting or not completely filling in any attachment sent by a subcontracting agency can cause your proposal to lose points during the evaluation process.
- 4 out of the 4 had letters of support from appropriate people or groups who would benefit from the outreach subcontract. This is a very important part of any proposal process. It illustrates that the people or group to be targeted by the proposal KNOW about the idea and thinks that it is a GOOD idea. Their letters of support indicate they are willing to commit themselves or their group to the effort.
- 3 out of the 4 used this process to add computer hardware to their libraries in order for them to do the project properly. A subcontract or grant process is one way of enhancing the equipment available in your library - no more waiting for your budget officer to approve the purchase of a new computer!
- 3 out of the 4 proposals were for projects in the \$22 - \$23,000 price range. The other proposal was a mini for \$3,378 - for Grateful Med®/Internet Outreach to over 200 members of the New England Public Health Association over a two year period.

NN/LM NER outreach proposals do not have to be large, extensive undertakings. As future rounds of outreach subcontract opportunities become available, think BIG but also think small and see what you can accomplish with those good ideas you have.

Guidelines for buying a PC

by Jill Ehrenzweig, Education Coordinator



There are all sorts of software packages being developed now with silver bells and golden whistles. They all sing, dance, and perform some truly miraculous functions...if you have the right amount of computer memory and speed. I've made the mistake before of downloading a software program from the web only to later find out that my processor was too slow, thus three out of four attempts at using the nifty software crashed my computer. The following specifications are intended to act as a general guidelines to all those who are in the position of purchasing a new PC or upgrading an older one. They give general requirements necessary for supporting new software packages which place extra demands on equipment.

The first two things to look for in a computer are a faster processor and more memory. For processors, the pentiums are it. They have clock speeds of 200 megahertz (Mhz) that run about 28% faster than 166-Mhz processors if video components and the hard drive are up to speed. Although 120-Mhz is sufficient for many operations and processor speeds of 120-Mhz or lower are still common on the market, you shouldn't buy anything less than 120-Mhz. And keep in mind that the slower processors will go out of date sooner than the pentiums.

For a 200-Mhz machine, 32 megabytes of memory (32 MB of RAM) and a 2- to 3-gigabyte (GB) hard drive are nearly standard. Computers with a 120- to 133- Mhz processor generally come with about half that capacity—16 MB of RAM and a 1- to 2-GB hard drive. That's adequate for most of today's memory-needy computer programs and it's usually easy to upgrade from 16 to 32 MB of RAM. Zip drives may be an added advantage, offering the option for much greater storage capacity. A zip drive can hold up to 100-MB of data on a \$15 to \$20 removable cartridge.

Another feature worth investing in is faster components. CD-ROM drive speeds and modem speeds are both important. CD-ROM drives come in speeds of 4X, 6X, and 8X. Faster is generally better but the new eight speed (8X) CD-ROM drives won't perform much better than older quad-speed drives for most multimedia software titles. However, for titles that require a lot of searching the faster speeds pay off. The 28.8 kbps modems are desirable for using the World Wide Web. The faster 33.6 kbps modems aren't worth investing in because most phone lines can't support the higher speed and won't be able to anytime soon.

"Luxuries" like how big the monitor is, the shape of the keyboard, where the buttons and ports are located are often overlooked but can enhance user satisfaction. Keep them in mind especially if you're going to be spending large amounts of time using your computer.

As for cost, expect to pay approximately \$1,900-\$2,800 for a new computer. It's no small investment so shop around and choose wisely.

Unfortunately, the final thought for these guidelines isn't a positive one. I always hate to mention it, but in the rapidly changing realm of technology, a computer purchased today will need to be upgraded in about three years. ...Something to think about and plan for.

Consumer Reports as well as the industry magazines such as *PC World* often provide comparison reports that would be very helpful in deciding what to buy.

TRAVEL LOG

by Jill Ehrenzweig, Education Coordinator



My training schedule has started moving full speed over the past couple of months, with several trips made to Providence, RI; Boston, MA; Springfield, MA; Norwich, CT; and Concord, NH. Over the next couple of months I will be extending my invitation in Providence and Boston, and will also be venturing far East to Cape Cod and far North to Littleton, NH and Springfield, VT. The classes I offer are Grateful Med, Internet Grateful Med, and the Internet itself. Category 1 CMEs are available to health practitioners who attend the Grateful Med or Internet Grateful Med classes. If you are interested in obtaining training for yourself, your staff, or the medical professionals you work with, please contact me at (800) 338-7657. Press "1". I'll be happy to mention your site in the next newsletter as a place I've visited.

Just A Thought about Loansome Doc™

You were afraid that if you agreed to be a Loansome Doc provider, you'd be flooded with requests from people doing their own searches on Grateful Med. The test of time has proven that didn't happen. You may have also feared that if you gave our office your name as a Loansome Doc provider that we'd be giving it out left and right. During the last quarter we made 19 referrals for the entire region. Okay, so we haven't convinced you to add this to your arsenal of revenue makers. What I would offer is to utilize it for your own patrons. With access to the Web growing daily, your patron can send his request to you via Loansome Doc right from their office instead of printing it out and bringing it to the library. This would save both of you time and effort. If you have any questions or would like to see some examples of Loansome Doc policies, contact the office.

Net*Worthy

by *Kimberly R. Lavoie, Outreach Coordinator*

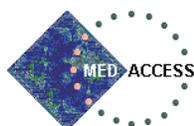
Has a patron come to your reference desk needing information regarding a physician's background and credentials? Instead of searching in the American Medical Association Directory or the Directory of Physicians in the United States, the Internet contains additional resources to find information on physicians. Some available World Wide Web sites are:



AMA Physician Select

<http://www.ama-assn.org/iwcf/iwcfmgr206/aps?153181781>

According to the homepage, *AMA Physician Select* is compiled and published by the American Medical Association (AMA) as a reference source of demographics and professional information on individual physicians (doctors of medicine and doctors of osteopathy or osteopathic medicine) licensed to practice in the United States. The entries provide office address, telephone number, medical school and year of graduation, residency training, primary and secondary practice specialties, and board certification. You may search by physician's name or medical specialty. You can search for a specific physician or locate a physician in a particular state by type of specialty (25 listed). The site lists physicians that are both AMA and non AMA members. In general, the site has comprehensive entries and is extremely easy to search with a clear and concise search form. There is also on-line search tips. In conclusion, *AMA Physician Select* provides another resource to obtain up-to-date information on physician credentials.



MedAccess

<http://www.medaccess.com>

This site contains comprehensive information for both the healthcare professional as well as the general public. MedAccess has established a Healthcare Locator database containing links to several pages with information needed to find a hospital, special treatment center, nursing home, or long-term care facility. In addition, Physician Locator contains information on physicians practicing in the U.S. from their state's licensing board. At present, there is only access to 28 states, but MedAccess is working to bring the others on-line. A typical entry provides name, specialty, address, hospital affiliation, medical school attended, and year of graduation. The search form is easily understood with several pull down menus to aid in the selection of terms. There are also search tips and help screens for the user. In general, it is an easy site to use to obtain physician information.



The National Network of Libraries of Medicine

<http://www.nnlm.nlm.nih.gov/ner/>

If you looked at the EFTS list on page 4, you can see we have quite a few new organizations that are utilizing EFTS to pay for their ILL's. We even have a withdrawal, as Providence Hospital has closed. "Now how can I get the latest listing of who's participating" you may ask. Well, in our never ending quest to make things more accessible, We've now expanded upon the list on our homepage. Now you can look at the listing of EFTS members sorted by State, Organization, LIBID, Date Joined or SERHOLD code.

And of course for those who don't have access to the web, you may always contact our office and we'd be happy to fax you a listing sorted however will be most helpful to you.

As some of you know by now, the NN/LM Network Directory on our homepage isn't quite up to date. Well, we want to let you know that we're working on it. We're in the process of setting it up so that the on-line directory will be updated on a daily basis. When you phone in your changes and we revise the data in our Network Membership Database, it will automatically be reflected in the web version. This will eliminate the web version falling out of currency as has happened. Stay posted for further developments.

by *Joseph Harzbecker MS(LS), AHIP*
Coordinator for Reference Service
BUMC Alumni Medical Library



The MaHSLIN homepage is now up on the WWW at:

<http://nnlmner.uchc.edu/nahsl/mahslin.html>

The site includes information on the Executive Board and Committee chairs, subscribing to MaHSLIN-L, the annual meeting, membership, and a mission statement. More work will be done on the page, this version is only a beginning.

I would like to thank the MaHSLIN Board, Anita Loscalzo, and Mark Gentry for their support, advice, and assistance. Mark mounted the page on the nnlm server this week.

If you have comments or suggestions please send them to me at: harzbeck@bu.edu.

Calendar of Events

March 20, 1997

"The Future for Librarians: Positioning Yourself for Success"
A satellite video conference sponsored by AALL, MLA, SLA and Lexis-Nexis.
Contact MLA at (312) 419-9094 for details or our office at 1-800-338-7657

March 25, 1997

Creating a Homepage Using HTML
NELINET, Newton, MA
info: (800)NELINET

March 25-27, 1997

The NN/LM-NER/NAHSL staff will be exhibiting at the New

England Healthcare Assembly in Boston, MA.

April 1-2, 1997

Connecticut Libraries-Bridges to the 21st Century. CLA Annual Conference, Raddisson, Cromwell, CT Info: Lana Ferguson, (203) 453-8282

April 4, 1997

A Survivor's Guide to Using Electronic Resources and Services Intelligently(Dancing With Change-Electronic Library Resources: Issues and Opportunities, a Two-Part Teleconference)
WCLC for CLSU's
info: (203) 577-4010

April 11, 1997

The NN/LM NER staff will be conducting a ILL meeting & DOCLINE workshop.
Sturbridge, MA
RSVP (800) 338-7657.

April 12-19, 1997

The NN/LM NER staff will be exhibiting at the American Academy of Neurology in Boston, MA.

April 13-19, 1997

National Library Week

April 28-29, 1997

Massachusetts Library Association Annual Meeting.
Details to be announced
Sturbridge, MA

April 28-29, 1997

MEDLARS Fundamentals Training
Farmington, CT
(212) 822-7396
(800) 338-7657, press 2.

May 23-28, 1997

Medical Library Association
Seattle, WA

June 4, 1997

The NN/LM NER staff will be exhibiting at the Health Tech '97.
Worcester, MA

June 4, 1997

MEDLARS Fundamentals Training
New York, NY
(212) 822-7396
(800) 338-7657, press 2.

Changes in DOCLINE status

- Norwich University, LIBID 05663A has been removed from the DOCLINE system.
- Wing Memorial Hospital, LIBID 01069A, was reactivated in DOCLINE.
- Rockville General Hospital, LIBID 06066A was removed from DOCLINE and its holdings have been consolidated with Manchester Memorial Hospital, LIBID 06040A. Use Manchester's LIBID in your routing table.

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