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Contents

Message from the
Chair

News &
Announcements

Events

Member Spotlight

Original Articles:

Researching Ethical
Dilemmas and
Moral Distress
Among Consumer
Health Information
Professionals

One Librarian's Role
Editing Patient
Education

Building Community
through
Programming with
NLM Traveling
Exhibits

Sparks

You Might Be
Interested In...

Book Reviews

Call for Submissions

Consumer Connections



Consumer & Patient Health Information Services

Message from the Chair

Claire B. Joseph, MS, MA, AHIP, Chair, CAPHIS 2021-2022
Director, Singh Medical Library
Mount Sinai South Nassau
Oceanside, NY



"It ain't over til it's over"

Whether you prefer your tautology spoken (by legendary baseball manager Casey Stengel in 1973), or sung (by Lenny Kravitz in 1991), this most certainly applies to COVID-19. COVID-19 has had an impact in some way, shape, or form, on every one of us, and, apparently, it's not going to go away quietly or any time too soon!

We are all doing our best to keep healthy and "Keep Calm and Carry On." We as health sciences librarians, especially consumer health librarians, are in the unique position to not only keep providing information and resources for clinicians, but to also assist the public in their health information needs, including sorting through the maze of COVID-19 information, misinformation, and disinformation, what WHO labeled an "infodemic."

I've had my two Pfizer vaccine doses and my Booster shot, not to mention my annual flu shot; I continue to go in to work each and every day, as I have since the pandemic hit.

We'd all love to hear from you about any in-house or outreach

(Continued Next Page)

(Message from the Chair Continued)

programming or initiatives your library has accomplished with regard to COVID-19. In fact, we'd always love to hear about any programs or initiatives your library has done, period!

CAPHIS is working on an update to our Bylaws; this update is necessary primarily due to MLA changes, e.g., we no longer need a Treasurer. We'll keep you posted on this.

And it's time to hold our Caucus elections! Caucus election slates are due to be submitted to MLA by March 7. Please be on the lookout for information on this from Dana Ladd, our Immediate Past Chair and Chair of the Nominating Committee.

So, sit back and enjoy another great issue of *Consumer Connections* with thanks to the newsletter's awesome editor, Karin Bennedsen, and her trusty team!

Stay well and safe!

News & Announcements



Let us know about member news, publications, presentations, etc. – send to [Lindsay Blake, MLIS, AHIP](#), section editor.

Member Publications

Lauseng DL, **Alpi KM**, **Linares BM**, Sullo E, von Isenburg M.

Library involvement in health informatics education for health professions students and practitioners: a scoping review. *J Med Libr Assoc.* 2021 Jul 1;109(3):365-75. DOI:

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Mani NS, **Ottosen T**, **Fratta M**, Yu F. A health literacy analysis of the consumer-oriented COVID-19 information produced by ten state health departments. J Med Libr Assoc. 2021 Jul 1;109(3):422-31. DOI: <https://doi.org/10.5195/jmla.2021.1165>

Hinrichs RJ, **Ramirez M**, Ameen M. The publication fate of abstracts presented at the Medical Library Association conferences. J Med Libr Assoc. 2021 Oct 1;109(4):590-98. DOI: <https://doi.org/10.5195/jmla.2021.1220>

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"I Am MLA" Ambassadors



[David G. Keddle](#)



[Jess Callaway](#)

You Are MLA!

Your fellow MLA members want to get to know you! Answer some brief questions about your career, interests, and hobbies to become our next featured [I Am MLA](#) profile. This program is a wonderful way to showcase our diverse membership and meet new people.

[Submit](#) your I Am MLA profile now.

NNLM Sponsors MLA Specialization Application Fees

MLA is pleased to announce that the Network of the National Library of Medicine (NNLM) will sponsor the application fees for MLA's three specializations. You can find information on applying for the fee waiver on each of the specialization pages.

Consumer Health Information Specialization (CHIS)

- Your CHIS shows employers, colleagues, and the public that you are committed to offering quality consumer health information services and to staying current with developments in consumer health information resources, technologies, and services.

If you have been considering earning a specialization, this may make your decision just a little easier!

Upcoming Events: January – June 2022



Conferences:

[ICML & AHILA partner for the 2022 International Congress of Medical Librarianship](#). Pretoria, South Africa March 15 – 19, 2022

[KLA/SLA Joint Spring Conference – Resilient Librarians: Surviving to Thriving](#). General Butler State Resort Park, Carrollton, KY April 6-8, 2022

[MLA 122nd Annual Meeting: Reconnect, Renew, Reflect](#). In person & virtual, New Orleans, LA May 2-7, 2022

[ALA Annual Conference & Exhibition: Together Again!](#) Washington, DC June 23-28, 2022

Select MLA CE Opportunities:

For a complete schedule of MLA CE opportunities visit: <http://www.medlib-ed.org/>

[Drawn to Graphic Medicine: Bringing Comics into Medical Librarianship \(Recording\)](#) Registration fee – 1.5 credit hours

NNLM Upcoming CHIS CE Classes – FREE:

For a complete schedule of NNLM classes visit: <https://nnlm.gov/training>

[Trauma-Sensitive Programming: Using Mindfulness to Create Safe Space](#) February 23, 2022

[Wikipedia + Libraries: NNLM](#) February 28, 2022 - March 25, 2022

[Working With Youth Impacted by the Child Welfare System](#) March 23, 2022

[Spring 2022 #CiteNLM Wikipedia Edit-a-thon](#) April 1, 2022 (no joke! 2 CE credits!)

[Providing Multilingual and Multicultural Health Information](#) May 23, 2022 - June 17, 2022

NNLM Recorded CHIS CE Classes – FREE:

[Create NNLM User Account and Login to Register](#)

Caring for the Mind (available until Sep 27, 2022)

(Continued Next Page)

ClinicalTrials.gov for Librarians (available until Sep 29, 2022)

Effective Health Communication and Health Literacy: Understanding the Connection (available until Oct 18, 2022)

Providing Multilingual and Multicultural Health Information (available until Aug 15, 2022)

Rural Health Resources (available until Nov 16, 2022)

Tips and Tools for Closing the Digital Health Divide (available until Apr 17, 2022)

Trauma-Informed Librarianship: Building Communities of Care (available until Jan 12, 2023)

Select NNLM Regional Recorded Webinars of Interest – FREE:

May be possible to get CE credit for these. For more information, contact: NNLM Region 3, nnlmregion3@unthsc.edu

[Use of podcasts to reduce misinformation in the time of COVID-19: A collaboration of librarians, healthcare providers, and community organizations](#) (January 12, 2022)

[Employing Community Wellness Liaisons to Create More Inclusive Public Libraries](#) (November 12, 2021)

[Health Literacy! It Just Got Graphic](#) (October 20, 2021) *

[Incorporating Health Literacy in Community Engagement](#) (September 8, 2021)

**To ask about credit for this one contact debra.trogon-livingston@gastongov.com in Region 2*

Friends of the National Library of Medicine Virtual Workshop Series 2022:

[Post-Pandemic Libraries: The Upcoming Era of Change](#), March 17, 2022

[Fairness and Inclusiveness in Scientific Publishing](#), April 13, 2022

New Developments in Research Data Management Policies, May 2022
(Agenda and registration information will be posted soon)

[Past workshop videos also available for purchase](#)

Job Posting

The McGoogan Health Sciences Library at the University of Nebraska Medical Center (UNMC) in Omaha, NE seeks an innovative and collaborative Community Outreach and Health Systems Librarian to join a team of faculty education and research librarians.



To view the full posting and apply, please visit: <https://unmc.peopleadmin.com/postings/64879>.

Learn about the McGoogan Library and Omaha:
<https://www.unmc.edu/library/about/recruitment.html>.

Have a conference, meeting, webinar, workshop, or other event you'd like to promote? Contact [Nancy O'Brien, AMLS, AHIP](#), section editor.

Original Articles

Researching Ethical Dilemmas and Moral Distress Among Consumer Health Information Professionals

Robin O'Hanlon, Associate Librarian, User Services, Memorial Sloan Kettering Cancer Center, Katelyn Angell, Associate Professor/Coordinator of Library Instruction, Long Island University, Brooklyn Campus, and Samantha Walsh, Manager of Information & Education Services, Levy Library, Icahn School of Medicine at Mount Sinai

If you're an information professional who works in a healthcare setting, you've probably heard of the concept of "moral distress." First described in the nursing literature, moral distress refers to a phenomenon that arises "when one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action" (Jameton, 1984, p.6). Nurses often experience moral distress because they work on the front lines of healthcare organizations where they are often faced with making decisions related to a variety of challenging moral issues (e.g., suffering, resource allocation, patient vs. family priorities), but may have less agency or power than clinicians or administrators to make decisions. Moral distress can cause stress, anxiety, and depression among nurses. In recent years, research has been done to determine how other health care professionals experience moral distress, including medical students and oncologists (Thurn & Anneser, 2020; Lievrouw et al., 2016). Moral distress is distinct from an ethical dilemma, which is "the need to choose from among two or more morally acceptable options or between equally unacceptable courses of action, when one choice prevents selection of the other" (Ong, Yee, & Lee, 2012, p.11). Basically, the difference is that moral distress involves experiencing some form of *constraint*.



Source: worditout.com

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Because Consumer Health Information Professionals (what we dubbed "CHIPs" in our study) are another group of professionals that work closely with patients, family members, and caregivers, we were curious to see if they also experienced moral distress and/or ethical dilemmas. We were also interested to learn that in recent years, some nursing researchers have advocated for broadening the definition of moral distress experiences of constraint, proposing that moral distress occurs when health professionals experience a psychological response due to a moral conflict, restraint,

or uncertainty (Fourie, 2015). Two of us had also experienced what we considered to be moral issues in the course of our work providing consumer health information services and wanted to know if others had similar experiences. The study took a mixed methods approach. After obtaining IRB approval, we created a survey using REDCap which contained demographic questions and a series of questions related to potential discomfort within the context of work as a CHIP. We also

conducted a series of phone interviews with CHIPs, and interview questions focused on definitions of moral distress, professional experiences with moral distress, and any coping strategies to manage distress.

The survey was sent out in early May 2020 and remained open to responses until June 16, 2020. It was sent to 22 electronic mail lists geared towards medical, academic, and public library information professionals. We defined CHIPs as “information professionals providing consumer health information, or health information to non-healthcare professionals, in a variety of settings.” It was important to us that all CHIPs, not just librarians be included in the research. No incentive was offered for completing the survey, so we were very excited when we received 213 complete survey responses. We used STATA to conduct statistical tests to determine if any of the demographic data we had collected could provide greater insight into survey responses. Individuals who were more likely to experience discomfort in their occupation as CHIPs included individuals with less experience and individuals who identified as Black or Latinx. Interview data indicated that participants most commonly experienced ethical dilemmas related to censorship, providing prognosis information, or feeling constrained by institutional policies. Few interview participants described scenarios that reflected moral distress, at least according to the most narrow definition involving constraint.

During the interviews, we heard fascinating stories from CHIPs who experienced ethical dilemmas. One that sticks out to us was an interviewee who described her struggle with providing information on Morgellons Disease, a controversial condition which many health professionals describe as a form of delusional parasitosis but has also been described by a smaller group of

medical professionals as a legitimate dermatological condition. Another described being hired as a “community” health librarian but was discouraged by administrators from conducting health information outreach beyond the bounds of her university campus. Others described feeling discomfort when having to inform patients that the information they have found on their own was not evidence-based and being asked to provide prognosis information including survival rates/outcomes. Another issue interviewees struggled with was not wanting to “overwhelm” their patrons with information but feeling that not providing them with the level of information they requested would amount to censorship.

*Consumer Health Information
Professionals (CHIPs):*

*“[I]nformation professionals providing
consumer health information, or
health information to non-healthcare
professionals, in a variety of settings.”*

If you’d like to learn more about our research, you can read our study ([“Ethical Dilemmas and Moral Distress Among Consumer Health Information Professionals: An Exploratory Study”](#)) published in 2021 in Evidence Based Library and Information Practice (EBLIP). EBLIP is a peer-reviewed, open access journal which is published through the University of Alberta Libraries. We

have also included our interview questions and survey instrument as appendices, and our survey data and interview codebook is available via [the UAL Dataverse](https://doi.org/10.1111/bioe.12064). We'd like to thank all the CHIPs who responded to our survey, and who took the time to speak with as phone interviewees. We'd also like to thank our editor, Erin Owens, for all her patience and guidance with getting our study published.

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One Librarian's Role Editing Patient Education

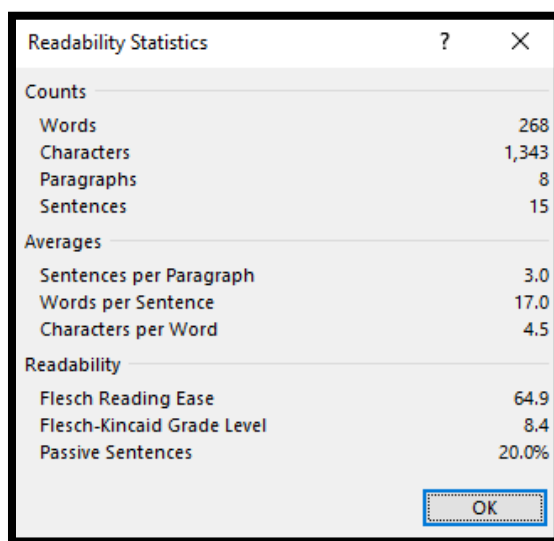
Kelsey L. Grabeel, MSIS, AHIP, Associate Professor/Assistant Director, University of Tennessee Graduate School of Medicine/University of Tennessee Medical Center



The University of Tennessee Medical Center (UTMC) provided the opportunity for a librarian to serve on the Patient Education Committee (PEC) beginning in 2005. The librarian always had an active role; however, in 2016, that role grew significantly through the editing of UTMC's custom patient education. Although UTMC provides standard patient education from a vendor, some physicians, nurses, and staff prefer to write their own education specific to their practice, or custom education. The PEC provided guidelines specifying that the custom education needed to be a 6th to 8th grade reading level, but there was not a specific person given to evaluate this

requirement. Once the custom education is approved, it could go to UTMC Marketing for publishing.

Starting in 2016, Preston Medical Library librarians began a health literacy assessment in which patient education was reviewed. During this review, librarians found that the custom education was typically at a higher reading level than the recommended 6th to 8th grade. The librarian and the Chair of the PEC made changes to the protocols that required the librarian to review custom education before it could be approved. The librarian uses Flesch Reading Ease and SMOG to review reading grade level. With this change came an increase in reviewing custom education pieces, providing the librarian with a larger role on the committee. However, a few years later, the PEC disbanded and regrouped to focus more on the video education provided by the hospital.



| Readability Statistics | |
|----------------------------|-------|
| Counts | |
| Words | 268 |
| Characters | 1,343 |
| Paragraphs | 8 |
| Sentences | 15 |
| Averages | |
| Sentences per Paragraph | 3.0 |
| Words per Sentence | 17.0 |
| Characters per Word | 4.5 |
| Readability | |
| Flesch Reading Ease | 64.9 |
| Flesch-Kincaid Grade Level | 8.4 |
| Passive Sentences | 20.0% |
| OK | |

Example of Flesch Reading Ease.

Although there was more of a focus on patient education videos, there were still custom education pieces that needed to be reviewed with no specific place to send them. Therefore, those writing the custom education began sending it directly to UTMC Marketing without health literacy review. Due to the library's strong relationship with UTMC Marketing, Marketing began sending the custom education back to the creator explaining it needed to go to the library first for review.

The amount of custom education slightly decreased during this time period. For example, in 2019, the librarian edited 16 pieces of custom education compared to 26 in 2018. To help advertise the library's service of editing custom education, workshops were held on how to write easy to read education as well as promoting the library's editing service. The library even partnered with UTMC Marketing to host a workshop for all administrators. Further outreach was done to nursing departments. The librarian also sits on the Institutional Review Board (IRB) and helps to edit consent forms. In some cases, the IRB recommends researchers send their consent forms to the library before they are reviewed by the IRB. In 2020, even with the COVID-19 outbreak, the number of custom education pieces edited increased to 32. In 2021, there were 40 pieces of custom education edited.

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Reasons for the increase are due to word of mouth and that this is now a known procedure before the custom education can be approved by marketing. Although it seemed likely that productivity of custom education would decrease during COVID-19, more departments had sent education for editing. This included patient education handouts and consent forms as well as financial information handouts.

The librarian continues to work with departments to make sure custom patient education is being edited in order for patients and the community to understand the information given to them.

Building Community through Programming with NLM Traveling Exhibits

Rachel Walden, MLIS, Nakia Woodward, MSIS, and Kelly Loyd, MSIS Quillen College of Medicine, East Tennessee State University

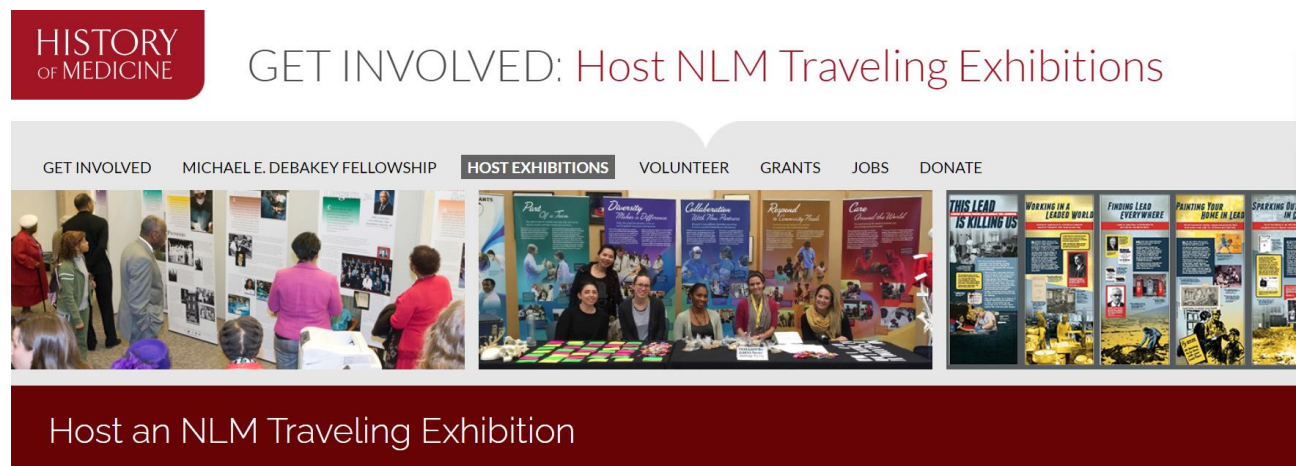
As an academic health sciences library, we serve many constituencies, with a primary focus on students, residents, faculty, clinicians, and researchers. However, part of our mission is to serve the health information needs of our community—our entire community—including those beyond the boundaries of our university.

Finding ways of connecting with the community is critical to that mission. We have found that to foster these connections, we often have to be the first to reach out to community members and organizations, the first to suggest ways in which we might collaborate in unexpected ways. NLM traveling exhibits has been a terrific focal point for making these contacts and has enabled us to engage our community in unique ways.

The first step in successfully engaging our community with an NLM exhibit is to assemble a planning team with a good knowledge of the community. When selecting an NLM exhibit to host, understanding the community can enable you to find an exhibit that is a good fit for those you want to reach and to identify unique opportunities for partnerships. When we hosted the NLM exhibits, we found it essential to collaborate with local businesses, agencies, other university departments, professionals and volunteers. This collaboration was crucial because our primary goal was not to bring people to the library but to bring topics and ideas to the community. Since we were most interested in having events within community agencies and businesses, we thought about how using the exhibit could bring attention to these parts of the community and which sites and organizations might benefit from our partnership. While we did hold some events in the library, we focused on hosting events in other locations. Another idea that we had was that the NLM exhibit banners should not be the main attraction. Rather, we decided that the exhibit could anchor a larger event which would be the focus.

To plan events around the exhibit, we brainstormed about local businesses and agencies that had relationships to the broad topic featured in the NLM exhibit. To get ideas about what type of events to host, we also needed to identify topics in the exhibits that would be of most interest to the local population. Once our team had identified how and where to display the exhibits, we

reviewed all exhibit materials for topics covered on the traveling banners. We could do this by studying the exhibit section on the NLM website.



<https://www.nlm.nih.gov/hmd/get-involved/hostexhibitions.html>

This meant we were able to review materials and plan events long before the exhibit arrived. Our team then contacted organizations and individuals to propose events and determine who would be interested in collaborating with us to build a successful event around the exhibit.

During our brainstorming sessions no idea was off the table. As we came up with ideas about what type of events to host, we would discuss the various factors around hosting the events, for example, expense, locations, space, publicity, and activities. We decided to keep costs to a minimum and to keep the events simple. Expenses generally were for food and event flyers.

For our first exhibit, *DNA to Beer*, we decided to look at whom we could work with in the local community. Johnson City has several thriving commercial breweries. We reached out to these businesses and found them to be very receptive to hosting the *DNA to Beer* exhibit. A main topic covered in the exhibit was fermentation. To tie in with that topic, we were able to work with a local county agricultural extension office to provide a class on sourdough bread baking in the library kitchen. Attendees watched a demo of how to work with a sourdough starter and were able to ask questions about the process of creating a starter, mixing, and baking the bread. At the end of the class, attendees had time to ask questions about the process and everyone left with a jar of sourdough starter and instructions.



Source:
U.S. National Library of Medicine

Another event that was hosted for the *DNA to Beer* exhibit was a movie night. The PBS documentary “The American Brew: The Rich and Surprising History of Beer” was screened and pizza and soft drinks were provided during the showing. This event was not as complex as

the other events to stage, but it had the added advantage of providing a space and time when our campus community could easily attend with members of the outside community.

The second exhibit that we wanted to host was the *Graphic Medicine* exhibit. When considering where to host the exhibit, we followed much of the same process as we did with the first exhibit. We first began to think about whom we could collaborate with in the community. Because the *Graphic Medicine* exhibit centered on graphic novels, we first considered local comic book shops as

a natural venue for the exhibits. However, space limitations and other factors meant that local comic book shops were not suited to host the exhibit. While we did make sure to provide information to and advertising for the comic book shops, we decided to consider other venues. One existing benefit from the prior exhibit was that we had established contacts that were receptive to hosting an event with the *Graphic Medicine* exhibit. One of the breweries we had previously worked with had started hosting trivia nights. We approached them to see if they would be willing to have us bring this new exhibit to their facility as part of a comic trivia night. The brewery chose what trivia to use for the event, deciding on a Marvel trivia night.

We were also able to collaborate with our university's broader main campus to host events. Through a faculty member, we contacted a visiting artist who had also worked as a physician. His work focused on printmaking around health and illness. Before and during the exhibit, the artist provided us with some pieces that we could display in the library. While we were displaying the *Graphic Medicine* exhibit on our campus, the main campus museum hosted an exhibit of his work. The artist also gave a talk about his experiences with art and medicine throughout his career. We were able to offer extra credit to medical students who attended the talk. We worked with the museum to promote the art museum exhibit to the medical school, and they promoted our exhibit to members and students of the art department. Additionally, our library director, Rachel Walden, gave a talk on topics in graphic medicine which drew people from the main campus. The *Graphic Medicine* exhibit enabled us to bring together two worlds (medicine and art) that do not often collaborate. As we worked with other agencies, businesses and departments during the *Graphic Medicine* exhibit, we came to realize that we were partners with these groups. The exhibit became a catalyst for them to promote their own work, so the focus was not only the exhibit itself.



Source:
U.S. National Library of Medicine

Throughout the process of hosting both of the NLM Exhibits, we found that we formulated a number of fundamental principles to make the most lasting impact with our surrounding community. The necessary first step is to get a team together. The team should have different perspectives, and each member should be familiar with different aspects of the community. This will ensure that you get a variety of creative possibilities for hosting and promoting each event. A second principle that served us well was that we saw the exhibits as a vehicle for reaching out to the community rather than trying to get people to come to the library. The goal for us was to expose as many people as possible to the information contained in each exhibit while highlighting local resources including experts, agencies, and businesses. The best way to do this was to meet

people in community spaces even if they were coming to those spaces for other reasons. We found businesses, agencies, art communities, and others to be receptive to planning and hosting events associated with the exhibit. We looked at these events as partnerships where the exhibit was an anchor for these organizations to promote their own work and missions. One other principle that we embraced was to get beyond lectures. We did do talks, but we also had arts, trivia, and demonstrations.

At the heart of our experiences with the NLM exhibits, we found that building relationships with the community was the most important principle. These relationships moved the exhibits outside of the realm of the library, bringing the information contained within to a larger and more diverse populace. The relationships also enabled us to show how the information in the exhibits could be relevant to different aspects of our community. The feedback and participation we received from our partner agencies and attendees provided us with valuable insight into how they perceived the exhibits. In using the principles of teambuilding, community involvement, and collaboration to guide our planning, we came to feel that the exhibits were an important tool to bring health sciences information into the community in a dynamic, interesting, and informative way. While our past experiences of hosting NLM exhibits were rewarding and successful, we acknowledge that the future of NLM exhibit events may look very different. We do plan to continue hosting NLM exhibits in our post-pandemic community. This may be challenging, but NLM exhibit events can continue to be successful if we remember the fundamental lessons we learned in our pre-pandemic experiences: collaborate with the community and use the exhibits to promote a variety of interests.

If you would like to be a 'published' author, please send previously unpublished article submissions to [Elizabeth Irish, MLS, AHIP](#), section editor.

Member Spotlight



Shawn Steidinger, MLS, AHIP

Assistant Librarian for Clinical Services, University of Utah
Spencer S Eccles Health Sciences Library/Hope Fox Eccles
Health Library
Salt Lake City, UT

Shawn has been a librarian since 1993, and a health sciences librarian since 2007. Her previous experience as a medical librarian includes working at Massachusetts General Hospital's Treadwell Library, and at the Primary Children's Hospital's Medical Library in Utah. There wasn't much interaction with patients & visitors at the Treadwell Library, but this all changed with her six year-stint at

Primary Children's Hospital. Along with her colleague Emily Eresuma, they started a new "library-on-wheels" service, which involved getting a computer cart, a laptop, and a bit of signage together, and then scheduling two-hour tours of clinics and waiting rooms around the hospital's outpatient clinic building twice a week. There were demonstrations of MedlinePlus, quick tutorials on evaluating health information on the internet, and answers for questions about the best websites

for recipes for diabetic kiddos, or how to track taking medications when traveling through different time zones, and even conversations about who are the funniest doctors in the neurosurgery clinic.

Shawn joined the University of Utah's Eccles Health Sciences Library in a tenure-track position in late 2018. She serves as both an academic librarian for the students and faculty of the five health sciences schools and colleges, and as a consumer health librarian in the University Hospital's Hope Fox Eccles Health Library. The hospital library space had to be shuttered due to the pandemic, but it lives on in a digital space. Shawn is working with two health sciences students to create a social

media campaign to bring awareness to the virtual Library, and there is talk of re-opening the library in a new physical space within the hospital in the next two years. She hopes to sponsor programming in concert with various clinics to elevate health literacy regarding topics such as colon cancer screening awareness, vaccines, and heart health. She is passionate about adolescent and young adult health literacy and the transition from a pediatrician's care to that of adult healthcare providers and has made this a focus for her participation in MLA's Research Training Institute. She is a Senior level member of AHIP and is pursuing her level I credential in MLA's Consumer Health Information Specialization Program.

To be featured in the Member Spotlight contact [Robin O'Hanlon, MIS](#), section editor.

Sparks



The Sparks column highlights Consumer Health Websites, Organizations, Apps, Databases and other links of Interest to the Consumer Health community. If you have any submissions, please send them to [Pamela Rose, MLS](#), section editor.

This month we focus on evidence-based home health care devices and apps.

[Pulse Oximeter Accuracy and Limitations: FDA Safety Communication](#)

Submitted by [Pamela Rose](#), MLS, Health Sciences Library, University at Buffalo, Buffalo, NY, USA

COVID-19 has seen an increase in the purchase and use of pulse oximeters at home. The most accurate pulse oximeters are those used in clinical settings and are cleared by the FDA. OTC pulse oximeters do not have FDA review and are not intended for medical purposes. Nevertheless, they are being bought and used at home in record numbers. The FDA safety information will help consumers interpret readings and know when to call their doctor.

(Continued Next Page)

[Red Cross First Aid App](#)

Submitted by [Pamela Rose](#), MLS, Health Sciences Library, University at Buffalo, Buffalo, NY, USA

Expert advice from the Red Cross for common emergencies in English and Spanish. Step-by-step advice using videos and interactive quizzes. Two available: First Aid App for humans and Pet First Aid App for animals. Available for iOS and Android.

[US Blood Pressure Validated Device Listing](#)

Submitted by [Pamela Rose](#), MLS, Health Sciences Library, University at Buffalo, Buffalo, NY, USA

The American Medical Association enlisted the National Opinion Research Center at the University of Chicago (NORC) to determine which devices met the AMA's "Validated Device Listing (VDL) Criteria". The listing includes ambulatory, home, kiosk, office and wrist device types. For consumers, choosing the "Home" device will show both wrist and arm cuff models, with the caveat that arm cuff is more accurate. Some have wireless apps that will track your readings and give you reminders and tips.

You Might Be Interested In...

This column contains recommendations to materials related to consumer and patient health information services. If you find something in a journal, newspaper, blog post, or other accessible social media that you think your colleagues would find useful or interesting, please send a citation and summary to [Shawn Steidinger, MLS, AHIP](#), section editor.

I like to read The Atlantic, and they've pulled together some decent coronavirus coverage over the years, but this recent article really made me think: "[America Is Not Ready for Omicron.](#)" It delves into the statistics and anecdotal evidence about the omicron variant to talk about whether it causes a milder form of the disease or if that's a true picture. It references a Twitter thread by biostatistician Natalie Dean that makes for an interesting read as well – could something good to share with anyone who asks about what the numbers mean.

(<https://twitter.com/nataliexdean/status/1468988174693289994>)

Speaking of numbers, I came across a UK website for an organization dedicated to increasing levels of numeracy here: <https://www.nationalnumeracy.org.uk/> You can sign up for quizzes, lessons and tutorials that explain basic math concepts, and even basic statistics – very useful for those of us who are or know others who are numeracy-challenged!

In that vein, our own CDC has a section of their website dedicated to numeracy resources as well: <https://www.cdc.gov/healthliteracy/learn/UnderstandingLiteracy.html>

Another useful type of literacy is visual literacy. Again, from the UK, is this awesome Libguide from the University of Birmingham: <https://libguides.bham.ac.uk/asc/visualliteracy>

Still curious why visual literacy is important? Check out this 2017 Ted Talk:

https://www.ted.com/talks/david_hooker_the_importance_of_visual_literacy

(Continued Next Page)

OK, back to omicron. We are being encouraged to mask effectively, using N95 or KN95 masks, or by double-masking. Here's a great tutorial on how to double-mask:

<https://www.nytimes.com/article/double-masking-tips-coronavirus.html>

As one of my colleagues in the health sciences says, Stay Positive, Test Negative!

Selections submitted by Shawn Steidinger, AHIP, Eccles Health Sciences Library, University of Utah, Salt Lake City, UT

Book Reviews

Somers, Marion. **Elder Care Made Easier: Doctor Marion's 10 Steps to Help You Care for an Aging Loved One.** 2d ed. Omaha, NE: Addicus Books, 2020. 190 pages.

ISBN: 9781950091225. \$21.95.

Taking care of an aging loved one can be overwhelming at any stage of the journey, but even more so in the initial period. In this second edition of her 10-step book, Dr. Somers, or Dr. Marion as she is known, succeeds at demystifying the process by providing a proactive framework for caregivers. While this book is ideal for new caregivers, even the most seasoned caregiver will find practical guidance.

This framework begins with a basic, perhaps the most obvious step, albeit one that can be easily overlooked: communicate openly. She provides an essential guide to what communication needs to happen, beginning with the elder to find out values, wants, needs, while there is time to do so. The conversations that need to happen with other family members and healthcare providers are also outlined.

From this very basic but difficult task, Dr. Marion walks us through the other steps: put safety first, improve the lifestyle, make life easier with adaptive equipment, manage financial issues, take care of legal matters, find mobility in disability, find the right housing, and hire help when needed.

The final step, learn to let go, gently brings back us back to the first step, communicate openly. What does your elder want? How can you fulfill final wishes by preplanning as much as possible? Dr. Marion then addresses what needs to be done when a loved one passes and how to deal with grief.

The writing style is conversational and personal which makes it easy to read. It's like getting comforting and valued advice from an experienced friend over a cup of coffee. As much as the tone suits the material, the accompanying lists found throughout each chapter increase the value. These include a wide range of topics including finding creative outlets for your elder, conducting a skills inventory, types of adaptive equipment available, and gathering their legal papers. Dr. Marion also provides a list of resources that are targeted, but general enough that they won't become quickly outdated, such as the websites addresses for national medical and legal societies.

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The four appendices continue the theme of proactivity and practicality, by listing warning signs, types of alternative therapies, medical definitions with illustrations as needed, and logbooks with sample forms, such as, shopping lists and daily visit forms.

This is highly recommended for all consumer health libraries.

Reviewed by Elizabeth Irish, MLS, AHIP, Associate Professor, Schaffer Library of Health Sciences, Albany Medical College, Albany, NY

Deschamps-Braly, Jordan and Douglas Ousterhout. **Facial Feminization Surgery: The Journey to Gender Affirmation.** 2d ed. Omaha, NE: Addicus Books, 2021. 241 pages.

ISBN: 9781950091393. \$49.95.

Dr. Ousterhout is a pioneer in Facial Feminization Surgery. Now retired, he has “passed the torch” to Dr. Deschamps-Braly to continue with his work. As the authors point out for transgender women “nothing is more important than having a face and body that match how you feel. Facial feminization surgery (FFS)...helps you look like the person you have always been on the inside.” (p.1)

This comprehensive and readable work provides an empathetic guide for transgender women that seemingly covers all aspects of FFS and answers all questions they might have in detail.

Fifteen chapters cover all procedures necessary for FFS, including “Scalp Advancement,” “Forehead Feminization,” “Temporal Fossa Augmentation,” “Cheek Contouring,” a chapter each on Nose, Lip, and Chin Reshaping, “Thyroid Cartilage Reduction,” “Lower Jaw (Mandibular) Surgery,” “Upper Jaw (Maxillary) Surgery,” as well as chapters such as “Facelifts and Other Facial Procedures,” and “Hair Transplants,” procedures that are not for FFS alone, but are ones that can enhance and rejuvenate anyone’s face.

In the chapter “Preparing for Facial Feminization Surgery,” the authors clearly describe all preparations for FFS, what to expect on the day of surgery, and all possible adverse effects. They also speak frankly and in depth about choosing a qualified, experienced surgeon for FFS, and offer guidance on seeking surgery abroad. In addition, and to the satisfaction of all librarians reading their book, they warn that transgender women should “Be Cautious About Information from the Internet” and warn they “...need to conduct internet searches wisely.” (p.13) They also warn that those who seek FFS should “be skeptical” of “before and after pictures” on internet forums and also those pictures on (some) surgeons’ websites which not only may be altered but have also been proven to use different people in the “before” and “after” photos!

This text has numerous legitimate photos of “before and after” specific procedures along with photos and illustrations showing the differences between the male and female face and skull.

The appendix “Specialized Surgical Training and Board Certification” provides information on how to select qualified and experienced surgeons for FFS. A second appendix addresses “Commonly Asked Questions.” Also included is a bibliography of books and articles and a list of

“Resources,” where organizations of help are grouped in categories including “Health,” “Law and Policy,” “Race and Ethnicity,” and “Workplace Advocacy.” There is an 8-page glossary of medical terms and an index.

This is highly recommended for those libraries where there’s a need.

Reviewed by Claire B. Joseph, MS, MA, AHIP, Director, Medical Library, Mount Sinai South Nassau, Oceanside, NY

Lydiatt, William M. and Perry J. Johnson. **Cancers of the Head & Neck: From Diagnosis to Treatment.** 3rd ed. Omaha, NE: Addicus Books, 2019. 190 pages.

ISBN: 987-1-943886-82-1. \$19.95.

For those who have been diagnosed with any form of head or neck cancer, this book is a wealth of information. Beginning with a clear plain language explanation of what cancer is, the authors go on to describe methods of head and neck cancer diagnosis, liberally review treatment options, and continue a step further to discuss topics on recovery. This 3rd edition is an update of the 2001 and 2012 editions of *Cancers of the Mouth and Throat: A Patient’s Guide to Treatment*.

Developments in cancer diagnosis and treatments are continually advancing. *Cancers of the Head & Neck* presents the newest findings from the seven-year span since the previous edition and covers causes, symptoms, treatments (including alternative treatments and clinical trials), side effects, pain management, reconstructive surgery, and rehabilitation. This edition’s illustrations and photographs have also been updated.

Throughout the book, readers will find supportive and uplifting quotes from patients. Also interspersed are four poems from Pulitzer Prize winner and former U.S. Poet Laureate Ted Kooser, best known for his poem “Delights & Shadows.” These vignettes and compositions resonate with the authors’ interests in patients’ quality of life and the prevention of depression, by providing help with emotional coping and understanding.

In *Cancers of the Head and Neck* the authors aim to supply sufficient comprehensible information about these relatively uncommon cancers, enabling patients to be informed enough to ask questions and be involved in their own treatment plans. The book truly walks the reader through the entire process including post treatment and follow-up advice for lifestyle and support.

An extensive appendix gives short descriptions of various cancer surgeries, including reconstruction and potential disabilities and complications. There are also a resource list of support organizations and associations, a glossary, and an index.

This book is highly recommended for all consumer health libraries.

Reviewed by Karin Bennedsen, MLIS, AHIP, Research Support Librarian, Sturgis Library, Kennesaw State University, Kennesaw, GA

Persons interested in becoming a book reviewer or suggesting titles for review in Consumer Connections should contact the Book Review Editor: Claire Joseph Claire.Joseph@snch.org.

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Please contact section editors for information on submitting items for publication in a specific section or the managing editor if you are not sure which section to submit to.

Consumer Connections considers for review books of interest to librarians, patients, caregivers, and the general public. The book review column will concentrate on reviews of recently published books about consumer healthcare information available in print and/or electronic formats. General interest titles related to healthcare and medicine may also be considered. It is the purpose of each review to provide a detailed description and critical evaluation of the work. Recommendations for purchase are also included. Book reviews should be 200-400 words. Reviews reflect the opinions of the reviewer, not of the *Consumer Connections* newsletter editors.

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Call for Submissions

Do you have an interesting consumer health initiative or project taking place at your Library? Have you been spearheading innovative work with consumer health librarianship and want to let the world know? We want to hear from you! Consider submitting a brief article (500-1200 words) to Consumer Connections!

Deadlines for submissions to the managing editor are January 1 for publication in the Winter issue and July 1 for the Summer issue. Section editors may set earlier deadlines.