A Year of Progress: HSLS Highlights

The past academic year (July 2002-June 2003) saw continued HSLS achievement. Highlights from our annual report are listed below:

- The collection of electronic resources available on HSL Online grew to approximately 3,000 online journals, 300 textbooks, and numerous databases. Notable additions include ACS Surgery, textbooks from Wiley InterScience and McGraw Hill AccessMedicine, journals published by Mary Ann Liebert and Lippincott Williams & Wilkins, *Nature* specialty journals, EMBASE.com, and BioMed Central, including Faculty Of 1000, Current Controlled Trials, and Images M.D. Significant new electronic resources in molecular biology and genetics, funded in part by a gift from Dr. & Mrs. Richard Raizman, were also licensed. These include Current Protocols, CellSpace Knowledge Miner, Encyclopedia of Molecular Medicine, Proteome BioKnowledge Library and Vector NTI.

- The specialized information service in molecular biology and genetics continued to grow. The service offers user education, in-depth consultations, and a Web portal <www.hsls.pitt.edu/guides/genetics>.

- Improvements to the HSLS Web site and access to resources include:
  - a “new books” page
  - electronic access to course reserves
  - enhanced Document Request forms, allowing users to enter multiple citations in one request, and offering the ability to look up citations using the PubMed ID or MEDLINE Unique Identifier Numbers
  - subject searching and topical access to e-journal titles
  - implementation of PubMed LinkOut to facilitate direct linking from PubMed citations to e-journal articles,
  - addition of tables of contents and/or summaries in PITTCat online catalog records
  - inclusion of the WPIC Library video collection in PITTCat.

Shots 2003

*Shots 2003* is a quick reference guide for PDAs that includes the 2003 childhood immunization schedule, adult immunization schedule, vaccines for adults at high risk, and the childhood catch-up schedule. It is available free of charge from the Society of Teachers of Family Medicine (STFM) Group on Immunization Education Web site <www.immunizationed.org>.

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**PDA Corner**

*continued from page 1*

In 2000, *Shots* version 1 for Palm OS was released based on the Recommended Childhood Immunization Schedule, and in 2001 the software was updated. In 2002, Richard K. Zimmerman, M.D., M.P.H., and Donald B. Middleton, M.D., of the Department of Family Medicine at the University of Pittsburgh, and other members of the STFM Group on Immunization Education supplied additional content. Updates included high-risk indications, catch-up, administration routes, adverse reactions and contraindications. Most recently a Pocket PC .NET version of *Shots 2003* was made available.

The *Shots* PDA application has proved to be a popular resource, recommended by medical and nursing schools for use by their students. Last year, *Shots 2002* was downloaded over 30,000 times, and *Shots 2003* has been downloaded over 25,000 times through September 2003.

The *Childhood Immunization Schedule* is a collaboration of the Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP), and the American Academy of Family Physicians (AAFP). The 2002-03 Adult Immunization Schedule is recommended by the Advisory Committee on Immunization Practices (ACIP). Funds for development and updates to the application have been made available through a cooperative agreement with the Centers for Disease Control and Prevention, STFM, and the Department of Family Medicine at the University of Pittsburgh.

--Judith A. Troy
Department of Family Medicine
School of Medicine

**HSLS Search Engine Guide**

*Tips for Savvy Searching*

Google is the search engine of choice for most Web searchers these days, but a large number of other choices are available. To help our library patrons choose and use search engines effectively, HSLS maintains a Search Engines Guide, <www.hsls.pitt.edu/guides/general/search_engines.html>.

The guide has three main sections. The first describes what search engines are and how they work. It includes general searching tips that apply to most search engines. The second section includes links to recommended search engines and highlights some of their features. Finally, because search engines change constantly, there is a section linking to search engine news, ratings, and tutorials.

--Barb Folb

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**HSLS Update** is produced by the

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Contact HSLS with questions, comments or ideas at 412-648-8796, or send email to medlibq@pitt.edu.
• The user education program was revised. New library instruction classes were introduced to highlight online information resources in areas of interest to basic scientists, clinicians, and mental health practitioners. Other new courses added were Advanced MEDLINE Searching, Introduction to Personal Digital Assistants (PDAs), and Complementary and Alternative Medicine Information Resources. Walk-in classes were attended by 507 people, an increase of 40 percent over the previous year.

• Liaison librarians provided instruction to over 1,300 health sciences students through open houses, classroom teaching, and specialized instructional sessions. Librarians also offered targeted user instruction programs to the Hillman Cancer Center and the Department of Psychiatry, and participated in the UPMC Residency Orientation and the Clinician Educator Training Program.

• As part of a pilot program for training Neurology residents in summer 2002, reference librarians offered intensive instruction in the skills necessary to become effective database searchers and information seekers. During the month of July, neurology residents spent one to two hours daily in Falk Library. This program was repeated in July 2003.

• Falk Library houses the Media Computer Lab (MCL) in its Computer and Media Center. The lab was developed in conjunction with the Lab for Educational Technology, directed by Dr. J. B. McGee. MCL’s purpose is to facilitate faculty development of media content for educational use. HSLS Systems staff members installed and configured the production server, migrated the database from MS Access to MS SQL server, and continue to manage the service with updates and patches, and to support development efforts with custom installations and configurations.

• Reference librarians offered 55 research consultations, 336 mediated database searches, and 55 specialized searches and consultation sessions for the Institutional Animal Care and Use Committee (IACUC)

• HSLS directly manages library services at Western Psychiatric Institute and Clinic, and UPMC Shadyside. HSLS also offers a variety of services to UPMC hospitals. The following UPMC hospitals contract for access to HSL Online: Magee Women’s, St. Margaret, Passavant, South Side, Braddock, McKeesport, Rehabilitation, Lee Regional, Horizon, and Italy. Full access to HSL Online at UPMC Bedford was initiated in August 2002. The HSLS coordinator of Affiliated Hospital Services offered an active program of orientations, consultations, and training sessions at various hospitals.

• HSLS librarians are conducting a multi-year research study at UPMC Horizon to determine the impact of access to HSL Online resources on information seeking behavior in clinical users. Baseline data was gathered in spring 2002, and a follow-up survey was distributed in spring 2003. Data are being analyzed. Results of the baseline study were presented at the Annual Meeting of the Medical Library Association in San Diego, CA in May 2003.

• HSLS submitted a successful proposal to develop a self-paced interactive educational program to teach researchers the fundamentals of responsible literature searching for research practice. The project is funded by the Association of American Medical Colleges and the U.S. Office of Research Integrity, with the sponsorship of the Association of Academic Health Sciences Libraries. The content will be available as a curriculum module titled Responsible Literature Searching on the University of Pittsburgh’s “Education and Certification Program in Research Practice Fundamentals.”

• HSLS was awarded an 18-month contract by the National Library of Medicine to develop a partnership with the Allegheny County Health Department (ACHD). The goal of the project is to raise public health workers’ awareness of information resources, and to decrease barriers to use by enhancing access to knowledge-based information, document delivery, reference assistance, user education, and consultation. The project is titled Public Health Information Alliance (PHIA).

• The HSLS Consumer Health Information Web site: www.hsls.pitt.edu/chi/ was redesigned. While retaining popular features such as a comprehensive listing of local agencies and organizations, online medical dictionaries, and health provider locator tools, the content has expanded to include prevention and wellness, online health screening tools, patients rights, quality guidelines, transplantation and many other health topics.

--Barbara Epstein
Recovery of Coronary Bypass Patients:
Impact of an Information Intervention

In April 2002, HSLS librarians at UPMC Shadyside teamed with clinicians to enhance postoperative education for coronary artery bypass graft (CABG) surgery patients. Each patient was given an informational videotape to be viewed at home during recovery to supplement printed patient education material, which included a booklet and discharge instructions.

One year later, the impact of the program was evaluated by sending out nearly 400 surveys to videotape recipients. A total of 147 surveys were returned, for a response rate of 37 percent. The mean patient age was 66.8 years. Of the respondents, 96 percent watched the videotape. Patients acquired knowledge from the tape, with 88 percent finding that it added or reinforced knowledge. Almost all (92 percent) felt the tape helped them in the recovery process to some degree (51 percent very helpful, 32 percent somewhat helpful, nine percent a little helpful). Most respondents (84 percent) found that the video answered questions they would have otherwise called to ask their doctor.

Nurses frequently have the primary responsibility for patient teaching, yet have less time to teach patients in the managed care environment. Concurrently, earlier patient discharges are shifting the burden of care to families. With this videotape program, patients receive more instruction without more clinician time. Circulation and reuse of the tapes enhance cost effectiveness, and patients benefit from the library’s educational resources. Surveys are now distributed simultaneously with the tape, and it will be possible to compare the results over time.

A poster about the project was displayed at UPMC Shadyside’s Quality Fair, and a presentation was made by invitation to the Quality Management Committee. The project was awarded a certificate for “Outstanding Achievement in Quality Improvement.”

Discharge education must take into account the complexity of the post-hospitalization experience. This instructional videotape facilitates patients’ transitions from hospital to home to independent self-care. Patients can adjust and recover in their own homes and at their own pace.

--Michele Klein Fedysin
In 2001, the Institute on Medicine issued a report that called for reform of the U.S. health care system. The report, *Crossing the quality chasm: a new health system for the 21st century*, mandates that existing gaps in patient safety and quality of care be filled. In response, Rapid Deployment Continuing Education® (RDCE®) has been developed to help overcome these gaps by using educational technology to improve patient safety.

A project of the Pittsburgh IAIMS Program, RDCE® was developed by the Center for Continuing Education in the Health Sciences, in conjunction with the Center for Biomedical Informatics and the Health Sciences Library System. First released in the fall of 2002, RDCE® consists of a series of educational modules covering different health related topics. These learning modules are composed of a variety of electronic resources, including journal articles, guidelines, aggregated patient care and outcomes data, and patient education materials. Content development time is relatively short (1-2 weeks) because, where possible, existing resources are used, and the courseware functionality supports quick assembly of content into modules. In addition, open-ended, reflective questions are used, reducing the effort required to formulate traditional multiple-choice tests. Reflective questions also require the learner to think about how the information relates to practice and what barriers might affect implementation of the recommendations. Responses are posted to a public discussion list that can be reviewed and commented upon by other members of the learning community, as well as the performance improvement team. Evaluation questions address relevance of the educational materials to the learner’s practice, perceived knowledge change, and intent to improve practice. Users who complete the module receive up to one hour of continuing education credit. To date, ten RDCE® modules have been created (see box) and the application has over 900 users.

*continued on page 6*
Rapid Deployment
Continuing Education:
Currently Available Modules

- Appropriate Use of Influenza Vaccine
- Appropriate Use of Meperidine
- Central Line Associated Blood Stream Infections (CLABs)
- Current Controversies of Hormone Replacement Therapy
- Disclosure - How to Talk with Patients and their Families when Unfavorable Events Occur
- Hand Hygiene Technique
- Informed Consent - Corporate Insurance, Risk Management and Patient Safety
- Severe Acute Respiratory Syndrome
- Smallpox Immunization
- West Nile Virus

This type of educational intervention has been well received by the users. The modules do not take a long time to complete, are easy to use, are relevant to the users practice, and enhance the users’ knowledge of the subject area. In addition, the modules can be accessed from anywhere and the user receives continuing education credits upon completion. All of these features combine to make up a positive user experience.

Overall, RDCE® is an effective way to provide targeted education to a specific population. Because of this, RDCE® is an excellent way to incorporate education into a performance improvement effort.

--Stephanie Lunsford
Center for Biomedical Informatics

--Barbara Barnes, MD
Associate Dean for Continuing Education
Center for Continuing Education in the Health Sciences

RDCE continued from page 5

Traditional continuing educational approaches, such as attending meetings, knowledge-based quizzes, etc., are not always effective in changing physician behavior. As an alternative to traditional continuing education, the RDCE® platform provides an elegant way for performance improvement teams to educate large and small populations of health care workers with specific educational needs. Authors of modules geared towards performance improvement can combine already available general resources with those the authors have developed. In this way authors can create a module that focuses on the defined needs of the population.

Most recently, the University of Pittsburgh Medical Center (UPMC) has created several modules designed to address specific performance improvement issues. The modules are a mandatory activity for all employed physicians at UPMC. Thus far these modules, Hand Hygiene Training and Central Line Associated Blood Stream Infections (CLABS), have been accessed by 532 and 307 users respectively. Both modules consist of a mix of CDC guidelines and materials created by the UPMC Institute for Performance Improvement. Users are asked to answer three reflective questions:

1. What are some of the factors that prevent physicians from consistently using all five barriers (gloves, gown, mask, cap, and drape) when inserting a central line?
2. What strategies could be undertaken to improve physician documentation of central line placement?
3. What can be done to create a hospital environment in which nurses and other hospital staff feel comfortable telling physicians and house staff that they are not using all five barriers (gloves, gown, mask, cap and drape) during central line insertion?

These questions are designed to provide useful feedback for the performance improvement team as well as to directly involve the user in the performance improvement effort. The questions force users to think about the information they have just reviewed in relation to their own practices and then make suggestions based on their conclusions. As the numbers of responses grow, themes become apparent. These themes can be helpful to define further performance improvement efforts as well as environmental changes that can be put into effect to help improve patient safety.

Integrated Information Matters, sponsored by the University of Pittsburgh IAIMS program, appears in the HSLS Update three times per year. Look to this insert for news and features about the University of Pittsburgh Schools of the Health Sciences and UPMC Health System integrated information systems activities and plans. For questions, comments or suggestions about this newsletter or the IAIMS program, please contact Ron Yori, IAIMS coordinator, (412-647-7123, yori@pitt.edu) or visit www.cbmi.upmc.edu/iaims/main.htm.
**Genetics Home Reference**

Until recently, locating resources about genetic disorders written in non-technical language has been a challenge for consumers. The National Library of Medicine’s newest consumer Web site “Genetics Home Reference” (GHR) <ghr.nlm.nih.gov> presents information on the relationships between genetics and disease in an easy-to-understand format.

The Web site is constructed to offer the novice a basic understanding of genetics and the related disease state. For example, when selecting Help Me Understand Genetics, you will find an explanation of how genes work and how mutations cause disorders. This section also contains current information about genetic testing, gene therapy and the Human Genome Project.

To find information on a specific disorder, such as sickle cell anemia, you can either Browse by Condition or Browse by Gene. You may also search by typing the specific disorder or gene in the search box on the home page, or by clicking “Search” on the main tool bar. The information retrieved is written in a question and answer format. Each summary includes a definition of the disease or condition, information about symptoms, diagnosis and treatment options. Genetic causes with frequency and pattern of inheritance are also presented. The summary concludes with direct links to additional information such as the Genetic and Rare Disease Information Center <rarediseases.info.nih.gov> and the GeneTests Clinic Directory available at <www.genetests.org>. This directory lists laboratories that perform genetic testing in the United States and worldwide. Another GHR feature is the searchable glossary of medical and genetic terms.

GHR presently offers summaries of 72 conditions and 58 genes, but only provides information about conditions caused by mutations in a single gene. Chromosomal disorders caused by duplicated, missing or rearranged chromosomes will be added to the site in the future. Check the “What’s New” page for the latest additions. For the advanced user and health professional, links on the left side of the page will take you to related information on PubMed, Online Mendelian Inheritance in Man (OMIM), and LocusLink, a source of information for genetic researchers. Regardless of your level of understanding, Genetics Home Reference has something for everyone.

--Michelle L. Burda

**Visible Human Project Enhancement**

In the mid-1990s, the National Library of Medicine (NLM) Visible Human Project produced a revolutionary image database that provides anatomically detailed, transverse CT, MR and cryosection images of a complete male and female cadaver <www.nlm.nih.gov/research/visible/visible_human.html>. In conjunction with this project, the Pittsburgh Supercomputing Center (PSC) recently released the PSC Volume Browser, a new graphic based interface and retrieval system. The Volume Browser is considered a 3D imaging breakthrough, allowing users to view uncompressed datasets from a desktop computer that typically would not have the capability to view such data. It allows users to view images from any angle, slice through a section to see inside, and trace and label sections. According to PSC, when the Volume Browser is used with the NLM’s Visible Human datasets, the software ‘provides a versatile, self-teaching resource in human anatomy for medical students and a tool for planning of surgery and radiation therapy.’

Currently, the software client <www.psc.edu/biomed/research/VB> is available for use with Mac OS X1 and Windows-based machines with Internet 2 or other high-speed Internet connections. A version for lower speed broadband and dialup connections is planned for the near future.

--Fran Yarger
# HSLS Schedule of Classes
## November - December 2003

### HSLS ORIENTATION

**Introduction to HSLS Resources and Services**  
(Falk Library, meet inside entrance to Library)  
Friday, November 7  2:00 p.m.-3:15 p.m.  
Monday, November 17  11:00 a.m.-12:15 p.m.

### SEARCHING MEDLINE

**Searching MEDLINE on Ovid**  
(Falk Library, CMC Classroom #2)  
Tuesday, December 2  3:00 p.m.-4:30 p.m.

**Searching MEDLINE on PubMed**  
(Falk Library, CMC Classroom #2)  
Tuesday, November 4  9:00 a.m.-10:30 a.m.  
Tuesday, November 11  8:00 a.m.-9:30 a.m.  
Monday, December 8  2:00 p.m.-3:30 p.m.  
Wednesday, December 17  2:00 p.m.-3:30 p.m.

**Searching MEDLINE and EMBASE on EMBASE.com**  
(Falk Library, CMC Classroom #2)  
Wednesday, December 17  2:30 p.m.-4:00 p.m.

**Advanced MEDLINE Searching on Ovid**  
(Falk Library, CMC Classroom #1)  
Wednesday, November 12  9:00 a.m.-10:30 a.m.

### SPECIAL TOPICS

**Clinical Information Resources**  
(Falk Library, CMC Classroom #2)  
Tuesday, December 9  10:30 a.m.-noon

**Mental Health Information Resources**  
(Falk Library, CMC Classroom #1)  
Tuesday, November 4  10:30 a.m.-noon

**Complementary and Alternative Medicine (CAM) Information Resources**  
(Falk Library, CMC Classroom #2)  
Tuesday, November 11  1:00 p.m.-3:00 p.m.

**Searching for Evidence-Based Literature**  
By Appointment, Contact: Pat Friedman 412-648-2040

### BIBLIOGRAPHIC MANAGEMENT SOFTWARE

**EndNote Basics**  
(Falk Library, CMC Classroom #2)  
Thursday, November 13  2:00 p.m.-4:00 p.m.  
Monday, December 8  11:00 a.m.-1:00 p.m.

### SOFTWARE TRAINING

**Adobe Photoshop for Beginners**  
(Falk Library, CMC Classroom #1)  
Thursday, November 6  9:00 a.m.-11:00 a.m.  
Wednesday, December 16  10:00 a.m.-Noon

**PowerPoint for Presentations**  
(Falk Library, CMC Classroom #1)  
Tuesday, November 4  8:00 a.m.-10:00 a.m.  
Tuesday, December 23  9:00 a.m.-11:00 a.m.

**Introduction to Personal Digital Assistants (PDA’s)**  
(Falk Library, CMC Classroom #1)  
Thursday, November 13  9:00 a.m.-11:00 a.m.

### MOLECULAR BIOLOGY AND GENETICS

**Information Hubs for Molecular Biology and Genetics**  
(Falk Library, CMC Classroom #2)  
Wednesday, December 3  1:00 p.m.-4:00 p.m.

**DNA and Protein Analysis Tools**  
(Falk Library, CMC Classroom #2)  
Wednesday, November 19  1:00 p.m.-4:00 p.m.

### WORLD WIDE WEB RESOURCES

**Health Resources on the World Wide Web**  
By Appointment, Contact: Linda Hartman 412-648-1479

**Public Health on the Web: Finding What You Need When You Need It**  
By Appointment, Contact: Ammon Ripple 412-648-1251

*Classes marked with an asterisk qualify for A.M.A. category 2 CME credit.*

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All classes are open to faculty, staff, and students of UPMC and the Schools of the Health Sciences at the University of Pittsburgh. No registration is required. Seating for classes is first-come, first-served until the class is full. Detailed course descriptions are available at <www.hsls.pitt.edu/services/instruction>.
**HSLS Staff News**

**Renae Barger** and **Andrea Ketchum** have joined HSLS as reference librarians. Both are former Health Sciences Library and Informatics trainees.

**Zach Biden** transferred to WPIC Library from Falk Library. His new duties include staffing the circulation desk, processing journals, and bindery functions.

**Michelle Burda**, consumer health librarian from the Hopwood Library, UPMC Shadyside and **Ester Saghafi**, reference librarian at WPIC, represented HSLS as one of 40 exhibitors at the *Pittsburgh Regional Healthcare Initiative Diabetes & Depression Resource Showcase* on September 15, 2003 at the PPG Wintergarden. The purpose of the event was to showcase the wealth of services and resources available in southwestern Pennsylvania to patients who have diabetes and depression, and their families and caregivers. Resources on diabetes and depression were available at the HSLS booth, along with a display about finding and evaluating health information, featuring the HSLS Consumer Health Collection and Consumer Health Information Web site.


**Nancy Tannery**, assistant director for Information Services, served as a member of the steering committee for the *QuintEssential Conference: Collaborations, Partnerships and Solutions*, held October 26-28, 2003 in Philadelphia, Pa. This was a joint meeting of four Medical Library Association chapters (Mid-Atlantic, New York-New Jersey, Philadelphia Regional, and Pittsburgh Regional), as well as the Philadelphia chapter of the Special Libraries Association. Attendees were presented with a choice of educational sessions centered on topics such as partnerships, e-content, new roles, and communication.

**HSLS staff** raised money for the Susan G. Komen Breast Cancer Foundation by participating in the eighth annual *Lee National Denim Day*. In exchange for donations, staff members were permitted to wear blue jeans to work on October 10.

On September 10, 2003, HSLS sponsored the Medical Library Association teleconference *Reading Between the Lines: Focusing on Health Information Literacy* at UPMC Shadyside. The goal of the two-hour teleconference was to enhance the knowledge of information professionals about the concepts of health information literacy, and to highlight opportunities for using these principles in the provision of quality consumer health and patient education information services. Librarians from HSLS, the Pittsburgh Regional Chapter of MLA and local public libraries attended the teleconference.

**PUBLICATIONS**


**PRESENTATIONS**


**FAREWELL AND BEST WISHES**

Farewell and best wishes to **Rebecca D’Acunto**, library specialist at WPIC library; **Laurie Davidson**, library specialist at Falk Library; **Yumin Jiang**, HSLS serials and electronic resources librarian; and **Jody Wozar**, HSLS Web manager and reference librarian.
An *Ask a librarian at HSLS* link is available to users while searching the online biomedical databases accessible via the Ovid interface. HSLS librarians recently reviewed questions received through this *Ask a librarian at HSLS* feature to determine if users might benefit from a more visible electronic reference service. Since this feature is only available to patrons from within the Ovid databases (MEDLINE, PsycINFO, CINAHL, etc.), the assumption was that the submitted questions arose while searching an Ovid database. However, as the study results show, this assumption is incorrect.

Over a 16-month time frame (July 2001 – October 2002), 111 *Ask A Librarian* questions were received. These questions were examined and categorized as:

- **Technical** – the question addressed techniques of using one of the online Ovid databases.
- **Quick reference** – the question simulated a general reference question typically received in person at the reference desk, and could be answered within approximately 15 minutes.
- **In-depth reference** – the question simulated a more time-consuming reference question received at the reference desk.

Of the 111 questions reviewed, 27 (24 percent) were technical, 47 (42 percent) were quick-reference and 37 (33 percent) were in-depth reference. By definition, the technical questions were typical questions that would ensue while using one of the Ovid databases. Further examination determined that 32 (38 percent) of the 84 combined quick reference and in-depth reference questions were unrelated to an Ovid database search. For instance, inquiries were submitted regarding PowerPoint, PITTCat and copyright issues.

Therefore, nearly 30 percent of the patron sample group used the *Ask a librarian* feature to submit reference questions that were not pertinent to their Ovid database search. Perhaps these patrons saw the feature previously while searching Ovid and returned to ask a reference question online. Or they happened to be searching within an Ovid database and submitted an unrelated query just because the feature was highly visible. These findings indicated a need for an expanded electronic reference service. Look for an *Ask A Librarian* feature to be added to the HSLS homepage <www.hsls.pitt.edu> in the near future!

-- Renae Barger