MEDICAL LIBRARY ASSOCIATION

ORAL HISTORY COMMITTEE

INTERVIEW

WITH

MARK E. FUNK, AHIP, FMLA

AND

CAROLYN ANNE REID, AHIP

Interview conducted by Rick B. Forsman, FMLA

October 18, 2018

Edited by
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Consent Form for Oral History Interview (2002 version)

This confirms my understanding and agreement with the Medical Library Association (MLA) concerning my participation in an oral history interview as a part of MLA’s Oral History Program.

1. I agree to be interviewed by Rick Forsman on October 18, 2018. I understand that my interview will be recorded and that a transcript and edited version of my interview will later be created. I understand that I will be given an opportunity to review and edit the edited transcript before its release.

2. I hereby grant and assign all right, title, and interest to any and all recordings and transcripts of my interview including copyright [and all rights subsumed thereunder] to MLA. I will be given a copy of the edited transcript for my personal use. I understand that the transfer of these rights to MLA confers no obligations on MLA to promote, market, or otherwise make publicly available copies of the interview.

3. One or more edited and/or condensed versions of the interview, approved by me, may be disseminated by MLA, as it deems appropriate.

4. I understand that the original, unedited recording of my interview and the original unedited transcript will be maintained in the MLA archives at the National Library of Medicine, or at such other place as MLA may reasonably designate, and may be made available to researchers who have demonstrated that they have appropriate qualifications. I further understand that the original unedited recording and/or the original unedited transcript will be made available with the following restrictions (Check one):

   X No restrictions

   ______ The following specified portions of the interview will not be made available to anyone until ________________.

Mark E. Funk
Carolyn Anne Reid
Name of Interviewee(s)

Signature

Date Oct. 18, 2018

Rick B. Forsman
Name of MLA Interviewer(s)

Signature

Date 10/18/18

Accepted by: MLA EXECUTIVE DIRECTOR

Date 1/4/19
Biographical Statement

Mark E. Funk, AHIP, FMLA, and Carolyn Anne Reid, AHIP, are recognized for their partnership in medical libraries and contributions to professional associations, where they also carved independent career paths. Funk helped to define the relatively new field of collection development in health sciences libraries, especially as it was transformed by electronic publishing. His public speaking skills and use of social media influenced the Medical Library Association. Reid is noted for presentations and training for online searching and computers and for directing the library at Weill Cornell Medical College. Together, they conducted research that impacted the profession.

Funk and Reid graduated from the same library school at the University of Missouri-Columbia, where she entered medical librarianship with support of a National Library of Medicine fellowship and the mentorship of Virginia Algermissen and Charles Sargent. Reid, followed by Funk, worked at the University of Missouri-Kansas City as clinical medical librarians in the new medical school that employed docent teams to educate students. Reid was the first CML hired for the first CML program, established by Gertrude Lamb at UMKC. Funk and Reid continued to work at the same institutions, at the University of Nebraska Medical Center and Weill Cornell, throughout their careers; in both locations, they were hired and influenced by Robert Braude. Funk entered collection development, and Reid moved to online services training in the Midcontinental Regional Medical Library Program and then to administration.

At Weill Cornell (1987-2014 and 1987-2010, respectively), they collaborated with the extensive community of medical institutions in the New York City area and with the unique partnerships with Cornell University in Ithaca and Weill Cornell’s new campus in Qatar, requiring complex licensing agreements and innovative procedures in response to the evolution of the electronic collection. Reid oversaw a major renovation of the library building and succeeded Braude as director.

Both served on the MLA Board of Directors and Section Council. As MLA treasurer, Funk increased the visibility of reports to membership. He helped lead section efforts on eligibility and on centralization of dues collection. He was elected MLA president for 2007/08, bringing social networking and virtual meeting participation to the association. He has been a member of numerous publisher advisory boards. Reid received the Estelle Brodman Award for the Academic Medical Librarian of the Year and chaired the Midcontinental Chapter of MLA and Special Libraries Association chapters.

Funk presented the 2012 Janet Doe Lecture examining changes in the profession through a textual analysis of articles in the Bulletin and Journal of the Medical Library Association. A study they did together on indexing consistency in MEDLINE in 1983 was used by NLM to improve their procedures, and the article continues to be cited for its methodology. They also collaborated on a study of the usefulness of monographic proceedings that was funded by the first MLA Research and Demonstration Project award. These efforts were characterized by meticulous examination of large amounts of data and compelling presentation of results.
Medical Library Association Interview
with Mark E. Funk and Carolyn Anne Reid

[WAV File #1]

RICK B. FORSMAN: This is an interview with Carolyn Anne Reid and Mark E. Funk for the MLA Oral History Project. We’re sitting in a small apartment in New York City, and today is October 18, 2018. The interviewer is Rick Forsman. Carolyn and Mark, because of the overlap in your careers, this is a unique joint interview for the Oral History program. There are two past interviews that included two people, but those were focused on specific topics of importance to the Medical Library Association rather than recapping individual careers. Thank you for working with Carolyn Lipscomb and myself to refine the interview questions and to set up a time for our dialogue. While I have both some questions for you individually and some questions for the two of you, please feel free to add appropriate comments whenever you think that they are warranted.

Let’s begin with some personal history for each of you. So, Carolyn, to start, tell me about where you grew up and any circumstances that set the stage for your later education and career.

CAROLYN ANNE REID: I grew up in Indiana. I was born in Vincennes, Indiana, a long time ago, and I grew up in southwestern Indiana, several different locations. We lived in Vincennes for a bit; we lived in Newburgh, which is farther on down the Ohio River; and then we lived in Evansville for about ten years. I went to grade school in Newburgh for three years and grade school and high school in Evansville up through my sophomore year. Then my family moved to Missouri, and it was in Missouri that I finished high school and started in college. My experience in high school was fairly good, and I was always a fairly good student, even in grade school. I was leaning towards something in the sciences. I gave very serious consideration to a program at Gradwohl School of Laboratory Techn[ique]. I thought I was going to become a laboratory technologist.

Somewhere along the line, probably the counselor at the high school convinced me instead to go to college, and I got a Missouri state scholarship that paid for my tuition to go to Southeast Missouri State College, which it was at the time; now it’s Southeast Missouri State University. This was in Cape Girardeau, Missouri, way down in the southeast corner of the state. I went for two years to Southeast Missouri State College. I started out in an engineering program, and I did a year in engineering. And at the time, I became friends with people who were in the theater department, and I found that the people in the theater department were much more interesting and had a lot more fun than the engineers did, so I switched my major to speech and theater.

I continued in speech and theater for a year and a half there at Southeast Missouri State College, and then I was a little questioning about what I really wanted to do with that. I had thought my plan would to then be in a school situation, either a high school or a small college situation in the theater department. My interest was technical theater, not
I was a backstage person all the way. But I began to question whether that was really a good route for me, and so I dropped out of school for a year. During that time, I moved to Lawrence, Kansas, and ended up working at the undergraduate library, at KU’s [University of Kansas] library. And that, as I later learned, seems to be a common route into librarianship.

I decided that this library stuff was pretty good, so I worked out another plan, and because I could still get in-state tuition from Missouri, I looked to the library school at the University of Missouri, Columbia, Missouri. I got my tuition paid for my first year there, which was sufficient to complete my undergraduate work and get a bachelor’s degree. That’s why my bachelor’s degree is in speech and theater and library science. I had a few little courses to make up in the humanities and the social sciences and so forth, and I did that, and I got an undergraduate degree in library science as my bachelor’s.

But while I was completing my bachelor’s work, one of the classes that I took was with Virginia Algermissen as the instructor for the basic reference class. She and Charlie Sargent, who was also on the faculty there, talked to me about this new program that they had that was going to be funded by the National Library of Medicine, that was going to develop people in the health sciences librarianship area. And I thought, well, I like Virginia Algermissen. She had been a medical librarian; Charlie Sargent had been a medical librarian. I thought, well, they’re pretty interesting people. They have a lot of interesting experiences they talk about. And they’re offering to pay me money to get a master’s degree. I thought, well, not too bad a deal. I decided I would join the program. I applied to the program; I was accepted into the program. I was one of five students who were funded by the program. They had two other students who were with us as well who paid their own way, but five students from the NLM program.

Having gotten my bachelor’s degree at the University of Missouri in library science, one of their regulations was that I had to have another major with my master’s program. That meant that I had to take other courses, enough courses—I think it was eighteen hours—in another area of emphasis. It must have been a conversation with Charlie Sargent that convinced me to do computer science as that other area. So, I did computer science courses, the basics that I needed in order to complete the eighteen hours in a non-library science program. And that, the health sciences program and the computer science alternate major, were probably two of the best decisions I made at that time.

RF: And that was a lot of computer science coursework.

CR: It was a nice little bit of computer science coursework. I learned the basics of computing, which was totally different than it is now. I learned FORTRAN, I learned PL/I, I wrote a compiler for assembly language. I did some very interesting things. And the best part about it was that I really learned about what happens inside the computer.

On the medical library side of the program, of the courses that I took for medical librarianship, one of the courses was in medical subject analysis, I think was even the title of the course. We learned MeSH, because Virginia had learned MeSH. We actually
learned all about MEDLARS demand searching. We actually composed the search formulation for MEDLARS demand search [service], which was then sent to NLM and run for us, and we got the results back, which was a great experience at that time because the only people who could do MEDLARS demand searching were people who had gone through that rigorous training program. I think, at that time, it was even about six weeks or two months to become a MEDLARS searcher. It was pretty complicated, but having had the computer science on the other side, I really understood exactly how everything was put together in a MEDLARS demand search.

The other courses I took at that time included systems analysis, for which I have always been grateful. Charlie Sargent taught a systems analysis class that taught us how to break something down into its simplest parts and then analyze how to solve those parts in order to complete a project or solve a problem. And then all of the basic library classes—the basic and advanced reference, cataloging—I typed catalog cards.

Two other classes I took that were very special—one was a basic class in medical librarianship that Dean Schmidt taught. He was the director of the medical library there at the time and had been and was after for many years. We had one class a week with him, a two- or three-hour class, that involved health sciences libraries and how they were special. The other class was a very special class. I think the only time that she did it—Estelle Brodman drove over from St. Louis once a week on a Saturday morning and gave us a three-hour class on the history of medicine. That was wonderful. That was very, very special. And as I say, I don’t think she ever did that again. I think the only time she did it was that first year. I felt like I had a very good education.

RF: You had really strong health sciences people to contribute to your education.

CR: I did. That was part of why the program went to the University of Missouri in Columbia, because the library school there, coincidentally, at the time, had Charlie and Virginia, and then Dean Schmidt, with his experience, and then access to Estelle Brodman. That component of people I don’t know has ever been put together.

RF: Right, pretty stellar.

CR: Part of the fellowship funding, in addition to very generous funding for me as a student, was to gather together with students in the other two programs that were similarly funded by NLM. One was at Case Western; the other was at UCLA. The students who were funded by this NLM fellowship all were also funded to go to NLM for a visit to meet people, get overviews of all of the different parts of NLM, meet the other students as well, and just generally learn the National Library of Medicine. I learned the word ‘overview’ in that session, because everything on the agenda was overview of public services, overview of technical services, overview of MEDLARS Management Section, overview of—I guess SIS [Division of Specialized Information Services] was there at the time. And, more importantly, I met Thelma Charen, I met Dave McCarn, Grace McCarn. I think I met Sheldon Kotzin at that time, too. And I have to mention
Rosemarie Woodsmall, because she has been a friend for all these years since then. She was also from Indiana, so we had that immediate similarity.

After we left Washington, DC, we flew up to New York City for MLA—May[June] of 1971—for the MLA meeting. That was the first time I was in New York City, the first time I went to an MLA meeting, the first time I met Priscilla Mayden, the first time I met—one person after another. I think I met Bob Cheshier at that meeting. Charlie and Virginia took all of us students around and made sure that we met all of the important people. And so that meeting made a big impression on me. I took every CE course I could possibly cram into my schedule, I went to every session, I went to every paper, I went to everything that was there. And it was great. It was a lot of fun. I really enjoyed going to the meetings. It was fun for me then, but MLA meetings have always been fun.

But the other thing I did there, before I went to the meeting, I programmed—you punched up IBM cards—in order to print out a seeking position statement to post on computer printout paper in the job placement center. Didn’t get much result, but it was fun to do and I thought it was a kind of cute approach, because it showed that I had computer skills. I’m pretty sure that’s where I interviewed with Bernice Hetzner for a position at the University of Nebraska, although I wasn’t offered that position. I didn’t get a position from that visit to MLA.

I went back and finished summer school and finished my degree. Somewhere over the course of the summer, Virginia and Charlie found out that they were starting a new program in Kansas City, which is part of the University of Missouri-Kansas City [UMKC]. They were starting a new medical school [in 1971], and they wanted some librarians with some special skills to participate in that medical program. They got me an interview with Ken LaBudde, who was the director—the university librarian—at Kansas City. He took me to the medical school and introduced me to Gertrude Lamb, and they decided that they would hire me. They offered me the position and I signed on and I started early in September; I don’t remember the exact date, but early in September of that year. So that’s how I got to be a librarian.

RF: I have to say, you got an immediate and major grounding in the luminaries of the profession, people who were so instrumental in the early days of medical librarianship.

CR: Yes, I was at the right place at the right time. I was very lucky that way. Even at the time I appreciated it, because I remember there was a party, I think, in someone’s room, where I met Priscilla Mayden, and Virginia took me in to meet her. I forget what the word was she used, but something like the ‘princess’ of medical libraries. And for a long time, I thought maybe that was her name—Princess instead of Priscilla. But I understood that it was special at the time.

RF: But that’s pretty amazing. And then also, the referral to Trudy Lamb while she was spouting clinical librarianship.
CR: Right. She had not even been there a year, I don’t think, when I first met her and first got involved in the program. I was the first CML [clinical medical librarian] they hired. I was the first librarian to participate in the docent team. At some point I want to go on and talk about UMKC, too.

RF: Sure. I think we’ll be getting to that shortly. I think you’ve covered a lot of what I wanted to inquire about as far as your educational background, but I would like to ask a comparative question, because, clearly, the skills that you and I graduated with a long time ago are very different from the skill sets that we see librarians come with now. Any comments you’d like to make about our education at that period versus what we see today?

CR: I’ve been out of libraries now for almost ten years and I’m really not that familiar with how graduate programs work. But as I looked at the curricula listings for a couple of different schools, I saw similarities and differences. I saw that they still teach basic reference; they still teach the basic selection and acquisition kinds of courses. I didn’t see a cataloging course. Mark said he saw a cataloging course on one of the lists, but I didn’t see one. And they teach basic library management. So those things are still similar. But they also have lots of web-based information resources, obviously. They have information resources that are data driven and are databases, and then data analysis and data management, which is totally different. We had not gotten anywhere near that level when I was in school. The biggest difference is, while I had a good basic education at the time to bring me into that area, students who are in school now grew up with microcomputers, with iPhones, with iPads, and they have a whole different instinct towards things that’s probably not unlike what I have because of my basic computer training, but yet that’s very different. And so their approach to things is different and they’re a lot more facile with various complicated kinds of concepts and programs.

RF: Good. Thank you. Mark, let’s turn to you and ask some of the same sorts of questions. Tell me about where you grew up and the factors that influenced your career choices.

MF: Sure. I grew up in Missouri. Lived in a few small towns until third grade, when we moved to a little town called Mexico, Missouri, which is pretty much in the middle of the state. It’s about 11,000 people. Pretty small town. I always liked science courses growing up, so I went to the University of Missouri-Columbia, which was like forty miles away from Mexico, and started out as a premed major, and stayed premed for three years until I took comparative anatomy, in which I found out that once I cut out a piece of something, it was totally unrecognizable to me, so I figured that was not a good thing for being a doctor [laughter]. So, I just went ahead and finished my degree in zoology.

And in terms of librarianship, I like to say that I owe it all pretty much to President Richard Nixon, because it was the spring of 1970, right after my junior year, and in that spring, the United States had invaded Cambodia. There were massive college protests across the country. We had Kent State. There was the Hard Hat Riot here in New York City, where about a thousand construction workers went after students who were
protesting the war. And even in Missouri, in the middle of the country, this was resonating. Columbia, at that time, was in the eighth congressional district, and our representative was a Democrat, Richard Ichord, who at the time was the chair of the House Un-American Activities Committee, which a lot of us remember from our history from the ‘50s, going after Commies and dirty hippies. A lot of us at the University of Missouri didn’t feel that he was a very good representative for us, and an [anthropology] professor, Clyde Wilson, decided that he was going to run against him. I decided, and one of my roommates decided, that instead of going home that summer and getting a job at home, we would stay in Columbia and work on the campaign to try to get Clyde elected.

My roommate, Ron, and I were walking through campus trying to decide how we were going to get a job that summer, and we walked by the main library and we thought, oh, I bet they need people for the summer to shelve books and do other kinds of stuff. We walked in and talked to the personnel lady there. When she found out I was a zoology major, she said, “Oh, we have an opening at the medical library. You might be interested in that.” I went over to the medical library, and in addition to Richard Nixon, I owe a lot to Beverly Allen, who I think retired recently as the dean of Morehouse [School of Medicine] library. She was the head of circulation then. And she saw this little short, skinny kid, who she wasn’t even sure could push a full book cart, but she decided, yeah, I’ll take a chance on this kid and I’ll hire him. And that’s how I ended up working at the medical library, and eventually, a few years later, going to library school. It was the same library school that Carolyn went to, although this was a few years later.

CR: Way years later. I’m so much older than you.

MF: You graduated in what year?


MF: And I started in 1974. Interestingly enough, though, while you were taking your classes there at the medical library, I was working at the circulation desk, so we may have met.

CR: I have this vague recollection of this kid that worked at the circulation desk with this big Afro.

RF: Medical libraries are not that big. You must have met.

MF: We probably met, but she was just this other student coming in, so I didn’t know her.

There were three medical librarianship courses. There was health sciences librarianship and bibliography, which was your typical reference kind of thing; medical subject analysis, which was MeSH, medical terminology, and searching; and the biomedical community, which gave students an understanding of the environment that a medical
librarian was in, the medical school within NIH and everything that was going on at the time. The pioneers had already left, so I was not able to take advantage of those. They were taught by Nancy Hardy, who had been a librarian at the University of Utah, working with Priscilla Mayden. She taught there for a couple years and then left. I have no idea what happened to her. I’ve tried looking her up. She sort of fell off the earth.

In terms of memorable teachers, Bert Boyce, who taught abstracting, indexing, and a few other information science courses—I got to take all of his courses—became my advisor and really my mentor during library school. For library school, each student had to do what was called LS451. It was your research paper. It was like a thesis. It was not called a thesis, but it was sort of the culmination of what you learned about research and bibliography and putting together something. He gave me an actual research idea that could be tested, which was based on Trudy Lamb’s dissertation. It had to do with Bradford distribution and the selection of high-quality papers. And fortunately, it was good enough that Dr. Boyce and I got it published afterwards, so that was my first publication right after library school. That was kind of neat. Bert really got my interest in research started.

The other person I want to mention, she wasn’t a teacher, but as a graduate student working there at the medical library, I worked with Emma Jean McKinin, who was—

RF: Emma Jean. What a wonderful person.

MF: She was actually a recent graduate there at the library school and had gotten a job there. She sort of took me under her wing and taught me more about reference and really taught me how to do MEDLINE searching, ELHILL searching. I became a pretty good searcher under her guidance. And all of that was done on a TWX machine with 300 baud, so that was fun.

You asked about differences in education between then and now. I think, back then, there was really an emphasis on a lot of the basics, the infrastructure. There was cataloging, there was reference, there was acquisitions, selection. And based on applications that I’ve seen for positions for which I was on a search committee while at Cornell, there are these other courses now about web design and user interfaces and mobile app development, learning management systems, data analysis, and data representation.

CR: And research methods. That’s a big difference.

MF: Yes, a big difference there. I think, overall, it’s stuff that really allows the library to reach out to their community and work with them on their own turf in understanding their own environment, whereas before, it was pretty much a passive kind of thing, where we stayed in the library, and researchers and faculty and students came to us when they had information questions, although certainly, clinical medical librarianship broke the mold on that and really started that outward looking—
RF: Getting us out of the library. It is interesting to me, though, because it still seems like a lot of the early education skills that we came with as far as managing information and trying to have a handle and control over the print resources that were coming in, have morphed into a different expression but are still some of those same organizational concepts. And we just lived in an era when there was very little we could do about helping people with search strategies or retrieval, but that’s changed significantly throughout the course of our careers, and now there is a whole new approach, I think, to that kind of retrieval function that was still part of our education.

CR: And the organizational aspect is the basic thing that has always been part of librarianship—the organization of information, so that it can be managed and retrieved. There’s no point in having information if you can’t retrieve what you need.

MF: We used to be the gatekeepers of the information and people had to come through us, even as we evolved into electronic abstracting and indexing retrieval services. It involved extensive training for the librarians, and then the users had to come to us and plead with us to do a search for them, and then we would go back in our rooms and do our hocus-pocus and do the searching and present them with a printout. And that has totally changed now.

CR: Yes, that’s one of the biggest changes.

RF: Well, before we start talking about your individual careers, I do need to ask that obvious question: when did you finally meet?

CR: You didn’t talk about getting a job at UMKC.

MF: No, that was my next part. I was originally introduced to the concept of clinical librarianship in one of those health sciences classes that Nancy Hardy taught. She took us on a field trip to Kansas City. She had set up a day that we would go to UMKC. I think there may have been four or five of us in a van. And we would split up and shadow a clinical medical librarian as they went on their daily rounds with their docent teaching team. So I went along and I thought, oh, this is pretty cool, because you got to wear a white coat and [laughter]—

RF: Shades of your premed—

MF: Right. I got to see that the students and the docents and the Pharm Ds and the nutritionists would turn to the clinical medical librarian and say, “Could you give us information on this?” There seemed to be a knowledge gap here among some of the students, perhaps, who really needed to know more either about this disease or the physiological process or how this drug worked, how the diagnosis was made, etc. I liked that and it really fit in with my whole zoology and premed kind of outlook that I used to have. I thought, this is really what I wanted to do, and I ended up getting a job there. Gary Byrd hired me in 1977, a year after I graduated.
And that’s when we really first met, because Carolyn was the senior CML. And there were—I don’t know how many of us.

CR: There were four when you came on board. You replaced one. You replaced I forget who. At the time, we were in our second grant from NLM, and I’ll talk about that in a minute. The most we ever had was nine, so somewhere between four and nine.

MF: We all worked closely together, and certainly for the new CMLs, Carolyn was the obvious source to go to for experience. So that’s really when we originally—

CR: I had to laugh when [you say] we worked closely together, because the office for the nine of us was about this big [laughter]. We had this great arrangement with a five-foot-wide desk and a filing cabinet that served two people. It was just crazy. We had no space, so we did the best we could with what we had.

RF: Let’s talk more about the clinical medical librarian program. Carolyn, you spent a fair amount of time helping ground that program and getting it up and running there, so tell me more about what was involved and what you did.

CR: Well, Trudy Lamb was the one who grounded the program and got it started. And I have to give credit to Earl Farley, who was the director of the medical library at KU. In the spring of 1971, he and Trudy, and I think one of the first docents, Bob Mosser, was the third party who was in that conversation at some meeting. They were talking about this new medical school program that was going to start in the fall and how it was going to be what they were going to call docent teams run by a senior physician, which included some interns and residents and some medical students and some other health professionals—a pharmacist, a dietician, a sociologist. And Earl Farley piped up and said, “Well, you should have a librarian in there, too.” Trudy said, “Yes, absolutely.” And Bob Mosser said, “Well, we’ll give it a try.” And that’s how I got to be the first of the CMLs that was hired in September of that year. I was assigned to Bob Mosser’s team. He wanted to take the first one, I guess. There were three docents and three groups of students. I was assigned to his team, the red team. Red, blue, green, and gold were the teams. Which team was yours?

MF: I was blue.

CR: Yes, you were on the blue team. But not the first. The first would be Russ, because Jim Tchobanoff—he was the Pillsbury Doughboy—went on to be the director of the library at Pillsbury [Company] for many, many, many years, and a very significant figure in the Special Libraries Association. Russ Murphy was the third of the first CMLs.

There were three groups of students. There was a total of thirty-six students in that first class divided into three groups of twelve. The librarian went on rounds with the students, with the docent, with the others in the whole team. We went to the patients’ bedside; we had discussions in the hallway; we had discussions in the conference rooms. And over the course of that conversation, sometimes there would be questions that would be
directed to me or to others in the group that would either be answered, or I would generally file them away for going back to the library later. But more often, it was a perceived information need that I had as the librarian attached to the team who said, “That question went unanswered. I’m going to have to go back and find some information about that.” It often had to do with the co-occurrence of two diseases, or a particular diagnostic test, or which of two different therapeutic methods might work better. So I would run back to the library after rounds—rounds were always early in the morning—and do my searching.

I did AIM-TWX [Abridged Index Medicus–Teletypewriter Exchange] searches. I did manual literature searches in Index Medicus. I found articles that were pertinent to answer the questions, and I took them back the next day. At a point in time, I started a file of articles in the doctors’ room in the inpatient service. I took the name LATCH from someone else who was using that name for something else. Literature Attached to Charts is what LATCH stood for. I had a file of articles—not physically attached to the charts, but filed in a file box in the conference room. They were identified by patient. This was in the days before HIPAA.

RF: When you could do that.

CR: There were lots of pre-HIPAA things that would be done differently now. And that’s basically the way the program worked. It was a new program. I spent a lot of time going around and talking to other people about it, talking to people in the medical school about it. I remember one particularly significant conversation that I had with Dr. Marjorie Sirridge, who was the wife of the green docent, Dr. William Sirridge. I sat with her in her office over at the medical school and I explained to her how the program worked, and next year, when she got students of her own for her part of the program—because they added students every year—she would be assigned a librarian to work with her. And she said, “Oh, but I don’t need a librarian. I have all of the literature I need right here on my bookshelves, so I won’t need that.” So, I talked a little bit more about the program and brought her, then, a couple of articles on things that she was working on, and made photocopies for her. Sometimes that was a good inroad into someone. And she became, ultimately, absolutely the 100% biggest supporter of the CML program in the school. She did join the red team for a while, but then she went to—I don’t remember how she ended. Anyway, she was there for many years. She and William were both there for many years. They are some of the most well-known and well-respected people from the UMKC program.

RF: So you came into the time when Kansas City was really creating a different approach to medical education.

CR: Totally different.

RF: And you had to help figure out how it was going to work and how the library was going to participate.
CR: The program was a totally different approach to medical education, which I should have mentioned first. Instead of a four-year bachelor’s program followed by a four-year medical college program, it was a six-year program directly out of high school with two years of preparatory work and classwork and then four years of a medical program. And the students went year-round. The students, though, had patient contact from the very first week of the very first year in a shadow kind of component where they would follow people around and get to meet outpatients and get to talk with patients and learn some interview techniques and learn some other outpatient kinds of handling of things.

RF: Right out of high school.

CR: Right out of high school. This was in the September after they graduated from high school. Then they went straight through continuously, twelve months a year, through the whole program. It was divided into four quarters. So by the time they got out of college, they would come out with a bachelor’s degree and an MD degree. That was six years later. The students we had the first year, most of them already had bachelor’s degrees. One of them happened to already be a dentist who wanted to get an MD degree so he could be an oral surgeon. There was a psychologist. There was a variety of interesting—and some older people. One of the students that first year, I think, was well into his thirties. I want to say thirty-eight. But they had a lot of different backgrounds. They were all very well suited. It was a fairly equal balance between men and women. I can’t remember exactly what the numbers were, but throughout the whole time, there was always a fairly equal balance. Likewise, we had a number of women docents as well as a number of men docents.

It was a totally different program that was talked about all over AAMC [Association of American Medical Colleges] and eventually at MLA. Gertrude Lamb had several presentations, I had presentations at MLA. My work in that job contributed to the fact that one of the first things I did at MLA was make a presentation at the 1973 annual meeting, which was in Kansas City, as to how library school prepared me for my position. Jim Tchobanoff and I were both on the panel. I believe Bob Cheshier was on that panel, too, and I believe there were a couple of physicians [and PhDs]—I believe that’s what the panel components were. It was a plenary session, a panel discussion at MLA in 1973 about how well prepared I was for my job. [Editor’s note: The participants on the panel “Are Health Sciences Librarians Prepared to Meet the Challenges of Their Jobs?” included the librarians and a family practitioner, family nurse practitioner, professor of biochemistry, and medical resident; Cheshier presided at the session.] I felt I was just dramatically well prepared because Virginia Algermissen had told me everything about MEDLINE searching and Charlie Sargent had taught me a lot of stuff about computers and systems analysis, and I felt like I was very well prepared for this new role of working very closely with health professionals in fulfilling their information needs.

RF: Anything else you want to say about the clinical librarian program?
CR: I mentioned briefly the fact that we got a grant from the National Library of Medicine for three years of funding for studying [the program]. One of Trudy Lamb’s significant contributions to the program was to get funding from NLM for the research aspects of the project, because having a librarian involved that closely with a patient care team was a new concept and she wanted to do some research on how well that was working out. For the first three years that we were there, we had the grant. At that time, there were three CMLs, and we soon added a fourth. As they added a fourth docent team, we added a fourth CML. Then at the end of that three years, we wrote a report, which is mentioned in my CV. We applied for another grant to expand the program and work differently with it. We at one point had CMLs in emergency medicine, OB-GYN, pediatrics, and one at a hospital that was way out in the east of Kansas City—do you remember the name of that hospital? Truman East?

MF: Truman Medical Center East.

CR: Truman Medical Center East. Yes. Truman Medical Center was the new name of the Kansas City General Hospital and Medical Center. Truman Medical Center East was twenty miles out, and we had one librarian out there. And there was another.

MF: We had surgery.

CR: Surgery. That was the other one. I didn’t mention surgery. So there were nine of us at one time, and that’s when we were all crowded into this one office space that was meant for four people.

RF: This might be a good time to change the questioning structure a little bit, because I’d like to stay on the clinical librarian theme while we’re there and ask, Mark, for you to comment as well about the program when you came into it, and your perception of it.

MF: Well, I came in in 1977, so it was fairly well established at that time. And in fact, I was replacing someone who—

CR: Naomi [Adelman].

MF: —who had been there for a while. So I was not there for the formative years. That was pretty much well established. We were accepted pretty well by the faculty, and certainly the students, who relied on us quite a bit. Because, as Carolyn said, with many of them just being a couple years out of high school, they really hadn’t developed a lot of library skills, so they relied on us quite heavily. And, in fact, a good part of what we had to do was not only fulfilling the information needs for some of the complicated patient stuff, but teaching some of these—I almost want to call them children—which how to use *Index Medicus* and find things on their own instead of just walking up to me and saying, “Give me some articles on alcoholism,” which was kind of one of those face palm requests where I realized, no, you really need to know how to use *Index Medicus*, because you’re going to be using *Index Medicus* for the rest of your life, as we thought—
RF: In one form or another.

MF: In one form or another, yes.

It was just a matter of picking up some of the social customs, which medicine has a lot of. If you just work in the library and are only used to physicians or students coming in, you miss out on all of that social hierarchy, and almost hazing, that’s going on in the rounds system. So it was fascinating to see some of that.

And then, as you’re going on—and I was there for three years—with every rotation of new students, similar questions started coming up, so you would hear the same answers from the physicians or from the Pharm Ds. After a while, I started, too, to understand what was going on. So there were times when a question would come up and they’re going, “Hmm, I don’t know, I don’t know,” and then I’d raise my hand and I would know the answer just based on my experience on that.

I remember we had a patient who we weren’t sure as to whether he had cancer of the ampulla of Vater, which is connected to the gall bladder. And the physician said, “Okay, I’m going to ask you a question. If a patient has cancer of the ampulla of Vater, what color is their stool?” And people were trying to figure out, oh, I don’t know. Is it green? Is it brown? Is it black? Well, strangely enough, just a week or two earlier, in JAMA there had been a case report of that, and the CMLs would often sit down and go through the recent issues. Because one of the things we made was Current References, where we would pick out an article and write a little abstract. This was printed on cards and given out to people so they could put it in their own little personal filing system. Well, there had been an article exactly about this with a color photograph of the stool of this patient, which is, oddly enough, silver. So I raised my hand, and I said, “Silver.” Everybody laughed, because that was the dumbest answer they could probably think of. And the physician’s mouth dropped, and he said, “That is exactly right. It is silver.” There are moments like that, and then the students would look at you and go, “Maybe I should go to library school [laughter].”

CR: How did he know that [laughter]?

MF: So that was educational in its own sense, which I felt also served me well as I went on to collection development, because I felt that I had a pretty good idea of the kinds of information that particularly clinicians and students would need as they did their work. I would have that background and I felt I could better choose the resources that would match that as well.

RF: And as you were saying, you both got early skills in navigating your way through the complexities of medical sociology and the personalities, the caste system, the different interplay of professions, which is complicated.

MF: It is complicated. I know it’s been a real problem for the medical profession. I’ve read now several articles in the [New York] Times and others about the hazing of students
and residents, and it turns into a system whereby, well, I was hazed, so I will pass this on and I will haze. It’s sort of like fraternities. They have the same problem and they’re trying to get rid of it. I’ve seen it firsthand and it’s fascinating.

RF: Yes. And you hear comments from physicians that, “Well, I was on call for forty-eight hours, and these new students should be as well.” Doesn’t matter if they’re not functional. They should have to go through this.

MF: They should have to do it to prove themselves.

RF: Yes.


RF: Yes. Anything else you wanted to say about clinical librarianship? Then let’s move back to Carolyn to pick up where we left off. After a very successful period at Kansas City, it was time to move to Nebraska.

CR: Well, there was a position open in Nebraska. It wasn’t like I said, “Oh, I really want to go to Nebraska. I’ll get a flight. How can I do that?” Through all of my time in Kansas City, I had worked a lot with online searching—online searching and training for online searching, and the online services updates for the MEDLINE system. When the new MeSH terminology came out in the fall, we always had the updates. I got very involved with those and worked closely with the RML [Regional Medical Library] in Omaha and with NLM. I participated in those sessions a couple of times while I was still in Kansas City. The position that came up was for online services coordinator at the Midcontinental Regional Medical Library Program [MCRMLP] in Omaha, Nebraska, at the University of Nebraska Medical Center. I applied for the position, and I was offered the position, and I decided to take the position. And [Mark], you’ll have to talk about how you got involved in that, because I don’t remember.

RF: And this was in 1980.

CR: This was in the spring of 1980, yes. It was April, as I remember.

MF: There was also a position for the head of collection development. They were concurrently available, these two positions. And I wanted to go where she was, so I applied for that job as well and went up for an interview and was offered the job. Now, interestingly enough, Bob Brauđe, who was the director, did not know that we were a couple at that time, so he just happened to hire both of us at the same time because he felt, well, these are good people. I will hire them. I do remember when his administrative assistant was filling out the onboarding documents, and we had to put down our addresses, which was going to be the same address. And she looked and, “Well, there must be some mistake here. These people put down the same address.”
CR: Well, the person who outed us to Bob also, as I remember, was Gary Byrd, because he was the director of the library at [UMKC].

RF: Right, so he aware of your relationship. And did he do that after you were hired?

CR: Yes, as I remember it.

MF: Probably, yes.

CR: And it was a casual bar kind of conversation. It was just over a drink or something.

MF: “By the way…”

CR: Yes, so I became online services coordinator for the RML, which is also an interesting office situation, because my office was in a closet at the RML.

RF: Another space constraint issue.

CR: Yes. I have been through some really interesting offices. And honestly, I think that was one of my either top or next to top, second favorite, position. CML was really good, too. I have had some great positions. But I enjoyed doing the online services work. I enjoyed the teaching, I enjoyed the training, I enjoyed the writing of the articles for the regional bulletins, preparing course materials for the various different courses that I was involved in. I enjoyed going back to NLM once or twice a year for the various update sessions and educational sessions, and learning all of the different classes.

The way that MCRMLP got the online training program was when I went over to—I can’t think who it was. It might have been Sheldon Kotzin, but it was someone from NLM at a restaurant when we just happened to be having dinner there at the same time. It might have been the banquet at the annual meeting—something like that. I remember I actually took a knee next to the person and I said, “You know, if you had another training center in the center of the country, it would be a lot more convenient for a lot of people to attend the…MEDLINE training class. And Omaha would be an interesting location for that, and have you ever given that any thought?” And it was very shortly after that that we started doing online training in Omaha.

Before, I was just online services coordinator, and my job was to coordinate the online services in all of the different libraries throughout the region. There were seven states in the region. And all of them had online searchers and all of them had questions about searching, and so I was the regional coordinator to help them with their searching and then do the online updates and things like that.

Then when we opened the training center, we had to set up a center, a room that we could put computer terminals in. And we had ten, I think, computer terminals. People had to share a terminal. We could have twenty people in a class. We did classes in Omaha. The terminals were all portable. I think they were TI-745s [Silent 700 Model 745] at the
time—little portable Texas Instruments terminals. And we could pack them all up and ship them off to places, so we went to Chicago and did classes; we went to Dallas and did classes; I went to New Orleans and did classes. Those are the three that I remember now. Generally, there were other RML sites that would host the training class, and that way, there could be a one-week training class on-site for local people to attend so that everybody could get a good, proper MEDLINE training class and be able to improve their searching in that way.

RF: As long as you had lots of physical telephones that you could put into the acoustic couplers.

CR: There was such a list of the situation that had to be set up in each of the locations.

RF: The hardware requirements.

CR: But, fortunately, there were good people on the RML staff to help me to make sure everything was arranged on both ends, in both of the sites. Chicago got to be very used to it, because I did a class in Chicago practically every year, I think. I did a class in Dallas and/or Houston quite frequently too…

RF: …But that clearly was an era when reference was being revolutionized. And you were very visible and very instrumental in coordinating training, doing a lot of training yourself, writing manuals, doing presentations.

CR: And I loved it. I really enjoyed all of that. I enjoyed doing that very much. It was a lot of travel. Generally, once a month, I would be on a trip someplace or another. And then there was the big update trips, where I’d hit five, six, ten sites all at once with the one-day update session all over the region. I went to every state in the region at least once, if not more.

RF: And that’s a lot of traveling in Midcontinental, because it’s so dispersed.

CR: I got to know airports all over the whole region. Some of them I have only visited once, and that was plenty. But I really enjoyed that. I still enjoy searching. I still do searching for my neighbors and for myself and for my family. And I enjoy teaching other people.

One of my skills somehow happens to be—and this goes back to my interest in science in high school and early college—understanding complicated things and being able to explain them to other people, which I gather is not a skill that everybody has. I have the patience, I can understand complicated technological situations, and then I can break them down. And that’s the systems analysis—I can break them down and help other people understand them more easily.

RF: And you had your fundamental computer experience, which helped you understand what was happening underneath.
CR: Yes, which I’ve always felt made a big difference. I couldn’t write a program now to save my life, but—

RF: No, but you understand the logic of what’s going on.

CR: Yes. And then in 1983, Dick Pride, who had been the associate director of the RML, decided he wanted to move west. He decided he wanted to go to Seattle, Washington, and take a job as a hospital librarian, and that left a position open for associate director. I had a talk with Bob about whether I might—well, first I had to talk with Dick about that. He said, “Well, I know for sure you do one thing better than me, and that’s write the reports.” That encouraged me to go talk to Bob. The end result of that conversation, I remember very clearly, was my saying, “Well, if someone else applies who is better qualified for that position than I am, I will be very happy to work for them.” Shortly after that, he offered me the job. He did have other applicants, but he offered the job to me.

I was there as the associate director, which was quite an exciting time because we got to write a whole new contract, where a lot of things were changing in the RML at that time. That was the time of the regional changes, and the numbers went from eleven down to [seven]. [Editor’s note: The Regional Medical Library network was reconfigured from eleven to seven regions with contracts awarded in a phased schedule in 1982-1983.] I think it was when I was associate director. So that was an interesting time. And the type of contract we wrote was different for NLM also, and that was interesting. But at least I didn’t have an office in a closet anymore; I had a legitimate office. And I had a legitimate secretary. Mayrene McKenzie was a great secretary. She was a big help. I enjoyed doing that [job], too, because I was working with Bob.

I first met Bob in Kansas City, in fact, in 1973, at the dancing after the banquet for the annual meeting in May of 1973.

RF: And if it was dancing, you would meet Bob.

CR: Yes, exactly. That’s when I met Bob. And I did know him through the years because we were in the same region. I was in Denver doing various different things—going to meetings and doing updates, so I got to know him. [Editor’s note: Braude worked at University of Colorado Health Sciences Center prior to University of Nebraska Medical Center.]

RF: And you were in the Regional Medical Library Program, as you say, at a time when there was a lot of change, the regions were being reconfigured, the program at Omaha did a lot of innovative things as part of the contract.

CR: Yes. The most innovative thing we did was Claire Gadzikowski, who was one of the librarians on the RML staff, worked closely with the PHILSOM people and with the University of Utah people.
MF: I’ll just point out that PHILSOM was a serials control program that came out of Washington University. And for the record, [that stands for] Periodical Holdings in Libraries of Schools of Medicine.

CR: Which was a very significant development in managing periodicals.

RF: Yes.

CR: So, using the PHILSOM database and some other software, the concept of a document delivery system, or an interlibrary loan request system, which we called OCTANET—because we were Region VIII—was developed and used in the Resource Libraries throughout the region. And NLM was very interested in that and—

MF: It was an online interlibrary loan request system, where you could put in a citation, and it would match the holdings to another library. And you could even do the closest, and that library would then pull that article, copy it, and then send it to you. So it was much easier to do an interlibrary loan request rather than have to go to something like a union catalog or a microfiche system [to check holdings]. You would just go online, request it, and it would be routed to the nearest library. And if they didn’t have it or it was out for some reason, it would then go down to the next library. It was all automatic.

CR: That may sound familiar for people who might be listening, because DOCLINE was then developed from the OCTANET system.

RF: Exactly. OCTANET was an incredible proof of concept that allowed DOCLINE to become operational.

CR: But originally, it was just something we were going to use in the region to make it easier, because all of our Resource Libraries were members of PHILSOM, and all of their holdings were on the system. It was easy for us to do that, and so we did. We got NLM’s attention, and then they continued to fund it as we developed it, and the rest is history.

MF: And then, of course, hospital libraries could use it in addition to the Resource Libraries.

CR: Yes, that’s right.

RF: But that was a huge step forward, I think, in terms of medical library resource sharing. And also, a very significant step in the way that NLM, then, chose to develop some of its online products, like DOCLINE.

Carolyn, while you were in the RML program, were there other people who were key folks that you dealt with? And you said you dealt a lot within NLM, you dealt with
people around the region. Were there individuals there who stood out in terms of contacts that you had with them?

CR: Betsy Humphreys, Sheldon Kotzin, again, [Donald] Lindberg… Yes, there were a number of people that we met with regularly. The RML directors got together at least once a year, and I went back to NLM at least once a year. So there were a lot of regular NLM contacts. We had email at that time. That was how we got email, through NLM getting us set up on Telemail, I think it was called, on the Telenet system. Yes, Telenet and TimeNet. Those were the two networks. And we used the resources that they gave us for various different projects… There certainly was a lot to do with NLM. They were providing us with all of the money. And I did do a fairly good job with the reports, as Dick Pride suggested I would.

RF: And there were a lot of reports.

CR: There were a lot of reports—quarterly and annual and renewals and all of those, yes.

RF: If it’s agreeable with both of you at this point, rather than ask about the transition from Nebraska, I’d like to turn to Mark and talk about your move to Nebraska as head of collection development, also in 1980.

MF: Right. In 1980, collection development was still a relatively new concept, particularly in medical libraries. [It] had been around for maybe a couple years in academic libraries. It was new and a lot of people would say, “Well, what is this? How do you do it? I don’t know.” Up until that time, in most medical libraries, the director did all of the selection for all of the collections—books, journals, everything. And, of course, as medical libraries became more complicated, and they needed to take more of their time to work on budgeting, planning, and working with administration, etc., that was one of the duties that was sort of pulled off into this new specialty.

Bob decided he needed to do that, so he advertised for it, and I replied. I tried to read as much as I could about it, but at that time, most of the literature was coming from the academic libraries. There wasn’t really much in medical. So it was a learn on-the-job kind of thing. Bob was very much a hands-off type of manager. He came in and said, “Okay, this is kind of what it involves and I need you to be sure you cover all of our customers and make sure it’s high quality. Now, go off and do it.” He let me make my own mistakes, and I learned from them and became better.

This was all, of course, pre-electronic. It was all print. There was no Big Deal. Every decision could be made at a very granular level at that time. So depending on your budget, you could expand or you could contract. There was evaluation every year of what’s our budget, what can we afford, what might we have to cancel. There’s always that annual either paring of the collection and/or adding on to it. It was very granular. And you could really shape the collection into something that we felt would really be most beneficial to our clientele in the most efficient and cost-productive way possible.
Now, coming into this, I had been a clinical medical librarian in reference. I had to learn all about budgeting and learn about journal vendors and book vendors and approval plans. So there was quite a rapid onloading of knowledge at that time going on. But I was there for seven years, and I thought I became kind of good at it. But again, this was all print collection, and it was a very different world than what we were later to find out in the electronic world. I felt it was very intellectually challenging to do all of this, because it took skills of understanding the literature, being able to look at journals, evaluate them, look at books and evaluate them, and select what we felt were the best, in addition to using techniques of looking at circulation. We did user surveys, we had signs in the stacks asking about usage, trying to put all this together to hone the best collection we could.

RF: Almost an injection of data- and evidence-based decision-making, if you would.

MF: Pretty much, at the time. We tried to get as much input as possible from our users as to what was really going on. And what was interesting, too, you always had to measure what they said versus what we actually saw in checkout records, because sometimes they didn’t always match.

RF: And that first job at Nebraska began a focus on collection development that spanned thirty-four years. That’s a long commitment.


We may as well talk about going out to Cornell. In October of 1986, Bob Braude left Nebraska, and he came to what was [later] called the Weill Cornell Medical College. And he was there for I guess less than a year.

CR: Six months.

MF: Six months or so, when he called us and said, “I’ve got two positions here, and I think you might be good for them. Might you be interested?” And one of them was for—

CR: Associate director.

MF: —associate director, and the other was head of collection development. We certainly both had those skills. And I think we kind of likened it to when a football coach moves to a new team, he will often bring on his offensive and defensive coaches with him.

RF: You had a proven track record of working with him.

MF: Yes.
CR: Right. I think Bob was the one who mentioned that, who suggested that it was like his team.

MF: As an analogy. Because he knew what our skill sets were; he knew he could rely on us, that we were pretty self-sufficient. He could just give us marching orders, and we would take it and do it, and he was confident that we would be able to do a good job. So that’s how we ended up there in the summer of 1987.

CR: I do know the date of that. We started August 3rd. And interestingly enough, we actually started to work before August 3rd, because we’d moved in the middle of July, and we happened to have an apartment in the same building that Bob and Sharon Braude did—the same floor, in fact. And one day, as we were unpacking our boxes and getting settled in, we got a call, or Bob came and knocked on the door and says, “There’s a flood in the library. Can you come help?”

RF: Oh, no! Really?

MF: Yeah.

CR: I think I was even wearing shorts and a T-shirt. We ran over to the library. This was like a week before we started to work. And we were drying out books and moving things around—

MF: Pulling the books off the shelf, moving books, and drying them off.

CR: —and moving boxes off the shelf and dragging out plastic and covering things up—well ahead of our actual start date. But it was a good opportunity to meet the staff more closely. We’d met the staff before during our interviews. But we had to work with them on a regular basis that way, so that was a really interesting opportunity. And then come August 3rd, we actually started work and did all of our paperwork. That was fun. Kind of a team-building experience, as it turned out, because we developed a good rapport with the other staff at that time.

RF: I keep thinking it must have been a fascinating transition, because you came from a region that was widely scattered with limited resources, where resource sharing was really critical in terms of collection development and RML programs. And then you came to New York City, that is rich with resources and close together, a totally different sociology than the Midwest.

MF: Exactly. Nebraska had two medical schools. They were both in Omaha—University of Nebraska College of Medicine and Creighton University. That was it for the entire state. And Wyoming didn’t even really have a medical school.

CR: No, they had a two-year program. [Editor’s note: Wyoming participates in a regional campus program for several states without medical schools that is affiliated with the University of Washington.]
MF: Yes. So it was a bit different. And coming to New York—and just in Manhattan, we had Cornell, NYU, Columbia, and Mount Sinai. Then we had also Rockefeller University, which has a huge biomedical collection, and they were right next door to us. In Brooklyn, there was SUNY Downstate medical school, and in the Bronx was Albert Einstein College of Medicine. And just north of Manhattan in Westchester County, there was the New York Medical College. So there was this huge concentration of medical schools.

CR: And the New Jersey school, too.

MF: UMDNJ [Rutgers].

CR: And Stony Brook [University].

MF: And Stony Brook, too.

RF: And the Medical Library Center of New York.

CR: That Medical Library Center of New York was one of those things that happened because—it was not a medical school, but it’s a thing that happened because there were so many medical schools around.

MF: Yes. Because of all this, there were pioneers. Of course, Erich Meyerhoff, we have to mention, was the director at Cornell before Bob Braude came. He and Jacqueline Felter were really instrumental in putting together the Medical Library Center of New York, which was a cooperative where member libraries would pay annual dues to set this up. They got grants from several different places. They were able to lease a building on the Mount Sinai campus, where they could keep staff. They had a collection up there that when libraries needed to weed, particularly their older journals—they were running out of space or they had canceled this journal, they didn’t need these anymore—they would go to the Medical Library Center of New York, where it was sort of a jointly owned collection that we could use. There was a staff there that would take interlibrary loan requests. They actually had couriers. They even had a van that made daily rounds to all of the members and delivered interlibrary loans.

CR: And pickup.

MF: And pickup. And not only loan; they would actually sometimes bring the volume and then bring it back. And along with the grant money, they were able to put together a Union Catalog of Medical Periodicals of what all of the member libraries held, and that went into a microfiche system. I remember using that microfiche constantly, looking to see, okay, who has this journal and can we borrow from them or not.

CR: UCMP.
MF: UCMP.

CR: They had a copy in interlibrary loan, too.

MF: That’s right. Interlibrary loan used it extensively. And to help even more with resource sharing, they came up with a concept that was called RECBIR, which was the Regional Coordination of Biomedical Information Resources. That was the member libraries, primarily the medical schools. It was a list of all of our holdings. This RECBIR group, which was essentially the collection development librarians from the medical schools, would meet a few times a year, and we would decide, okay, this journal is really too expensive for us and we don’t use it a lot. Can anybody promise, swear, take an oath, that they will always maintain this title so that it will be right here in the city, so that we would have rapid interlibrary loan for it.

I remember Dan Richards was the chair of that, and we had Geneva Holliday, who was at Columbia, Paul Wynn was at NYU, Anne Pascarelli was at New York Academy of Medicine, which is another big resource, and other people who would attend. We would sort of make deals on this in terms of promising to maintain a subscription so that others could rely on us. This worked for a few years, but after several years, I think all of us had canceled the titles that we were comfortable with, and it got to the point where we couldn’t really cancel anything else even to rely on somebody else’s subscription, because our users would be upset, because they wanted immediate access to it. They didn’t want to have to wait a day or two for interlibrary loan to come in. So that sort of faded away. But it was a great idea while it lasted. It was a very convenient way for a concentrated group of medical school libraries to really share their resources in the most efficient way possible.

RF: And at a time when fiscal problems were rampant.

MF: Were really starting. Also, this was in the late ‘80s, early ‘90s. As inflation was going up, we were having problems particularly with Elsevier, Springer, Wiley, etc. Most prices were going up.

RF: Yes, and budgets were not.

MF: And budgets were not.

CR: It’s also pre-DOCLINE, too, so there was not DOCLINE to rely on.

RF: True. So there needed to be another mechanism.

CR: Right, we figured out a way to do it ourselves—well, they did. It was before we got there. I can’t take credit for it.

MF: And then, along the middle to late ‘90s, e-journals started appearing on the horizon, and that was a huge environmental change for all of us.
RF: Yes, electronic journals are amazing. And what a transformation that started.

MF: Exactly. That was sort of like the climate change of resources.

CR: Good climate change.

MF: Well, it was an opportunity. It was also a challenge. For Cornell, particularly. Unlike most medical schools in the country, where they’re on the same campus as the general university library, our main campus library was in Ithaca, which is 230 miles away. Now, we had relied on them heavily for years for interlibrary loan, because they had a lot of biological science programs as well.

And when e-journals came up and we were starting to switch over to e-journals, publishers said, no, no, you have to have a subscription for this e-journal here in New York, and Ithaca also has to have a subscription for that same title in Ithaca. And it was Ross Atkinson who was the deputy university librarian for Cornell University in Ithaca. He worked really hard to get publishers to finally acknowledge that, yes, we were a single university. Granted, we might have been separated in space, but we were a single university, and we shouldn’t have to pay for two electronic subscriptions for the same title.

Now, there were times when we had to maintain the spending amount that those combined duplicate subscriptions cost us. That meant we could drop the duplicate, but we had to add other titles to maintain the same spending, and that wasn’t too bad. But that really allowed us to expand our holdings, because we could then have available for our users all of the biological science journals that Cornell-Ithaca had. And likewise, Cornell-Ithaca would have access to a lot of our stuff as well that they didn’t have before.

To help coordinate all of this, Cornell University put together what they called a science team, which was all the collection development librarians in various science departments out there in Ithaca. They had the vet school, chemistry, physical sciences, math, engineering, biology. They all met in Ithaca once a month, and I attended on the phone. We would discuss licenses, our renewals, what we might be able to cancel, what titles we might be interested in purchasing jointly together and sharing a subscription price for, new databases, etc. And that was how we coordinated and made both campuses, again, more efficient in sharing of resources—again, getting as much as we could for the limited amount of money we had.

RF: And it was a time that I think caused us to navigate and negotiate and renegotiate in ways that had never been true for collection development decisions.

MF: Exactly. Before, in the print world, you got your renewal list from EBSCO or Faxon or whatever and you paid it, and that was it. You might cancel some titles if you felt it wasn’t worth it anymore. But then these packages started coming in and life got much more complicated. One of the issues that led to a big thing for Cornell was with
the Elsevier Big Deal, which was pretty good at the beginning because we were able to really have a lot of journals and not pay, essentially, the list price for all of these.

But over the years, that price went up, certainly much more quickly than our annual budgets did, and they had a very limited cancellation clause in their licensing. And so that meant, over the years, we were committed to all of these Elsevier titles, even though perhaps their quality had gone down or our academic or research needs had changed. We didn’t need some of these titles. It was difficult if not impossible to cancel those.

And yet there were these other publishers coming up, journals that were very good that we really wanted for our collection that we couldn’t afford. So, it was 2003, Cornell decided to essentially walk away from the Elsevier Big Deal. We said, “No, sorry, we’re not going to do this.” What that meant was, even though we still kept Elsevier titles, they went up to their regular price, the non-Big Deal price. But that meant we could cancel titles, and I think we canceled, between the two of us, several hundred Elsevier titles. And with that money, we were able to buy titles that we really needed for our collection.

CR: And did that action by Cornell University inspire other universities to take the same action?

MF: Yes, exactly. Other universities, I think, did do that. Now, I think it was a year or two later that we went back into the Big Deal and we renegotiated things.

RF: But that, I think, was another hallmark of that time period, because it was a complicated multiyear dance, where libraries would do things to manipulate the deal to try to make their budgets stretch further, and the publishers would change things, and the librarians would try to finagle, and it kind of went back and forth. Every year, you didn’t quite know what to expect.

MF: What was going to happen. And fortunately, with my situation, the Cornell University group—it was Ross Atkinson for a while—he passed away, and then John Saylor came into that position. They did the primary negotiations with those.

Also, we were part of the NERL, which was the NorthEast Research Libraries Consortium that was this huge consortium [formed in 1996] which had Harvard and Cornell and Boston University and Boston College and Yale and all kinds of people. So it was a huge consortium and they had a lot of power. They had their own full-time negotiator who did all that, so they did fairly well for us in terms of doing those deals.

I had to work individually with primarily the clinical packages and the clinical databases that essentially we were not sharing with Ithaca. Because a lot of those were based on FTE, and while you had a medical school with 400 students, there was no way we could expand it to fifteen, twenty thousand students at Ithaca.

And this might as well be a good time to mention Weill Cornell’s expansion into a campus in the Middle East in 2001. The Qatar Foundation for Education, Science and
Community Development signed an agreement with Cornell to start a medical school there in Doha, Qatar, the capital.

CR: Which is an actual branch of the Medical College here. That distinction gave it a different place in the hierarchy of—an importance of the teaching placement. And that’s something that was always discussed.

MF: And they had decided that because of where they were, they were a new school, these were modern times, they wanted to have as many electronic resources as possible, very little print. And since they were a branch of us, it certainly made sense for our resources to be their resources as well. So that started a whole other level—after we got finished with convincing these publishers that Weill Cornell-New York was part of Cornell-Ithaca, that WCMC-Q [Weill Cornell Medical College-Qatar] was part of WCMC-NY.

CR: And even before that were discussions that I had with the dean of the Medical College there. They have a whole separate structure in Qatar. They have a dean who reports—I’m not sure exactly what the reporting responsibility is, but certainly works closely with the dean of the Medical College here. I had a telephone conversation with him. Fortunately, that person had been here at the Medical College in New York City. He was head of student affairs. His office was right across the hall. He and Bob were very good friends. Dan Alonso was his name. So I knew Dan for years before he got the position as dean of the Medical College in Qatar. He and I had a discussion on the phone. Pat Craig, the librarian there, and I had a conversation before about Biological Abstracts, and this was something that we had already in New York City, and he wanted to get in Qatar. We felt that it should be a joint subscription. And we agreed that since we would each have full access to the contents of the database that it would be a fifty-fifty split in the subscription price. Pat and I agreed to that, and the [inaudible] there agreed to that, and we agreed to that, and they did reduce our prices. And it went into effect. Well, after Pat left, Dan Alonso, the dean of the Medical College, asked, “Why are we paying this much money for this? We don’t have as many students as you do.” And I pointed out that his library director had made this arrangement with us, and I sent him a copy of the email where we actually had it in writing. That email document has gone around a lot since then. This was back—it must have been 2002 or ‘03. It was very early. And he agreed. He said, “Yes, that makes sense.” There actually is some sense to that, because everybody has equal access. We’re talking about access, not size or usage. So it continued on. I’m not sure how it’s being done now, but for many years it was an equal split. And then when Ithaca joined in as well, and there were more shared resources with Ithaca—

MF: Well, we had been doing the electronic resource sharing with Ithaca first, and then Qatar came on board. So that was this whole other round, then, renegotiating with publishers. And it wasn’t too difficult for the big publishers like Elsevier, Springer, and Wiley-Blackwell, because they were already used to the fact that Ithaca and New York City were one university, and we convinced them that this was just a branch. In fact, it was much smaller than the New York campus. So we were able to extend those licenses
without too much trouble. The hard part for us was the things that were not part of those big publisher things—the society publishers, the smaller publishers—because they considered it more of a lost income than the big publishers did. So we had to negotiate with them individually, pretty much, in terms of how we were going to be allowed to let the Cornell-Qatar campus branch get our resources as well. I think there must have been 150 different publishers and societies that we had to approach individually. In some cases, they said, “Oh, yeah, they’re small. No problem.” Some publishers said, “We’ll let you do it, but we’re going to tack on a 20% surcharge to account for this.” And a few publishers said, “No, they’re going to have to get their own subscription,” which wasn’t too bad. That was very much a minority.

Now, all that coordinating with Qatar, which is a six- or seven-hours’ time difference—

CR: Seven or eight depending on the time of the year.

MF: —depending on the time of the year—was tricky. So Qatar had agreed to pay the salary of a position that we called the Qatar liaison librarian, who was going to be based in New York City, which makes sense because of the publishers and vendors being here. Michael Wood was hired, and he was my right-hand man for twenty, twenty-five years. He handled all of the payments, sending the bills to Qatar, working out that they still had access, troubleshooting if they lost access, calling the vendors and making sure—all of this; and in addition, making sure that our web page was working correctly, that we had all the links.

And as we had talked about earlier, this whole electronic resources just changed the game completely, from checking in individual journal issues—which, for a few years, we did both. We had the print and we had the electronic. Over time, we eventually got rid of all, I think, all of our print titles. But there was all of this heavy lifting that’s going on behind the scenes to make sure that all of these resources that we paid a lot of money for are actually available to our users so they can find them relatively easily.

In the early days, when we had a couple hundred e-journals, we just put together a spreadsheet and we were able to dump that into our HTML thing, and people went to a list and they clicked and they got into it. But once it got beyond that, once we started expanding and sharing Cornell-Ithaca’s resources and we had a couple thousand, that didn’t work anymore. So we had to buy a link resolver. We got SFX. We had to have training for that. We had to populate that, all of SFX, with a couple thousand titles, and then maintain that as titles changed, as we, perhaps, bought electronic back volumes. We had to go in and change all of that.

There’s all of this going on, and our users are very happy, because they’re just at their desks eight or nine floors above us clicking on links in their computers and getting it, not understanding, in many cases, that this is actually available because the library spent lots and lots of money. We hired lots of people to make sure this is all working, and we’re constantly maintaining it and working with these vendors whenever there is troubleshooting going on.
And the young faculty and the students took to it right away. There was lots of hand-holding for the older faculty because they weren’t quite sure how to do this. They didn’t like it. They liked to come down, sit in an easy chair, and browse through a print. So there was some griping in the early years. But they eventually saw that, yes, this was pretty good.

We worked quite heavily with the IT department in terms of setting up. Since everything was IP-constricted, you had to either be on campus to access this, or if you were at home, we used a VPN so people could go in and get to it.

RF: But as you were saying, I think the dilemma was, the more successful we were about making access easy for our users, the more they overlooked the role of the library.

MF: Their expectations became higher and they overlooked our role. They just thought that these resources were just out there and we were nice enough to make a link for them. But in many cases, they wouldn’t even use that. They’d just go into Google, type in the journal title they wanted, and try to get to it that way. If they got to it, fine. They didn’t even know that it was a library subscription. So as I said before, it was challenges and opportunities during this time.

RF: Did you ever feel like you were becoming a lawyer through all of these licensing negotiations?

MF: [laughter] I took a couple of CE courses on license negotiation and reading these things, understanding the terminology, not just accepting an initial license that they sent, but really understanding what it meant, and coming back to them saying, “This clause here is not suitable. There’s no way we’re going to sign that.”

I’ll point out, too, many of these licenses had nondisclosure agreements in which we were not able to tell anybody what we paid for it, because there were negotiations. And I was quite proud that, again, John Saylor at Cornell University was instrumental in Cornell coming out in 2011 with a policy that Cornell would no longer sign any kind of nondisclosure agreement that would not allow us to disclose price to anybody who asked. Some publishers balked at that but eventually gave in, because they realized that the money they were getting from us was much more important than trying to hide their price—somebody else might be able to say, “Well, you gave Cornell this price. Why can’t you give us this price as well?”

RF: And I think by the time that arrangement came around, there had been enough precedent with the state institutions, who all had open record laws, who said, “We can’t sign the nondisclosure, because we have to make information available”—fortunately.

MF: Exactly.
RF: Continuation of a discussion with Carolyn Reid and Mark Funk for the MLA Oral History program.

Carolyn, in 1987, you moved east to become associate director of the Samuel J. Wood Library. Quite a change from the Midwest. And I’m curious about the initial issues that you focused on after the move.

CR: Well, the rest of the name of the library was the C. V. Starr Biomedical Information Center. That was significant in my activities for the first three years that I was there, because that involved a huge building project expanding the library by another 15 to 20,000 square feet, basically doubling the size of the library.

Bob took the opportunity, now having a new associate director, to assign that to me. I got to do pretty much everything then. Bob had already worked with the dean as he was interviewing for the position and first came to New York City in 1986. He looked at the plans, he made a few suggestions, a few changes in the floor plans, and adaptations to how he saw things progressing through the years. But after that and after I got there, he turned the project over to me. I worked with the people who were responsible for the construction; I worked with the Medical College in coordinating everything; I worked with staff of the library.

The biggest and most traumatic aspect of having this new library that was going to be developed with the construction was that we had, at that time, a small space—again, just like the little closet in Omaha and the little office space in Kansas City. The space that I moved into when we first went there was on the first floor. It was an office space that was designed for maybe six or eight people and had eighteen people in it.

RF: It’s a good thing you’re slim and trim [laughter].

CR: I wish I had a photograph of that office, because it was this curious assemblage of cast-off partitions and desks and chairs from all over the Medical College trying to get all of these people into this space. There was one office, Bob had that office as the director. My associate director desk was just outside his office right by the desk of his secretary, which was right outside his office. And then it progressed through the cataloging librarian, cataloging staff, the interlibrary loan...

MF: Serials.

CR: Well, serials was downstairs, weren’t they?

MF: No. They were upstairs.

CR: Serials was upstairs too. So all of us were there. The people who were not there was the reference staff. They had a very nice little area out on the public floor, which was basically an office on the public floor. But Mark’s area was a dungeon in the
basement. It did have high ceilings. I’ll give it that. But it was dark, and it was a storage place for old filing cabinets. Was your staff four, three or four?

MF: I had two down the stairs with me and then two serials people upstairs.

CR: So his conditions, although he had more space than the rest of us, were not that great.

But what we had to do in order to progress with the building—it was designed out in three phases, and the first phase was built as a space into which most of the staff could be moved on a temporary basis while other areas were built and remodeled. And so it was a series of these moves and rebuilding and moves and rebuilding and moves and rebuilding over the next three years.

At one point, your staff was combined with the serials and cataloging... I think were all together in the room that became the media center.

MF: Yes.

CR: It was a very fun time. And I can’t tell you how many times I said, “It’s going to be bad for a little while, for a few more months it’s going to be bad, but then it’s going to be really nice once everything gets done.” We had pictures, we had illustrations, we had new office furniture. All these things were coming once this was all finished. And then the actual physical move into all of these different spaces was great fun.

The Medical Library Center [MLC] of New York, in addition to storing all of the cast-off materials from the various libraries throughout town, also had some additional space, because it was a fairly good-sized warehouse building with three or four floors of big, open space which had library stacks in it, so it was conducive to storage of materials. That’s where we shifted our... Was it the entire monograph collection or just a good portion of it? It was a lot.

MF: It was a lot. I would say three-fourths of our book collection.

CR: Major portion of the monographs—all of the books—went up to the Medical Library Center. We had an arrangement where we could retrieve things and let people use them, check them out, but they had to be retrieved from the Medical Library Center. So they served as our storage location for that.

I got very familiar with the National Library Relocations company, which I believe is still in operation here in town. They moved us everywhere. They moved all of our books up to MLC, they moved all the books back from MLC, they moved all of our materials. Whenever we had materials to move, especially, they moved us.

So that was pretty much three years of my life—was wandering around, sometimes with a hard hat, sometimes without, in the construction areas, checking things out, following
up with people, making sure that things were going according to schedules, and getting the library staff involved in where they needed to be.

RF: Tell me, because I’m not sure I understand exactly the distinction between the Samuel Wood Library and the C. V. Starr Biomedical Information Center.

CR: If you went into the library—I think the sign is still there, isn’t it? yes—there is an actual physical line, because it’s the side of a building. The Medical College and buildings A, B, C, D, and E. And between A and C, and between C and E, there were big courtyard spaces. One of those courtyards is still there, the one between A and C. The one between C and E was turned into the C. V. Starr Biomedical Information Center. That’s where the extension of the library was physically present, as well as another building, because there were some fifteen floors of additional laboratory, a classroom, and other types of space above the space where the library was. There is no separate C. V. Starr Biomedical Information Center. The Starr part is a connection that was opened up between the existing library, where the wall of that building—except for the supporting structures—was taken down. And so it looks like it’s just a big, open expanse. In order to represent the contribution by the Starr Foundation, there’s a big sign on the wall over at the edge of that division so that you can see the name is represented. The Samuel J. Wood name is on the outside of the C building. The C. V. Starr name is inside on that wall, nice, big bronze letters.

RF: So there’s a little bit of a distinction between the physical components, but operationally, it’s just all library.

CR: Yes, only library.

MF: It’s just space.

CR: There was never any special function or activities that took place in the Biomedical Information Center. It was just a naming opportunity for the foundation. And the medical school was very happy, and the library was very happy to get the money to be able to expand, because it doubled the size of the space that we had available, so it was good. Materials that were housed there were the loose journals; the current journals were all housed there. And downstairs was the media center. Most of the rest of the space was study space.

MF: We had a large meeting room with beautiful, big windows looking out on York Avenue.

CR: Fine, big, two-story arched windows looking onto the—wonderful light. The arched windows were also, if they’re still there, at the back of the building, so you could see through the whole building. I speak of it in the past tense. All of this is still there. Eye-popping. It was beautiful, an absolutely gorgeous building in tones of apricot and turquoise. Just a beautiful color palette throughout. Beautiful furniture, all cherry. Everything was cherry, because the original library was in cherry, so we kept the cherry
look. Custom-crafted desks and carrels made by the Palmieri company. It was really a fun project for me. I got very involved with it and I enjoyed that whole project very much.

As it happened, I also moved the library in Kansas City from the original location of the UMKC School of Medicine which was in some old buildings of the Kansas City General Hospital and Medical Center, KCGHMC, on Hospital Hill in Kansas City, Missouri. They purchased space on the next block over and built the Truman Medical Center, which is the hospital part, and the UMKC School of Medicine, which was the medical school part. This is all right across the street from where the UMKC School of Dentistry was located. The other big facility in that Hospital Hill area was Children’s Mercy Hospital, a big pediatric hospital for the city. And the Western Missouri [Mental Health Center] was also part of that complex. Not unlike the complex that we ended up with here in New York, where we have Weill Cornell Medical College, New York-Presbyterian Hospital, Hospital for Special Surgery, Memorial Sloan Kettering Cancer Center, and Rockefeller University all in the same four-block area.

So that was a big part of my first year as associate director here. People always ask, and you kind of alluded to it, about the big differences between living in Omaha and living in New York City. The big difference really was not the living conditions, because to me, a city is a city, and the differences are between living in the city and living in the country. But the difference was that Cornell University Medical College, now Weill Cornell Medical College, is a private institution, and I had only been in state institutions before. And that was a big difference. The funding... I don’t like to use the word ‘politics,’ but that’s the word that people understand. The way people deal with each other, the interactions with other people. That was very complicated. It was especially complicated for Cornell, or Weill Cornell. Because of our relationship with the hospital—we did not have a hospital. Cornell University does not have a hospital in New York City. We used the services of the New York Hospital, which it was at that time, which is a very old institution.

MF: Built in 193[2].

CR: No, the hospital. The hospital itself was chartered by King George III in 177[1].

RF: It’s been around a while.

CR: It’s been around a while. This is the third location for it, but it’s an old institution. It has tremendous archives with material from all of those years, which was part of the library. The archivist of the whole staff reported to the library and was in the budget, but that was a shared budget with the library and the hospital. There was some contribution of funding from the hospital in order to manage the archives.

The information resources of the Medical College library were readily available to everyone in the hospital. All of the hospital employees had access to the library, could come and go as they liked. For that, the hospital made an annual payment to the Medical
College in order not to have to have their own hospital library. And because of that, I participated in the JCAHO [Joint Commission on Accreditation of Healthcare Organizations] study visits for several years as the information resource. There’s no hospital library; that’s true. But as far as JCAHO goes, it’s fine, because the medical school is right there and they have more than most hospital libraries do.

The other complicated arrangements are with HSS. The Medical College does not have its own orthopedics department. The Hospital for Special Surgery, which is a separate private institution, serves as the orthopedics department and the orthopedic faculty for the Medical College, and somewhat for New York-Presbyterian Hospital. They have a library, though. HSS—Hospital for Special Surgery—has its own library, a small library specializing in orthopedic and rheumatologic—

MF: Physical rehabilitation and sports medicine.

CR: Yes, right. Sports medicine is very big. They do most of the major sports teams for the city—the Jets, the Giants, the Mets, the Yankees. They also have free access to the Weill Cornell library, mostly because all of their physicians are on the faculty, but also because there was a similar kind of a fee arrangement so that they could have ready access for all of the other staff as well—all of the physical therapists, occupational therapists, the other staff of the hospital—which was a payment that was made based on usage, based on a complicated formula that determined how much they paid every year.

RF: It’s always complicated, isn’t it?

MF: This gives them only physical access. They do not have—

RF: Oh, they don’t have [access to] electronic [resources]—

CR: Which, as long as I was there, until 2010, when I retired, that was a bone of contention.

MF: That was a point of contention and I’m sure it still is.

CR: But I think they actually have two librarians there now. For years they had only one librarian and a support staff position and some volunteers, and that was the extent. And they remodeled their library. They have a nice little library collection and a nice facility. But that was another one of the relationships that the Medical College had.

And three more: With Memorial Sloan Kettering, MSK, there was, again, a collegial relationship, although there was no contractual arrangement for payment or for other things. We had a lot of shared activity.

The Medical College library had the Georgetown Library Information System, LIS, as the online system for management of all of the materials. They were one of the early libraries to get that—I think in ‘85 was when they first subscribed to LIS. We had our
own minicomputers that ran… PDPs operated out of the library’s computer room. It was a very nice, complicated situation.

MSK has a legitimate library—a library that is up and running and in good shape, with three or four professional librarians and a number of other staff members. And it’s a very nice library. They have a lot of their own subscriptions, but we also shared a lot of resources, and we had a reciprocal access policy that allowed for coming and going of people from all of the other institutions.

Likewise, with Rockefeller. Rockefeller University, of course, has a large scientific library, very old because Rockefeller University has been there for a long time. They have a beautiful library facility, I think that’s still there. They’ve been doing some remodeling at Rockefeller and I’m not sure to what extent it’s still there. They also were hit by [Hurricane] Sandy and had some water damage from Sandy because of the flooding of the East River. But as far as I know, they still have the library. I see their librarian occasionally; likewise, the librarian from MSK. I’ve seen them occasionally, but not on any regular basis.

The most significant programs that we had were a Tri-Institutional library program, which was the three big libraries, with MSK, Rockefeller, and Weill Cornell. We also had a Four Corners Group that included HSS. The Tri-Institutional Program was part providing resources to the Tri-Institutional PhD programs, which were often a combination of MD-PhD degrees granted somehow jointly, depending on what the particular subject was, by the three institutions. We, as the library, supported the participants in those programs and tried to help them with all of their information needs. The Four Corners Group was more a library group that was just four librarians getting together and talking about shared activities and resources, and “Are our students bothering you too much?” and “What about your doctors?” That kind of a collegial arrangement… All of these very complicated political arrangements.

RF: Longstanding—

CR: The other participating situation is Columbia-Presbyterian campus. In 1998, the New York Hospital, which was our hospital down here on the east side, legally joined, merged, with the Presbyterian Hospital on the west side with Columbia University and became one hospital, the NewYork-Presbyterian Hospital. NewYork-Presbyterian Hospital is a single corporate entity by itself. It has affiliations with Columbia University up on the northwest corner of Manhattan and with Weill Cornell down on the southeast side. And those relationships were also very interesting and complicated, and not the easiest to understand. But like I said before, I usually have an easy time of understanding complicated relationships and complicated things [laughter] and then explaining them to other people, so I hope you kind of understand—at least you understand how complicated it all is.
RF: Yes. And then I would imagine you had user communities—at least institutions—which all had different expectations about how those arrangements were going to benefit them.

CR: Yes, exactly.

MF: And they would quite often go from place to place depending on their patient load or classes or whatever. And all of a sudden, they’d say, “Wait a minute, you guys don’t have this journal? Well, they have it at my place. Why can’t I get it here?”

RF: Oh, my gosh.

CR: And then, that, of course, is compounded by the fact that there are all of these other medical schools in the city, and the area, and those libraries—all of us in the libraries—the libraries really got along well. The libraries did all kinds of great things together. But the institutions, not so much. The libraries, though, had reciprocal access for faculty and students. Was it faculty and not students?

MF: I think a student, if a faculty person signed for them because they were on a special assignment… Depending on what they were doing, they could have access to our library if they had a special card to show.

CR: So where I started with this was, that was the difference between New York City and Omaha, because we didn’t have stuff going on in Omaha. Even throughout that whole big region, of all of those—

RF: In the region, they were all stand-alone institutions.

MF: And we did nothing with Creighton, which is just across town. There’s nothing whatsoever done with them.

RF: Very interesting. Very different.

CR: And the whole time I was associate director, and the whole time I was director, all of those various interactions and relationships were going on. As far as I know, they still are. I know that the Four Corners Group—well, I know that three of the corners still meet. Occasionally I will see the librarians together for their monthly meetings, where they have breakfast together, but I don’t see the HSS person with them, so I’m not sure… If at least the three of them are talking still, that’s good.

RF: Then, after fourteen years as the associate director, you became the acting director, and finally, in 2004, you were named full director.

CR: Yes.

RF: But that meant you were in the acting capacity for almost three years.
CR: Right. I think I have the record of acting director of a library for the longest period of time [laughter].

RF: How did you personally deal with that ongoing uncertainty, and how did you help your staff deal with that?

CR: I honestly don’t think it made any difference to any of us. I know it didn’t make any difference to me. I knew either I was going to be the director or I was going to retire, but I didn’t know which was going to come first. The most interesting thing about Bob’s retirement and me being appointed acting director was that Bob retired and left. His last day there was October 31, 2001. And on November 1, the dean called me into his office and said—he didn’t say it this way, but he essentially said, “We’ve got no one else to do this. Will you be the acting director?” It’s not the way he put it, but that was pretty much—

RF: But that was the reality of it.

CR: Yes, that’s pretty much what it was. And I said I would be pleased to be acting director. I will be glad to take on that responsibility. And I just want you to know that I’m not going to treat it as an acting position; I’m going to treat it as the library director. And, at some point in time, if somebody else comes in, well, that’s all well and good. My intentions, actually, at that time when I made that statement, was that I was going to retire in about three or four years anyway. So it didn’t make too much difference whether I kept being acting director all that time or not. Over the course of that three-year period, there were some discussions. I don’t know if the job was ever posted, I don’t think it was, as an open position. I don’t think there was ever a recruitment effort. I think I just kind of morphed into—there was a salary increase, but I just morphed.

RF: That’s good.

CR: Well, I got a salary bump also as acting. Then I got a salary increase when I became the real director. But what I did and how I did it was not really affected by the fact that I was, quote, ‘acting’ director. It never occurred to me not to treat it as a real position.

RF: And then, in 2010, you did retire after twenty-seven years of service, and a distinguished reputation on campus. Tell me about any memorable committees or working groups you contributed to within the medical center before your retirement.

CR: Well, I mentioned the JCAHO site visits. That was basically a three-year process. Likewise, with the LCME [Liaison Committee on Medical Education] site visits: a two- to three-year process in preparation and then the actual visits themselves. I enjoyed doing those because it was a chance to really showcase the library and talk about the library. And that was my absolute, all-time favorite aspect of being the director—being able to go talk about the library to various different groups, groups of health professionals, groups of other medical libraries, groups of other libraries. I remember
one very nice presentation to the Cornell Alumni Association on the medical library and what was going on. I had a number of opportunities like that to go to meetings and just talk about the library. I really liked that more than anything else, I think, about the position—representing what the library was doing and how we were doing that.

In Nebraska, I was the parliamentarian of the [University of Nebraska Medical Center] Faculty Senate, thanks to Bob. They needed a parliamentarian and he thought, well, I think Carolyn can do that. And that was a great opportunity. I enjoyed doing that. I never had that same role on the faculty senate at Weill Cornell, but I did go to the various different meetings of the faculty groups and the dean staff meeting and those various meetings. I made presentations in those groups, too, of course, about the library, about new developments in the library, especially as we got new information resources and new services going.

RF: So, for both of you, what are the most rewarding aspects of your time at Cornell?

MF: I think, for me, although it would have happened probably wherever I was, if I was in collection development. Being really involved in that entire environmental change from the all-print world to now, like 98% electronic, and guiding the library through that, working with colleagues at Cornell-Ithaca, at Cornell-Qatar, and working with my staff, in terms of adapting to quite different work procedures, learning new skills about understanding licensing agreements, negotiations.

I look back at it now and realize it was kind of exciting, although at the time it just seemed like headache after headache. As something that had been established and going on and everybody knew how to do it was suddenly thrown out the window, and you had to learn something all brand-new again and you had to come up with procedures, and how do we do this, and how do we fix mistakes when this happens, how do we keep our users informed.

Like I said, wherever I was, that probably would have happened. But being a part of Cornell, because of the relationships with Ithaca and Qatar, it was kind of a unique opportunity to really expand our resources much more quickly and much farther than other libraries might have. It was always fun for me. Because we split our electronic resources—we kind of split it three ways—between Ithaca and ourselves, we would share some things. And then between New York City and Doha, Qatar, we shared some things. And it was fifty-fifty, primarily, with Qatar.

So, it was fun every year when the AAHSL [Association of Academic Health Sciences Libraries] statistics would come out, and people would look at them and say, “Mark, you have all of these resources, but your budget is so tiny. How do you do that? Are you the world’s greatest negotiator?” They didn’t know that I was really only reporting half of what we paid for those.

RF: Yes, it wasn’t obvious.
MF: It was nice being able to offer a large number of resources to our faculty and students and researchers, particularly when a lot of our colleagues, particularly after 2008, were having so many budget problems and having to cut so much. We didn’t have that problem, and that was nice for me.

RF: And as we were saying earlier, I think one of the unfortunate aspects of that whole era of the transition from print to electronic, I think libraries were pretty successful at making that transition and making it not onerous to our users, but then we didn’t get any real credit for that because it wasn’t obvious to them what we were doing.

MF: Right. They’re up in their offices and they may not even be using our laboriously constructed web page that gives them easy access to our resources. They just go to Google, type in whatever they want, find something, click on it, and they get it, because they’re within the IP range that we had set up and they get access to it. And they don’t understand that, no, somebody had to make that selection, we had to pay that money, we had to get that into our link resolver, we had to do this, this, this, and this.

When they’re looking at their budget, well, why does the library have all of this money, because all of this stuff is on the Internet. Why do they have to have all of this money? So, yes, in some cases, we may have oversold the convenience of the Internet without emphasizing the fact that it’s not free and it doesn’t happen spontaneously.

CR: Tried to make it too easy.

MF: In many cases, we did make it too easy.

RF: Carolyn, your thoughts?

CR: Well, one of the other things that I did have on my notes to mention is that shortly after we first moved to New York… Cornell University Medical College had been big fans of Apple computers for many years. And they had a resale program that was available for students, for people, to buy. They decided, for whatever reason, to stop offering that, and the library took that over for several years so that we could still have it. That was fun to do, too—to be responsible for the selling of computers at a reduced price for the students and the faculty who wanted to purchase—

MF: And departments.

CR: And departments. That’s right. We had one person—I think it was one full-time position—that was devoted to running that. And was it Mike Barrett?

MF: Mike Barrett.

CR: That was part of our computing staff. And that was a fun thing to do. Dan Alonso was the one who got me involved in that. He said, “Yes, you should go ahead and do that.” So I did it until there was somebody else to take it back over again in the Medical
College. It was a different kind of a thing for a library to do, but it was important that somebody do it, and that was what we saw.

MF: At that same time, too, particularly as Microsoft Office was coming into play, the library voluntarily took on the role to teach people how to use Excel and Microsoft Word, because nobody else was doing it. And I think, again, that emphasizes the role that libraries, and particularly medical libraries, have over the years played in education.

CR: There was a period of time when I made a number of presentations on use of microcomputers for information management, using Office, using calendars, showing people how they could use a microcomputer to do these various different activities that really can facilitate your day-to-day life. One of my favorite presentations that I made was to the Psychoanalytic Association of New York, I think was the name of the group. But they were psychoanalysts, and I was talking about how a computer could be useful to them. I gave them a scenario five years in the future, how things might be five years in the future. I called her Grace, but it was basically like Siri, that you could call on your computer to do these things for you—to set up your calendar, to schedule activities for you, to ask questions, and so forth. It was basically a Siri kind of thing, but I called her Grace instead of Siri. Nobody was doing or talking about microcomputers and how useful they were. We were using them all over the place, and I got called on several times to talk to people about it. And I liked that, too; it was fun.

I still remember when Octavio Morales, who was our head of computer services in the library—he’s still there at the Medical College in the IT department—came to me and was talking about—this was in 1993 or ‘94—things that were coming over the Internet. They were things like Gopher and hyperlink. And I thought, you know, Octavio, we’ve really got to get involved in that, because that is really going to be big stuff. I read science fiction a lot and I had read about all this stuff before, and here it was actually coming true. We really took on Internet access and the microcomputer usage and various different apps and various different ways that you could use these resources. That was fun to do.

RF: And now, in retirement, what do you do to keep your agile brains active and occupied?

CR: I still read science fiction [laughter].

RF: That’s a good thing.

MF: Well, from [1999 to 2003], I was a member of the Literature Selection Technical Review Committee at NLM. That’s the committee that meets three times a year, and they decide what journals go into MEDLINE. I am now a member of the group that decides what journals go into PubMed Central. I get about seven journals a month and I work with a partner—there’s a whole committee of us. I’m usually assigned with either a scientist or a physician. We review these new journals in terms of their scientific quality, their editorial quality, their ethical requirements, etc., and decide whether they’re good
enough to get into PubMed Central or not. So that’s fun, because I’m reading the scientific literature, I’m evaluating—

RF: Keeping up with it all.

MF: —methodology, and looking at the statistics. So that kind of keeps my brain going. I still get to use those collection development skills of evaluating literature and see how good it is nor not, so I enjoy doing that. Other than that, I do a lot of photography here in New York City, so there’s always new software—Photoshop—to learn about, so that’s fun, too.

RF: And a lot of wonderful photo opportunities around the city.

MF: Absolutely.

CR: More than you can possibly imagine. His eye is so sharp to see things that no one else sees and make them into these great pieces of art, works of art.

As far as what I did after retirement—I had done the same kind of work on a consulting basis for several years before retirement as well for Mary Ann Liebert, the publisher, who has a number of extremely interesting, fascinating specialty publications. I did literature searching for them and various other library-related, search-related activities. We did several different kinds of analyses through the years for different journals. I had several editors that I worked with regularly on a monthly, quarterly, bimonthly—various different periods depending on their publication schedules. And that was a lot of fun, because I’ve always enjoying searching and I was able to really develop some special skills and learn some unusual things, like about zebrafish and other things that I had never known before. When Mark retired in 2014, anticipating we would have lots of free time, then, to go do other things—go to museums and stuff—I quit that job. And I forget now who has it. I ran across the other day somebody who it sounded like was doing that now.

But that and reading. I do a lot of reading. I have two or three books going all the time. I read a lot of literary fiction as well as science fiction, and there are several thrillers and mysteries that I’ve gotten involved in that I like. But I still like science fiction the best. And I’m doing more cooking. Nutrition and fitness is my general category. That’s how I spend my time.

RF: And, of course, you’ve got all the cultural riches of New York… So there are always things to go and see and do.

CR: The botanical gardens have really become one of my favorite things, too. There are three different botanical gardens that we go to on a regular basis. And it’s always fun to go to the zoo—the Bronx Zoo and also the Central Park Zoo. The Central Park Zoo is just a ten-minute walk from where we live. So that’s fun. But, yes, lots of museums. It’s
hard to keep up with all the new exhibits in the museums, in fact. We could go every day and probably still miss things.

RF: This is the continuation of an interview with Carolyn Reid and Mark Funk on October 18, 2018, in New York City. When we stopped, we were talking about your careers at Cornell. Did anything come to mind during lunch that either of you would like to add to that conversation from this morning?

CR: I don’t think so, no.

RF: Then it’s time to talk about the Medical Library Association and your involvement there. So, Carolyn, turning to your involvement in service, when and how did you become involved with professional library organizations?

CR: Well, when I was in library school in 1970-71, my master’s program, the two medical librarians I was closely involved with there, my two faculty members, were Charlie Sargent and Virginia Algermissen, as I said before. They were both longtime members of MLA, and they encouraged me as a student, even, to join MLA, which I did. I was a student member for a year before I got my first job in the fall of ’71. And I’ve been a member ever since then, since 1971. I even just renewed my membership for next year. So, through 2019 at least.

I was inspired to not only be a member but be an active member back in library school, and started looking for opportunities of things that I could do. The first one that came along was to participate in the annual meeting planning for the Kansas City meeting in 1973. I was a new librarian in Kansas City in 1971. At that time, it was called the Annual Meeting Local Arrangements Committee, AMLAC. I was a member of the AMLAC, and my special task on the AMLAC was to coordinate meals for all of the various meetings that had meals involved with them. I got to review menus and select menu items, and select the wine for the annual banquet, and all kinds of fun things. I really enjoyed that. We also prepared a restaurant guide for Kansas City, which we put together and mimeographed and might have actually printed—probably not. But it was a photocopied, about twenty-page, document that was a little booklet that we prepared to hand out to people. And it was a very manual process of copying and stapling and putting it together. That was my first participative activity, and that was fun.

As I mentioned before, I also presented at that meeting. I was an invited participant at a panel session in that meeting.

My first meeting was in 1971, when I was a student still. It was the first time I had ever been on a commercial air flight, and it was to Washington, DC, then up to New York, and then back to Columbia. And that was very exciting just by itself. That was a pretty exciting time. And being in New York City, which is a fairly big city, different than I was used to, it was fun to be in New York City. But it was especially fun to be at the meeting and be involved with all the different activities. I mentioned that I attended a lot of the educational programs and the papers and so forth and got to meet a lot of people.
And my head was just swimming with everything that was going on. It was a very memorable and fun meeting.

After that, the next meeting the next year in San Diego was also very memorable, because before that meeting, I had gone to the three-week MEDLARS training at NLM [editor’s note: Reid was in the sixth MEDLINE training class at NLM in May-June 1972], then I went to the San Diego meeting, and then I went on a two-week vacation, having been gone from work for four weeks at one time. Having been gone from work for four weeks at one time, I went on a two-week vacation after that. So that whole six-week period was quite memorable. But, of course, as any of us know who went to the San Diego meeting, the most memorable thing about that, besides the Hotel del Coronado, was the taco party by the pool, where they had, instead of meals for 500 people, they had meals for fifty. It was quite a disappointment to all of us who were there. But it was a very special location. It was a nice place to be.

RF: I think everybody talks about that snafu.

CR: Oh, boy. The worst thing that could possibly happen.

RF: The poor local arrangements people must have been mortified about that.

CR: That’s right. The next year’s meeting was in Kansas City, at the Hotel Muehlebach, and that was pretty spectacular, too, because it was the meeting that I had worked on, the meeting I had made some contributions to. It was at a nice, big, fancy hotel. Muehlebach at that time—I’m not sure what it’s like now, but at that time it was the Waldorf Astoria of Kansas City.

After that, there’s kind of a blur of just one meeting after another. 1974 was, I think, in San Antonio, which was my first time in San Antonio, and that was a very nice place to visit. I have since been back there three or four more times because I do like San Antonio a lot. Minneapolis [1976] came up shortly after that, too, and [there were several other later] MLAs in Minneapolis that I have enjoyed. I have been to every MLA meeting since 1971, except for one time in 1979. First of all, the meeting was in Hawaii, and the university did not want to pay for travel to any place outside of the continental United States.

But at the same time, during the whole month of May, the medical school was sponsoring a study tour to Canada to look at the health insurance system, which is a state-run system, and still is—I think pretty much the same kind of a system. The national health insurance program was operated out of Ottawa, the capital of the country. [Editor’s note: Insurance plans for the Canadian publicly-funded health care system are administered by provincial and territorial governments, with federal financial support.] The group was about fifteen to twenty students and several faculty members, including myself, for a group size of about thirty people total. We went to Montreal, we went to Quebec City, we went to Toronto, Ottawa, and Hamilton to visit McMaster. We visited government offices, national committee offices, medical schools, and met with lots of different people all
along the way. It was quite a good trip. So it was a very worthwhile venture to take the place of going to MLA that year.

But since then, I’ve been to every other meeting up until 2015, which was the last one, I guess was in Austin. It was after Mark retired and we didn’t go for a couple years in a row. But we’re planning to go to Chicago next year [2019], so that will be our next meeting with a little bit of a break. Do you want to talk about your early years at MLA, Mark?

MF: Sure. Like Carolyn, I became a student member when I was in library school, too, in 1975, and also joined MCMLA [Midcontinental Chapter of the Medical Library Association] at the time as a student member. In 1980, I was hired by Bob Braude at Nebraska, and he urged me to become active in MLA, which really hadn’t been part of my plan at that time. I thought, oh, okay, Bob, I’ll do that.

I applied for a committee, and I got appointed to the Publishing and Information Industries Relations Committee, which doesn’t exist anymore. This was a committee that was comprised of librarians and vendors, people from the information industry. We were kind of an ombudsman committee that worked on making relations between the two groups better. We facilitated communications between the membership and the industry, we identified problems, we recommended solutions. And it was great for me because it meshed entirely with what I was doing, and so I got great background there. Since half the committee were actually vendors, people representing industry, being able to work with them was great, too. Oddly enough, looking back at my records, this was a four-year appointment. Most committees now are three years. In my second year, Wally McLendon, who I think was at UNC, was the chair-designate. Then he got a job outside of medical libraries, so he had to resign. So, all of a sudden, I was appointed the chair of this committee. I got an early introduction to how committees work and working with board liaisons and HQ and all of that. That was my introduction to really starting off in MLA.

I think that particularly for a lot of new people, MLA can really intimidate when you go to an annual meeting. It’s kind of mysterious how things are done, who gets appointed to things, who decides, etc. And it always seemed to me, at least in those first few years, that it was always the same people you saw up on the stage. There was kind of a hierarchy back then, and you saw a lot of the same people in offices and being appointed to these big, important responsibilities.

Retrospectively, I can look back now and I think that the leaders back then were aloof and standoffish. They didn’t really mix a lot with what I would call the regular membership. And I think that has really changed a lot over the years. MLA has become much more democratic. It’s much easier to get appointed to a committee and then advance in multiple roles in MLA. And the fact that, now, we’ve had a whole bunch of MLA presidents who are not library directors, I think that has made a big difference in the approachability of officers and how much more mingling there is now between officers and the regular membership.
You were talking about your first meeting, Carolyn. My first meeting was also in library school. It was 1976; I was still in library school, graduated in June. And the meeting was in Minneapolis. A couple of friends from library school, we drove from Columbia up to Minneapolis, and I didn’t know anybody there other than these two friends. The primary reason for going was to look for a job, and I was so terrified of missing a possible interview or appointment that I spent almost all of my time in that job center room just in case, hoping somebody would come in and say, “Oh, I want to talk to this guy” and I wasn’t there or I might not have checked the message board. So I spent almost all of my time there.

I have quite a vivid memory—I do remember standing in the back of the big room, and I was watching David Bishop give his Janet Doe Lecture. I listened to that for a few minutes and then thought, okay, and went back to the job center room. Little did I know that I’d be there later.

RF: Someday.

MF: As time went by, you got to meet more people and you remembered them and they remembered you. So the annual meeting became much more of a social event to meet up with old friends and to engage in what we now call networking. Between sessions, you would just kind of talk about what was going on at work and some things that you had tried and what things others had tried. So, that proved to be a very valuable thing in addition to just the meeting itself. There were these intangibles that you got out of it.

And if it was in a city that we hadn’t been to before, we would often tack on a few days of vacation at the end of it just to kind of relax from work before we had to go back to work again.

CR: Even a city that we had been to before, like Chicago. We almost always had extra days.

RF: Are there any memorable committees or task forces that either of you were involved with?

CR: Well, I was on the NPC [National Program Committee] for the 2004 meeting. The meeting was in DC, and it was a good committee. I enjoyed working with M. J. Tooey and the other people on the committee. Somehow, I got to be the Section Council liaison for that meeting, which was a whole new thing for me. I had been on Section Council before, maybe even for an extended period, but I hadn’t really had that much to do on Section Council. To be the Section Council liaison from the NPC was a very interesting position. It was managing to get all of the sections to get their programming together and to get their reports, their information, in about their programming and schedule all their activities and their media needs and so forth. The organization, the logistics, with all of that was fun to do. I enjoyed doing that. It was a long process over about a two-year period meeting with the Section Council several times, talking to the individual section
program chairs, and managing to get everything done. But I enjoyed that. That was fun to do.

I was on the Board [of Directors] one [term], from ‘90 to ‘93. And that board had the opportunity—first of all, the disappointment of Ray Palmer’s resignation. We were sad to see him go, but then we had the opportunity to interview this person named Carla Funk—

RF: Mark’s sister.

CR: Right [laughter]. No relation, actually. I think that was the most significant thing that board did was to hire Carla, because she has just been such an amazing presence. [Editor’s note: Palmer was executive director 1982-1991; Funk served from 1992-2015.]

RF: She was a wonderful recruit.

CR: Absolutely. I think that was outstanding to have been on the board and to have hired Carla. It was probably a high point of my MLA participation.

I also spent a number of years in one capacity or another on the Continuing Education Committee. Of course, education and training have always been really significant to me, and to be on the committee was valuable for me, too. I developed several CE courses. I enjoyed doing that. I enjoyed teaching the courses—not only the ones I developed, but other courses as well. And participating in the continuing program program—I am a huge believer in the importance of continuing education. Participating in the committee that oversees the whole operation was important to me and, I think, a valuable contribution. I think I helped.

RF: Mark, any particular ones?

MF: For me, yes. It’s fun to think back on these things. I helped collect petition signatures for the creation of what was then called the Library Research Section. Now it’s just called the Research Section. I became their Section Council representative in 1983. While I was on the Section Council, I was appointed chair of the section eligibility committee, which ruled every year on whether sections had met certain requirements to still be sections. You had to have a certain number of members; you had to hold meetings; you had to fill out your annual reports, etc. And we also ruled on the eligibility of new sections, or groups that wanted to become new sections.

I think it was in 1985 that Dan Richards and John Patruno and some others had petitioned for the formation of the Collection Development Section, and I had signed the petition—oh, yeah, this should be good; we need to have this. The problem was that one of the guidelines for new sections was that no existing sections could object to the formation of this. As it turned out, the Technical Services Section had objected. They said that collection development was part of what they do. You shouldn’t be a separate section; you should just be part of us.
So our committee met, and we decided, yes, that’s true, so we came out and said that we are declining to approve this. We presented it to the council. There’s a lot of discussion. We had a secret ballot; each Section Council member voted as to whether this would be yes or no for approval. We put in our ballots, and the secretary went out to the hall to count. And she was out there, and she was out there, and we’re all looking at our watches. She finally comes in and whispers to June Fulton, who’s the Section Council chair, and says, “Come on out here.” So June leaves, and they’re out there for a few minutes. And she comes back in, and there was a tie vote. June felt that she really had to support her committee, so she went with us and voted against the Collection Development Section being admitted that year. During that next year, Technical Services and Collection Development kind of worked out their differences as to what was going on, and the next year they were approved. But I think for the next couple years, all the officers of the Collection Development Section would look at me and give me dirty looks, because I was really instrumental in them not getting approval for that first year.

RF: But I think, as you say, that was actually helpful, because it caused the two sections to differentiate themselves.

MF: Yes, they did. They had to decide what they were really about and where—

RF: Yes. So there was a year delay, but—

MF: It worked out okay.

The other thing that really comes to mind was being appointed to the chair of the 1999 National Program Committee. At that time, I had been on a few committees. I had been on Section Council. I had actually been on an NPC for the 1990 meeting. I had given a couple of papers, but I still felt I was kind of a minor player at MLA. And certainly, the NPC chairs at that time, to me, at least, had always been these big, important people. So I’m at work and I get this call from Jana Bradley, the president of MLA, and she says, “We’d like you to be chair of this 1999 NPC.” It was especially important, because it was the bookend of the centennial year; 1998 was our centennial. We were looking towards the past. And the idea was that 1999 would be looking forwards the future, so we had a whole bookend to this.

As it turned out, she had asked the board at the time for recommendations for this, and Dan Richards, a name I keep mentioning here today, suggested to her that I would be a good person for this. Now, Dan and I had worked together on a few projects in New York City, and we had presented a paper or two together. But I was totally not expecting that. And Dan died just a few months after that. I was always grateful for Dan, because being that NPC chair really propelled me onto that national stage. I gave the invitation the year before at the annual meeting. I welcomed everybody. I think I gave another piece. So, people recognized me and saw me and said, “Oh, yeah, that guy.”
I think that was what really led me to be nominated for the board [for the 2000/2003 term] and then winning that election the next year. I was always grateful for Dan for that recommendation. And it really impressed upon me the importance of giving recognition to other people, because you never know what that’s going to lead to.

RF: So, suddenly, you are now being viewed as, one of those people who must be somebody, because he’s chaired the NPC [laughter].

MF: He must be somebody!

RF: Well, we’ve mentioned the board a number of times, and you both served on the board. I think, Carolyn, yours was earlier.

CR: Yes, it was—1990 to ’93.

RF: Who else was on the board with you? And you said that was when Ray was executive director—when you began?

CR: Ray was, when I started, and then he resigned. And we recruited Carla. I don’t remember other people, but there were other applicants, and we hired Carla. And that was a good process, and it was a good hire.

RF: Yes, a stroke of genius.

CR: I mean, that was just marvelous. I’m glad that she was interested. Who was on the board with me? Mary Ryan was on the board with me… Mary and Julia Sollenberger. Jacque Doyle joined the board when Joan Zenan [and Mary and I did]. Carol Jenkins was on the board.

RF: That must have been a fun board.

CR: That was good, very good. And then through the years, a number of other people—of course, the presidents for all those years. Karen Brewer came; I don’t exactly know what the timing is. Ada Seltzer, Sandy Wood, Kathy Hoffman, Frieda Weise.

I remember [Fran Groen], particularly. I think it was her year after having been president; it was her outgoing year [as past president on the board]. She gave everyone at that first meeting, including the new people who weren’t even on the board yet, this lovely little pin from McGill—I thought that was really a sweet thing for her to do, for even the people who weren’t really even on the board yet. She had one for everyone. It was a nice little recognition.

And then, of course, Wayne Peay. He was on there for a couple of years with me. So was Dick Lyders [as president]. I remember one meeting in Washington, where we had quite an interesting discussion about whether MLA should invest part of the MLA money in tobacco stocks or not. That was a lively discussion.
RF: I’m sure it was.

CR: It was a wonderful group of people; I really enjoyed working with all of them.

RF: Were there other particular issues the board dealt with that you remember?

CR: Honestly, I don’t remember. I remember Carla; I remember the tobacco issue. Money, of course, was always something to be discussed, as Mark knows from his years of being treasurer. But as far as other particulars of that time, nothing really came to mind, as much as I’ve thought about it.

RF: What do you think were your major contributions as a board member?

CR: Well, the fact that I was actually interested and actually read the documents that were sent out, and in time. As it turns out, not everybody did that.

RF: And there were lots of documents sent out.

CR: Yes, there were. That’s one reason I’m so good on the co-op board, too, because we have piles of documents for every meeting every month.

RF: You’re always well prepared.

CR: When I’m not so well prepared, at least I’ve scanned my eyes over all of the various issues that are coming up, and so I have an idea of what is going to be discussed and I’ve given it a little bit of thought. I like to think that I have a very reasonable approach to things and I listen to both sides of an argument before I decide. I like to think, and I have been told, that I have a high degree of ethics. I think that came into play in the tobacco discussion. Those are the characteristics that I brought to the board. I was on the [Finance] Committee, so I got much more intimately involved with the budget than perhaps others might have. I did enjoy it very much. The board experience was very useful in really understanding the inner workings of MLA or of any organization.

RF: Sure. You really see how business happens.

CR: Exactly. You learn a lot more about what’s going on. And I took that back to my position at Weill Cornell, that level of understanding and comprehension and the managing of budgets and so forth. Even now, since I’ve retired, because I’m so active on my co-op board, that has helped me with that, too—understanding complex issues and having some appreciation for what goes into the budget. We have a very complex budget for our co-op. It’s a multimillion-dollar corporation and has lots of complex budget issues to be considered every year. So I think the MLA board really helped me, personally, with my future activities.

RF: And Mark, you were on the board—
MF: Yes, I was on the board from 2000 to 2003 as a regular board member.

RF: And then again—

MF: And again as the president-elect, president, and immediate past president [2006/09]. So, the first time [2000/03], the presidents I worked with were Michael Homan, Carol Jenkins, and Linda Watson. And board members elected with me the first time were Lynn Fortney, M. J. Tooey [1998/01 term]. These names just keep coming up. Roz Dudden, Ruth Holst, Linda Markwell, Jean Shipman, Norma Funkhouser, Nancy Henry, Julie McGowan, Michelynn McKnight, Jerry Perry, Neil Rambo, and Jocelyn Rankin.

And then when I was president, the president before me was Jean Shipman, and then, after me, it was Mary Ryan. Also elected to the board with me when I was elected president was Scott Plutchak. Linda Walton was also elected with me. I also served with Paula Raimondo, Laurie Thompson, Jane Blumenthal, Connie Schardt, Dixie Jones, Judy Burnham, Julia Kochi, Beverly Murphy, Gary Freiburger, Craig Haynes, Tovah Reis, Sarah Gable, and Faith Meakin. And you look at those names and you realize how many other presidents were there in that group, so that was a great group.

But I always thought it was funny that I was selected with Lynn the first time and with Scott the second time, because they’re certainly the other MLA power couple, if you will, in there.

RF: Well, that’s right. I should remind Carolyn [Lipscomb]. That’s another joint interview waiting to be done.

CR: I think that would be a great joint interview. You need to get a chance to go back to Birmingham…

MF: In terms of what happened on the board my first time, I think the big thing we did was the title change of the Bulletin of the Medical Library Association [BMLA] to the Journal of the Medical Library Association [JMLA]. That had been discussed for years and years, so our group finally decided that it was time to make that change. I think that was certainly a change for the better in terms of making the Journal sound more scientific rather than a newsletter kind of a thing.

RF: And it was also at a time when I think there was more emphasis on research content and methodology content.

MF: Exactly, right. The board had come out with priorities in the big planning to have much more emphasis on research. So, having a title called the ‘Journal of’ was much better. The other thing we were doing was that, in 2000, the Bulletin, at that time, had become an open access journal. We went to PubMed Central, so all of our journals were there free for anybody. And that had lots of implications for income for the association, because we lost all of our subscriptions, essentially. Then advertising started to go down
at that time as well, so that was another big issue that we were dealing with in terms of just moving monies around and figuring out what to cut and how to get more revenue to the association.

For the second term, when I was president [2007/08], I think part of my presidential goals was to get the annual meeting more virtual. It had been discussed for years. In fact, Carolyn even said that when she was on the board—

CR: We talked about it, but the expense involved and the complications of it were just too much for us to do it that early. It was just too much.

MF: But by the time that I had come around, the technology had really gotten a lot cheaper and we were able to get—at least some of the meeting for the Chicago meeting in [2008] was virtual, so people could be at their office and watch some of the meetings.

RF: And had some participation.

MF: And since then, it’s gone even more. Now, when you sign up for attendance at the meeting, a virtual attendee is an option, where you get access to all of the major sessions and many of the other papers as well, so we’ve really come a long way in that.

RF: What do you feel were your major contributions as a board member?

MF: I thought about this for a while. It’s actually pretty hard to make a major contribution as a regular board member. You have assignments; you liaise with committees; you may be appointed to a task force or a committee. You’re expected, of course, to attend your own chapter meeting and contribute to the MLA update at that. But other than that, as an individual board member, you’re really part of this group team, and so you’re part of the discussion and you do the voting, etc., to help things come about. But it’s very difficult to make an individual contribution as a board member.

CR: I remember one contribution you made—Amarula [laughter].

MF: That was when I was president. During my presidential year, IFLA [International Federation of Library Associations and Institutions] was in South Africa, in Durban. Carolyn and I went together, and while we were there, we really enjoyed the national drink of South Africa, which is Amarula, which is a distilled cream liqueur from the amarula fruit. People may have heard of it because that’s the fruit that when it ferments after it gets ripe and falls on the ground, a lot of elephants and chimpanzees will come up and eat it. It’s fermented and so they get drunk. But it’s quite tasty. So at one of our board meetings in Chicago, I sent Carolyn out to find a liquor store that would carry this.

CR: My mission—which I chose to accept. I had to cab it to way up in north Chicago someplace. It was the only place. I called and called and called and found a place that had it and I brought it back.
MF: She brought it back. And I had made special shot glasses for the board and the MLA headquarters staff that all had ‘Only Connect,’ which was my theme for my presidential year, on it on one side, and the MLA logo on the other. So we were all doing shots of Amarula. Now, this was after the board meeting was over.

CR: After the meeting. The meeting was adjourned.

MF: We were not drinking while on the job.

One thing I feel I did contribute was as treasurer. As treasurer, one year you are treasurer-in-waiting, and then for your last two years, you give the treasurer’s report at the annual meeting and you also write the reports for the MLA News. Up until then, all of the treasurer reports had been pretty boring, just a recitation of numbers. So I jazzed that up a bit with some nice graphics and I made it humorous. People listened, and they laughed. I also, in my second year particularly, made what I felt was a good case for a dues increase for the next year. And fortunately for the next year, the dues increase passed, which, they don’t always, so I felt that was something that I helped contribute as a board member, to make the treasurer’s report a little more entertaining. I think a lot of treasurers since then have adopted that policy—to make it more than just something that people snooze through.

RF: As you said, the second time you were on the board was as the president-elect and president. What do you think were your major contributions as president?

MF: I think the main thing was to bring social media to the association and to its workings. This was 2007, and social media was just starting to kind of hit the public eye. Time magazine had done a big thing on Web 2.0, and it was really hitting the general population. That was actually part of my platform—to help bring this to the association and have more association work done this way.

One of the first things I did was to appoint a social networking task force to work on this. They did an absolutely incredible job. The first thing they did was organize an online CE course that was based on Helene Blowers’ Learning 2.0: 23 Things. A lot of libraries across the country did this 23 Things program, where they taught their staff how to sign on to get a Facebook account, how to use and read a blog, how to start a blog, how to use an RSS reader, how to get a Flickr account—all of these social media Web 2.0 kinds of things. They put together, in just a few weeks, this 23 Things online course, and we presented it to Carla. And she said, “Well, this is great. Let’s make this a free CE course for all MLA members,” which I think was the first at that time. It was an eight-week course, and we had 350 MLA members complete the course—actually get their certificate—and a lot more people who kind of dipped in here and there over the eight-week course. I was really proud of this task force—because some of the names that are there turned out to be—I made some really good choices. It was chaired by Bart Ragon. Also on it was Melissa De Santis, Tina Kussey, Gabe Rios, Michelle Kraft, Molly Knapp, Marie Kennedy, Rikke Ogawa, Melissa Rethlefsen, Jim Shedlock, Mary Piorun, and Sue
Ben-Dor. So, we’ve got a couple of board members on there, an MLA president, past MLA board members. They did an absolutely terrific job.

I was really proud of what we did to bring that to the association. About the only disappointment for me was that I really wanted a lot of committees and task forces to open up their works and start blogs, so that people who were not on that committee or task force could see what they were doing and perhaps make comments and add to it. That has never really taken off, so I would still like to see that come, to really make MLA that much more transparent in how we do our work.

RF: As we’ve said, you were both on the board at different times, separated by a significant period of time. Did you talk to each other about issues on the board?

CR: We think we must have [laughter]. Neither of us remembers any significant conversations around decisions, but we must have. Well, [I] said about Carla something like, “You won’t believe the name of the person who has applied for this position.” But I don’t remember any substantial conversations that we had, and neither does Mark.

MF: How many years apart? The first time we were ten years apart, and it was just amazing the difference, because then, the board email was still new to the board and HQ.

CR: I’m not even sure everybody had it.

MF: Not everybody even had email at that time, so there was still a lot of either phone calls or mail to get work done. Certainly, by the time in 2000 when I was on the board the first time, everything was emailed. And by the time I was immediate past president in [2008/09], we were actually having virtual board meetings, so not everybody would have to go to Chicago for a board meeting. You could be there at your office and use a webcam and participate in meetings. It was really different eras and it changed so much.

CR: Yes. And the way the members interacted, and the board members interacted with headquarters. I remember in the ‘80s, when you needed something, you called headquarters, and Pat Carolan answered the phone. She was the voice of MLA and the doorway into whoever you needed. And then email came along and began to change how things happened.

MF: It took over most of our lives… Both at work and weekends and evenings.

RF: Carolyn, the rich career you had with multiple roles—as we were saying earlier in the day—having to jump into new things like a new medical school program and introducing medical librarianship into that, jumping to Cornell, having to deal with the building program right away. Should MLA and perhaps AAHSL consider strengthening skills in certain areas to give people a stronger background to deal with those kinds of things, or is it just learn on your own?
CR: On your own, yes. How do you teach people to learn to deal with uncertainty and flexibility? But people need to be flexible. That’s a lot [of what’s] involved. I’ve always maintained that flexibility is an important skill for people to have. I think patience is good. But how do you teach things like that? I’m not sure how much AAHSL can incorporate those characteristics that people might find useful into the educational program, to the mentoring programs. Mentorship might be the best way to do it, though, following the examples set by the leaders of the association and watching how other people do it might be the best way to manage that. I’ve always felt that just simple consideration and compassion are valuable to have, and useful. Objectivity, listening to people, listening to what they have to say, and not making your decision too quickly or abruptly, but listening to all sides of the argument.

I sometimes think I’m a little too reasonable in listening to lots of different points of view, but when I really think about it, I think, no, that’s the best way to do it: hear all sides of the argument first and then make the decision...

RF: Well, MLA members chose to honor you with the Estelle Brodman Award for Academic Medical Librarian of the Year in 1992. What does it mean to you to receive recognition like that from your peers?

CR: First, it was a great honor and I was very pleased to get it. Second of all, because I did know Estelle—I was invited to her apartment, I had a personal relationship with her—that made it even more important. I was very pleased and humbled to get that award. I don’t really think I fulfilled it very well, but I did some things. I did become a director along the way, so I guess that was kind of part of what the whole deal was.

RF: Yes, that’s exactly what it was.

CR: Thank you. I like to think I was not too big a failure. But it was quite a nice award to get. Is there a point at which we talk about the award that we got together?...

MF: The research project award?... This was a newly established MLA Research [and Demonstration] Project Award that gave small seed money to start a research project. This was a study that we were going to do on the usefulness of monographic proceedings and acquiring them for a collection. We were going to do a statistical analysis, and we needed some money to buy a statistical analysis program. I think it was a grand total of $250 that we got for this.

CR: It used to be a lot of money.

MF: Yes. I can’t remember the name of the program now—it was so long ago—that we used to analyze our numbers. It was the first year it was awarded [1986]. And what was amazing, also, to me, was that two research awards were given that year, and the other one was to Audrey [Powderly] Newcomer and Bob Pisciotta at the University of Nebraska. We kind of swept those awards that year, so that was really nice. Bob [Braude] was really pleased with us getting those.
CR: We were still in Omaha at that time. But we didn’t talk about the indexing consistency publication too much, and that continues to be surprisingly… Is it later? [Editor’s note: Funk ME, Reid CA. Indexing consistency in MEDLINE. Bull Med Libr Assoc 1983 Apr;71(2):176-83.]

RF: But we can talk about that right now, because that was a very significant study that you did.

CR: And continues to be. Mark said that he just found a new citation for a new publication that cites the article and uses part of the research methodology in the study that they did.

MF: The story behind that really illustrates the truth behind… There’s a quote that has been attributed to Isaac Asimov, but I’m sure somebody else actually said it first—that “The most exciting phrase to hear in science is not ‘Eureka!’ but ‘That’s funny.’” And that was exactly how this happened.

I had done a MEDLINE search. This was at University of Missouri-Kansas City. I was going through the printout looking at the titles, and I happened to notice that one of the journal article titles and the author was printed up twice. And I thought, “Well, that’s funny [laughter].” I went back in and I searched on the title words and the authors to pull those records up, and I took a look at them. And there they were; it was in there twice. Then I went in and I printed out the full records for both. I saw that the full records were different; they were indexed at different times, and they had different MeSH terms assigned to them. Checking a little bit more, I realized that it was not just that one article, but it was that entire issue in which that article appeared that had been indexed twice.

It was just a few days earlier, I had been working with one of my Pharm Ds, Kim Kelly, and we were doing a search together. He was over my shoulder, and we were looking for stuff that he wanted to find out. He was really frustrated, because there were some journal articles that he knew should have been showing up in the search and they weren’t. He said, “Well, how good is this indexing anyway at MEDLINE?”

I put those two things together and realized this was a real opportunity, if we could find more of these, to look at a natural experiment where the indexers didn’t know they were being watched or were being tested—this double-indexing had just happened accidentally—so we could really look to see how consistent were the indexers at different times.

The hard part was finding more of these. What I did, and I realize now how crazy it sounds—but I would sit down with the author index of Index Medicus, go to the A’s, and I would just scan down the columns. And my brain would see the patterns of something that was repeated. I wasn’t reading; I was just looking at a pattern. And I could see, oh, there it is again, and I’d write that down and then go in and I realized we’d get the whole issue.
At the end of that, we found 42 twice-indexed issues and 760 twice-indexed articles from that. We put that together and we thought, oh, this is going to be useful for searchers who would understand a bit more about how things are indexed, and for NLM, because they could see some areas that were particularly strong and some areas that were perhaps a little weak, because we looked at tree structures where indexing [consistency] was high and where [it] was low.

As Carolyn mentioned, on Google Scholar it’s been cited 268 times. And a lot of these are not even in library journals. It’s just amazing. The one I found the other day was cited in *Genome Research* that somebody was using that.

CR: People studying other types of consistency between scientific technicians, between scientists studying something. It’s a consistency study, and there are similarities in studying consistency even in different subject issues.

RF: Sure. So you stumbled across it and you set a landmark piece.

CR: By accident, yes.

RF: But it’s been a great benchmark for lots of people over time.

CR: Yes. It was, again, another matter of luck.

MF: I think, interestingly enough too, NLM really was impressed with it and really used it to do a lot of advances in some of their automated indexing: to help the indexers not only to do a faster job, because of the huge number of new journals that had been added, but to do a better job of indexing as well. And a lot of vocabulary was changed to make it more consistent.

CR: And practices were changed.

MF: And practices were changed. And they eliminated the accidental twice-indexed [issues], so that’s not going to happen again.

RF: That’s good. That was something that needed to be caught.

CR: Yes, because it’s better to have it corrected.

RF: So, clearly, very valuable research. Helpful to NLM, helpful to the field. Useful in lots of ways.

MF: I was in the right place at the right time.

CR: I knew people at NLM to contact to say, “Listen to what we found. This is what we’re going to do with it.” They have since used the same methodology in internal stuff,
I’ve heard through the NLM grapevine. They have used it and replicated the original study.

RF: Well, let me jump back, Carolyn, to a question for you, and then I have a number of questions for Mark about MLA. We’ve talked a lot about your involvement with MLA and things that you have done there, but over time, you’ve also been involved in a huge range of other professional organizations—MLA chapters and sections, the Association of Academic Health Sciences Libraries, Special Libraries Association, NLM task forces, Medical Library Center of New York, and Metropolitan New York Library Council, to name a few. Are there any of those that are near and dear to your heart or that you want to make comments about?

CR: One that I would like to talk about first is MCRMLG, which is the forerunner of the MCMCLA [Midcontinental Chapter of the Medical Library Association]. The Midcontinental Regional [Medical] Library Group used to have casual get-togethers once a year—this was back in 1971, ‘72, ‘73—at which they would literally pass around a basket or a hat or box and collect money to help support the costs of the meeting. At one of those meetings—I forget whether it was ‘72 or ‘73—it was decided that they would become an official chapter of the Medical Library Association, and that was the beginning of MCMCLA, of which I still am a member. [Editor’s note: As part of MLA’s transition from regional groups to chapters in its new group structure, MCRMLG membership approved the name change to MCMCLA in 1980.]

I have had a rare opportunity to serve as the chair of two meetings for MCMCLA, because I was the incoming chair the year that Gary Byrd decided to move to North Carolina, because he was the chair. As incoming chair, I got to chair the meeting that year. And then I was the…chair, so I got to chair the meeting the next year, too. So I chaired two consecutive meetings at MCMCLA. That was fun, and not always in a good way. It was a very busy time.

Then, after moving to New York, I joined the New York-New Jersey Chapter [of MLA], and I have been a member of the New York-New Jersey Chapter since ‘87 as well.

But the Special Libraries Association, a man named Bill Leavens—I don’t know if you ever knew Bill—

RF: Yes.

CR: He is the one who got me involved in SLA in Kansas City, when I was a CML at UMKC. He was an SLA member. He called me up one day and asked if I was an SLA member, and I said, “Well, no, I never really thought about it.” And he said, “Well, if you were to join, there’s a project I’d like you to take on here as a member of the Heart of America Chapter of SLA. I thought about it and I looked into it and I went in and joined SLA. I worked with SLA, Heart of America Chapter, moved to Omaha and I was part of the Omaha Area Chapter, I think it was, which is another chapter of SLA. It was interesting to me, because I was [president] of the Heart of America Chapter and of the
Omaha Chapter. As [president] of a regional group of SLA, you were automatically part of the [Chapter Cabinet]… So I got to go to SLA winter meetings, where the business of the Special Libraries Association was conducted. That was an interesting experience: to see how another organization operated, to compare with MLA. MLA was always closer to my heart, but SLA was very interesting to be involved with, too. I met librarians in very special libraries. That’s where my friend, Jim Tchobanoff ended up—in the Special Libraries Association—because Pillsbury is one of those very special libraries. I would get to see Jim in those meetings, too.

Then I was in the various other groups that were in big cities. In Kansas City, there were two groups: the Greater Group, which was of the health sciences libraries, which was Health Sciences Libraries of Greater Kansas City metropolitan area, and we called it Greater Group, for obvious reasons. And then there was another group called AWOL, which stood for Area Wide Organization of Librarians, which was all types of libraries. That was very interesting, because it was libraries in a physical area that had no subject interconnection. They had users, they had library issues, they had management issues that were the same, but as far as the subject material, it was all over the book. That was similar to another group that was in Omaha, and a group here in New York City—the Metropolitan [New York] Library Council [METRO], which is a group of all types of libraries. So that easily got me into the METRO group here in New York City.

I have enjoyed working and learning from the other types of libraries and librarians that I ran into in the various different groups. I was never very active in ALA [American Library Association]. I was a member for many, many years, but never very active. But I did enjoy meeting librarians from other areas.

As far as my contributions, it would mostly be to the organizational work that I did on a local level, and the conversations that I had with people, and various networking opportunities that others and I took advantage of over the years. I did enjoy it a lot.

RF: Interesting, because SLA is so akin to MLA in some ways, and it’s nice to have a foil to compare how the organizations approach things.

Well, Mark, coming back to you, while you were on Section Council, you were instrumental in developing a way for MLA headquarters to centralize dues collections for the sections—which had been a huge pain for everybody, having to send in their individual dues that had to go to the sections. It was a nightmare.

MF: Yes, it was. Up until 1989, each section had to collect their own dues, which meant that a section treasurer had to establish a bank account, had to send out a dues notice, collect the checks, send out reminder dues notices, collect those checks, deposit them, and then turn over the account to another treasurer in a year or so. It was very inefficient, a lot of extra work.

In 1983, I joined Section Council as representative for the Library Research Section. At that time, Bob Braude, who I worked for, was the chair. As we were helping all the
officers to organize it, we realized how inefficient this whole treasurer thing was. As a new section, we were sort of looking at it with new eyes. Everybody else was just used to it—oh, it’s a terrible thing, but what are you going to do? So Bob and I wrote what we called “A Modest Proposal” to the Section Council, urging that headquarters actually collect section dues for sections as part of the annual renewal. They would retain a percentage for their overhead, such that it would be revenue neutral to the association, so the association wouldn’t be losing any money over all this.

June Fulton, who was Section Council chair at the time, appointed an ad hoc committee on structure and dues collection. Now, HQ needed a single dues model for this to work, so every section had to have the same kind of model, which, of course, did not exist, because some sections ran on the calendar year, some sections had a meeting year, and some sections actually had July to June. It was all over the place. And some sections didn’t have dues; some sections were opposed to dues. Some sections didn’t want headquarters to keep any of their money, so they didn’t want to have anything to do with this centralized dues collection.

Progress slowed. In 1986—so this was like three years later—I was appointed chair of the then-retitled task force on structure and dues for Section Council. On the task force with me were Barbara Epstein and Audrey Newcomer. I worked closely with Ray Naegle at headquarters in drafting assumptions, with cost estimates. We wanted to be fair to all the sections and, at the same time, to be sure that headquarters was not going to be losing any money, because that was not going to go anywhere past the board.

We made some estimates. We estimated about 2,000 section members would join, and based on what it would cost, headquarters, in terms of monitoring this and producing member lists for the sections and mailing them out and giving them mailing stickers—because, again, most of that was still mail—that it was going to cost about $1.88 from each dues payment that headquarters would keep, and that that would vary from year to year as we kept track of how many members there were and how much it would cost headquarters to process all of this.

That was the easy part. Getting consensus from all of the sections took a bit longer. It took all, in fact, of 1986 to get that consensus. By the time of the 1987 annual meeting, the ad hoc task force had put together a timetable of how this was all going to be implemented and when, and it would fit with both sections and the headquarters, and it was going to be just beautiful. We submitted the motion. It was passed by the Section Council, forwarded to the Board of Directors, which approved it. In May, then, of ‘87, after the meeting, the task force, who consisted of Lisa Dunkel, Michelle Volesko, and me as chair, produced a list of everything the sections had to do to get ready for this. Many of them had to change their bylaws. They certainly had to change their procedures. They had to get all of this ready by October of 1988, which was the first time we sent out member renewal notices from headquarters that included the section dues in it. So you could, at one place, pay for your annual MLA dues renewal and your section renewal. That was implemented for the 1989 calendar year, so it only took six years to go from initial proposal to get things done.
RF: A lot of salesmanship and negotiating.

MF: [Laughter] It’s just not giving up, essentially, because we just kept going.

RF: Well, it was a really worthwhile idea. It needed to happen.

MF: I think it did. Nobody wanted to be treasurer of a section, because it was just so much work.

RF: And only for a year.

MF: And only for a year. And then at the same time, with centralized dues, I think MLA also took over the tax aspects of that as well. That was another thing the treasurers in the individual sections had to be concerned about, because they were earning interest on these accounts.

RF: I know. It was a real lot of work with limited dollars.

MF: Very limited dollars. We were talking about $5 and maybe fifty people. $250 a year that you’re doing all of this work for.

RF: Yes, way too much work. Well, thank you for doing that on behalf of the members, because that really was a big improvement.

And then, in 2010, MLA named you a Fellow, and in 2012, you gave a highly memorable Janet Doe Lecture. How has the designation as Fellow had an impact on you, and what does that mean to you?

MF: Well, I think, certainly, as Carolyn was talking about, peer recognition—being recognized as a Fellow is an incredible honor, and it’s a wonderful acknowledgement of the time and effort that a member has put in over the years towards the goals of the association. But as a direct impact on me, I can’t really say that there is one other than, now, I don’t have to pay annual dues, because that’s included in being a Fellow.

I had sort of expected the Fellows to be more active in giving advice, opinion, and contributing to the history of MLA, as they might have been asked by the board or other committees or task forces. But for the most part, I think at this time, Fellows are really an untapped resource that’s out there. I’m not sure how that can be changed, because most Fellows are retired, many are getting on in years, and they may not have the time or inclination to give yet more effort towards the association that they worked for, so hard for so many years. And I think, overall, it’s that basic Western problem of what to do with and how to treat our elders. Other societies honor and use their elders for advice and involvement. And here, in general society, we’re kind of put away. We’re put in nursing homes, etc. In MLA, you’re made a Fellow, which is terrific, but then—
RF: There’s no role, really.

MF: But then, what happens? We have an annual meeting at the annual meeting, in which we all say hello to each other, and so-and-so couldn’t be here, and so-and-so died. And Wayne [Peay] gives an annual plea for all of us to make some sort of monetary contribution to the association, such that the Fellows could have 100% participation in supporting the association financially. But that’s kind of the end of it. I would love to see us used more. I would be happy to participate, because as we’re finding out from this [oral] history project, Fellows know a lot about the association and what we went through and what happened and who did what and when.

RF: And why.

MF: And why. And while these projects are nice, they’re all just kind of siloed into individual histories. Being able to put this together into a unified history, perhaps with clicks or links that you could go from person to person or committee to committee and activity to activity to see what happened over the years would be really nice. But again, who has the time to do that? Who wants to do that? It’s going to cost money, probably.

RF: But it does seem like an untapped pool of resources.

MF: I wish we could do more.

RF: Well, let’s go back to the Doe Lecture that I mentioned just a minute ago. You used the Funk touch once again to inject some humor, to use some punchy graphics, some things that drew people in, simplified information so that people could really understand what you had done, which was, again, a very interesting, detailed analysis, somewhat like your indexing consistency study, if you will. And you also made the deliberate decision to differentiate the spoken lecture from the published version. So, tell me why you decided to do that and how you came up with your topic.

MF: Well, let’s go to the topic first. I think your Doe Lecture, for most Doe lecturers, the first few days after being named are pure panic, being, what can I possibly talk about that hasn’t been talked about before that’s going to be interesting and that I know anything at all about.

For me, Dixie Jones had nominated me in, I think, September of 2010, which meant that the selection of the Doe jury would happen like that November, December. It would go to the board in February, be announced in February, and one would then give the Doe Lecture the next year in 2012. So, most people may not find out about it until after the board has approved it in February, so they’ve got like fifteen months. Well, when Dixie talked to me, I said, “Yes, I’d be honored to be nominated.” I thought, okay, I’ve got a pretty good chance of getting this, I thought, if not this year, then maybe next year, so I started thinking about it ahead of time. So I had, I think, twenty months to think about it.
I was always interested in technology. Through grade school, high school, college, technology was always fascinating to me. So, I thought maybe I could do a history of technology in medical libraries over the years, and how, as technology came in, we evolved, and then the technology changed and we evolved some more, and how all those changes happened. And I thought I could do the history of these technologies being introduced into medical libraries over the years, like the typewriter, the telephone, the electric eraser [laughter], photocopiers, computers, email, etc., and how we, as medical librarians, evolved with that technology. I also thought of analyzing words that appeared in the annual meeting program over the years to see as the papers being delivered would talk about this technology and see when things were introduced and what we were talking about over time. And then I realized that it really wasn’t only technology that was changing over those years; it was other things changing as well. So, I really broadened it, and I thought, why don’t I just analyze all the words in BMLA and JMLA, and I decided to do 1961 to 2010—fifty years. Because there was a lot of change in those years as opposed to from 1898 to 1960, where I don’t think there was a lot of change.

RF: Much more static.

MF: I wanted to look at this change over the years, and by that time, I had run across the 2011 *Science* article by JB Michel on the “Quantitative Analysis of Culture Using Millions of Digitized Books.” So, I knew that this was something that could be done; it was legit.

In terms of making my Janet Doe Lecture different from the printed version, I was totally under several presentations’ influences. TED Talks at that time were big. I wanted to give a TED Talk-like presentation. I was also fascinated by Steven Jobs and how he did his annual Apple releases of new technology. He was absolutely a wizard at how he did that, and I wanted to do something like that. Also, I had been reading several books by Garr Reynolds, who had written several books on Presentation Zen, and Presentation Zen Design. In fact, I had been using his techniques for the chapter updates that I gave, for my inaugural address and my presidential address, so he was already in my style. I just needed to expand a bit more in making it... One of the books that Garr Reynolds wrote was *The Naked Presenter*, and that book really convinced me that I needed to step out from behind the lectern—not have anything between me and my audience, either physically, like a lectern, or even holding up papers and reading it. I just needed to talk to them directly. It was a combination of all of those things, and deciding to really make it an experience for the audience. I needed to have it interactive. I used a poll a couple of times, where people could vote on certain things on their phones, and I would have the results in real time on my slides up on the screen. I also had a website that Octavio Morales, our IT guru at work, had put together for me, that they could also look at and play with to see how words changed over the years. I had finished writing it, I think, in February of 2012, and I spent March, April, and half of May polishing it and committing it to memory so I could give it with no notes, plus knowing all of the slides changes that were going on.

RF: That’s a lot. Forty-five minutes of content is a lot.
MF: Yes. I would say that whole process, just copying and correcting the text for fifty years of *BMLA, JMLA*, that took 255 hours to do. Then there was the analysis. I had like 4.25 million data points that I had to look at and put together. So that and the memorization, that was the hardest thing that I think I have ever done in a project. I was really happy with the results, as it turned out.

When it came time to print it for the *JMLA*, I knew, okay, well, it has to be different. I pretty much rewrote 80% of it to go into *JMLA*. For one thing, while in my presentation, I had ninety-six different charts that I presented, I could have a maximum of six for *JMLA*. But I was able to put in, as electronic supplements, all ninety-six charts, the entire corrected corpus of the fifty years of *BMLA, JMLA*, and the spreadsheet of all of the words that I analyzed. So, the data is out there now for anybody else who wants to use it and to do something else with it.

RF: And I’m sure at some point somebody will.

MF: It would be nice. So far, I think the next year, the year after me, Joanne Marshall used some of it in her Janet Doe Lecture, and it has been cited a few times just in terms of the methodology. But I don’t think anybody else has actually used the data yet, as far as I know.

RF: Well, as you say, being asked to give the Doe Lecture is such an honor, but for most of us, for library practitioners, it’s also a little intimidating because we’re not used to doing that kind of formal lecture presentation kind of thing. But you have done so many presentations of different kinds. Was that a relatively easy thing for you to take on? And you had already been thinking about presentation style and delivery and all of that.

MF: Right. I think for me, the fact as treasurer, I gave two treasurer’s reports at the big business meeting. I gave an inaugural presidential address, the regular presidential address. I gave a couple of papers to small groups. As NPC chair, I had done the invitation. I had introduced the opening of the 1999 meeting. So, while public speaking is, for many people, up there with the fear of death, it wasn’t that big a deal for me. I was used to it. It was just the amount of work that went into it to prepare it, and, in my mind, try to perfect it as much as possible. So that was a big commitment, but I didn’t have any fear that I think a lot of people, even Janet Doe lecturers, have, if they have not given a lot of presentations before. Were you scared, frightened [laughter]?

RF: Oh, absolutely, because I had never done anything that long to that many people. One of the funny things that helped me was, I remember having a chapter meeting in Birmingham one year, and Kent Mayfield came and did a presentation as part of that. And I was sitting at the speaker’s table row, and Kent was next to me at the lectern doing this beautiful, smooth, eloquent, articulate presentation as only Kent could do. And I’m listening to this beautifully delivered presentation, and nobody else can see, but I’m beside him and his hands were just shaking. And I thought, oh, my god, if Kent can do a
beautiful delivery like that despite whatever anxiety he’s feeling, I can try to do the same thing. But, yes, if you don’t do a lot of public presentations, it’s hard.

MF: It’s intimating.

RF: It is. Yes, it’s part of the burden. I guess I just wanted to ask you, as we wrap up this section, along with your deep involvement in MLA, you’ve contributed to regional chapters, served on fourteen publisher advisory bodies, which must be a record of some kind. What did you gain from these? Are there any sweeping conclusions that you have about publishers and publishing?

MF: Well, certainly, serving on all of those publisher advisory boards was very satisfying. In many cases, particularly the larger general scientific publishers, the other people on the advisory boards were not medical librarians. They may have been from academics or other kinds of special libraries or pharmaceutical libraries. So, it was incredible to hear them talk about their particular situations and problems and how they were sometimes different from what medical librarians had and were sometimes similar. And to hear how they approached these things, and sometimes how they worked towards solving them—and I don’t think anybody ever solves their problems—but worked towards solving them, and how they worked on their budgeting to try to make the money that they did have work as efficiently as possible, was very useful to me to take back to my own work space.

Getting to understand how publishers make their decisions was both educational and, many times, I would have to say, it was disturbing, because I realized that they were sometimes making decisions because they had no clue of what our environment was like and what kind of control that we had over our budget that was given to us each year, and us trying to get them to understand that we’re, in most cases, just at the mercy of the dean. Whatever kind of financial situation the medical school happens to be in for that year, or for the next projected year, is 99% of what drives the actual amount of money that we get. It’s not us asking for more money that works. It’s not us, particularly in terms of Big Deals, being able to cancel other journals to get their journals. A lot of those options have been taken away from us. So, as I said, trying to get them to understand what was going on was a good part of the value of serving on all of those.

RF: I agree with you. I think, in many cases, they did need to be educated more about what our buying environment was like and what latitude it gave us and what restrictions it put on us as well.

[WAV File #3]

This is the final segment of the conversation with Carolyn Reid and Mark Funk on October 18th in New York City. Carolyn, during your years in the RML program and throughout your career, you’ve been involved with NLM programs and staff in very different capacities. Would you please talk about your perspective on NLM’s role in our profession?
CR: I have always been very, very impressed with NLM and the way that they do the best they can to help medical libraries. There were a few difficult years with Lindberg when he first came on board [as director] and the acceptance of him by hospital librarians, but he completely turned them around. And the importance of NLM to the whole medical library community is tremendous.

One thing they have done through the years that is a bit cumbersome, though, is their effort always to make every possible opportunity or combination of things—I’m thinking specifically about online searching, for example—they want searchers to be able to search every possible way for things, which make it much more complicated sometimes for the searchers to understand the system and use it. And they do that in other aspects as well—the cataloging, the serials, the DECLINE, all the various programs that they have. They try to satisfy all variety of needs.

I’ve enjoyed working over the years with all of the people that I’ve worked with at NLM, so, quite an interesting bunch of people there and very well qualified for their positions. It was a great experience for me. I was so glad that I got to meet so many of those people early on in 1971. Before I even got my degree, I got to meet and get to know several of those people, and through the years, then, have worked with them on quite a regular basis.

I have always been pleased—I’ll just say that—with NLM’s support for libraries, and library support back to NLM.

RF: And NLM has clearly provided such a rich array of tools and services that have supported the advancement of medical libraries and the quality and effectiveness of the services that we’re able to offer to our users. At the same time, NLM has been described as a bureaucracy that is sometimes driven by the peculiar politics of Washington. How do you assess the boons and the drawbacks that come?

CR: Well, the budgetary constraints through the years have gone up and down, and that has been the most difficult problem. The tight years, the lean years, when Congress just doesn’t quite understand the importance of the libraries have been a little difficult to deal with. But the people at NLM have always managed to get through pretty well. In recent years, I have not really been following it that closely, so I don’t know over the last years since I retired how things have gone up and down. But I do remember definitely writing letters to encourage Congress to provide more support. I personally did not make any trips to Washington to lobby for more funding, but I know that there were lots of efforts by MLA members to do that, which I think showed how MLA supports NLM. And then, vice versa, NLM has always done as much as they can for the libraries.

RF: On the publishing side, you’ve combined personal authorship with roles as editor and reviewer. How did that kind of work add to your career?
CR: …Most of my professional work in that area was in the form of presentations and in training courses, both of which I felt were very useful to people. I think that the training courses, the online training, and the other educational courses that I did were probably one of my biggest contributions to the association and to the membership and to librarianship in general. I did presentations not only for medical librarians, but also for public librarians and for health professionals and for a number of different audiences to help them understand medical libraries, to help them understand information resources, to help them understand how microcomputers could be useful to them. I had a variety of different presentations and courses that I worked on.

And I think that was something that somehow I was good at it. I never really studied that very much. Despite my speech and theater background, I really didn’t study public speaking. But I came to be able to speak in public easily enough that I could put together course material and presentations and deliver them effectively. It was good for me, and I’d like to think that it was good for the audience as well.

RF: Mark, you’re widely recognized for your presentations, always with a touch of humor somewhere in there, if not several. But you have also published, edited, and reviewed, since shortly after receiving your library degree, as you mentioned earlier, you’d published very early on in your career.

MF: Right. I was fortunate enough to get my Library Science 451 research paper published right after graduation, and that was really a thrill. My advisor, Bert Boyce, gave me the idea. He let me devise the methodology, and I did all of it and wrote it, because that was what we were supposed to do—your own research paper. He took it and did minor, minor revisions on it, and we submitted it and got it published. So that was really nice, coming right out of library school to have that published. And over the years, I had a few more articles published, two of them with Carolyn, one of which we got published because of the MLA research project award. And certainly, our indexing consistency paper has been recognized by a lot of people. These publications, along with a lot of my association work, let me get tenure. I was awarded tenure at the University of Nebraska three months before I left to come to Weill Cornell. But at least that’s something that you can put on your CV—that you were awarded tenure.

CR: Unfortunately, at Weill Cornell, the librarians were not on the tenure track, so the best that we could do was to become a full librarian, which is the same as a full professor.

RF: Well, before we wind up the interview, is there anything else that either of you would like to talk about that we haven’t covered, or have I exhausted you?

MF: I think there’s one question that might have gotten dropped that we talked about—the association headquarters. And Carolyn and I were talking last night in terms of, if you had to name the three most influential people from headquarters, I think we both agreed—

CR: We had the same three people.
MF: The same three. Slightly different order. We had Carla at the top, because we both worked extensively with Carla over the years—on the board, as president, as NPC chair. Just lots of other different things.

CR: And my second after Carla was Mary Langman, with whom I worked very closely on several different types of projects and areas.

MF: My second was Ray Naegele, because I had worked so closely with him. Being treasurer of MLA, we worked very closely for those two years, and then, of course, on the whole section dues kinds of things. Even years later, with NPC chairs, he’s quite heavily involved with the annual meeting planning and details and things like that. He is always there.

CR: Ray was my third and Mary was the second. So the same three people, just a slightly different order.

MF: All of them, I think, just represent the kind of person who just goes way beyond what one might expect from somebody in that type of position. I was always grateful to be able to have them there as a resource and to work with them.

RF: They three are quite amazing people in terms of how they approach member service, and interacting with the members, and wanting to meet member priorities. It’s really quite commendable. Well, good, thank you for bringing that up, because I think that that’s a really nice addition to the conversation.

Moving to some very broad final questions, who are the people that you think most influenced your life and career? Carolyn?

CR: Well, for me, definitely Gertrude Lamb and definitely Bob Braude. Those are the two absolutely most significant as far as my approach, my attitude, my career. Especially, Bob continues to be—and Trudy, bless her heart, is gone now. I’m so happy to have known and worked with both of them over the years, and especially to start with Trudy. That was very special, because the three CMLs and she were quite a group. We worked together very closely.

RF: And to see someone envision a new role for the field and be able to go through the complicated, difficult process of creating an opportunity and making it work.

CR: Yes.

RF: And Mark, for you?

MF: Certainly for me, Bob Braude. Carolyn and I both worked for him for [about] twenty years, minus nine months [after he left Omaha and before they rejoined him in New York].
CR: Was it only twenty years?

MF: It was from 1980 to 2001. Because certainly, even though I had been working for four years after graduation when he hired me, I was still pretty fresh, and he just gave me so many opportunities and chances to make mistakes and to learn and to do new things. And to constantly push me outside of my comfort zone such that I really felt that I grew under him. Without that, I don’t think I’d be sitting here talking to you.

And I do want to have a special shout-out to Beverly Allen, who I think I mentioned earlier, who in 1970 saw this little skinny guy and took a chance on him and hired him to work in the shelves. And I wouldn’t be here today without her.

RF: Very nice. Are there people who each of you think you have had a significant influence on?

CR: Well, kind of along the lines of the Estelle Brodman Award, one of the things that was most humbling and the biggest honor to me was when Helen-Ann Brown took the time at the annual meeting—I believe it was in 2010—to include me as part of the keynote presentation. And I’m sorry, I’ve forgotten the name of the speaker who gave the presentation. She called me up on the stage and read that letter to me. And I had no idea, really. I mean, I knew that we had been friends and had worked together for a long time, but I had no idea how much she felt about the relationship. So I guess I influenced her a little bit.

RF: Sounds like it.

CR: And another is Diana Delgado, who is at the Weill Cornell Medical Library now as—

MF: Associate director for information services.

CR: Yes. She was my first hire after Bob left, and I was very pleased to lure her away from MSK after she got her library degree, and that she came on board at Weill Cornell and that she continues to be there. She’s really becoming a prominent force in both the local chapter and in MLA. She has been very active in both organizations. I’d like to think I had some little part to play in encouraging her along those lines.

RF: And Mark?

MF: I had a really hard time with this. Over the years, I’ve only hired one professional librarian, Michael Wood, who has been my right-hand man for twenty-some years. I’d like to think that I influenced him. I know he has always told me that I was really important in his professional career.
I would like to think that serving as MLA president, and the types of presentations I gave, at least inspired some people to think that, yes, they could give presentations, they could take on new projects, they could do things. But those are kind of intangible influences for me.

CR: I had that same note about the people who attended my various training classes and educational programs that I’ve done through the years. I have heard back from some of them that that was very important to them. And that means a lot to me, too. If I helped to make people better librarians, to provide better services, that would mean a lot to me.

RF: I think it’s a hard question, because, I think, oftentimes we may have an impact on someone that we don’t realize. We don’t know that.

How would each of you like to be remembered by the library community as far as your important contributions or any other thing?

CR: That’s really hard to answer. The things that I’ve done that I’m most proud of are online services, online training, the various presentations I’ve done, the various people I’ve known and worked with through the years. It’s hard for me to say anything in particular that I’d like to be remembered for. People will remember me for whatever they do, or they won’t remember me. That’s not the reason I ever did anything. I did things because they were the right things to do, because they were valuable things to do, but not to be remembered. So it’s hard to answer that.

RF: Sure. Mark?

MF: I’d like to be remembered as that funny guy who got things done [laughter]. Specific contributions that I think I’m particularly proud of are our indexing consistency paper, my introduction of social media to the Medical Library Association, and the concept that presentations can be funny and entertaining as well as informational. They don’t necessarily have to be dull.

RF: Where do you see librarianship, especially medical librarianship, going? We’ve talked a lot today about the change that you documented in the Doe lecture, Mark, and what we experienced in our careers as we went through the migration from print to digital or all kinds of other things. Do you look ahead at all, thinking about what might come?

MF: This is real crystal ball stuff, because who knows? I do think that successful practice of medical librarianship in the future will be much more involved in working with scientists and clinicians within their environment, and that the people doing this will have skill sets that most of us current medical librarians don’t even have now. So I think it’s going to need a lot of changes. And if one could come back and look at medical librarianship in twenty or thirty years, it may be almost unrecognizable to many of us.
CR: As it might be today for somebody who’s looking back from twenty or thirty years ago. The things we do today are so different, the ways that we accomplish things are so different from before. That same kind of change can come in the future.

RF: Is there any advice that you would give to people who are in the field, either new graduates or people already established in their careers?

CR: Be curious. That would be one of the most important things that I can think of. Just try to find out—what was the Asimov quote?

MF: “That’s funny.”

CR: That’s funny. How did that happen? And keep learning. That’s really valuable, to just keep learning and keep exploring, and be persistent, be patient, be flexible. That’s it.

RF: Mark?

MF: Say yes when asked, within reason. Take regular trips outside your comfort zone. Extend yourself. Take risks.

RF: And that last word is one of the ones I would utter, too. And I think, actually, the profession is doing better with that. I think when we came into the field, risk-taking was not a factor.

CR: Not a part of being a librarian.

RF: No.

MF: You follow the rules.

CR: Librarianship was a safe profession, too.

RF: Yes, it had a structure and you stayed with the structure.

MF: You don’t stick out.

RF: And now, I don’t think there’s any choice. You have to get out there in the messy uncertainty and take some risks.

CR: I still remember my first days of being a CML, when I would walk up to go into the room where the conferences were being held—the medical conferences, the rounds, presentations, and so forth. And I would say to myself before I went in, I’m supposed to be here [laughter].

RF: And you proved that you did belong.
CR: Yes, that was the idea.

RF: Well, thank you. This has been a really enjoyable day for me talking with both of you, learning more about your careers. This concludes the interview with Carolyn Anne Reid and Mark E. Funk on October 18, 2018. Thank you again for sharing your insights. One of the things I miss most in retirement is the ongoing interaction with professional friends and colleagues, so it’s a pleasure for me to come back and be able to talk with you both and have some meals together and just chat.

MF: You’re welcome. I think we enjoyed it too.

CR: Yes, and thank you, and thank MLA for the honor, as well as for the great opportunity.

RF: And I think it is an honor. I think the people who get invited to do oral histories are viewed as leaders in the profession who have valuable things to say. So, it’s a great program, and I’m really happy to welcome you into it.
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Mark E. Funk

Education

M.A. Library Science: University of Missouri — Columbia, 1976
B.S. Education: University of Missouri — Columbia, 1973
B.A. Zoology: University of Missouri — Columbia, 1971

Professional experience

Associate Director, Resources Management: Samuel J. Wood Library, Weill Cornell Medical College. March 2010-August 2014 [retired]
Head, Collection Development Department: Samuel J. Wood Library, Weill Cornell Medical College. August 1987-March 2010
Head, Collection Development Department: McGoogan Library of Medicine, University of Nebraska Medical Center. May 1980-July 1987
Clinical Medical Librarian: Health Sciences Library, University of Missouri — Kansas City School of Medicine. February 1977-May 1980

Professional memberships

Midcontinental Chapter of the Medical Library Association, 1976-
New York/New Jersey Chapter of the Medical Library Association, 1987-
Academy of Health Information Professionals; Distinguished Member 1988-

Additional professional activities

Medical Library Association
Publishing and Information Industries Relations Committee, 1982-86; Chair 1984/85
Library Research Section, 1982-2017; Vice-Chair 1982/83; Chair 1992/93
Section Council; Representative 1983-85; Alternate 1985-88
Collection Development Section, 1986-2017; Chair 2004/05
Program and Convention Committee, 1987-89
National Program Committee, 1988-90
Research Grant Jury, Chair 1989/90
Louise Darling Jury, 1991-92
Task Force for an MLA Research Program, 1992-94
National Program Committee, Chair 1995-99
Centennial Coordinating Committee, 1996-99
Board of Directors, 2000-03
Treasurer, 2001-03
Task Force on Fixed Meeting Schedule, 2001/02
Task Force on Scholarly Publishing, 2004-07
President-elect, 2006/07
President, 2007/08
Immediate Past-President, 2008/09
Strategic Priorities Task Force, 2015/16
JMLA Editorial Board, Senior Editor, 2016/17
JMLA Editor Search Committee, Co-chair, 2016/17

Other

Advisory Committee, JAMA Journal Reviews, 1990-96
Library Board of Advisors, Doody’s Health Science Book Reviews, 1993-
MLA Representative to Documentation Abstracts, Inc., 1994-97; Chair 1997
NIH Literature Selection Technical Review Committee, 1999-03
Library Advisory Board, Springer-Verlag New York, Inc. 2004-05
Library Advisory Group, Thieme Medical Publishers, 2005-14
Advisory Board, McGraw-Hill Digital, 2005-09
Library Committee, Nature Publishing Group, 2006-07
PLoS One Advisory Board, 2006-14
Wiley-Blackwell Library Advisory Board, 2007-09
BMJ Group North American Advisory Board, 2007-09
JoVE Library Advisory Board, 2012-2017
NIH PubMed Central Journal Reviewer, 2014-

Honors and Awards

Beta Phi Mu, 1976-
Medical Library Association Research and Demonstration Project Award, 1986
Medical Library Association Fellow, 2010
Who’s Who in America, 2010-
Who’s Who in the East, 2010-
Who’s Who in Medicine and Healthcare, 2011-
Who’s Who in Science and Engineering, 2011-
Who’s Who in the World, 2011
Medical Library Association Janet Doe Lectureship, 2012

Bibliography

*Articles in professional peer-reviewed journals*


Funk ME: An SDILINE profile oriented to patient care. Bull Med Libr Assoc
Funk ME, Reid CA: Indexing consistency in MEDLINE. Bull Med Libr Assoc 1983 Apr;71(2): 176-83


Funk ME, Schader B. Simultaneous users vs. FTE pricing model - stairway to heaven or jail house blues? Against the Grain 2003 Sept; 15(4): 54, 56, 58


Book chapters and reviews


Alonso DR, Funk ME: [Journal review of] Cardiovascular Pathology. JAMA 1993 Dec 1;270(21): 2625


Fein OT, Funk ME: [Journal review of] Evidence-Based Medicine. JAMA 1997 Nov 5;278(17):1460-1


Invited papers and presentations


Invited speaker, Medical Library Group of Southern California and Arizona. Los Angeles, CA, October 2, 2003. Menagerie à Trois, or Parasites Lost:


Invited speaker, Northern California and Nevada Medical Libraries Group. Las Vegas, NV, February 7, 2008. Are We Toast Yet?


CAROLYN ANNE REID, M.A., AHIP
MEDICAL LIBRARIAN

I. PERSONAL INFORMATION

Residence: New York, New York

II. EDUCATIONAL BACKGROUND

Master of Arts - 1971, University of Missouri - Columbia
   (Library Science and Computer Science).
Bachelor of Arts - 1970, University of Missouri - Columbia
   (Library Science and Speech and Theatre).

III. HONORS AND AWARDS

Beta Phi Mu Honorary Society, Psi Chapter, Lifetime Member since 1971.
Vail Visiting Professor, Ottawa Regional Cancer Centre, Ottawa, Ontario, Canada, November 1-2, 1985.
Medical Library Association Estelle Brodman Award for Academic Medical Librarian of the Year, 1992.

IV. CREDENTIALS


V. PROFESSIONAL EXPERIENCE

2004-2010, The Frances and John L. Loeb Librarian of Medicine and Director at the rank of Librarian, The Samuel J. Wood Library and the C.V. Starr Biomedical Information Center, Weill Cornell Medical College of Cornell University, New York, New York.
2001-2004, Acting Director at the rank of Librarian, The Samuel J. Wood Library and the C.V. Starr Biomedical Information Center, The Joan and Sanford I. Weill Medical College and Graduate School of Medical Sciences of Cornell University, New York, New York.
1993-2001, Associate Director at the rank of Librarian, The Samuel J. Wood Library and the C.V. Starr Biomedical Information Center, Cornell University Medical College, New York, New York.
1989-2001, Adjunct Associate Professor, Graduate School of Information and Library Science, Pratt Institute, Brooklyn, New York.
1987-1993, Associate Director at the rank of Associate Librarian, The Samuel J. Wood Library and the C.V. Starr Biomedical Information Center, Cornell University Medical College, New York, New York.
1986-1987, Interim Director and Associate Professor, Midcontinental Regional Medical Library Program, University of Nebraska Medical Center, Omaha, Nebraska.
1983-1986, Associate Director and Assistant Professor, Midcontinental Regional Medical Library Program, University of Nebraska Medical Center, Omaha, Nebraska.
1980-1983, Online Services Coordinator and Assistant Professor, Midcontinental Regional Medical Library Program, University of Nebraska Medical Center, Omaha, Nebraska.
1975-1980, Senior Clinical Medical Librarian and Head of Online Services, (Librarian II and Instructor in Medicine), University of Missouri - Kansas City Medical Library, Kansas City, Missouri.
1971-1975, Clinical Medical Librarian (Librarian I), University of Missouri - Kansas City Medical Library, Kansas City, Missouri.

VI. PROFESSIONAL ASSOCIATION MEMBERSHIPS AND SERVICE


American Medical Informatics Association, member 1996-2008. Member of the following working groups: Consumer Health Informatics; Education; Ethical, Legal, and Social Issues; Formal (Bio)Medical Knowledge Representation; Knowledge Discovery & Data Mining; and Knowledge in Motion.


University of Nebraska Medical Center Faculty Service. Library Faculty: Vice-Chair, 1981-1982; Chair, Peer Review Committee, 1981-1982, 1984-1985; Chair and member of several search committees; Chair, Academic Information Management Systems (AIMS) Committee, 1982-1983. UNMC Faculty Senate: Parliamentarian, 1982-87; Ad Hoc Committee to Review the By-Laws, ex-officio member, 1984-1985, member, 1986-1987.

Other professional memberships:
ACRL New York Chapter, member, 1987-2010.
American Library Association, member, 1985-2010.
Library Administration and Management Association, member, 1986-2010.
Friends of the National Library of Medicine, member, 1986-2010.


Membership on Regional and National Committees:
Advisory Council, School of Library and Informational Sciences University of Missouri. Special and Health Sciences Representative, 1979-1987; Liaison to Special Libraries Association, 1984-1987; Secretary, 1985-1986.
VII. PRESENTATIONS, PUBLICATIONS, ETC.

A. Presentations:

1973 - Medical Library Association Annual Meeting, Kansas City, Missouri. Invited presentation to general session on library school preparation for position as a Clinical Medical Librarian.


1976 - Medical Library Association Annual Meeting, Minneapolis, Minnesota. Poster and panel presentation on Clinical Medical Librarianship.


1981 - Medical Library Association Annual Meeting, Montreal, Quebec, Canada. Contributed paper (with M. Funk): “Indexing Consistency in MEDLINE.”

1982 - Nebraska Library Association, Special and Institutional Section, Spring Meeting, Lincoln, Nebraska. Invited presentation: “Microcomputer Applications in Libraries.”

1983 - Info-Fair: Personal Access to Health-Related Databases, University of Utah, Salt Lake City, Utah. Invited presentation on use of online searching systems; panel member for discussion of personal microcomputer applications.

1983 - Midcontinental Chapter of the Medical Library Association Annual Meeting, Park City, Utah. MCMLA-MCRMLP Liaison Committee panel presentation, “New Directions for the Midcontinental Regional Medical Library Program.”


1984 - Lincoln Pediatricians Group, Lincoln, Nebraska. Invited presentation: “Use of a Microcomputer for Personal Access to Online Databases.”


1989 - Apple Computers, Inc. program for health professionals, Mount Sinai Medical Center, New York, New York. Invited presentation and demonstration of daily office and time management applications on the Macintosh computer.


2001 – MLA Triple-Chapter Meeting, New Orleans, LA. Contributed paper on the integration of evidence-based medicine into the curriculum of the Weill Cornell Medical College and collaboration between the Library and the Public Health Department in the course development and instruction.


B. Publications (chronological order):

Biomedical Librarians in [the] Patient Care Setting, May 1, 1972 - April 30, 1975. Principal Investigator, Richardson K. Noback; Project Director, Virginia L. Algermissen. Kansas City, MO, 1975. “This final report was written by the following: Naomi Adelman, Russell Murphy, Carolyn Reid, James Tchobanoff.”

Ingelfinger, Franz J. The Anatomy of the New England Journal of Medicine. (An interview with the editor ... by Carolyn Anne Reid.) Video tape, 20:00. University of Missouri - Kansas City School of Medicine, 1975.

Developing Clinical Information Needs and System, September 1, 1975 - August 31, 1976. Principal Investigator, Richardson K. Noback; Project Director, Gary D. Byrd. Kansas City, MO, 1977. “A major portion of the prose and statistical computations for this report were drafted by our Senior Clinical Medical Librarian, Carolyn Anne Reid.”

Reid, Carolyn Anne. The Clinical Medical Librarian Story. Video tape, 9:00. University of Missouri - Kansas City School of Medicine, 1977.


--------. “Online Hotline.” Midcontinental Chapter of the Medical Library Association Express. [Irregular column, 1979-1984.]

--------. Basic Online Seminar Workbook. MCRMLP, Omaha, NE, 1980.

Online Searching Workshop Workbook, written and compiled by Carolyn Anne Reid. MCRMLP, Omaha, NE, 1981. 76 pages.

Online Training: An Advanced Course Workbook, written and compiled by Carolyn Anne Reid and Karen T. Hackleman. MCRMLP, Omaha, NE, 1981. 174 pages.

Problem Search Clinic Workbook, written and compiled by Carolyn Anne Reid. MCRMLP, Omaha, NE, 1981. 110 pages.


Toxicology Databases Workshop Workbook, written and compiled by Carolyn Anne Reid. MCRMLP, Omaha, NE, 1981. Revised, 1982.

Toxicology Information Seminar Workbook. MCRMLP, Omaha, NE, 1982. 23 pages.


Online Services Workshop - Toxicology Workbook, written and compiled by Carolyn Anne Reid and Paula L. Galbraith. (Revision of Toxicology Databases Workshop Workbook.) South Central Regional Medical Library Program (TALON), Dallas, TX, 1983. 175 pages.


--------. Toxicology Information Seminar Workbook. MCRMLP, Omaha, NE, 1982. 23 pages.


Online Services Workshop - Toxicology Workbook, written and compiled by Carolyn Anne Reid and Paula L. Galbraith. (Revision of Toxicology Databases Workshop Workbook.) South Central Regional Medical Library Program (TALON), Dallas, TX, 1983. 175 pages.


McKinin, Emma Jean and Reid, Carolyn Anne. CE 005: MeSH for Searchers Syllabus. Medical Library Association, Chicago, IL, 1992. 28 pages plus over 70 pages of “Student Resources and Supplementary Materials.”


VIII. PROFESSIONAL DEVELOPMENT AND CONTINUING EDUCATION

A. Continuing Education Courses Taken

Numerous Medical Library Association and Special Libraries Association Continuing Education Courses; formal training sessions in online searching systems (NLM, TOXLINE, Dialog, Systems Development Corporation, Bibliographic Retrieval Service, WilsonLine); courses in searching specific databases (including BIOSIS, Chemical Abstracts Service, ERIC, Excerpta Medica, PsychInfo, SCISEARCH, Social SCISEARCH, NTIS, and many others), and workshops on personnel management, time management, career planning, supervision, project management, public relations, marketing, leadership, communications, and other aspects of administration and management.

B. Additional Professional Development Activities

University of Missouri - Kansas City School of Medicine Study Tour Group to Canada, member, June 1979.

University of Missouri - Columbia Extension Service, School of Library and Informational Sciences course: “Government Documents,” 3 hours graduate credit, Fall, 1979.

University of Missouri - Kansas City, “History of Medicine,” 3 hours (audited), Spring, 1980.

IX. TEACHING ACTIVITIES

A. Courses Developed

“Basic Online Seminar,” MCRMLP. Approved by the Medical Library Association for 6.0 contact hours credit, 1980.


“CE 005: MeSH for Searchers,” MLA. Developed for the Medical Library Association, approved for 8.0 contact hours credit, 1992.

“Database Retrieval in the Health Sciences,” revision of course LIS 624 for the Department of Information and Library Science, Pratt Institute, 1989.


“MEDLINE on Dialog,” developed for the Nebraska Online Users Group and the MCRMLP, 1982.

“MeSH for Searchers (Continuing Education Course), ©Carolyn Anne Reid, 1997. Approved by the Medical Library Association for 8.0 contact hours credit, 1997-1998.
“Online Searching Workshop,” MCRMLP. Approved by the Medical Library Association for from 6.6 to 14.7 contact hours credit (depending on one or two day offering), 1982.
“Online Training: An Advanced Course,” MCRMLP. Approved by the Medical Library Association for 24.0 contact hours credit, 1981.
“Online Training: An Initial Course in the NLM Databases,” MCRMLP. Approved by the Medical Library Association for 22.0 contact hours credit, 1980.
“Problem Search Clinic,” MCRMLP. Approved by the Medical Library Association for 8.0 contact hours credit, 1981.
“Toxicology Databases Workshop,” MCRMLP. Approved by the Medical Library Association for 12.0 contact hours credit, 1981.
“Toxicology Information Seminar,” MCRMLP. A one-hour presentation on the National Library of Medicine's chemical and toxicological databases designed for health professionals, toxicologists, pharmacologists, and industrial hygienists, 1981.

B. Courses Taught

Basics of Searching MEDLINE for the Health Professional.
Database Retrieval in the Health Sciences, LIS 624, Pratt Institute.
Medical Librarianship, LIS 685, Pratt Institute, co-instructor.
Medical Library Association CE 005: MeSH for Searchers.
Medical Library Association CE 440: Intermediate Skills for Online Searchers.
Medical Library Association CE 651: Online Search Optimization.
The MEDLINE Database: Elhill, Entrez (PubMed), Ovid
MeSH for Searchers (most recent offering: Dallas, TX, May 2002).
National Library of Medicine Abbreviated Initial Training.
National Library of Medicine Initial Online Services Training.
National Library of Medicine Online Services Update
South Central Regional Medical Library Program (TALON) Online Services Workshop: Toxicology.
Veterans Administration Workshop for Online Search Effectiveness.

X. CONSULTATION ACTIVITIES

Biomedical Library Review Committee of the National Library of Medicine, member of site visit team.
Boston, Massachusetts, 1980.
South Central Regional Medical Library Program (TALON), consultant for the revision and instruction of “Online Services Workshop: Toxicology,” 1982-1984.
Adjunct Faculty, Department of Information and Library Science, Pratt Institute, 1987-1988.
Westchester County (NY), consultant on mounting the MEDLINE database on the M-PALS system, 1991.
Slack, Inc., Medical Matrix and internet demonstrations at the American Psychiatric Association meeting, May 1996.
National Library of Medicine, Improvements in the PubMed Database, April 1998.
Praxis Press, Inc. development of “Best Practice of Medicine” and recruitment/hiring of professional staff, 2000-2001.
Purdue Pharma, L.P., training in use of MeSH for pharmaceutical information retrieval, March 2002.
Mary Anne Liebert, Inc., development of Literature Watch bibliographies and other information retrieval for multiple journal publications, 2000-2014.

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