

# A Clinical Librarian Program in a Family Medicine Residency

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In the past decade, there have been an increasing number of reports that clinical librarian programs benefit the education of the physician, indirectly influence patient care, and change the information-seeking behavior of the physicians involved.<sup>1-7</sup> By the nature of their rotations on various specialty and subspecialty services, family practice residents are constantly in need of information relevant to clinical practice covering a broad spectrum of illness. A six-month pilot program was implemented to determine if a clinical librarian program could provide cost-effective continuing education support for family practice residents.

From August 1980 through January 1981, a librarian from the Houston Academy of Medicine-Texas Medical Center (HAM-TMC) Library attended morning reports of the Baylor family practice inpatient service to note questions raised in the context of the patient care setting. Requests for materials were clarified at the end of the report each morning. The librarian then searched the literature and sent the requester articles or books by courier the following morning. Telephone contact was made if a request was urgent or needed clarification. The requester was asked to complete a brief questionnaire evaluating the materials sent, and the librarian kept records of numbers of requests, photocopies, time, and cost of service. At the end of each month, when the admitting team changed, a general written evaluation of the service was required of the team members.

## Evaluation

During the six-month pilot program a librarian attended a total of 52 conferences and received 89 requests for published information concerning subjects of clinical interest and questions related to patient care. Most requests were from residents, the target population, and ranged in scope from "What is the sodium content in various antacids?" to "Please find a review article on deep vein thrombosis."

The Department of Family Medicine was

From the Department of Family Medicine, Baylor College of Medicine, and the HAM-TMC Library, Houston, Texas. Requests for reprints should be addressed to Dr. Nellie P. Grose, Baylor Family Practice Center, St. Luke's Episcopal Hospital, 6720 Bertner, Houston, TX 77030.

charged for 1,251 photocopies at 15¢ per copy for a total cost of \$187.65, an average of \$31.29 per month or \$2.11 per request (approximately 14 pages copied per request). No comprehensive computer search was charged to the department, although the librarian frequently used data bases (particularly MEDLINE) to identify relevant references. On the average, each hour conference resulted in 1.5 hours of follow-up library work based on two requests per conference. Based on \$20,000 per year as the salary for an experienced medical librarian, the cost of the librarian's time was approximately \$10 per hour.

The majority of the residents indicated that the provided materials answered the original questions, and more than 80 percent of those responding rated the information to be of high educational value. All rated highly the time-saving aspect of the service. Although it is difficult to evaluate the direct impact of the program on patient care, comments such as "I did not order the tests after I read the article," "I have a better understanding of the use of this test in evaluating this illness now," indicate that residents applied information from the library to patient management. No one felt that the presence of the librarian restricted freedom of discussion and about one half of the residents felt that it prompted the team to ask more questions.

## Comment

The most important result was the educational impact of the program on the residents and the opportunity to integrate a different method of learning into the clinical setting. Many questions represented the multifaceted problems faced by family physicians. Often answers were not easily found in a textbook, and the library supplied the necessary information; indeed, when the latest information was needed, the information provided was often more current than the textbooks or consultants. The service also enhanced access to subspecialty journals, many of which are not regularly read by family physicians (eg, *Oral Surgery*, *Oral Medicine*, *Oral Pathology*, and the *Journal of Nervous and Mental Disease*).

Instead of comparing the cost of the service with expenditures for laboratory or x-ray studies

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