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NLM Technical Bulletin

National Library of Medicine | National Institutes of Health

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November 01, 2010 [posted]

OLDMEDLINE is Another Year Older with the Addition of the 1946 CLML Citations

More historical journal citations are now in MEDLINE®/PubMed® with the addition of over 48,000 citations from the 1946 Current List of Medical Literature (CLML). The National Library of Medicine® (NLM®) has been converting information from older print indexes that were the precursors to *Index Medicus*. When the original MEDLINE database made its debut in 1971, it contained citations to journal articles published from approximately 1966 forward. The 1946 CLML represents the 20th year going back in time to enhance access to the older biomedical literature. With the addition of the 1946 CLML citations, the OLDMEDLINE subset contains over two million citations.

NLM also continues the work of mapping the original keywords assigned to these older references so that current MeSH® terms (Medical Subject Headings) are added to the records and available for searching in PubMed.

Additional information about the OLDMEDLINE data project is available.

OLDMEDLINE is Another Year Older with the Addition of the 1946 CLML Citations. NLM Tech Bull. 2010 Nov-Dec;(377):e1.

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NLM Technical Bulletin

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November 01, 2010 [posted]

PubMed® Author ID Project

The National Library of Medicine® (NLM®) National Center for Biotechnology Information (NCBI) is developing a system that will address the problem of ambiguous author names within PubMed and facilitate accurate search and retrieval of a participating author's works. The specifics of PubMed Author ID, as the system is now known, are still evolving. It is currently envisioned that authors (or their designees) would register for the service through My NCBI and identify their research articles in PubMed using provided tools; this identification of articles will allow NCBI to link alternate names/spellings associated with an individual. The anticipated launch for PubMed Author ID is in mid-2011.

NLM has already laid the foundation for the system by developing a process for NIH-funded authors to identify their articles for grant reporting purposes. NLM expects to make PubMed Author ID interoperable with multiple external author ID systems, such as those developed by publisher groups, non-profit organizations, and other countries. NLM has not yet identified external author ID systems that it will incorporate in PubMed Author ID, but will work with outside groups as systems are developed in this rapidly evolving area.

PubMed® Author ID Project. NLM Tech Bull. 2010 Nov-Dec;(377):e2.

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November 02, 2010 [posted]

December 03, 2010 [Editor's note added]

UMLS® 2010AB Release Available

The 2010AB release of the Unified Medical Language System® (UMLS) Knowledge Sources is available for download as of November 1, 2010. In the new UMLS Release there are:

- More than 2.3 million concepts and 8.5 million unique concept names from 158 source vocabularies; the full Metathesaurus subset requires 21.5 GB
- Two new sources
 - International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)
 - Traditional Korean Medical Terms (TKMT)
- One new mapping file
 - Revised SNOMED CT to ICD-9-CM Mapping
- Thirty-one updated English sources and nine updated translation sources including MeSH®, MedDRA (Medical Dictionary for Regulatory Activities), RxNorm, and SNOMED CT® (English and Spanish)
- RxNorm data now include a new term type MIN (Multiple Ingredient Name)

For more information about the release, see the What's New and Updated Sources sections of the Release Documentation. Additional release statistics are published on the UMLS Web site.

To access the UMLS Release files, you must have an active UMLS Metathesaurus® license and a valid UMLS SKS account. You will be prompted for your UMLS SKS Login ID and Password when downloading the files.

[Editor's note added December 3, 2010: The UTS beta version was implemented on December 2, 2010. For more information, see UMLS Terminology Services (UTS) Beta Launch.]

Another access option for these data will be via the soon-to-be-released UMLS Terminology Services (UTS), the next generation replacement for the UMLS SKS. UMLS licensees will receive an e-mail with beta launch details about the forthcoming UTS.

Additional information regarding the UMLS is available on the UMLS homepage. New users are encouraged to take the UMLS Basics Tutorial and to explore the training materials and other information on the New Users' homepage.

DVDs

As always, the production and mailing of the UMLS DVDs occur about four weeks after the release is made available

for download.

Users must have an active UMLS Terminology Services (UTS) account to request a 2010AB DVD. To request or cancel a DVD: Sign in to the forthcoming UTS and edit your UTS profile to select or deselect the DVD option. This option will be available once the UTS is launched.

Source Release Documentation

2010AB Source Release Documentation Web pages will be published following the release.

By Victoria Wilder

MEDLARS Management Section

Wilder V. UMLS® 2010AB Release Available. NLM Tech Bull. 2010 Nov-Dec;(377):e3.

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November 02, 2010 [posted]

50th Anniversary Medical Subject Headings (MeSH®) Event

On November 18, 2010, the National Library of Medicine® (NLM®) marks the 50th anniversary of MeSH with a talk by Robert Braude, PhD. The talk entitled "MeSH at 50 – 50th Anniversary of Medical Subject Headings" will be videocast with captioning at <http://videocast.nih.gov/>. The event is scheduled from 2:00 pm – 3:30 pm ET.

MeSH was first published in 1960; in 2010 we observe 50 years of this subject control authority. The seeds of MeSH were planted in December 1947. The Army Medical Library, the NLM predecessor, sponsored a Symposium on Medical Subject Headings in 1947. Participants, who included Seymour Taine, Thelma Charen, and Eugene Garfield, considered the challenges of the bibliographical control of publications. It was noted that the increasing complexity of scientific literature necessitated increasingly sophisticated approaches to organization and access. The participants recognized that the issue of a subject authority was not an academic exercise. Rather, subject cataloging and the subject indexing of journal articles were acknowledged as the essence of bibliographic control. The needs of the user of scientific information is to be always at the forefront in creating a set of medical subject headings that were made equally for subject description of books and for indexing of journal articles.

That first edition of MeSH represented a departure from the then usual library practice. MeSH contained 4,300 descriptors, and it was designed to be used for both indexing and cataloging. It is likely the first vocabulary engineered for use in an automated environment for production and retrieval. MeSH continues to evolve and grow. The 2011 edition contains more than 26,000 subject headings in an eleven-level hierarchy and eighty-three subheadings. Annual revision and updating are ongoing to assure that MeSH remains useful as a way to categorize medical knowledge and knowledge in allied and related disciplines for retrieval of key information. MeSH is 50 years old and new each year.

The speaker: Robert M. Braude received his Masters of Library Science in 1964 from UCLA. In 1965, he attended MEDLARS® training at NLM and his talk reflects on his forty-five years of life with MeSH. In 1987 he received a Ph.D. in Higher Education Administration from the University of Nebraska. His career included director of three academic health science libraries and he has served on many NLM Committees and Panels such as IAMS Review Committees, the Planning Panels on Medical Informatics and NLM Outreach Programs, and the Biomedical Library Review Committee. He is a past Janet Doe Lecturer, a Fellow of the Medical Library Association and Fellow of the American College of Medical Informatics.

The talk is co-sponsored by the Division of the History of Medicine and the Medical Subject Headings Section, NLM.

By Jacque-Lynne Schulman
MeSH Section

Schulman JL. 50th Anniversary Medical Subject Headings (MeSH®) Event. NLM Tech Bull. 2010 Nov-Dec;(377):e4.

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November 04, 2010 [posted]

November 18, 2010 [Editor's note added]

Comings and Goings for PubMed® Limits

[Editor's note added November 18, 2010: These changes were implemented in PubMed on November 17, 2010.]

The following changes will be made to the PubMed Limits screen in November 2010.

Subsets

Two subsets will be added:

Dietary Supplements: This subject subset was announced in the recent article, *Dietary Supplements — A New PubMed® Subset*.

Veterinary Science: This subject subset was added to the Special Queries page in 2007 (see *Veterinary Search Added to PubMed® Special Queries*). The strategy was originally called Veterinary Medicine/Animal Health.

The Space Life Sciences and PubMed Central® subsets will be removed from Limits; however, they will still be available for direct searching using space [sb] and pubmed pmc [sb] respectively. They will also remain available as My NCBI filters for PubMed.

At the same time, the labels on the subsets menu (Journal Groups, Topics, and More Subsets) will be removed and the subsets will be listed in alphabetical order.

Publication Types

Two new Publication Types will be added to the Limits menu, Type of Article, in preparation for changes to MeSH® vocabulary for 2011 (see upcoming article: *What's New for 2011 MeSH*).

- **Autobiography**
- **Video-Audio Media**

Header change

The header over the selections Male and Female will change from “Gender” to “Sex.”

By **Annette M. Nahin**

MEDLARS Management Section

Nahin AM. Comings and Goings for PubMed® Limits. *NLM Tech Bull.* 2010 Nov-Dec;(377):e5.

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November 10, 2010 [posted]

MedlinePlus® Connect: Linking Electronic Health Records to Consumer Health Information

In November 2010, NLM® introduced MedlinePlus Connect, a free service that allows any electronic health record (EHR) system to link to relevant, authoritative and up-to-date health information from MedlinePlus. By incorporating MedlinePlus content into EHR systems, MedlinePlus Connect delivers information about conditions and disorders, health and wellness, and prescription and over-the-counter medications to patients, families, and health care providers when it is needed.

MedlinePlus Connect works by accepting specific requests from EHR systems and providing links to relevant MedlinePlus information in response. To facilitate this connection, NLM mapped all MedlinePlus health topic pages to two standard diagnostic coding systems used in EHRs:

- ICD-9-CM (International Classification of Diseases, 9th edition, Clinical Modification)
- SNOMED CT® CORE Problem List Subset (Systematized Nomenclature of Medicine, Clinical Terms, CORE Problem List Subset)

When an EHR system submits a problem or diagnosis code request to MedlinePlus Connect, the service returns the closest matching MedlinePlus health topic(s) as a response. MedlinePlus Connect will return up to three MedlinePlus topics for each requested problem code. On the MedlinePlus Connect response page, the following elements are included for each health topic listed (see Figure 1).

- Topic name linked to the topic page on MedlinePlus
- Synonyms for the topic name, shown as “Also called” (when applicable)
- Topic image
- Abbreviated version of the topic summary linked to the full topic page
- Links to patient handouts (when available)

The response page also identifies the ICD-9-CM or SNOMED CT CORE Problem List Subset code that MedlinePlus Connect matched to the topic(s). MedlinePlus Connect responds to problem code requests in either English or Spanish. The API for using this service conforms to the HL7 Context-Aware Knowledge Retrieval (Infobutton) Knowledge Request URL-Based Implementation specification which you can download.

MedlinePlus Connect
Trusted Health Information for You

A service of the U.S. National Library of Medicine
NIH National Institutes of Health

ESPAÑOL

Health Information for You
MedlinePlus found the following results for your request. However, these results may not exactly match the link you selected. Check with your health care provider to discuss your questions and get the information that is right for you.

Knee Replacement
Also called: Knee arthroplasty

Knee replacement is surgery for people with severe knee damage. Knee replacement can relieve pain and allow you to be more active. Your doctor may recommend it if you have knee pain and medicine and other treatments are not helping you anymore. When you have a total knee replacement, the ... [more](#)

Patient Handouts

- [Getting your home ready - knee or hip surgery](#)
- [Hip or knee replacement - after - what to ask your doctor](#)
- [Knee joint replacement - discharge](#)

MedlinePlus matched the above topic(s) to ICD-9-CM V43.65. ICD-9-CM stands for the International Classification of Diseases, 9th edition.

Figure 1: MedlinePlus Connect problem code response page.

MedlinePlus Connect also links to medication information written especially for patients. When EHR systems send MedlinePlus Connect a request containing a standardized medication code, the service returns links to the most appropriate drug information for prescription and over-the-counter medicines (see Figure 2). For medication requests, MedlinePlus Connect supports the following code systems:

- RXCUI (RxNorm Concept Unique Identifier)
- NDC (National Drug Code)

MedlinePlus drug information is the *AHFS® Consumer Medication Information* and is licensed for use on MedlinePlus from the American Society of Health-System Pharmacists (ASHP), Inc. Currently, MedlinePlus Connect only responds in English to drug information requests.

MedlinePlus Connect
Trusted Health Information for You

A service of the U.S. National Library of Medicine
NIH National Institutes of Health

Health Information for You
MedlinePlus found the following results for your request. However, these results may not exactly match the link you selected. Check with your health care provider to discuss your questions and get the information that is right for you.

[Omeprazole](#)
Prilosec® ... Prilosec® OTC

Drug Information is brought to you by the
[American Society of Health-System Pharmacists](#)

Figure 2: MedlinePlus Connect drug information response page.

To see how MedlinePlus Connect responds to specific problem code and drug code requests, visit the demonstration page (see Figure 3).



Figure 3: MedlinePlus Connect demonstration page.

If you are interested in learning how to implement MedlinePlus Connect in your EHR system, visit the overview and technical details pages. In the future, NLM will provide information for laboratory tests through MedlinePlus Connect. Additionally, NLM will add an XML-based Web service as an alternative method to the HL7 Infobutton standard. To stay up-to-date on developments with MedlinePlus Connect or to talk to other organizations that are using it, join the MedlinePlus Connect email discussion list. Send the MedlinePlus Team any questions or feedback via the Contact Us link.

**By Stephanie Dennis, Naomi Miller, and Sarena Burgess
Public Services Division**

Dennis S, Miller N, Burgess S. MedlinePlus® Connect: Linking Electronic Health Records to Consumer Health Information. NLM Tech Bull. 2010 Nov-Dec;(377):e6.

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November 23, 2010 [posted]

December 01, 2010 [Editor's note: Figure 1 replaced]

NLM® Catalog and Journals Databases Merge

The National Library of Medicine® (NLM) Catalog will soon be redesigned to provide users with a streamlined interface and enhanced search and display of the 1.4 million bibliographic records in the NLM database. The NLM Catalog will contain detailed MEDLINE indexing information about the journals in PubMed® and other National Center for Biotechnology Information (NCBI) databases. The Journals Database will be retired.

What is new in the NLM Catalog

- Additional searchable fields
- Enhancements to the Limits page
- New Journal display option and expanded Full display
- Additional filters
- Searching for Journals
- Launching PubMed searches from the NLM Catalog
- Effect on EUtilities

Additional searchable fields

New search tags will be added to limit searches to a specific field. Some of the new search tags are: Broad Subject Term(s), Current Format Status, Current Indexing Status, Version Indexed, ISSN, and PubMed Central® Holdings. See the full list of Search Field Descriptions and Tags in the NLM Catalog Help

Enhancements to the Limits page

A new category of Limits will be added called Journal Subsets. Users are able to limit searches to journals referenced in the NCBI databases, only PubMed journals, journals currently (or previously) indexed for MEDLINE®, PubMed Central journals, and PubMed Central forthcoming journals. Users can also limit searches to journals published in electronic-only format.

A new Images Material Type (images from the History of Medicine database) and three new Publication Types, Portraits, Postcards, and Posters, will also be added.

New Journal format display option and expanded Full display

A Journal display will be added to the Display Options in the NLM Catalog. This display includes fields of interest to those searching for information about journals, including MEDLINE indexing information. The Full display will also

be expanded to include all available fields where applicable.

Additional filters

The following new filters have been created: Journals in the NCBI databases, Journals Currently Indexed in MEDLINE, and PubMed Only Journals. Users can view all available filters by browsing the index on the Advanced Search page. For more information about changing My NCBI filter preferences, please see the My NCBI Help.

Searching for Journals

The NLM Catalog will contain detailed MEDLINE indexing information about the journals in PubMed and other NCBI databases. Users can limit NLM Catalog searches to journals in the NCBI databases by using the Journals in NCBI Databases link on the NLM Catalog homepage or the Limits page (see Figure 1).

[Editor's note: Figure 1 was replaced on December 1, 2010.]

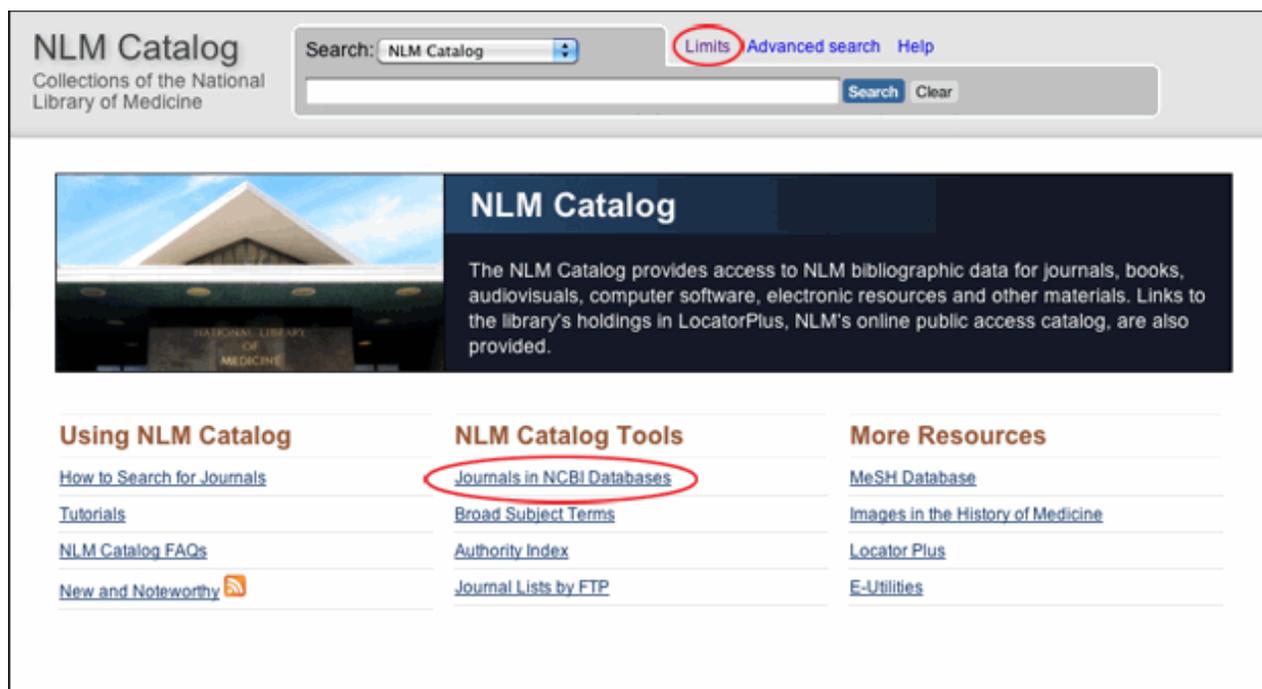


Figure 1: NLM Catalog homepage

Enter a topic, journal title or abbreviation, or ISSN into the search box and click Search. Automatic suggestions will display as you type your search terms (see Figure 2).

NLM Catalog: Journals referenced in the NCBI Databases

Limit your NLM Catalog search to the subset of journals that are referenced in NCBI database records

Enter topic, journal title or abbreviation, or ISSN: [Limits](#) [Advanced Search](#) [Help](#)

diabetes

More Resources

[Search NLM Catalog](#) for the comprehensive set of NLM's collections (including Journals in the NCBI Databases.)

[Browse MEDLINE Journals by broad subject terms](#)

[Journal lists by FTP](#)

[LinkOut journal lists](#)

Figure 2: Journals referenced in the NCBI Databases

On the Summary display, click the journal title or select Journal or Full from the Display Settings menu to view additional information. Note that the limit is activated and can be changed or removed by clicking the appropriate links (see Figure 3).

[Display Settings](#): Summary, 20 per page, Sorted by Publication Date

 **Limits Activated:** Journals referenced in the NCBI databases [Change](#) | [Remove](#)

Results: 1 to 20 of 58

[Journal of clinical metabolism & diabetes](#)

1. NLM Title Abbreviation: J Clin Metab Diabetes
Middlesex: San Lucas Medical
Not currently indexed for MEDLINE
NLM ID: 101543212 [Serial]

[Journal of diabetes.](#)

2. Ruijin yi yuan (Shanghai, China).
NLM Title Abbreviation: J Diabetes
ISSN: 1753-0393 (Print) ; 1753-0407 (Electronic) ; 1753-0407 (Linking)
Richmond, Vic. : Blackwell Publishing Asia, 2009-
Currently indexed for MEDLINE
NLM ID: 101504326 [Serial]

Figure 3: Summary Display with Limits Activated

Users can also visit the Limits page to limit a search to various journal subsets. The NLM Catalog will apply an AND Boolean operator when the Journals referenced in the NCBI databases limit is selected with a Journal Subset limit. A notice appears at the top of your search results indicating that limits have been activated.

Launching PubMed searches from the NLM Catalog

To build a PubMed search for journals from the NLM Catalog, run a search using Limits and use the check boxes to

select journals. Click "Add to search builder" in the PubMed search builder porlet, and the journal title abbreviation(s) will be sent to the search builder box (see Figure 4). If a book or a non-PubMed journal is sent to the PubMed search builder, an error message will warn the user that the PubMed search builder only retrieves citations for PubMed journals. Continue searching the NLM Catalog and adding journals to the PubMed search builder using the Add to search builder button. The search builder will apply an OR Boolean operator if multiple journals are added to the search box. When you are finished, click Search PubMed to view the citations from the selected journal(s) in PubMed.



Figure 4: Using PubMed search builder

Effect on EUtilities

ESearch URLs for db=journals will automatically map to db=nlmcatalog. ESummary and EFetch will retrieve NLM Catalog XML.

By Sarah Torre
National Center for Biotechnology Information

Torre S. NLM® Catalog and Journals Databases Merge. NLM Tech Bull. 2010 Nov-Dec;(377):e7.

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November 22, 2010 [posted]

Cataloging News — 2011

MeSH® 2011 - Implications for LocatorPlus®, NLM® Catalog, and the *NLM Classification*

The National Library of Medicine® (NLM) adopted the 2011 MeSH vocabulary for cataloging beginning on November 22, 2010.

Accordingly, MeSH subject headings in LocatorPlus were changed to reflect the 2011 MeSH vocabulary and appear in that form as of November 22, 2010.

When year-end processing (YEP) activities are completed in mid-December, the NLM Catalog's MeSH data and translation tables will be updated to reflect 2011 MeSH. Until then, note that there will be a hiatus in the addition of new and edited bibliographic records to the NLM Catalog. The Index to the *NLM Classification* will not reflect 2011 MeSH changes until Spring 2011.

MeSH 2011 Changes in NLM Bibliographic Records

In general, the Cataloging Section implemented the vocabulary changes in NLM bibliographic records for books, serials, and other materials, as they were applied for citations in MEDLINE.

Publication Types (PTs):

- Of the four new publication types, Cataloging will only use *Photographs*
- Cataloging updated headings on bibliographic records to reflect the changed publications types:
 - *Instruction* is now *Instructional Films and Videos*
 - *Personal Narratives* is now *Autobiography* (*Personal Narratives* is now an entry term to *Autobiography*. The MeSH scope note remains the same. Note that *Autobiography as Topic* is also available)

New MeSH descriptors not used by catalogers for current materials:

- *Algal Proteins*
- *DNA, Algal*
- *Patient Protection and Affordable Care Act* (Catalogers will use heading from Name Authority File)

Other pertinent articles:

[MEDLINE/PubMed Year-End Processing Activities](#)

[2011 MeSH Now Available](#)

[Cataloging News 2011](#)

[MEDLINE Data Changes — 2010](#)

[PubMed Notes — 2011](#)

[What's New for 2011 MeSH](#)

[Newly Maintained MEDLINE for 2011 MeSH Now Available in PubMed](#)

(NAF))

- *RNA, Algal*
- *United States Department of Defense* (Catalogers will use NAF heading)

Additional Database Change

Current Publisher Displays

- The Latest Publisher field, which has not been available in the NLM Catalog since June 14, 2010 (see *Current Publisher Displays in the NLM® Catalog*) will again be available after YEP activities are completed in mid-December.

Resource Description and Access Testing

NLM is participating in the US National RDA (Resource Description and Access) testing. From October-December 2010, selected catalogers are creating records using the proposed new RDA cataloging rules, so you may encounter records that look somewhat different. RDA records may be identified in the MARC view of LocatorPlus by the presence of a 040 \$e RDA. NLM does not plan to create any additional RDA records after the testing period until a final decision on implementation is made.

By Diane Boehr and Sharon Willis
Cataloging Section

Boehr D, Willis S. Cataloging News 2011. NLM Tech Bull. 2010 Nov-Dec;(377):e8.

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November 23, 2010 [posted]

Books with New Looks: The Bookshelf Redesign

The books in Bookshelf have been given a new look as part of a redesign that is taking place in several stages. The Bookshelf redesign goes beyond cosmetic enhancements; it includes infrastructural improvements to facilitate the discovery of information at the National Center for Biotechnology Information (NCBI).

The first (and completed) stage is the redesign that improves how all book pages are displayed. The table of contents page of every book now displays the book's bibliographic data, such as the book title, author, publisher, and copyright information. A thumbnail display of the book cover shows prominently and an abstract or excerpt from the book is displayed above the table of contents. On the right side of the page, related PubMed® citations and history of recent activity may display (see Figure 1). Where available, links to other NCBI resources, such as Gene and OMIM, may also display. These new panels mark the ongoing work to create rich links between NCBI resources and to maximize discoverability of related materials.

The screenshot shows the NCBI Bookshelf interface for the book 'Cardiology Explained'. At the top, there is a blue header with the NCBI logo, 'Resources', 'How To', and 'My NCBI Sign In' links. Below the header is the 'Bookshelf' section with the NCBI logo and 'U.S. National Library of Medicine National Institutes of Health' text. A search bar is present with a dropdown menu set to 'This Book' and buttons for 'Search' and 'Clear'. The main content area features a book cover for 'Cardiology explained' by Euan A. Ashley and Josef Niebauer. The title 'Cardiology Explained' is prominently displayed, followed by the series name 'Remedica Explained Series' and the authors' names. Below this, there are footnotes for the authors' affiliations, the publication information (London: Remedica; 2004, ISBN-10: 1-901346-22-6), and the copyright notice (© 2004, Remedica). A paragraph of text describes the book's purpose: 'One of the most time-consuming tasks in clinical medicine is seeking the opinion of specialist colleagues. There is pressure not only to make referrals appropriate, but also to summarize the case in the language of the specialist. Cardiology Explained is an essential tool in this task. It explains the basic physiology and pathophysiologic mechanisms of cardiovascular disease in a straightforward and diagrammatic manner, gives guidelines as to when referral is appropriate, and, uniquely, explains what the specialist is likely to do. This facilitates an understanding of the specialty not available from standard textbooks. With wide appeal, this book is ideal for any hospital doctor, generalist, or even senior medical student who may need a cardiology opinion; or for that matter, anyone who simply wants some of cardiology - explained.' To the right of the text, there are sections for 'Related citations in PubMed' and 'Recent activity'. The 'Related citations' section lists several articles with their titles and publication years. The 'Recent activity' section shows a list of items, including 'Heart failure - Cardiology Explained' and 'Cardiology Explained', with options to 'Turn Off' or 'Clear' the activity. At the bottom left, there is a 'Contents' section with links for 'Foreword', 'Preface', and 'Abbreviations'. At the bottom center, there are 'Expand All' and 'Collapse all' buttons.

Figure 1: Table of Contents page.

In common with PubMed, the blue NCBI header and search bar are displayed at the top of all pages, and at the bottom of each page the standard NCBI footer links to many NCBI resources. Click on “Bookshelf” (upper left on any page) to return to the homepage.

Once inside a book, all pages have been given a more balanced and clean layout. The text of the page is more readable through improved page layout, typography, and standardized headings. Figures can be quickly previewed: a large version of the image pops up over the page when you mouseover the thumbnail (see Figure 2). Clicking on the thumbnail opens the image in a new window and allows you to see the title and caption for the figure.

- cardiomegaly (se
- upper lobe blood
- "bat's wing" alveo
- pleural effusions
- Kerley B lines (ly



Fig
Ca
wit



Echocardiography

This is the investigation (diastolic) as well as ex

Blood tests

The measurement of n
other blood tests can
mmol/L, despite high total body sodium) as a result of dilution and is a strong prognostic indicator. The potassium level is altered by many of the therapeutic agents and should be kept in the mid to high normal range (4.25–5 mmol/L) to minimize the risk of arrhythmia. If the pulse is of full volume, investigative blood tests for anemia and thyroid function should be carried out. If echo suggests restrictive cardiomyopathy, further tests can be carried out for iron storage disease, amyloidosis, or sarcoidosis.

Figure 2: Preview of a large version of a thumbnail image.

From the interior pages of a book, searching within the book is the default, however, you can expand the search to the whole Bookshelf, or search any of the other NCBI resources by choosing a different option from the dropdown menu next to the search box (see Figure 3).

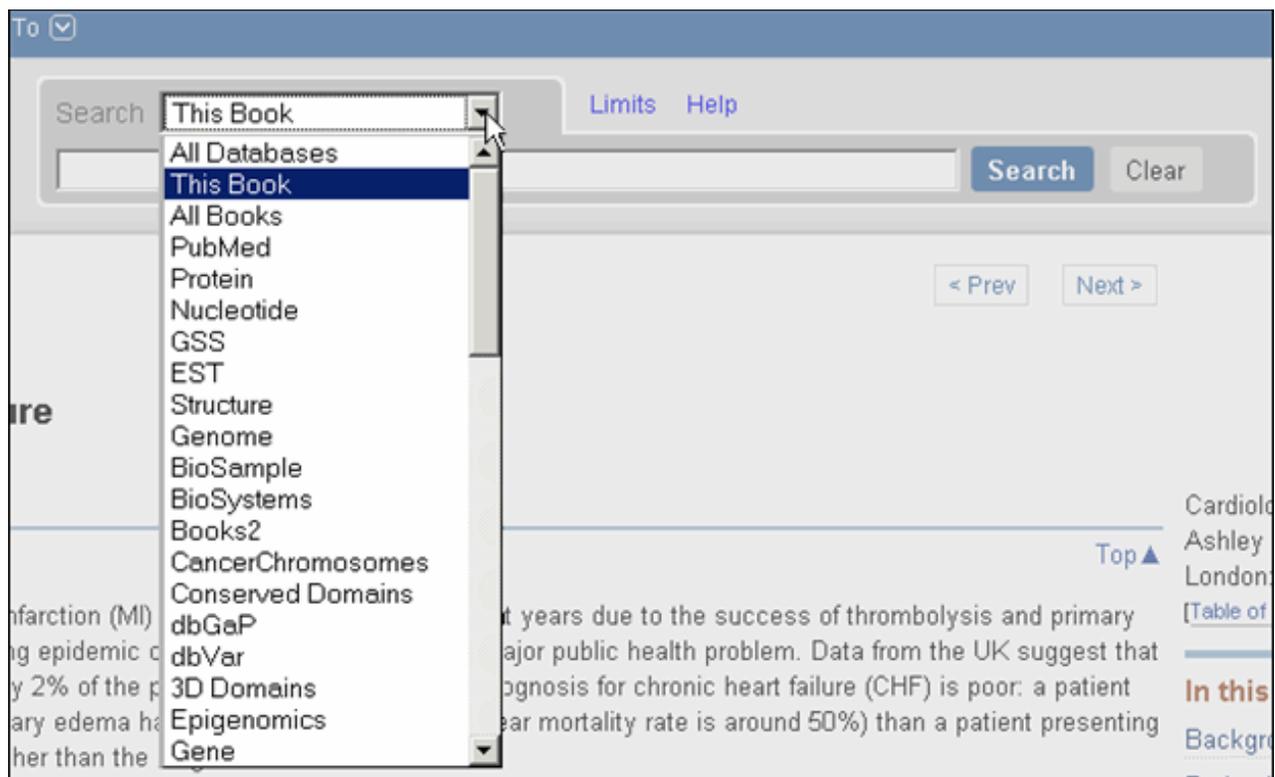


Figure 3: Search dropdown menu.

One of the main goals of the redesign was to improve navigation, and this has been achieved in a number of ways.

On every book page, brief bibliographic information is available, and you can click on the "Table of Contents Page" link or the image of the book cover to return to the first page of the book (see Figure 4).

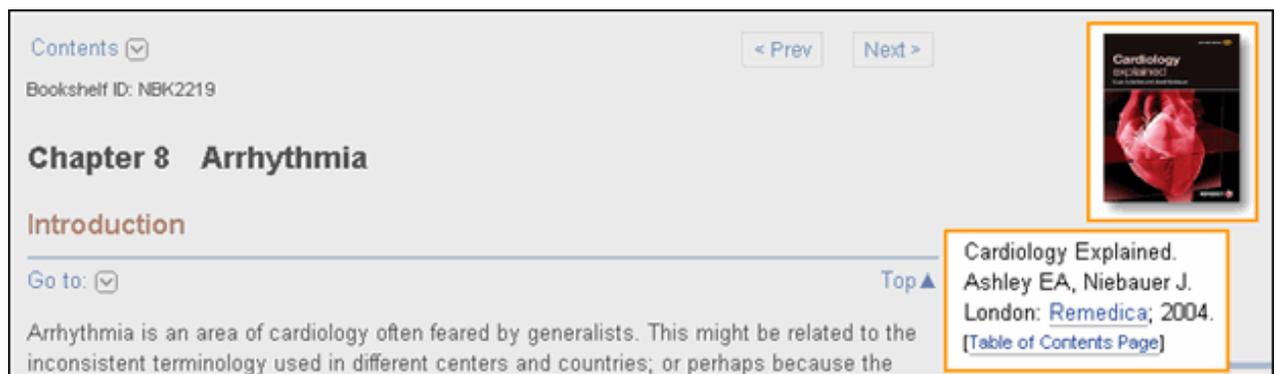


Figure 4: Book cover, brief bibliographic information, and the Table of Contents Page links displayed on each page within a book.

Use the "Go to" menu to access links to other sections within the page. The titles of sections within the page are also listed on the right (see Figure 5). Each section also has a top link to quickly take you to the top of the page.

Contents  < Prev Next >

Bookshelf ID: NBK2219

Chapter 8 Arrhythmia

Introduction

Go to: 

- [Introduction](#)
- [Bradycardia](#)
- [Bundle branch block](#)
- [Tachyarrhythmia](#)
- [Pacemakers](#)
- [Implantable cardioverter defibrillators](#)
- [Electrophysiological studies](#)
- [Drugs in arrhythmia](#)
- [Further reading](#)

Cardiology Explained.
Ashley EA, Niebauer J.
London: Remedica; 2004.
[\[Table of Contents Page\]](#)

In this Page 

- [Introduction](#)
- [Bradycardia](#)
- [Bundle branch block](#)
- [Tachyarrhythmia](#)
- [Pacemakers](#)
- [Implantable cardioverter defibrillators](#)
- [Electrophysiological studies](#)
- [Drugs in arrhythmia](#)
- [Further reading](#)

generalists. This might be related to the
nd countries; or perhaps because the
(ECG), can at times seem the most
comfortable when confronted with a
thmia can be simply managed by asking
? This is the first and single most
ent. The answer will guide your next

If the patient is not compromised – no pain, no dyspnea, normal blood pressure, and fully alert – you have some time. Take a short history and examination, get the patient monitored (preferably), and acquire a 12-lead ECG. The findings will help to make a diagnosis that will guide treatment. If a 12-lead ECG is not available, immediately refer the patient to somewhere that it can be performed.

If the patient is compromised – with pain, dyspnea, hypotension, and light headedness – this is an emergency and the patient needs an intravenous (IV) cannula inserted and a defibrillator brought in immediately. Treatment then depends on the diagnosis (see [Table 1](#)).

Figure 5: Navigation within the page.

There are several ways to access the Table of Contents Page from within the book (see Figure 6):

1. Click on "Contents" for a preview of the table of contents.
2. Click on the "Table of Contents Page" link.
3. Click on the image of the book cover or the "Table of Contents Page" link that appears below it.

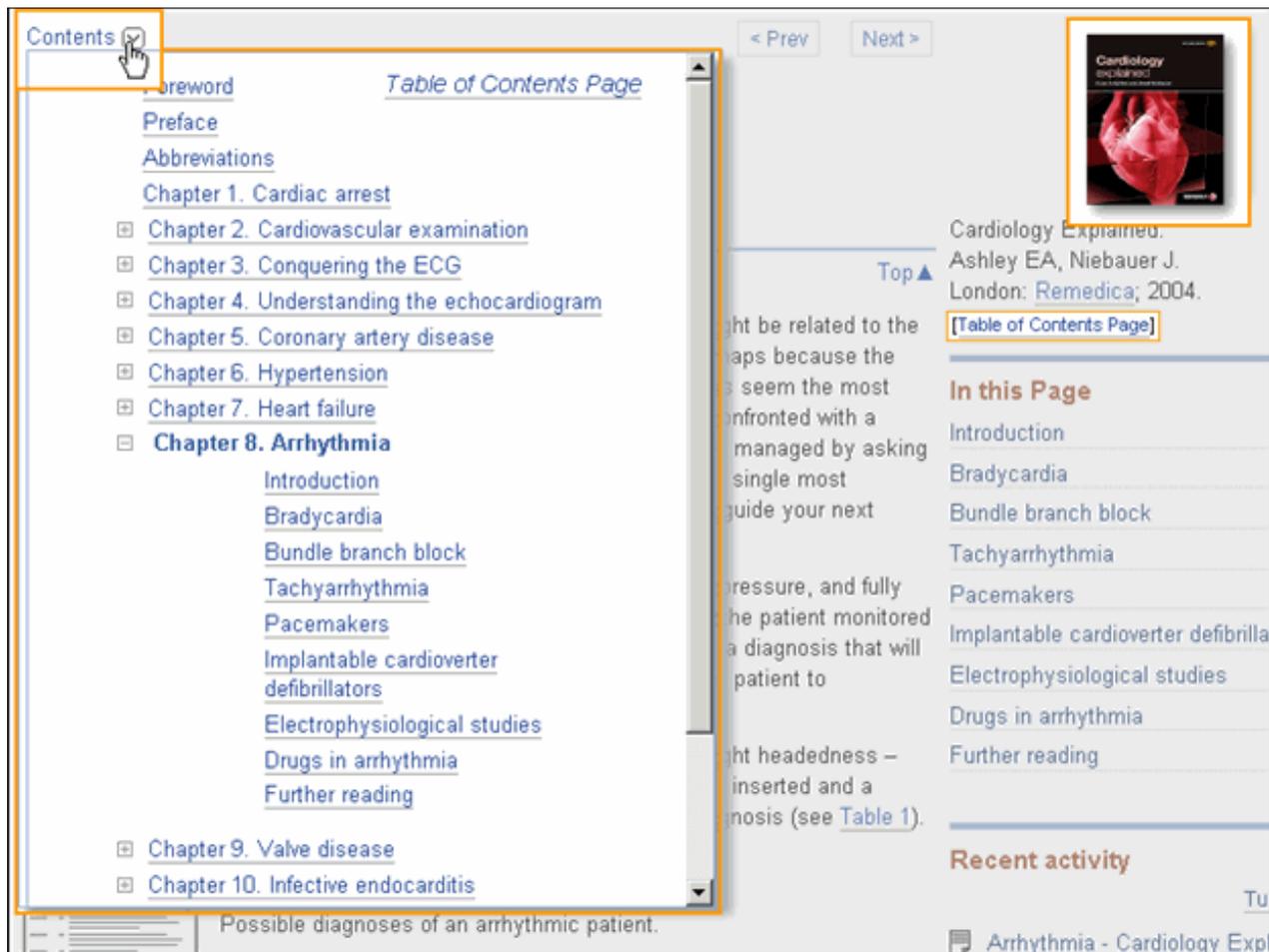


Figure 6: Contents link showing the dropdown table of contents.

Next and Previous buttons at the top and bottom of every page allow you to quickly move forward or backwards through the book (see Figure 7).

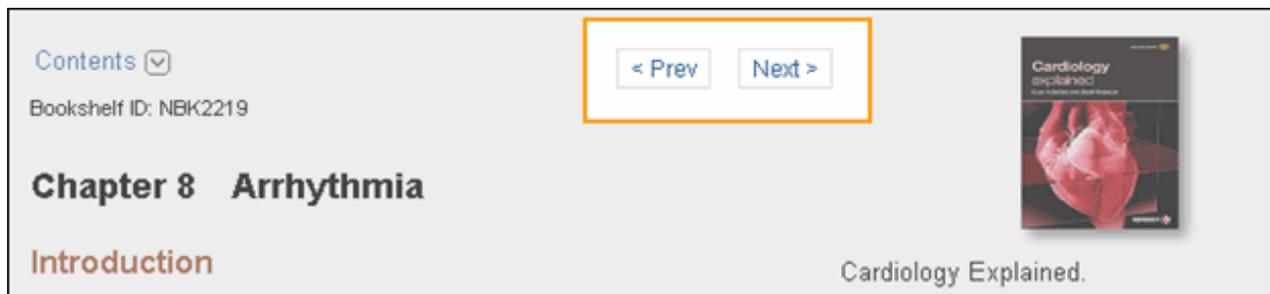


Figure 7: Next and Previous buttons appear at the top and bottom of every page.

The URL for each book or book unit, such as a chapter, includes an accession identifier. Links to books created using the previous URL format will be preserved through redirection.

A copyright link at the bottom of each page takes you to a copyright page that links to all the publishers' copyright information pages.

The next steps for Bookshelf include a new homepage and a redesigned search interface; a new browse tool; and new pages highlighting new and featured content. Stay tuned for more information!

Bookshelf has added many new titles in the last year. Be sure to sign up for the Bookshelf RSS feed, to stay in the loop about design updates and the new books and resources available in Bookshelf.

By Laura Dean, Rebecca Orris, and Marilu Hoepfner
Bookshelf, Electronic Literature Services
National Center for Biotechnology Information

Dean L, Orris R, Hoepfner M. Books with New Looks: The Bookshelf Redesign. NLM Tech Bull. 2010 Nov-Dec;(377):e9.

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November 30, 2010 [posted]

A New Look and Feel for the PubMed Central® Public Access Page

The PubMed Central (PMC) Public Access & PMC page, available from the sidebar on the About PMC page, was recently updated to provide greater clarity and usability. Two new features were added:

1. Top-of-the-page links to navigate page content
2. A table for locating article reference numbers

New Location for Navigation Links

The Public Access & PMC page was reorganized and links to the page content are now at the top of the page (see Figure 1). The new design makes it easy to see what the page contains and how to find the answers to your Public Access-related questions.

Public Access & PMC

- [What is the connection between PMC and the NIH Public Access Policy?](#)
- [How are NIH-funded articles submitted to PMC?](#)
- [What is the relationship among the following article reference numbers: PMCID, NIHMSID, and PMID?](#)
- [How can I find a PMCID, NIHMSID, and PMID?](#)
- [Is there a way to add funding information to a manuscript or final, published article?](#)
- [What is the difference between the PMC Journal list and the NIH Public Access Policy Journal list?](#)
- [How can I, as a publisher, ensure that my journal title is on the NIH Public Access Policy Journal list?](#)
- [When will my journal appear on the NIH Public Access Policy Journal list?](#)

Figure 1: New links.

We've Got Your Numbers

Additionally, a new table (see Figure 2) demonstrates all the ways to locate the identification number of an article or manuscript — whether you're looking for a PubMed identifier (PMID), NIH Manuscript Submission identifier (NIHMSID), or perhaps most important, the PMC identifier (PMCID), which is the identification number that must be cited by recipients of NIH funding to demonstrate compliance with the NIH Public Access Policy. As seen in the table below, you can find these numbers through viewing the PubMed abstract; a PMC search result; and in the PMC display for the final, published article or the author manuscript. To reach this table click on the question, "**How can I find a PMCID, NIHMSID, and PMID?**"

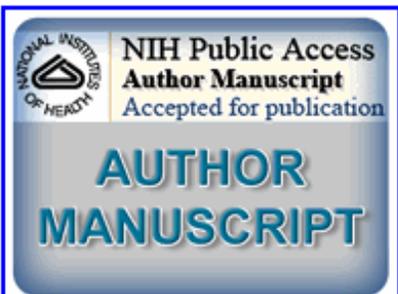
 <p>PMID AND PMCID</p>	 <p>PMCID</p>
 <p>PMCID</p>	 <p>PMCID AND NIHMSID</p>
<p>Note: To include embargoed articles in a PMC search result, click the Limits tab on the search form and select the option, "Show both free and embargoed articles".</p>	

Figure 2: Table for finding article identification numbers.

To see where the article identification numbers appear in each of the four images, you may either hover over or click on the particular image. If you point your cursor on the image, you'll get a pop-up window as shown in Figure 3 for the Author Manuscript selection.


PubMed Central
[Search](#) [Journal List](#)


NIH Public Access
Author Manuscript
 Accepted for publication in a peer reviewed journal

[About Author manuscripts](#) [Submit a manuscript](#)

[Journal List](#) > [NIHPA Author Manuscripts](#)

J Pharmacol Exp Ther. Author manuscript; available in PMC 2008 September 2.
 Published in final edited form as:
[J Pharmacol Exp Ther. 2008 March; 324\(3\): 1102-1110.](#)
 Published online 2007 November 30. doi: 10.1124/jpet.107.132241.

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Omeprazole Stimulates the Induction of Human Insulin-Like Growth Factor Binding Protein-1 through Aryl Hydrocarbon Receptor Activation

Iain A. Murray and Gary H. Perdew

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NIH-PA Author Manuscript

PMCID: PMC2527780
 NIHMSID: NIHMS64070

Figure 3: View of the PMCID and NIHMSID in an author manuscript.

If you choose to click on one of the images, then you will get a different but equally informative view, as in Figure 4 below showing the PMC search result selection.

PubMed Central Search Result

Where do I find the PMCID?

The screenshot shows a search for 'omeprazole' in the PubMed Central database. The search results are displayed in a list format. Three items are shown, each with a checkbox and a blue arrow pointing to its PMCID. Item 1 is 'Free', Item 2 is 'Embargoed', and Item 3 is 'Author Manuscript'.

Item 1: Increased omeprazole metabolism in carriers of the CYP2C19*17 allele; a pharmacokinetic study in healthy volunteers
 R Michael Baldwin, Staffan Ohlsson, Rasmus Steen Pedersen, Jessica Mwynyl, Magnus Ingelman-Sundberg, Erik Eliasson, and Leif Bertilsson
Br J Clin Pharmacol. 2008 May; 65(5):674-677. Published online 2008 February 20. doi: 10.1111/j.1365-2125.2008.03104.x.
 PMCID: PMC2432489
 [Abstract] Full Text | PDF-662K | **Free**

Item 2: The impact of treatment with omeprazole on the effectiveness of clopidogrel drug therapy during the first year after successful coronary stenting
 Michael N Zairis, George Z Tsiacousis, Nikolaos G Patsourakos, Anastassios Theodossis Georgilas, Constantinos F Kontos, Evdokia N Adamopoulou, Konstantinos Vogiatzidis, Spyros K Argyrakos, Constantine N Fakolas, and Stefanos G Foussas
Can J Cardiol. 2010 February; 26(2):141-145.
 PMCID: PMC2851393
 [Free in PMC on 2011/02/01] | **Embargoed**

Item 3: Omeprazole Stimulates the Induction of Human Insulin-Like Growth Factor Binding Protein-1 through Aryl Hydrocarbon Receptor Activation
 Iain A. Murray and Gary H. Perdew
J Pharmacol Exp Ther. 2008 March; 324(3):1102-1110. doi: 10.1124/jpet.107.132241.
 PMCID: PMC2527780
 Published in final edited form as: *J Pharmacol Exp Ther.* 2008 March; 324(3): 1102-1110.
 Published online 2007 November 30. doi: 10.1124/jpet.107.132241.
 Manuscript: | Abstract | Full Text | PDF-634K | **Author Manuscript**

Figure 4: Finding the PMCID in a PMC search result.

So, sit back and enjoy the view — and learn more about Public Access!

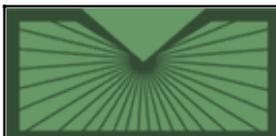
To learn about PMC developments as they happen, subscribe to the PMC mailing list.

By Marla Fogelman
National Center for Biotechnology Information

Fogelman M. A New Look and Feel for the PubMed Central® Public Access Page. NLM Tech Bull. 2010 Nov-Dec;(377):e10.

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NLM Technical Bulletin

National Library of Medicine | National Institutes of Health

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November 30, 2010 [posted]

New Look for NLM® and the New York Academy of Medicine Resource Guide Web Site

[Editor's Note: This is a reprint of an announcement published on NLM-Tox-Enviro-Health-L, an e-mail announcement list available from the NLM Division of Specialized Information Services. To subscribe to this list, please see the NLM-TOX-ENVIRO-HEALTH-L Join, Leave, or Change Options page.]

The Resource Guide for Public Health Preparedness has a new look and a new Web address, <http://phpreparedness.nlm.nih.gov>. It is now a featured resource on the Disaster Information Management Research Center (DIMRC) Web site.

The Resource Guide was first developed by the New York Academy of Medicine Library in 2002 with funding from the National Library of Medicine® (NLM) National Information Center on Health Services Research and Health Care Technology (NICHSR). The Guide is now jointly funded by NICHSR and DIMRC. The Guide continues to provide access to no-cost Web materials on public health preparedness topics for the public health workforce.

Recently, this database and Web site moved to NLM and the content continues to be maintained by the New York Academy of Medicine Library. Previous Web addresses will automatically take the user to the new Web address. Comments and questions about the Resource Guide may be sent to tehip@teh.nlm.nih.gov.

New look for NLM® and the New York Academy of Medicine Resource Guide Web Site. NLM Tech Bull. 2010 Nov-Dec;(377):e11.

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December 02, 2010 [posted]

MEDLINE® Data Changes — 2011

At this time each year the *NLM Technical Bulletin* traditionally includes information about changes made to MEDLINE during annual National Library of Medicine® (NLM®) maintenance known as Year-End Processing (YEP). This article collects, in one place, the notable data changes for 2011. Some topics may be linked to another article where details will be found. For information about how this maintenance affects the NLM schedule for adding indexed MEDLINE citations to PubMed®, see the article, *MEDLINE® /PubMed® Year-End Processing Activities*.

Two additional resources, Annual MEDLINE/PubMed Year-End Processing (YEP): Impact on Searching During Fall 2010 and Annual MEDLINE/PubMed Year-End Processing (YEP): Background Information, include examples of typical changes that take place in MEDLINE citations during YEP.

MeSH® Vocabulary Updated for 2011

The MeSH Browser currently includes a link to the 2011 MeSH vocabulary. Searchers should consult the Browser to find MeSH headings of interest and their relationships to other headings. The Browser contains MeSH Heading records that may include scope notes, annotations, entry terms, history notes, allowable qualifiers (subheadings), previous headings and other information. It also includes Subheading records and Supplementary Concept Records (SCRs) for substances that are not MeSH Headings, and, for the first time for 2011 MeSH, for diseases that are not MeSH Headings.

The MeSH Section homepage provides a link under "All About MeSH" to the Introduction of 2011 MeSH and under "Obtaining MeSH" to download electronic versions.

The MeSH Tree Structures are also available online in both PDF and HTML formats with all indented terms showing.

For highlights about 2011 MeSH see *What's New for 2011 MeSH*.

The PubMed MeSH database and translation tables will also be updated to reflect 2011 MeSH in mid-December when YEP activities are complete and the newly maintained MEDLINE data are available in PubMed.

Updated MeSH in MEDLINE Citations

MEDLINE records with updated MeSH will be in PubMed in mid-December 2010. See Changing Saved Searches for details on revising My NCBI saved searches.

Other pertinent articles:

[MEDLINE/PubMed Year-End Processing Activities](#)

[2011 MeSH Now Available](#)

[Cataloging News — 2011](#)

[MEDLINE Data Changes — 2011](#)

[PubMed Notes — 2011](#)

[What's New for 2011 MeSH](#)

[Newly Maintained MEDLINE for 2011 MeSH Now Available in PubMed](#)

The MeSH Section homepage provides links to descriptions of MeSH maintenance. The About Updates link under the "MEDLINE Citation Maintenance" section explains how NLM prepares the changes in a machine-readable form for others to use. To access the XML files for the tasks processed for this maintenance, click on the "Download XML Files" link under this same section; the 2011 changes should be available sometime in January 2011. This information is helpful for those individuals or organizations using MeSH headings in their own application (such as indexing curricula guides) and want to update those applications with the new version of MeSH.

New MeSH Headings

573 new MeSH Headings were added to MeSH in 2011.

Typically, NLM does not retrospectively re-index MEDLINE citations with new MeSH Heading concepts. Therefore, searching PubMed for a new MeSH term tagged with [mh] or [majr] effectively limits retrieval to citations indexed after the term was introduced. PubMed Automatic Term Mapping (ATM) expands an untagged subject search to include both MeSH Terms and All Fields index terms and may retrieve relevant citations indexed before the introduction of a new MeSH term. Searchers may consult the MeSH Browser or the MeSH database to see the Previous Indexing terms most likely used for a particular concept before the new MeSH Heading was introduced.

Brand New Concepts

Examples of new MeSH headings of special interest to searchers are highlighted below by Category. You can browse all of the new 2011 concepts on the MeSH New Descriptors Web page.

Category A - Anatomy

- Animal Fins
- Arthropod Antennae
- Chromosomal Puffs
- Chromosomes, Insect
- Nematocyst
- Neural Stem Cells
- Polytene Chromosome
- Sensilla

Category B - Organisms

- Aquatic Organisms
- Hermaphroditic Organisms
- Influenza A Virus, H10N7 Subtype
- Influenza A Virus, H7N1 Subtype
- Influenza A Virus, H7N2 Subtype
- Influenza A Virus, H7N3 Subtype
- Introduced Species
- Livestock
- Mice, 129 Strain
- Pets

Category C - Diseases

- Acute Kidney Injury
- Anastomotic Leak
- Asymptomatic Diseases
- Asymptomatic Infections
- Conducted Energy Weapon Injuries
- Diabetic Cardiomyopathies
- Digital Dermatitis
- Intraoperative Awareness

Neglected Diseases
Out-of-Hospital Cardiac Arrest
Peripheral Arterial Disease
Post-Exercise Hypotension

Category D - Chemicals and Drugs

Antibodies, Monoclonal, Murine-Derived
Asymptomatic Diseases
Asymptomatic Infections
Bleaching Agents
Calcimimetic Agents
Cerumenolytic Agents
Counterfeit Drugs
Hair Bleaching Agents
Hygroscopic Agents
Iridoid Glucosides
Iridoid Glycosides
Lipid Regulating Agents
Nonsteroidal Anti-Androgens
Plasma Gases
Peptidomimetics

Category E - Analytical, Diagnostic and Therapeutic Techniques and Equipment

Argon Plasma Coagulation
Bloodless Medical and Surgical Procedures
Diagnostic Self Evaluation
DNA Contamination
Drug Repositioning
Drug Substitution
Enzyme Therapy
Fiducial Markers
Inappropriate Prescribing
Ischemic Postconditioning
Lost to Follow-Up
Medication Reconciliation
Mesotherapy
Molecular Targeted Therapy
Natural Orifice Endoscopic Surgery
Operative Blood Salvage
Opiate Substitution Treatment
Perioperative Period
Self Report
Serum Bactericidal Antibody Assay
Sex Reassignment Procedures
Sex Reassignment Surgery

Category F - Psychiatry and Psychology

Bullying
Catastrophization
Drug-Seeking Behavior

Category G - Biological Sciences

Bacterial Load
Bacterial Secretion Systems
Carbon Cycle
Carbon Footprint
Catabolite Repression

Cell-in-Cell Formation
Circadian Clocks
Cold-Shock Response
Cytophagocytosis
El Nino-Southern Oscillation
Emperipolesis
Entosis
Host Specificity
Microbial Consortia
Nitrogen Cycle
Peripartum Period
Plant Immunity
Seed Dispersal
Seed Dormancy
Self-Fertilization
Spinal Cord Regeneration
Stem Cell Research
Transcellular Cell Migration
Virus Uncoating
Water Cycle

Category H - Natural Sciences

Epigenomics
General Practice
Neuropsychiatry
Orthognathic Surgery
Stem Cell Research

Category I - Anthropology, Education, Sociology and Social Phenomena

Gross Domestic Product
Social Participation
Test Taking Skills

Category J – Technology, Industry, and Agriculture

Agricultural Irrigation
Food, Organic
Molecular Farming
Organic Agriculture
Synbiotics
Weed Control

Category L - Information Science

Information Literacy
Molecular Sequence Annotation

Category M - Named Groups

Doulas
General Practitioners
Physicians, Primary Care

Category N - Health Care

Electronic Waste
Environmental Policy
Epidemics
Food Safety
For-Profit Insurance Plans
Not-For-Profit Insurance Plans

Informed Consent By Minors
Pandemics
Patient Protection and Affordable Care Act
Recycling
United States Department of Defense

Category Z - Geographicals

Black Sea
Confederate States of America

Changes to MeSH Headings

This year 71 MeSH Headings were either changed or deleted and replaced with more up-to-date terminology. During YEP, NLM updates MeSH headings on MEDLINE citations.

Changes of particular interest include:

- The Algae tree was disassembled because it was determined that the MeSH Heading "Algae" was not a useful concept in a taxonomic-based hierarchy. For 2011 MeSH, Algae is being deleted and its *children* distributed among the appropriate eukaryotic trees.

Specific 'algae' are retained as Entry Terms (ET) for the following descriptors:

Treed under Plants and coordinated as appropriate with Plant DNA; Plant RNA; or Plant Proteins:

Chlorophyta
ET: Algae, Green
Rhodophyta
ET: Algae, Red

Treed under Eukaryota and coordinated as appropriate with DNA; RNA; or Proteins:

Phaeophyta
ET: Algae, Brown
Chrysophyta
ET: Algae, Golden-Brown

The following MeSH Headings will no longer be used for indexing, in light of the Algae tree being disassembled:

Algal Proteins
Algal DNA
Algal RNA

- Livestock and Pets are now separate descriptors treed under Animals, Domestic. Note that Livestock excludes Poultry.
- Hermaphroditism and Pseudohermaphroditism are replaced with the MeSH Heading: Disorders of Sex Development. Hermaphroditism and Pseudohermaphroditism are Entry Terms for this heading.
- Hermaphroditism, True was replaced with the heading Ovotesticular Disorders of Sex Development. Hermaphroditism, True is an Entry Term for this heading.

In addition to changes and deletions of MeSH terms on MEDLINE citations, YEP includes other adjustments to reflect

2011 MeSH vocabulary and to enhance search retrieval. These follow-on adjustments are largely the adding of more MeSH Headings or Supplementary Concept Record Names of Substances (NM) for chemicals to citations to help searchers refine retrieval. In some cases, the changes clarify areas where a single concept existed before, but it is now represented by two or more specific concepts. An example for 2011 MeSH is the changing of Disorders of Sex Development to Sex Determination Processes on appropriate citations.

These types of changes, along with others documented on the Annual MEDLINE/PubMed Year-End Processing (YEP): Background Information Web page, suggest the importance of routinely using the PubMed Details feature when searching to see how terms are mapped with the new year's vocabulary and then checking the MeSH Browser or the MeSH database for clarification. Additional information is also available in the article, *Skill Kit: The Effects of Year End Processing (YEP) on Saved Searches or RSS Feeds*.

New and changed Publication Types (PT) for 2011

For 2011, indexers will begin using a new Publication Type, Video-Audio Media for MEDLINE citations.

Also in 2011, MeSH changed two other publication types:

Instruction was replaced by Instructional Films and Videos (This PT is not used on MEDLINE citations. It is used only in cataloging)

Personal Narratives was replaced by Autobiography

Related to this Publication Type change above, there was a MeSH Heading change where Autobiography was replaced by Autobiography as Topic. Autobiography was previously used by indexers for both articles about the subject of autobiographies as well as articles that were themselves autobiographies. Following up on this, during Year-End Processing NLM identified citations within the MEDLINE set which were changed to the MeSH Heading Autobiography as Topic that were really the Publication Type meaning. For these citations, the MeSH Heading was deleted and the new Publication Type was added.

While not to be used for indexing or cataloging, searchers will find these two new Publication Types useful to collect all indented PTs in the automatic explosions:

1. Electronic Supplementary Materials

- Video-Audio Media
 - Interactive Tutorial
 - Webcasts

2. Research Support, U.S. Government

- Research Support, American Recovery and Reinvestment Act
- Research Support, U.S. Gov't, Non-P.H.S.
 - Research Support, U.S. Gov't, P.H.S.
 - Research Support, N.I.H., Extramural
 - Research Support, N.I.H., Intramural

Notable MeSH Changes and Related Impact on Searching

Acute Kidney Injury is not to be used for traumatic kidney injury which is indexed as Kidney/injuries.

For Counterfeit Drugs, if the meaning of the article is the action of counterfeiting, then indexers will coordinate with the MeSH Heading, Fraud.

Stem Cell Research is used in the sense of a specialty heading (which includes the topics of ethical, legal, moral, social, or religious aspects); it is not to be used routinely for research involving stem cells.

Note the introduction of Supplementary Concept Records (SCR) for diseases. About 3,000 diseases were added as SCRs in addition to 880 existing MeSH Headings that were enhanced with Entry Terms as the NLM MeSH Section incorporated terminology provided by the NIH Office of Rare Diseases. All SCR diseases are mapped to a MeSH Heading, e.g.:

SCR Disease: Anders' syndrome
MeSH Heading map: Adiposis Dolorosa

That is, all citations for articles indexed with Anders' syndrome will also be indexed with the MeSH Heading, Adiposis Dolorosa. See the forthcoming article, *PubMed Notes – 2011*, for PubMed searching and display of Supplementary Concept diseases.

Entry Combination Revisions

This year during YEP, NLM will again retrospectively replace certain MeSH heading/subheading combinations, known as Entry Combinations, with the new precoordinated MeSH heading. If you get no retrieval for a MeSH Heading/subheading combination check the heading in the 2011 MeSH Browser to see if the Entry Combination information indicates a different term.

There are 96 new Entry Combinations new for 2011 listed in a separate table.

Additional Changes to MEDLINE and OLD MEDLINE Data

1. Number of References

Effective October 1, 2010 NLM discontinued the practice of including the number of bibliographic references listed in articles cited in MEDLINE. NLM had included the number of references (displayed in the PubMed MEDLINE format as RF) for the following Publication Types:

- Review
- Consensus Development Conference
- Consensus Development Conference, NIH
- Interactive Tutorial
- Meta-Analysis

This change in policy is prospective only; we will not remove number of references data from existing citations.

2. MEDLINE Character Set

Effective in September 2010, NLM now accepts for newly created MEDLINE citations any UTF-8 character in the Latin (Roman) and Greek scripts as well as mathematical and other symbols commonly found in biomedical literature. Other scripts such as Chinese, Japanese or Korean are not supported. For more details see the article, *MEDLINE® Character Set Expansion*.

3. Structured Abstracts

With the export of the baseline files after YEP to licensees, the journal citations identified as "Structured Abstracts" will have their author abstracts physically divided into segments. Abstracts not defined as Structured will export as they always have done.

4. Versioning Information

In order to accommodate a new model of publishing referred to as *versioning*, whereby multiple versions of the same online article are released in order to support the rapid prototyping of research, NLM will, beginning with the 2011 production year, create an individual citation for each article's version and associate the versions via new attributes for the MEDLINECitation and PMID elements. This redesign is in anticipation of this new publication model; only a few journals have been identified that may use this model. One example is the journal, *PLoS Currents*.

5. Disease Supplementary Concept Records

Currently NLM exports MeSH SCR chemical and drug terms (class 1) and protocol terms (class 2) in the MEDLINE ChemicalList fields. Beginning with 2011 NLM will export Protocol and Disease terms (SCR classes 2 and 3) in the new SupplMeshList fields, leaving only class 1 (true chemical terms) in the ChemicalList.

6. Geographic MeSH Terms

Beginning with 2011 NLM will separate out MeSH geographic terms from other MeSH descriptors by use of a Type attribute in the MEDLINE DTD.

7. Cites Data

In the fall of 2010 NLM processed files to add new or changed cites data to MEDLINE citations. We added 5.5 million cites. This update added to the initial cites load we received in the fall of 2009. There are now about 32 million cites on about 1,297,000 citations.

Cites data contain PMIDs and source data for items in the bibliography or list of references at the end of an article that is deposited in PubMed Central® (PMC) and whose citation record is in the NLM Data Creation and Maintenance System (DCMS). It is possible for a citation to be present in the list of references and yet the PMID is not included in the Cites list because it is not present in the DCMS.

8. Article Title Ending Punctuation

In October 2010 NLM maintained over 4 million citations to bring the ending punctuation for non-English language citation article titles in line with the current bibliographic standard. All non-English citations now end with a period outside the closing bracket in the article title field. No Last Revision Date was added to these citations because of the large number involved.

By Sara Tybaert
MEDLARS Management Section

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December 02, 2010 [posted]

Revised Entry Combinations Table — 2011

Return to *MEDLINE® Data Changes — 2011* article.

Previous MeSH Heading/Subheading (Entry Combination)	Replaced-by Heading for 2011
3-Oxo-5-alpha-Steroid 4-Dehydrogenase/antagonists & inhibitors	5-alpha Reductase Inhibitors
5-Lipoxygenase-Activating Proteins/antagonists & inhibitors	5-Lipoxygenase-Activating Protein Inhibitors
Adenosine Deaminase/antagonists & inhibitors	Adenosine Deaminase Inhibitors
Arachidonate 12-Lipoxygenase/antagonists & inhibitors	Lipoxygenase Inhibitors
Arachidonate 15-Lipoxygenase/antagonists & inhibitors	Lipoxygenase Inhibitors
Arachidonate 5-Lipoxygenase/antagonists & inhibitors	Lipoxygenase Inhibitors
ATP-Binding Cassette Transporters/deficiency	Adrenoleukodystrophy
Cardiac Resynchronization Therapy/instrumentation	Cardiac Resynchronization Therapy Devices
Cyclic Nucleotide Phosphodiesterases, Type 3/antagonists & inhibitors	Phosphodiesterase 3 Inhibitors
Cyclic Nucleotide Phosphodiesterases, Type 4/antagonists & inhibitors	Phosphodiesterase 4 Inhibitors
Cyclic Nucleotide Phosphodiesterases, Type 5/antagonists & inhibitors	Phosphodiesterase 5 Inhibitors
Dipeptidyl Peptidase 4/antagonists & inhibitors	Dipeptidyl-Peptidase IV Inhibitors
DNA Topoisomerases/antagonists & inhibitors	Topoisomerase Inhibitors
DNA Topoisomerases, Type I/antagonists & inhibitors	Topoisomerase I Inhibitors
DNA Topoisomerases, Type II/antagonists & inhibitors	Topoisomerase II Inhibitors

Factor VIIIa/deficiency	Hemophilia A
GABA Plasma Membrane Transport Proteins/antagonists & inhibitors	GABA Uptake Inhibitors
Health Facilities/organization & administration	Health Facility Administration
Lipoxygenases/antagonists & inhibitors	Lipoxygenase Inhibitors
Receptor, Adenosine A1/agonists	Adenosine A1 Receptor Agonists
Receptor, Adenosine A1/antagonists & inhibitors	Adenosine A1 Receptor Antagonists
Receptor, Adenosine A2A/agonists	Adenosine A2 Receptor Agonists
Receptor, Adenosine A2A/antagonists & inhibitors	Adenosine A2 Receptor Antagonists
Receptor, Adenosine A2B/agonists	Adenosine A2 Receptor Agonists
Receptor, Adenosine A2B/antagonists & inhibitors	Adenosine A2 Receptor Antagonists
Receptor, Adenosine A3/agonists	Adenosine A3 Receptor Agonists
Receptor, Adenosine A3/antagonists & inhibitors	Adenosine A3 Receptor Antagonists
Receptor, Angiotensin, Type 2/antagonists & inhibitors	Angiotensin II Type 2 Receptor Blockers
Receptor, Serotonin,5-HT1A/agonists	Serotonin 5-HT1 Receptor Agonists
Receptor, Serotonin, 5-HT1A/antagonists & inhibitors	Serotonin 5-HT1 Receptor Antagonists
Receptor, Serotonin, 5-HT1B/agonists	Serotonin 5-HT1 Receptor Agonists
Receptor, Serotonin, 5-HT1B/antagonists & inhibitors	Serotonin 5-HT1 Receptor Antagonists
Receptor, Serotonin, 5-HT1D/agonists	Serotonin 5-HT1 Receptor Agonists
Receptor, Serotonin, 5-HT1D/antagonists & inhibitors	Serotonin 5-HT1 Receptor Antagonists
Receptor, Serotonin, 5-HT2A/agonists	Serotonin 5-HT2 Receptor Agonists
Receptor, Serotonin, 5-HT2A/antagonists & inhibitors	Serotonin 5-HT2 Receptor Antagonists
Receptor, Serotonin,5-HT2B/agonists	Serotonin 5-HT2 Receptor Agonists
Receptor, Serotonin, 5-HT2B/antagonists & inhibitors	Serotonin 5-HT2 Receptor Antagonists
Receptor, Serotonin, 5-HT2C/agonists	Serotonin 5-HT2 Receptor Agonists

Receptor, Serotonin, 5-HT _{2C} /antagonists & inhibitors	Serotonin 5-HT ₂ Receptor Antagonists
Receptors, Adenosine A ₂ /agonists	Adenosine A ₂ Receptor Agonists
Receptors, Adenosine A ₂ /antagonists & inhibitors	Adenosine A ₂ Receptor Antagonists
Receptors, Adrenergic, alpha-1/agonists	Adrenergic alpha-1 Receptor Agonists
Receptors, Adrenergic, alpha-1 /antagonists & inhibitors	Adrenergic alpha-1 Receptor Antagonists
Receptors, Adrenergic, alpha-2/agonists	Adrenergic alpha-2 Receptor Agonists
Receptors, Adrenergic, alpha-2/antagonists & inhibitors	Adrenergic alpha-2 Receptor Antagonists
Receptors, Adrenergic, beta-1/agonists	Adrenergic beta-1 Receptor Agonists
Receptors, Adrenergic, beta-1/antagonists & inhibitors	Adrenergic beta-1 Receptor Antagonists
Receptors, Adrenergic, beta-2/agonists	Adrenergic beta-2 Receptor Agonists
Receptors, Adrenergic, beta-2/antagonists & inhibitors	Adrenergic beta-2 Receptor Antagonists
Receptors, Adrenergic, beta-3/agonists	Adrenergic beta-3 Receptor Agonists
Receptors, Adrenergic, beta-3/antagonists & inhibitors	Adrenergic beta-3 Receptor Antagonists
Receptors, Androgen/agonists	Androgens
Receptors, Androgen/antagonists & inhibitors	Androgen Receptor Antagonists
Receptors, Angiotensin/antagonists & inhibitors	Angiotensin ReceptorAntagonists
Receptors, GABA-A/agonists	GABA-A Receptor Agonists
Receptors, GABA-A/antagonists & inhibitors	GABA-A Receptor Antagonists
Receptors, GABA-B/agonists	GABA-B Receptor Agonists
Receptors, GABA-B/antagonists & inhibitors	GABA-B Receptor Antagonists
Receptors, Purinergic /agonists	Purinergic Agonists
Receptors, Purinergic/antagonists & inhibitors	Purinergic Antagonists
Receptors, Purinergic P ₁ /agonists	Purinergic P ₁ Receptor Agonists
Receptors, Purinergic P ₁ /antagonists & inhibitors	Purinergic P ₁ Receptor Antagonists

Receptors, Purinergic P2/agonists	Purinergic P2 Receptor Agonists
Receptors, Purinergic P2/antagonists & inhibitors	Purinergic P2 Receptor Antagonists
Receptors, Purinergic P2X/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2X1/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X1/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2X2/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X2/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2X3/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X3/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2X4/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X4/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2X5/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X5/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2X7/agonists	Purinergic P2X Receptor Agonists
Receptors, Purinergic P2X7/antagonists & inhibitors	Purinergic P2X Receptor Antagonists
Receptors, Purinergic P2Y/agonists	Purinergic P2Y Receptor Agonists
Receptors, Purinergic P2Y/antagonists & inhibitors	Purinergic P2Y Receptor Antagonists
Receptors, Purinergic P2Y1/agonists	Purinergic P2Y Receptor Agonists
Receptors, Purinergic P2Y1/antagonists & inhibitors	Purinergic P2Y Receptor Antagonists
Receptors, Purinergic P2Y12/agonists	Purinergic P2Y Receptor Agonists
Receptors, Purinergic P2Y12/antagonists & inhibitors	Purinergic P2Y Receptor Antagonists
Receptors, Purinergic P2Y2/agonists	Purinergic P2Y Receptor Agonists
Receptors, Purinergic P2Y2/antagonists & inhibitors	Purinergic P2Y Receptor Antagonists

Receptors, Serotonin, 5-HT1/agonists	Serotonin 5-HT1 Receptor Agonists
Receptors, Serotonin, 5-HT1/antagonists & inhibitors	Serotonin 5-HT1 Receptor Antagonists
Receptors, Serotonin, 5-HT2/agonists	Serotonin 5-HT2 Receptor Agonists
Receptors, Serotonin, 5-HT2/antagonists & inhibitors	Serotonin 5-HT2 Receptor Antagonists
Receptors, Serotonin, 5-HT3/agonists	Serotonin 5-HT3 Receptor Agonists
Receptors, Serotonin, 5-HT3/antagonists & inhibitors	Serotonin 5-HT3 Receptor Antagonists
Receptors, Serotonin, 5-HT4/agonists	Serotonin 5-HT4 Receptor Agonists
Receptors, Serotonin, 5-HT4/antagonists & inhibitors	Serotonin 5-HT4 Receptor Antagonists
Sterol 14-Demethylase/antagonists & inhibitors	14-alpha Demethylase Inhibitors

Revised Entry Combinations Table — 2011. NLM Tech Bull. 2010 Nov-Dec;(377):e12b.

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December 02, 2010 [posted]

Unified Medical Language System® (UMLS®) News: UMLS Terminology Services (UTS) Beta Launch, 2010AB DVD Requests, 2010 Annual Report

The UMLS Terminology Services (UTS) beta version is available at <https://uts.nlm.nih.gov>. The UTS, which will soon replace the UMLS SKS, includes a new license request interface and incorporates the browsing and API features of the UMLS SKS. To retain access to UMLS-related applications and UMLS resources after the UMLS SKS is retired, you will need to enter into a new UMLS Metathesaurus License with the National Library of Medicine® (NLM®).

UMLS Terminology Services (UTS) Beta Launch Details

- For instructions on requesting a license and accessing the UTS, see [How to License and Access the Unified Medical Language System® \(UMLS®\) Data](#). License requests must be submitted through the new UTS interface. After NLM approves your license request, your UTS account is established.
- UTS accounts established during the beta launch period will remain active after the UMLS SKS is retired (date to be announced).
- The UMLS SKS will remain operational during the beta launch period. You may continue to use your current UMLS SKS Login ID to browse and download UMLS and related terminology resources in the current UMLS SKS.
- Each UTS account equates to only one username. Unlike the current UMLS SKS, multiple people are not attached to a single license; each UTS user needs his own license and username.
- The UTS has a My Profile feature that lets you manage your account information.
- Application developers can verify the license status of their users.
 - NLM will provide a RESTful interface that will allow developers to verify that users have an active license code. Application developers must be authorized distributors of UMLS data to use this service.
 - More information is available under *Technical* in the *Documentation* menu.
- Online training resources for the UTS are available from the User Education section of the UMLS homepage.

DVD Requests

- You must have an active license through the new UTS interface to receive the UMLS 2010AB release DVD and future DVDs. 2010AB DVDs are expected to be available in mid-December.
- *To request or cancel a DVD:* Sign in to the UTS, click 'My Profile.' Click on 'Edit Profile,' check or uncheck

the box, 'I would like to receive a DVD containing the UMLS data.' Click 'Save Profile' to finish.

Annual Report

- The 2010 Annual Report will be completed through your UTS account. In December, NLM will e-mail instructions on fulfilling the reporting requirement to all users licensed through the UTS.
- The Annual Report is required per Section 5 of the Metathesaurus License Agreement. If the Annual Report is not completed by the deadline, you forfeit access to the UTS and your license will be terminated.

Questions and Concerns

NLM continues work to improve access to UMLS resources. Questions and comments about the UTS beta launch should be sent to NLM Customer Service with the subject line "UTS Beta Launch."

By **Victoria Wilder**

MEDLARS Management Section

Wilder V. Unified Medical Language System® (UMLS®) News: UMLS Terminology Services (UTS) Beta Launch, 2010AB DVD Requests, 2010 Annual Report. NLM Tech Bull. 2010 Nov-Dec;(377):e13.

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December 09, 2010 [posted]

Medical History Comes to Life through First Person Accounts in National Library of Medicine® Digital Oral History Collections

[Editor's Note: This is a reprint of an announcement published on the NLM Web site on December 1, 2010. To be notified of announcements like this subscribe to NLM-Announces e-mail list.]

New Web Interface Allows Easier Searching of Text and Audio Content

The National Library of Medicine History of Medicine Division is pleased to announce the release of a new Web interface to its oral history collections, as part of its growing electronic texts program. Content includes digital editions of transcripts and any accompanying audio content when feasible. Users can browse content by title, interviewee name, and subject. Full-text searching is available across all sub-collections, across each sub-collection, and within each transcript.

Currently the site contains 107 interviews in two sub-collections consisting of over 13,000 pages and 80 hours of audio content. These interviews represent the majority of HMD's oral histories conducted by HMD staff during the 1960s when HMD had an active oral history program. HMD still conducts the occasional interview for specific projects, but the majority of our post-1970 holdings consist of interviews that are the product of external researchers or practitioners, or in our capacity as the service point for programs such as that of the Food and Drug Administration History Office.

Some of the topics covered include: the development of the Johns Hopkins School of Medicine by "Big Four" members including influential surgeon William Halsted and renowned gynecologist Howard Kelly; Guy Tugwell and George Larrick discussing their roles in the 1938 and 1951 revisions to the Pure Food and Drug Act; the practice of surgery in the United States; and medical economics in the 1930s. There is also a series of 13 interviews with homeopathy physicians, conducted in 1968. There is a separate sub-collection of interviews with primary care physicians (internists) conducted by Fitzhugh Mullan in the 1990s as part of research conducted for his book, *Big Doctoring in America: Profiles in Primary Care*.

Users can also hear Vivien Thomas, the celebrated African American surgical technician, speak about working with surgeon Alfred Blalock to develop procedures to treat blue baby syndrome, US Senator Lister Hill (a key figure in the creation and passage of the National Library of Medicine Act of 1956) discussing his family, life as a politician, and health care legislation, and a short recording of celebrated English nurse Florence Nightingale.

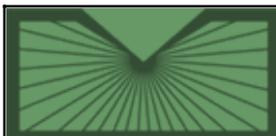
Future content will include interviews conducted as part of the National Information Center on Health Services Research and Health Care Technology (NICHSR) History of Health Services Research project, oral histories from the FDA active oral history program, and the Medical Library Association.

Transcripts are marked up following the Text Encoding Initiative's (TEI) XML encoding level 1 parameters. Audio content is delivered via a custom Flash® player and is downloadable as an MP3. Archival WAV files are available upon request.

Medical History Comes to Life through First Person Accounts in National Library of Medicine® Digital Oral History Collections. NLM Tech Bull. 2010 Nov-Dec;(377):e14.

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December 09, 2010 [posted]

NLM® History of Medicine Division Announces Completion of Project to Catalog Imperial Russian Era Holdings

[Editor's Note: This is a reprint of an announcement published on the NLM Web site on December 3, 2010. To be notified of announcements like this subscribe to NLM-Announces e-mail list.]

Pre-1917 Collection Includes Pamphlets and Dissertations on Spectrum of Medical Topics, Including Some by Future Nobel Laureates

The History of Medicine Division of the National Library of Medicine® is pleased to announce the completion of a five-year project to catalog its Imperial Russian Era (pre-1917) collection of 5,000 pamphlets and dissertations for degrees in medicine, pharmacy and veterinary science.

The core of the NLM collection is over 3,000 medical dissertations submitted to the Imperial Medical-Chirurgical Academy (later, the Imperial Military Medical Academy) in St. Petersburg. Dating from 1849 to 1915, they comprise the most complete run known to exist outside of Russia.

In general, the dissertations present the results of clinical medical research and reflect the common Nineteenth Century concerns of epidemic and war, and changing ideas of hygiene and health care. Pharmacological works investigated the therapeutic effects of drugs and veterinary treatises focused on the diseases of dogs, horses and livestock.

Dissertations became a requirement for medical degrees in 1858, during the widespread medical education reforms that resulted from the defeat of the Imperial Russian Army in the Crimean War (1853-1856). Rampant disease among the troops, rather than actual combat, produced exceedingly high numbers of casualties. Military officials blamed the high mortality rate, and the loss of the war, on the scarcity of military physicians and the poor quality of their training.

The Academy eventually produced a Nobel Laureate. In 1883, Ivan Petrovich Pavlov (1849-1936) wrote his doctoral thesis on the centrifugal nerves of the heart. His general observations of the physiology of the nervous system laid the groundwork for his later investigations into the role of the nervous system in digestion, for which he was awarded the Nobel Prize in Medicine in 1904.

In the 1870s, the Academy agreed to admit women, due to a military need for female physicians to treat the wives of Muslim Bashkir troops. Syphilis was widespread and, for religious reasons, the women could not be seen by male practitioners.

Varvara Kashevarova-Rudneva (1844?-1899) became the Academy's first female graduate in 1876. A certified midwife, she wrote her dissertation on the pathology of the vagina, and published the first description of vaginal

sarcoma.

The pamphlets in the NLM collection cover a wide variety of medical topics, including works on alcoholism, anatomy, cholera, cultured milk products, mental or neurological disorders, metabolism, public hygiene, syphilis and tuberculosis.

The oldest item is an 1829 illustrated case report of a congenital heart defect by the eminent Russian anatomist and surgeon, Ilya Vasilevich Buyalski (1789-1866). Credited with being the first Russian surgeon to use anesthesia, Buyalski also invented several surgical instruments and developed an embalming technique to preserve anatomical specimens.

In 1906, Ilija Metchnikov (1845-1916) wrote a pamphlet entitled *On Yogurt*, which described his observation that yogurt was beneficial for maintaining a proper bacterial balance in the intestines. Metchnikov's pioneering recommendation that yogurt be added to one's daily diet to promote a healthy immune system is a mainstay of modern probiotic diets. In 1908 Metchnikov was awarded the Nobel Prize for Medicine for his work on the role of phagocytes in the immune system.

The struggles and triumphs of 19th century women physicians are vividly described in Ekaterina Slanskaia's (1853-1904?) 1894 memoir, *House Calls: A Day in the Practice of a Duma Woman Doctor in St. Petersburg*, published posthumously in 1904. Female medical graduates were generally hired by cities to attend to the health problems of the lower classes. Cities preferred to hire women, in part, because they would work for lower salaries, and because they were thought to be more effective with women and children, who were often too modest or too scared to seek help from male medical professionals.

The pamphlets and dissertations complement the NLM collection of 2,000 book-length monographs from the Imperial Russian Era.

As part of the cataloging project, bibliographic records were created by contract staff from VNS Group in the NLM Catalog or LocatorPlus, and distributed to licensees of NLM bibliographic data.

NLM® History of Medicine Division Announces Completion of Project to Catalog Imperial Russian Era Holdings. NLM Tech Bull. 2010 Nov-Dec;(377):e15.

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December 09, 2010 [posted]

December 13, 2010 [Editor's note added]

December 14, 2010 [Note added]

PubMed® Notes — 2011

The 2011 PubMed system will be available in mid-December. Links to other articles pertinent to the new system are provided to the right.

There are a few changes to PubMed this year:

- Changes to the **Limits** page were reported in the article, *Comings and Goings for PubMed® Limits*.
- Users of **XML data** may want to see additional information including DTD and XML changes for the NLM 2011 production year:
http://www.nlm.nih.gov/bsd/licensee/announce/2010.html#d08_16

XML users can keep up to date by subscribing to an announcement mailing list at this site: <http://www.ncbi.nlm.nih.gov/mailman/listinfo/utilities-announce>.
- The Abstract display will be modified to accommodate changes to **Supplementary Concept Records** in the MeSH® vocabulary (see below).

Other pertinent articles:

[MEDLINE/PubMed Year-End Processing Activities](#)

[2011 MeSH Now Available](#)

[Cataloging News — 2011](#)

[MEDLINE Data Changes — 2011](#)

[PubMed Notes — 2011](#)

[What's New for 2011 MeSH](#)

[Newly Maintained MEDLINE for 2011 MeSH Now Available in PubMed](#)

PubMed Abstract Display Modified for Supplementary Concepts

The MeSH Vocabulary includes nearly 200,000 records known as the Supplementary Concept Records (SCRs). Until recently these were primarily records for drugs and substances plus a small percentage of protocols. Beginning with 2011 MeSH, SCR records will also include disease terms that are not MeSH headings as explained in the forthcoming article, *What's New for 2011 MeSH®*. [Editor's Note: This article was published on December 10, 2010.]

PubMed will display SCR terms in the expandable section for supplemental information of the Abstract format as follows:

- Chemicals and substances will continue to display under the header, **Substances**.
- Protocols and disease terms will display under the new header, **Supplementary Concepts**.

All SCRs will display on the MEDLINE format with the RN field tag.

All SCRs can be searched using these search tags:

[supplementary concept]
[substance name]
[nm]

Example: kindler syndrome [nm]

*[Note: The changes described above appeared in PubMed on December 13, 2010. At the same time the link to the Journals Database on the PubMed homepage was replaced with the link, **Journals in NCBI Databases** which connects to the NLM Catalog (see: NLM Catalog: New Search Features for Journals Cited in Entrez Databases.)]*

By Annette M. Nahin
MEDLARS Management Section

Nahin AM. PubMed® Notes — 2011. NLM Tech Bull. 2010 Nov-Dec;(377):e16.

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December 10, 2010 [posted]

What's New for 2011 MeSH®

Overview of Vocabulary Development and Changes for 2011 MeSH

- 573 Descriptors added
- 54 Descriptor terms replaced with more up-to-date terminology
- 19 Descriptors deleted

Totals by Type of Terminology

- 26,142 Descriptors
- 83 Qualifiers
- 197,479 Supplementary Concept Records (SCRs)

Helpful Links

Please consult the 2011 online Introduction to MeSH for more details. Lists of new and changed vocabulary are available at these links:

[MeSH Vocabulary Changes](#)
[New Descriptors - 2011](#)
[Changed Descriptors - 2011](#)
[Deleted Descriptors - 2011](#)
[New Descriptors by Tree Subcategory - 2011](#)

In addition, files of MeSH 2011 vocabulary are also available for downloading.

Rare Diseases

MeSH continued the work begun in 2010 of merging the list of rare disease terms maintained by the Office of Rare Diseases Research (ORDR) into the MeSH vocabulary. The rare disease terms that matched existing MeSH descriptors were merged with those MeSH descriptors. The remainder were introduced as Supplementary Concept Records (Class 3) in MeSH 2011.

As with all SCRs, each of these rare disease SCR terms was mapped to ("Heading Mapped to") at least one current MeSH disease term to help searching and indexing. For example, Snyder Robinson Syndrome is a new disease SCR that is mapped to the MeSH descriptor Mental Retardation, X-Linked. Both of these terms will appear in a MEDLINE citation if the SCR is assigned by the indexer.

Other pertinent articles:

[MEDLINE/PubMed Year-End Processing Activities](#)

[2011 MeSH Now Available](#)

[Cataloging News 2011](#)

[MEDLINE Data Changes — 2011](#)

[PubMed Notes — 2011](#)

[What's New for 2011 MeSH](#)

[Newly Maintained MEDLINE for 2011 MeSH Now Available in PubMed](#)

Because rare diseases are defined as having a prevalence of fewer than 200,000 affected individuals in the United States they traditionally received less attention and are sometimes called orphan diseases. Having these terms available for indexing purposes will enhance a more precise retrieval of the rare disease articles and contribute to their identification.

Algae

Taxonomically algae are polyphyletic and therefore the descriptor Algae no longer easily fits into the MeSH trees. So for 2011 MeSH, the descriptor Algae was deleted and its children distributed among the appropriate eukaryotic trees. Compare the placement for Brown Algae:

2010

Eukaryota [B01]

Algae [B01.040]

Algae, Brown [B01.040.050] +
Algae, Golden-Brown [B01.040.075] +
Algae, Green [B01.040.080] +
Algae, Red [B01.040.100] +
Blood-Borne Pathogens [B01.040.120]
Characeae [B01.040.150] +
Cryptophyta [B01.040.160]
Cyanophora [B01.040.170]
Diatoms [B01.040.185]
Lichens [B01.040.500] +
Oomycetes [B01.040.650] +
Seaweed [B01.040.750] +

2011

Eukaryota [B01]

Stramenopiles [B01.750]

Phaeophyta [B01.750.600] (Brown Algae)

Ascophyllum [B01.750.600.040]
Fucus [B01.750.600.212]
Kelp [B01.750.600.425]
Laminaria [B01.750.600.450]
Macrocystis [B01.750.600.480]
Sargassum [B01.750.600.725]
Undaria [B01.750.600.800]

Sex Disorders

Based on the updated classification and new nomenclature recommendations put forth by the 2006 International Intersex Consensus Conference¹, the Disorders of Sex Development (previously Sex Differentiation Disorders) trees and descriptors were revised and updated.

2010

Sex Differentiation Disorders [C12.706.842]

Gonadal Dysgenesis [C12.706.842.309] +
Hermaphroditism [C12.706.842.316] +
Kallmann Syndrome [C12.706.842.425]
Klinefelter Syndrome [C12.706.842.454]

2011

Disorders of Sex Development [C12.706.316]

46, XX Disorders of Sex Development [C12.706.316.064] +

46, XY Disorders of Sex Development [C12.706.316.096] +

Adrenogenital Syndrome [C12.706.316.129] +

Gonadal Dysgenesis [C12.706.316.309] +

Ovotesticular Disorders of Sex Development [C12.706.316.343]

Sex Chromosome Disorders of Sex Development [C12.706.316.795] +

¹Houk CP, Lee PA. Consensus statement on terminology and management: disorders of sex development. *Sex Dev.* 2008;2(4-5):172-80. Epub 2008 Nov 5. Review. PubMed PMID: 18987491.

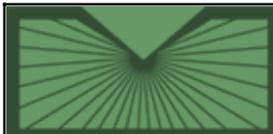
By Jacque-Lynne Schulman

MeSH Section

Schulman JL. *What's New for 2011 MeSH®. NLM Tech Bull.* 2010 Nov-Dec;(377):e17.

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NLM Technical Bulletin

National Library of Medicine | National Institutes of Health

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December 14, 2010 [posted]

Newly Maintained MEDLINE® for 2011 MeSH® Now Available in PubMed®

As of December 13, PubMed MEDLINE citations, the MeSH database, and the NLM Catalog were updated to reflect 2011 MeSH. The MeSH translation tables were updated December 14. Now that end-of-year activities are complete, MEDLINE/PubMed may be searched using 2011 MeSH vocabulary. See MEDLINE® Data Changes - 2011 for details on data changes as well as links to other pertinent MEDLINE and MeSH-related articles from the sidebar on the right. On December 14, NLM® resumed daily (Tuesday-Saturday) MEDLINE updates to PubMed (including the backlog of citations indexed since November 18 with 2011 MeSH).

Newly Maintained MEDLINE® for 2011 MeSH® Now Available in PubMed®. NLM Tech Bull. 2010 Nov-Dec;(377):e18.

Other pertinent articles:

[MEDLINE/PubMed Year-End Processing Activities](#)

[2011 MeSH Now Available](#)

[Cataloging News — 2011](#)

[MEDLINE Data Changes — 2011](#)

[PubMed Notes — 2011](#)

[What's New for 2011 MeSH](#)

[Newly Maintained MEDLINE for 2011 MeSH Now Available in PubMed](#)

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December 14, 2010 [posted]

NLM Catalog: New Search Features for Journals Cited in Entrez Databases

On December 13, 2010, NLM launched a redesigned NLM Catalog that implements new search and display options related to journal searching. Most of these options were originally available in the now retired Entrez Journals Database. The new options are available either from Limits or directly in the search box. In addition, NLM Catalog has a new display format available for those journals cited in Entrez databases, called Journal, that will include all the MEDLINE® indexing related data from the old Journals Database Full display as well as some new data. See the article, *NLM® Catalog and Journals Databases Merge*, for additional information.

See Table 1 for a list of new NLM Catalog search options for searching journals in the NCBI databases.

Table 1: New Search Options in NLM Catalog for Journals

Data Search Field	Description	Search Tag	How to search:
Acid-Free	Journals identified as having some or all of the journal issues printed on acid-free paper and have a notice in the journal to that effect. Field Name: Acid-Free	N.A.	acidfree
Broad Subject Terms	Subject terms are assigned by NLM to MEDLINE journals to describe the journal's overall scope. All of these subject terms are MeSH headings.	[st]	Two methods: <ul style="list-style-type: none"> • Direct search: nursing [st] <p>OR</p> <ul style="list-style-type: none"> • Link to Broad Subject Terms from the NLM Catalog homepage. On the listing of terms assigned to MEDLINE journals, click on a term.

Current Format Status	This search retrieves a list of journals that NLM has acquired only in the electronic version.	[cfs]	Search: electronic only [cfs] Limits – Journal Subsets: "Journals in Electronic only format"
Version Currently Indexed	Journals identified as being indexed from either the print or electronic version. The value identifies the version of the journal that NLM® currently indexes; for titles no longer indexed the value is the last version used for indexing. Field Name: Version Indexed.	N.A.	Note: Combine with the search term "currentlyindexed," or select that option from Limits, to restrict to currently indexed journals. For journals indexed from Print version: currentlyindexedprint For journals indexed from Electronic version: currentlyindexedelectronic
Current Indexing Status	A journal that is currently indexed has MeSH terms assigned to citations for articles that are within scope for MEDLINE. A journal that is not currently indexed may be in that status because NLM chose to cease indexing the title; the journal ceased publishing; or the journal's title changed and indexing continued with the new title.		currentlyindexed notcurrentlyindexed
Current Subset	This value reflects the MEDLINE subset to which this journal is currently assigned.		jsubset? where ? is the citation subset for the journal
End Year	Last year of publication of a journal. Field Name: Publication End Year	[eyr]	2001 [eyr] To search a range of years: 1966:2007 [eyr]
Indexed For Subset	Currently indexed journals with specific journal citation subset(s) assigned. Field Name: Current Subset	N.A.	jsubset? where ? represents the subset value jsubsetaim - retrieves currently indexed list of Core Clinical journals jsubsetd - retrieves currently indexed list of Dental journals jsubsetim - retrieves currently indexed list of Index Medicus® journals jsubsetk - retrieves currently indexed

			list of Consumer Health journals jsubsetn - retrieves currently indexed list of Nursing journals Note: All of these are also available as options under Limits.
Indexing Treatment	Journals currently selectively or fully indexed. The selectively indexed search retrieves general science, chemistry, and physics journals where the articles are not all within the life sciences scope for MEDLINE.	N.A.	Fully indexed: currentindexingtreatmentfull Selectively indexed: currentindexingtreatmentselective
ISO Abbreviation	International Organization for Standardization abbreviation.	[iso]	jama [iso]
ISSN	International Standard Serial Number.	[is]	2151-464x [is]
ISSN Type	Print or Electronic ISSNs Field Name: ISSN; explanatory word displays in the parentheses after the number.	[is]	print [is] electronic [is] linking [is]
Language	Language in which the journal articles are published. Field Name: Language	[la]	eng [la] english [la] Note: Language is also available under Limits.
Country of Publication	Most recent country of publication of the journal. Field Name: Place of Publication	[pl]	greece [pl]
PubMed Central® Holdings	Journals currently in PubMed Central (PMC) and forthcoming PMC journals. Field Name: PMC Availability	N.A.	PubMed Central Journals: journalspmc Includes journals that ceased depositing in PMC. PubMed Central forthcoming journals: journalspmcforthcoming Note: Also available under Limits
Start Year	First year of publication of the journal. Field Name: Publication Start Year	[syr]	2007 [syr] To search a range of years: 1966:2007 [syr]

Title Abbreviation	NLM Title Abbreviation.	[ta]	lancet [ta]
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ISSN Type

Please be advised that NLM follows the practice of a single bibliographic record when cataloging serials (see *Cataloging Changes for Serials Issued Simultaneously in Print and Online*). Information about all media versions of a journal are in one record. For example, a serial published both in print and online would have both a print ISSN and an electronic ISSN in one NLM catalog record. If the print version subsequently ceases for a journal that was being published both in print and online, then the print ISSN remains in the NLM catalog record, and NLM adds a clarifying note to the 911 MARC field that can be viewed in LocatorPlus®. Any NLM Catalog database searches including the tagged search terms, print [is] or electronic [is], may be affected by this policy. Accurate and current data in the ISSN fields are dependent on the publisher providing the appropriate ISSN for a journal.

Journal List Searching

There are various ways to generate journal lists:

1. Choose from the Journal Subsets menu available from the NLM Catalog Limits (see Figure 1). Examples include:
 - PubMed Central Journals
 - Journals indexed from the electronic version
 - Nursing journals

Users can combine these subsets with search terms or other limits, such as, country of publication.

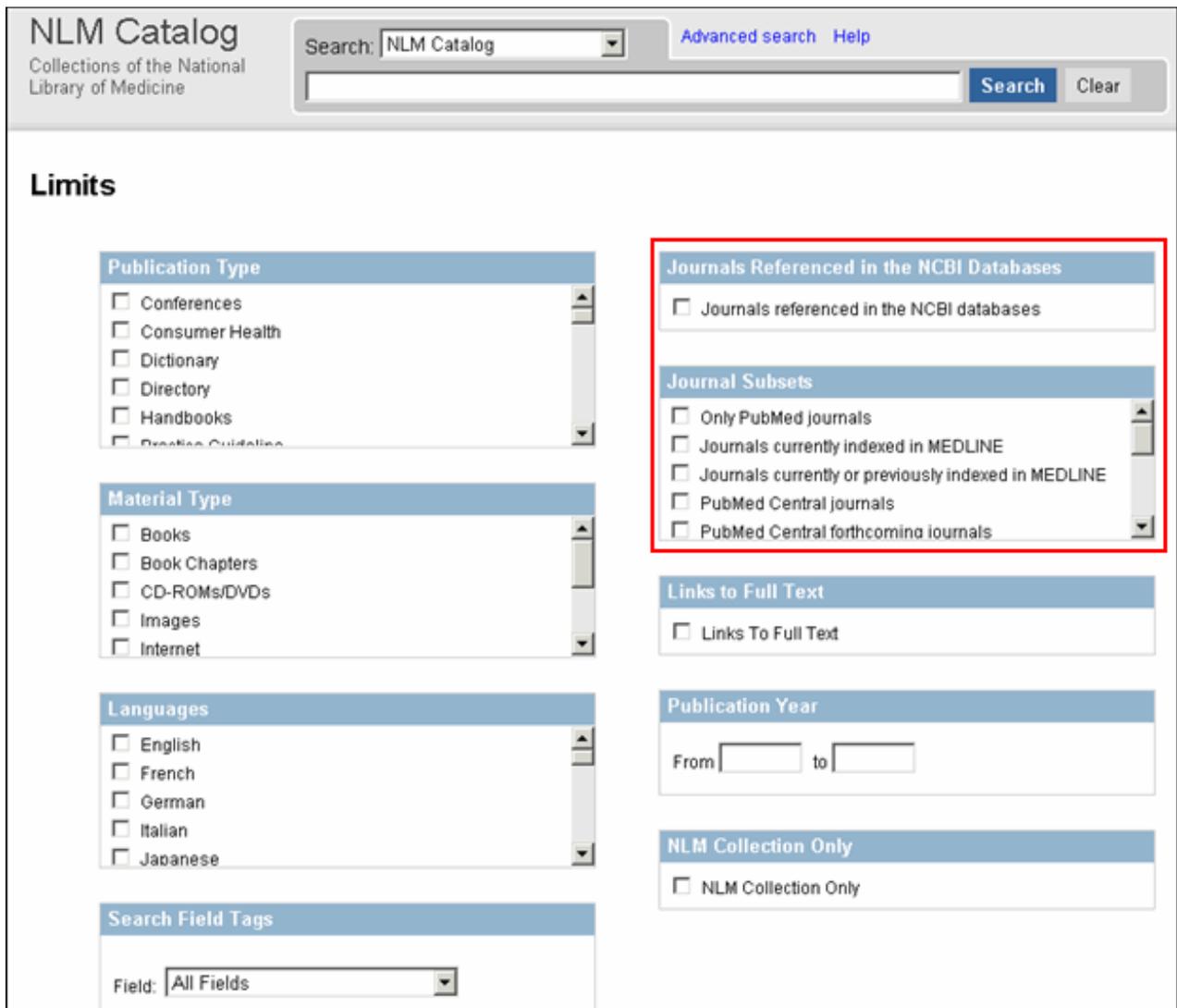


Figure 1: Limits screen highlighting specific Journal Limits.

2. Search the Broad Subject Terms from the link on the NLM Catalog homepage under "NLM Catalog Tools." Broad Subject Terms are MeSH headings assigned to indexed journals to give an overall indication of the scope of the journal. For example, click on the Broad Subject Terms link and then click on the entry for Acquired Immunodeficiency Syndrome. This will retrieve all journals assigned that subject term. Select the "Currently Indexed for MEDLINE" Limit and rerun the search to restrict the resulting list to currently indexed titles.
3. Search the NLM Catalog using Limits or the search box for a specific journal subset (see Table 2) below.

Table 2: Creating Journal Lists

Journal List	Limits	Enter in Search Box
Journal referenced in NCBI databases		

Only PubMed Journals		
Currently Indexed in MEDLINE		currentlyindexed
Currently or Previously Indexed in MEDLINE		
PubMed Central Journals		journalspmc
PubMed Central Forthcoming Journals		journalspmcforthcoming
Consumer Health Journals Limit		jsubsetk
Journals in Electronic-Only Format		
Core Clinical Journals (AIM) Limit		jsubsetaim
Dental Journals		jsubsetd
Index Medicus Journals (IM)		jsubsetim
Journals Indexed from the Electronic Version		currentlyindexedelectronic
Nursing Journals		jsubsetn

Sort Options

There are three sort options (see Figure 2):

- Publication Date
- Title Abbreviation
- Country of Publication

The default is to display results in publication date order.

[Display Settings](#): Summary, 20 per page, Sorted by Publication Date

Format	Items per page	Sort by
<input checked="" type="radio"/> Summary	<input type="radio"/> 5	<input checked="" type="radio"/> Publication Date
<input type="radio"/> Summary (text)	<input type="radio"/> 10	<input type="radio"/> NLM ID
<input type="radio"/> Full	<input checked="" type="radio"/> 20	<input type="radio"/> Author
<input type="radio"/> Full (text)	<input type="radio"/> 50	<input type="radio"/> Title
<input type="radio"/> Journal	<input type="radio"/> 100	<input type="radio"/> Title Abbreviation
<input type="radio"/> Journal (text)	<input type="radio"/> 200	<input type="radio"/> Country of Publication
<input type="radio"/> XML		
<input type="radio"/> NLM ID List		

Figure 2: NLM Catalog sort options.

Journal Display

The new Journal format display in the NLM Catalog, available only for journals cited in Entrez databases, has additional fields that correspond to many of the search options (see Figure 3). These new search options and display fields help to clarify the indexing status of a journal (see Table 1 above).

Antimicrobial agents and chemotherapy

ISSN: 0066-4804 (Print)
1098-6596 (Electronic)
0066-4804 (Linking)

NLM Title Abbreviation: Antimicrob Agents Chemother

ISO Abbreviation: Antimicrob. Agents Chemother.

Publication Start Year: 1972

Fully Indexed In: Index medicus v1, 1972-
MEDLINE v1, 1972-
PubMed v1, 1972-

Current Indexing Status: Currently indexed for MEDLINE.

Current Subset: Index Medicus

Version Indexed: Electronic

PMC Availability: v.1(1972)- Free 4 month(s) after publication

Publisher: American Society for Microbiology

Supersedes : Antimicrobial agents and chemotherapy

Acid-Free: Yes

Language: English

Country of Publication: United States

Electronic Links: <http://aac.asm.org/>
<http://www.pubmedcentral.nih.gov/tocrender.fcgi?journal=82>

MeSH: Anti-Bacterial Agents
Antiviral Agents
Drug Therapy

Broad Subject Term(s): Anti-Bacterial Agents
Drug Therapy

NLM ID: 0315061 [Serial]

Figure 3: Journal format display.

Send a Journal List to PubMed

You can create a journal list in the NLM Catalog and then send it to PubMed to retrieve citations from those journals. Here's how:

1. Run a search in NLM Catalog (example: jsubsetn to retrieve a list of nursing journals).
2. In the "Find related data" feature on the right side of the results page, select PubMed (see Figure 4).
3. Click the "Find items" button to send your search to PubMed and retrieve all citations for the list of journals you searched in the NLM Catalog.

The screenshot shows the NLM Catalog interface. At the top, there is a search bar with 'subsetn' entered and a 'Search' button. Below the search bar, there are navigation links like 'Save search', 'Limits', 'Advanced search', and 'Help'. The main content area displays search results for 'subsetn', showing two items: 'International emergency nursing' and 'Journal of Korean Academy of Nursing'. To the right, there is a 'PubMed search builder' section and a 'Find related data' section. The 'Find related data' section is highlighted with a red box and contains a 'Database' dropdown menu set to 'PubMed' and a 'Find items' button.

Figure 4: Find Related Data.

Linking from PubMed to Journals in NCBI Databases

In the past PubMed had a link on the homepage under "More Resources" to the Journals Database. The link will change to "Journals in NCBI Databases." The Links Menu option offered when the journal title abbreviation link in the Abstract display is clicked will change from Journals to NLM Catalog.

Additional Information

For more information on the NLM Catalog see:

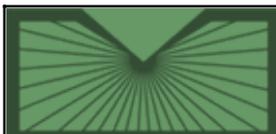
- NLM Catalog help
- Quick Tours

By Sara Tybaert
MEDLARS Management Section

Tybaert S. NLM Catalog: New Search Features for Journals Cited in Entrez Databases. NLM Tech Bull. 2010 Nov-Dec;(377):e19.

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December 16, 2010 [posted]

NLM® Classification Poster Updated

The NLM Classification Poster has been updated with data through 2010. To order the new 18" x 24" poster which outlines the NLM Classification schedules, please contact:

Mary Miller
 Office of Communications and Public Liaison
 National Library of Medicine
 8600 Rockville Pike
 Bethesda, MD 20894
 E-mail: millerm@mail.nlm.nih.gov

Please indicate the name of the poster that you are ordering.

In addition, an 8 ½" x 11" version is also available in PDF for download.

Note: The NLM Classification Poster is updated irregularly.

By Sharon R. Willis
Cataloging Section, Technical Services Division

Willis SR. NLM® Classification Poster Updated. NLM Tech Bull. 2010 Nov-Dec;(377):e20.

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December 21, 2010 [posted]

New Structured Abstracts in MEDLINE® Web Resource Page Available

A new Structured Abstracts resource page is available from the National Library of Medicine® (NLM®) Web site. In August 2010, structured abstracts in PubMed® were reformatted for easier readability. The 2011 NLM MedlineCitationSet DTD and MEDLINE/PubMed XML accommodate structured abstracts in a more granular segmentation as a part of NLM data dissemination so that licensees can also manipulate the display and searching of structured abstracts. This new resource provides NLM guidelines, mapping files for structured abstract labels, and other background information to assist licensees or researchers.

By Lou S. Knecht
Bibliographic Services Division
and
James G. Mork and Anna M. Ripple
Cognitive Science Branch
Lister Hill National Center for Biomedical Communications

Knecht LS, Mork JG, Ripple AM. New Structured Abstracts in MEDLINE® Web Resource Page Available. NLM Tech Bull. 2010 Nov-Dec;(377):e21.

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