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EMOTIONAL INTELLIGENCE

Emotional intelligence refers to one’s ability to sense, understand, and effectively apply the power of emotions as a source of human energy, information, trust, creativity, and influence. It deals with the ability to monitor one’s own and others’ feelings and emotions, to discriminate among them, and to use that information to guide one’s thinking and actions. Emotional intelligence is measured by EQ, the emotional counterpart of IQ.

Research suggests that those with high EQ experience greater career success, are more effective leaders, build stronger relationships, and enjoy better health than those with low EQ. In the workplace emotional intelligence is considered twice as important as IQ and technical skills combined. Those with high EQ enhance the organization by contributing to increased morale and motivation, greater cooperation, and lower turnover. HHS is emphasizing the importance of emotional intelligence by offering seminars through the PSC Work/Life Center.

1. AMERICAN EXPRESS TAPS INTO THE POWER OF EMOTIONAL INTELLIGENCE. Hays, S. *Workforce* 78:72,74, July ‘99.
2. ASSESSING EMOTIONAL INTELLIGENCE: RELIABILITY AND VALIDITY OF THE BAR-ON EMOTIONAL QUOTIENT INVENTORY (EQ-i) IN UNIVERSITY STUDENTS. Dawda, D. *Personality Individual Differences* 28 (4):797-812, ‘00.

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3. A CRITICAL EVALUATION OF THE EMOTIONAL INTELLIGENCE CONSTRUCT. Ciarrochi, JV. *Personality Individual Differences* 28 (3):539-61, '00.
4. EMOTIONAL INTELLIGENCE. Johnson, L. *Executive Excellence* 16:10, Aug '99.
5. EMOTIONAL INTELLIGENCE AND THE EMOTIONAL BRAIN: POINTS OF CONVERGENCE AND IMPLICATIONS FOR PSYCHOANALYSIS. Taylor, GJ. *J Am Acad Psychoanal* 27:339-54, Fall '99.
6. EMOTIONAL INTELLIGENCE AT WORK. Laabs, J. *Workforce* 78:68-71, July '99.
7. EMOTIONAL INTELLIGENCE IN ORGANIZATIONS: A CONCEPTUALIZATION. Abraham, R. *Genet Soc Gen Psychol Monogr* 125:209-24, May '99.
8. EMOTIONAL INTELLIGENCE MEETS TRADITIONAL STANDARDS FOR AN INTELLIGENCE. Mayer, JD. *Intelligence* 27 (4):267-98, '99.
9. EMOTIONAL INTELLIGENCE: THE MOST POTENT FACTOR IN THE SUCCESS EQUATION. Strickland, D. *J Nurs Adm* 30:112-7, Mar '00
10. UNDERSTANDING LEADER EMOTIONAL INTELLIGENCE AND PERFORMANCE. Sosik, JJ. *Group Organization Manage* 24:367-90, Sep '99.

COLORECTAL CANCER

Colorectal cancer is the second leading cause of cancer deaths in the United States. The literature indicates that colorectal cancer most commonly occurs in those aged 70 and above, but the incidence begins to rise between ages 40 and 50. If detected in an early stage by regular screening and diagnosis, it is curable over 90% of the time. Research indicates that 56,300 Americans will die of colorectal cancer and 130,200 will be diagnosed with the disease. NCHS has current data on colorectal cancer in the annual report *Health, United States, 1999*.

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| <ol style="list-style-type: none"> 11. CASE-BASED PREDICTION OF SURVIVAL IN COLORECTAL CANCER PATIENTS. Hamilton, PW. <i>Anal Quant Cytol Histol</i> 21:283-91, Aug '99. | <ol style="list-style-type: none"> 12. COLORECTAL CANCER. PART 1: EPIDEMIOLOGY, AETIOLOGY, SCREENING AND DIAGNOSIS. Campbell, T. <i>Prof Nurse</i> 14:869-74, Sep '99. |
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13. COLORECTAL CANCER. PART 2: TREATMENT. Lunn, D. *Prof Nurse* 15:53-7, Oct '99.
14. COLORECTAL CANCER SCREENING. Helm, JF. *Med Clin North Am* 83:1403-22, Nov '99.
15. CURRENT ISSUES IN COLORECTAL CANCER SURGERY. Guillem, JG. *Semin Oncol* 26:505-13, Oct '99.
16. DIAGNOSTIC DELAY IN COLORECTAL CANCER. Potter, MA. *J R Coll Surg Edinb* 44:313-6, Oct '99.
17. DIET AND RISK OF COLORECTAL CANCER IN A COHORT OF FINNISH MEN. Pietinen, P. *Cancer Causes Control* 10:387-96, Oct '99.
18. HEREDITARY COLORECTAL CANCER. Lynch, HT. *Semin Oncol* 26:478-84, Oct '99.
19. NEW DRUGS IN THERAPY OF COLORECTAL CANCER: PRECLINICAL STUDIES. Rustum, YM. *Semin Oncol* 26:612-20, Dec '99.
20. QUALITY OF LIFE IN SURVIVORS OF COLORECTAL CARCINOMA. Ramsey, SD. *Cancer* 88:1294-1303, 15 Mar '00.

HOMELESS MENTALLY ILL

In recent years the homeless population in the U.S. has grown and become more visible. The literature indicates that approximately one-third of the adult homeless population suffer from severe mental illness with 50% of these individuals also having comorbid substance use disorders. Despite the needs of this group, they are reluctant to seek traditional services due to distrust and frustration with a service system that is inadequate or unwilling to meet their self-defined needs. Research indicates that the current service system has been unable to provide integrated health, mental health, substance abuse, and housing programs for the homeless mentally ill. This has resulted in making the most vulnerable individuals the least likely to seek the help they need. To help alleviate this problem, the Center for Mental Health Services, SAMHSA, initiated the ACCESS project which is an 18 site-5 year demonstration program designed to examine the influence of service system integration on the use of services by the homeless mentally ill.

21. CASE MANAGEMENT MODELS FOR PERSONS WHO ARE HOMELESS AND MENTALLY ILL: THE ACCESS DEMONSTRATION PROJECT. Johnsen, M. *Community Ment Health J* 35:325-46, Aug '99.
22. CORRELATES OF IMPROVEMENT IN QUALITY OF LIFE AMONG HOMELESS PERSONS WITH SERIOUS MENTAL ILLNESS. Lam, JA. *Psychiatr Serv* 51:116-8, Jan '00.

23. THE DEVELOPMENT OF RELATIONSHIPS BETWEEN PEOPLE WHO ARE HOMELESS AND HAVE A MENTAL DISABILITY AND THEIR CASE MANAGERS. Chinman, MJ. *Psychiatr Rehabil J* 23:47-55, Sum '99.
24. HOMELESSNESS AND MENTAL ILLNESS: A STORY OF FAILURE. Drake, RE. *Psychiatr Serv* 50:589, May '99.
25. MODIFIED THERAPEUTIC COMMUNITY FOR HOMELESS MENTALLY ILL CHEMICAL ABUSERS: EMERGING SUBTYPES. De Leon, G. *Am J Drug Alcohol Abuse* 25 (3):495-515, '99.
26. A PERSPECTIVE ON VOLUNTARY AND INVOLUNTARY OUTREACH SERVICES FOR THE HOMELESS MENTALLY ILL. Tsemberis, S. *New Dir Ment Health Serv* 82:9-19, Sum '99.
27. SOCIAL SUPPORT AND PSYCHOPATHOLOGY IN HOMELESS PATIENTS PRESENTING FOR EMERGENCY PSYCHIATRIC TREATMENT. Wu, T. *J Clin Psychol* 55:1127-33, Sep '99.
28. SOCIAL SUPPORT AND SERVICE USE AMONG HOMELESS PERSONS WITH SERIOUS MENTAL ILLNESS. Lam, JA. *Int J Soc Psychiatry* 45:13-28, Spr '99.
29. STREET OUTREACH FOR HOMELESS PERSONS WITH SERIOUS MENTAL ILLNESS: IS IT EFFECTIVE? Lam, JA. *Med Care* 37:894-907, Sep '99.
30. TAILORING AND INDIVIDUALIZING HOUSING PROGRAMS FOR HOMELESS PERSONS WITH CHRONIC MENTAL ILLNESS. Reilly, EC. *Harv Rev Psychiatry* 7:166-71, Sep-Oct '99.

INTEGRATED DELIVERY SYSTEMS

An integrated delivery system (IDS) is a system which combines physicians, hospitals, and other medical services with a health plan to provide the complete spectrum of medical care for its consumers. Its goal is to provide the right care for each patient at the right time along a continuum of different levels and settings of care. The literature indicates that the most significant barrier to becoming a successful IDS is economic. Traditional healthcare systems provide no financial incentives for effective care coordination. Research indicates that many systems are reluctant to spend money to develop infrastructure and personnel capabilities that do not give immediate pay-offs. As a result, skilled personnel and information systems that are needed to coordinate care for these systems are lacking. AHRQ recently announced that it is seeking research partners for a new Integrated Delivery System Research Network (IDSRN) in order to

evaluate how today's rapid market and technological changes are affecting health care access, cost, and quality.

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| <p>31. AHRQ IS SEEKING PARTNERS FOR AN INTEGRATED DELIVERY SYSTEM RESEARCH NETWORK. <i>AHRQ Res Activities</i> 234:15-6, Feb '00.</p> <p>32. COORDINATING CARE IN AN INTEGRATED DELIVERY SYSTEM. Darby, M. <i>Qual Letter Healthc Leadership</i> 11:2-11, '99.</p> <p>33. CREATING A COMPETITIVE PSO: A CASE STUDY. Calvaruso, JT. <i>Healthc Financ Manage</i> 53:39-41, June '99.</p> <p>34. DEVELOPING A PATIENT CARE MODEL FOR AN INTEGRATED DELIVERY SYSTEM. Schaffner, JW. <i>J Nurs Adm</i> 29:43-50, Sep '99.</p> <p>35. HOW TO DIVEST ACQUIRED PHYSICIAN PRACTICES. O'Hare, PK. <i>Healthc Financ Manage</i> 53:33-4, 6, Feb '99.</p> | <p>36. IT INTEGRATION OPTIONS FOR INTEGRATED DELIVERY SYSTEMS. Mousin, G. <i>Healthc Financ Manage</i> 53:46-50, Feb '99.</p> <p>37. NEW COMPENSATION MODEL IMPROVES PHYSICIAN PRODUCTIVITY. Davis, A. <i>Healthc Financ Manage</i> 53:46-9, July '99.</p> <p>38. OVERCOMING THE BARRIERS TO CROSS-CONTINUUM INFORMATION INTEGRATION. Merlo, J. <i>Healthc Financ Manage</i> 53:35-7, June '99.</p> <p>39. ROLE OF ECHO MODEL IN OUTCOME RESEARCH AND CLINICAL PRACTICE IMPROVEMENT. Gunter, MJ. <i>Am J Manage Care</i> 5:S17-S24, Apr '99.</p> <p>40. TAKING A NEW SPIN. CATHOLIC PROVIDERS ROAD-TEST AN INTEGRATED DELIVERY SYSTEM. Pallarito, K. <i>Modern Healthc</i> 29:23, 15 Feb '99.</p> |
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METHAMPHETAMINE ABUSE AND BRAIN CELL DAMAGE

Methamphetamine abuse is on the rise. The literature indicates that use of methamphetamine increases the risk of long-term damage to brain cells which can last many months after drug use has stopped. Research indicates that subjects who used 500 to 3,500 mg of methamphetamine per day were likely to show symptoms of dopamine-mediated neurotoxicity. Subjects who used medically prescribed amounts (5 to 60mgs.) of methamphetamine, however, did not show any signs of brain cell damage. Research on methamphetamine abuse and brain cell damage have been funded by NIDA.

41. ADDRESSING THE MEDICAL CONSEQUENCES OF DRUG ABUSE. Leshner, AI. *NIDA Notes* 15 (1):3-4, '00.
42. A CLUB DRUG ALERT. Leshner, AI. *NIDA Notes* 14 (6): 3-4, '00.
43. DIFFERENTIAL EFFECTS OF HALOPERIDOL ON PHENCYCLIDINE-INDUCED REDUCTION IN SUBSTANCE P CONTENTS IN RAT BRAIN REGIONS. Shirayama, Y. *Synapse* 35:292-99, 15 May '00.
44. EVIDENCE FOR LONG-TERM NEUROTOXICITY ASSOCIATED WITH METHAMPHETAMINE ABUSE. A ¹H MRS STUDY. Ernst, T. *Neurology* 54:1344-9, 26 Mar '00.
45. IS SYNAPTIC DOPAMINE CONCENTRATION THE EXCLUSIVE FACTOR WHICH ALTERS THE IN VIVO BINDING OF [¹¹C]RACLOPRIDE?: PET STUDIES COMBINED WITH MICRODIALYSIS IN CONSCIOUS MONKEYS. Tsukada, H. *Brain Res* 841:160-9, 11 Sep '99.
46. LONG-TERM METHAMPHETAMINE-INDUCED DECREASES OF [¹¹C]WIN 35,428 BINDING IN STRIATUM ARE REDUCED BY GDNF: PET STUDIES IN THE VERVET MONKEY. Melega, WP. *Synapse* 35:243-9, 15 Mar '00.
47. METHAMPHETAMINE ADMINISTRATION CAUSES OVEREXPRESSION OF nNOS IN THE MOUSE STRIATUM. Deng, X. *Brain Res* 851:254-7, 18 Dec '99.
48. NIDA LAUNCHES INITIATIVE TO COMBAT CLUB DRUGS. Zickler, P. *NIDA Notes* 14 (6):1, 5, '00.
49. PROTECTION OF METHAMPHETAMINE NIGROSTRIATAL TOXICITY BY SELENIUM. Kim, H. *Brain Res* 851:76-86, 18 Dec '99.
50. TRANSIENT INCREASES OF HISTAMINE H₁ AND H₂ RECEPTOR mRNA LEVELS IN THE RAT STRIATUM AFTER THE CHRONIC ADMINISTRATION OF METHAMPHETAMINE. Kubota, Y. *Neurosci Lett* 275:37-40, 5 Nov '99.

MIGRANT FARMWORKERS

Due to poverty, malnutrition, infectious diseases, exposure to pesticides, and poor housing, migrant farmworkers have severe health and social problems and are at greater health risk than the general U.S. population. The literature indicates that delivering health care to them is difficult because of residential instability, language barriers, and marginalization. The development of networks and comprehensive systems of primary care are needed to help this group. Research

indicates that by collaborating with public and private partners to obtain capital and infrastructure resources, comprehensive health care for this population can be achieved. The Migrant Health Center Program, HRSA, provides primary and preventive care, transportation, dental, pharmaceutical services, immunizations, and developmental screenings to more than 600,000 migrant and seasonal farmworkers and their families each year.

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| <p>51. CRACK COCAINE USE IN RURAL MIGRANT POPULATIONS: LIVING ARRANGEMENTS AND SOCIAL SUPPORT. Weatherby, NL. <i>Subst Abuse & Misuse</i> 34 (4&5):685-706, '99.</p> | <p>55. LIFETIME PREVALENCE OF AND RISK FACTORS FOR PSYCHIATRIC DISORDERS AMONG MEXICAN MIGRANT FARMWORKERS IN CALIFORNIA. Alderet, E. <i>Am J Public Health</i> 90:608-14, Apr '00.</p> |
| <p>52. DEPRESSIVE SYMPTOMOLOGY: PREVALENCE AND PSYCHOSOCIAL RISK FACTORS AMONG MEXICAN MIGRANT FARMWORKERS IN CALIFORNIA. Alderete, E. <i>J Community Psychol</i> 27:457-71, July '99.</p> | <p>56. PESTICIDE TRAINING PROGRAM. Mata, A. <i>Public Health Rep</i> 114:488-9, Nov-Dec'99.</p> |
| <p>53. FACTORS ASSOCIATED WITH PARTICIPATION BY MEXICAN MIGRANT FARMWORKERS IN A TUBERCULOSIS SCREENING PROGRAM. Poss, JE. <i>Nurs Res</i> 49:20-8, Jan-Feb '00.</p> | <p>57. THE POWER OF THE COLLECTIVE: BATTERED MIGRANT FARMWORKER WOMEN CREATING SAFE SPACES. Rodriguez, R. <i>Health Care Women Int</i> 20:417-26, July-Aug '99.</p> |
| <p>54. IMPLEMENTATION OF EPA'S WORKER PROTECTION STANDARD TRAINING FOR AGRICULTURAL LABORERS: AN EVALUATION USING NORTH CAROLINA DATA. Arcury, TA. <i>Public Health Rep</i> 114:459-68, Sep-Oct '99.</p> | <p>58. PROPOSED CHANGES TO DESIGNATIONS OF MEDICALLY UNDERSERVED POPULATIONS AND HEALTH PROFESSIONAL SHORTAGE AREAS: EFFECTS ON RURAL AREAS. Goldsmith, LJ. <i>J Rural Health</i> 15:44-54, Win '99.</p> |
| | <p>59. RUBELLA OUTBREAKS AMONG HISPANICS IN NORTH CAROLINA: LESSONS LEARNED FROM A FIELD INVESTIGATION. Rangel, MC. <i>Ethn Dis</i> 9:230-6, Spr-Sum '99.</p> |

60. TB NET TRACKING NETWORK PROVIDES CONTINUITY OF CARE FOR MOBILE TB PATIENTS. Harlow, T. *Am J Public Health* 89:1581-2, Oct '99.

REINVENTING GOVERNMENT

Since 1990, the management staff of the Parklawn Health Library has selected 10 journal articles per month on innovative management techniques to appear in each Bulletin. First entitled "Total Quality Management," this recurring bibliography was renamed "Reinventing Government" to reflect and support the Administration's efforts to create a government that works better and costs less.

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| <p>61. BREAKING THE POLITICAL STRANGLEHOLD IN THE EXECUTIVE SUITE. D'Aquanni, T. <i>Manage Rev</i> 89:42-5, Mar '00.</p> | <p>66. KILLING QUALITY WITH KINDNESS. Surplus, SH. <i>Qual Progress</i> 33:60-3, Feb '00.</p> |
| <p>62. CALL RESOLUTION: THE WRONG FOCUS FOR SERVICE QUALITY? Cross, KF. <i>Qual Prog</i> 33:64-7, Feb '00.</p> | <p>67. THE POSTMODERN SHIFT IN VALUES AND JOBS AND THE IMPLICATIONS FOR HR. Hines, A. <i>Employment Relations Today</i> 26:35-51, Win '00.</p> |
| <p>63. CONSEQUENCES OF INFORMATION TECHNOLOGY ON WORK IN THE TWENTY-FIRST CENTURY. Coates, JF. <i>Employment Relations Today</i> 26:83-94, Win '00.</p> | <p>68. REINVENT YOURSELF DAILY. Oliver, RW. <i>Manage Rev</i> 89:10-11, Mar '00.</p> |
| <p>64. EMPLOYEE ORGANIZATIONS: TOMORROW'S POSSIBILITIES. Shostak, AB. <i>Employment Relations Today</i> 26:53-60, Win '00.</p> | <p>69. SCENARIO LEARNING. Fahey, L. <i>Manage Rev</i> 89:29-34, Mar '00.</p> |
| <p>65. INFORMATION IS POWER. Ferris, N. <i>Government Executive</i> 32:28-33, Mar '00.</p> | <p>70. TAKE TIME TO SERVE YOUR CUSTOMERS. Crockett, J. <i>Print on Demand</i> 38-9, Jan-Feb '00.</p> |

SELECTED NEW ACQUISITIONS

To permit review of all books and reports in this list, they will not be circulated until three weeks from the date of this Bulletin. All materials are available for review on the NEW BOOKS display shelf near the Service Desk of the Library. You may reserve any book simply by completing the yellow strip form available on the display shelf.

DRUG ABUSE

WM COCAINE: GLOBAL
11.1 HISTORIES. New York,
C6403 NY, Routledge, 1999, 213 p.

HV DEMYSTIFYING DRUGS:
5801 A PSYCHOSOCIAL
G564 PERSPECTIVE. Goldberg,
 Ted. New York, NY, St.
 Martin's Press, 1999, 291 p.

WM DRUG AND ALCOHOL
270 ABUSE: A CLINICAL
S384 GUIDE TO DIAGNOSIS
 AND TREATMENT. 5th ed.
 Schuckit, Marc Alan. New
 York, NY, Kluwer
 Academic/Plenum Publishers,
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WM PRESCRIPTION OF
288 NARCOTICS FOR HEROIN
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 RESULTS OF THE SWISS
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FINANCIAL MANAGEMENT

WX FUNDAMENTALS OF
27AA1 HEALTHCARE
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 Steven H. New York, NY,
 McGraw-Hill, 1999, 344 p.

HEALTH PLANNING

WY COMPUTERS IN
26.5 NURSING: BRIDGES TO
T34 THE FUTURE. Thede,
 Linda Q. Philadelphia,
 Lippincott, 1999, 310 p.

HF THE CUSTOMER-
5415 CENTERED ENTERPRISE.
T3733 Thompson, Harvey. New
 York, NY, McGraw Hill,
 2000, 245 p.

W HEALTH BEHAVIOR
85 CHANGE: A GUIDE FOR
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 Rollnick, Stephen. New York,
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- WA 110 M3115 MANAGED CARE SYSTEMS AND EMERGING INFECTIONS: CHALLENGES AND OPPORTUNITIES FOR STRENGTHENING SURVEILLANCE, RESEARCH, AND PREVENTION: WORKSHOP SUMMARY. Washington, DC, National Academy Press, 2000, 113 p.
- W 84AA1 G167m MANAGING DIVERSITY IN HEALTH CARE MANUAL: PROVEN TOOLS AND ACTIVITIES FOR LEADERS AND TRAINERS. Gardenswartz, Lee. San Francisco, CA, Jossey-Bass, 1999, 208 p.
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- WA 100 S678 THE SOCIETY AND POPULATION HEALTH READER. New York, NY, New Press, 1999, 505 p.
- W 83 B3262 TELEMEDICINE AND THE REINVENTION OF HEALTHCARE. Bauer, Jeffrey C. New York, NY, McGraw-Hill, 1999, 246 p.
- W 84AA1 B285 UNDERSTANDING THE U.S. HEALTH SERVICES SYSTEM. Barton, Phoebe Lindsey. Chicago, IL, Health Administration Press, 1999, 473 p.
- W 84AA1 G875w THE WELL-MANAGED HEALTHCARE ORGANIZATION. 4th ed. Griffith, John R. Chicago, IL, Health Administration Press, 1999, 703 p.
- W 84.1 W8932 WORLD HEALTH ORGANIZATION FELLOWSHIP FOR U.S. CITIZENS: A COMPENDIUM OF PARTICIPANT REPORTS, 1990-1995. [Rockville, MD], U.S. Department of Health and Human Services, Health Resources and Services Administration, [1998], 160 p.
- W 84.1 W8937 WORLD HEALTH ORGANIZATION STUDY PROGRAM FOR U.S. CITIZENS: A COMPENDIUM OF PARTICIPANT REPORTS, 1999. [Rockville, MD], U.S. Dept. Of Health and Human Services, Health Resources and Services Administration, [1999], 117 p.

MANAGEMENT

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WORKPLACE: A NEW
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WITH HOSTILE,
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MEDICAL & ALLIED SCIENCES

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BENEFITS AND HAZARDS
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England, BMJ, 1999, 383 p.

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BLIND EYE: HOW THE
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2nd ed. Elk Grove Village,
IL, The Academy, 1999,
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BIOLOGICAL, CLINICAL,
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BEHAVIOR AND
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Dixon, Suzanne D. St. Louis,
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E92 EVALUATION AND
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CHRONIC PAIN. 3rd ed.
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MENTATION:
METHODOLOGIC ISSUES
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Cleophas, Ton J.M. Boston,
MA, Kluwer Academic
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N398 NEURO-IMMUNE
INTERACTIONS IN
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N9383 NURSING DIAGNOSIS:
APPLICATION TO
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William D. Philadelphia, PA,
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E. Washington, DC,
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Orbach, Ann. Philadelphia,
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Tomb, David A.
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GUIDE TO LIBRARY RESOURCES

FEDERAL PERSONNEL GUIDE. Key Communications Group, Inc., Washington, D.C., 2000. Ref-Gen JK 671 F3176

Although this guide is not an official publication of the U.S. government, the information contained in it has been obtained from official government sources. This book serves as a one-volume handbook on federal personnel policies. Topics in this book include:

Life insurance	Early retirement
Pay	Locality pay areas
Health insurance	Holidays
FERS	Travel allowances
Training and development	Grievances

HEALTH AND HEALTHCARE IN THE UNITED STATES: COUNTY AND METRO AREA DATA. Bernan Press, Lanham, MD, 1999. Ref-Gen WA 16 H349713

This is a first edition of an annual compendium of health-related statistics for every county and metropolitan area in the United States. For every category, the most recent reliable statistics have been included. The oldest data are from 1995 while some of the figures are as recent as 1998. Over 80 different statistics are presented for over 3,000 counties and 329 metropolitan areas. Statistics in this volume include:

Population characteristics	Vital statistics
Medicare	Healthcare resources

PREVIOUS CURRENT TOPICS

Previous current topics can be obtained upon request

Topic	Bulletin No.	Date
Nosocomial Infections ADHD in Adults “Ecstasy” OR MDMA Hormone Replacement Therapy Life Expectancy Quality in Health Care Reinventing Government	483	February 2000
Workplace Diversity Alzheimer Disease Depression in Men Head Start Program Physician/Patient Communications Regarding Medications Reinventing Government Violence Against Women with Substance Abuse/Mental Health Disorders	484	March 2000
Medical Errors Families with Youth At Risk Infant Mortality Nicotine Use and Drug Abuse Treatment Nursing Home Standards and Quality Reinventing Government Twin Studies in Mental Health Research	485	April 2000

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- Administration for Children and Families
- Administration on Aging
- Agency for Health Care Policy and Research
- HHS Regional Offices
- Health Resources and Services Administration
- Indian Health Service
- National Center for Health Statistics
- National Institute of Mental Health
- National Institute on Drug Abuse
- Office of the Secretary
- Office of Public Health and Science
- Program Support Center
- Substance Abuse and Mental Health Services Administration

LIBRARY MISSION

The Parklawn Health Library, the NCHS Staff Research Library, and the Information Resources Center plan, develop, and administer a national research collection and innovative information programs in direct support of the Department of Health and Human Services.

LIBRARY COLLECTION

The Scope of the collection includes the delivery of health care, health administration, health policy, health services research, health promotion and disease prevention, computer sciences, management sciences, medical sociology, health statistics, international health, epidemiology, public health, mental health, psychiatry and neurology, and substance abuse.

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