

**CONTENTS**



Oral Health ..... 1-2  
 Lyme Disease ..... 2-3  
 Motivation for Change in  
     Substance Abuse  
     Treatment ..... 3-4  
 OCD In Children ..... 4-5  
 Racial Differences In Treatment  
     of Hospitalized Stroke  
     Patients ..... 6-7  
 Reinventing Government ..... 7  
 Responsible Fatherhood ..... 8  
**Selected New Acquisitions**  
     Financial Management ..... 9  
     Health Planning ..... 9-11  
     Management ..... 11  
     Medical & Allied  
         Sciences ..... 11-12  
     Mental Health ..... 12-13  
     Research ..... 13  
     Sociology ..... 13-14  
     Statistics ..... 15  
     Reference Books ..... 15  
**Guide to Library**  
     Resources ..... 16  
**Previous Current Topics** ... 17  
**Library Clientele** ..... 18  
**Library Mission** ..... 19

**ORAL HEALTH**

Although there has been significant progress in improving oral health in the U.S., profound disparities still exist for poor Americans, especially children and the elderly. Minority groups also experience a disproportionate level of oral health problems. In addition, individuals with disabilities and complex health conditions are at greater risk for oral diseases. Good oral health is an integral part of overall health and well-being. However, major obstacles exist that prevent many Americans from attaining this goal. These include lack of dental insurance, the inability to pay out of pocket, and problems of access to dental care.

The U.S. Surgeon General has recently released a report that calls for a national effort to improve oral health among all Americans. Oral Health in America focuses on the association between oral health and overall good health throughout life. It also illustrates the disparities that affect those without the knowledge or resources to achieve good oral care.

1. ARE WE REACHING VERY YOUNG CHILDREN WITH NEEDED DENTAL SERVICES? Waldman, HB. *J Dent Child* 66:390-4, Nov-Dec '99.
2. BETTER ORAL HEALTH, MORE INEQUALITY -- EMPIRICAL ANALYSIS AMONG YOUNG ADULTS. Schuller, AA. *Community Dent Health* 16:154-9, Sep '99.

**N.B. A master copy of each journal article in this Bulletin is available for photocopy at each Library**

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3. A COMPARISON OF THE VALIDITY OF GENERIC - AND DISEASE-SPECIFIC MEASURES IN THE ASSESSMENT OF ORAL HEALTH-RELATED QUALITY OF LIFE. Allen, PF. *Community Dent Oral Epidemiol* 27 (5):344-52, '99.
4. THE DESIGN, ERRORS AND COSTS OF A LOCAL ADULT ORAL HEALTH SURVEY. Simmons, SR. *Community Dent Health* 16 (4):207-12, '99.
5. THE NEGLECTED EPIDEMIC AND THE SURGEON GENERAL'S REPORT: A CALL TO ACTION FOR BETTER ORAL HEALTH. *Am J Public Health* 90:843-5, June '00.
6. ORAL HEALTH AND NUTRITION. Walls, AWG. *Age Ageing* 28:419-20, Sep '99.
7. ORAL HEALTH RESEARCH AND SURVEILLANCE UNDERFUNDED, SURGEON GENERAL FINDS. *Blue Sheet* 43:13, 31 May '00.
8. PEDIATRIC ORAL HEALTH PERFORMANCE MEASUREMENT: CURRENT CAPABILITIES AND FUTURE DIRECTIONS. Crall, JJ. *J Public Health Dent* 59:136-40, Sum '99.
9. RELATIONSHIP BETWEEN ORAL HEALTH AND NUTRITION IN VERY OLD PEOPLE. Mojon, P. *Age Ageing* 28:463-8, Sep '99.
10. SOCIOECONOMIC DISPARITIES IN ADULT ORAL HEALTH IN THE UNITED STATES. Drury, TF. *Ann NY Acad Sci* 896:322-4, '99.

### LYME DISEASE

Lyme disease is an infection caused by the bacterium called *Borrelia burgdorferi*. Literature indicates that Lyme disease is the most commonly reported vector-borne disease in the United States. It is a multisystem disorder which may involve the skin, nervous system, heart or joints. Lyme disease is normally spread from the bite of an infected deer tick. Research indicates that approximately 128,000 cases of Lyme disease have been reported since 1982 which represent about one-third of the actual cases. NCHS has current data on Lyme disease in their annual report entitled *Health, United States, 1999*.

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|--|--|
| <ol style="list-style-type: none"> <li>11. <i>BORRELIA BURGDORFERI</i>-SPECIFIC IMMUNE COMPLEXES IN ACUTE LYME DISEASE. Schutzer, SE. <i>JAMA</i> 282:1942-6, 24 Nov '99.</li> </ol> | <ol style="list-style-type: none"> <li>12. CDC ISSUES RECOMMENDATIONS ON USE OF LYME DISEASE VACCINE. Miller, JL. <i>Am J Health Syst Pharm</i> 56:1484, 86, 1 Aug '99.</li> </ol> |
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13. LANGUAGE, LOGIC, AND LYME DISEASE. Melski, JW. *Arch Dermatol* 135:1398-1400, Nov '99.
14. LISTENING OUTSIDE THE BOX: THE CASE OF LYME DISEASE AND OTHER TICK-BORNE DISEASES. Reece, RL. *Conn Med* 63:547-9, Sep '99.
15. LONG-TERM OUTCOMES OF PERSONS WITH LYME DISEASE. Seltzer, EG. *JAMA* 283:609-16, 2 Feb '00.
16. LYME DISEASE. Sood, SK. *Pediatr Infect Dis* 18:913-25, Oct '99.
17. LYME DISEASE: AN OVERVIEW. Dib, JG. *Hosp Pharm* 35:156-61, Feb '00.
18. THE LYME DISEASE VACCINE: CONCEPTION, DEVELOPMENT, AND IMPLEMENTATION. Thanassi, WT. *Ann Intern Med* 132:661-8, 18 Apr '00.
19. MUSCULOSKELETAL AND NEUROLOGIC OUTCOMES IN PATIENTS WITH PREVIOUSLY TREATED LYME DISEASE. Shadick, NA. *Ann Intern Med* 131:919-26, 21 Dec '99.
20. THE NEW VACCINE FOR LYME DISEASE. Rusk, M. *Hosp Pract* 34:37-9, 15 Aug '99.

### MOTIVATION FOR CHANGE IN SUBSTANCE ABUSE TREATMENT

One essential element of substance abuse treatment is the client's readiness to change their behavior. The literature indicates that clinicians can motivate substance abusers to seek treatment. Motivational approaches originally developed for problem alcohol drinkers have been found to apply to substance abusers. Research indicates that there are five stages of change: precontemplation, contemplation, preparation, action, and maintenance. These stages are conceptualized as a cycle rather than a linear progression, and patients can move back and forth through this cycle. SAMHSA has released a Treatment Improvement Protocol (TIP) *Enhancing Motivation for Change in Substance Abuse Treatment* to help clinicians working with patients with substance abuse problems.

21. DECISIONAL BALANCE REGARDING SUBSTANCE USE AMONG PERSONS WITH SCHIZOPHRENIA. Carey, KB. *Commun Ment Health J* 35:289-99, Aug '99.
22. EFFECTIVENESS OF COERCED ADDICTION TREATMENT (ALTERNATIVE CONSEQUENCES) A REVIEW OF THE CLINICAL RESEARCH. Miller, NS. *J Subst Abuse Treat* 18:9-16, Jan '00.

23. EFFECTS OF CONTROL AND MOTIVATION ON TREATMENT OUTCOME. Kludt, CJ. *J Psychoactive Drugs* 31:405-14, Oct-Dec '99.
24. A GROUP MOTIVATIONAL TREATMENT FOR CHEMICAL DEPENDENCY. Foote, J. *J Subst Abuse Treat* 17:181-92, Oct '99.
25. INTEGRATING SKILLS TRAINING AND MOTIVATIONAL THERAPIES. Baer, JS. *J Subst Abuse Treat* 17:15-23, July-Sep '99.
26. MODIFIED THERAPEUTIC COMMUNITY FOR HOMELESS MENTALLY ILL CHEMICAL ABUSERS: EMERGING SUBTYPES. De Leon, G. *Am J Drug Alcohol Abuse* 25 (3):495-15, '99.
27. MOTIVATION FOR CHANGE: IMPLICATIONS FOR SUBSTANCE ABUSE TREATMENT. Di Clemente, CC. *Psychol Sci* 10:209-13, May '99.
28. TREATMENT CAREER SNAPSHOTS: PROFILES OF FIRST TREATMENT AND PREVIOUS TREATMENT CLIENTS. Claus, RE. *Addict Behav* 24 (4):471-9, '99.
29. THE USE OF REQUIRED TREATMENT FOR SUBSTANCE ABUSERS. Fagan, R. *Subst Abuse* 20:249-61, Dec '99.
30. WOMEN'S STEPS OF CHANGE AND ENTRY INTO DRUG ABUSE TREATMENT A MULTI-DIMENSIONAL STAGES OF CHANGE MODEL. Brown, VB. *J Subst Abuse Treat* 18:231-40, Apr '00.

### OBSESSIVE COMPULSIVE DISORDER IN CHILDREN

Childhood obsessive compulsive disorder (OCD) is characterized by involuntary recurrent ideas and fantasies (obsessions) and repetitive impulses or actions (compulsions) that are recognized as senseless or abnormal by the child. The literature indicates that OCD is more common than was previously believed. Reported incidences of OCD in child psychiatric populations range between 2-3%. Research indicates that the serotonin neurotransmitter system appears to be involved in the pathogenesis of OCD. There is also increasing evidence that childhood OCD is associated with other disorders such as Tourette syndrome, anxiety, and depression. NIMH is currently funding research on pharmacotherapy in children with OCD.

31. THE EPIDEMIOLOGY OF OBSESSIVE-COMPULSIVE DISORDER IN CHILDREN AND ADOLESCENTS. Zohar, AH. *Child Adolesc Psychiatr Clin N Am* 8:445-60, July '99.
32. INTEGRATING PLAY THERAPY IN THE TREATMENT OF CHILDREN WITH OBSESSIVE-COMPULSIVE DISORDER. Gold-Steinberg, S. *Am J Orthopsychiatry* 69:495-503, Oct '99.
33. MRI ASSESSMENT OF CHILDREN WITH OBSESSIVE-COMPULSIVE DISORDER OR TICS ASSOCIATED WITH STREPTOCOCCAL INFECTION. Giedd, JN. *Am J Psychiatry* 157:281-83, Feb '00.
34. NEUROBIOLOGY OF CHILDHOOD OBSESSIVE-COMPULSIVE DISORDER. Fitzgerald, KD. *Child Adolesc Psychiatr Clin N Am* 8:533-75, July '99.
35. NEUROPSYCHOLOGICAL MODELS OF CHILDHOOD OBSESSIVE-COMPULSIVE DISORDER. Schultz, RT. *Child Adolesc Psychiatr Clin N Am* 8:513-31, July '99.
36. OBSESSIVE-COMPULSIVE DISORDER IN CHILDREN AND ADOLESCENTS: TREATMENT GUIDELINES. Grados, MA. *CNS Drugs* 12:257-77, Oct '99.
37. PARENTAL OBSESSIVE—COMPULSIVE DISORDER AS A PROGNOSTIC FACTOR IN A YEAR LONG FLUVOXAMINE TREATMENT IN CHILDHOOD AND ADOLESCENT OBSESSIVE—COMPULSIVE DISORDER. Yaryura-Tobias, JA. *Int Clin Psychopharmacol* 15 (3):163-8, '00.
38. PHARMACOTHERAPY IN CHILDREN AND ADOLESCENTS WITH OBSESSIVE-COMPULSIVE DISORDER. Grados, M. *Child Adolesc Psychiatr Clin N Am* 8:617-34, July '99.
39. QUANTITATIVE AND QUALITATIVE ASPECTS OF OBSESSIVE-COMPULSIVE BEHAVIOUR IN CHILDREN WITH ATTENTION-DEFICIT HYPERACTIVITY DISORDER COMPARED WITH TIC DISORDER. Moll, GH. *Acta Psychiatr Scand* 101:389-94, May '00.
40. THERAPEUTIC PLASMA EXCHANGE AND INTRAVENOUS IMMUNOGLOBULIN FOR OBSESSIVE-COMPULSIVE DISORDER AND TIC DISORDERS IN CHILDHOOD. Perlmutter, SJ. *Lancet* 354:1153-8, 2 Oct '99.

## RACIAL DIFFERENCES IN TREATMENT OF HOSPITALIZED STROKE PATIENTS

Stroke is defined as an abrupt loss of blood flow to the region of the occluded artery. The literature indicates that stroke is the third leading cause of mortality in the U.S. and a leading cause of disability among the adult population. Black men are 2.5 times as likely as white men to die of stroke while black women are 2.4 times as likely as their white counterparts. Research indicates that new methods of treatment for stroke may be promising but preventive health services, such as treating hypertension, are particularly important for reducing the overall significance of the disease. A recent study funded by AHRQ shows that black patients hospitalized for mini strokes are much less likely than white patients to receive diagnostic tests, have surgery to prevent stroke, and may have less access to neurologists as their attending physician.

41. BLACKS HOSPITALIZED FOR MINI STROKES ARE LESS LIKELY THAN WHITES TO RECEIVE DIAGNOSTIC TESTS, SEE A SPECIALIST, OR HAVE SURGERY. *AHRQ Res Activities* 237:1-2, May '00.
42. EARLY EFFORTS OF BLACKS IN THE FIGHT AGAINST HEART DISEASE AND STROKE. Haywood, LJ. *J Natl Med Assoc* 91:669-75, Dec '99.
43. GEOGRAPHIC VARIATION IN CARDIOVASCULAR DISEASE MORTALITY IN U.S. BLACKS AND WHITES. Pickle, LW. *J Natl Med Assoc* 91:545-56, Oct '99.
44. HOMOCYST(E)INE AND RISK OF CEREBRAL INFARCTION IN A BIRACIAL POPULATION: THE STROKE PREVENTION IN YOUNG WOMEN STUDY. Kittner, SJ. *Stroke* 30:1554-60, Aug '99.
45. INCIDENCE AND OCCURRENCE OF TOTAL (FIRST-EVER AND RECURRENT) STROKE. Williams, GR. *Stroke* 30:2523-8, Dec '99.
46. IS HYPERURICEMIA A RISK FACTOR OF STROKE AND CORONARY HEART DISEASE AMONG AFRICANS? Longo, MB. *Int J Cardiol* 71:17-22, 30 Sep '99.
47. PREVALENCE OF CORONARY ARTERY DISEASE, ISCHEMIC STROKE, PERIPHERAL ARTERIAL DISEASE, AND CORONARY RE-VASCULARIZATION IN OLDER AFRICAN-AMERICANS, ASIANS, HISPANICS, WHITES, MEN, AND WOMEN. Ness, J. *Am J Cardiol* 84:932-3, 15 Oct '99.
48. RACE, PRESENTING SIGNS AND SYMPTOMS, USE OF CAROTID ARTERY IMAGING, AND APPROPRIATENESS OF CAROTID ENDARTERECTOMY. Oddone, EZ. *Stroke* 30:1350-6, Jul '99.

49. RACIAL VARIATION IN TREATMENT FOR TRANSIENT ISCHEMIC ATTACKS: IMPACT OF PARTICIPATION BY NEUROLOGISTS. Mitchell, JB. *Health Serv Res* 34:1413-28, Mar '00.
50. RISK FACTORS FOR STROKE IN BLACKS: A CRITICAL REVIEW. Gillum, RF. *Am J Epidemiol* 150:1266-74, 15 Dec '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.

51. AND THE SURVEY SAYS...CUSTOMER BEHAVIOR CAN'T ALWAYS BE PREDICTED. Brown, MG. *J Qual Participation* 23:30-2, Mar-Apr '00.
52. THE BEST CUSTOMER TO HAVE IS THE ONE YOU'VE ALREADY GOT. Zemke, R. *J Qual Participation* 23:33-5, Mar-Apr '00.
53. THE CONSORTIUM APPROACH TO GROOMING FUTURE LEADERS. Lawler, W. *Training Dev* 54:53-7, Mar '00.
54. CULTURE CLASH. Broadwell, MM. *Training* 37:34-6, Mar '00.
55. DIVERSITY MANAGEMENT TIME FOR A NEW APPROACH. Ivancevich, JM. *Public Personnel Manage* 29:75-92, Spr '00.
56. HOW TO CREATE A RESERVOIR OF READY-MADE LEADERS. Byham, WC. *Training Dev* 54:29-32, Mar '00.
57. HUMAN CAPITAL: THE MISSING LINK. Figura, SZ. *Government Executive* 32:22-6, Mar '00.
58. LEADERSHIP THAT GETS RESULTS. Goleman, D. *Harv Bus Rev* 78:78-90, Mar-Apr '00.
59. MEETING THE CHALLENGE OF DISRUPTIVE CHANGE. Christensen, CM. *Harv Bus Rev* 78:67-76, Mar-Apr '00.
60. THE NEW LEADERSHIP DEVELOPMENT. Zenger, J. *Training Dev* 54:22-7, Mar '00.

## RESPONSIBLE FATHERHOOD

Fathers play a critical role in their children's lives and need to provide financial and emotional support for their children. Lack of presence or support from a male role model escalates crime, teen pregnancy, welfare dependency, and child poverty. The literature indicates that fathers are partners in raising their children even when not in the same household. Because of this, they should receive the education and support necessary to prepare them for the responsibility of parenthood. Research indicates that many unwed fathers are providing financial assistance to the child's mother during pregnancy, and that most mothers want the father to be involved in the child's life. The Administration for Children and Families has undertaken activities that recognize and support the roles of fathers in families by implementation of the Fatherhood Initiative into its various programs.

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| <p>61. ENHANCING PARENT-CHILD INTERACTION WITH A PRENATAL COUPLE INTERVENTION. Bryan, AA. <i>MCN Am J Matern Child Nurs</i> 25:139-44, May-June '00.</p> | <p>66. INTIMATE PARTNER VIOLENCE. Loue, S. <i>J Leg Med</i> 21:1-34, Mar '00.</p>   |
| <p>62. FACTORS ASSOCIATED WITH FATHERS' CAREGIVING ACTIVITIES AND SENSITIVITY WITH YOUNG CHILDREN. <i>J Fam Psychol</i> 14:200-19, June '00.</p>         | <p>67. INVOLVEMENT OF AFRICAN AMERICAN FATHERS IN KINSHIP FOSTER CARE SERVICES. O'Donnell, JM. <i>Soc Work</i> 44:428-41, Sep '99.</p>                |
| <p>63. FACTORS INFLUENCING SINGLE MOTHER'S EMPLOYMENT STATUS. Youngblut, JM. <i>Health Care Women Int</i> 21 (2):125-36, '00.</p>                        | <p>68. MOTHERS' PERCEPTIONS OF CHILD CARE ASSISTANCE: THE IMPACT OF A CHILD'S DISABILITY. Crowe, TK. <i>Am J Occup Ther</i> 54:52-8, Jan-Feb '00.</p> |
| <p>64. FATHERS AND CHILD NEGLECT. Dubowitz, H. <i>Arch Pediatr Adolesc Med</i> 154:135-41, Feb '00.</p>  | <p>69. PERCEIVED FAIRNESS AND COMPLIANCE WITH CHILD SUPPORT OBLIGATIONS. Lin, IF. <i>J Marriage Fam</i> 62:388-98, May '00.</p>                       |
| <p>65. IDENTITY THEORY AS A GUIDE TO UNDERSTANDING FATHERS' INVOLVEMENT WITH THEIR CHILDREN. Rane, TR. <i>J Fam Issues</i> 21:347-66, Apr '00.</p>       | <p>70. UNDERSTANDING SUICIDE ATTEMPTS BY ADOLESCENT HISPANIC FEMALES. Zayas, LH. <i>Soc Work</i> 45:53-63, Jan '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.

### FINANCIAL MANAGEMENT

WX  
157  
S547      ANALYSIS OF HOSPITAL  
COSTS: A MANUAL FOR  
MANAGERS. Shepard,  
Donald S. Geneva, World  
Health Organization, 2000,  
92 p.

W  
74  
E921      FINANCIAL FEASIBILITY  
STUDIES FOR  
HEALTHCARE. Evans,  
Christopher, J. New York,  
NY, McGraw-Hill, 2000,  
361 p.

W  
74  
M4637      MEASURING THE PRICES  
OF MEDICAL  
TREATMENTS.  
Washington, DC, Brookings  
Institution Press, 1999, 276 p.

W  
74  
F85124      PHYSICIAN EM-  
POWERMENT THROUGH  
CAPITATION. Frank,  
Clifford R. Gaithersburg,  
MD, Aspen Publishers, 2000,  
258 p.

### HEALTH PLANNING

WT  
30  
G2813      THE AGING NETWORK:  
PROGRAMS AND  
SERVICES. 5th ed. Gelfand,  
Donald E. New York, NY,  
Springer Publishing Co.,  
1999, 247 p.

HV  
30009.5  
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A267      AGING, RIGHTS, AND  
QUALITY OF LIFE:  
PROSPECTS FOR OLDER  
PEOPLE WITH  
DEVELOPMENTAL  
DISABILITIES. Baltimore,  
MD, Paul H. Brookes  
Publishing, 1999, 392 p.

W  
84AA1  
K162      THE BUSINESS SIDE OF  
MEDICINE: A SURVIVAL  
PRIMER FOR MEDICAL  
STUDENTS AND  
RESIDENTS. Kaufman,  
Ronald. Tampa, FL,  
American College of  
Physician Executives, 1999,  
160 p.

W  
80  
S697      CONSUMER SATIS-  
FACTION IN MEDICAL  
PRACTICE. Sommers, Paul  
A. New York, NY, Haworth  
Press, 1999, 197 p.

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130AA1  
B533d      DISABILITY AND  
MANAGED CARE:  
PROBLEMS AND  
OPPORTUNITIES AT THE  
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Birenbaum, Arnold.  
Westport, CT, Praeger, 1999,  
178 p.
- QZ  
266  
E597      ENSURING QUALITY  
CANCER CARE.  
Washington, DC, National  
Academy Press, 1999, 246 p.
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255  
G2855      GENDER INEQUALITIES  
IN HEALTH. Philadelphia,  
PA, Open University Press,  
2000, 214 p.
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S651      HEALTH MANAGEMENT  
INFORMATION SYSTEMS:  
A HANDBOOK FOR  
DECISION MAKERS.  
Smith, Jack. Philadelphia, PA,  
Open University Press, 2000,  
345 p.
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F3337h      HEALTH POLICY ISSUES:  
AN ECONOMIC  
PERSPECTIVE ON  
HEALTH REFORM. 2nd ed.  
Feldstein, Paul J. Washington,  
DC, AUPHA Press, 1999,  
373 p.
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33AA1  
W7263      THE LAW AND THE  
PUBLIC'S HEALTH. 5th  
ed., Wing, Kenneth R.  
Chicago, IL, Health  
Administration Press, 1999,  
343 p.
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84.1  
Y692      MANAGING INTE-  
GRATED DELIVERY  
SYSTEMS: A  
FRAMEWORK FOR  
ACTION. Young, David W.  
Washington, DC, AUPHA  
Press, 1999, 222 p.
- WX  
39  
A696      QUICK REFERENCE TO  
OUTBREAK INVESTI-  
GATION AND CONTROL  
IN HEALTH CARE  
FACILITIES. Arias,  
Kathleen Meehan.  
Gaithersburg, MD, Aspen  
Publishers, 2000,  
339 p.
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S67815      SOCIAL SECURITY AND  
MEDICARE: INDIVIDUAL  
VERSUS COLLECTIVE  
RISK AND  
RESPONSIBILITY.  
Washington, DC, National  
Academy of Social Insurance,  
2000, 232 p.
- W  
322  
G612      SOCIAL WORK PRACTICE  
IN HOME HEALTH CARE.  
Goode, Ruth Ann. New  
York, NY, Haworth Press,  
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WX  
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S559 SOUTHWICK'S THE LAW  
OF HEALTHCARE  
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Showalter, J. Stuart. Chicago,  
IL, Health Administration  
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S79717 STATE -BY-STATE LAWS  
AND REGULATIONS ON  
WORKERS'  
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Gaithersburg, MD, Aspen  
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AND HEALTH CARE 2000:  
THE ROBERT WOOD  
JOHNSON FOUNDATION  
ANTHOLOGY. San  
Francisco, CA, Jossey-Bass,  
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## MANAGEMENT

KF  
2994  
S9248 THE COPYRIGHT BOOK:  
A PRACTICAL GUIDE. 5th  
ed. Strong, William S.  
Cambridge, MA, MIT Press,  
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R5634 THE CORPORATE  
PRACTICE OF MEDICINE:  
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Berkeley, CA, University of  
California Press, 1999, 261 p.

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I57  
M4518 HOW TO ACCESS THE  
FEDERAL GOVERNMENT  
ON THE INTERNET. 4th  
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Congressional Quarterly,  
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P2888 THE SEARCH FOR  
MEANING IN  
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PRACTICAL QUESTIONS  
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L. Westport, CT, Quorum,  
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A376 WEB WISDOM: HOW TO  
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Janet E. Mahwah, NJ,  
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Associates, 1999, 156 p.

## MEDICAL & ALLIED SCIENCES

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A47825 ALZHEIMER'S DISEASE:  
METHODS AND  
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Humana Press, 2000, 408 p.

WS  
105.5.C7  
C43693 CHILDHOOD COGNITIVE  
DEVELOPMENT: THE  
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Malden, MA, Blackwell,  
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H5999 COMMUNICATING WITH  
YOUR PATIENTS: SKILLS  
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Hinz, Christine A. Chicago,  
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G658 EATING DISORDERS:  
ANATOMY OF A SOCIAL  
EPIDEMIC. 2nd ed.  
Gordon, Richard A. Malden,  
MA, Blackwell Publishers,  
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M3195 FED UP: WOMEN AND  
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Manton, Catherine. Westport,  
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S518 SEXUAL DIFFER-  
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Healthcare Research and  
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### MENTAL HEALTH

QV  
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H358 THE ANTIDEPRESSANT  
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**HEALTHCARE STANDARDS 2000.** ECRI, Plymouth Meeting, PA, 2000. Ref-Gen W 22AA1/H349717

The *Healthcare Standards Directory* is a comprehensive guide to healthcare standards and practice guidelines. It includes standards issued by medical societies, professional organizations, government agencies, and other health-related organizations. The standards included in this directory cover an exhaustive range of subjects from guidelines on diagnostic procedures to workplace safety measures. This directory is divided into several sections which include:

Keyword Index Abbreviations Law, Legislation, and Regulation (Federal and State)	Organizations that have issued health care standards Names and Addresses of organizations and agencies
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**THE NATIONAL DIRECTORY OF PHYSICIAN ORGANIZATIONS.** Managed Care Information Center, Manasquan, NJ, 2000. Ref-Assn W 22AA1/N21326

This directory provides detailed profiles of physician hospital organizations (PHOs), independent practice associations (IPAs), management service organizations (MSOs), physician practice management companies (PPMs), and other physician networks and groups. Information provided about each physician organization includes:

Physician Organization Type Organization Profile Specialities Provided Organization Functions	Key Executives Physician Statistics Market Analysis Affiliated/Participating Hospitals/Health Systems
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## PREVIOUS CURRENT TOPICS

Previous current topics can be obtained upon request

Topic	Bulletin No.	Date
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
Emotional Intelligence Colorectal Cancer Homeless Mentally Ill Integrated Delivery Systems Methamphetamine Abuse and Brain Cell Damage Migrant Farmworkers Reinventing Government	486	May 2000
Caregivers and the Elderly Acute Stress Disorder Adverse Drug Events Complementary and Alternative Medicine (CAM) Reinventing Government Stroke Substance Abuse and Genetics	487	June 2000

## **LIBRARY CLIENTELE**

The Parklawn Health Library System serves the following components of the Department of Health and Human Services (HHS):

- Administration for Children and Families
- Administration on Aging
- Agency for Healthcare Research and Quality
- 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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