

Kornhauser Health Sciences Library

University of Louisville
Louisville, Kentucky

COLLECTION DEVELOPMENT POLICIES

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KORNHAUSER HEALTH SCIENCES LIBRARY COLLECTION DEVELOPMENT POLICY

INTRODUCTION

The collection development policy of the Kornhauser Health Sciences Library guides the development of the Library's collections from selection of a specific title through that item's lifespan. This policy addresses the need for the collections to support the missions and goals of the library and the Health Sciences Center. This collection development and management policy provides the framework for decision making by establishing collection priorities and levels, ensuring that even in times of scarce resources, the development of the collections will remain balanced. This policy is directed to library staff, who is responsible for its implementation and to the library's users, who contribute to the policy's ongoing relevance through their use of the collection. It is subject to revision.

The ultimate responsibility for policy decisions governing the scope and direction of the University of Louisville Libraries' collection development rests with the University Librarian. At the Kornhauser Health Sciences Library, the Director is responsible for policy decisions related to the selection of library materials. The implementation of these policies and the development of appropriate procedures is the responsibility of Technical Services. (See also University Libraries Policies and Procedure Manual, *Selection of Materials*, 1998)

I. CLIENTELE:

A. Primary:

Kornhauser Health Sciences Library's primary mission is to support the students, staff and faculty of University of Louisville Health Sciences Center and its academic, research and clinical programs.

B. Secondary:

The library also serves as a resource for members of the Jefferson County Medical Society, other health practitioners in the metropolitan Louisville area and others in the University of Louisville community.

C. Tertiary:

As a member resource library in the National Network of Libraries of Medicine, this library serves practitioners in the western half of Kentucky and clientele that provide funding support to Kornhauser Library for specific acquisitions.

II. SCOPE AND COVERAGE:

The scope of the core HSL collection includes the basic and clinical biomedical sciences, dentistry, nursing, and allied health. Peripheral subjects in other scientific or technical fields are collected if a reasonable portion of the material contributes significant information relevant to the information needs of health professionals. The HSL uses the subjects developed by the NLM Conspectus Model to describe the levels at which various subject areas are collected. [See Appendix I]

Special efforts will be made to insure that the collection represents the full spectrum of healthcare research especially including research pertaining to women's health and the health of minority and special populations.

III. FORMATS:

Although the majority of the library's collections currently consist of print journals and books, materials are purchased in appropriate formats. The Kornhauser Health Sciences Library is committed to providing electronic access to information. [See Appendix II]

IV. SPECIALIZED SELECTION CRITERIA

A. Gifts in Kind - The Kornhauser Library accepts donations of library materials on the condition of full ownership and responsibility for disposition. Items of historical significance are retained in the Historical Collections. Other items are evaluated according to the guidelines outlined in this policy and added to the collection or disposed of at the discretion of library personnel. [See Appendix IV]

Library personnel will not be responsible for tracking or reporting on the disposition of gifts. In addition, library personnel will at no time offer monetary appraisals of such materials, whether donated or not.

B. Kentuckiana – Health sciences materials relevant to this geographic region will be collected using a broader spectrum of selection criteria than normally applied. These materials include publications of and about the Kentuckiana region and persons and organizations associated with the University of Louisville. The primary selection criteria for included items may be a Kentuckiana perspective.

C. Duplication –Kornhauser Library – Internal duplication is to be avoided except under very special circumstances that undergoes continual review. Duplication of titles among formats may occur to maximize public access to library materials.

University Libraries – Duplication among the University Libraries is reviewed on a title by title basis. Duplication should only occur to support current clinical and research needs. University Libraries duplication should also be periodically reviewed.

State and Region – Duplication with state and regional institutions is a factor in selection. Material availability through reciprocal Interlibrary loan agreements is noted during the selection process.

D. Historical Collections – Items of historical value are collected as they relate to our existing historical collections. Kentuckiana items may be included in these acquisitions.

V. Retention

All collections of the Kornhauser Health Sciences Library should be regularly reviewed. Individual items may be reviewed for deselection based on our collection development policy criteria. Deselected items are removed from the collection and all associated indexing.

VI. Reference Collection Development Policy

The Kornhauser Health Sciences Library Reference Collection is a core collection of highly used general and specialized sources of information. The main purpose of a reference collection is convenience. By separating selected, heavily used materials into a distinct location, convenient for all library users at all times, and restricting its use to on-site consultation, users' questions can be answered more efficiently and thoroughly than if the reference materials were available for checkout.

The Reference Collection will be formally reviewed biennially by the IES Team. The Reference Collection Development Policy will be formally reviewed biennially by the IES Team.

A. SCOPE AND COVERAGE

1. Titles are included in this collection primarily because they provide access to the journal literature (indexes, abstracts, and electronic databases); provide factual information (directories, handbooks, dictionaries, statistical compilations), or give general background information on a topic (encyclopedias and textbooks).
2. Materials are chosen for inclusion in the Reference Collection only if they meet the selection criteria based on authoritativeness, currency, comprehensiveness, and ease of use and value to our users.

B. COLLECTION AREAS

1. Reference materials may be in any format: print, electronic and/or multimedia.
2. Types of material to be added to the collection include, but are not limited to:
 - a. Abbreviations and Acronyms
 - i. Inclusion: general and periodicals
 - ii. Collection: current editions only
 - iii. Retention: superseded volumes should be discarded or forwarded to new location
 - b. Abstracts and indexes
 - i. Retention: retain all volumes for which electronic access is not available
 - c. Almanacs
 - i. Collection: current editions only
 - ii. Retention: discard earlier editions
 - d. Dictionaries
 - i. English - Inclusion: current
 - ii. Health sciences
 - Inclusion: general medical and specialized
 - Collection: most recent editions only
 - Retention: place earlier editions in circulating collection
 - iii. English/other languages
 - Inclusion: especially medical or scientific dictionaries in languages our patrons speak or need
 - iv. Pharmacology and toxicology
 - Collection: current editions only
 - Retention: earlier editions to circulating collection
 - e. Directories
 - i. Audiovisual and computer information resources

- Inclusion: reference directories of multimedia materials and computer software with emphasis on sources related to biomedical sciences, health care, database searching, and information technology
- Collection: current editions only
- Retention: discard earlier editions
- ii. Biographical

f. Book catalogs

- i. *Books in Print* and *WorldCat* and/or equivalents available electronically
- ii. Do not collect publishers catalogs

g. Educational information

i. Inclusion: sources of current information about medical schools, graduate medical and biomedical education and training programs, medical licensure, residencies, and matching programs.

- ii. Collection: current editions only
- iii. Retention: discard earlier editions

iv. Formats

Grant registers

- Inclusion: current sources of grants, loans and scholarships
- Collection: current editions only
- Retention: discard superseded volumes
- Note: direct patrons to Office of Sponsored Programs and their web page

Handbooks

- Inclusion: authoritative handbooks in basic and clinical sciences
- Collection: latest editions only
- Retention: earlier editions in stack

Meetings

- Inclusion: scientific and biomedical meetings and conferences
 - Collection: retain 2 years only
 - Retention: discard earlier information

Membership lists

- Collection: latest edition only
- Retention: discard earlier editions

Organizations

- Inclusion: hospitals, research facilities, associations
- Collection: latest edition only
- Retention: discard earlier editions

Serials directory

- Collection: latest edition only
- Retention: earlier editions discarded or forwarded to new location

Supply catalogs

- Exclusion: do not collect

h. Encyclopedias

- i. Inclusion: general knowledge and basic and health sciences specialty works
- ii. Collection: replace at least every five years if necessary
- iii. Retention: discard earlier editions

- i. Standards, codes, practice guidelines
 - i. Collection: latest edition only
 - ii. Retention: superseded volumes to stacks
- j. Statistical compendia
 - i. Inclusion: significant compilations of data on health care, morbidity and mortality (*MMWR* is in journal stacks), socioeconomic factors
 - ii. Collection: most recent editions only
 - iii. Retention: earlier editions in circulating collection
 - k. Style manuals
 - i. Inclusion: resume, curriculum vitae, cover letter and personal statement guides
 - ii. Collection: latest edition only
 - iii. Retention: older edition to stacks
 - l. Tests and measurements
 - i. Inclusion: research instruments, psychological, and aptitude tests
 - ii. Retention: retain earlier editions if not cumulative
- m. Textbooks
 - i. Inclusion: most current, significant textbooks in the basic and clinical sciences
 - ii. Collection: latest edition only
 - iii. Retention: earlier editions in circulating collection
 - iv. Note: duplicate circulating collection if necessary

VII. Collection Development Policy for Electronic Resources

A. Purpose of this Policy

The Kornhauser Health Sciences Library collects or provides access to appropriate materials in print and non-print media. Currently, electronic formats present libraries with management issues that more traditional formats do not. They may be significantly more expensive to acquire and maintain. They may be physically located in a library or they may be housed elsewhere on campus or at remote locations. They may require additional hardware and software to operate or to access. Because these concerns complicate the selection and the accessibility of such materials within the Library, a policy specifically for electronic formats is needed.

This portion of the Collection Development Policy provides context and guidelines in the selection, acquisition, provision of access to, and maintenance of electronic resources but does not address issues of content. No electronic resource will be considered for acquisition unless it first meets standards outlined elsewhere in this document relating to subject area and authority.

Because of the rapid changes occurring in the marketplace regarding technology, licensing and copyright, this portion of the policy should be updated at least every two years. As electronic resources become more common and familiar in the library a separate section of the policy may not be needed.

Initial purchases of electronic resources (or addition of free links from the Kornhauser home page) may not follow all the guidelines in this policy which is aimed at providing guidance in the long

term. In an effort to gain experience with the use of these materials and to gauge the usefulness of these materials, acquisitions during the period from 1999-2000 may be experimental in nature.

Because accessibility of electronic resources is dependent on technology (perhaps inside and outside the library) and may require publicity and training (of both staff and library users) both the library Systems Department and the Information and Educational Services Team need to be involved in making selection and implementation decisions.

B. Scope of this Policy

1. This policy addresses the selection of the following types of electronic materials:
 - a. Journals, books, proceedings and other traditional ways of organizing information, but presented in an “electronic” format, i.e. primarily designed for display on a computer monitor
 - b. Resources available on the World Wide Web - These may include access to publishers’ sites, search engines or aggregates of URL’s (pointers) on a specific topic or subject area
 - c. Other types of electronic resources that may be developed
2. This policy does not cover general-purpose applications software such as authoring programs, reference management programs, productivity programs, and integrated library management programs (e.g., Voyager).
3. This policy does not cover any resources purchased primarily for staff use.

C. Selection Criteria

1. Primary Criteria

Primary criteria for selection of electronic resources are no different than those for selection of traditional library materials. Relevance, demand, content, scope, organization, quality, currency and timeliness should provide the initial screening criteria. However, electronic materials must also meet standards set in the list of secondary criteria below.

2. Secondary Criteria

a. Access/Networking Capabilities

Resources available to many users simultaneously are to be preferred over single-user systems. Preference will be given to products accessible on any university campus and the computers of authorized users at remote sites.

Access to remotely loaded resources through vendor or consortium sites must be considered in terms of: performance of the system at peak loads; performance of the Internet in retrieving files, printing documents, and speed at peak times; and, the need to deploy client software on the local desktop computers. Products that require no locally loaded client software are to be preferred.

b. Systems and Technical Support

Library systems staff must be able to provide assistance and troubleshoot problems with software. Both user and operational support must be considered. If the Library's systems staff are unable to provide such support, the company providing the software must have a help-line available to answer questions. The quality of the technical support from the vendor and their responsiveness to problems must also be evaluated if possible.

c. Simultaneous Users

The number of simultaneous users supported by the system must be sufficient to meet the needs of the Medical Center/University community. The cost per simultaneous user should be considered in terms of the value of the content and fees charged for similar databases or resources.

d. Licensing

The licensing agreement or contract must be carefully reviewed to ensure that the Library maintains its rights for “fair use” and the resource is accessible to all University faculty, staff, and students.

The contract should stipulate the University of Louisville and not just Health Sciences Center faculty, staff and students if possible.

Non-contiguous/non-adjacent campus sites should be covered as well as the main campus areas.

The license should permit normal Library functions including providing reference services, interlibrary loans, and internal photocopy services.

Restrictions on access through passwords, IP addresses or other means should be evaluated in terms of: how cumbersome it will be for key clientele to access the service; whether access from public workstations is permitted; the difficulty in complying with or policing the restrictions; and, the amount of staff time required to manage the system for restricting access. Some questions to consider are: Are passwords required for each user? Is access from public terminals allowed? How many IP addresses can be used?

Whenever possible, the *Principles For Licensing Electronic Resources* established by AALL, ALA, AAHSL, ARL, MLA and SLA should be followed when reviewing licensing agreements. (Available at <http://www.arl.org/scomm/licensing/principles.html> and included as Appendix A.)

e. Software Requirements

Preference should be given to resources that require no special software (other than what is currently “standard”, i.e. a web browser, Adobe Acrobat, to be loaded on users’ computers.) Special software required on each patron’s desktop must be evaluated in terms of ease of use, distribution, installation, and maintenance. Consideration must be given to staff time and methods for installing and maintaining the software on each desktop unit.

f. Training and Educational Support

Handouts, manuals and other instructional information should be reviewed. It should be determined if additional materials will need to be created or if special education programs will be required for staff and patrons. An estimate of the amount of time to learn and teach the system should be made.

g. Cost

The price of an electronic resource is considered in relation to the primary criteria but it is not the sole factor for determining the appropriateness of a title for the collection. Equipment

requirements and costs, as well as licensing fees must be considered in addition to the purchase price of the product.

Vendor pricing formulas based on the number of users, networks, buildings, etc. must also be considered. The formula should be based on logical criteria, which meet the needs of the institution.

h. Duplication

From 1999 until 2003 the preference of the library will be to retain previously owned printed materials despite the acquisition of an electronic version. This paragraph may be removed from the policy if circumstances dictate.

If cancellation or discard of an existing paper resource in favor of an electronic replacement is being considered the following archival considerations must be taken into account.

i. Guarantees in the license agreement that electronic archival copies will be available to the library in perpetuity or

ii. Guarantees in the license agreement that the library may procure and retain electronic copies of the product

When number one above is satisfied by the existence of a copy of the resource held in escrow it is imperative that agreements with the provider specify how continued readability, in light of changing technology, will be maintained.

University of Louisville Libraries

Gift and Appraisal Policy of the University Libraries

1. The University of Louisville Libraries encourage and gratefully accept donations of money, books, or related library materials. Interested donors are invited to contact the University Librarians Office for assistance in identifying those individuals or departments responsible for handling specific types of gifts.
2. Any gifts to the library that are not to be added to the circulating, historical or archival collections are accepted at the discretion of the University Librarian or a Library Director. Examples could include art, plaques, or equipment.
3. In the absence of an agreement to the contrary, the Libraries reserve the right to decline, exchange or otherwise dispose of any donated materials.
4. Library policy prohibits the acceptance of conditional or restrictive donations which limit general access to patrons, require private housing or handling, stipulate frequent or perpetual exhibition to identify the donor, or in any way inhibit the normal integration or ultimate disposition of such gifts within the Library system. The University Librarian, or in the case of a gift to the University Archives the University Archivist, may make exceptions to this policy only if the acceptance of certain restricted donations serves the best interests of the University.
5. Inheritance or Income Tax appraisals of gifts to the Library are the responsibility of the donor, since it is the donor who requires this information rather than the Library. The Library recommends independent appraisals of valuable items at the time of donation.
6. Acceptance of a gift that has been appraised by a third, disinterested party does not imply endorsement of such appraisal by the Library.
7. The appraisal cost must be borne by the donor.
8. Qualified employees may appraise materials not being donated to the University of Louisville, but they shall not use university stationery or suggest in any other way that their appraisals are endorsed by the university.

July 28, 1999 – Approved by ACT

Appendix I - Collection Guidelines

I. General Collection Guidelines

- a. Language – English is the primary language of all collections. Foreign language titles are acquired only if the majority of content is in English. Few exceptions are made to this guideline.
- b. Chronology – Except for specific historical collections, only materials that cover current practice and procedure are acquired. Exceptions are made for coverage in new subject areas in support of designated programs.
- c. Geography – Geographical coverage is not necessarily a primary factor in the selection of biomedical materials, however, practice and procedure in North America is emphasized.
- d. Publication date – Except for specific historical collections, only very current materials (within the last 5 years) are collected.
- e. Imprint – North American imprints are emphasized.
- f. Brandon/Hill titles in Allied Health, Nursing, and Medicine are actively collected.

II. Specific Format Guidelines

Abridged Editions - generally not collected.

Abstracting and Indexing Services – prefer electronic format

Academic Dissertations - not collected

Alumni Bulletins - not collected

Annual Reports - selected biomedical agencies

Atlases – collected selectively

Bibliographies – collected very selectively

Biographies and Autobiographies – collected very selectively, usually in historical collections

Bulletins and Transactions - collected based on subject matter and program support

Case Histories – collected selectively

Catalogs – generally not collected

Computer-Based Educational Materials (Computer-Assisted Instructional Materials) – collected very selectively

Congresses/Conferences/Symposia, etc. – collected based on subject matter and program support

Directories – membership directories generally will not be collected below the national level, with the exception of materials of local interest

Examination Guides – collected selectively

Government Publications – collected very selectively

Health Education and Patient Education Materials – generally not collected

Lectures and Speeches – not collected

Loose-leaf Publications – collected very selectively

Laboratory Manuals – generally not collected

Maps, Graphs, Posters, and Charts – not collected

Microforms – generally not collected

Newspapers – very selectively acquired with limited retention

Newsletters – generally not collected

Popular Works – very selectively collected

Programmed Texts – generally not collected

Promotional Materials – not collected

Reprints – not collected, except for historical collections
Software – not incorporated in library’s collections
Statistics – collected, based on subject matter and program support
Syllabi and Course Outlines – not collected
Tests – not collected
Textbooks – very selectively collected
Translations – very selectively collected
Unpublished Materials – generally not collected except for historical collections

Appendix II PRINCIPLES FOR LICENSING ELECTRONIC RESOURCES

FINAL DRAFT
July 15, 1997

American Association of Law Libraries
American Library Association
Association of Academic Health Sciences Libraries
Association of Research Libraries
Medical Library Association
Special Libraries Association

Introduction

License agreements are a fact of life in conducting business in the electronic environment. Providers of electronic information resources are employing licenses as a legal means of controlling the use of their products. In the electronic environment where the traditional print practice of ownership through purchase is being replaced by access through license, libraries need to be aware that licensing arrangements may restrict their legal rights and those of their users. As responsible agents for an institution, librarians must negotiate licenses that address the institution's needs and recognize its obligations to the licensor.

To help provide guidance in this continuously evolving environment, the American Association of Law Libraries, American Library Association, Association of Academic Health Sciences Libraries, Association of Research Libraries, Medical Library Association, and Special Libraries Association has combined to develop a statement of principles. These six associations represent an international membership of libraries of all types and sizes. The intent of this document is two-fold: to guide libraries in negotiating license agreements for access to electronic resources, and to provide licensors with a sense of the issues of importance to libraries and their user communities in such negotiations. The Special Libraries Association provided funding to support the development and distribution of the principles. The Principles are available on the Web at:
</scomm/licensing/principles.html>

Legal Background

A license agreement is a legal contract--"a promise or set of promises constituting an agreement between the parties that gives each a legal duty to the other and also the right to seek a remedy for the breach of those duties. Its essentials are competent parties, subject matter, a legal consideration, mutuality of agreement, and mutuality of obligations." [Black's Law Dictionary, 6th edition, 1990, p. 322.] Key to the concept of a contract is the fact that it is an agreement, a mutually acceptable set of understandings and commitments often arrived at through discussion and negotiation. Most commercial contracts are intended to spell out the mutual understandings between buyer and seller for products or services.

Although the original contract document may be the work product of either the buyer or seller, in a licensing situation, it is generally the seller (or licensor) who has prepared the agreement. It is

imperative that the buyer (or licensee) review the terms of the agreement and communicate concerns to the licensor before signing it. Discussion may continue until either agreement is reached or a decision is made not to contract for the particular product or service. In the area of licensing electronic resources, failure to read and understand the terms of the agreement may result in such unintended consequences as:

- the loss of certain rights to uses of the resource that would otherwise be allowed under the law (for example, in the United States, such uses as fair use, interlibrary loan, and other library and educational uses);
- obligations to implement restrictions that are unduly burdensome or create legal risk for the institution; or,
- sudden termination of the contract due to inappropriate use by a member of the user community.

Given the obligations that a contract creates for an institution and the possible liability associated with not meeting those obligations, most institutions will delegate the authority to sign contracts to a specific office or officer within the institution. In many institutions, this signatory authority will reside in the purchasing department, legal counsel's or vice president's office, or the library director's office, although in some institutions, a library staff member may be granted authority for signing license agreements. Nevertheless, library staff will often be responsible for initial review and negotiation of the material terms of the license because they have the most knowledge of the user community and of the resource being acquired. Library staff should be well informed of the uses critical to the library's user community (for example, printing, downloading, and copying).

An important category of license agreements is that including "shrink wrap" and "click" licenses. Such licenses are commonly found on the packaging of software, appear when software is loaded, or appear, sometimes buried, on Web sites. The terms of these licenses are made known to the user at the time the product is purchased, or just before or during use. The user has only two options: accept the license terms or do not use the software, electronic product, or Web site. Traditional contract terminology defines these agreements as "contracts of adhesion," because there are no formal negotiations between licensor and licensee. Hence, the rules of use are imposed by one side, rather than evolved through a discussion leading to a mutual understanding or "meeting of the minds." While many courts reject these contracts or rewrite particular terms on the basis of equity, one cannot assume that the terms are unenforceable. In fact, some states are in the process of passing legislation that makes shrink wrap or click licenses enforceable. A purchasing library should consider contacting the licensor directly to determine if there are any license terms which can be modified to fit the special needs of libraries. Often, if there are competing products which can satisfy the user's needs equally well, exceptions to the form agreement may be negotiated. If negotiation is not possible, it is suggested that legal counsel be consulted for an opinion of enforceability prior to accepting or rejecting the product. The following principles are meant to provide guidance to library staff in working with others in the institution and with licensors to create agreements that respect the rights and obligations of both parties.

Principles for Licensing Electronic Resources

1. A license agreement should state clearly what access rights are being acquired by the licensee-- permanent use of the content or access rights only for a defined period of time.
2. A license agreement should recognize and not restrict or abrogate the rights of the licensee or its user community permitted under copyright law. The licensee should make clear to the licensor those uses critical to its particular users including, but not limited to, printing, downloading, and copying.
3. A license agreement should recognize the intellectual property rights of both the licensee and the licensor.
4. A license agreement should not hold the licensee liable for unauthorized uses of the licensed resource by its users, as long as the licensee has implemented reasonable and appropriate methods to notify its user community of use restrictions.
5. The licensee should be willing to undertake reasonable and appropriate methods to enforce the terms of access to a licensed resource.
6. A license agreement should fairly recognize those access enforcement obligations which the licensee is able to implement without unreasonable burden. Enforcement must not violate the privacy and confidentiality of authorized users.
7. The licensee should be responsible for establishing policies that create an environment in which authorized users make appropriate use of licensed resources and for carrying out due process when it appears that a use may violate the agreement.
8. A license agreement should require the licensor to give the licensee notice of any suspected or alleged license violations that come to the attention of the licensor and allow a reasonable time for the licensee to investigate and take corrective action, if appropriate.
9. A license agreement should not require the use of an authentication system that is a barrier to access by authorized users.
10. When permanent use of a resource has been licensed, a license agreement should allow the licensee to copy data for the purposes of preservation and/or the creation of a usable archival copy. If a license agreement does not permit the licensee to make a usable preservation copy, a license agreement should specify who has permanent archival responsibility for the resource and under what conditions the licensee may access or refer users to the archival copy.
11. The terms of a license should be considered fixed at the time the license is signed by both parties. If the terms are subject to change (for example, scope of coverage or method of access), the agreement should require the licensor or licensee to notify the other party in a timely and reasonable fashion of any such changes before they are implemented, and permit either party to terminate the agreement if the changes are not acceptable.
12. A license agreement should require the licensor to defend, indemnify, and hold the licensee harmless from any action based on a claim that use of the resource in accordance with the license infringes any patent, copyright, trademark, or trade secret of any third party.
13. The routine collection of use data by either party to a license agreement should be predicated upon disclosure of such collection activities to the other party and must respect laws and institutional policies regarding confidentiality and privacy.
14. A license agreement should not require the licensee to adhere to unspecified terms in a separate agreement between the licensor and a third party unless the terms are fully reiterated in the current license or fully disclosed and agreed to by the licensee.
15. A license agreement should provide termination rights that are appropriate to each party.

APPENDICES

A. Terms to be Defined by the Licensee Within a License Agreement

A license agreement should define clearly the terms used and should use those terms consistently throughout. The licensee should take responsibility for defining the following terms appropriate to its user community:

Archive, authorized use, authorized user, concurrent use, institution, local access, local area, network, remote access, simultaneous use, site, wide area network

B. Resources on Licensing

1. Brennan, Patricia, Karen Hersey, and Georgia Harper. Licensing Electronic Resources: Strategic and Practical Considerations for Signing Electronic Information Delivery Agreements. Washington: Association of Research Libraries, 1997. Also on the Web </scomm/licensing/licbooklet.html>.
2. "LibLicense: Licensing Electronic Resources." Website and Discussion List. 1996. <http://www.library.yale.edu/~llicense/index.shtml>.
3. University of Texas System contains a range of resources related to copyright in the library. Includes an interactive Software and Database License Agreement Checklist. <http://www.utsystem.edu/ogc/intellectualproperty/cprtindx.htm> .

C. Sources Consulted

The Working Group would like to thank a number of individuals and organizations for sharing with us drafts, notes, and memos about licensing principles that are not publicly available: Trisha Davis and Brian Schottlaender, the Association of Academic Health Sciences Libraries, Massachusetts Institute of Technology, and the University of New Mexico. Other sources the Working Group consulted are listed below. We would also like to thank the many individuals--librarians, vendors, publishers, and lawyers--who reviewed earlier drafts and provided excellent feedback, and the Special Libraries Association for providing the funding for this effort.

1. American Library Association, Association for Library Collections & Technical Services, Publisher/Vendor Library Relations Committee, Electronic Publishing Licensing Agreements Subcommittee. "Guidelines Document, Draft 2.2." 20 June 1995.
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<http://www.library.yale.edu/~Llicense/index.shtml>.
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The members of the Working Group welcome your comments on this document.

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COLLECTION PROFILES BY SUBJECT

Subject Group	Subject	Undergrad	Graduate	Research	Clinical
AEROSPACE MEDICINE	AEROSPACE MEDICINE				
ALLERGY AND IMMUNOLOGY	ALLERGY AND IMMUNOLOGY		x	x	x
	HYPERSENSITIVITY		x	x	x
	IMMUNOLOGIC DISEASES		x	x	x
ANATOMY	ANATOMY	x	x	x	x
ANESTHESIOLOGY	ANESTHESIA		x	x	x
	ANESTHESIOLOGY		x	x	x
	ANESTHESIOLOGY--HISTORY				
	ANESTHETICS		x	x	x
	ETHER		x	x	x
	HYPNOTISM			x	
	MORPHINANS		x	x	x
	NEUROMUSCULAR BLOCKING AGENTS		x	x	x
BIOCHEMISTRY	BIOCHEMISTRY	x	x	x	x
CARDIOVASCULAR SYSTEM	CARDIOLOGY		x	x	x
	CARDIOVASCULAR DISEASES		x	x	x
	CARDIOVASCULAR SYSTEM		x	x	x
	CARDIOVASCULAR SYSTEM-SURGERY		x	x	x
CHIROPRACTIC	CHIROPRACTIC				
	CHIROPRACTIC-HISTORY				
COMMUNICABLE DISEASES	BACTERIAL INFECTIONS		x	x	x
	COMMUNICABLE DISEASES		x	x	x
	COMMUNICABLE DISEASES-HISTORY		x	x	x
	MYCOSES		x	x	x
	PARASITIC DISEASES		x	x	x
	PROTOZOAN INFECTIONS		x	x	x
	RICKETTSIAL INFECTIONS		x	x	x
	SPIROCHAETALES INFECTIONS		x	x	x
	TROPICAL MEDICINE		x	x	x
	TUBERCULOSIS		x	x	x
	VENEREAL DISEASES		x	x	x
	VIRUS DISEASES		x	x	x
	ZOONOSES		x	x	x
DENTISTRY	DENTISTRY		x	x	x
	DENTISTRY, OPERATIVE		x	x	x
	EDUCATION, DENTAL		x	x	x
	FORENSIC DENTISTRY		x	x	x
	HISTORY OF DENTISTRY		x	x	x
	MOUTH DISEASES		x	x	x
	ORTHODONTICS		x	x	x
	PROSTHODONTICS		x	x	x
	SURGERY, ORAL		x	x	x
DERMATOLOGY	DERMATITIS		x	x	x

	DERMATOLOGY		X	X	X
	DERMATOLOGY, HISTORY				
	SKIN DISEASES		X	X	X
EMBRYOLOGY	EMBRYOLOGY		X	X	
ENDOCRINOLOGY	ENDOCRINE DISEASES		X	X	X
	ENDOCRINE GLANDS-SURGERY		X	X	X
	ENDOCRINOLOGY		X	X	X
	ENDOCRINOLOGY-HISTORY				
GASTROINTESTINAL SYSTEM	GASTROENTEROLOGY		X	X	X
	GASTROENTEROLOGY-HISTORY				
	GASTROINTESTINAL DISEASES		X	X	X
	GASTROINTESTINAL SYSTEM		X	X	X
	GASTROINTESTINAL SYSTEM-SURG		X	X	X
GERIATRICS	CHRONIC DISEASE		X	X	X
	GERIATRICS		X	X	X
	GERIATRICS-HISTORY				
GYNECOLOGY	CONTRACEPTION				X
	GENITAL DISEASES, FEMALE		X	X	X
	GENITALIA, FEMALE-SURGERY		X	X	X
	GYNECOLOGY		X	X	X
	GYNECOLOGY-HISTORY				
HEALTH CARE	DELIVERY OF HEALTH CARE	X	X	X	X
	HEALTH ADMINISTRATION AND ORG	X			
	HEALTH INSURANCE				
	SOCIAL, ENVIRONMENTAL, ECONOM	X			
	SPECIAL POPULATION GROUPS	X	X	X	
HEMATOLOGY	HEMATOLOGIC DISEASES		X	X	X
	HEMATOLOGY		X	X	X
	LYMPHATIC DISEASES		X	X	X
HISTOLOGY	HISTOLOGY	X	X	X	X
HISTORY OF MEDICINE	HISTORY OF MEDICINE	X			
	HISTORY OF MEDICINE-BIOGRAPHY	X			
	HISTORY OF MEDICINE-LOCALITY	X			
	HISTORY OF MEDICINE, 15TH CENT	X			
	HISTORY OF MEDICINE, 16TH CENT	X			
	HISTORY OF MEDICINE, 17TH CENT	X			
	HISTORY OF MEDICINE, 18TH CENT	X			
	HISTORY OF MEDICINE, 19TH CENT	X			
	HISTORY OF MEDICINE, 20TH CENT	X			
	HISTORY OF MEDICINE, ANCIENT	X			
	HISTORY OF MEDICINE, MEDIEVAL	X			
HOMEOPATHY	HOMEOPATHY				
	HOMEOPATHY-HISTORY				
HOSPITALS	HOSPITAL ADMINISTRATION	X			
	HOSPITALS AND MEDICAL CENTERS	X			

	CLINICAL DEPARTMENTS AND UNITS	x			
MEDICAL SOCIOLOGY	MEDICAL SOCIAL WORK		x	x	x
	MEDICAL SOCIOLOGY		x	x	x
MEDICINE	BIOMEDICAL ENGINEERING		x	x	x
	ECONOMICS, MEDICAL		x	x	x
	EDUCATION, MEDICAL		x	x	x
	ETHICS, MEDICAL		x	x	x
	MALPRACTICE				x
	MEDICAL ILLUSTRATION				x
	MEDICINE		x	x	x
	PHILOSOPHY, MEDICAL	x	x		
	PROFESSIONAL PRACTICE				x
	QUACKERY				
	STATISTICS		x	x	x
	THERAPEUTICS		x	x	x
METABOLIC DISEASES	METABOLIC DISEASES		x	x	x
	METABOLISM, INBORN ERRORS		x	x	x
	OBESITY		x	x	x
MICROBIOLOGY	BACTERIA		x	x	x
	MICROBIOLOGY		x	x	x
	MICROBIOLOGY-HISTORY		x	x	x
MILITARY MEDICINE	MILITARY MEDICINE				
	MILITARY MEDICINE-HISTORY				
MUSCULOSKELETAL SYSTEM	BONE DISEASES		x	x	x
	MUSCULAR DISEASES		x	x	x
	MUSCULOSKELETAL SYSTEM		x	x	x
	ORTHOPEDICS		x	x	x
NAVAL MEDICINE	NAVAL MEDICINE				
	NAVAL MEDICINE-HISTORY				
NEOPLASMS	BRAIN NEOPLASMS		x	x	x
	CARCINOGENS		x	x	x
	LEUKEMIA		x	x	x
	MEDICAL ONCOLOGY		x	x	x
	NEOPLASMS		x	x	x
	NEOPLASMS--SURGERY		x	x	x
	RADIOTHERAPY		x	x	x
	RESPIRATORY TRACT NEOPLASMS		x	x	x
NERVOUS SYSTEM	NERVOUS SYSTEM		x	x	x
	NERVOUS SYSTEM DISEASES		x	x	x
	NEUROLOGY--HISTORY				
	NEUROSURGERY		x	x	x
NURSING	CARDIOVASCULAR DISEASES--NU	x	x	x	x
	COMMUNITY HEALTH NURSING	x	x	x	x
	EDUCATION, NURSING		x	x	
	GERIATRIC NURSING	x	x	x	x

	HISTORY OF NURSING	x			
	NURSE PRACTITIONERS	x	x	x	x
	NURSING	x	x	x	x
	NURSING, PRACTICAL				
	OBSTETRICAL NURSING	x	x	x	x
	PHILOSOPHY, NURSING	x			
	PSYCHIATRIC NURSING	x	x	x	x
	PUBLIC HEALTH NURSING	x	x	x	x
	SURGICAL NURSING	x	x	x	x
	UROLOGIC DISEASES--NURSING	x	x	x	x
NUTRITION DISORDERS	DEFICIENCY DISEASES	x	x	x	x
	NUTRITION DISORDERS	x	x	x	x
	PELLAGRA	x	x	x	x
OBSTETRICS	ABORTION		x	x	x
	FETAL DISEASES		x	x	x
	FETUS		x	x	x
	OBSTETRICS		x	x	x
	OBSTETRICS--HISTORY				
	PREGNANCY	x	x	x	x
OCCUPATIONAL THERAPY	OCCUPATIONAL THERAPY				
OPHTHALMOLOGY	BLINDNESS		x	x	x
	EYE DISEASES		x	x	x
	EYE--SURGERY		x	x	x
	OPHTHALMOLOGY		x	x	x
	OPHTHALMOLOGY--HISTORY				
	VISION DISORDERS		x	x	x
OPTOMETRY	EYEGLASSES				
	OPTOMETRY				
	OPTOMETRY--HISTORY				
OSTEOPATHY	OSTEOPATHY				
OTOLARYNGOLOGY	AUDIOLOGY		x	x	x
	EAR--ANATOMY AND HISTOLOGY		x	x	x
	OTOLARYNGOLOGY		x	x	x
	OTOLARYNGOLOGY--HISTORY				
	OTOLOGY		x	x	x
PARASITOLOGY	ARTHROPODS		x	x	x
	INSECT VECTORS		x	x	x
	PARASITIC DISEASES		x	x	x
	PARASITOLOGY		x	x	x
PATHOLOGY	GENETICS, MEDICAL		x	x	x
	PATHOLOGY		x	x	x
	PATHOLOGY--CLINICAL		x	x	x
	PATHOLOGY--HISTORY				
PEDIATRICS	CHILD DEVELOPMENT		x	x	x
	CHILD NUTRITION		x	x	x

	CHILD PSYCHIATRY		X	X	X
	PEDIATRICS		X	X	X
	PEDIATRICS--HISTORY				
PHARMACOLOGY	ANTIBIOTICS			X	X
	DRUGS			X	X
	PHARMACOLOGY			X	X
	PHARMACOLOGY--HISTORY				
PHARMACY	CHEMISTRY, PHARMACEUTICAL			X	X
	DISPENSATORIES			X	X
	DRUGS, NON-PRESCRIPTION			X	X
	FORMULARIES			X	X
	PHARMACOGNOSY			X	X
	PHARMACOPOEIAS			X	X
	PHARMACY			X	X
	PHARMACY--HISTORY				
PHYSICAL THERAPY	ELECTROTHERAPY	X	X		X
	HYDROTHERAPY	X	X		X
	PHOTOTHERAPY	X	X		X
	PHYSICAL THERAPY	X	X		X
	PHYSICAL THERAPY--HISTORY				
PHYSIOLOGY	PHYSIOLOGY		X	X	X
	SPORTS MEDICINE		X	X	X
PSYCHIATRY	COMMUNITY PSYCHIATRY		X	X	X
	HOSPITALS, PSYCHIATRIC		X	X	X
	PSYCHIATRY		X	X	X
	PSYCHIATRY--HISTORY				
	PSYCHOSOMATIC MEDICINE		X	X	X
	PSYCHOTHERAPY		X	X	X
	SUBSTANCE ABUSE		X	X	X
PUBLIC HEALTH	EMERGENCY MEDICAL SERVICES				X
	EPIDEMIOLOGY		X	X	
	HOSPITALS			X	
	HOSPITALS--HISTORY				
	OCCUPATIONAL MEDICINE		X	X	
	PREVENTIVE MEDICINE	X	X	X	X
	PUBLIC HEALTH	X	X	X	X
RADIOLOGY	RADIOGRAPHY	X	X	X	X
	RADIOLOGY	X	X	X	X
	RADIOLOGY--HISTORY				
	RADIOTHERAPY	X	X	X	X
RESPIRATORY SYSTEM	RESPIRATION DISORDERS	X	X	X	X
	RESPIRATORY SYSTEM	X	X	X	X
	RESPIRATORY SYSTEM--SURGERY	X	X	X	X
SURGERY	PATHOLOGY, SURGICAL		X	X	X
	SURGERY		X	X	X

	SURGERY--HISTORY				
	SURGERY, OPERATIVE		X	X	X
	SURGERY, PLASTIC		X	X	X
TOXICOLOGY	POISONING		X	X	X
	TOXICOLOGY		X	X	X
	TOXICOLOGY--HISTORY				
UROGENITAL SYSTEM	UROGENITAL SYSTEM		X	X	X
	UROGENITAL SYSTEM--SURGERY		X	X	X
	UROLOGIC DISEASES		X	X	X
	UROLOGY--HISTORY				
VIROLOGY	VIROLOGY		X	X	X