National Library of Medicine  
Selection Criteria for Digital Reformatting

I. Introduction

The goals of the Library’s digitization program are to increase access to its collections and provide wider use of its rich resources in the areas of medicine, health care and public health while preserving rare, valuable and fragile materials. Selection of materials for digital reformatting is based on monetary, scholarly and historical value; bibliographic control; frequency of use; physical condition; the existence of digital copies elsewhere; copyright status; and the appropriateness of digital reproductions for use and access.

Because selection criteria for access are often different from those for preservation, the Library has created a different set of selection criteria for each mission. Each approach focuses on all types of materials in the Library’s collections including but not limited to printed monographs and journals, manuscripts and archives, prints and photographs, and audiovisusals.

To eliminate the need to digitize materials more than once and to ensure long-term preservation of the files, NLM minimum guidelines for technical quality and descriptive metadata apply to all images created from the NLM collections.

II. Digitization as an Access Tool

In order to increase access to the collections, the Library will digitize collections of interest to its many audiences, including health care professionals, historians, bibliographers, librarians, and students and educators at all levels.

A. Scholarly and Historical Value

The Library will select groups of materials that make up important and useful online collections, based primarily on the materials’ scholarly and historical value. These include:

- Collections based on subjects or genres, particularly those in which the Library’s collection is strong, such as early Americana
- Works selected for NLM online exhibitions
• Materials useful for teaching the history of medicine, health care, and public health at all levels

• Items most frequently requested by the public, onsite or by interlibrary loan

• Reference works such as dictionaries and directories

• Frequently cited works (e.g., Garrison-Morton titles)

• Milestones in medical publishing.

B. Bibliographic control

The Library will digitize materials only if they have been cataloged. Uncataloged items will be cataloged prior to digitization. In the case of journals, the Library will place an emphasis on digitizing titles that have been indexed.

C. Microfilmed materials

Because digitization of microfilm is generally less expensive and does not harm the originals, the Library will place an emphasis on digitizing materials that have good microfilm copies available. This includes NLM microfilm produced since 1986 when the preservation microfilming program began and approximately half of the NLM microfilm produced prior to that date.

D. Geographical Considerations

As the medical library of record for the United States, NLM will emphasize the digitization of works from the U.S. Secondary emphasis will be placed on works from elsewhere in the Western Hemisphere, especially those that document the relationship between other American cultures and U.S. medical thought and health care. To a lesser extent, materials from the rest of the world also may be considered, if they are important to the genre or subject that NLM selects for digitization.

E. Linguistic Considerations

The Library will place an emphasis upon languages important to the development of medicine, health care, and public health in the U.S., with a special emphasis on English.
F. Materials Digitized by Other Institutions

The Library will give a lower priority to digitizing materials that have been digitized by other institutions and publishers.

The Library will monitor other digitization projects at American libraries and important libraries in Europe, Latin America, and Asia, including the Wellcome Library and the Bibliothèque Interuniversitaire de Médecine (BIUM) in Paris.

G. Copyright Status

The Library normally will consider digitizing only those materials that are in the public domain. For non-governmental materials printed in the U.S., this generally refers to works published before 1923.

III. Digitization as a Preservation Tool

Some titles which are in poor condition may not be selected for digitization projects that focus on providing access to content that is in high demand. For this reason, the following criteria will be used for selecting titles for preservation:

A. Condition

Condition of an item will govern its priority for digitization. Priority will be given to materials that are at risk of text loss or otherwise in such deteriorated condition that their use must be limited.

B. Content

Materials will be selected for digitization on the basis of the importance of their content as determined by History of Medicine Division or other NLM staff.

C. Uniqueness

Materials may be selected for digitization if known to be held by few if any other U.S. libraries.
D. Monetary Value

Materials of high monetary value that would be difficult to replace may be selected for digitization in order to protect the originals from use.

E. Unacceptable Damage

If damage to fragile historical materials is likely to occur during digitization, materials will be selected for digitization only after History of Medicine Division staff has approved disbinding or damage. Print copies will be retained after digitization.

F. Technical Feasibility

Materials will be selected for digitization only if the technology exists to create master files of sufficient quality for long term preservation.

G. Copyright

The Library generally will not select for preservation copyrighted titles that were published after 1922 unless they are in very deteriorated condition. Under current copyright law, only on-site access may be provided to copyrighted titles that have been digitized for preservation.

H. Materials Digitized by Other Institutions

NLM normally will not select titles for preservation that have been digitized by institutions that follow current standards and best practices for preservation reformatting and have made a commitment to ensure their long-term availability.

I. PubMed Central Titles

Journals that have been included in the PubMed Central backfile scanning project will not be selected for preservation digitization projects.

J. Materials Microfilmed By NLM

Volumes microfilmed by NLM since 1986 when the preservation microfilming program began and older NLM microfilm found to be of acceptable quality will be given lower priority for
preservation digitization projects since their content already has been preserved.

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