### **Articles**

Try New, Experimental PubMed Search and User Interface in PubMed Labs

e9 2017 October 19 [posted]

**Removing General Material** Designations from NLM Cataloging Records

e8 2017 October 06 [posted]

ClinicalTrials.gov: More Changes to **Improve Usability** e7 2017 September 25 [posted]

**Changes to Indicators for Some** Subject Fields in MARC Records—Comment by October 31, 2017

e6 2017 September 25 [posted]

**Equal Contribution for Authors in** PubMed e5 2017 September 14 [posted]

**NLM Releases Production MeSH RDF** 

e4 2017 September 13 [posted]

2018 MeSH Headings Available in the MeSH Browser

e3 2017 September 12 [posted]

MEDLINE/PubMed Year-End **Processing Activities for 2018** e2 2017 September 12 [posted]

**NLM Classification 2017 Summer Edition Now Available** 

e1 2017 September 01 [posted]

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NCBI Minute Webinar: Create, Link, and Share Your Bibliography PubMed Tools and ORCID **Identifiers for Authors on October** 4, 2017

b10 2017 September 28 [posted]

**NLM Webinar: LinkOut for Libraries:** From Icons to Full Text and **Everything in Between on October 18, 2017** b9 2017 September 21 [posted]

**NLM VSAC Publishes Updated** Electronic Clinical Quality Measure Value Sets for 4th Quarter 2017 **Reporting Period for Hospital** Quality Reporting Programs b8 2017 September 21 [posted]

**Upcoming Changes to the US SNOMED CT Content Request System** 2017 September 20 [posted]

Two Updated SNOMED CT Resources b6 2017 September 19 [posted]

NNLM Webinar: Five Clinical Questions You Can Answer Using the NCBI Databases on September **20, 2017** b5 2017 September 06 [posted]

September 2017 US Edition of **SNOMED CT Release Available** b4 2017 September 06 [posted]

**RxNorm September 2017 Release** Includes Additional Medi-Span Data b3 2017 September 05 [posted] 2017 September 29 [Editor's Note

# **Updated Web** Resources

Coming Soon!

### Most Popular

2018 MeSH Headings Available in the MeSH Browser

ClinicalTrials.gov: More Changes to Improve Usability

New PubMed Interactive **Tutorials Available** 

**2017 SEPTEMBER-OCTOBER** No. 418 **Issue in Process** 

Added]

New PubMed Interactive Tutorials Available

b2 2017 September 01 [posted]

NLM Webinar: PubMed Journal Selection and the Changing Landscape of Scholarly Communication on October 6, 2017

b1 2017 September 01 [posted] 2017 October 13 [Editor's Note Added]

### **NLM News Announcements**

**Dr. James Ostell Named Director of the National Center for Biotechnology Information** 2017 September 12

Jerry Sheehan Appointed Deputy Director of the National Library of Medicine 2017 August 01

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Last updated: 20 October 2017



## DailyMed: Searching by Unique Ingredient Identifier Now Available

DailyMed: Searching by Unique Ingredient Identifier Now Available. NLM Tech Bull. 2017 Sep-Oct;(418):b18.

### 2017 October 20 [posted]

Users can now search DailyMed by unique ingredient identifier (UNII) for an active ingredient and an active moiety. Instead of relying on drug or chemical names, which vary across countries and regions, searching by UNII allows DailyMed to retrieve drug product records by ingredient using a common global identifier.

A UNII is a globally used, non-proprietary, free, unique, unambiguous, non-semantic, alphanumeric identifier based on a substance's molecular structure and/or descriptive information. The joint Food and Drug Administration (FDA) / United States Pharmacopeia (USP) Substance Registration System (SRS) assigns a UNII to a substance when enough information is collected.

To illustrate, a common active ingredient in anti-allergy medications is diphenhydramine hydrochloride with UNII TC2D6JAD40. Searching "TC2D6JAD40" in DailyMed retrieves over 1500 drug product records. Diphenhydramine with UNII 8GTS82S83M is the active moiety of diphenhydramine hydrochloride. Searching "8GTS82S83M" retrieves over 1600 records as of October 2017.

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Last updated: 20 October 2017

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DailyMed: Searching by Unique Ingredient Identifier Now

Available. NLM Technical Bulletin. 2017 Sep-Oct

# Biomedical and Health Research Data Management Training for Librarians

Biomedical and Health Research Data Management Training for Librarians. NLM Tech Bull. 2017 Sep-Oct;(418):b17.

### **2017 October 13** [posted]

Health science librarians are invited to participate in Biomedical and Health Research Data Management Training for Librarians, sponsored by the National Library of Medicine (NLM) and the National Network of Libraries of Medicine Training Office (NTO). The course is an 8-week online class with engaging lessons and practical activities, and provides basic knowledge and skills for librarians interested in helping patrons manage their research data. Participants will then complete a capstone project at the end of the course, and the experience will culminate in a Capstone Summit at NIH on April 10-11, 2018.

The major goal of this course is to provide an introduction to data issues and policies in support of developing and implementing or enhancing research data management training and services at your institution. This material is essential for decision-making and implementation of these programs, particularly instructional and reference services. The course topics include an overview of data management, choosing appropriate metadata descriptors or taxonomies for a dataset, addressing privacy and security issues with data, and creating data management plans.

### Application and details are posted here: https://goo.gl/WR9R9s

Important Dates:

Application deadline: November 8, 2017
Notifications: Week of December 4, 2017
Online Course: January 8 - March 2, 2018
Capstone Summit: April 10-11, 2018

### Reviewers, Co-teachers, and Mentors Needed

We are looking for experienced data librarians to participate in this project as module reviewers, co-teachers, and/or mentors. You may (and are encouraged to) apply for more than one role, and for more than one module. Applications are due October 20, 2017.

**Details here:** https://goo.gl/x3DWje.

Please send your questions to the NTO at: nto@utah.edu

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Biomedical and Health Research Data Management Training for Librarians. NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 13 October 2017

# NLM VSAC 2018 Electronic Clinical Quality Measure Value Set Addendum

NLM VSAC 2018 Electronic Clinical Quality Measure Value Set Addendum. NLM Tech Bull. 2017 Sep-Oct;(418):b16.

### **2017 October 11** [posted]

On September 29, 2017, the National Library of Medicine (NLM) Value Set Authority Center (VSAC), in collaboration with the Centers for Medicare & Medicaid Services (CMS) and the Office of the National Coordinator for Health Information Technology (ONC), published an addendum to the Electronic Clinical Quality Measure (eCQM) annual update specifications originally published in May 2017. This addendum updates eCQM value sets for the 2018 reporting period for Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs) and the performance period for Eligible Professionals (EPs) and Eligible Clinicians.

These changes affect electronic reporting of eCQMs for the following programs:

- Quality Payment Program: Merit-based Incentive Payment System (MIPS) and Alternative Payment Models (APM)
- Hospital Inpatient Quality Reporting (IQR)
- Medicaid Electronic Health Record (EHR) Incentive Program for EPs
- Medicare and Medicaid EHR Incentive Programs for EHs and CAHs

All changes to the 2018 Reporting/Performance Period eCQM value sets are available through the NLM Value Set Authority Center. The value sets are available as a complete set, as well as value sets per measure. Measure implementers should review these changes to ensure their submissions comply with the updated requirements.

CMS revised the value sets based on updates from the following terminology code systems:

- Current Procedural Terminology
- CVX (Vaccines Administered)
- Healthcare Common Procedure Coding System (HCPCS)
- International Classification of Diseases, 10th Revision Clinical Modification and Procedure Coding System (ICD-10-CM/PCS)
- Logical Observation Identifiers Names and Codes (LOINC)
- RxNorm
- Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT)

CMS has made no changes to the measure logic, the Health Quality Measure Format (HQMF) specifications, the value set object identifiers (OIDs), or the measure version numbers for 2018 eCQM reporting.

### **For More Information**

Send your questions regarding the addendum or content of eCQM value sets, to the ONC CQM Issue Tracker. For information about eCQM specifications and supplemental materials, visit the eCQI Resource Center. For VSAC functionality or questions about downloading eCQM value sets from VSAC, please Contact NLM.

### VSAC Value Set Resources: where to find the updated eCQM value sets

Access to the VSAC suite of tools requires a free Unified Medical Language System Metathesaurus License.

- VSAC Downloadable Resources (recommended): Prepackaged downloads for the entire set of the most recently updated and released eCQM value sets, as well as for previously released versions. Accessible from the Download tab on the VSAC Web page.
- Application Programming Interface (API): Programmatically retrieve value sets. Find VSAC API documentation in the VSAC Support Center.
- VSAC Web Page: Browse and download specific eCQM value sets. Filter by specific CMS eCQM Release, CMS eCQM ID, or QDM Category. Accessible from the Search Value Sets tab on the VSAC Web page.
- Binding Parameter Specification (BPS): a metadata file that contains no terminology codes. The BPS

provides a record of the value set metadata. Measure implementers can use the BPS to track versions and other parameters that define the value set code lists for each eCQM release. The BPS contains the same information as its predecessor, the discontinued Data Element Catalog (DEC), as well as additional parameters. The BPS replaces the DEC in all subsequent releases. (UMLS login not required)

• VSAC Collaboration Tool: Interactive and centralized collaboration among VSAC authors and collaborators. Find VSAC Collaboration documentation in the VSAC Support Center.

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Last updated: 11 October 2017

# Tox-App: An App to Search for Potential Environmental Health Hazards in your Community

Tox-App: An App to Search for Potential Environmental Health Hazards in your Community. NLM Tech Bull. 2017 Sep-Oct;(418):b15.

### **2017 October 06** [posted]

[Editor's Note: This is a reprint of an announcement published as an NLM Toxicology and Environmental Health Information email update from the NLM Division of Specialized Information Services. To automatically receive news on resources, services, and outreach in toxicology and environmental health please see the subscribe page.]

Use Tox-App (see Figure 1), a free mobile app for iOS users from the National Library of Medicine (NLM), to search for industrial facilities that reported releasing certain chemicals into the environment (based on data from the US EPA TRI program). Tox-App includes a subset of about 100 TRI chemicals for the most current TRI year. You can download Tox-App from the Apple App Store: https://itunes.apple.com/us/app/tox-app/id1227471020?mt=8

Tox-App is based on NLM online tool TOXMAP and provides some of the basic TOXMAP functions, including:

- Search for reporting facilities by name or state
- · Browse for facilities by chemical, state, or county
- View locations of reporting facilities on an interactive map

Learn more about Tox-App here: https://go.usa.gov/xRhbY



Figure 1: Tox-App mobile app for iOS.

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Tox-App: An App to Search for Potential Environmental Health Hazards in your Community. NLM Technical Bulletin. 2017 Sep-Oct

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Tox-App: An App to Search for Potential Environmental Health Hazards in your Community. NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 06 October 2017



### Free Online Continuing Education: Discovering TOXNET

Free Online Continuing Education: Discovering TOXNET. NLM Tech Bull. 2017 Sep-Oct; (418):b14.

### 2017 October 06 [posted]

Join the NNLM Training Office (NTO) for a **free** online class to discover TOXNET and other National Library of Medicine (NLM) environmental health databases through videos, guided tutorials, and discovery exercises.

The class is taught online in thirteen **independent** units over a 6-week period from **November 6, 2017 through December 18, 2017**. Take only the units that interest you.

### What is TOXNET?

TOXNET is a freely available suite of databases from NLM covering hazardous chemicals, environmental health, toxic releases, chemical nomenclature, poisoning, risk assessment and regulations, and occupational safety and health.

### What do we mean by Independent Units?

There is only one required unit, Introduction to TOXNET, all the other units are optional to complete.

### Which databases are covered?

- TOXLINE
- ChemIDplus
- TRI (Toxic Release Inventory)
- TOXMAP
- Hazardous Substances Data Bank (HSDB)
- IRIS (Integrated Risk Information System)
- Haz-Map
- Household Products Database
- LactMed
- WISER
- CHEMM
- REMM (Radiation Event Medical Management)
- Drug Information Portal

### Who should take the class?

Health sciences librarians, public health and environmental science professionals.

### How much time will the class take?

You will work on your own time over a period of 6 weeks to complete the units that are of interest to you. There is one required unit; the remaining units are optional. This class is offered for variable MLA Continuing Education credit. Each unit carries anywhere from 0.5 to 2.0 credit hours, for a total of up to 12 hours. **Credit will not be awarded for partial completion of a module.** Total credit awarded will be based on completed units.

### What happens during the class?

This course is offered asynchronously through Moodle; you will work at your own pace. Each unit consists of guided interactive tutorials AND/OR tutorial videos, and discovery exercises. Instructors will be available to answer questions and provide assistance throughout the course.

### How do I register?

To register, visit this URL: https://nnlm.gov/class/discovering-toxnet/7937

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Free Online Continuing Education: Discovering TOXNET. NLM Technical Bulletin. 2017 Sep-Oct

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Free Online Continuing Education: Discovering TOXNET. NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 06 October 2017



### **RxNorm October 2017 Release**

RxNorm October 2017 Release. NLM Tech Bull. 2017 Sep-Oct; (418):b13.

### 2017 October 03 [posted]

The October full monthly release of RxNorm is available on Monday, October 2, 2017.

Medi-Span data has been removed from RxNorm at Wolters Kluwer's request. As of October 2017, Medi-Span data will not be included in the RxNorm or UMLS releases. If you have questions, please contact: medispan-support@wolterskluwer.com.

An RxCUI History Application Programming Interface (API) is now available. The RxCUI History API allows users to obtain concept information on any RxNorm concept which has ever been in a version of the RxNorm data set since 2005. For more information, please go to: RxCUI History API

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Last updated: 03 October 2017

## **Updated SNOMED CT to ICD-10-CM Mapping File**

Updated SNOMED CT to ICD-10-CM Mapping File. NLM Tech Bull. 2017 Sep-Oct; (418):b12.

### 2017 October 03 [posted]

The National Library of Medicine is pleased to announce the release of an updated SNOMED CT to ICD-10-CM mapping file.

The purpose of the SNOMED CT to ICD-10-CM map is to support semi-automated generation of ICD-10-CM codes from clinical data encoded in SNOMED CT for reimbursement and statistical purposes. This updated mapping file is derived from the September 2017 SNOMED CT United States (US) Edition and 2018 version of ICD-10-CM. There are a total of 119,270 SNOMED CT concepts mapped in this updated release.

The updated release can be downloaded now as a standalone file with your UMLS Terminology Services (UTS) login.

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Last updated: 03 October 2017



### **New Tutorial: UMLS REST API: Paging Through Results**

New Tutorial: UMLS REST API: Paging Through Results. NLM Tech Bull. 2017 Sep-Oct; (418):b11.

### 2017 October 02 [posted]

The National Library of Medicine (NLM) is pleased to announce the release of the UMLS REST API: Paging Through Results tutorial.

In this tutorial you will learn how to make calls against the UTS REST API/search endpoint, retrieve all pages, and identify the last page by iterating through pages. You will also learn strategies for coding API requests to assure proper retrieval of all search data. Examples use the Google Postman API testing application.

This tutorial and many other tutorials are available from the UMLS Learning Resources page and the NLM Learning Resources Database.

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New Tutorial: UMLS REST API: Paging Through Results. NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 02 October 2017

# NCBI Minute Webinar: Create, Link, and Share Your Bibliography — PubMed Tools and ORCID Identifiers for Authors on October 4, 2017

NCBI Minute Webinar: Create, Link, and Share Your Bibliography — PubMed Tools and ORCID Identifiers for Authors. NLM Tech Bull. 2017 Sep-Oct; (418):b10.

### 2017 September 28 [posted]

On October 4, 2017, National Center for Biotechnology Information (NCBI) staff will present a Webinar on author disambiguation and the advantages of using an ORCID identifier.

Disambiguating common author names is tough in any field, but if your published research is cited in PubMed, we can help you find your citations, create a bibliography, and share your publication list with others.

In this Webinar, you will also learn about the advantage of quickly registering for a free, unique identifier that will remain constant — even if your name changes.

Date and time: Wednesday, October 4, 2017 12:00 PM - 12:30 PM EDT

Register here:http://bit.ly/2wq0dE8

After registering, you will receive a confirmation email with information about attending the Webinar. After the live presentation, the Webinar will be uploaded to the NCBI YouTube channel. You can learn about future Webinars on the Webinars and Courses page.

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NCBI Minute Webinar: Create, Link, and Share Your Bibliography — PubMed Tools and ORCID Identifiers for Authors . NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 28 September 2017

# NLM Webinar: LinkOut for Libraries: From Icons to Full Text and Everything in Between on October 18, 2017

NLM Webinar: LinkOut for Libraries: From Icons to Full Text and Everything in Between on October 18, 2017. NLM Tech Bull. 2017 Sep-Oct;(418):b9.

### 2017 September 21 [posted]

On Wednesday, October 18, 2017, join NLM staff for a LinkOut for Libraries Webinar.

Have you wondered why you see duplicate icons on citations in PubMed? Or why you don't see icons where you expect?

Are you switching vendors and don't know how that will affect your service?

Were you suddenly given the responsibility for your library's LinkOut account and don't know where to start?

Get answers to these questions and more. We will go back to the basics of LinkOut and show you how to get the most of your library's service. Take an inside look at the three NLM linking services, LinkOut, Outside Tool, and LinkOut Local, and how they differ. Learn why multiple icons display on citations in PubMed and how to see only the ones you want.

Following a 30-minute presentation, LinkOut experts will be available to answer your questions.

Date and Time: Wednesday, October 18, 2017, 1:00 PM - 2:00 PM EDT

To register: https://nih.webex.com/nih/k2/j.php?MTID=ta088b860c9ade6039f2a7303f8212be3

After the live presentation, a recording will be available on the LinkOut for Libraries Training and Educational Resources Web page and in the Learning Resources Database.

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NLM Webinar: LinkOut for Libraries: From Icons to Full Text and Everything in Between on October 18, 2017. NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 13 October 2017

# NLM VSAC Publishes Updated Electronic Clinical Quality Measure Value Sets for 4th Quarter 2017 Reporting Period for Hospital Quality Reporting Programs

NLM VSAC Publishes Updated Electronic Clinical Quality Measure Value Sets for 4th Quarter 2017 Reporting Period for Hospital Quality Reporting Programs. NLM Tech Bull. 2017 Sep-Oct;(418):b8.

### 2017 September 21 [posted]

On September 15, 2017, the National Library of Medicine Value Set Authority Center (VSAC), in collaboration with the Centers for Medicare & Medicaid Services (CMS) and the Office of the National Coordinator for Health Information Technology (ONC), published an addendum to the eCQM annual update specifications originally published in April 2016. This addendum updates eCQM value sets for the 4th quarter of the 2017 reporting period for Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs). These changes affect electronic reporting of Electronic Clinical Quality Measures (eCQM) for the Hospital Inpatient Quality Reporting Program (IQR) and for the Medicare Electronic Health Record (EHR) Incentive Program for EHs and CAHs.

- All changes to the 4th Quarter 2017 Reporting Period eCQM value sets are available through the NLM VSAC in the Download tab. The value sets and all their accompanying terminology codes are available as a complete set, as well as value sets per measure.
- eCQM addendum materials are available in the eCQI Resource Center for Eligible Hospitals and Critical Access Hospitals.
- Measure implementers should review these changes to ensure their submissions comply with the updated requirements.

CMS revised the value sets based on updates from the following terminology code systems:

- International Classification of Diseases, 10th Revision Clinical Modification and Procedure Coding System (ICD-10-CM/PCS)
- Logical Observation Identifiers Names and Codes (LOINC)
- RxNorm
- Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT)

CMS has made no changes to the measure logic, the Health Quality Measure Format (HQMF) specifications, the value set object identifiers (OIDs), or the measure version numbers for 2017 eCQM reporting.

### **For More Information**

Send your questions regarding the addendum or content of eCQM value sets, to the ONC CQM Issue Tracker. For information about eCQM specifications and supplemental materials, visit the eCQI Resource Center. For VSAC functionality or questions about downloading eCQM value sets from VSAC, please Contact NLM.

### VSAC Value Set Resources - Where to Find the Updated eCOM Value Sets

Access to the VSAC suite of tools requires a free Unified Medical Language System Metathesaurus License.

- VSAC Downloadable Resources (recommended): Prepackaged downloads for the entire set of the most recently updated and released eCQM value sets, as well as for previously released versions. Accessible from the Download tab on the VSAC Web page.
- Application Programming Interface (API): Programmatically retrieve value sets. Find VSAC API documentation in the VSAC Support Center.
- VSAC Web Page: Browse and download specific eCQM value sets. Filter by specific CMS eCQM Release, CMS eCQM ID, or QDM Category. Accessible from the Search Value Sets tab on the VSAC Web page.
- Binding Parameter Specification (BPS): a metadata file that contains no terminology codes. The BPS provides a record of the value set metadata. Measure implementers can use the BPS to track versions and other parameters that define the value set code lists for each eCQM release. The BPS contains the same

NLM VSAC Publishes Updated Electronic Clinical Quality Measure Value Sets for 4th Quarter 2017 Reporting Period for Hospital Quality Reporting Programs. NLM Technical Bulletin. 2017 Sep-Oct information as its predecessor, the discontinued Data Element Catalog (DEC), as well as additional parameters. The BPS replaces the DEC in all subsequent releases. (UMLS login not required)

• VSAC Collaboration Tool: Interactive and centralized collaboration among VSAC authors and collaborators. Find VSAC Collaboration documentation in the VSAC Support Center.

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Last updated: 21 September 2017

### **Upcoming Changes to the US SNOMED CT Content Request System**

Upcoming Changes to the US SNOMED CT Content Request System. NLM Tech Bull. 2017 Sep-Oct; (418):b7.

### 2017 September 20 [posted]

The National Library of Medicine (NLM) is pleased to announce a replacement application for the United States SNOMED CT Content Request System (USCRS). The timeline for the launch of the new application is:

- Week of September 19 An updated USCRS main page and documentation for the new USCRS application will be available.
- **Mid-October** The USCRS application will be shut down for data migration and system overhaul. At this time we regret that users will be unable to login or complete requests for changes on the USCRS.
- Mid- to late October USCRS users will be sent additional details including a new login and the new application URL.
- Final week of October We anticipate that the new request system will be in place during the final week of October.

### Please note that the new application will have a new URL, login, and interface.

Details for a Webinar that will demonstrate submissions for the new request system will be announced in late October.

The new content request system will be similar to the SNOMED International Content Request System (CRS) but will have a different URL and some slight interface differences. You can use the current CRS User Guide to become familiar with the application. Documentation specific to the new content request system will be provided once the system is live.

If you have any questions, please contact us via NLM Customer Support.

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Last updated: 20 September 2017

### **Two Updated SNOMED CT Resources**

Two Updated SNOMED CT Resources. NLM Tech Bull. 2017 Sep-Oct; (418):b6.

### 2017 September 19 [posted]

The National Library of Medicine (NLM) is pleased to announce the availability of two updated SNOMED CT resources:

- CORE Problem List Subset of SNOMED CT
   The Clinical Observations Recordings and Encoding (CORE) Problem List Subset defines a Unified Medical
   Language System (UMLS) subset that is most useful for documenting and encoding clinical information at
   a summary level. The CORE Problem List Subset includes SNOMED CT concepts and codes that can be
   used for the problem list, discharge diagnoses, or reason of encounter. This updated subset is derived
   from the July 2017 SNOMED CT International Edition and UMLS Metathesaurus version 2017AA.
- 2. LOINC SNOMED CT Cooperative Package This release contains two content files: a LOINC Term to SNOMED CT Expression Reference Set and a LOINC Part to SNOMED CT Reference Set. The Beta content is release under the 715515008 | LOINC -SNOMED CT Cooperation Project module with concept identifiers from the 220170731 version of the International release of SNOMED CT and Version 2.58 of LOINC released December 2016.

These resources are available for download by UMLS licensees from the <u>UMLS Terminology Services</u> (UTS).

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Last updated: 19 September 2017

# NNLM Webinar: Five Clinical Questions You Can Answer Using the NCBI Databases on September 20, 2017

NNLM Webinar: Five Clinical Questions You Can Answer Using the NCBI Databases. NLM Tech Bull. 2017 Sep-Oct;(418):b5.

### 2017 September 06 [posted]

On September 20, 2017, the National Center for Biotechnology Information (NCBI) staff will present the Webinar, "Five Clinical Questions You Can Answer Using the NCBI Databases."

In this Webinar you will learn about the NCBI databases Genetic Testing Registry, ClinVar, and MedGen and how to use them to answer the following questions:

- 1. How do I locate tests for a clinical feature, gene or disease?
- 2. How do I locate records for a specified list of symptoms, clinical features (e.g., aortic aneurysm)?
- 3. How do I find specific disease-causing variants?
- 4. How can I get information about the review status of an assertion of clinical significance for a genetic variant in relation to a disease?
- 5. What are the differences between the NCBI medical genetics databases regarding searching for phenotypes / clinical features?

A basic familiarity with genetics vocabulary will be helpful in understanding this Webinar. For a review, see *The New Genetics*, an educational booklet by the National Institute of General Medical Sciences (NIGMS).

### Presenters:

Peter Cooper and Bonnie Maidak, NCBI

Date and time: Wednesday, September 20, 2017, 1:00PM - 2:00PM EDT

To register: https://nnlm.gov/class/5-clinical-questions-you-can-answer-ncbi-databases-gtr-clinvar-medgen/7776

More information on NNLM Bioinformatics Education Webinars and National Network of Libraries of Medicine training is available.

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Last updated: 13 September 2017

### September 2017 US Edition of SNOMED CT Release Available

September 2017 US Edition of SNOMED CT Release Available. NLM Tech Bull. 2017 Sep-Oct; (418):b4.

### 2017 September 06 [posted]

The September 2017 SNOMED CT United States (US) Edition is now available for download by UMLS licensees from the UMLS Terminology Services (UTS).

In addition to 514 new concepts specific to the United States, the September 2017 SNOMED CT US Edition (linked) also contains all of the content from the July 2017 International Edition. We include new documentation to highlight changes for this release: SNOMED CT US Edition Release Notes.

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Last updated: 06 September 2017

# RxNorm September 2017 Release Includes Additional Medi-Span Data

RxNorm September 2017 Release Includes Additional Medi-Span Data. NLM Tech Bull. 2017 Sep-Oct;(418):b3.

2017 September 05 [posted] 2017 September 29 [Editor's note added]

[Editor's note added September 29, 2017: Medi-Span data has been removed from RxNorm at Wolters Kluwer's request. As of October 2017, Medi-Span data will not be included in the RxNorm or UMLS releases. If you have questions, please contact: medispan-support@wolterskluwer.com .]

The National Library of Medicine (NLM) is pleased to announce the addition of a more robust and comprehensive Medi-Span (MDDB) data set in the RxNorm September 2017 release.

Over 144,000 National Drug Codes (NDCs), 38,000 Generic Product Identifiers (GPIs), 38,000 branded drug names, and 5,000 ingredients from MDDB are included.

The additional MDDB drug information improves interoperability and helps facilitate the electronic exchange of drug information in electronic health records. MDDB is maintained and developed by Wolters Kluwer Clinical Drug Information.

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Last updated: 29 September 2017

### **New PubMed Interactive Tutorials Available**

New PubMed Interactive Tutorials Available. NLM Tech Bull. 2017 Sep-Oct; (418):b2.

### 2017 September 01 [posted]

Eleven new or revised interactive tutorials on using PubMed are now available from the PubMed Online Training page. These tutorials were conceived and developed by the National Network of Libraries of Medicine (NNLM) PubMed Working Group and produced by the Oak Ridge Associated Universities (ORAU) Health Communication and Technical Training Group.

The tutorials are available to use on the Web and also freely available in SCORM format for download and incorporation into learning management systems.

#### The tutorials are:

- PubMed Simple Subject Search
- PubMed Simple Subject Search: How It Works
- PubMed: Exploding the Medical Subject Headings (MeSH) (new)
- PubMed: Find Articles by Author
- PubMed: Find Articles by Journal
- PubMed: Find a Known Citation (new)
- PubMed: Find a Systematic Review (new)
- PubMed: Find the Latest Treatments for a Disease (new)
- Create a Collection
- Obtain the Full Text of an Article
- Save a PubMed Search and Set E-mail Alerts

Please send your comments and suggestions to the NLM Training Team using our Customer Support portal.

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Last updated: 01 September 2017

# NLM Webinar: PubMed Journal Selection and the Changing Landscape of Scholarly Communication on October 6, 2017

NLM Webinar: PubMed Journal Selection and the Changing Landscape of Scholarly Communication on October 6, 2017. NLM Tech Bull. 2017 Sep-Oct;(418):b1.

2017 September 01 [posted]
2017 October 13 [Editor's note added]

[Editor's note added October 13, 2017: A recording of the Webinar is available.]

On October 6, 2017, join National Library of Medicine (NLM) staff as they present the Webinar, "PubMed Journal Selection and the Changing Landscape of Scholarly Communication." This Webinar is intended for librarians and other information specialists who work with PubMed.

By the end of this Webinar, participants should be able to:

- Describe some issues and concerns surrounding the current publishing landscape.
- List the roles and responsibilities of NLM in collecting and providing access to biomedical literature.
- Explain what is referenced in the PubMed database.
- Find the complete list of journals in MEDLINE and in PubMed.
- Describe the selection criteria for the different components of the PubMed database.
- Find additional resources for authors and librarians on assessing publication quality.

Date and time: Friday, October 6, 2017, 1:00 PM-2:00 PM EDT

### Register here:

https://nnlm.gov/class/pubmed-journal-selection-and-changing-landscape-scholarly-communication/7780 Participants may receive one MLA continuing education credit.

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Last updated: 13 October 2017

# Try New, Experimental PubMed Search and User Interface in PubMed Labs

Try New, Experimental PubMed Search and User Interface in PubMed Labs. NLM Tech Bull. 2017 Sep-Oct; (418):e9.

2017 October 19 [posted]

The National Library of Medicine (NLM) needs your input. We are experimenting with a new PubMed search algorithm, as well as a mobile-first user interface, and want to know what you think. You can try out these experimental elements at PubMed Labs, a Web site created for the testing potential new PubMed features and gathering user opinions.

Please note that PubMed Labs includes only a limited set of features at this time and not the full set of PubMed tools. The absence of a feature or tool on PubMed Labs does not mean we plan to eliminate it from PubMed; it simply means we are not testing it now!

The key elements we are testing are:

### A New Search Algorithm for Ranking (Ordering) the Best Matches To Your Query

Based on analysis of data obtained from anonymous PubMed search logs, we have developed a new algorithm that does a much better job of sorting search results by their relevance, or "best match," to your query (see Figure 1). This new algorithm incorporates machine learning to re-rank the top articles returned.

This algorithm is already implemented in PubMed, but it is still experimental and we want your feedback. Part of our test in PubMed Labs is having best match be the default sort, instead of PubMed's default of sorting by most recent articles. If you find that you prefer to sort by the most recent articles instead, it takes only a simple click of a button to do so.

To learn more about the new algorithm, see *Updated Algorithm for the PubMed Best Match Sort Order*.

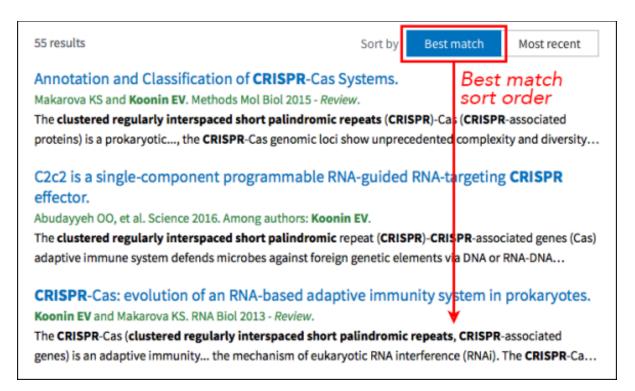


Figure 1: Search results sorted by best match.

### • Mobile-first, Responsive Design User Interface

PubMed Labs is designed to make searching and reading articles fast and easy, whether you are using a phone, tablet, laptop or desktop (see Figure 2).

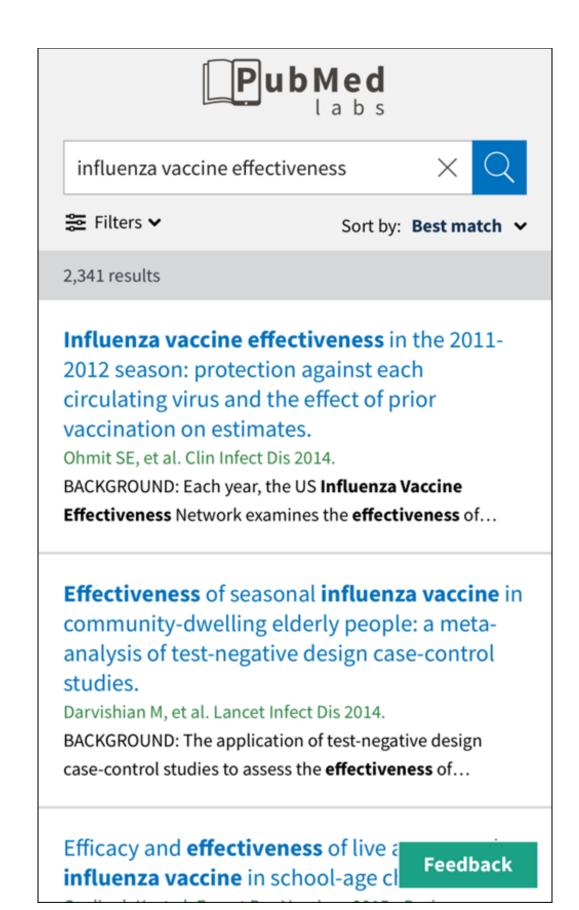


Figure 2: Mobile-first for PubMed Labs.

### Snippets From Article Abstracts & Highlighted Search Terms/Synonyms

The search results page in PubMed Labs includes highlights ("snippets") from the article abstract, when available, that are identified based on their relevance to the user query. Search terms and their synonyms are highlighted in both the title and the snippet (see Figure 3).

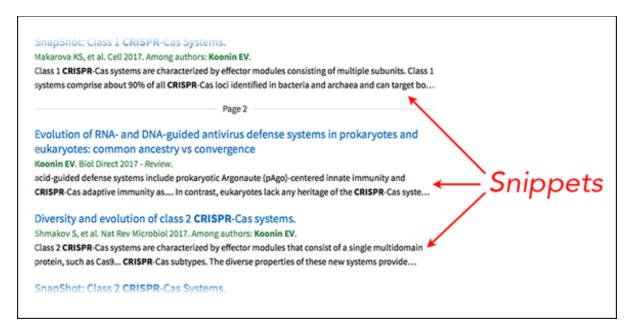


Figure 3: Article abstract snippets in search results.

#### **Comments and Feedback**

Go to the NCBI Insights blog post to leave your comments and feedback.

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Last updated: 19 October 2017

# Removing General Material Designations from NLM Cataloging Records

Boehr D. Removing General Material Designations from NLM Cataloging Records. NLM Tech Bull. 2017 Sep-Oct;(418):e8.

### **2017 October 06** [posted]

Beginning with the implementation of *Resource Description & Access (RDA)* in April 2013 as the NLM cataloging guidelines, the National Library of Medicine (NLM) ceased adding the "General Material Designation" (GMD) to titles in our catalog. The GMD was a bracketed addition to the title that indicated the format for non-textual material. In the MARC 21 format, the GMD is recorded in the 245 \$h.

### Example 1

Title: Cerebrovascular diseases extra [electronic resource]. "electronic resource" is the GMD.

#### MARC view:

245 00 \$a Cerebrovascular diseases extra \$h [electronic resource].

### Example 2

Title: Active euthanasia [videorecording]: the introduction of the concept into Western medical thought / by W. Bruce Fye; Health Communications Network, Medical University of South Carolina. "videorecording" is the GMD.

### MARC view:

245 10 \$a Active euthanasia \$h [videorecording] : \$b the introduction of the concept into Western medical thought / \$c by W. Bruce Fye; Health Communications Network, Medical University of South Carolina.

Current cataloging practice adds three fields to the record to replace the former GMD: Content Type (MARC 21 field 336), Media Type (MARC 21 field 337), and Carrier Type (MARC 21 field 338). These allow for more granular description of the format. To provide more consistent retrieval for users and make future data conversion simpler, NLM has decided to convert all the existing GMDs in the database to the equivalent 33X fields and remove the GMDs from the records. Because of the number of records involved, this project will be done over a period of time between Fall 2017 and Winter 2018. The 33X fields will be added to records first, based on the existing GMD and other data in the record. Additionally, appropriate 33X fields will be added to all text records as well. After all the records have had 33X fields added, the final step will be to remove the GMDs from every record in the database. During the transition period, users may encounter hybrid records that contain both a GMD and 33X fields.

### Example 1 after update

Title: Cerebrovascular diseases extra.

Content type: text Media Type: computer Carrier type: online resource

### MARC view:

245 00 \$a Cerebrovascular diseases extra.

336 \$a text \$b txt \$2 rdacontent 337 \$a computer \$b c \$2 rdamedia

338 \$a online resource \$b cr \$2 rdacarrier

### Example 2 after update

Title: Active euthanasia: the introduction of the concept into Western medical thought / by W. Bruce Fye;

Health Communications Network, Medical University of South Carolina.

Content type: two-dimensional moving image

Media Type: video

Carrier type: videocassette

MARC view:

245 10 \$a Active euthanasia : \$b the introduction of the concept into Western medical thought / \$c by W. Bruce Fye ; Health Communications Network, Medical University of South Carolina.

336 337 338 \$a two-dimensional moving image \$b tdi \$2 rdacontent

\$a video \$b v \$2 rdamedia

\$a videocassette \$b vf \$2 rdacarrier

After all the updates are completed, the revised records will be distributed to subscribers. As the file set will be very large, NLM will provide early notifications before the records are distributed.

By Diane Boehr

Head, Cataloging and Metadata Management Section

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Last updated: 06 October 2017

### ClinicalTrials.gov: More Changes to Improve Usability

Wolf K, Ide N, Koufopoulos J. ClinicalTrials.gov: More Changes to Improve Usability. NLM Tech Bull. 2017 Sep-Oct; (418):e7.

### 2017 September 25 [posted]

On September 25, 2017, the National Library of Medicine (NLM) released updates to ClinicalTrials.gov as the next phase in its ongoing effort to enhance the functionality of the database (see ClinicalTrials.gov: First in a Series of Changes to Improve Usability for Stakeholders). This article highlights key features in the latest release. These changes were informed by user research with end-users representing various stakeholder groups as part of a continuing partnership between NLM and 18F, a federal government digital services consultancy. Additional changes to ClinicalTrials.gov are planned and information about these changes will be provided in future NLM Technical Bulletin notices.

ClinicalTrials.gov is an NLM-maintained resource that provides patients and their families, healthcare professionals, researchers, and members of the public with information about clinical studies and expanded access to investigational drugs (or "compassionate use"). Information listed on ClinicalTrials.gov is provided and updated by the study sponsor or investigator, and listing does not reflect endorsement by the National Institutes of Health. Currently, ClinicalTrials.gov contains information on 255,000 studies and expanded access across the United States and around the world.

#### **Updated Homepage and Disclaimer Text**

The homepage has been simplified (see Figure 1). Modified text containing important messages for users, including that listing of a study on ClinicalTrials.gov does **not** mean the study has been reviewed by the U.S. Federal Government, is displayed on the homepage and at the top of each study record page.

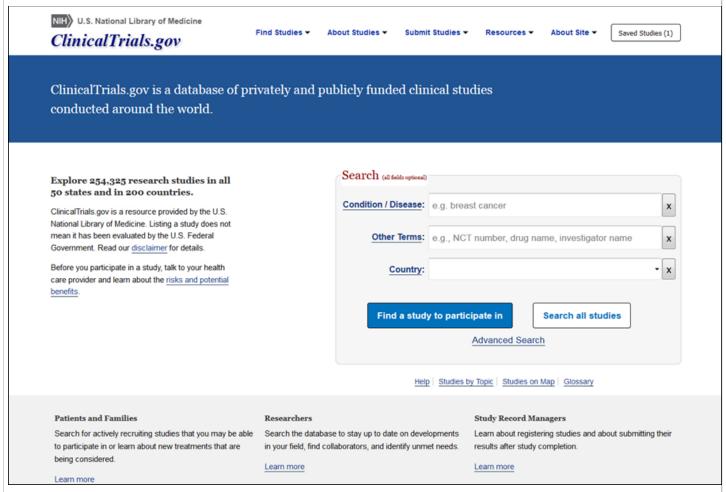


Figure 1: Redesigned ClinicalTrials.gov homepage.

### **Enhanced Search Results Page**

New features on the Search Results page are intended to provide users with additional feedback on what was searched and help users discover study records of interest more quickly. Study records first made available on ClinicalTrials.gov (or "posted") during the past 30 days are identified by the

"New" icon in the "Status" column on the List tab (see  $\bf A$  in Figure 2). Synonyms of terms used by the search engine are summarized at the top (see  $\bf B$  in Figure 2, which shows synonyms for "liver cancer" and "nivolumab") and both search terms and synonyms appearing on the Search Results page are highlighted (see  $\bf C$  in Figure 2). Up to three entries can be displayed as a bulleted list in a column (see  $\bf D$  in Figure 2); the number of any additional entries is indicated in a fourth bullet (see  $\bf E$  in Figure 2). The "Locations" column for displaying study facility information is a new option in the "Show/Hide Columns" panel on the Search Results page (see  $\bf F$  in Figure 2).

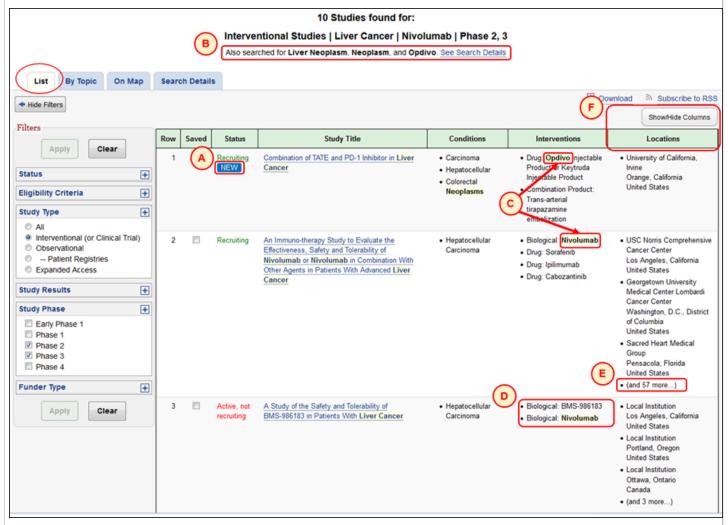


Figure 2: Updated features on the List tab on Search Results page.

#### Changes to Record Date Fields

The Last Updated field was renamed to "Last Update Submitted" and a new field titled "Last Update Posted" is now available. "Last Updated" was defined as the most recent date on which changes to a study record were *submitted* to ClinicalTrials.gov. That is, the date on which the most recent updates to a study record were made by the study sponsor or investigator and provided to ClinicalTrials.gov. However, delays sometimes occur between the "Last Updated" date (submitted date) and the date on which that updated study information is first accessible on ClinicalTrials.gov. The new Last Update Posted field is defined as the most recent date on which changes to a study record were *posted* on ClinicalTrials.gov - that is, when updated study information *is* publicly available.

The Last Update Posted field is displayed on ClinicalTrials.gov study records and appears in the following key features:

- "Advanced Search" for creating a focused query using any number of search fields, including "Last Update Posted" (see How to Use Advanced Search)
- "Subscribe to RSS" on the Search Results page under the List tab for creating an RSS feed for a specific search to receive study records that were first added or for which updates were posted in the last 14 days (see RSS Feeds)
- "Show/Hide Columns" on the Search Results page under the List tab for choosing which study characteristics, including "Last Updated Posted," to display for retrieved study records (see Customize Your Search Results Display)

**Note**: Saved searches and RSS feeds created before September 25, 2017, will continue to function, but will use the new Last Update Posted field rather than "Last Updated" (now named "Last Update Submitted"). As explained above, this change may affect the results of a saved search and RSS feed because delays sometimes occur between the time study information is submitted to ClinicalTrials.gov and when it is available to the public.

The "First Received" and "Results First Received" date fields have been renamed "First Submitted" and "Results First Submitted," respectively (see Figure 3). Their definitions remain the same (see Glossary of Common Site Terms). The name changes are intended to clarify that these dates indicate when study information was first *submitted* to ClinicalTrials.gov, not when it was first "posted."



Figure 3: New record date fields displayed on the bottom of a study record.

#### Coming Soon to ClinicalTrials.gov

Additional enhancements to ClinicalTrials.gov are still under development and include, but are not limited to:

- Searching for U.S. studies by city and radius in miles
- Tools for more easily accessing Glossary content
- Updating the study record layout to make the most relevant information more prominent

We welcome your comments, questions, and suggestions. To contact us, please click on "Customer Support" in the footer of the ClinicalTrials.gov Web site which will take you to the NLM Customer Support page. Then click on Contact NLM at the top of the NLM Customer Support page.

By Karl Wolf, Nicholas Ide, Justin Koufopoulos National Center for Biotechnology Information

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Last updated: 30 October 2017

# Changes to Indicators for Some Subject Fields in MARC Records—Comment by October 31, 2017

Boehr D. Changes to Indicators for Some Subject Fields in MARC Records—Comment by October 31, 2017. NLM Tech Bull. 2017 Sep-Oct;(418):e6.

### 2017 September 25 [posted]

As part of our efforts to prepare our cataloging data for a linked data environment, the National Library of Medicine (NLM) has determined that some of the MARC coding for the subject fields is not accurate and will not create true triple statements in an RDF environment.

Historically, all MARC 6XX fields used in NLM bibliographic records have been assigned a second indicator of "2" defined as Medical Subject Headings (MeSH). This is true for data in the 650, 651, and 655 fields which are all taken from the MeSH vocabulary. However, data in the 600, 610, 611, and 630 fields does not come from MeSH, it comes from the National Authority File (NAF). Therefore, coding these fields with a second indicator of "2" is erroneous information. A second indicator of "0" (Library of Congress Subject Headings) would also not be correct. Although Library of Congress uses the NAF form for these subjects, LCSH practices for construction of name and title access points allow additions to these fields that NLM does not permit.

To accurately portray these subject fields, the second indicator should be "7" (Source specified in \$2) with an accompanying \$2 naf added to the 6XX field and NLM would like to make these changes in its files.

NLM recognizes that some libraries may rely on the second indicator in the 6XX fields for internal processing. Before making changes to our records, we are asking for community input on the impact to your organization or institution if indicators on the 600, 610, 611, and 630 fields were updated from "2" to "7" with the addition of a \$2 naf. There may be positive as well as negative impacts. Libraries that are already converting MARC data into triples or have plans to do this in the near future will find that having accurate indicators in the records will more likely allow link resolvers to automatically find the correct data.

Please send your comments by October 31, 2017 to:

Diane Boehr Head, Cataloging and Metadata Management Section National Library of Medicine 8600 Rockville Pike, Room 1N11 Bethesda, MD 20894 boehrd@mail.nlm.nih.gov

No changes to cataloging records will be made until the comments are reviewed. Ample notification will be provided before any MARC changes are made.

By Diane Boehr Head, Cataloging and Metadata Management Section

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Changes to Indicators for Some Subject Fields in MARC Records—Comment by October 31, 2017. NLM Technical Bulletin. 2017 Sep-Oct

Last updated: 25 September 2017



### **Equal Contribution for Authors in PubMed**

Davidson M. Equal Contribution for Authors in PubMed. NLM Tech Bull. 2017 Sep-Oct;(418):e5.

### 2017 September 14 [posted]

Journal publishers who submit citation data to PubMed may now indicate equal contribution among authors.

You can view equal contribution among authors in PubMed in two ways:

1. Abstract display format: in the author section (see Figure 1).

Format: Abstract → Send to →

Acta Neuropathol. 2012 Apr;123(4):485-499. doi: 10.1007/s00401-012-0959-7. Epub 2012 Feb 23.

### Subgroup-specific alternative splicing in medulloblastoma.

Dubuc AM<sup>#1,2,3</sup>, Morrissy AS<sup>#1,2</sup>, Kloosterhof NK<sup>4,5</sup>, Northcott PA<sup>1,2,3</sup>, Yu EP<sup>6</sup>, Shih D<sup>1,2,3</sup>, Peacock J<sup>1,2,3</sup>, Grajkowska W<sup>7</sup>, van Meter T<sup>8</sup>, Eberhart CG<sup>9</sup>, Pfister S<sup>10</sup>, Marra MA<sup>11</sup>, Weiss WA<sup>12</sup>, Scherer SW<sup>13,14</sup>, Rutka JT<sup>1,3</sup>, French PJ<sup>4</sup>, Taylor MD<sup>1,2,3</sup>.

#### Author information

- 1 Division of Neurosurgery, Arthur & Sonia Labatt Brain Tumour Research Centre, The Hospital for Sick Children, Toronto, Ontario, Canada.
- 2 Program in Developmental & Stem Cell Biology, The Hospital for Sick Children, Toronto, Ontario, Canada.
- 3 Department of Laboratory Medicine & Pathobiology, University of Toronto, Toronto, Ontario, Canada.
- 4 Department of Neurology, Erasmus MC, Rotterdam, The Netherlands.
- 5 Department of Paediatric Oncology and Hematology, Erasmus MC-Sophia Children's Hospital, Rotterdam, Netherlands.
- 6 Program in Biology and Pharmacology, University of Western Ontario, London, Ontario, Canada.
- 7 Department of Pathology, Children's Memorial Health Institute, Warsaw, Poland.
- 8 Department of Neurosurgery, Medical College of Virginia, Richmond, Virginia, USA.
- 9 Department of Pathology, Johns Hopkins Univertisy, Baltimore, Maryland, USA.
- 10 German Cancer Research Centre, University of Heidelberg, Heidelberg, Germany.
- 11 British Columbia Cancer Agency, Genome Science Centre, Vancouver, British Columbia, Canada.
- 12 Helen Diller Family Comprehensive Cancer Centre, University of California, San Francisco, California, United States of America.
- 13 The Centre for Applied Genomics, The Hospital for Sick Children, Toronto, Ontario, Canada.
- 14 Department of Molecular Genetics, University of Toronto, Toronto, Ontario, Canada.
- # Contributed equally

Figure 1: Equally contributing authors in author section of PubMed abstract display.

2. XML display format: denoted by the "<EqualContrib>" element (see Figure 2).

```
<AuthorList CompleteYN="Y">
   <Author ValidYN="Y" EqualContrib="Y">
       <LastName>Dubuc</LastName>
       <ForeName>Adrian M</ForeName>
       <Initials>AM</Initials>
        <AffiliationInfo>
            <Affiliation>Division of Neurosurgery, Arthur & amp; Sonia Labatt Brain Tumour Rese
       </AffiliationInfo>
       <AffiliationInfo>
            <Affiliation>Program in Developmental & amp; Stem Cell Biology, The Hospital for St
        </AffiliationInfo>
        <AffiliationInfo>
            <Affiliation>Department of Laboratory Medicine & amp; Pathobiology, University of
        </AffiliationInfo>
   </Author>
    <Author ValidYN="Y" EqualContrib="Y">
       <LastName>Morrissv</LastName>
       <ForeName>A Sorana</ForeName>
        <Initials>AS</Initials>
        <AffiliationInfo>
            <Affiliation>Division of Neurosurgery, Arthur & amp; Sonia Labatt Brain Tumour Rese
        </AffiliationInfo>
        <AffiliationInfo>
            <Affiliation>Program in Developmental &amp; Stem Cell Biology, The Hospital for S:
        </AffiliationInfo>
    </Author>
```

Figure 2: "<EqualContrib>" element in PubMed XML display.

The data are display only and cannot be searched in PubMed.

For an example of co-equal authorship in PubMed see, Subgroup-specific alternative splicing in medulloblastoma.

For more information, please see PubMed Help and MEDLINE/PubMed XML Element Descriptions and their Attributes.

By Mike Davidson MEDLARS Managment Section

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Last updated: 14 September 2017



### NLM Releases Production MeSH RDF

Bushman B. NLM Releases Production MeSH RDF. NLM Tech Bull. 2017 Sep-Oct; (418):e4.

2017 September 13 [posted]

The National Library of Medicine (NLM) is pleased to announce the move of MeSH (Medical Subject Headings) RDF from a beta version to production around September 8, 2017. The initial beta release of MeSH RDF was published in November 2014 for selected institutions and organizations. Subsequent releases of the beta version occurred in June 2015, November 2015, and November 2016.

Release notes are available at http://hhs.github.io/meshrdf/release-notes.html.

Users who download mesh.nt from the FTP server should change their download path:

From

ftp://ftp.nlm.nih.gov/online/mesh/mesh.nt

To

ftp://ftp.nlm.nih.gov/online/mesh/rdf/mesh.nt

The old files will remain present for some time, but will no longer be updated nightly.

For an example of utilizing MeSH RDF, see Adding MeSH URIs to NLM Catalog Records.

### **Availability of MeSH RDF**

- MeSH RDF, including the original XML files used and the XSLT transformation, is available for bulk download at ftp://ftp.nlm.nih.gov/online/mesh/rdf.
- Query the MeSH RDF SPARQL endpoint at http://id.nlm.nih.gov/mesh/query.
- Technical documentation along with sample SPARQL queries are available at http://hhs.github.io/meshrdf/.

#### **How do I learn more?**

To learn more about MeSH RDF, see our information page Medical Subject Headings (MeSH) RDF Linked Data (beta).

### **Feedback**

Have questions or want to provide feedback? We would love to hear from you. Join us on GitHub at https://github.com/HHS/meshrdf/issues/.

By Barbara Bushman

Cataloging and Metadata Management Section (CAMMS)

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Last updated: 13 September 2017

### 2018 MeSH Headings Available in the MeSH Browser

2018 MeSH Headings Available in the MeSH Browser. NLM Tech Bull. 2017 Sep-Oct; (418):e3.

2017 September 12 [posted]

An alternate link to provide access to 2018 MeSH is available from the top navigation bar on the MeSH Browser homepage. The default year in the MeSH Browser remains 2017 MeSH for now.

Access to two years of MeSH vocabulary always is available in the MeSH Browser, the current year and an alternate year. Sometime in November or December, the default year will change to 2018 MeSH and the alternate link to the 2017 MeSH.

Details on updates and download information for 2018 MeSH are forthcoming.

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Last updated: 12 September 2017

### MEDLINE/PubMed Year-End Processing Activities for 2018

MEDLINE/PubMed Year-End Processing Activities for 2018. NLM Tech Bull. 2017 Sep-Oct; (418):e2.

2017 September 12 [posted]

The National Library of Medicine (NLM) is currently involved in MEDLINE year-end processing (YEP) activities. These include changing the Medical Subject Headings (MeSH) main headings and subheadings as well as Supplementary Concept Records that standardize names and associated numbers for chemicals, protocols, and diseases that are not main headings. The MeSH edits include maintaining existing MEDLINE citations to conform with the 2018 version of MeSH, and other global changes.

### **Important Dates**

- November 14, 2017: NLM expects to temporarily suspend the addition of fully-indexed MEDLINE citations to PubMed. NLM will continue to add Publisher-supplied and in process citations.
- Late November 2017: PubMed MEDLINE citations, translation tables, and the MeSH database will have been updated to reflect 2018 MeSH.

For details about the impact on searching from November 15 to late November, see: Annual MEDLINE/PubMed Year-End Processing (YEP): Impact on Searching During Fall 2017.

For background information on the general kinds of changes made annually, see: Annual MEDLINE/PubMed Year-End Processing (YEP): Background Information.

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### **NLM Classification 2017 Summer Edition Now Available**

Willis SR. NLM Classification 2017 Summer Edition Now Available. NLM Tech Bull. 2017 Sep-Oct; (418):e1.

### 2017 September 01 [posted]

Starting with 2017, the *NLM Classification* moved from an annual spring update to twice-yearly updates. The 2017 winter version, published January 26, 2017, encompassed changes to the *NLM Classification* resulting from new and changed 2017 Medical Subject Headings (MeSH) terms as well as additional minor updates to the index and schedule. The 2017 summer version, now available, encompasses the systematic review of selected schedules and other miscellaneous updates.

### **Summary Statistics for the 2017 Summer Edition**

Fifty-seven (57) new class numbers were added. Eleven (11) class numbers were canceled.

### Class Numbers Added -2017 Summer Edition

New Number QT 260.5.S5	r Class Name Skating	Former Number(s) QT 260
QU 55.97	Transcription factors	QU 55
QU 510	DNA damage. DNA repair	QU 475; QU 477
QU 515	DNA replication	QU 475
QU 520	Molecular evolution. Genetic selection	QU 475
QV 380	Radiation-sensitizing agents. Radiation-protective agents	WN 610; WN 650
QV 766.5	Specific medicinal plants, A-Z	QV 766
QV 766.5.A6	Aloe	QV 766
QV 766.5.A7	Apiaceae	QV 766
QV 766.5.A8	Asteraceae	QV 766
QV 766.5.B7	Brassicaceae	QV 766
QV 766.5.C2	Cannabaceae	QV 766
QV 766.5.F2	Fabaceae	QV 766
QV 766.5.G6	Ginkgo biloba	QV 766
QV 766.5.L2	Lamiales	QV 766
QV 766.5.L4	Liliaceae	QV 766
QV 766.5.P2	Panax	QV 766
QV 766.5.P6	Polygonaceae	QV 766
QV 766.5.R2	Ranunculaceae	QV 766
QV 766.5.R6	Rosales	QV 766
QV 766.5.R8	Rubiaceae	QV 766
QV 766.5.T5	Theales	QV 766
QV 766.5.Z5	Zingiberaceae	QV 766
WA 30.2	Climate change	WB 700, etc.
WD 760	Cosmic radiation	WN 415, etc.
WE 757	Abdomen	WI 900-970
WI 190	Gastrointestinal tract	WI 100-113
WI 195	Gastrointestinal diseases (General)	WI 140
WI 255	Esophageal diseases (General)	WI 250

WI 258	Deglutition disorders	WI 250
WI 260	Esophageal neoplasms	WI 250
WI 306	Stomach diseases (General)	WI 300
WI 418	Intestinal diseases (General)	WI 400
WI 422	Crohn disease	WI 512
WI 518	Large intestine	WI 400
WI 521	Colonic diseases (General)	WI 520
WI 603	Rectal diseases (General)	WI 600
WI 710	Liver diseases (General)	WI 700
WI 712	Hepatic insufficiency	WI 700
WI 753	Biliary tract diseases (General)	WI 750
WI 803	Pancreatic diseases (General)	WI 800
WI 980	Digestive system surgical procedures	WI 900
WL 141.5.B6	Brain mapping	WL 335
WM 168	Neurodevelopmental disorders (General or not elsewhere classified)	None
WM 169	Attention deficit and disruptive behavior disorders	WM 165
WM 171.7	Bipolar disorder	WM 207
WM 190.5.P2	Paranoid personality disorder	WM 190
WM 190.5.P3	Passive-aggressive personality disorder	WM 190
WM 190.5.S3	Schizoid personality disorder	WM 190
WM 190.5.S4	Schizotypal personality disorder	WM 190
WM 190.5.S8	Stereotyped behavior	WM 190
WM 192	Disruptive, impulse control, and conduct disorders	WM 190.5.I6
WM 273	Alcohol drinking	WM 274, etc.
WM 295	Smoking (General or not elsewhere classified)	WM 290, etc.
WN 182	Computer-assisted image interpretation	WB 141
WN 202	Interventional radiography	WN 200
WN 250.5.H4	Heavy ion radiotherapy	WN 250

### Class Numbers Canceled—2017 Summer Edition

Canceled Number		Now Classed in
QU 4	General works [Biochemistry. Cell Biology and Genetics]	QU 34
WD 200.5.P7	Protein-losing enteropathies	WI 418
WI 150	Functional disorders	WI 143
WI 704	Liver function in food metabolism	WI 702
WI 940	Umbilical region	WE 757
WM 190.5.I6	Impulse control disorders. Gambling. Fire setting behavior	WM 192
WN 300	General works [Radium]	WN 440, etc.
WN 340	Therapeutic use [Radium]	WN 440, etc.
WN 415	Biological aspects of nuclear medicine and atomic energy (General)	QC
WN 420	Radioisotopes. Radioactive elements	WN 440, etc.
WN 630	Injurious effects on plant life (related to human ecology)	QK 757

Numerous class number captions or notes and schedule headers were modified.

Seventy-five (75) index main headings were added; 99 index headings were deleted; and 526 index entries were modified.

### Systematic Reviews for the 2017 Summer Edition

The major focus of the 2017 summer version was the systematic review of the following schedules: WI (Digestive System), WN (Radiology. Diagnostic Imaging), and a partial review of the WM schedule: WM 140-308 (Mental Disorders) due to major restructuring of Mental Disorders tree (F3) based on revisions to the *Diagnostic and Statistical Manual of Mental Disorders* (DSM).

### Highlights from the WI (Digestive System) Review

• The gastrointestinal tract moved from the WI 100 area (digestive system) to the new number: WI 190

- Several new class numbers created for disease terms, e.g., *Esophageal Diseases*, formerly classed at WI 250 Esophagus, now classed in the new number WI 255 Esophageal diseases (General)
- The large intestine moved from WI 400 Intestines (General) to the new number: WI 518.
- For specificity and consistency, the specific region names added in front of existing generic disease and surgery class captions. For example, WI 320 changed from Neoplasms to Stomach neoplasms; WI 480 changed from Surgery (General) to Intestinal surgery.
- Distinction made between Abdomen (now classed in new number WE 757) and Abdominal Cavity (classed at WI 900)
- New number, WI 980, created for general works on surgery of the digestive system or gastrointestinal tract.

### Highlights from the WM 140-308 (Mental Disorders) Review

With 2016 MeSH, major changes were made to the Mental Disorders F3 tree based on revisions to the *Diagnostic* and Statistical Manual of Mental Disorders (DSM). The corresponding areas of the NLM Classification were updated.

- Behavioral symptoms for which there are no classification numbers for related disorders, now classed in WM 140 with general mental disorders rather than WM 165. WM 165 now limited to works on self-injurious and dangerous behaviors.
- New number, WM 168, created for Neurodevelopmental Disorders in adults.
- New number, WM 169, created for Attention Deficit and Disruptive Behavior Disorders in adults.
- Neurotic Disorders deleted as a header for WM 170-197. Class numbers WM 171 through WM 184 were outdented to the far left level equal to Neurotic Disorders.
- Several specific personality disorders added to the existing A-Z structure at WM 190.5.
- WM 190.5.I6 (Impulse control disorders. Gambling. Fire setting behavior) canceled and redirected to new number, WM 192.
- The header for WM 200-220 changed from Psychotic Disorders to Schizophrenia Spectrum and Other Psychotic Disorders. Class numbers WM 202 through WM 220 were outdented to the far left level equal to Psychotic Disorders.
- The WM 270-290 Substances-Related Disorders area broadened to include Behaviors:
  - New number, WM 273, created for Alcohol Drinking
  - Marijuana use added to caption at WM 276 Marijuana abuse. Use of medical marijuana is classified in WB 925. Legalization of marijuana classed in QV 732-733.
  - Tobacco use added to caption at WM 290 Tobacco use disorder. References to HV and QV under Tobacco Use deleted in the index.
  - Smoking dependence redirected from WM 290 to new number, WM 295, created for Smoking in general. References to HV and QV under Smoking were deleted in the index.

### Highlights from the WN (Radiology. Diagnostic Imaging) Review

- WN 250 vs. QZ 269 Radiotherapy clarified:
  - WN 250- Includes works focusing on general aspects of radiotherapy.
  - QZ 269 Includes works focusing on treatment of neoplasms.
- Changes to classification of radioactive elements:
  - Medical uses of radioactive elements classed in WN 440-450.
  - Adverse effects of radioactive elements classed in WN 610-615.
  - Works on general physics and chemistry of radioactive elements are classed in the Library of Congress' (LC's) QC or QD schedule.
  - Class numbers, WN 300 General works on Radium, WN 340, Therapeutic use of radium, and WN 415 Biological aspects of nuclear medicine and atomic energy, canceled. The corresponding headers were deleted.
- WN 600, Radiological health, is restricted to general effects of ionizing radiation on humans. Animals and plant life excluded.
- Several changes made to WN 610-630 area:
  - WN 610, Radiation injuries, now limited to humans. Radiation effects on plants classed in LC's QK schedule. Radiation injuries from radiography and radiotherapy procedures classified here rather than with the procedure.
  - WN 615, Radioactive pollution and pollutants (General), now includes general works on radioactive hazard releases.
  - WN 620, formerly Injurious effects on man and animals, now limited to Experimental radiation injuries, which per MeSH is for vertebrate animals only.
  - WN 630, Injurious effects on plant life (related to human ecology) canceled. Radiation effects on plants classed in LC's QK schedule.

### Other 2017 Summer Edition Changes

In addition to the systematic reviews of the WI, WM, and WN schedules, other additions and changes were made:

Table G Changes

The Table G notation for FA1 Great Britain updated to reflect the MeSH change from Great Britain to United Kingdom.

**Form Number Policy Change** 

Use of the form numbers 5,  $\vec{7}$ , and 9 no longer restricted to works that cover the overall subject of the schedule.

**Global Climate Change and Human Health**New number, WA 30.2, created for Climate Change. Climate Change, Global Warning, and Greenhouse Effects were redirected from WB 700 Medical geography to this new number. Table G added to WB 710 Diseases of geographic areas. WB 700 should be used for works with no geographic emphasis.

### Classification of Medicinal Plants

Sixteen (16) new numbers for specific medicinal plants were added under the new A-Z structure under QV 766. Medicinal plants not fitting in any A-Z number will be classed in QV 766. Specific medicinal plants with geographic distribution are classed in QV 770. Non-medicinal aspects of plants are classed in the appropriate QK number.

**Genetic Processes Changes** 

With 2017 MeSH, the term Genetic Processes was deleted. The NLM Classification was updated to reflect this change:

- QU 475 Genetic processes was changed to Gene expression. Gene expression regulation
- QU 477 Pathologic genetic processes was changed to Genetic variation and outdented
- New numbers were created for:
  - QU 55.97 -- Transcription factors
  - QU 510 -- DNA damage. DNA repair
  - QU 515 -- DNA replication
  - QU 520 -- Molecular evolution. Genetic selection

The PDF version will be updated with 2017 winter and summer classification data by the fall of 2017.

To learn more about the NLM Classification see the Fact Sheet.

By Sharon R. Willis

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