

MDMLG NEWS

Fall 2018

President's Message from Juliet Mullenmeister



Metropolitan
Detroit
Medical
Library
Group

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MDMLG has a history of being a very active and robust organization. But I'm seeing an awful lot of the same few faces at meetings and events, particularly when it comes time to run for offices or serve on committees. This organization is only as robust as the people who participate in it. I want to encourage new ideas and encourage membership activity, and I want to strongly encourage you come to meetings, if possible, in person. One of the biggest "wants" when we poll our group is more networking time. But that can only happen when people attend meetings and courses.

We are discussing holding a couple of evening events that are more opportunities to see one another IRL, as the kids say, and we are going to look at doing one in the fall and one in the spring. Please watch out for a membership survey asking for more particulars on this so that we can refine this plan.

All of our committees are eagerly looking for members, and more members mean less work for each individual person. So, please, write for the newsletter, help out with the Program Committee or the Professional Development Committee, or at least try to attend a CE either live and in-person, or when possible, virtually. We do this work so that our membership as a whole benefits from it.

That said, we are also working on some more possibilities for virtual attendance, but we need to test them out and see if we can make those work for those who aren't able to get away in person. For every platform, there's an institution who prohibits the use of it, sadly.

I know that I'm not alone in feeling as though there's just not enough time to get everything done that I want to do. There are always more demands on our time than we'd like; there will always be more things that should get done than we are going to be able to accomplish in a given timeframe. I recommend taking some time to participate in professional activities. The workload isn't going away, but perhaps you'll learn a new skill in order to improve how you interact with it.

Juliet Mullenmeister
MDMLG President 2018-2019
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FALL GENERAL MEETING SEPTEMBER 13, 2018

Thursday, September 13, 2018

Noon – 4:00 pm

Wayne State University Shiffman Medical Library

Stapleton Conference Room

Please register by September 1, 2018

[Registration Info](#)

The MDMLG Fall General Meeting will consist of a networking lunch, business meeting, and viewing and discussion of the MLA September webinar, *Putting the Quality in Qualitative: Tips for Evaluating Qualitative Research Articles*. This particular webinar will only be offered to MDMLG members (not MHSLA), and you may register for the in-person viewing or to watch the recording on your own time.

AGENDA: 12:00 to 1:00 pm: Networking lunch

1:00 to 2:00 pm: Business meeting

2:00 to 4:00 pm: [Putting the Quality in Qualitative: Tips for Evaluating Qualitative Research Articles](#) webinar viewing followed by discussion

Parking is available in WSU Parking Lot 75, 545 E. Canfield St., Detroit MI, 48202 for \$8.00. Parking is also available at DMC Detroit Receiving Hospital for \$4.00.

Maps: [Shiffman Medical Library](#), [WSU Parking Lot 75](#), [DMC Detroit Receiving Hospital parking](#)



Medical Licensing Requirements for Human Trafficking Identification Training

by Barbara Maynarich

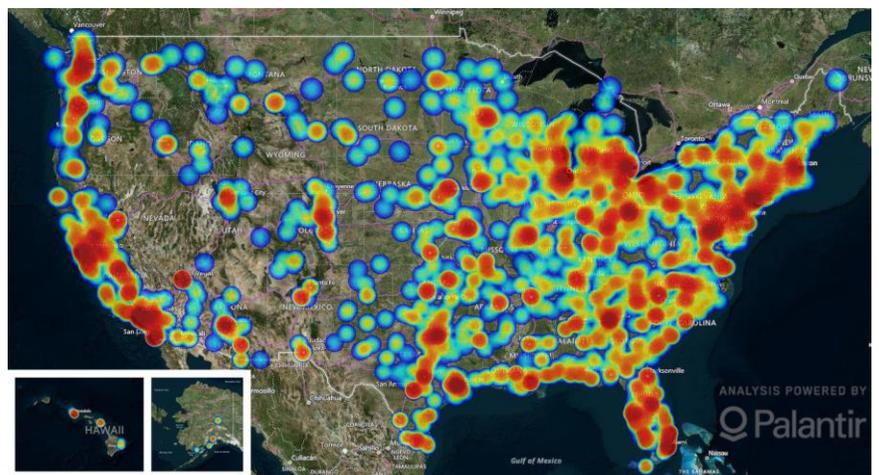
With the huge increase in human trafficking, the Michigan Department of Licensing and Regulatory Affairs (LARA) added [training standards](#) for all physicians and medical staff to help identify victims. These requirements are effective for individuals who request a new license or who request a renewal of an existing license.

MYTH: Victims of human trafficking will ask for help and let you know they are a victim of a crime.

REALITY: Most victims will not identify themselves for multiple reasons including fear of the trafficker, threats against themselves or loved ones, shame, distrust of authorities, or fear of prosecution for crimes they've committed under coercion.

Also known as modern-day slavery, human trafficking is the second largest international crime industry and it's happening right here in Michigan. Human trafficking typically involves either sex trafficking or labor trafficking and can be a combination of both. With approximately 150 young girls seduced or taken into sex slavery in Michigan each month, Michigan ranks #2 in cases of human trafficking in the United States. The average age of abduction is 12-14 years old and the life expectancy of girls who are trafficked is 5 to 7 years.

Girls are not the only victims of trafficking as victims can also be male children and adults of both sexes. Many men for instance, are promised jobs as laborers in construction or on farms and then are held and forced to work for little or no wages, many times being fed barely enough to keep them alive. Many adult victims are immigrants who are afraid of deportation or legal issues, and many child victims are runaways from foster homes.



To help fight these crimes and help as many victims as possible LARA added training standards for identifying victims of human trafficking for medical personnel (Medicine

Location of Potential Human Trafficking Cases in the U.S.

<https://polarisproject.org/2017statistics>

General Rules – R 338.241, Rule 113, pursuant to section 16148 of the code, MCL 333.16148). Any individual seeking medical licensure shall complete training in identifying victims of human trafficking. Training must cover types of trafficking, identifying victims, identifying warning signs in health care settings, and reporting possible victims. Training should be from recognized health-related organization, a government agency, educational program approved for initial licensing, or reading an article published in a peer reviewed journal that meets the necessary requirements. Proof of completion is required.

Many hospitals now provide continuing education courses on human trafficking for their physicians and staff. In 2014, PubMed introduced a new MESH heading of human trafficking, and a recent search for articles yielded 244 results since that time. UpToDate offers an in-depth article on identification and evaluation of human trafficking in the health care setting. In addition, numerous colleges and universities offer classes focused on human trafficking as part of their medical curriculum.

With the new licensing laws in place in Michigan, we can have hope that health care providers will be able to help identify some of the millions of victims of human trafficking to bring an end to their captivity and arrests to their traffickers.

Resources consulted:

Office of Regulatory Reinvention, State of Michigan (March 15, 2016). *Michigan Register, Issue No. 4*. Retrieved from https://www.michigan.gov/documents/lara/MR4_031516_516959_7.pdf.

Tracy, E. E., & Macias-Konstantopoulos, W. (Mar 16, 2018). Human trafficking: identification and evaluation in the health care setting. *UpToDate*. Retrieved from <https://www.uptodate.com> [Login may be required]

The ugly truth. Retrieved from <http://www.thehouseofpromise.com/human-trafficking-the-facts.html>. Accessed August 21, 2018.

Growing awareness. Growing impact. 2017 Statistics from the National Human Trafficking Hotline and BeFree Textline. Retrieved from <https://polarisproject.org/>. Accessed August 21, 2018.

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Featured LibGuide: Choosing a Medical Journal for Publishing Your Work

by Katherine Akers

Do you have medical students, residents, physicians, or faculty come ask for your assistance with choosing a journal to submit their manuscript? I do—frequently enough that I created a new libguide entitled “Choosing a Medical Journal for Publishing Your Work” (<https://guides.lib.wayne.edu/choosingajournal>) to combine my lists of recommended journals in one place for sharing with inquiring patrons. My hope is that this libguide content might also be helpful to you and your patrons.

The libguide contains 7 tips for helping authors choose a journal for publishing their work and 4 lists of recommended journals in different areas: case report journals, medical education journals, quality improvement journals, and student and resident journals.

My intent in focusing on these 4 types of journals is to help medical trainees and practitioners realize that they can engage in scholarship without conducting a full-fledged research study but instead by writing about their patient encounters, quality improvement projects, and medical education initiatives. Notably, the listed student and resident journals publish an incredibly broad range of pieces, not only research articles but also review articles, commentaries, review articles, personal experience essays, interviews, book reviews, humorous works, poetry, photographs, and artwork, allowing students a bevy of opportunities to hone their communication skills, gain experience with publishing, and flesh out their CV.

Another intent in compiling these vetted lists of journals is to help direct authors toward reputable journals and away from low-quality or “predatory” journals. This is a particular danger when it comes to publishing case reports, as I’ve found that over half of case report journals (i.e., newer journals that are dedicated—sometimes exclusively—to publishing case reports or case series) show signs of being “predatory”. Therefore, all of the case report, medical education, and quality improvement journals on these lists appear in PubMed and show no “warning signs” of questionable publishing practices. Although the vast majority of student journals do not appear in PubMed, I again only included those published by reputable institutions.

Please check out my libguide, re-use the content, send along feedback, or suggest additional journal titles.

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SUMMER 2018 LUNCHEON MEMORIES

By Sandra Stuebaker

A member of Metropolitan Detroit Medical Library Group (MDMLG) for 40+ years---with Emeritus status since 2001---I can still boast of my connection to a group of dedicated professionals who accomplish so much, despite being a tiny minority in the health care field. MDMLG collegial support was my rock when I was a solo “newbie“ in the medical library at a local hospital and membership still resonates in retirement. Emeritus membership allows an ongoing peek into the present scenario in medical libraries and attendance at the annual luncheon at lovely locales where retirees can hobnob with former peers and talented newcomers.

A bonus at this year’s luncheon on June 7th at the Scarab Club in Detroit was being a recipient of one of three Phalaenopsis orchid plants that graced each table. My first ever orchid plant, I’m happy to report that it seems to be doing well---**on three ice cubes once a week!** Yup, that’s what the directions on the accompanying tag say to do for “months of longevity.” Now if any of our MDMLG colleagues can share her/his wisdom on this subject there might be others who would also appreciate it.

In exchange, I would share a bit of “poetic license” that seeks to define MDMLG via terse *HAIKU* verse. (Wherein a stanza consists of 3 lines of 5, 7 & 5 syllables)

MDMLG via *HAIKU*

by Sandra A. Stuebaker, MSLS

Medical milieu
Docs, nay; Librarians, yay!
Masters of research
Lit’rature, et. al.
Group extraordinary!

--**SAS** says so.



ANNOUNCEMENTS

Upcoming Events

October 11 – 12, 2018

[MSHLA Conference](#)

Park Place Hotel
Traverse City, MI

October 16 – 18, 2018

[Internet Librarian](#)

Monterey, CA

October 17, 2018

[Michigan Library Association](#)

Annual Conference
Suburban Collection Showplace
Novi, MI

[Library Conference Planner](#)

Info on conferences worldwide

News

Misa Mi of Oakland University William Beaumont School of Medicine has been promoted to Full Professor. In addition her article in [JMLA article](#), Culturally competent library services and related factors among health sciences librarians: an exploratory study. J Med Libr Assoc. 2017 Apr;105(2):132-138. doi:10.5195/jmla.2017.203 was awarded Best JMLA Research Paper (2016-2017).

Stephanie Swanberg of Oakland University William Beaumont School of Medicine has been promoted to Associate Professor with tenure.

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