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Katie Lockwood
University of Western States

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Classification and the Specialized Library:
Creating a Local Expansion of NLM Classification for Chiropractic Materials

by Katie Lockwood, MSLIS
Metadata & Systems Librarian,
W.A. Budden Library
University of Western States
klockwood@uws.edu

Katie Lockwood is the Metadata and Systems Librarian at University of Western States' W.A. Budden Library where she has worked since 2005. She earned her BA in Political Science from the University of Oregon in 2002 and her MSLIS from the University of Illinois in 2009. In her spare time, she enjoys classic films and karaoke.

Libraries with specialized collections often face unique challenges to providing access to their materials. Cataloging tools, including subject headings and classification systems, are often better suited for less focused collections. Call number classification systems in particular are problematic for libraries with greater depth in certain subject areas. Users expect to be able to walk to the shelf and browse everything about a certain topic in the same section. This is a reasonable request in small libraries, but it is often difficult when working within existing schemas. In response to this problem, the University of Western States Library developed its own expansion to National Library of Medicine Classification in order to better serve its users.

Classification in Medical Libraries

The most commonly used classification system in medical libraries is National Library of Medicine (NLM) Classification. The preliminary edition of NLM was developed in 1948, followed by the first edition in 1951. First known as the Army Medical Library Classification, NLM was envisioned to be used in conjunction with Library of Congress (LC) Classification to provide more call number granularity for medical materials (NLM, 2017). Classifications from QS-QZ represent the preclinical sciences, and W-WZ house materials on medicine and related subjects.

A study by Sheerer and Hines in 1974 found that adoption of NLM classification by medical libraries in the United States was becoming widespread by 1973. NLM topped the list of classification systems, with 35 percent of libraries reporting usage, followed by LC and Boston Medical Library Classification, another medical arrangement system that was developed in 1879 and ceased updating with its 1955 edition. A few libraries at this time also reported using their own systems of classification, though those numbers were declining in favor of more standardized call number systems. Thirty years later, Womack completed an updated study of classification systems and subject headings used in academic medical libraries and found that NLM Classification was even more widely used in 2006, with 75 percent of libraries reporting the use of NLM alone or in conjunction with LC for materials outside of the medical scope.

Perhaps more interesting are the reasons given in these surveys as to why NLM Classification was chosen by libraries. In 1974, Sheerer and Hines concluded that the adoption of NLM over other classification systems was the result of a "widespread trend in libraries to rely upon the nationally centralized cataloging services for cataloging data and reduce costs by cutting out multiduplication of professional work" (p. 280). Cooperative cataloging was the biggest drive at that time for libraries choosing this system. In the 2006 survey, however, 52 percent of NLM users reported that the system was the "most detailed and most appropriate for a medical collection" (Womack, p. 107). Looking at both surveys, Womack concluded that "while medical libraries used to be primarily interested in the ease of the cataloging process, they are now most concerned with what is best for their collection and for their users" (p. 112). The choice of classification system had become less dependent upon ease of use for cataloging staff and more dependent upon ease of access for the students, faculty, practitioners, and patients the library serves.

The importance of patron-centered cataloging calls into question the adequacy of broad classification systems for specialized libraries. While NLM Classification offers greater granularity for medical libraries than LC Classification, it doesn't offer a lot of specificity for more focused collections. Shortly after the development of NLM Classification, Bloomquist wrote, "All of the various disciplinary orientations demand special viewpoints: nursing, dentistry, public health, and others. The size of the collection, the type of user, all make the concept of the universal system less and less realistic" (1955, p. 155). There are several examples of this issue in the library literature. In a 1997 study of the appropriateness of NLM for pharmacy materials, López-Mertz found that only 42 percent of works from bibliographies developed by the American Association of Colleges of Pharmacy and the Medical Library Association were classified under NLM's QV schedule for Pharmacology, with 41 percent spread throughout other NLM classification numbers, and 17 percent in LC. NLM, with its broad medical focus, was not adequate for arranging materials in this specific discipline.

Other health sciences specialties have created their own expansions of NLM to better cater to their unique collections and users. In 1973, Strauss developed an NLM expansion for works on dentistry, and in 1978, Caffarel proposed an expansion to NLM for the improved subject arrangement of nursing materials. Many of these suggestions were incorporated in future editions of NLM Classification (López-Mertz, 1997). NLM, while regularly updated and responsive to suggestions for changes, is not always suitable for specialized libraries that collect for certain subjects in great depth.

Developing a Chiropractic Specific Classification

The W.A. Budden Library at University of Western States (UWS) is home to a small, focused medical collection. Founded in 1904, UWS spent the majority of its 100-year history with the doctor of chiropractic as its flagship degree. Known for most of its history as Western States Chiropractic College, the institution achieved university status in 2010, expanding into other areas of healthcare education. As a result of its chiropractic emphasis, the library collection itself is heavily focused on chiropractic materials, with 18 percent of library materials classified under chiropractic.

NLM, as a general medical classification system, affords a limited number of classifications for materials related to complementary and alternative medicine (NLM Schedule, 2018). Chiropractic materials are a subset of these classifications:

WB 905	Chiropractic
WB 905.6	History and philosophy
WB 905.7	Chiropractic as a profession. Ethics. Peer review.
WB 905.8	Diagnosis
WB 905.9	Therapeutics

The biggest portion of the UWS library chiropractic collection was filed under one classification number. More than 1,500 items were classified "chiropractic therapeutics" and arranged under WB 905.9. Under this umbrella, many wide and varied techniques practiced by chiropractors since the profession's inception over a century ago were shelved together by author, making it difficult for users to browse and find everything about a certain technique of interest, whether for historical or practice purposes. While NLM was a functional and appropriate system for other areas of the collection, UWS librarians found that it lacked the specificity required for this core collection. We needed our own classification system for these materials, developed with our users' unique needs in mind.

In order for our small, specialized library to provide better access to its focused collection, the author decided to think outside of the classification box and create an expansion for NLM Classification focused on specific chiropractic therapeutic techniques. I was inspired by an NLM expansion for alternative healthcare developed at National University of Natural Medicine (NUNM) that UWS has used for many years to provide better browsability for materials on alternative therapies. In particular, the section of NUNM Classification on medicinal herbs inspired the development of a similar expansion for chiropractic, with each technique assigned its own Cutter number.

The first step in the process of developing this classification expansion was to identify chiropractic techniques to be included in the schema. Luckily, much of this work had already been done for us by the Chiropractic Library Consortium (CLC). In 1980, a group of chiropractic librarians, then named the Chiropractic Library Consortium (CLIBCON), realized the insufficiency of Medical Subject Headings (MeSH) for describing specific chiropractic materials. In 1984, CLIBCON published the first edition of a specialized thesaurus called Chiropractic Subject Headings (ChiroSH) which provided catalogers and indexers with a controlled vocabulary for chiropractic resources (Harvey, 2008). ChiroSH was accepted as an official thesaurus by the Library of Congress in 2008 and is used in bibliographic records as well as the Index to Chiropractic Literature (ICL), a database of peer-reviewed journals related to the chiropractic profession (Hardy, 2014). The latest edition of ChiroSH was published in 2009 (Kempke & Boni). Chiropractic librarians had already created their own subject thesaurus for their discipline's unique needs; it seemed logical that our users would benefit from a specialized classification system as well.

Using ChiroSH, I identified 147 unique techniques to be included in the classification expansion. I then used the Cutter-Sanborn table to create classifications for each of the 147 techniques. Starting with ABSTM (.A164) and ending with Zindler Reflex Technique (.Z77), each method would have its own Cutter number under the larger WB 905.9 classification umbrella.

With the classification system completed, the hard work of reclassification began. Materials about each technique were identified in the library catalog using keyword searches on technique and developer names. In all, over 750 items were identified as belonging to a specific chiropractic method. Complete call numbers were created for each title, including Cutter numbers for filing by author, title and date. Items were then pulled from the shelf by technique and relabeled with their new call numbers by library staff. Quite a bit of shelf shifting was needed to fit all of the newly classified items into their new places on the shelf. Items in storage, including heritage VHS and audio tapes, were left for possible reclassification at a later date. In less than two weeks, almost 500 items in the collection were reclassified, relabeled, and reshelved. After the project was completed, each chiropractic technique had its own shelf location, increasing discoverability for our patrons in the stacks as well as in the virtual browse portion of Primo, our online catalog.

Reclassification Results

Libraries in general are trending toward greater usage of electronic materials over their print counterparts. The usage of electronic books at UWS has increased 114 percent since FY 14/15, while overall print circulation has decreased 51.2 percent during the same time period. However, the majority of these reclassified materials on specific chiropractic techniques are either historical or not yet available in electronic format. Shelving these materials together by technique has increased browsability for our patrons. As a result of the project, reclassified materials saw less of a decrease in circulation than the year before reclassification (-56.8 percent in FY 15/16; -18.4 percent in FY 16/17), and less of a decline than total print circulation (-24.8 percent in FY 15/16) and circulation of other chiropractic materials (-27.6 percent in FY 16/17). The creation and implementation of a more granular subject arrangement for chiropractic therapeutics enabled our users to better find and use these valuable resources.
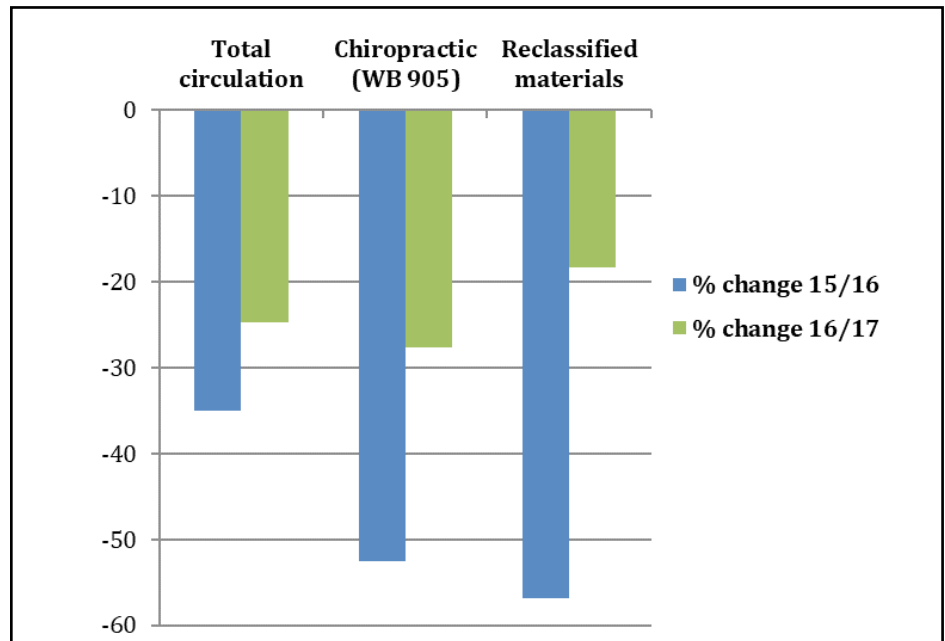
Change in circulation before and after reclassification.

Specialized libraries are often faced with the challenge of providing access to comprehensive subject collections with tools, including subject headings and classification numbers, best suited for description and arrangement of more general collections. National Library of Medicine Classification offers more granularity for medical collections than Library of Congress Classification, but it lacks specificity for collections of greater depth in certain subject areas. Our small, focused collection allowed us, and drove us, to undertake this big reclassification project on a small scale. By expanding NLM Classification locally for our collection's unique needs, we increased discoverability and usage of these important library materials.

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