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Elizabeth R. Lorbeer Profile

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Where to Start? Opening Day ... from page 37

in the new school going beyond the traditional boundaries of a librarian as I am committed to the success of the new school.

Right now, the library is focused on building virtual reference services utilizing Web conferencing tools, SpringShare online chat widget and individual consultations in the Clinic, student learning communities, and future laboratory and simulation spaces. The **WMed** librarians, with their hospital librarian partners, frequently make house calls to clinical faculty and support staff to address individual information needs. It is common for the librarians to provide services at multiple locations, equipped with tablets and laptops to quickly support the needs of users. There are no traditional reference hours or desk; the librarians are available on demand during clinic hours both in person and virtually.

My library's motto is "Climb to the top." My five-year-old daughter came up with this phrase one summer evening as I was working on the library's marketing plan. She drew a picture of a tree with several happy stick figures dancing around the words she inscribed. Every day I look at her picture and it inspires me to build the very best library for my users that I know how. 🌳

against the grain people profile

Elizabeth R. Lorbeer

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BORN AND LIVED: Born in Buffalo, NY; lived in Boston, Chicago, Birmingham, and now Kalamazoo.

PROFESSIONAL CAREER AND ACTIVITIES: I am the primary liaison between the library and academic departments, residency and fellowship programs, clinics, leadership, administrative units, and student body at the school, and pivotal in expanding the library's role in supporting successful outcomes in medical education, patient care, and biomedical research. I ensure seamless integration of information resources by translating the needs of the **WMed** community and designing innovative services to connect library users to content and the expertise of the **WMed** librarians.

FAMILY: Husband, 2 kids, 2 dogs & 1 canary

IN MY SPARE TIME: Having fun with my family and writing a book.

FAVORITE BOOKS: *LMNO Peas* by Keith Baker.

PET PEEVES: Printer jams.

PHILOSOPHY: Love everyone.

MOST MEMORABLE CAREER ACHIEVEMENT: Building a library from scratch.

HOW/WHERE DO I SEE THE INDUSTRY IN FIVE YEARS: Per-article-purchases replacing subscriptions and big deals. 🌳

Disruptive Technology: Librarians Must Think Heretical Thoughts to Adapt

by **Michelle A. Kraft** (Senior Medical Librarian, Cleveland Clinic Alumni Library) <kraftm@ccf.org>

The sun is setting and it is getting a little difficult to see as darkness falls. Without even thinking I walk over and flip a light switch and I am able to see everything to continue working. Light has become so commonplace I don't even realize how much we rely upon it until it is gone. Power outage, camping, or a quick late-night trip to the bathroom, make me realize how this common item has become integral to our society. Yet this wasn't always the case. Before the common light bulb, people were only able to see in the dark using candles, lanterns, and gas lamps. None of those items produced much light nor were they easy to turn on with the flick of a switch. The light bulb made it possible for people to work after sunset, travel a little safer in the dark, and it eventually led to the invention of the electric power plant. Disruptive technologies change the very way society functions, altering the way people do things, their perceptions, and expectations. The light bulb was a disruptive technology. It has changed society's perceptions so drastically that light at night is considered a common expectation.

Just like the printing press allowed books to be mass produced and allowed for scientists to easily share their knowledge through scholarly journals, the Internet and personal computers

further democratized knowledge and information far beyond books, journals, and other printed material. Tutorials, speeches, images, animation, etc. are all available online. Professionals were no longer necessary for publishing and mass distributing information; the average person could publish and distribute anything online for the masses. The personal computer provided the ability to access information on a much wider scale than the printing press but it was not mobile. While the laptop provided a bit of mobility, people didn't have it constantly on and next to them as they moved about the day. The smart phone and the tablet changed that.

Our library patrons not only have the ability to access information on the Internet but now truly they can, and do, do it any time and any place. The smart phone has changed the way people communicate, eat, work, play, and find information. Text and data usage continue to grow while talk minutes continue to shrink.¹ People now comparison shop for items on their phones while they stand in the aisles of stores. Maps and printed directions are replaced by smart phones, speaking directions to drivers. Since most people carry their smart phone with them at all times, the ability to get information is easy and always possible.

What it Means for Libraries and Librarians

We as librarians need to re-think the way we have been providing resources and services. Our patrons are more mobile and connected. Simply having a Web presence is not enough. We need to look at how our patrons access and use information and we need to provide it in those ways. Five years ago, electronic books and electronic journals were easily accessible to people via their desktop or laptop computers. Now, the preferred methods of access have changed. People want to download electronic books to their mobile devices and they want to highlight and take notes in those electronic books. *Apple Insider* reports a survey by Black Book, that fifty-one percent of "office-based physicians said they use a mobile device to perform independent medical reference and Internet research."² In a *ComputerWorld* article on the iPad Mini, one doctor describes his iPad as "full of medical apps for ultrasound regional anesthesia, anesthesiology textbooks, and medical calculators."³ **Boruff and Storie** surveyed medical trainees, graduate students, and faculty members on the use of smartphones and tablets to answer clinical questions and

continued on page 39