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People Profile: Melissa Nasea

Editor

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consider extremely important. Nevertheless, most medical libraries simply do not have the space to retain everything. If a desellected title is later recognized as a “must-have” library personnel may explore the possibility of re-acquiring it through purchase or donation. Deselction must remain an important aspect of collection management in most academic health sciences libraries in spite of reservations about and protests against the practice.

A brief look at the Laupus Library’s deselction process will show how one history collection grows by the process. The library evaluated its print book collection prior to moving into a new building in May 2006 and again this past summer. The evaluators were given a list of books that were at least five years old and had been used comparatively infrequently. They were asked to retain books in the history sections. (In the NLM classification most of these have a call number of “11” or WZ). When electronic versions of statistical sources (such as U.S. vital statistics) were available, paper copies were usually deselected and the appropriate URL was added to the catalog record.

The evaluators were asked to identify books the library should keep because of their historical importance, local authorship, or author autographs. They also pulled all books published prior to 1960 for possible transfer to the History Collections. These books were reviewed by special collections personnel who selected books that should be added to the noncirculating collection and be granted, thereby, a certain measure of immortality.

In some cases, recently published books were retained in the general circulating stacks because of the historical information they contained. The following label was attached to the inside front cover of these books.

DO NOT WEED: This Book is Kept for Historical Purposes. The information contained here may not represent curatorial holdings in a specific area. Likewise, an inkind gift might inspire acquisition of works on a particular topic or by a certain author. Similarly, a new program in the development phase or a research interest described by a client may warrant expanding the scope of the collection. Although microform collections tend to be quite expensive, they may provide a way to quickly expand offerings in a particular area. Selected print books can then be acquired as availability and money permit.

**Digital Materials in the Special Collections**

We would like to conclude this discussion with a word about the role of digital materials in special collections. It is our opinion that digital text is generally not an appropriate substitute for text on paper. Clearly, when the paper version (perhaps a section of a book) is not available, a digital version is better than nothing, particularly when a person’s interest is limited to the content of the text. Digital versions of printed works and manuscripts are very useful when remote accessibility or collection promotion is the goal. From the perspective of a special collections librarian, the most important use of digitization is, perhaps, to allow better preservation of an original. In the case of medical libraries, a particularly good use of this technique would be a project to digitize fragile 19th and early 20th century instrument and equipment catalogs. These are often very scarce, very useful reference sources. Digital versions of these catalogs will allow preservation of the originals while the “reprints” are read many times. Besides the aesthetic considerations, digital media is very ephemeral compared to paper and may need to be reformatted to keep up with technology changes. When original materials are digitized, both the original document and the digital version should be cataloged and kept in the special collection.