Editors cannot know (and sometimes even find) it all: making the case for a medical librarian on your editorial board. This was the bold statement on a colorful poster presented at the August, 2011 annual meeting of the International Academy of Nursing Editors (INANE) (Young & Marrelli 2011).

Editors of nursing and other journals have a unique role. They may be a content “expert” and so it is assumed that they (can!) know everything about a given topic in their journal’s purview. In fact, one of the most autonomous, sometimes lonely roles in nursing can be that of the nurse editor. Nurse editors find themselves the sole professional accountable for a specific journal’s content, including editorials, articles, themes, and sometimes controversial topics. In addition, they are the point person for any response to that content. In these authors’ experience, this includes being truly interdisciplinary and international and also meeting the needs of the educators and students of those various health professional disciplines. As the body of literature, and information in general continues to increase exponentially one nursing editor cannot “know it all” and sometimes cannot find it all either.

New knowledge is constantly evolving. The quantity of published information increased dramatically in the second half of the 20th century. Siegel and Baveye (2010) noted an average increase in scholarly publishing of between 200% and 300% between the early 1980s and the late 1990s. The National Center for Biotechnology Information database includes 884 nursing journals. As of May 2012, PubMed contained over 21 million citations, 1 million more than reported in May 2011. PubMed indexed over almost 15,000 in articles in 2011 that included the word nursing in the title, abstract, or full text or were assigned the exploded Medical Subject Heading (MeSH) Nursing. Such numbers, which will only continue to grow, are hard to grasp, but help provide the foundation for the scope of what is an increasingly daunting task. Since many nurse editors also have full time jobs, keeping up with all of this new information is next to impossible regardless of how motivated they are (Broome, 2010; Ormandy, 2010). Nurse editors are the sole professional accountable for journal content, including editorials, articles, themes, and sometimes controversial topics. They are the point person for the response to the journal’s published content.

In April 2010 the Home Healthcare Nurse’s editor identified the need for and chose a nursing education librarian to join its editorial board. This nurse editor worked in a library during high school and also as a work/study student at the Duke University Library while a nursing student. This exposure to and understanding of the scope of the librarian’s role made the decision to add a medical
librarian to the Journal’s editorial board team easy.

Working with a medical librarian and having access to this librarian as a sounding board is an untapped source of support for nursing journal editors --as well as authors, reviewers, and publishers. An experienced, professional medical librarian can bring value to a peer-reviewed journal and its nurse editor. We stress experienced and medical because librarians have become as specialized as nurses and physicians. The Medical Library Association, a separate organization from the better known American Library Association, has numerous sections for members who specialize in libraries for nursing, cancer, veterinary science, vision science, mental health, and other disciplines. These librarians are experienced at searching the medical literature using such databases as Cumulative Index to Nursing and Allied Health Literature (CINAHL), PubMed/Medline, Ovid, and Cochrane Database of Systematic Reviews. They are conversant with the vocabulary of their specialty. Just ask your local public librarian how to locate resources on evidence-based nursing or nursing informatics. This librarian has over 30 years experience in schools of nursing and teaching hospitals. She knows which books discuss which nursing theorists, but is weak on the hottest books for teenagers. She knows the difference between a qualitative study and a quantitative one, between a controlled clinical trial and a metaanalysis.

Medical librarians are familiar with the issues in evidence-based nursing that are important to practicing nurses. These librarians work with the entire spectrum of nursing literature, not just the subject covered by a discipline-specific journal. Librarians know what topics are important to nurses in general as well as to a journal’s target audience. Librarians can also serve as peer reviewers and provide reference services, including the verification of international or unusual references. This is particularly true when editors do not have access to a health care system library and with e-only publications, many of which are not peer-reviewed and are not easily accessible. In addition, librarians are able to perform content-specific searches to see the extent of nursing literature coverage on the subject of a proposed article and write articles about print and online resources for a specific topic, which may be especially useful for journals with themed issues (Young 2010, 2012). According to Henderson, Crabtree, Lewis, and Wensel (2006), nurses are the largest group of users in the average hospital library. Hospitals realized the value of librarians decades ago with the development of clinical librarian positions. Nursing journal editors should consider taking advantage of this untapped resource by adding experienced medical librarians to their editorial boards. We would be happy to discuss our experience having a librarian on the board with other nursing editors and medical librarians.

References
Young JS, Marrelli T (2011, August) Editors cannot know (and sometimes even find it all: Making the
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