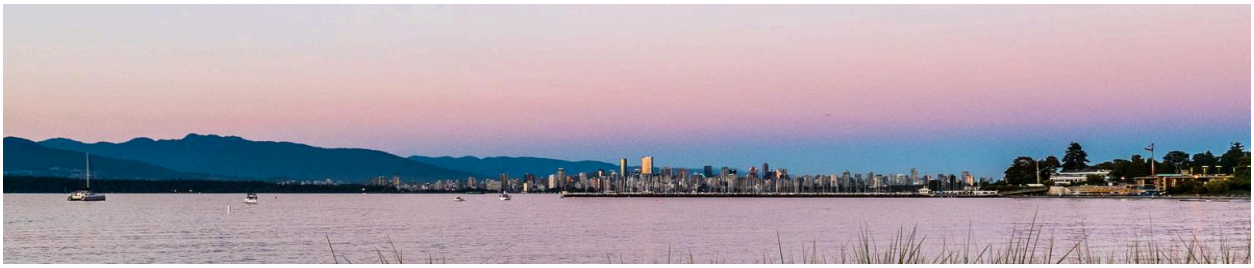
CHLA/ABSC Conference

Vancouver, British Columbia

June 3-6, 2025



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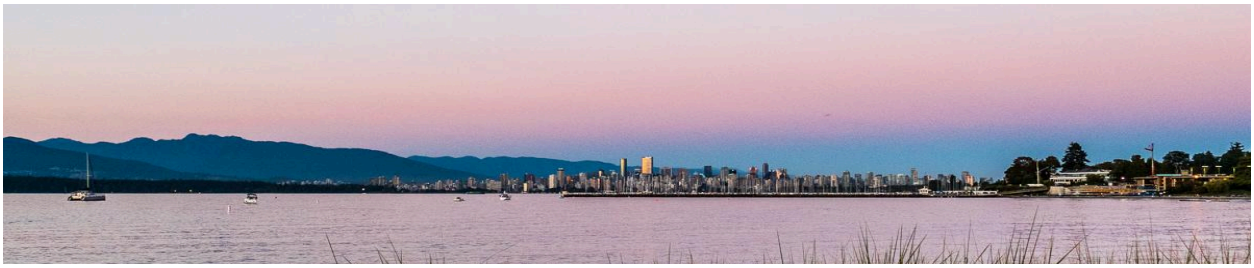


Welcome from the Co-Chairs and the Conference Program Committee

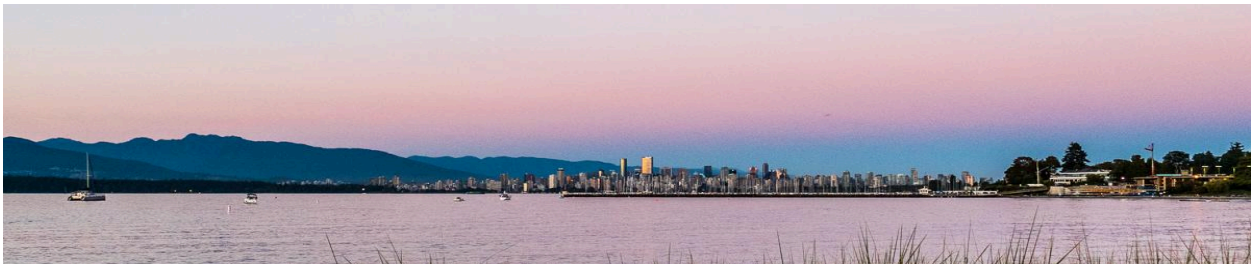
On behalf of the 2025 CHLA/ABSC Conference Program Committee, we welcome the health libraries community to the University of British Columbia (UBC) in Vancouver, British Columbia.

We recognize that UBC's Vancouver Point Grey campus is situated on the traditional, ancestral, unceded territory of the x?mÃâ°?k?Ãâ°yÃÅÃâ°m (Musqueam). With attendees from across the country now known as Canada and around the world, we invite attendees to reflect on the traditional territories from which they arrive, and to move forward with us and with Indigenous communities around the world in a spirit of reconciliation and collaboration.

We hope that you will be inspired and energized in the knowledge exchanged with your colleagues and other experts in our community as we work towards "Building Futures Together" in rapidly changing health information environments. The work we do and the futures we build over the next three days are more important than ever. We invite you to actively engage with us in valuable, challenging conversations to drive innovation and change as we celebrate the vital roles health libraries play in an informed, educated, and free society.

Patricia Foster and Jeff Mason

Co-Chairs, Conference Program Committee



Bienvenue de la part des coprésident.e.s et du comité de programme!

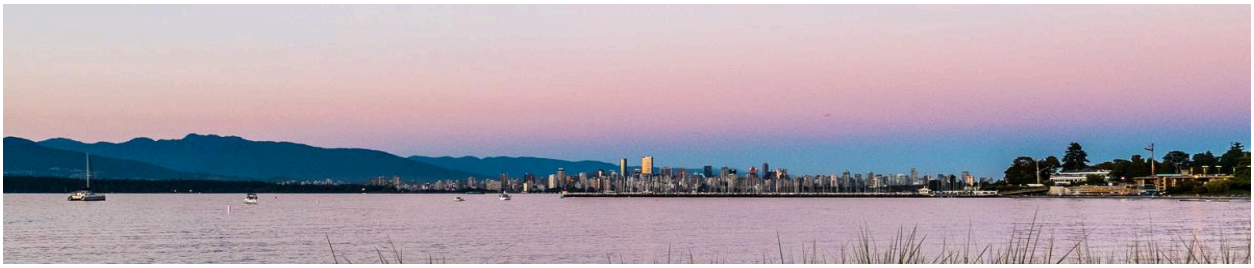
Au nom du comité de programme du congrès 2025 de l'ABSC / CHLA, nous souhaitons à toute la communauté des bibliothèques de santé la bienvenue à l'Université de la Colombie-Britannique (UBC), à Vancouver, en Colombie-Britannique.

Nous reconnaissons que le campus Vancouver Point Grey de l'UBC est situé sur le territoire traditionnel, ancestral et non cédé des x?mÃ°?k?Ãâ°yÃÅÃâ°m (Musqueam). Avec des participant.e.s de tout le pays appelé aujourd'hui Canada et du monde entier, nous vous invitons à réfléchir aux territoires traditionnels dont vous êtes originaires et à aller de l'avant avec nous et avec les communautés autochtones du monde entier dans un esprit de réconciliation et de collaboration.

Nous espérons que vous serez inspirés et stimulés par les connaissances échangées avec vos collègues et les d'autres expert.e.s de notre communauté, alors que nous nous efforçons de « construire des futurs ensemble » dans des environnements d'information sur la santé qui évoluent rapidement. Le travail que nous accomplissons et l'avenir que nous construisons au cours des trois prochains jours sont plus importants que jamais. Nous vous invitons à participer activement avec nous à des conversations intéressantes et stimulantes afin de stimuler l'innovation et le changement, tout en célébrant le rôle vital que jouent les bibliothèques de santé dans une société informée, éduquée et libre.

Patricia Foster et Jeff Mason

Coprésident.e.s, comité de programme



Welcome from the President of CHLA

Dear colleagues, friends and soon-to-be-friends,

Welcome to Vancouver, BC and to the CHLA-ABSC 2025 conference. I am so glad you are here and ready to learn, grow and help build our future together! There has never been a more important time for us to stand strong as a profession and build those friendships and networks that help us through challenging times.

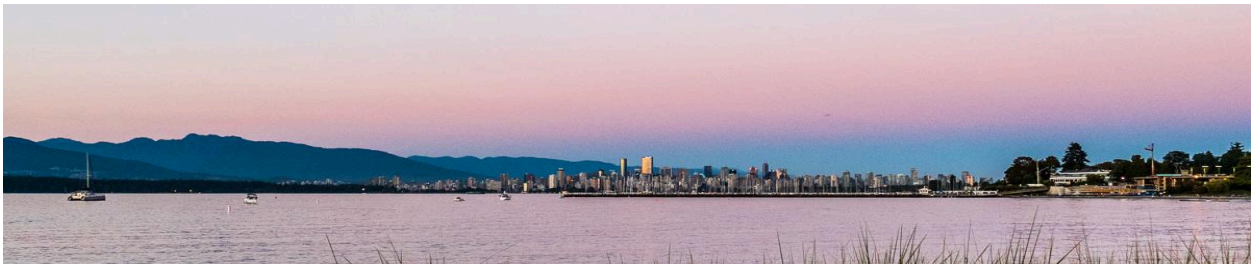
Our profession has been under attack. For some of us, the attack has been direct and personal. Over the past few years, we've seen health misinformation take centre stage. We've seen budget cuts chip away at our acquisitions budget, at our staffing levels and our existence as a profession. For some, the concept of a library itself – a place where accurate, unbiased, scientific information is available to all, without concern about ability to pay – is anathema. We need to work together to ensure that these attacks don't cause lasting damage. We need to be a proud, strong voice in favour of libraries, librarians and library workers and of course, the people who use our libraries every day.

Sometimes, the attack on our profession is more indirect and subtle. Trade uncertainty and a fluctuating dollar make planning acquisitions difficult. Artificial intelligence is becoming more pervasive and sophisticated. As I wrote this in February 2025, I have no idea what things will look like in June. These subtle changes to our global information landscape and the uncertainty they cause damages our collective mental health.

I hope as you consider the continuing education sessions, conference presentations, workshops, posters and our keynote speakers, you will see CHLA-ABSC's ongoing commitment to building a strong future together, through diversity, equity and inclusion, through access to unbiased information on abortion, mental health, gender and sexual diversity, addiction, vaccination, pandemic planning, climate change and any other topics that some may wish to pretend don't exist. I hope you'll find learning that helps you in your career, ensures your voice is heard and gives you strength and hope for the future.

And perhaps above all, I hope you'll make friends. For those of you who have been coming to CHLA-ABSC for years, welcome home. If this is your first time, know you are not alone. There is strength in numbers. We are facing many of the same challenges, frustrations and uncertainties, whether we are academic medical librarians, hospital librarians, public health librarians or our vendor partners. Let's build our future together!

Amanda Ross-White
President,
Canadian Health Libraries Association / Association des bibliothèques de la santé du Canada



Bienvenue de la présidente de l’ABSC

Chers collègues, amis et futurs amis,

Bienvenue à Vancouver, sur la côte Ouest, et à la conférence CHLA-ABSC 2025. C’est un plaisir de vous voir ici rassemblés, prêts à apprendre, à grandir et à continuer de bâtir notre avenir ensemble! Maintenant plus que jamais, nous avons besoin de tisser des liens forts entre professionnels, dans ce réseau qui nous aide à traverser les périodes difficiles.

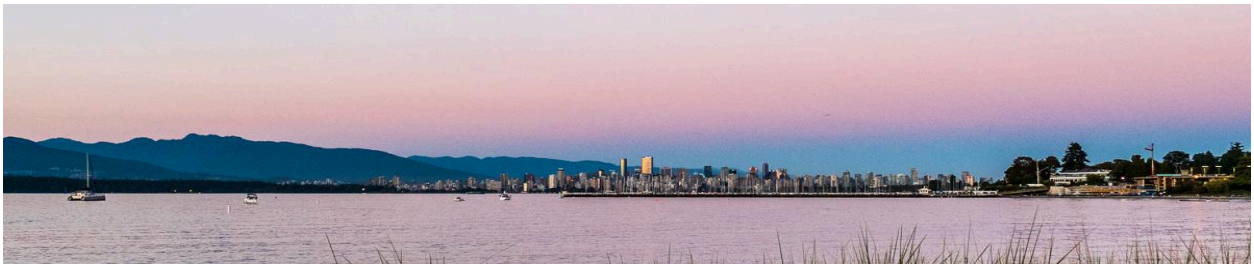
Notre profession est sous attaque. Pour certains d'entre nous, l'attaque a été directe et personnelle. Au cours des dernières années, nous avons vu la désinformation en santé prendre le devant de la scène. Nous avons vu les coupes budgétaires s'attaquer à notre budget d'acquisition, à nos effectifs et à notre existence en tant que profession. Pour certains, le concept même d’une bibliothèque - un lieu où des informations scientifiques exactes et impartiales sont accessibles à tous, sans souci de la capacité à payer - est un anathème. Nous devons travailler ensemble pour veiller à ce que ces attaques ne causent pas de dommages durables. Nous devons former une voix fière et forte en faveur des bibliothèques, des bibliothécaires et du personnel de bibliothèque et, bien sûr, des personnes qui utilisent nos bibliothèques tous les jours.

Parfois, l’attaque contre notre profession est plus indirecte et subtile. L'incertitude commerciale et la fluctuation du dollar rendent difficile la planification des acquisitions. L'intelligence artificielle devient de plus en plus omniprésente et sophistiquée. Au moment où j'écris ces lignes, en février 2025, je n'ai aucune idée de ce à quoi ressembleront les choses en juin. Ces changements subtils dans le paysage mondial de l'information et l'incertitude qu'ils engendrent nuisent à notre santé mentale collective.

J'espère qu'en vous familiarisant avec les sessions de formation continue, les présentations de la conférence, les ateliers, les affiches proposées et nos orateurs principaux, vous verrez l'engagement continu de l'ABSC-CHLA à construire un avenir solide ensemble, par la diversité, l'équité et l'inclusion, par l'accès à des informations impartiales sur l'avortement, la santé mentale, la diversité sexuelle et de genre, la dépendance, la vaccination, la planification des pandémies, le changement climatique et tous les autres sujets que certains voudraient prétendre ne pas exister. J'espère que vous trouverez des informations qui vous aideront dans votre carrière, qui vous permettront de faire valoir votre voix et qui vous donneront de la force et de l'espoir pour l'avenir.

Et surtout, j'espère que vous vous ferez des amis. Pour ceux d'entre vous qui viennent au CHLA-ABSC depuis des années, bienvenue au bercail. Si c'est votre première fois, sachez que vous n'êtes pas seuls. L’union fait la force. Nous sommes confrontés aux mêmes défis, aux mêmes frustrations et aux mêmes incertitudes, que nous soyons bibliothécaires médicaux universitaires, bibliothécaires hospitaliers, bibliothécaires en santé publique ou partenaires fournisseurs. Bâtissons notre avenir ensemble!

Amanda Ross-White
Présidente,
Association des bibliothèques de la santé du Canada / Canadian Health Libraries Association



Conference Planning Committee and Board of Directors

2025 Conference Planning Committee

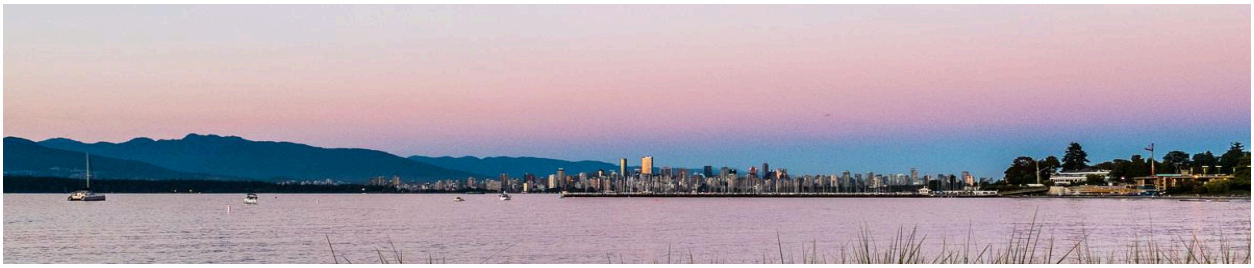
Co-Chairs	Jeff Mason and Patricia Foster
Members	Nicole Askin, Talin Boghosian, Sarah Cairns, Kaitlin Fuller, Marie-Hélène Nicol, Zahra Premji, Vera Spika, Courtney Svab, Linda Yang

2025 Local Assistance Committee

Co-Chairs	Coco Chen and Julia Maunder
Members	Rachel Bradshaw, Nissa Milberger, Vera Spika, Jordan Zanni

2024-2025 CHLA/ABSC Board of Directors

President	Amanda Ross-White
Vice President	Diane Lorenzetti
Past-President	Lance Fox
Secretary	Rachel Couban
Treasurer	Liza Chan
Director, Public Relations	Christine Neilson
Director, Continuing Education	Erin Langman
Appointed Board Members	Partner Relations Officer: Jennifer McKinnel Web Manager: Alexandre Amar-Zifkin



Message from the President of the University of British Columbia

Dear Colleagues,

It is my great pleasure to welcome you to the University of British Columbia for the CHLA/ABSC Annual Conference. We are honoured to welcome you to our beautiful Vancouver campus, which is situated on the traditional, ancestral, and unceded territory of the Musqueam people.

At UBC, we deeply respect the vital work of health information professionals and librarians. Your dedication to advancing access to high-quality health information and library services—through education, research, and collaboration—plays a critical role in strengthening health care, research, and education across Canada. We are grateful for your contributions and for the opportunity to support this important gathering.

As one of the world's leading research universities, UBC is committed to fostering inclusive spaces for the exchange of ideas and the pursuit of knowledge. Conferences such as this one reflect the spirit of collegiality and shared purpose that drive innovation and impact in health and beyond.

On behalf of the UBC community, thank you for the work you do and for choosing to convene here on our campus. I wish you a meaningful and energizing conference experience, and hope you enjoy everything our community and our beautiful city have to offer.

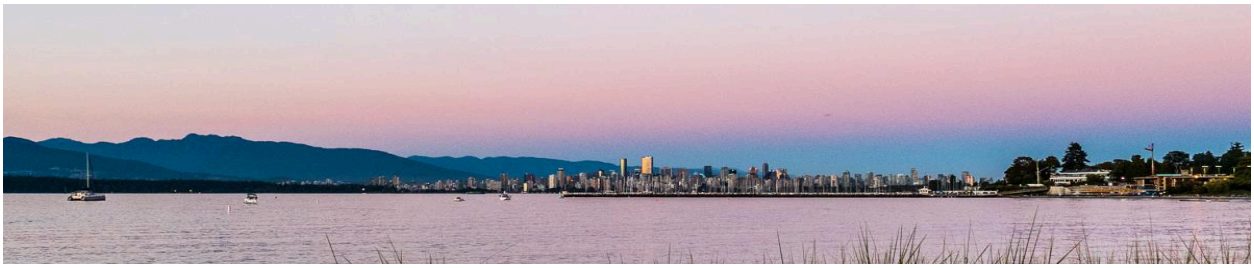
Sincerely,

Benoit-Antoine Bacon

President and Vice-Chancellor

Professor of Psychology

THE UNIVERSITY OF BRITISH COLUMBIA

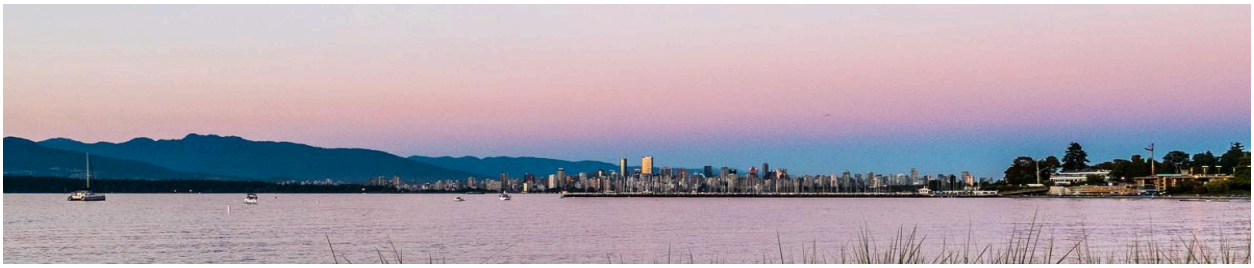


Registration & Hospitality Desk

The registration and hospitality desk is located in the Great Hall Foyer. Come see our friendly staff and volunteers for help answering your questions about registration, the conference program, the hotel, networking events, attractions around Vancouver, the dine-around dinners, and any other questions you may have. We are here to help you find the information you need to make the most of the conference and your stay in Vancouver!

Registration Desk Hours

Tuesday, June 3	8:30 AM – 7:30 PM
Wednesday, June 4	7:30 AM – 5:30 PM
Thursday, June 5	7:30 AM – 6:15 PM
Friday, June 6	7:30 AM – 1:30 PM



Conference Program

Tuesday June 3

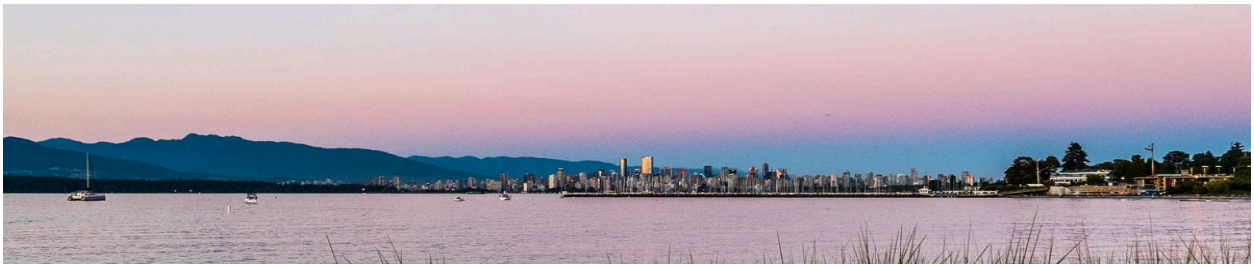
8:30 AM – 7:30 PM	Registration Desk Open & Dine Arounds Sign-Up	Great Hall Foyer
9:30 AM – 12:00 PM	Continuing Education: Disability in the Workplace	Koerner Library - Presentation Room Rms 548/552 & Online
1:00 PM – 4:00 PM	Guided Tour: UBC Farm (Leaves at 12:30 PM)	Great Hall Foyer
1:00 PM – 3:15 PM	Continuing Education: Equity Diversity, and Inclusion: Cultural Awareness and the Intricacies of Allyship	Woodward Library - Sherrington Room
6:00 PM – 7:00 PM	First Timers' Reception	Great Hall Foyer
7:00 PM – 9:00 PM	Opening Reception	Exhibit Hall

Wednesday June 4

6:30 AM – 7:30 AM	Morning Walk with UBC Move U Crew	Great Hall Foyer
7:30 AM – 5:30 PM	Registration Desk Open Dine Arounds Sign-Up (until 1:30 PM)	Great Hall Foyer
8:00 AM – 9:00 AM	Breakfast and Exhibits	Exhibit Hall
8:00 AM – 9:00 AM	Vendor Talks: EBSCO, BMJ, Third Iron, & Wolters Kluwer	Great Hall
9:00 AM – 10:30 AM	Opening Keynote: Dr. Maura Brown	Great Hall
10:30 AM – 11:00 AM	Coffee Break and Exhibits	Exhibit Hall
11:00 AM – 12:30 PM	Concurrent Session: Lightning Talks	2306/2309

Using Scopus for Collections Analysis in Medicine
Kristen Romme

Pirates vs Paywalls: Preliminary Investigation into the Utility of Sci-Hub Download Logs for Identifying Trends in User Behaviour
Emma Garlock



Who's Hot, Who's Not: Changes to Literature Search Requestors Over Time
Vinny Gibson; Shannon Long; Yvette Ipsaralexi

Librarian Roles in Environmental Sustainability: Update of a Strategic Plan
Suzanne Fricke

Supporting Physician Assistant Students: A Search Template for Success
Margaret Banka; Caroline Monnin; Carol Cooke

Data Sharing Practices Amongst Original Research Articles Published in Hybrid vs. OPen Access Medical Librarianship Journals
Eden Kinzel

Towards a More Connected Health Research Ecosystem: A Framework for Interoperable Health Data Commons
Alyssa Foote

Repair Cafe: A Space for Community and Climate Action at UBC's Woodward Library
Rachael Bradshaw

Chapter by Chapter: Book Club Conversations with the CEO
Jeanna Hough

11:00 AM – 12:30 PM Concurrent Session: Workshop 2311

Designing Resilient Library Services: A Workshop on Resilience Engineering for Librarians
Nicole Capdarest-Arest; Lorri Zipperer; Amanda Ross-White

11:00 AM – 12:30 PM Concurrent Session: Contributed Papers 2314

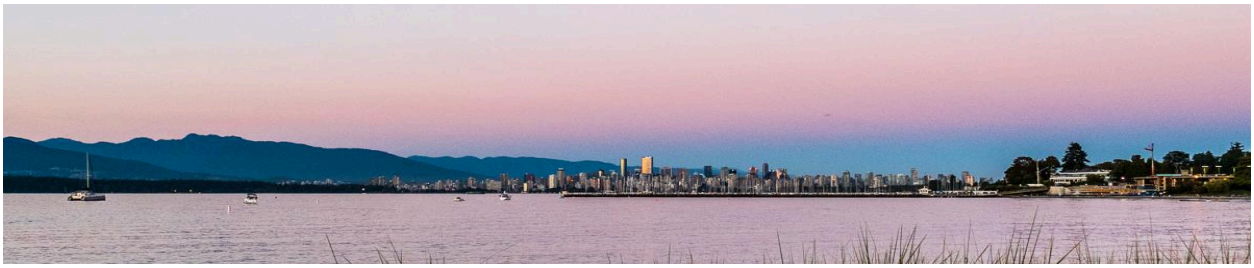
Artificial Intelligence-Supported Screening: Does it Impact Evidence Certainty and Time to Complete a Rapid Review?
Sarah Neil-Sztramko

Anything you can do, AI can do better... Or can it? Comparing ChatGPT's Search Strategy Outputs with Cochrane Review Searches
Emily Jones; Rebecca Carlson

AI Research Assistants and Cochrane Reviews: A Comparative Analysis of Scientific Summaries
Catherine Boden

Evaluating the Performance of Broad and Narrow Search Strategies When Using Machine Learning-Based Software for Title/Abstract Screening
Michelle Swab

12:30 PM – 1:30 PM Lunch and Exhibits Exhibit Hall



1:30 PM – 3:00 PM	Concurrent Session: Lightning Talks & Contributed Papers	2306/2309

Lightning Talk: Integrating Indigenous Ways of Knowing with Citation Guidelines in Canadian Health Sciences Libraries: An Environmental Scan
Margaret Banka

Lightning Talk: How student librarians can support Indigenous health knowledge translation: A Program Proposal
Caprice Pybus

Lightning Talk: Reparative Description and Classification in Medical Libraries
Melissa Caines; Erin Brady-Randle

Paper: Invisible in the Index: How Medline Indexing Excludes Intersex People
Eleni Philippopoulos

Paper: Making the Case for Play In Your Library
Glyneva Bradley-Ridout

1:30 PM – 3:00 PM	Concurrent Session: Workshop	2311

Designing Instructional Strategies for Teaching Effective Use of AI Search Engines
Kaitlin Fuller; Erica Nekolaichuk

1:30 PM – 3:00 PM	Concurrent Session: Contributed Papers	2314

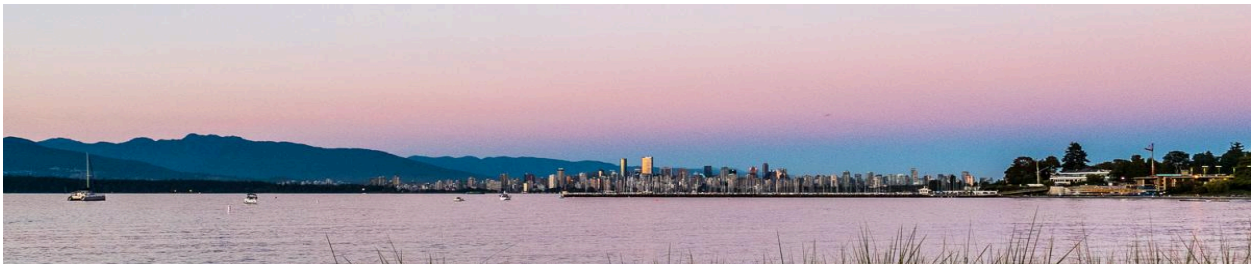
Where Did the Reviews Go?: The Good, the Bad, and the Unfinished
Talin Boghosian; Zack Osborne

Search Strategies as Research Data: New Perspectives on Documentation and Sharing Practices
Sabine Calleja

A Scoping Review Case Study of Citation Searching Indexes and Tools
Colleen Pawliuk

Promoting the use of Synthesized Evidence in Public Health Decision Making: A Rapid Evidence Service and Repository of Public Health Evidence Syntheses
Sarah Neil-Sztramko

3:00 PM – 3:30 PM	Coffee Break and Exhibits	Exhibit Hall



3:30 PM – 5:00 PM	Concurrent Session: Contributed Paper & Panel	2306/2309

Paper: Critiquing systematic review search methods in the Cass Review: developing a comprehensive checklist
Elizabeth Yates; Elizabeth Sanders

Panel: Developing, Validating, and Using Search Filters to Retrieve Evidence Related to Specific Populations
Robin Parker

3:30 PM – 5:00 PM	Concurrent Session: Workshop	2311

Contextualizing Generative AI Tools and Academic Integrity in Health Research Literacy
Jane Jun; Talia Greene; Rina Chua

3:30 PM – 5:00 PM	Concurrent Session: Contributed Papers	2314

Stronger Together: Adventures in Instruction and Resource Sharing to Cultivate Aspiring Nursing Students
Marilia Antunez; Christa Taylor

The Development of a Freely Available Module Series Introducing Researchers to all Stages of the Systematic Review Process
Sandra McKeown

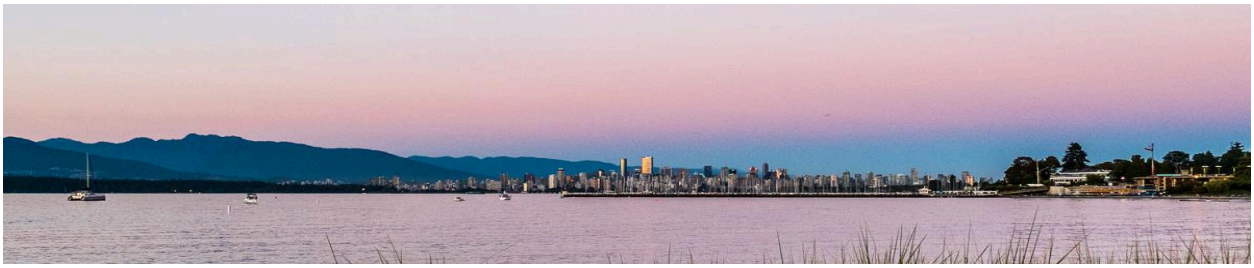
Developing a Scaffolded Learning Framework for Librarians New to Health Sciences
Melissa Helwig; Zahra Kamarei

Rooted in Competence: Using the MLA Professional Competencies to Redesign a Health Information Course
Colleen Pawliuk

6:00 PM – 8:00 PM	Dine Arounds (meet at 5:30 PM)	Great Hall Foyer

Thursday June 5

7:30 AM – 6:15 PM	Registration Desk Open	Great Hall Foyer
8:00 AM – 9:00 AM	Breakfast and Exhibits	Exhibit Hall
8:00 AM – 9:00 AM	Vendor Talks: Taylor and Francis, Clarivate, and Elsevier	Great Hall



9:00 AM – 10:30 AM	Plenary Session: Partnering for the Future: How AI is Reshaping Health Research, Publishing, and Libraries	Great Hall
10:30 AM – 11:00 AM	Coffee Break and Exhibits	Exhibit Hall
11:00 AM – 12:30 PM	Concurrent Session: Lightning Talks	2306/2309

Documenting the Shift: How Researchers Report Generative AI in Search Methodologies for Evidence Synthesis
Zahra Premji; Kaitlin Fuller; Erica Nekoliachuk

Development of a Full-Text Search Strategy for CMAJ's Scoping Review on Content About First Nations, Inuit and Métis People and Anti-Indigenous Racism
Nan Bai

Compounding Drugs Data: Introducing a Drug Terms Tool for Knowledge Synthesis Projects
Tyler Ostapyk

The Check Tag Cliff: A Rapid Evaluation of Check Tags Over Time in Medline
Nicole Askin

Cleaning Up Duplicate Clinical Trial Records Like a Pro
Zahra Premji

Building a Better Future Together by Assessing our Evidence Synthesis Service
Laurel Scheinfeld

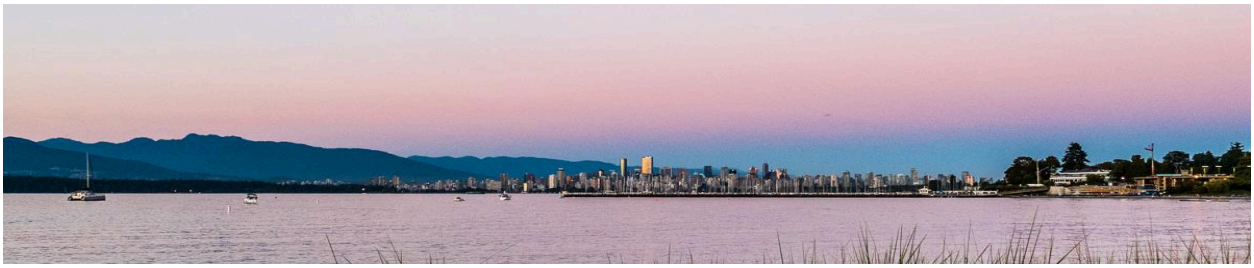
Lack of Involvement of Medical Librarians/Information Specialists in Systematic Reviews Submitted to a High-Ranking Medical Journal: Insights from an Editorial Board Member & Reviewer
Yuhong Yuan

11:00 AM – 12:30 PM	Concurrent Session: Workshop	2311

Data for Decision Making: What Data do Information Professionals need for Effective Service Delivery, Advocacy, Planning and Professional Development?
Minakshi Sharma

11:00 AM – 12:30 PM	Concurrent Session: Contributed Paper & Roundtable Session	2314

Paper: The Book Nook: Creating a Leisure Reading Space for Staff and Learners at Three Hospital Library Sites
Ashley Farrell; Brianna Glaizer



Roundtable Session: Birds of a Feather: Strategies, Challenges, and Lessons Learned in Proactive Outreach in Hospital Libraries
Talin Boghosian; Sadaf Ullah

12:30 PM – 1:30 PM	Lunch and Exhibits	Exhibit Hall
12:30 PM – 1:30 PM	Chapter Presidents' Lunch	Woodward Library - Sherrington Room
1:30 PM – 3:00 PM	Concurrent Session: Contributed Papers	2306/2309

The Involvement of Librarians and Library Technicians in Knowledge Syntheses Published by Researchers from Quebec Universities: An Overview
Monique Clar

A Scoping Review of Automated Indexing in Medline – How Did We Get Here?
Alexandre Amar-Zifkin

Investigating the Impact of the NLM Automatic Indexer on Information Retrieval Using Citation Metadata
Emma Garlock

Optimizing Communication and Data Collection for a Systematic Review Team Using Microsoft Power Automate®
Emily Jones; Rebecca Carlson

1:30 PM – 3:00 PM	Concurrent Session: Workshop	2311

Getting Comfortable with Context: An Introductory Qualitative Research Methods Workshop
Robin Parker

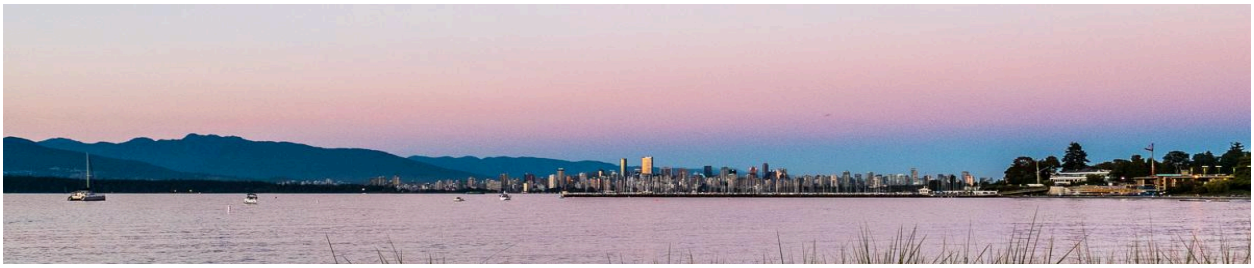
1:30 PM – 2:30 PM	Concurrent Session: Special Session	2314

Advocacy and Decision-Making in Health Libraries
Jennifer McKinnell

3:00 PM – 3:30 PM	Coffee Break and Exhibits	Exhibit Hall
3:30 PM – 4:30 PM	Poster Showcase	Great Hall Foyer

A Fork in the Road: Machine Learning Classifier or Methodological Search Filter to Identify Systematic Reviews?
Melissa Severn; Romney Adams; Alissa Epworth

A Review of Library Services and Supports for the University of Prince Edward Island's (UPEI) Growing One Health Programs
Keri McCaffrey; Kim Mears



Building a Healthier Alaska: Connecting Alaskans to Essential Resources through the Alaska Medical Library
Anna Bjartmarsdottir; Jennifer McKay

Dispensing Research Skills: Enhancing PharmD Students' Evidence-Based Practice
Caitlin Carter

Distributed Librarianship: Supporting UBC's Rehabilitation Students Across BC
Rachel Bradshaw; Zahra Premji; Aubrey Geyer

Effect of Citation Numbers and Team Members on the Likelihood of and Time Needed to Complete Screening for Systematic and Scoping Reviews
Emily Jones; Rebecca Carlson

Finding the S (Studies) Before the R (Reports) in SRs of Intervention Effects
Zahra Premji

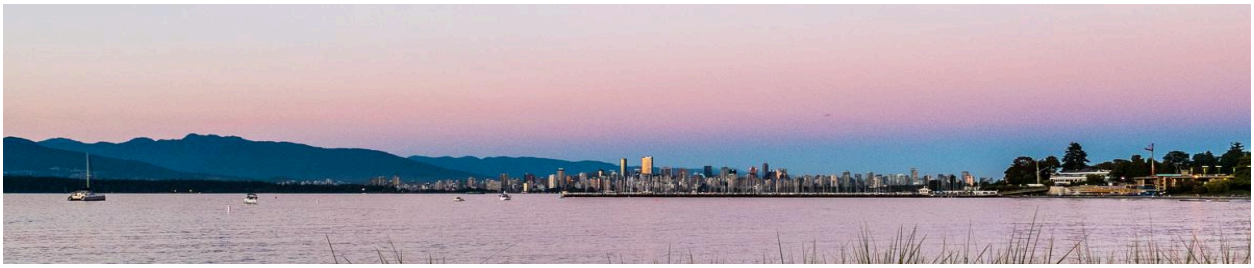
Library of Search Strategy Resources (LSSR): Bringing Together Search Resources for Literature Searching
Mark Mueller

Obtaining Grants in Health Sciences Librarianship: Advice, Approach, and Strategies for Librarian Researchers
Amanda Ross-White; Alla Iansavitchene

Still a Filtering Failure? Automated Indexing Using Mtix Versus Mtia and its Impact on Human Study Filtering for Knowledge Synthesis
Nicole Askin; Carla Epp; Tyler Ostapyk

How on EARTH do you Assess Risk of Bias in Information Retrieval Studies? We Didn't Know Either, So We Drafted a Tool
Zahra Premji

4:30 PM – 5:30 PM	Special Interest Group Meetings	2311
6:00 PM – 8:00 PM	Awards Banquet	Great Hall



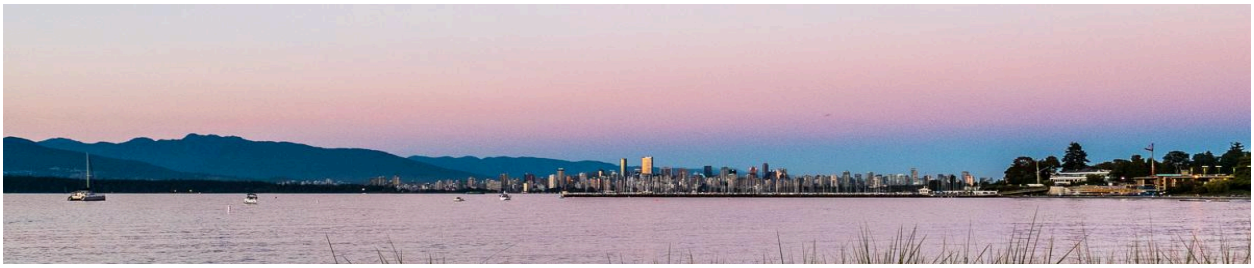
Friday June 6

7:30 AM – 1:30 PM	Registration Desk Open	Great Hall Foyer
8:00 AM – 9:00 PM	Breakfast and Exhibits	Exhibit Hall
9:00 AM – 10:30 AM	Session: Contributed Paper & Panel	Great Hall

Paper: Assessing the Canadian Digital Health Landscape: Opportunities for Improved Data Sharing and Research
Alyssa Foote

Panel: Advancing Health Research in Canada Through Open Science
Alyssa Foote

10:30 AM – 11:00 PM	Coffee Break and Exhibits	Exhibit Hall
11:00 AM – 12:30 PM	Closing Keynote: Dr. Devon Greyson	Great Hall
12:30 PM – 1:00 PM	Closing remarks and 2026 presentation	Great Hall
2:00 PM - 4:00 PM	Self-Guided Tour: Museum of Anthropology (Leaves at 1:45 PM)	Great Hall Foyer



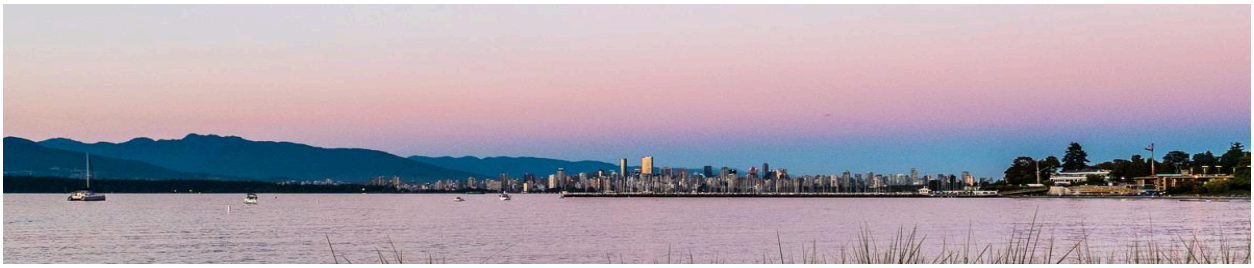
Keynote Speaker Biographies

Maura Brown

Maura Brown MD MHA is a diagnostic radiologist at BC Cancer, Vancouver and Clinical Associate Professor University of British Columbia. A lifelong enjoyment of the outdoors and love for all living things led to her interest in climate change, biodiversity loss and the associated risks to human health. She is dedicated to engaging others in reducing emissions and waste in healthcare, with a focus on radiology. Dr Brown chairs the BC Radiologic Society Sustainable Medical Imaging working group, co-chairs the Canadian Association of Radiology (CAR) Sustainability working group and co-chairs the provincial BC Cancer Planetary Health Unit. She is a member of Radiologists for a Sustainable Future (R4SF), the Association of Academic Radiologists (AAR) Sustainability working group and the Canadian Association of Physicians for the Environment (CAPE).

Devon Greyson

Devon Greyson (PhD, MLIS) is an Assistant Professor at the University of British Columbia School of Population and Public Health, an Investigator at the Vaccine Evaluation Center at BC Children's Hospital Research Institute, a Michael Smith Health Research BC Scholar, and the CIHR/PHAC Applied Public Health Chair in Building trusted population health information systems and interventions. Dr. Greyson is a health information scientist who applies qualitative, multiple, and mixed methods to understand health information behaviour and to assess effectiveness of population health information interventions. Their current research focuses largely on vaccination, including improving vaccine communication and vaccine safety and coverage surveillance. Prior to establishing this program of research, Devon worked in shelters, co-operatives, in music, public, and academic libraries, and as a research-embedded health librarian.

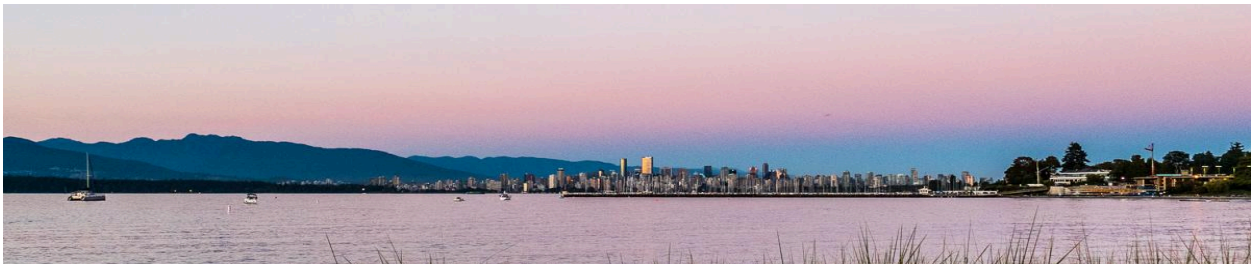


Plenary Session

Partnering for the Future: How AI is Reshaping Health Research, Publishing, and Libraries

Curious about how artificial intelligence is transforming the world of health research and publishing—and what it means for your work in health libraries? Join us for a dynamic panel discussion featuring leaders from Clarivate, Elsevier, and Covidence as they share insider perspectives on how AI is reshaping their organizations, products, and services.

This session goes beyond the buzzwords to explore real-world applications of AI, the evolving role of libraries, and how we can collaborate across sectors to shape an AI-enabled future that supports researchers, learners, and library workers alike. Whether you're excited, skeptical, or just curious about AI, this is your chance to engage with industry voices and bring your questions to the table.

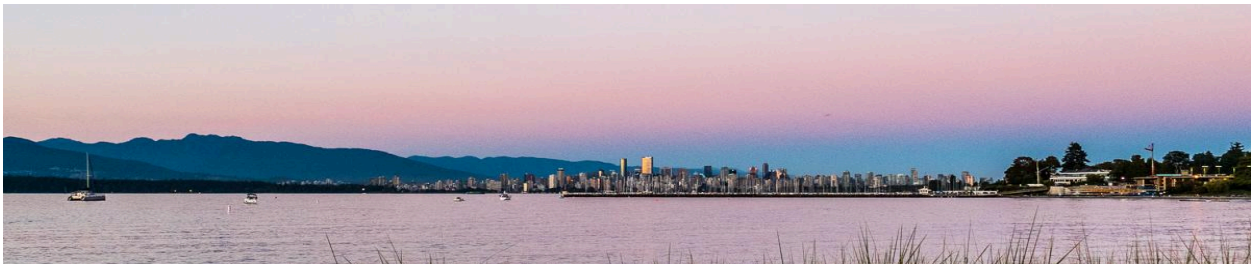


NEJM AI on Ovid - The future of healthcare with Artificial Intelligence

Discover AI's role in enhancing patient care, clinical improvements, and operational efficiency.

Come see us at CHLA 2025 - Booth #1!

Wolters Kluwer



Abstracts

Wednesday June 4, 2025

11:00 AM - 12:30 PM

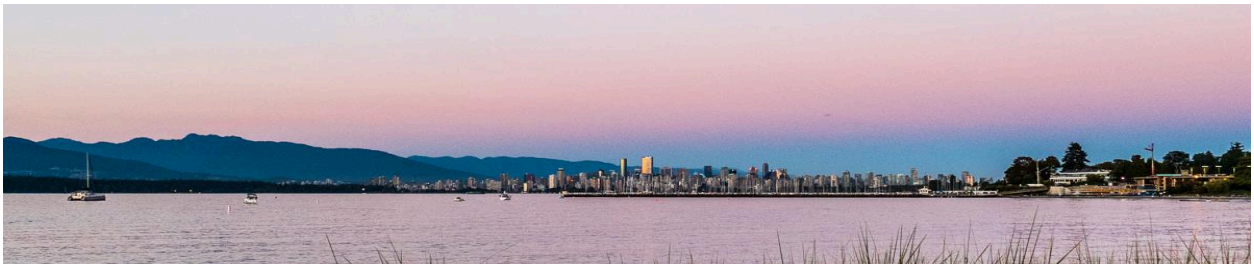
Lightning Talks - Room 2306/2309

Using Scopus for collections analysis in medicine
Kristen Romme
Memorial University of Newfoundland

Introduction: The aim of this study is to assess the utility of Scopus for learning more about the citing and publishing habits of faculty members in Medicine. **Methods:** I used Scopus to search for publications by Faculty of Medicine authors at my institution that were published between 2022-2024. I exported the bibliographic details for those publications, as well as the cited references. I am analyzing the data to learn the journals most frequently published in and cited, and the percentage of open access publications. I will then compare those findings with our existing collections to assess how well we are meeting faculty needs when it comes to research literature. **Results:** Preliminary results demonstrate that Scopus provides quick and relatively easy access to high-level insights about the sources published in and cited by faculty in Medicine. Coverage of journals and book chapters is excellent, but some Canadian journals and locally published documents are not indexed, along with some other sources. **Discussion:** Results from this study demonstrate that Scopus is a useful tool for simple collections analysis, and that it provides relatively thorough (though incomplete) coverage of the research output of our medical faculty. Future findings will reveal the relevance and usefulness of the Health Sciences Library collection for one of our key user groups. Findings may have implications for future collections decisions.

Pirates vs paywalls: preliminary investigation into the utility of Sci-Hub download logs for identifying trends in user behaviour
Emma S. Garlock
University of Ottawa

Introduction: Sci-Hub is a well-known pirate repository that allows users to circumvent paywalls and download academic articles relating to various health sciences and STEM subjects. While Sci-Hub may increase access to information in a timely manner and may flag issues in established publishing practices, there are ethical, legal and security risks associated with the platform's use. This research uses data made public by Sci-Hub to better understand Canadian Sci-Hub user behaviour, which can help inform potential approaches for discussing Sci-Hub usage with users in need of health sciences and biomedical information. **Methods:** This research analyzed the Sci-Hub download log for 2017. IP information was used to identify Canadian downloads. Other information analyzed includes the date of download, user city, and DOI of the accessed article.



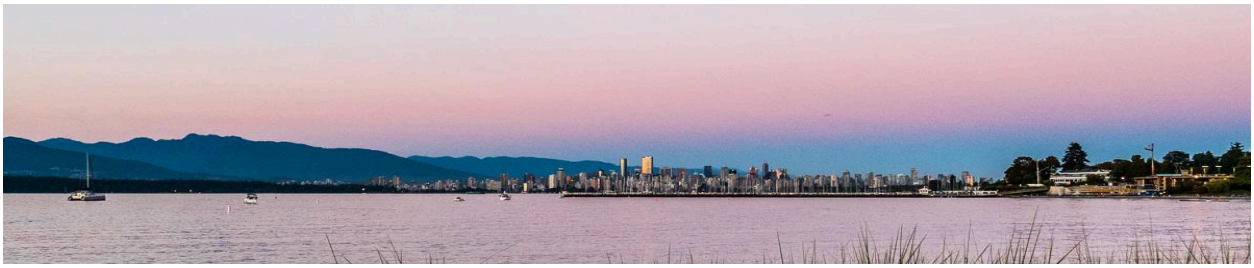
The DOIs of top articles were loaded into Zotero to retrieve publication dates and titles for further analysis. **Results:** Results will showcase top Canadian cities for Sci-Hub use, temporal trends for 2017, and bibliographic information of frequently accessed articles. **Discussion:** This research provides some of the first data-driven insights into Sci-Hub user behaviour in a Canadian context. Currently, only the 2017 data is publicly available, but Sci-Hub is clear about its intentions to make full download logs available in the future. The preliminary analyses shown here provide a blueprint for others who may be interested in conducting their own analyses on Sci-Hub usage in their own contexts.

Who's hot, who's not: changes to literature search requestors over time
Shannon Long, Vinny Gibson, Yvette Ipsaralexi
Vancouver Coastal Health

Objective: Health authority and hospital library services have long supported clinicians with evidence-informed decision-making and patient care decisions. In healthcare organizations this most often comes in the form of literature searching. In the past, hospital libraries often focused on physicians at a local acute site or small regional area, while different staff may have relied on library services provided by their professional associations. With the evolution of full-service regional library teams serving patrons across the entire continuum of care, increased movement toward online services and point of care tools, coupled with changes in healthcare staff makeup, has the primary clientele for library's literature search service changed? **Methods:** For ten years, library staff within our large regional health authority have systematically recorded information about patrons requesting literature searches. This includes job title, department, and category (frontline clinicians, physicians/surgeons/psychiatrists, educators/leaders, management/operations and corporate level). By collating and summarizing entries of user categories each year, we seek to identify annual trends and determine if there have been any significant changes in patron categories over a ten-year period. **Results:** In progress. **Conclusion:** By analyzing this data, we aim to answer some of the following questions: have literature search requestors' job categories changed over ten years? Is there a clear trend? Is it worthwhile to collect this data, and does it provide valuable information, given the time and processes required? By reviewing these findings we hope to use the results to inform the library's service planning, marketing, outreach, training, and collections.

Librarian roles in environmental sustainability: update of a strategic plan
Suzanne Fricke
Washington State University

Program Introduction: Health Science academic programs are increasingly seeking to integrate environmental sustainability into their curricula and core principles. This presentation explores how librarians can contribute effectively to this initiative. **Description:** A community-based medical school with a mission to serve rural health aimed to embed environmental sustainability values and practices into its strategic plan. This broad concept encompasses climate resilience, equity, and local practices and purchases. Faculty began reviewing approaches taken by other

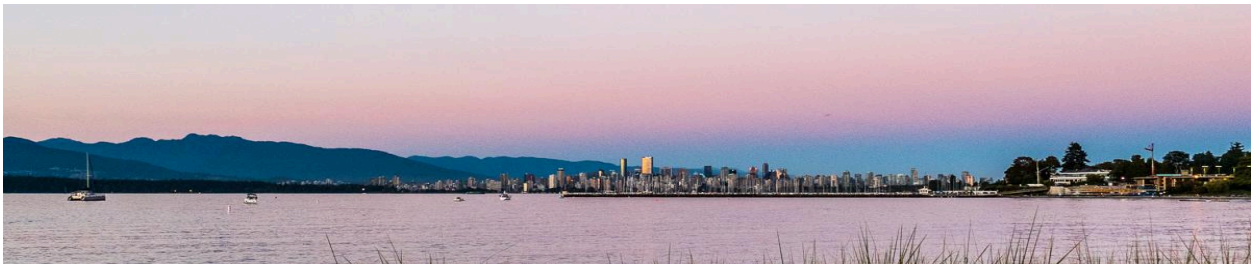


institutions, however the college found that it needed to align its plan with the broader health science campus and the larger multi-campus public university system. Recognizing that the project's goals required evidence synthesis, the medical library proactively offered support. **Outcomes:** The medical librarian collaborated with a faculty member to complete a search for organizational standards, existing plans at comparable institutions, and scholarly publications about environmental sustainability in medical school goal setting. The team utilized an artificial intelligence assistant in part to align with broader campus and institution plans. Key environmental performance indicators identified in the review will be presented internally to inform gap analysis and benchmarking. Discussion: Evidence synthesis projects that inform internal decision-making processes enable the library to demonstrate its value to the community and highlight the range of services it can offer to health science faculty.

Supporting physician assistant students: a search template for success

Margaret Banka, Caroline Monnin, Carol Cooke
University of Manitoba

Introduction: Physician assistant (PA) students present unique challenges and opportunities for support in a health sciences academic library. This cohort often comprises of learners with diverse educational backgrounds, ranging from undergraduate to advanced degrees. In Fall 2024, the University of Manitoba physician assistant program significantly expanded, doubling its enrollment. As part of their academic journey, every student must complete a capstone project, which requires meeting with a librarian to support an in-depth literature review. To meet this growing demand and enhance the effectiveness of librarian consultations, a search template form was developed. **Description:** The search template was designed as a step-by-step worksheet to provide help in developing a search in a health sciences database. The template discusses the important components of the search strategy, including concepts, keywords, controlled vocabulary, database syntax, and links to external resources at every step. **Outcomes:** This tool was distributed to PA students prior to the librarian consultation to provide a structured guide for building complex searches in health sciences databases. The aim was not only to equip students with essential skills for conducting systematic searches but also to facilitate more productive consultations with librarians by creating a shared framework for discussions. With the increase in students and diminished librarian capacity, the template became instrumental to adequately supporting this program. **Discussion:** In this presentation, we will share how the search template form has been integrated into our instructional and consultation practices, providing tailored support to physician assistant students as they navigate the complexities of their capstone projects.



Data sharing practices amongst original research articles published in hybrid vs open access medical librarianship journals

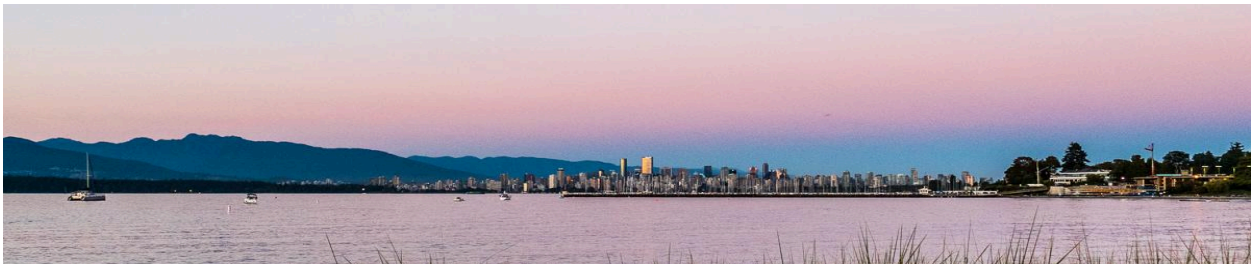
Eden A. Kinzel
University of Toronto

Introduction: As the open access (OA) movement progresses, more attention is being shifted not just to the article's availability but also the availability of data used or produced by the article; especially considering the persistence of the reproducibility crisis. Another concern might be if there is a difference in data sharing practices between articles published in hybrid journals as compared to open access journals. **Methods:** 322 research articles published between 2021 through 2024 in six medical librarianship journals (three hybrid and three open access) were analyzed. Though all articles categorized in the original/featured/research article sections were initially included in the sample, only the 200 articles which conducted data analysis were analyzed fully (program descriptions and other narrative articles were excluded). **Results:** Data availability statements were present in 56% of articles (29% of hybrid articles and 74% of OA articles) and data collection was reproducible in 55% of articles (47% hybrid, 60% OA). 30% of articles shared raw data (13% hybrid, 41% OA). When data was shared, 51% of articles analyzed shared within the appendix (38% hybrid, 60% OA), 21% within OSF (15% hybrid, 25% OA), and 14% within an institutional repository (8% hybrid, 18% OA). **Discussion:** The presentation intends to discuss differences in data sharing practices between articles published in hybrid vs open access medical librarianship journals. Results of this lightning talk may inform researchers' information retrieval practices when searching for datasets to analyze or projects to reproduce.

Towards a more connected health research ecosystem: a framework for interoperable health data commons

Alyssa Foote
World Data System

The Research Data Alliance (RDA) is a global network of experts that fosters collaboration on key data-related challenges, such as interoperability. The Global Open Research Commons (GORC) model is one example that provides a high-level framework for interoperability across diverse research commons. This presentation will introduce the Health Data Commons GORC Profile Working Group, which aims to adapt the GORC model for health data commons (HDCs). By developing a standardized metadata schema, this work will enhance the findability, accessibility, interoperability, and reusability (FAIR principles) of health data, ultimately supporting researchers, clinicians, and improving patient care. This work has the potential to significantly impact the health research ecosystem, including the vital role health librarians play in supporting data-driven research. This presentation will provide an overview of the working group's objectives and progress, and discuss the potential implications of this work for the future of health data sharing and discovery.

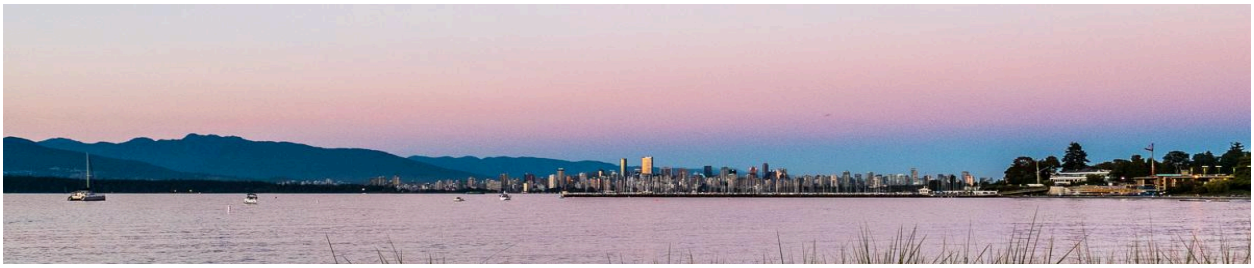


Repair cafe: a space for community and climate action at UBC's Woodward Library
Rachael Bradshaw
University of British Columbia

While health libraries are known as places of learning for faculty and students in science and medicine, they can also be spaces for bonding and skill sharing for all community members who use the library. UBC's Woodward Library embodied this mentality in November 2024 and February 2025, when we hosted our Repair Cafes. Hosted by UBC Library's Library Climate Action Team as programs associated with British Columbia Library Association's Climate Action Week and UBC's Climate Emergency Week events, the repair cafes were spaces in which students, staff, faculty, and community members were welcomed to bring broken electronics and clothing items and learn to repair them. The intention behind this initiative was not only to provide a repair service, but to encourage participants to learn to do their own repairs, empowering them to make more sustainable choices in the future. Drawing on local talent, volunteers were on hand to assist participants with hand and machine sewing, darning, and repair of small electronics. While attendees waited for their turn at the repair table, they were able to make reusable beeswax food wraps, attempt a climate-themed Lego challenge, check out a mending book display, or have a free treat. This lighting talk will discuss the benefits we saw from this event and the challenges we encountered. It will conclude with a brief discussion of how community engagement events related to collaborative learning and climate change fit in with the ethos of health and science academic libraries.

Chapter by chapter: book club conversations with the CEO
Jeanna Hough
Halton Healthcare

Introduction: The Clinical Librarian, CEO, and Leadership Institute partnered to create a bi-annual book club that fosters collaboration, leadership development, and organizational growth. Description: This innovative biannual book club brings together the hospital librarian, CEO, and a small group of staff, sponsored by the Leadership Institute to explore critical topics at the intersection of leadership, information literacy, and diversity, equity, and inclusion (DEI). Each session features a carefully selected book that challenges perspectives, inspires dialogue, and promotes personal and professional growth. Guided by the CEO's strategic vision and facilitated by the librarian's expertise, participants engage in thought-provoking discussions that enhance leadership skills, foster inclusivity, and empower informed decision-making. This collaborative initiative cultivates a learning community, aligning organizational goals to build stronger connections across our hospital teams, transforming reading into a catalyst for impactful change. **Outcomes:** The inaugural test year of the book club covered two books across winter and fall sessions, with a total of four meetings. Initially offering one session per season, participant demand was so high that slots filled within minutes, prompting the addition of more sessions. **Discussion:** Given its success, the book club is now permanent, with plans to expand across all three hospital sites while remaining in-person. Participant feedback has been extremely positive, highlighting the value of meaningful discussions, leadership growth, and the connections fostered through the program. This strong foundation sets the stage for continued impact and



broader engagement. The program has enhanced the Library's visibility hospital-wide and is forging new connections for the Librarian across all levels of the organization.

Workshop - *Room 2311*

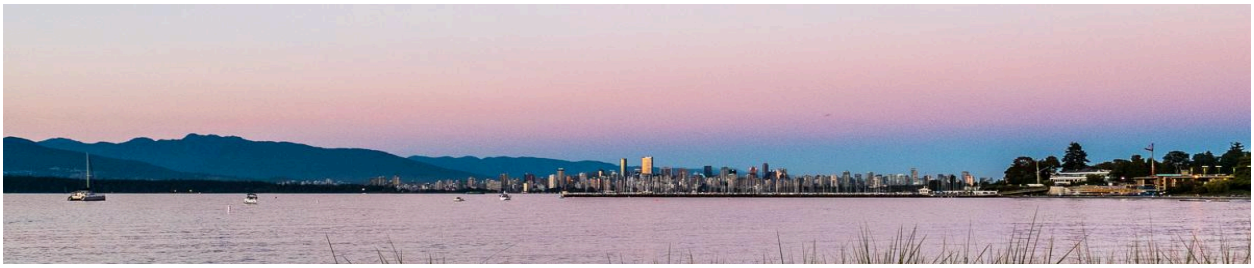
Designing Resilient Library Services: A Workshop on Resilience Engineering for Librarians
Lorri Zipperer[1], Amanda Ross-White[2], Nicole Capdarest-Arest[1]
[1]University of California Davis, [2]Queen's University

Topic: Resilience engineering (RE) offers a powerful framework for designing processes that enable organizations to respond effectively to and learn from large-scale disruptions such as system outages, funding loss, natural disasters, and unexpected leadership transitions. While resilience is often viewed as a personal trait, resilience takes on new significance in RE's systems approach, emphasizing the critical need for organizational-level resilience. This perspective is particularly relevant to libraries, whose operations and services are pivotal to institutional adaptability and sustainability. This 90-minute interactive workshop will introduce participants to the principles of RE, exploring how its application can empower librarians to strengthen organizational resilience. Through real-world examples and participatory activities, attendees will gain practical strategies for integrating RE concepts into their daily work, highlighting how information work serves as a foundation for bolstering resilience at both the library and organizational levels. **Summary of Workshop Objectives:** Participants will leave this workshop with the knowledge to apply resilience engineering principles to enhance library services, develop strategies for building organizational resilience, and advocate for the evolving role of librarians in times of disruption. **Short Description of Interactivity:** Participants will engage in hands-on, practical case studies designed to help them translate RE concepts into realistic scenarios, applying the concept to library services and broader organizational functions.

Contributed Papers - *Room 2314*

Artificial intelligence-supported screening: does it impact evidence certainty and time to complete a rapid review?
Sarah Neil-Sztramko[12], Robyn Traynor[2], Emily Clark[2], Elaine Toomey[3], Maureen Dobbins[12]
[1]McMaster University, [2]National Collaborating Centre for Methods and Tools, [3]University of Galway

Introduction: The National Collaborating Centre for Methods and Tools (NCCMT) established its Rapid Evidence Service (RES) to support evidence-informed public health by conducting timely, rapid reviews on priority topics. Artificial intelligence (AI) screening features offer the potential to automate and expedite the review process, while reducing unintended human biases or errors, but there is limited evidence to quantify this impact. This study aims to evaluate how AI compares to manual screening with respect to missed studies, impact on overall review findings, and time to complete. **Methods:** Two AI features, Re-Rank and Check Screening Errors, were

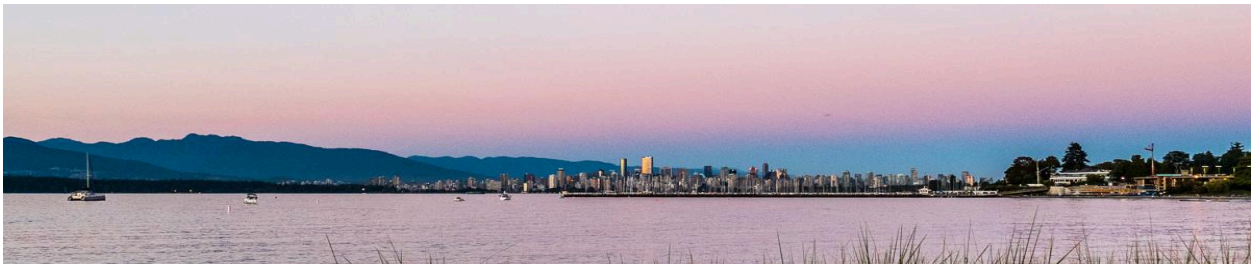


compared to manual dual screening during title and abstract screening (DistillerSR, v2.35). As screening occurred in each review, project clones were made at likelihood thresholds of 60-95%, AI screened remaining references, and potential false excludes were identified. These AI-screened results were compared with manual screening in the original projects to identify how many studies would have been missed at each threshold. The impact of omitting missed studies on the review's key findings was assessed. Finally, time spent screening was tracked across reviews. **Results:** Six rapid reviews were conducted during the study period. In preliminary data analysis, AI correctly excluded up to 60% (2600 out of 4100 studies) at a prediction threshold as low as 80% in one review; time spent screening was 47 hours. **Discussion:** AI is a promising support tool for improving screening efficiency and accuracy. Additional study is needed to understand how AI can be most appropriately integrated into rapid review methods.

Anything you can do, AI can do better... Or can it? Comparing ChatGPT's search strategy outputs with Cochrane Review searches

Emily Jones, Rebecca Carlson
University of North Carolina

Objective: Previous studies have measured ChatGPT’s capabilities for completing literature search tasks. This study seeks to assess ChatGPT’s capability to produce comprehensive search strategies for systematic reviews, specifically comparing AI-generated outputs against published Cochrane review searches for precision and recall.
Methods: We created a test set of 9 PubMed search strategies from recent Cochrane. A script was created and ChatGPT was queried using each Cochrane review topic, research question(s), and inclusion criteria to generate a relevant PubMed search strategy. Precision and recall were measured using the Cochrane reviews’ PubMed search strategies and included articles as the standard and ChatGPT searches were evaluated using PRESS.
Results: GenAI search strategies had lower recall and lower precision on average when compared to Cochrane search strategies. The GenAI search strategies had an average recall of 57.6% (ranging from 0% to 100%) and an average precision of 1.51% (ranging from 0% to 4.17%), while the Cochrane search strategies had an average recall of 93.7% and an average precision of 2.39%. PRESS evaluations revealed errors including hallucinated MeSH terms and issues with keywords. The results indicate that ChatGPT could be used to help develop comprehensive literature search strategies for systematic reviews, but not without librarian oversight.
Conclusion: Results of this project provide a current estimation of whether, and to what extent, ChatGPT could be used to develop literature search strategies for systematic reviews. This project adds to the literature on GenAI uses for systematic reviews and informs librarians of the potential of these tools for comprehensive literature search development.

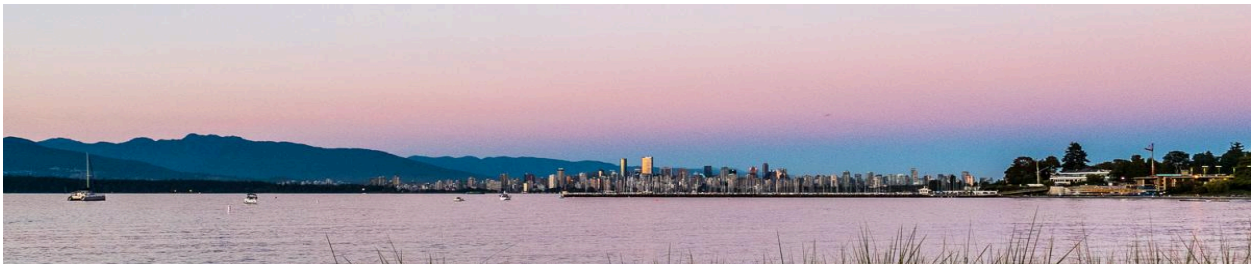


AI research assistants and Cochrane reviews: a comparative analysis of scientific summaries
Catherine Boden, Erin Langman
University of Saskatchewan

Introduction: There has been a recent explosion of AI-powered research assistants designed to find and summarize scientific literature. These nascent tools require evaluation to foster critical thinking about their use and to inform improvements. This study compares AI-generated syntheses of the literature to the conclusions of Cochrane systematic reviews of the same clinical questions. **Methods**: Cochrane systematic reviews (SRs) of exercise with published March 2024 to 2025 were selected. Four AI-powered research assistants (AI tools) and Copilot were queried using the SR research questions. The following data from the SRs and the AI tool summaries was extracted independently by the two researchers, with disagreements resolved through consensus: the number, study design, and citations of included articles, assessment of quality or risk of bias (if available), and conclusions regarding the intervention(s). Agreement between SRs and AI tools will be assessed by coding conclusions as agreeing, disagreeing, or unclear. Descriptive statistics will be used to compare the literature cite for the conclusion or summary. **Results**: Data analysis is underway. **Discussion**: This analysis will inform our understanding of the accuracy, reliability and reproducibility of these AI research assistant tools.

Evaluating the performance of broad and narrow search strategies when using machine learning-based software for title/abstract screening
Michelle Swab
Memorial University

Introduction: A number of machine learning tools have been developed to enhance the efficiency of title/abstract screening in review projects. While guidance articles suggest these tools make broader, high-yield searches more feasible by saving time, the actual performance of sensitive (broad) versus precise (narrow) search strategies in this context remains under explored. **Methods:** Using ASReview, an open-source systematic review tool, I evaluated search strategy performance in a sample of completed reviews. For each, one database search was selected and revised to broaden (n = 9) or narrow (n = 1) its scope. Search results were labeled as relevant or irrelevant based on each review's included articles. These labeled sets were uploaded into ASReview's simulation module. Performance was assessed using metrics such as time to achieve true recall at 0.95. **Results:** To reach a true recall of ≥0.95, broader searches increased screening time by 10–875%, with a median increase of 25%. Systematic reviews had a smaller median increase (18%) compared to other review types (374%). At a rate of one record per minute, the added time to reach this level of recall ranged from 0.4 to 35.1 hours (median: 1.8 hours). In two cases, machine learning screening with broader searches took longer than the full manual screening of the narrower result set. **Discussion:** These findings suggest efficiencies associated with machine learning tools do not always offset the extra screening time required by broader searches. In this case study, efficiency losses were most notable in non-systematic and non-quantitative reviews.



1:30 PM - 3:00 PM

Lightning Talks & Contributed Papers - *Room 2306/2309*

Integrating Indigenous Ways of Knowing with citation guidelines in Canadian health sciences libraries: an environmental scan

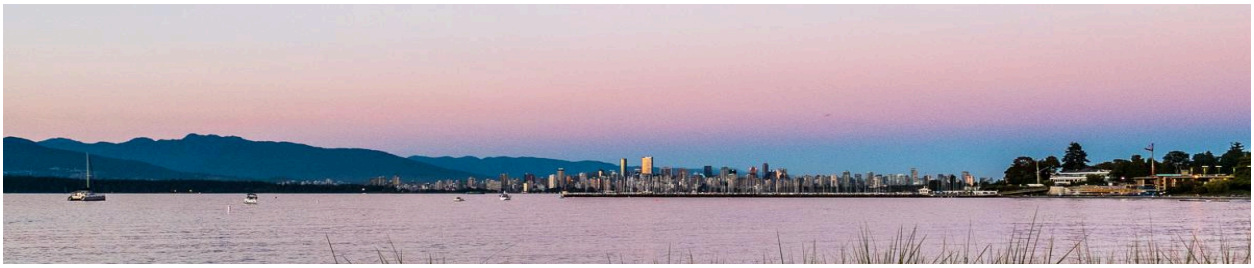
Margaret Banka
University of Manitoba

Introduction: Though academic institutions strive to embrace Indigenous Ways of Knowing into research praxis, a true integration of Western and Indigenous values remains challenging and elusive. One manifestation of this issue is the treatment of Indigenous Knowledge sources in American Medical Association (AMA) and American Psychological Association (APA) citation styles, which are the primary citation styles used in health sciences research. Recently, there have been radical efforts by academic librarians in Canada to propose new, more inclusive templates for citing Indigenous Knowledge sources. This study seeks to evaluate this emerging practice across academic institutions in Canada to measure current practices in health sciences libraries. **Methods:** Publicly available AMA, APA, and Indigenous citation guides will be identified among 297 universities and colleges in Canada. For those institutions that demonstrate one or more of these citation guides, data will be extracted to determine how many and which libraries are circumventing APA and AMA guidelines on Indigenous Knowledge source citation, and what elements they are recommending. A frequency distribution table will be created in Excel to summarize trends across institutions in Canada. **Results:** Findings will be presented at the time of the conference as this research is currently in progress. **Discussion:** The data will provide valuable insight into which libraries across Canada are actively decolonizing academic citation practices, how they are doing it, and what is being done among health sciences libraries. The data also has the potential to inform health science librarians' own approach to and recommendations for citing Indigenous Knowledge sources.

How student librarians can support Indigenous health knowledge translation: a program proposal

Caprice Pybus[1], Coco Chen[2], Rebecca Ardron[3], Natalie Reddy[2]
[1]University Canada West, [2]University of British Columbia, [3]Alexander College

Abstract: Within health librarianship, there exists an immediate need for both students and health sciences librarians to connect with the First Nations Health Authority (FNHA) through sustained outreach. Utilizing the FNHA's strategic plan as a starting point, we propose a long-term collaboration with UBC's School of Information (iSchool) to ensure that Indigenous communities maintain their authority over the implementation of traditional health practices. We present this framework for LIS students as a Professional Experience (PE) project, supervised by a health sciences librarian, to work alongside Indigenous Peoples towards the goal of creating a long-lasting partnership for traditional Indigenous health knowledge mobilization. **Description:** With the guidance of the FNHA, iSchool students would assist with the creation of information resources and tools such as LibGuides about traditional medicines, health resources, and

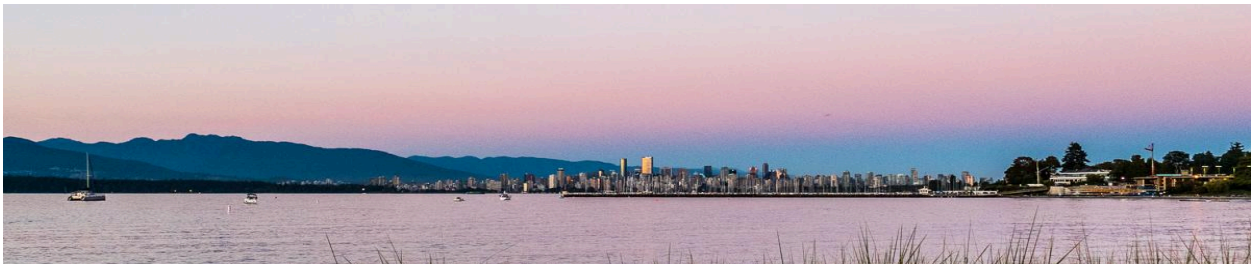


practitioners for use within community contexts. Where possible, the program could assist in knowledge transfer from Elder to information guides, and when information is sensitive, we would assist in creating templates for information retrieval to maintain consistency. **Outcomes:** The goal for the collaborating information professionals is not to extract this knowledge, but instead to facilitate knowledge translation and mobilization by and for these communities. The highest priority in these efforts is that the Indigenous communities we work with maintain their authority over and improve access to their information. **Discussion:** This proposal differs from existing library programs by collaborating more directly with Indigenous communities, working with knowledge and materials that may not be academically published, and building a space for limited access to culturally sensitive materials.

Reparative description and classification in medical libraries

Melissa Caines[1], Erin Brady-Randle[2]
[1]Canadian College of Naturopathic Medicine, [2]Fraser Health

Background: Medical libraries can play a significant role supporting reconciliation through reparative description and classification practices. This lightning talk will showcase our group's collaborative efforts to address systemic bias in cataloguing systems by engaging in decolonization initiatives in academic and health authority library settings. Our project highlights our work to implement recommendation #5 of the CFLA-FCAB Truth and Reconciliation Report – the call to "[d]ecolonize access and classification by addressing the structural biases in existing schemes of knowledge organization and information retrieval"1. **Project Description:** Our project involves two key areas: revising harmful and outdated subject headings and adapting classification systems. The first component, reparative description, involves replacing harmful Library of Congress Subject Heading (LCSH) and Medical Subject Headings (MeSH) by integrating interim vocabularies such as those by the Manitoba Archival Information Network (MAIN) and the Greater Victoria Public Library (GVPL). The second component centers on adapting Métis-settler Librarian, Ashley Edwards's, modification of Kahnawá:ke Librarian, Brian Deer's Classification (BDC) system in a medical library setting. **Outcomes:** Reparative description and classification is an ongoing and iterative process. While key milestones include the integration of inclusive vocabularies and our initial adaptation of BDC, the work is far from complete. Future goals involve expanding community engagement to guide collection development practices, with the recognition these efforts must remain flexible and responsive to ongoing changes in the decolonization of description and classification. **Conclusion:** This lightning talk will encourage attendees to collaborate to advance reparative cataloguing practices, fostering a commitment to decolonizing libraries and building inclusive futures together. **References:** 1 Callison C, chair; Canadian Federation of Library Associations. Truth and reconciliation report and recommendations [Internet]. Canadian Federation of Library Associations; 2018 [cited 2025 Jan 17]. 87 p. Available from: http://cfla-fcab.ca/wp-content/uploads/2018/10/Truth-and-Reconciliation-Committee-Report-and-Recommendations-ISBN1.pdf

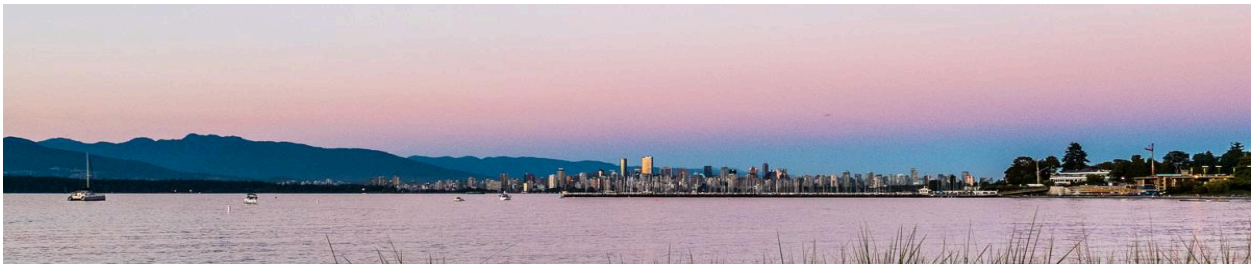


Invisible in the index: how Medline indexing excludes intersex people
Eleni Philippopoulos
McGill University

Introduction: Since April 2022, indexing in Medline has been done through automatic indexing using an algorithm. According to PubMed, quality assurance processes are in place to ensure the accuracy of the decisions, including citations with recognized ambiguities. Humans may still participate in the indexing process by reviewing and curating the results. **Objective:** Despite the introduction of the MeSH term Intersex Persons in 2020, as of January 2025, only 13 articles are tagged with the term. None of these articles were indexed using automatic indexing. This paper examines the systemic exclusion of intersex-related literature within the indexing framework in Medline. **Methods:** In July 2024, a search was conducted to identify citations that included intersex in the title and abstract. The search was limited to articles published from 2020 onwards and excluded the 13 articles with the Intersex Person MeSH term. **Results:** A total of 500 articles were identified. After excluding animal studies and studies that were not yet indexed, 228 articles remained. A definitive decision about the indexing could not be made for 24 articles. Of the 228 articles, 167 (73.2%) were indexed using automatic indexing and the remaining 61 (26.8%) involved humans. After analyzing the full-text, it was determined that 59.9% of the automatic indexed articles and 45.9% of the manually indexed articles should have been tagged with the Intersex Persons MeSH term. **Conclusion:** This study reveals significant gaps in the Medline indexing process concerning intersex-related literature. These findings indicate systemic issues in both automatic and manual indexing processes, suggesting that intersex-related research is often misunderstood, misclassified and invisible.

Making the case for play in your library
Glyneva Bradley-Ridout
University of Toronto

Introduction: Health sciences libraries serve a diverse population of adult users, providing access to varied services, supports, and spaces. There are many factors that may make a user's visit to the library a productive and joy-filled experience. In addition to the standard (and important) functions as a space for learning, study, and research, this presentation will argue that health sciences libraries are a logical space for play and fun to occur as well. **Description:** This presentation will be divided into two parts. The first part will introduce the case for play and why bringing play into library spaces is worth the time and resources. A variety of arguments to this case will be shared, included the supporting literature behind play in adult psychology, and the argument that libraries are an ideal space for this to occur. The second part of the presentation will share resources and strategies for implementing play-based activities, including utilizing strategic plans and setting budgets. A few examples of easy to execute play-based activities will be shared. **Outcomes and Conclusion:** This session will be of interest to those who wish to bring play into their library spaces, or those who would like to know more about this means. By the end of the session, attendees will have had the opportunity to reflect on the meaning of play in library settings, as well as consider applications in their own library spaces.



Workshop - *Room 2311*

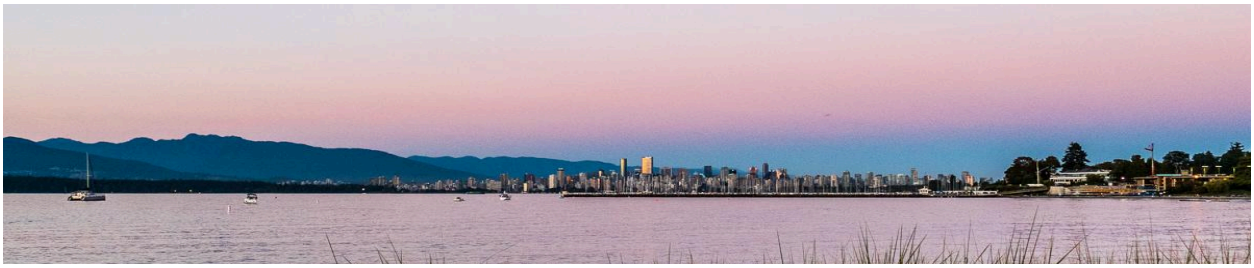
Designing Instructional Strategies for Teaching Effective Use of AI Search Engines
Kaitlin Fuller[1], Erica Nekolaichuk[2]
[1]St. Francis Xavier University, [2]University of Toronto

A key role of librarians who teach is to guide learners in selecting the appropriate tool for the task at hand and using it effectively. With the recent proliferation of AI search engines (eg. Consensus, Elicit, Perplexity, etc.), there is an opportunity for librarians to harness what we already know about teaching information resources to help our learners integrate the use of these tools into their research practices in a way that's effective and thoughtful. During this workshop, designed for health information professionals involved in teaching, participants will learn how to create activities that develop their learners' awareness and critical thinking regarding the use of AI search engines. This workshop will focus on instructional design and lesson planning, structured around three key pillars: situational factors, learning outcomes, and active learning. The facilitators will lead participants through a variety of activities, including mind-mapping exercises and group discussions, and will draw on the collective experience of participants as well as their own experience teaching AI search engines. This workshop will inspire participants to collectively explore and reflect on how to incorporate AI search engine instruction into their teaching.

Contributed Papers - *Room 2314*

Where did the reviews go?: the good, the bad, and the unfinished
Zachary Osborne[12], Carolyn Ziegler[1], Teruko Kishibe[1], Talin Boghosian
[1]Unity Health Toronto, [2]Seneca Polytechnic

Introduction: Information specialists who collaborate on knowledge synthesis (KS) projects invest tremendous time and intellectual labour on reviews. Despite their critical role in ensuring review quality, the outcomes of their contributions—such as successful publication—remain unclear. Consequently, there is a need to analyze longitudinal data on the outcomes of collaborations such as the rate of publication success versus the number of unfinished reviews. Our study aims to understand what happens after the intense work of evidence retrieval has been completed. **Methods:** Between 2013 and 2023, information specialists from a multi-site health network collaborated with research teams on 596 KS projects. In 2024, the library team collected and analyzed KS project data from its data analytics platform, LibInsight (Springshare), with the aim of detecting trends, measuring the impact of interventions to reduce research waste, and of making recommendations for future practice. This process involved identifying the numbers of dropped projects and successful publications, of librarian co-authorships or acknowledgements, the types of review methodologies used, and more. **Results:** Preliminary findings suggest a substantial number of KS collaborations with information specialists did not result in published manuscripts. The results indicate implementation of a formal policy and application process may have reduced incomplete projects. This study examined both completed



and incomplete projects to identify factors that led to publication. **Discussion:** This study examines the investment by information specialists in KS projects and the characteristics of projects that result in publication. Findings provide insight for more effective collaboration with research teams.

Search strategies as research data: new perspectives on documentation and sharing practices

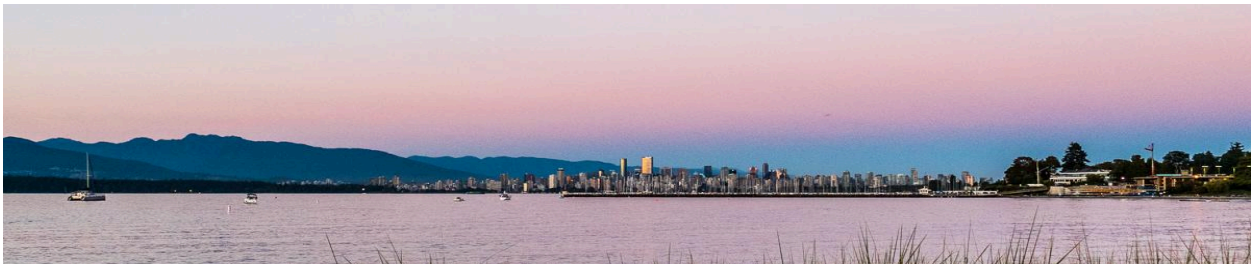
Heather Cunningham[1], Julia Martyniuk[1], Jill Boruff[2], Sabine Calleja[2], Alisa Rod[2], Ani Orchanian-Cheff[3], Alix Pincivy[4], Daniela Ziegler[5], Karly Gunson[1]
[1] University of Toronto, [2]McGill University, [3]University Health Network, [4]Centre Hospitalier Universitaire Sainte-Justine, [5]Université de Montréal

Objective: By viewing knowledge synthesis (KS) searches as code and depositing them into data repositories, librarians assert their intellectual control over their work, ensuring that the search strategies are properly reported and presented as stand-alone intellectual outputs. To better understand how to support these initiatives, the authors investigated Canadian health sciences librarians' attitudes and behaviours regarding the documentation and sharing of KS search strategies. **Methods:** We invited 498 people to a bilingual 15-minute survey if they were listed as a health sciences librarian or information specialist on public websites of academic, hospital, government, or special libraries in Canada. **Results:** 128 complete responses were received for a 25.7% response rate. 84% of respondents agreed that search strategies and their related output files are equivalent to research data and code for a KS publication, but only about 30% have deposited search strategies in a data or institutional repository. 85% have used or adapted an existing search strategy in the creation of a new strategy. The results also show that intellectual control of co-authored search strategies is salient among participants and that there is broad interest in integrating research data management (RDM) best practices into KS work. **Conclusions:** The results suggest that Canadian librarians recognize their work as independent data; however, there are no formal guidelines to ensure that librarians integrate search deposits into their KS workflows. Our findings can be used to advance the open sharing of search strategies among Canadian librarians, aligning with PRISMA-S, and encourage librarians' continuous engagement as participants in the RDM ecosystem.

A scoping review case study of citation searching indexes and tools

Colleen Pawliuk
BC Children's Hospital

Background: Citation searching is a valuable form of supplementary searching for scoping reviews, but is often time consuming. Several citation indexes and tools are now available to make this process more efficient, but it is unclear which may provide the best return on investment. Past studies have investigated the value of citation indexes in the context of systematic reviews or the coverage provided. However, these studies are limited in value as they do not include a robust grey literature search, do not include citation searching tools (e.g. CitationChaser), or do not quantify the value of the indexes with the number of relevant studies identified. **Objective:** To test citation searching indexes/tools in the context of a scoping review

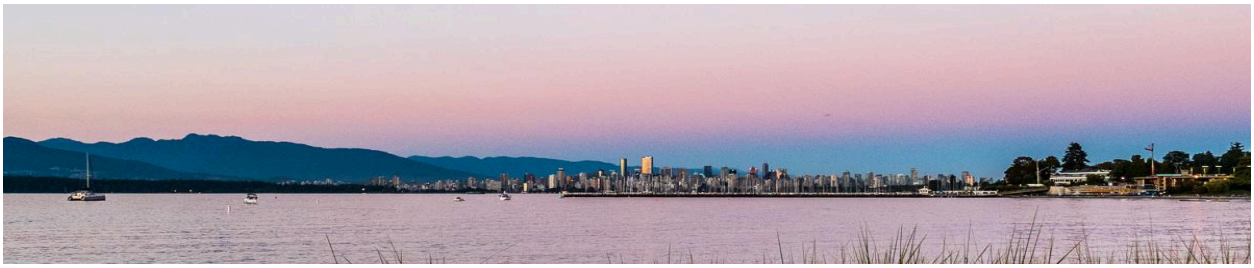


that includes grey literature to quantify value of each index/tool. **Methods:** A literature search was conducted to find citation searching indexes/tools that allow for bulk download of references. All citation indexes/tools were used for backward and forward citation searching in the scoping review. Recorded for each tool was: time needed to complete citation searching, total number of references retrieved and number of relevant references retrieved. Sensitivity and precision of backward and forward citation searching will be calculated for each tool using any relevant citations identified through citation searching as a reference set. **Results:** Descriptive statistics for each tool will be shared along with recommendations for which tool(s) may provide the best balance of time spent and relevant references found.

Promoting the use of synthesized evidence in public health decision making: a rapid evidence service and repository of public health evidence syntheses

Sarah Neil-Sztramko[12], Alanna Miller[2], Robyn Traynor[2], Sophia Caldwell[2], Krishian Camargo[2], Emily Clark[2], Kristin Rogers[2], Maureen Dobbins[12]
[1]McMaster University, [2]National Collaborating Centre for Methods and Tools

Introduction: Evidence syntheses can be used to inform public health policy and programming decisions, however, organizations may lack the resources and expertise to develop timely, high-quality syntheses. The National Collaborating Centre for Methods and Tools (NCCMT) launched a Rapid Evidence Service (RES) to answer priority public health questions through rapid reviews. The NCCMT also established the Repository of Public Health Evidence Syntheses (the Repository) to minimize duplication of efforts, facilitate collaboration, and ensure public health practitioners have access to relevant evidence syntheses. **Description:** The RES process involves collaboratively developing a research question, conducting a comprehensive search, and critically appraising and synthesizing the findings into an actionable report. Each RES report is included in the Repository and made available to the public health community. Other organizations also contribute their syntheses to the Repository. Users can search the Repository for existing syntheses and adapt the findings for use in their own communities or connect with authors to collaboratively address public health issues. **Outcomes:** Since launching in 2020, the RES and Repository have focused on many timely public health topics, such as COVID-19, climate change, and health equity. The RES has collaborated with over 20 organizations to complete more than 100 reviews and review updates on 61 topics. The Repository hosts over 600 submissions from over 75 organizations and has been accessed over 30,000 times. **Discussion:** The RES and Repository facilitate access to relevant, high-quality evidence syntheses. These services promote the use of synthesized evidence, encourage interorganizational collaboration and ease knowledge exchange in public health decision making.



3:30 PM - 5:00 PM

Contributed Paper & Panel - *Room 2306/2309*

Critiquing systematic review search methods in the Cass Review: developing a comprehensive checklist

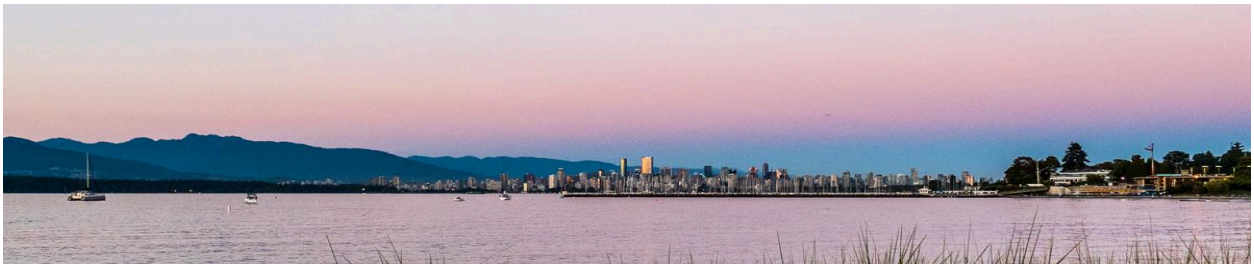
Elizabeth Sanders[1], Elizabeth Yates[2]
[1]Lamar University, [2]Brock University

Introduction: In April 2024, the Cass Review released its final report regarding gender identity services for children and youth in the U.K. The report, based partly on the outcomes of six systematic reviews, has been used to justify restrictions on a wide swath of gender-affirming health care services and has been broadly criticized both by clinicians and 2S&LGBTQ+ advocates. As librarians striving to advance best practices in evidence synthesis research and evidence-informed care, and as individuals invested in promoting social justice, we wanted to bring our own critical lens to the Cass systematic reviews by critiquing their search strategies and related processes. **Methods:** We began by examining the literature and reviewing existing tools and approaches to critically appraise evidence synthesis reviews and/or search strategies. We then developed a new checklist incorporating elements of key resources such as PRESS, MECCIR, AMSTAR 2, and guidance created by and for librarians. We each independently created a draft checklist and then collaborated on multiple iterations before completing a version which we will pilot test in Winter 2025 and then finalize. **Results:** As of June 2025, we will share the results of using our tool to critically appraise the search methods from at least one Cass systematic review. **Discussion:** While this new appraisal tool is primarily focused on searches within the Cass publications, we hope it can be applied more broadly to other evidence synthesis reviews, particularly those impacting other vulnerable populations.

Developing, Validating, and Using Search Filters to Retrieve Evidence Related to Specific Populations

Robin Parker[1], Robin Paynter[2], Eleni Philippopoulos[3], Connie Winther[4]
[1]Dalhousie University, [2]US Agency for Healthcare Research and Quality, [3]McGill University, [4]University of Alberta

Efficiently retrieving relevant evidence from databases is crucial for knowledge syntheses, particularly for underrepresented or hard-to-define populations. This panel explores the development, validation, and use of search filters for locating research on specific demographic groups, such as age groups, minority populations, or workers in particular settings. Through three presentations and an interactive conversation with the panelists, we will discuss how and when to use validated and unvalidated search filters to improve retrieval efficiency for evidence relating to the health of population groups. We will discuss the principles of filter design, focusing on terminology, inclusion/exclusion criteria, and balancing sensitivity and precision. Through examples of validated filters for minority populations, we will explore how to design filters to reduce irrelevant results while maintaining inclusivity for evolving terminology. We will review methods to ensure relevance and accuracy, including insider input, pilot testing, relative

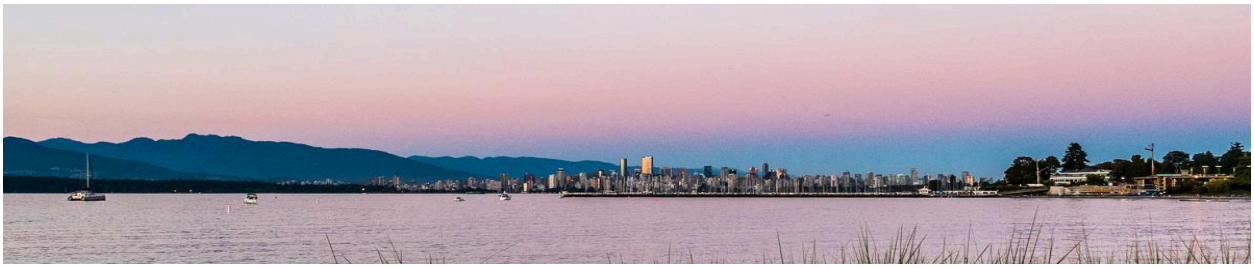


recall from published reviews, and flexibility in updating for different purposes or projects. Practical applications in academic, clinical, and policy contexts will be addressed, alongside challenges like evolving language, limited metadata specific to the population, and translating filters for use in different search interfaces. We will also discuss how information specialists share filters through publication and repositories. Inspired by resources such those provided by ISSG and the University of Alberta Library, we suggest options for finding, adapting, and citing search filters. By covering both theoretical foundations and practical applications, this panel aims to improve the retrieval of population-specific health evidence, offering tools to better serve diverse populations in healthcare and social research.

Workshop - *Room 2311*

Contextualizing Generative AI Tools and Academic Integrity in Health Research Literacy
Rina Garcia Chua, Talia Greene, Jane Jun
University of British Columbia Okanagan

Generative AI Tools are emerging and evolving at lightning speed. Many librarians are now compelled or expected to have a baseline knowledge of how these tools work and receive requests for advice on which tools to use in specific contexts. A thorough understanding of the possibilities, risks, and limitations of these tools will allow librarians and researchers to make informed decisions about when and how to ethically and appropriately use and/or endorse these tools. **Activity and Methods:** This workshop will allow participants to critically approach multiple tools and methods of use. Presenters will introduce strategies for effective prompt design and participants will be given the opportunity to apply and adapt the strategies to the selected tools, such as ChatGPT and Elicit. Through exploring and testing these strategies, participants will build their confidence in approaching and develop a stronger understanding of effective uses for GenAI, as well as inappropriate applications for AI use. **Goals and Objectives:** The goal of this workshop is to gather a baseline critical understanding when approaching GenAI tools with academic integrity, learning the basics of prompt design/engineering, and applying the knowledge and critical analysis to potential cases in which you may use or recommend the tools as librarians. Additional topics covered include Copyright, Privacy Impact Assessments (PIAs), licensing considerations, and other risks.



Contributed Papers - *Room 2314*

Stronger together: adventures in instruction and resource sharing to cultivate aspiring nursing students

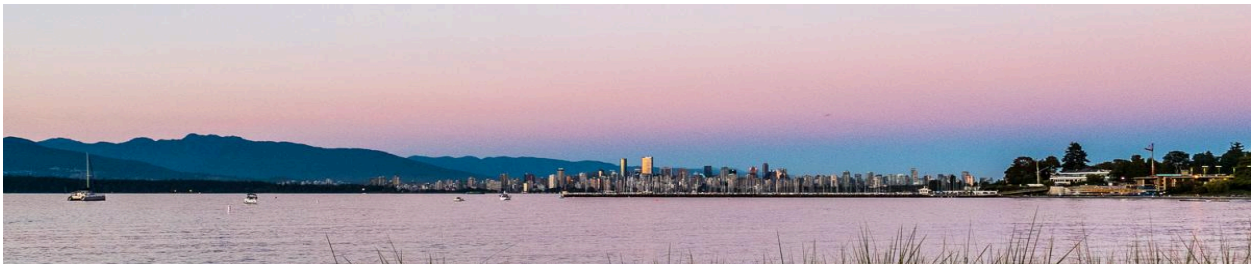
Marilia Antunez[1], Christa Taylor[12]
[1]University of Akron, [2]Barberton High School

Introduction: Literature on career technical education (CTE) programs introducing nursing research to high school students is scarce, and fewer articles discuss the involvement of librarians. This paper examines the integration of research into the curriculum of a two-year CTE program, the Advancement to Nursing (ATN). ATN is a program for high school students considering nursing or another health career. This program partners with different types of libraries, including the University Akron (UA) Libraries. As part of the ATN program, Barberton High School partnered with UA. Over the past two years, the librarian and the nursing instructor worked closely to plan the library sessions whose objectives were to improve students' database searching skills, to locate appropriate resources, and to cite sources correctly. **Description:** At UA, the librarian provided two instruction sessions annually. Students were introduced to searching strategies, peer-reviewed articles, and the American Psychological Association (APA) Style. Students searched the CINAHL database and other quality resources. An online guide was created to supplement instruction to help students with the assignments. Outcomes: A rubric was used to determine students' ability to utilize approaches introduced in library sessions, understanding of APA Style, and writing ability. Although students were able to navigate databases more effectively, they needed more assistance with citing resources. **Discussion:** The partnership improved students' ability to find appropriate information, provided assistance to help students complete their assignments, and highlighted the importance of research in nursing/health fields. Weaknesses included technological challenges and time constraints. Future plans are to increase APA Style education and writing labs.

The development of a freely available module series introducing researchers to all stages of the systematic review process

Sandra McKeown[1], Jennifer Ritonja[23], Eleftherios Soleas[1]
[1]Queen's University, [2]McGill University, [3]St. Mary's Research Centre

Introduction: Many libraries continue to grapple with the growing demand for systematic review support and how to address gaps in researcher knowledge. Our previously reported survey results of Ontario medical schools and affiliated hospitals found that all 13 library respondents would find free online modules useful for supporting researchers conducting systematic reviews. **Description:** Our interprofessional team developed a module series that introduces all stages of the systematic review process. The module series is accredited for continuing professional development by the Royal College of Physicians and Surgeons Canada and the College of Family Physicians Canada. **Outcomes:** Individual modules have been posted online via Queen's University Library as they are created and links to the modules have been shared with the health sciences library community via listservs. Researchers at Queen's who contact the library for



systematic review support are referred to the content, and all students are required to complete the module on searching and submit proof of a knowledge check task before meeting with a librarian. While usage statistics for the modules have been high, it's apparent during librarian consultations that many researchers are still unclear of the process and that students may not be doing the required module on searching. **Discussion:** Modules cannot replace the value that direct support from librarians, biostatisticians, or methodology experts can provide, however, they may help with addressing researchers' gaps in the systematic review process and offer libraries and institutions a more efficient way of familiarizing researchers with best practices for performing a high-quality review.

Developing a scaffolded learning framework for librarians new to health sciences

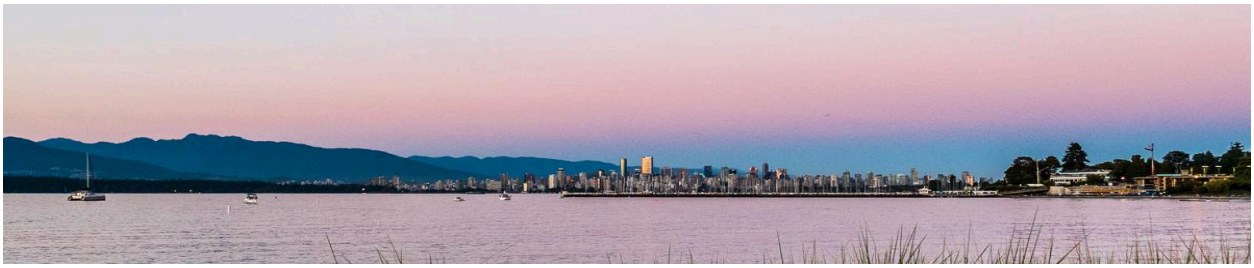
Debra A. Werner[1], Zahra Kamarei[2], Melissa L. Rethlefsen[3], Melissa Helwig[4]
[1]University of Chicago, [2]Arkansas Colleges of Health Education, [3]University of New Mexico, [4]Toronto Metropolitan University

Background: In early 2024, the idea to convene a group to harness Association of Academic Health Sciences Libraries (AAHSL) members' collective efforts to train and onboard librarians emerged during an AAHSL eSalon meeting. A task force came together through follow-up emails among those who expressed interest in this topic. **Description:** The task force's goals were to explore, evaluate, and recommend strategies for establishing a program to onboard and educate individuals new to health sciences librarianship efficiently. This initiative seeks to enhance the transition process for newcomers, ensure they receive comprehensive training and support to excel in health sciences libraries and ease the burden of individual institutions through shared practices and training materials. **Results/Outcomes:** Since forming the task force, we have completed a literature review, explored cohort models for new librarians, conducted an environmental scan, and begun developing a scaffolded learning framework to support the onboarding and education of new health science librarians. The task force shared the framework at the annual AAHSL meeting (November 2024) for review and feedback. This initiative, which began at a monthly meeting, seeks to prepare librarians for success in health sciences. This session will share lessons learned through the process and review the framework. Library managers and mentors can use the results of this work as a guide for training new health sciences librarians.

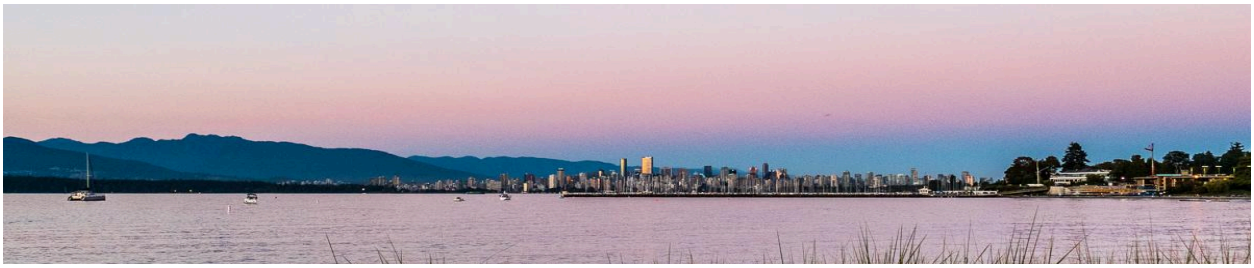
Rooted in competence: using the MLA professional competencies to redesign a health information course

Colleen Pawliuk
BC Children's Hospital

Background: Health information courses in Library and Information Science programs are one pathway into health librarianship. They may raise awareness of the profession among students and provide an avenue to learn essential skills of health information practice. For those unfamiliar with health information practice, understanding how to connect course topics to marketable skills can be a challenge. **Description:** The health information course at the



University of British Columbia was redesigned using the Medical Library Association (MLA) Competencies for Lifelong Learning and Professional Success as a framework. An introduction to the course was provided on the first day of class, which linked the Professional Competencies to the course topics and learning objectives. Students self-assessed their level of Professional Competency at the start and end of the course through an anonymous online survey. **Outcomes:** Overall Professional Competency scores increased for the class. Informal feedback on the course was positive and focused on the practicality of the course. **Conclusion:** Explicitly anchoring course content in the MLA Competencies can provide a way for learners self-evaluate their learning and provides a clear framework for understanding the key competencies for health information professionals.



Thursday June 5, 2025

11:00 AM - 12:30 PM

Lightning Talks - *Room 2306/2309*

Documenting the shift: how researchers report generative AI in search methodologies for evidence synthesis

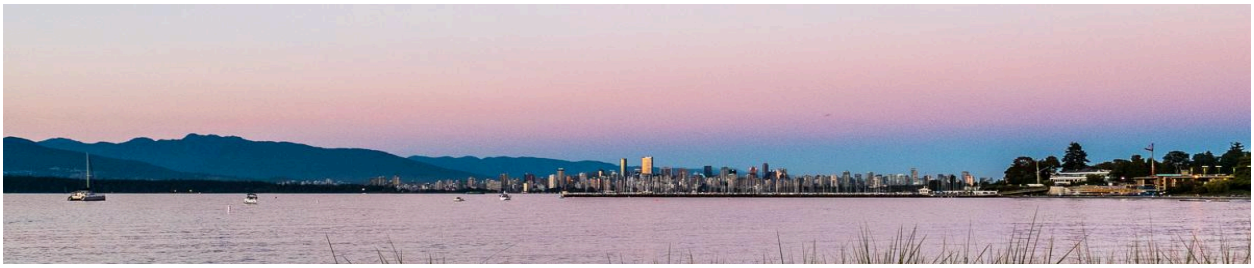
Zahra Premji[1], Erica Nekolaichuk[2], Kaitlin Fuller[3]
[1]University of Victoria, [2]University of Toronto, [3]St. Francis Xavier University

Objective: This lightning talk will provide a brief description of a scoping review designed to identify the extent to which generative AI is being used in the search methods of evidence synthesis reviews. We will compare tools and strategies used by review authors, and extract details on the level of reporting. **Methods:** The JBI scoping review methodology will guide the conduct of this review. After calibration exercises on screening and data extraction were completed, an a priori protocol was published on OSF Registries. To be eligible for inclusion, a review must be a known type of evidence synthesis, and authors must have either used a generative-AI powered tool to develop database search strategies or used an AI search engine to locate references directly. We will search from Jan 2022 to present: Ovid Medline, Ovid Embase, Ovid PsycINFO, EBSCO CINAHL, EBSCO ERIC, ProQuest Sociological Abstracts, Elsevier Scopus, and Clarivate Web of Science Core Collection. We will conduct a supplementary full-text search in EBSCO MEDLINE, EBSCO CINAHL and Lens.org. We will independently screen in two stages in Covidence; disagreements will be resolved by consensus and discussion. We will extract study characteristics; characteristics related to the method, type of chatbot or AI search engine used; description of search method; and search reporting elements. The results will be presented in tables, accompanied by descriptive summaries. **Results and Discussion:** This project will provide insights into the adoption and reporting of generative AI tools in KS searches.

Development of a full-text search strategy for CMAJ's scoping review on content about First Nations, Inuit and Métis people and anti-Indigenous racism

Nan Bai, Renee de Gannes-Marshall
Canadian Medical Association

Introduction: As part of its reconciliation journey, CMAJ seeks to understand the impact and extent of Indigenous-specific racist content published in the journal. To support a scoping review on anti-Indigenous racism, librarians developed an extensive search strategy to identify all articles about or related to First Nations, Inuit and Métis people in Canada in the published contents of CMAJ from January 1911 to August 2024. In addition to Ovid MEDLINE (MEDLINE), PubMed Central (PMC) was selected for its full archive of CMAJ. **Description:** Full-text search was necessary to retrieve contents not indexed in MEDLINE and earlier contents when journal and database indexing was limited. A comprehensive list of search terms was assembled using existing published search filters, and by consulting subject matter experts and terminology



guides on Indigenous Peoples in Canada. Extensive testing searches led to our final full-text search strategy that includes approximately 1200 keywords and the development of an internal CMAJ search aid that documents lessons learned about search platforms, syntax and more. **Outcomes:** A total of 7540 and 774 references were found in PMC and MEDLINE, respectively. After deduplication of the combined results, 7580 unique references were retrieved. Most references retrieved in MEDLINE were found in PMC. **Discussions:** This is a unique search where a scoping review involves full-text search. At the time of writing, the CMAJ team is still screening search results. Given our sensitive search strategy, a large number of irrelevant references are anticipated. We'll assess the effectiveness of our search strategy once the screening is complete.

Compounding drugs data: introducing a drug terms tool for knowledge synthesis projects

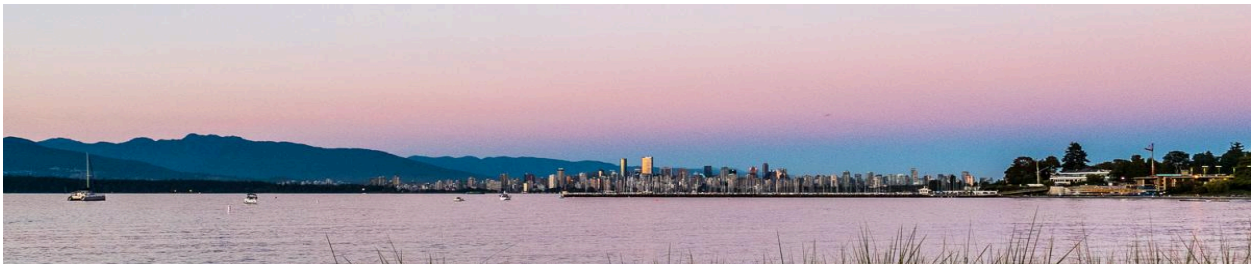
Tyler Ostapyk
University of Manitoba

Introduction: For knowledge synthesis projects concerning pharmaceutical interventions, the development of a comprehensive search strategy generally requires the identification of various brand names and synonyms used for a particular drug. Building a list of these terms can take a substantial amount of time and effort, and often requires the consultation of numerous thesauri and authoritative sources. To save searchers time when building their list of terms, the author has developed a Python-based tool that queries various data sources (MeSH, RXNorm, Wikidata, and PubChem) and produces a search string that can be directly input into bibliographic databases. **Description:** Using an HTML form, the searcher enters a drug name and specifies which data sources they would like to query. The tool then queries the selected data sources for the drug. If there is a match it identifies and retrieves available synonyms. The retrieved terms are then combined into a single search string that can be used in bibliographic databases such as Ovid Medline or CINAHL. **Outcomes:** Leveraging existing data sources, the tool can quickly generate search strings for specific drugs. These strings return a more comprehensive set of search results than single text word searches and generating the strings requires minimal effort. **Discussion:** Further work is needed to determine the effectiveness of the search strings generated by the tool, especially in comparison to manually created strings. Restrictive API access policies and fees have prevented the inclusion of some authoritative sources, which may limit the tool's effectiveness.

The check tag cliff: a rapid evaluation of check tags over time in Medline

Nicole Askin
University of Manitoba

Introduction: Check tags in PubMed/Medline are used to quickly identify key features of studies and study subjects, such as age groups. They are frequently incorporated in search strategies. However, such searches are reliant on check tags being dependable in their application. This study sought to evaluate some irregularities the author noticed around check tags. **Method:** Searches were run in Ovid Medline for a series of commonly used check tags in records of publications from 2015 to 2024. The absolute number of records employing these tags and the



proportion of records employing these tags was then compared to the results of similar searches in Embase, PsycINFO, and CINAHL. **Results:** There was a sharp drop in both absolute and proportional numbers of most check tags on Medline records published over this time period. For example, use of female/ decreased from 30% of Medline records for papers published in 2019 to only 10% of records for papers published in 2023. However, PsycINFO and Embase indexing patterns differed markedly. **Discussion:** the trends noted have significant implications for use of check tags for searching in PubMed or Medline. Results give insight into how indexing varies between PubMed/Medline and other commonly used biomedical databases.

Cleaning up duplicate clinical trial records like a pro

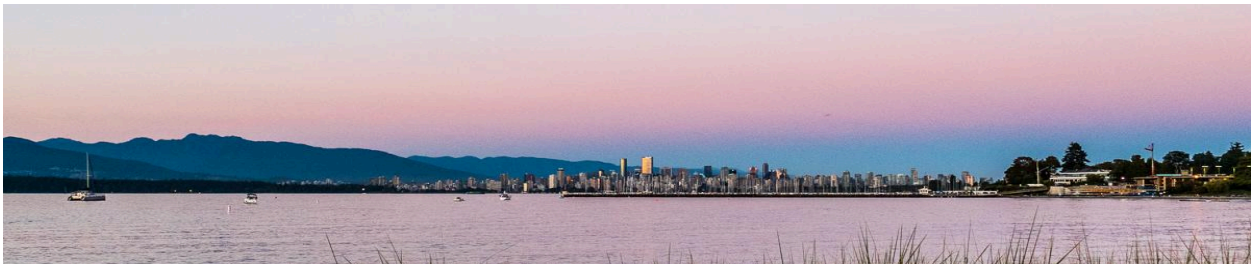
Zahra Premji[1], Chris Cooper[2]
[1]University of Victoria, [2]University of Bristol

Background: Searching trial registries is a mandatory item in the Cochrane MECIR guidelines, and two registries, the World Health Organization International Clinical Trials Registry Platform (ICTRP) and ClinicalTrials.Gov (CTG), are specifically recommended in the Cochrane Handbook of Systematic Reviews of Interventions (Chapter 4). As ICTRP contains records from CTG, a search of both resources will lead to duplicate records. Automated tools and existing published deduplication methods are not suited to deduplicating registry records as they are based on comparison of fields such as title, author, journal name, year, and other metadata fields that are common to bibliographic records. Some of these fields are not commonly used in registry records, and even fields such as the title can differ across the same trial's record from various sources. **Methods:** This lightning talk will demonstrate the problem, including why software like Covidence fails at detecting duplicates between ICTRP and CTG. We will also present a method for deduplication of registry records in EndNote (desktop) using the unique study ID field as the sole deduplication parameter. **Conclusion:** This method is particularly suited for librarians supporting reviews of interventions who have to search multiple resources that contain trials records (CTG, ICTRP, and even Cochrane CENTRAL).

Building a better future together by assessing our systematic review service

Laurel Scheinfeld, Sunny Chung, Jessica Koos, Michael Huang
Stony Brook University

Introduction: We previously presented a paper on new processes and documents implemented for our library's systematic review service at the annual CHLA conference in 2023. A task force of health sciences librarians had aimed to formalize our systematic review service to make it more standard, transparent, and to cut down on zombie (uncompleted) reviews. Now that we are two years into using the new procedures and forms, we have decided to assess the model. **Methods/Description/Discussion:** We will share feedback on use of the new intake form, MOU document, and protocol template that were developed and we'll discuss the edits to the forms and procedures we are considering based on this feedback. We will also review our positive and negative experiences using a project management software program to store and share data from our knowledge synthesis projects. Future plans for analyzing quantitative data and



obtaining patron feedback will also be discussed.

Lack of involvement of medical librarians/information specialists in systematic reviews submitted to a high-ranking medical journal: insights from an editorial board member and reviewer

Yuhong Yuan[1,2,3]
[1]Western University, [2]London Health Sciences Centre, [3]McMaster University

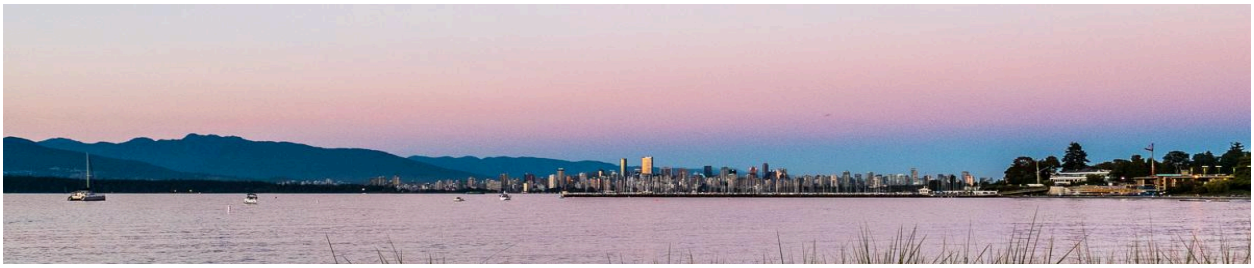
Background: A rigorous literature search is essential for systematic reviews (SRs) quality. However, many medical journals lack the resources to thoroughly peer-review search methods and strategies. The extent of medical librarians/information specialists' (MLIS) involvement in developing literature searches is often unclear. **Methods:** As a former Cochrane information specialist and a researcher with over 20 years at various universities, I have served as an editorial board member and technical reviewer for a high-ranking medical journal A for 13 years. In this role, I critically assess all submitted SRs, including their search methods and strategies, using the PRISMA-S checklist, Cochrane guidelines, and the PRESS peer review checklist. This abstract summarizes my analysis of 90 SRs I reviewed for Journal A in 2024, documented prospectively without a second reviewer to maintain confidentiality. **Results:** Of 90 SRs, only 6 (7%) included an MLIS as a co-author, and 10 (11%) mentioned MLIS assistance, with only three MLIS names formally acknowledged. Although most SRs claimed PRISMA compliance, 18 (20%) failed to submit complete search strategies for at least one database. I provided comments on search methods (1-9 points, median 5) for each SR that received an editorial decision). 20 SRs (22%) were accepted with major revisions. All of the 19 SRs that had submitted a revised version incorporated the suggested revisions; 4 (21%) of them included more studies following an updated search. **Conclusion:** MLIS involvement in SRs is limited and often inadequately acknowledged, underscoring the importance of rigorous peer review at all stages.

Workshop - *Room 2311*

Data for Decision Making: What Data do Information Professionals need for Effective Service Delivery, Advocacy, Planning and Professional Development?

Minakshi Sharma[1], Tara Landry[2], Marie-Helene Nicol[2], Alexandre Amar-Zifkin[2]
[1]Toronto Public Health, [2]Université de Montréal

The CHLA/ABSC strategic plan has been a useful guidepost for our association's activities from 2023-2025. As the association and its members consider the priorities for the coming years, we would benefit from reflecting on and learning about ourselves. The collection and use of qualitative and quantitative data from members (about themselves and their parent organizations) would support advocacy, planning and professional advancement. We propose an interactive activity where members can engage in scenario or problem-based discussions that highlight the value of data in making decisions. **Goal:** To discuss what type of qualitative or quantitative data could assist in planning, advocacy or professional development. Format: Small group. discussion in Home Groups and Expert Groups to generate ideas for CHLA/ABSC members

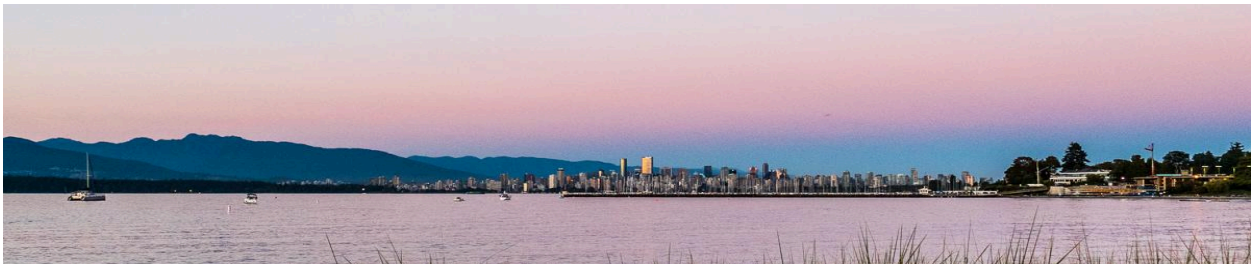


to consider. **Overview:** The facilitators will plan focused discussions to capture input on: (1) what data may be useful to members, (2) availability of data (is it already available? If not, how could we collect it?), and (3) why it may be useful for CHLA/ABSC and its institutional or individual members to have access to data.

Contributed Paper & Other Content - *Room 2314*

The Book Nook: creating a leisure reading space for staff and learners at three hospital library sites
Ashley Farrell, Bianna Glaizer, Cynthia Chui, Rouhi Fazelzad
University Health Network

Introduction: Existing literature highlights the benefits of leisure reading collections in academic libraries for students, such as stress reduction and improved well-being. Initiatives in hospital libraries, particularly those targeting staff, remain underexplored. The University Health Network Library implemented “The Book Nook” collection across its libraries to provide staff with access to recreational reading materials. This initiative helps to create an inviting multi-use library space, aims to promote the library's role as a hub for both clinical and leisure resources, and to contribute to staff well-being. This program will provide insight into creating, administering and evaluating a leisure collection specific to hospital staff. **Description:** The leisure reading collection at the Toronto General Hospital began after the library received a collection of donated books for its staff. In 2024, a library committee took an active role in managing the collection and worked to reorganize, rebrand, and promote the materials to improve access and awareness. The resources include a diverse selection of books, and it is run on a donation-driven model. This initiative has since expanded to two other sites. **Outcomes:** Results of a survey evaluating the impact of the collection, who is using it, and user satisfaction will be shared during the presentation. **Discussion:** This initiative highlights the potential of leisure reading programs in hospital libraries for staff and learners. Preliminary results will provide information on lessons learned developing and implementing the collection and will outline patron feedback, which will guide future improvements to the collection. Future directions include expanding this program to a fourth site.



Birds of a Feather: Strategies, Challenges, and Lessons Learned in Proactive Outreach in Hospital Libraries

Talin Boghosian, Sadaf Ullah, Quenby Mahood
Unity Health Toronto

Description: The evolving role of hospital librarians has highlighted the importance of proactive outreach to ensure that library services meet the dynamic needs of healthcare professionals. In response to this, our library implemented a new team structure with three outreach librarian positions, each dedicated to a specific client group: nursing, health disciplines, and medicine. Over the past year, we have employed a range of strategies to build meaningful relationships, enhance communication, and provide tailored services to these groups. This roundtable session invites health librarians engaged in outreach - or those seeking to develop outreach strategies - to share and discuss their experiences. Participants will explore common challenges, innovative solutions, and lessons learned from engaging with healthcare professionals in diverse roles. Whether you are building a program from the ground up or refining existing initiatives, this session provides an opportunity to collaborate and learn from others navigating similar journeys. **Session Objectives:** (1) Discuss outreach strategies used to connect with distinct healthcare client groups, (2) Share common challenges, practical solutions in building relationships and promoting library services, (3) Identify actionable takeaways for improving proactive engagement with healthcare staff. Interactivity/Participation: The session will be structured as an open roundtable discussion. Facilitators will guide the conversation with targeted questions, encourage participants to brainstorm solutions, and share successful practices.

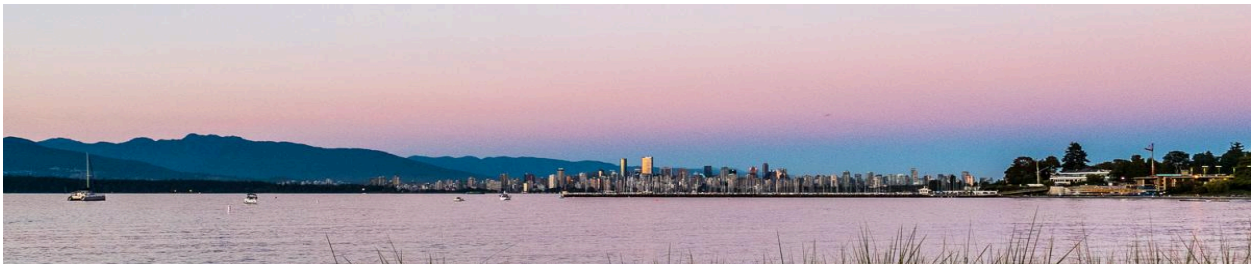
1:30 PM - 3:00 PM

Contributed Papers - *Room 2306/2309*

The involvement of librarians and library technicians in knowledge syntheses published by researchers from Quebec universities: an overview

Monique Clar[1], Michel Courcelles[2]
[1]Université de Montréal, [2]INRS Armand-Frappier Santé Biotechnologie Research Centre

Introduction: This study analyzes librarians and library technicians' involvement in academic knowledge syntheses (KS) publications in the Province of Quebec. **Methods:** Using Scopus, Web of Science Core Collection, MEDLINE, LiSSa, Érudit and Google Scholar, all KS articles published between 2020 and 2024 by researchers affiliated (first or last author) to a Quebec university was collected. Screening and data extraction were conducted with Covidence. Analyses will be performed on the involvement of library workers according to types of KS, disciplines, institutions, language of the publications and affiliation to a French or English language institution. **Results:** Library workers' involvement in KS is acknowledged in various ways. Preliminary analysis (2023-2024) shows that library technicians or library teams are occasionally mentioned in the acknowledgements section. Librarians or information specialists are co-authors



(30%), mentioned in the acknowledgements section (40%) or cited anonymously as consultants in the methodology section (33%). More than one librarian may contribute to a single KS publication, however, the role as a peer reviewer is rarely specified. Few KS publications were in French, and librarian co-authorship was less common in these compared to English-language publications. **Discussion:** Further analyses will explore more in-depth library worker involvement according to KS type, academic discipline, institutional affiliation, language of publication and institutions of the authors.

A scoping review of automated indexing in Medline - how did we get here?

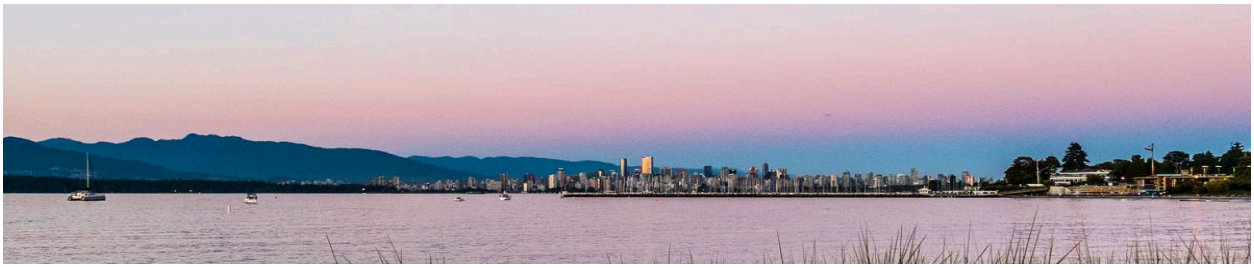
Alexandre Amar-Zifkin[1], Eileen Chen[2], Janice Y Kung[3], Dean Giustini[4]
[1]Université de Montréal, [2]University of California, [3]University of Alberta, [4]University of British Columbia

Background: Medline's 2022 transition to automated indexing has had a profound impact on the precision, accuracy and completeness of MeSH headings applied to records, and consequently, on the findability and usability of publications. Health science librarians must adapt accordingly. We will document the rise of automated indexing in Medline, and briefly touch on its present-day growing pains. **Methods**: We searched the usual places: MEDLINE and EMBASE (both via Ovid), the Web of Science Core Collection, CINAHL and LISA (Library and Information Science Abstracts; both via EBSCO), and went on to hand-search key journals, track citations, and peruse a wide range of grey literature. We are guided by Arksey and O'Malley's 2005 framework, with updates from Levac et al (2010) and the 2020 JBI Guidelines. Our protocol was deposited on the Open Science Framework (OSF) in November 2024 (https://osf.io/g4q8u/). Aggregated data will be thematically coded and presented as conceptual maps. We anticipate the impetus, benefits, and shortcomings of automated indexing as themes. **Results:** We will present a chronology of the development and deployment of automated indexing vis-a-vis Medline. We will make recommendations for future research on the impact of automated indexing in Medline and other health science databases, and discuss gaps identified in our review of publications. **Discussion:** Beyond the history of automated indexing, we will explore its impacts on the accuracy and completeness of Medline records, and the downstream impacts on librarian practices.

Investigating the impact of the NLM automatic indexer on information retrieval using citation metadata

Emma S Garlock[1], Joan C Bartlett[2]
[1]University of Ottawa, [2]McGill University

Introduction: As the implementation of automatic indexing for MeSH terms becomes more well-known, concerns are being raised in the field of health sciences librarianship on how these changes impact established searching practices. While other ongoing research investigates the accuracy and reliability of automatic indexing on a per-citation basis, this work analyzes overall trends and performance of the algorithm for chemistry and genetics research. **Methods:** 4302 citations published between November 2020 and March 2023 had their relevant information fields extracted via NLM's efetch and xtract tools on July 25th, 2024. This data was combined

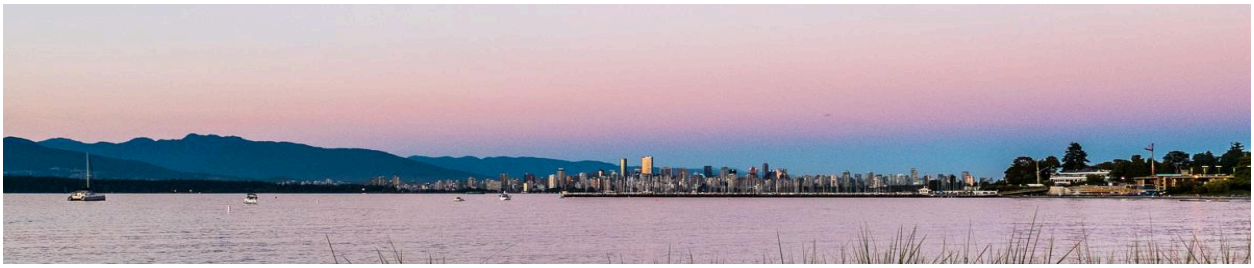


with MeSH data downloaded from the Ontology Lookup Service on September 4th, 2024. All analyses were completed in R. To evaluate the potential impact of stemming on term overlap, Porter Stemming was applied using the Tokenizer and SnowballC packages. **Results:** Results generally support the claim that automatic indexing decreases the time required for a citation to receive indexing. There is variability in how well search fields overlap for indexing methods, but overall topic harmonization increases as terms are tokenized and stemmed. Manually indexed citations tend to have a higher degree of field overlap, which aligns with the finding that the average number of MeSH terms is higher for manually indexed citations. **Discussion:** This work builds on feedback from previous presentations and provides a more detailed and large-scale investigation into the impact of the automatic indexing algorithm and its impact on health librarianship.

Optimizing communication and data collection for a systematic review team using Microsoft Power Automate®

Emily Jones, Carrie Baldwin-SoRelle, Rebecca Carlson
University of North Carolina

Background: Libraries with systematic review (SR) services track and collect data on requests to manage workload and to make administrative decisions like hiring or acquiring resources based on demand. Librarians rely on technology, often selected based on institutional subscriptions, for internal tracking, communication, and data collection. However, many libraries rely on manual data entry despite available low-code software like Microsoft Power Automate or Zapier that could automate and optimize team workflows. This case study describes how a SR coordinator used Power Automate flows to automate email reminders, centralize workflows, collect data, and ensure requests were claimed by librarians across a large team. **Description:** We created a Power Automate workflow to automatically email our team of a new request upon submission. This information is transferred to our tracking system, Microsoft Lists, which is embedded into our Teams site for convenience. Librarians can claim requests and add tags, notes, or files. Finally, the form submission updates a backup Excel file we use for statistics and visualizations. These processes ensure information is centralized and automated, so team members do not have to locate or update information manually. **Conclusion:** We demonstrate how to optimize and integrate existing tools using low-code software. This strategy is not exclusive to Microsoft and is transferable to Google or other major office management software. Additional integrations including Planner are available for those preferring Kanban-style tools.



Workshop - *Room 2311*

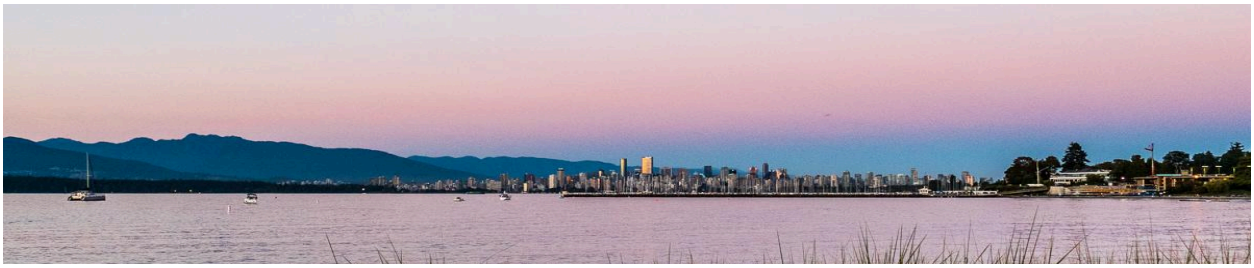
Getting comfortable with context: An introductory qualitative research methods workshop
Robin Parker[1], Lindsey Sikora[2], Catherine Giroux[3]
[1]Dalhousie University, [2]University of Ottawa, [3]McGill University

Topic: Using examples from their own doctoral research, the workshop leaders will walk participants through the basics of qualitative research methods. This introductory session will help participants get comfortable with the key parts of qualitative research design, such as aligning the purpose, philosophy of science, research questions, methodology, and the methods for collecting and analyzing data. With hands-on activities in small and large groups, participants will explore how to rigorously design and report qualitative research. For librarians and health sciences educators more familiar with the methods commonly used in knowledge synthesis and quantitative research, the purpose and assumptions of qualitative research in health and social settings might feel a bit unfamiliar. This workshop will introduce alternative ways of exploring research questions, focusing on understanding what's happening in specific situations or contexts. Don't know what "philosophy of science" means for research methods? No problem! The workshop leaders will break it down in an easy-to-understand way and introduce some common research philosophies and paradigms. Drawing from their own research experiences, the instructors will share some challenges of trying out new research methods and the possibilities that qualitative research opens up to critically dig into the issues of an increasingly complex world. This workshop offers a chance to broaden your research toolkit or explore a new approach for your next research project. **Objectives:** To develop an understanding of the essential elements of qualitative research design and enhance confidence in supporting or conducting qualitative research.

Other Content - *Room 2314*

Advocacy and Decision-Making in Health Libraries
Jennifer McKinnell[1], Amanda Ross-White[2], Zachary Osborne[3]
[1]McMaster University, [2]Queen's University, [3]Unity Health Toronto

It is difficult to remember when our health libraries were not facing significant challenges. Funding cuts, staff reductions, space reallocations, and health library closures have become all too common. Decision-makers must better understand the critical value our libraries and library teams bring to their organizations. Learn how to strategically define and draft organizational values, priorities, and strengths and effectively communicate them to institutional leaders. This facilitated discussion will focus on advocacy's role in helping solo librarians and library leaders define the value and impact of services. Pre-readings will be shared, and participants will have time to draft and reflect on advocacy strategies, explore writing value statements, and use them to direct their professional practice and refine their communication approaches. Group discussions and exercises will help participants think about how to develop strategies for



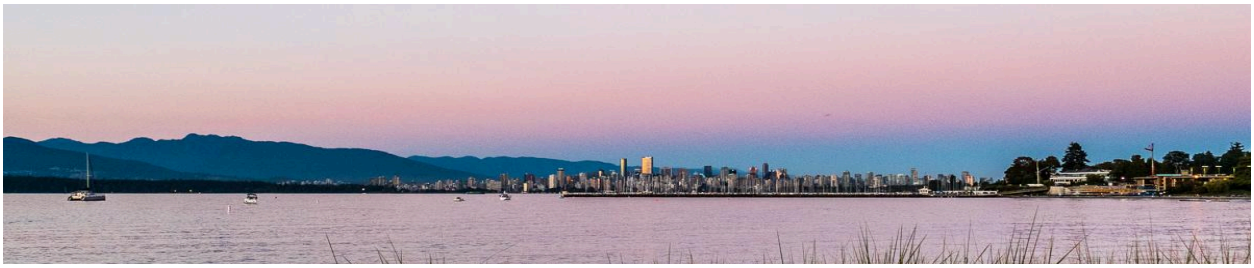
supporting health library teams showcase services, demonstrate and promote their greatest strengths, manage difficult situations, navigate funding shortages, and communicate our essential contributions to the healthcare sector. **Learning Outcomes:** 1) Identify what information is needed to help inform difficult workplace decisions. 2) Define and articulate an advocacy strategy to direct and showcase library work. 3) Use value statements to discuss the library's vital role within larger organizational structures. Pre-readings and worksheets will be provided. The session will begin with a facilitated discussion followed by group activities. Individuals will be encouraged to complete worksheets during the session. There will be opportunities to share work and solicit peer feedback.

3:30 PM - 4:30 PM

Posters - *Great Hall Foyer*

A fork in the road: Machine learning classifier or methodological search filter to identify systematic reviews?
Melissa Severn, Alissa Epworth, Romney Adams
DistillerSR

Background: Systematic reviews (SRs) can be retrieved in several ways. One approach is a search filter designed to retrieve SRs in bibliographic databases such as PubMed. Another utilizes machine learning (ML) to sort articles into two mutually exclusive classes in online platforms such as DistillerSR. **Objective:** To test the performance of a binary ML classifier designed to identify SRs in DistillerSR against search filters designed to retrieve SRs in PubMed. **Methods:** Umbrella reviews will be identified, included SRs will be extracted to create a reference set. Each SR in the reference set will be verified as indexed in PubMed. Two SR search filters will be tested: a narrow SR filter and a broad SR filter. A binary ML classifier developed by DistillerSR to identify SRs will be used, informed by the reference set and a seed of non SR articles. The number of SRs from the reference set retrieved by the two search filters, and the number of SRs from the reference set correctly identified as a SR by the ML classifier will each be recorded discretely. **Results:** Relative recall, precision and F1 score will be calculated for each set. Recommendations will be made on when to apply a search filter or ML classifier to a search. **Conclusions:** Different approaches to limiting search results to specific study designs can influence the overall search strategy. The objectives of the project and resource requirements need to be considered when deciding on the approach.



A Review of Library Services and Supports for the University of Prince Edward Island's (UPEI) Growing One Health Programs

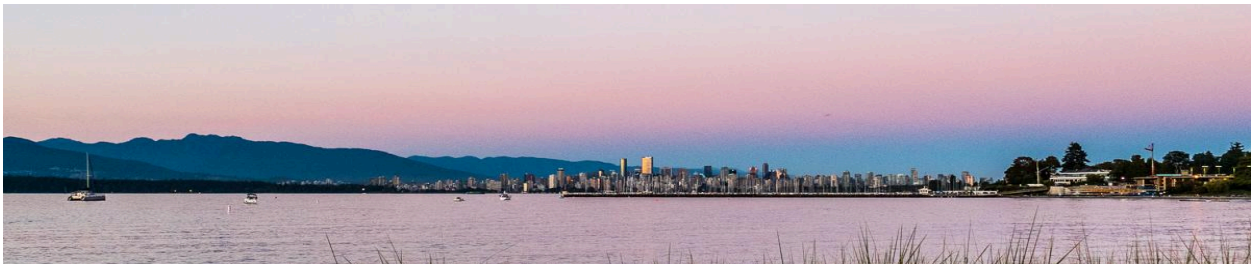
Keri McCaffrey, Kim Mears
University of Prince Edward Island

Introduction: One Health, the study of the interconnectedness of human and animal health with environmental health, is a growing discipline of study at many universities (1). With the establishment of a Faculty of Medicine, UPEI now hosts programs in all areas of One Health, including the School of Climate Change and Adaptation and the Atlantic Veterinary College. Limited literature exists on library supports specific to One Health programs. **Description:** After UPEI established a Faculty of Medicine and signed a Planetary Health (aka One Health) declaration, the Robertson Library reviewed its services and programs to ensure sufficient support for the discipline. Staffing, collections, and information literacy (IL) instruction were identified as key areas to augment. **Outcomes:** Technician staffing was adequate, however, a librarian position was restructured to include liaising with the veterinary medicine program alongside environmental disciplines, in addition to a new medical librarian position. Health resources were expanded through the medical program funding, and subject-specific funds were used for increasing One Health collections. New resources were identified, and proposals were brought forward. IL instruction was varied across the programs, but heavily present in veterinary medicine. **Discussion:** As a small institution, supporting the discipline of One Health requires collaboration. While IL occurs in One Health disciplines, there is room to increase instruction in climate change and environmental studies. Future plans include continued efforts in IL for the first cohort of the medical program (to begin fall 2025) as well as the creation of a One Health subject guide. 1. World Health Organization. One Health [Internet]. 2017 [cited 2025 Jan 15]. Available from: https://www.who.int/news-room/questions-and-answers/item/one-health

Building a Healthier Alaska: Connecting Alaskans to Essential Resources through the Alaska Medical Library

Anna Bjartmarsdottir, Jennifer McKay
University of Alaska

Overview: The Alaska Medical Library (AML), the state's only medical library, plays a critical role in providing reliable health information to diverse populations across Alaska, particularly in remote communities with limited access to internet or travel options. Located at the University of Alaska Anchorage (UAA), AML serves both academic and healthcare communities statewide, helping combat health misinformation and improve health literacy. AML's initiatives include a variety of outreach programs, partnerships, and resource development efforts aimed at increasing access to trustworthy health information. **Collaborative projects:** In collaboration with UAA's Area Health Education Center (AHEC), AML delivers health information to healthcare professionals, enhancing its visibility in Alaska's healthcare landscape. AML has also worked with the Peer Leader Navigators (PLN) program to produce multilingual health literacy materials, such as a vaccine confidence coloring book, which were distributed statewide via the Statewide Library Electronic Doorway (SLED). Additionally, AML's involvement in a health misinformation



project led to the creation of a LibGuide with resources on combating misinformation, which was made available to Alaskans through SLED. **Ongoing work:** Despite the conclusion of several grant-funded projects, AML continues to strengthen its partnerships and develop resources. Future efforts include creating an online continuing education course for healthcare providers and expanding health literacy initiatives for immigrant, refugee, and Alaska Native communities. These ongoing projects highlight AML's commitment to improving health literacy, combating misinformation, and enhancing access to health information across the vast and geographically challenging state of Alaska.

Dispensing Research Skills: Enhancing PharmD Students' Evidence-Based Practice

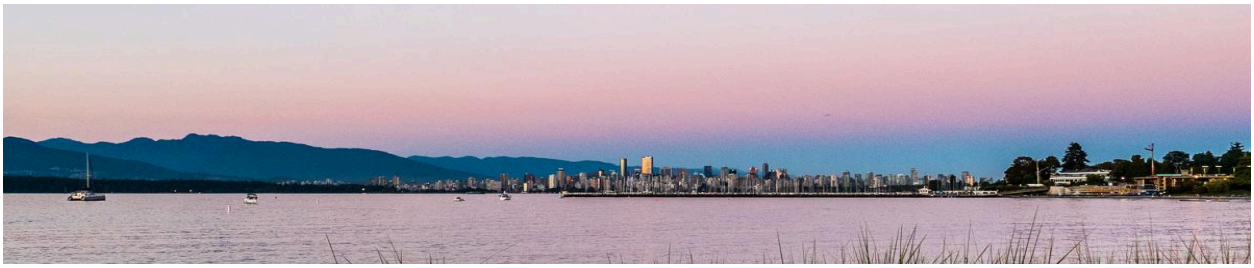
Caitlin Carter, Sarah Fallis, Nardine Nakhla
University of Waterloo

Introduction: Developing critical literature review skills is essential for pharmacy students to provide evidence-based patient care. In winter 2024, the course coordinator of the Advanced Patient Self-Care elective invited the librarian to co-teach a literature review tutorial with the course teaching assistant. As part of this elective, students (in small groups) were required to conduct a literature review, as well as use their results to create a clinical tool for pharmacists. **Methods:** Twenty third-year PharmD students enrolled in the elective participated in the optional one-hour tutorial, developed and co-taught by the librarian and teaching assistant. The tutorial covered an overview of literature review methods, such as research question, search strategy and eligibility criteria development, and critical appraisal. After the tutorial, the librarian and teaching assistant provided 1-on-1 support to each small group and were available for continued support leading up to the assignment deadlines. Effectiveness was assessed through student questions and feedback, as well as assignment outcomes. **Outcomes:** Students demonstrated increased confidence in using PubMed and constructing search strategies. Most reported finding the librarian's involvement effective and felt more comfortable conducting literature reviews. Three resulting clinical tools were selected for publication in a pharmacy practice magazine. Overall, student performance on assignments improved. **Discussion:** This interdisciplinary collaboration proved highly effective in enhancing students' literature review skills and learning experience. This successful model has become a regular feature of the elective and could serve as a template for other librarian-faculty partnerships in instruction across various disciplines.

Distributed Librarianship: Supporting UBC's Rehabilitation Students Across BC

Rachael Bradshaw[1], Aubrey Geyer[1], Zahra Premji[2]
[1]University of British Columbia, [2]University of Victoria

Background: UBC is the only academic institution in British Columbia that provides accredited master's degrees for rehabilitation professionals in Physical Therapy, Occupational Therapy, and Audiology and Speech Sciences. British Columbia is struggling with a shortage of rehabilitation professionals, leading to the expansion of UBC’s rehabilitation programs to satellite sites in Surrey, Prince George, and Victoria (Health Sciences Association of British Columbia, 2021). **Case**

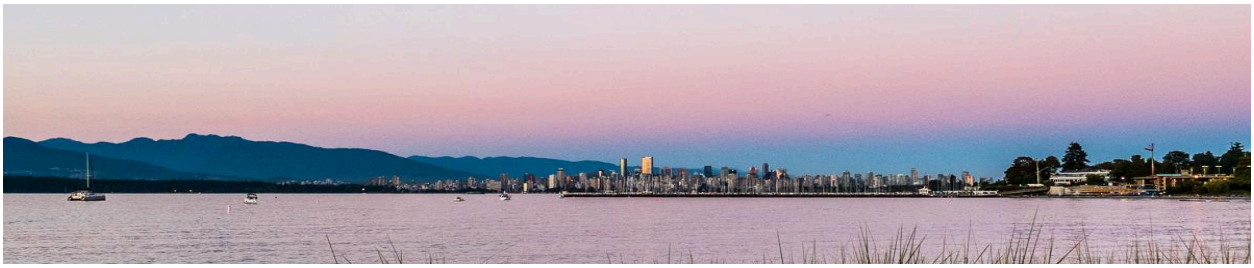


Presentation: UBC Library has adopted a distributed model of librarianship to match this distributed education model. The model was developed by librarians who support UBC's distributed Undergraduate Medicine program, but it has only been adopted by rehabilitation sciences within the last five years. In practice, our model consists of one coordinating librarian who supports the Vancouver cohort of each program and oversees the coordination of teaching, collections, and resource development for the entire program. Each distributed site has its own on-site librarian who supports their cohort as one part of their multi-faceted roles. **Conclusions:** This presentation will describe our model of library support for UBC's continually developing rehabilitation programs. We will outline the benefits of the model, including improving the learning experience for students through onsite teaching, reducing the burden of keeping up with program expansions, and bringing multiple perspectives into our work. We will also discuss challenges that we have faced, such as coordination with instructors at multiple sites and technical issues with hybrid teaching. Though this model is not without its challenges, it is nevertheless a novel way to ensure that all students in these distributed programs have equitable access to library support. Reference: Health Sciences Association of British Columbia. (2021, October). 'We're chronically understaffed': A report on public rehabilitative healthcare in BC. https://hsabc.org/sites/default/files/2022-10/hsa-chronically-understaffed-exec-summary-for-web.pdf

Effect of citation numbers and team members on the likelihood of and time needed to complete screening for systematic and scoping reviews

Emma Barrett-Catton, Emily Jones, Rebecca Carlson
University of North Carolina at Chapel Hill

Objective: To identify the effect that the total number of citations and team members has on the likelihood of completion and time needed for screening. **Methods:** We obtained institutional review data of a large research university from Covidence. Data included review name, type, area, date created and last active, number of collaborators, presence of librarian collaboration, and the number of citations imported, screened, and removed at each step. Data were cleaned to remove items that were not true reviews and were analyzed using SPSS linear regression and independent sample Mann-Whitney U tests. Outcomes included the effect of number of total citations, number of citations per collaborator, and librarian collaboration on the percentage screened and time needed to complete title/abstract and full-text screening. **Results:** The fewer citations and the fewer citations per collaborator, the more likely the team is to complete title/abstract and full-text screening, and the faster they will finish the screening process. This relationship was stronger for number of citations per collaborator than number of citations alone. There was no significant difference between the percentage screened in title/abstract for reviews with versus without librarian collaboration. However, reviews without librarian collaboration had significantly higher median percentage of full texts screened. **Conclusions:** This study allows librarians to provide more informed guidance to teams on elements that may increase the likelihood of screening completion for systematic and scoping reviews. It emphasizes the importance of narrowing the scope of a review or increasing the size of the team



to make screening completion more achievable.

Finding the S (studies) before the R (reports) in SRs of intervention effects

Zahra Premji[1], Chris Cooper[2], Christine Worsley[3], Eve Tomlinson[2], Sarah Dawson[2]. Emma Prentice[3]
[1]University of Victoria, [2]University of Bristol, [3]Tolley Health Economic

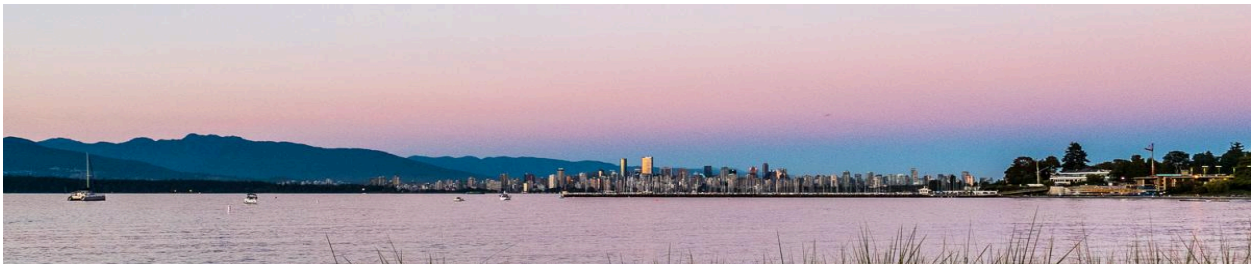
Objective: To describe a new process model of study identification specifically for randomized studies in systematic reviews of intervention effect. **Methods:** Identification of studies is a critical step in the conduct of systematic reviews of effectiveness. The prevailing approach to study identification in systematic reviews, referred to as 'The Conventional Approach,' (Cooper et al., 2018) prioritizes bibliographic database searching as the primary method of study identification, followed by searches of grey literature including registers and conferences, and supplementary search methods. Studies and study reports identified by all of these methods are then pooled for study selection. A new process model is proposed which separates the search for studies from the search for study reports, into distinct phases. We distinguish here between studies and study reports, the former being the focus of the first phase in this process model. **Results:** The proposed three phase process model will be described and illustrated. The implications of early study identification in phase one, on the subsequent bibliographic database search in phase two, will be highlighted. **Conclusions:** This new process model is an alternate to The Conventional Approach of study identification for use in complicated systematic reviews of intervention effectiveness. References: Cooper C, Booth A, Varley-Campbell J, Britten N, Garside R. Defining the process to literature searching in systematic reviews: a literature review of guidance and supporting studies. BMC Medical Research Methodology 2018;18(1)

How on EARTH do you assess Risk of Bias in information retrieval studies? We didn't know either, so we drafted a tool

Chris Cooper[1], Eve Tomlinson[1], Zahra Premji[2], Anna Brown[3], Rachel Court[3]
[1]University of Bristol, [2]University of Victoria, [3]University of Birmingham

Background: We are undertaking a Cochrane review evaluating the effect of supplementary search methods compared to bibliographic searching to identify randomised studies. Cochrane requires an appraisal of the risk of bias of studies included in their systematic reviews. The standard tool recommended by Cochrane (RoB 2) covers interventions evaluated in randomised studies. This 'type' of study does not align with the information retrieval studies we anticipate finding (comparative case studies), so we designed our own risk of bias tool specific to information retrieval (IR) studies. **Methods:** We undertook a review of the following risk of bias tools identified via the Latitudes website.(1) The aim of the review was to determine the applicability of these tools to IR studies:

- RoB 2;
- EPOC - suggested risk of bias criteria for EPOC reviews [proposed criteria for RCTs, non-RCT, and controlled before-after]
- ROBIS
- Newcastle-Ottawa Quality Assessment Scale Case Control Studies

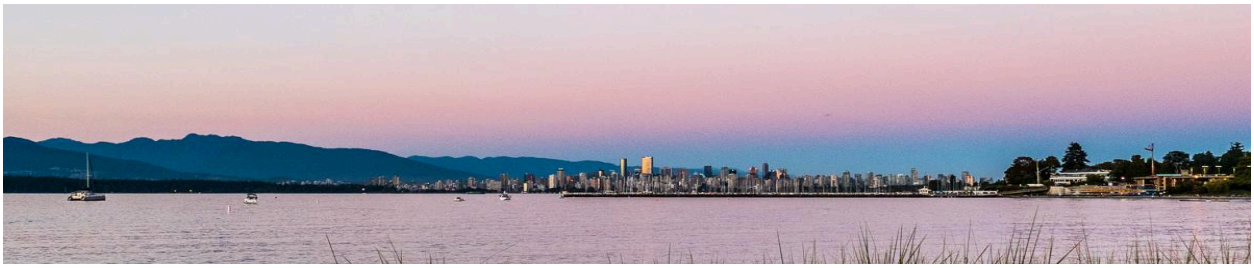


- Scale for the Assessment of Narrative Review Articles (SANRA)

This review was then supplemented by a methodological review by Tomlinson and colleagues who evaluated common challenges and suggestions for risk of bias tool development.(2) **Results:** Our proposed tool has three domains: review of study protocol, the comparison, and outcomes. We provide guidance on how to judge risk of bias, adopting the signaling questions from the ROBIS tool. **Conclusions:** This is the first tool to appraise risk of bias in IR studies. We will report the tool in full for the first time, providing a worked example of the tool and findings.
References. 1. LATITUDES Network. LATITUDES Network. 2017. URL: https://www.latitudes-network.org/about/ (Accessed September 2024). 2. Tomlinson E, Cooper C, Davenport C, Rutjes AWS, Leeflang M, Mallett S, et al. Common challenges and suggestions for risk of bias tool development: a systematic review of methodological studies. Journal of Clinical Epidemiology 2024;171111370

Library of Search Strategy Resources (LSSR): bringing together search resources for literature searching
Mark Mueller
Saskatchewan Health Authority

The Library of Search Strategies Resources (LSSR) website is an open access resource for anyone sourcing and developing search strategies for health science related topics. While there are many sites and repositories that provide access to filters and hedges on the web (i.e. ISSG) to help with the duplication of efforts and topical overlaps, sometimes they are difficult to find and/or not immediately accessible to the public. With this in mind, the purpose of the LSSR is to provide searchers access to a comprehensive and centralized resource of dispersed resources for search filter development. The "Collections" page lists databases and collections (i.e. ISSG) where users can find search filters that they can adapt and integrate into their needs. The LSSR also contains links to free online tools, quality assurance resources, learning resources that users can use to support search strategy development. The LSSR is a resource designed to assist searchers at any stage of the search filter development process. The LSSR was developed by an international team of librarians passionate about searching. With representation from Canada, United States, Western Europe, and other parts of the world, our aim is to create a resource for a global audience. Future projects for the LSSR include building strategic partnerships professional organizations; monitoring emerging technologies; and creating communities of practice to assist with the development of new and innovative content.



Obtaining Grants in Health Sciences Librarianship: Advice, approach, and strategies for librarian researchers.

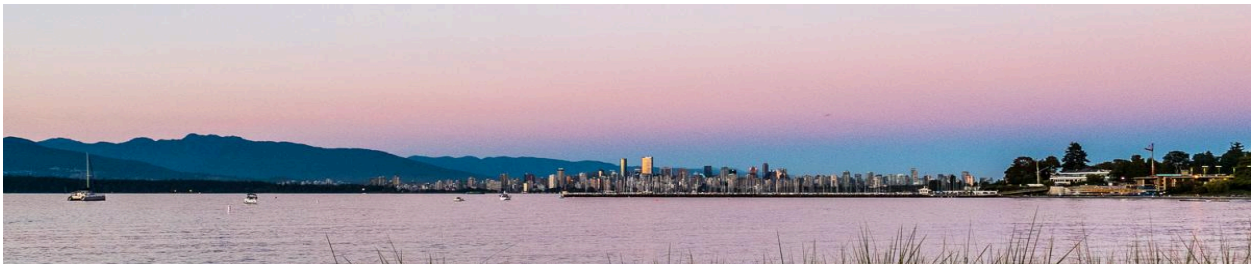
Amanda Ross-White[1], Alla Iansavitchene[2]
[1]Queen's University, [2]London Health Sciences Centre

Background: Grant writing in health sciences librarianship is intricate and often daunting, particularly for first-time applicants. Despite its critical importance in advancing library resources and services, limited literature exists on this domain's specific challenges and strategies. This project reflects on personal experiences, lessons learned, and evidence-informed recommendations for navigating health sciences librarianship's grant writing and funding landscape. **Description:** The grant application process involves multiple stages, from conceptualizing research ideas to responding to critiques following a rejection. Rejection is common, even among seasoned researchers, but it need not signal the end of a grant's journey. Instead, it presents an opportunity to refine the proposal, address reviewers' feedback, and resubmit a stronger application. Key steps in this iterative process include consulting co-investigators for expert insights, refining hypotheses to align with funding priorities, and drafting concise introductory statements communicating the project's significance and objectives. **Program Conclusion:** Our recommendations underscore the importance of understanding and leveraging the peer review process to your advantage. By embracing rejection as a natural step toward eventual success, librarian researchers can transform challenges into opportunities. Persistence, strategic revisions, and adaptability are essential to securing funding and advancing novel ideas in health sciences librarianship. This project aims to inspire and empower librarians to approach grant writing with resilience and strategic intent, ultimately enhancing their ability to secure funding for impactful library initiatives.

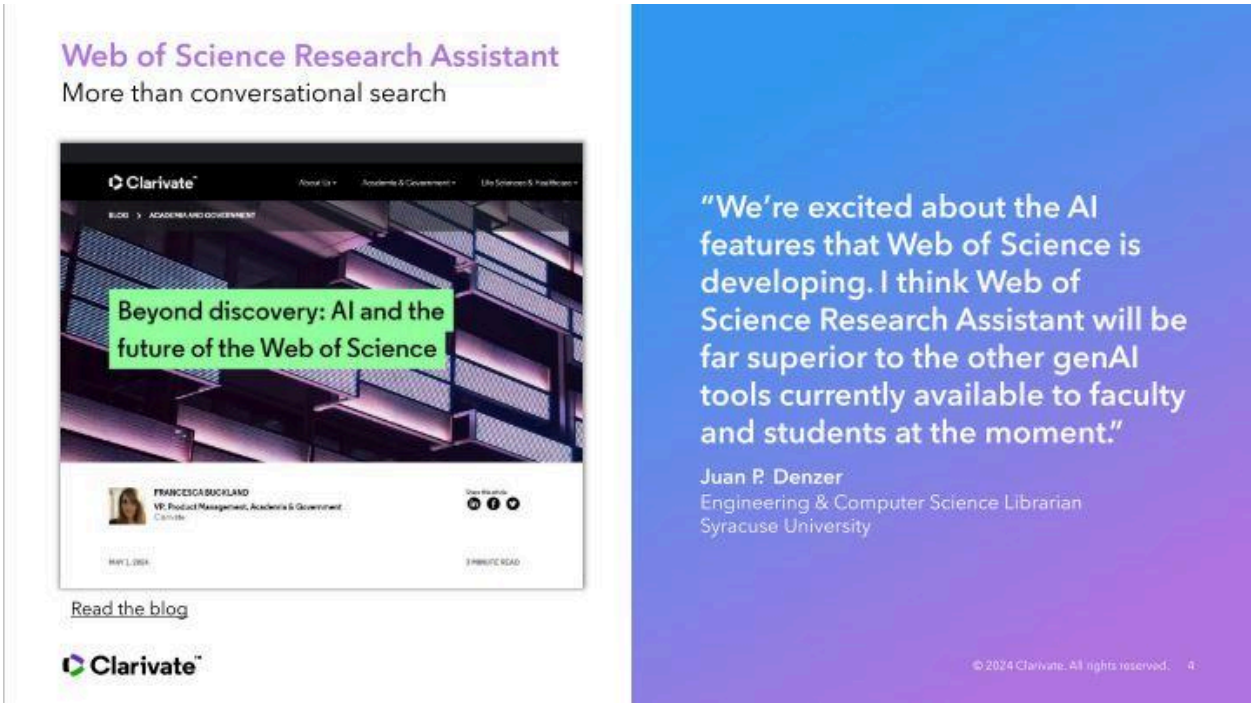
Still a filtering failure? Automated indexing using MTIX versus MTIA and its impact on human study filtering for knowledge synthesis

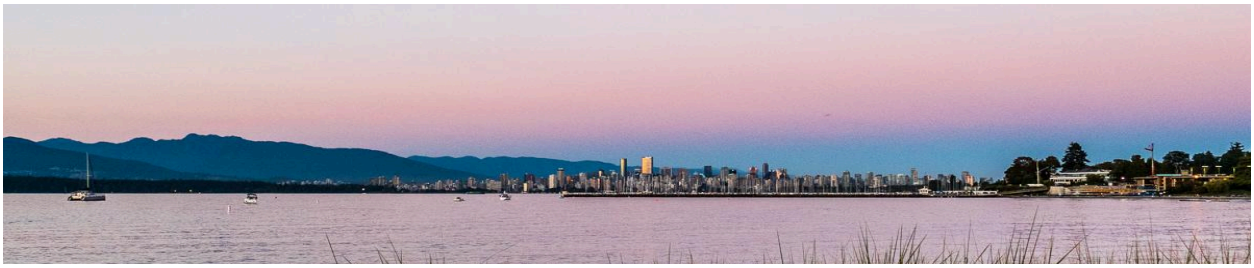
Nicole Askin, Tyler Ostapyk, Carla Epp
University of Manitoba

Introduction: The search filter 'exp animals/ not humans.sh' is a well-established method in knowledge synthesis used to exclude non-human studies in Ovid Medline. We previously reported on the impact of the Medical Text Indexer-Auto (MTIA) algorithm for automated assignment of MeSH terms on the utility of this filter for knowledge synthesis projects. We sought to update our reporting to account for the 2024 implementation of the new Medical Text Indexer-NeXt Generation (MTIX) algorithm, which uses a machine-learning model for MeSH term assignment. **Methods:** As in the previous study, we conducted a search in Ovid Medline using the Cochrane Highly Sensitive Search Strategy. We isolated the results indexed by the automated method and specifically excluded by the non-human-studies filter in the timeframe since MTIX was implemented. We screened these results using Covidence to identify human studies. **Results:** The sample demonstrated a significant improvement over our assessment of MTIA: only 1% (25/2285) of studies screened were inappropriately excluded human studies - compared to 4.2% in the MTIA assessment - and none of these were in a clinical context. Records describing



both animal and human studies continue to be a common source of inappropriate exclusion.
Discussion: Our findings suggest that the filter is much less likely to inappropriately exclude human studies indexed by MTIX (records indexed beginning April 2024) than MTIA (studies indexed between 2019 and April 2024). However, we still recommend caution with the use of the human studies filter, especially for records indexed between 2019-2024.





Friday June 6, 2025

9:00 AM - 10:30 AM

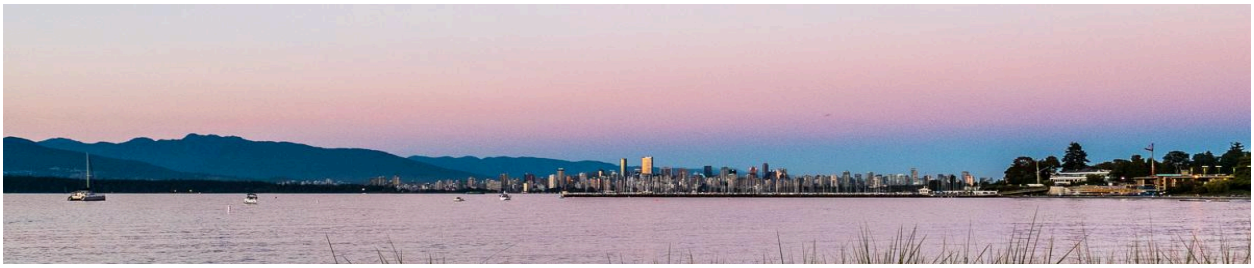
Contributed Paper & Panel - *Great Hall*

Assessing the Canadian digital health landscape: opportunities for improved data sharing and research
Alyssa Foote
World Data System

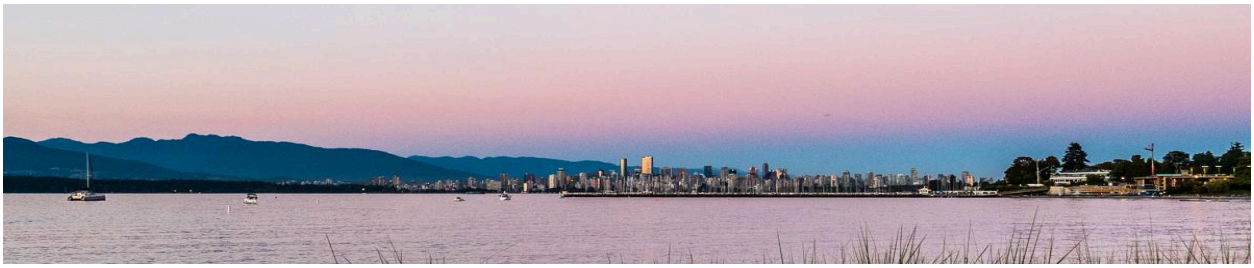
Introduction: The Canadian digital health landscape is a complex ecosystem with extensive data crucial for research and innovation. This analysis provides an overview of key national and provincial organizations in health data stewardship, mapping their roles, interconnections, and essential data repository attributes to highlight current health data management practices in Canada. **Method:** Identified through prior knowledge, re3data.org, and Google searches, a selection of Canadian health data entities was examined for description, users, partners, data accessibility, and re3data presence. Data repositories were further analyzed against key attributes drawn from the Research Data Alliance's "Common Descriptive Attributes of Research Data Repositories" report. **Discussion:** This analysis demonstrates that the diverse Canadian health data ecosystem exhibits varying maturity levels in data management and access. Significant variations were observed in accessibility, data catalogues, metadata standards, use of a persistent identifier (PID) system, and re3data entries, indicating inconsistencies in discoverability and transparency. **Recommendations:** To maximize the impact and FAIR (Findable, Accessible, Interoperable, Reusable) use of Canadian health data, this report recommends enhancing data management practices, including improved metadata standards, increased PID system adoption, and widespread data repository certification. The World Data System can support this through knowledge sharing and advocating for international standards. **Conclusion:** The Canadian digital health data landscape shows strengths in research and collaboration, but needs to improve in other areas such as standardization and metadata. Addressing these issues with World Data System support is crucial for a more robust and interoperable infrastructure for effective health research, benefiting all Canadians.

Advancing Health Research in Canada Through Open Science
Alyssa Foote[1], Kimberlyn McGrail[2], Eugene Barsky[2], Zsuzsanna Hollander[3]
[1]World Data System, [2]University of British Columbia, [3]Genome BC

This panel will explore the critical role of open science principles in transforming healthcare research in Canada. A diverse panel will share their expertise: a research data librarian will discuss the data discoverability process in Canada and the role of persistent identifier infrastructure in supporting linked data; a data scientist will provide insights into the technical and ethical considerations of implementing federated data systems and leveraging open data for research; and a health research professional will present strategies for enhancing data accessibility and interoperability within the Canadian healthcare research landscape. Following



these brief presentations, a moderated discussion led by a World Data System representative will delve deeper into: a) the significance of federated health data systems, which enable collaborative research while preserving data privacy and security; b) the crucial role of persistent identifiers in ensuring data discoverability and interoperability; and c) how open science practices, including data sharing, transparency, and reproducibility, can accelerate medical breakthroughs, improve patient outcomes, and foster a more equitable and innovative healthcare system.



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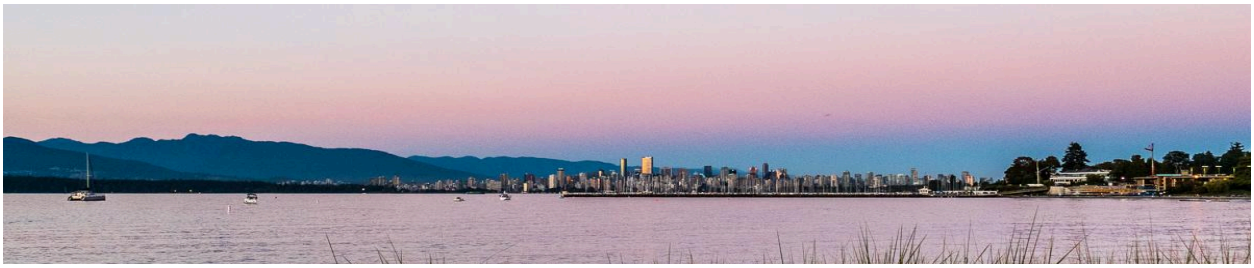

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A huge and heartfelt thank you to our many volunteers! You are essential to the success of the conference.

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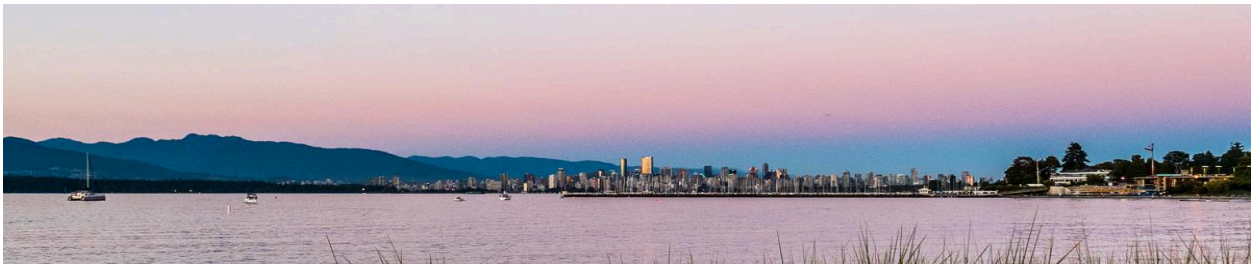
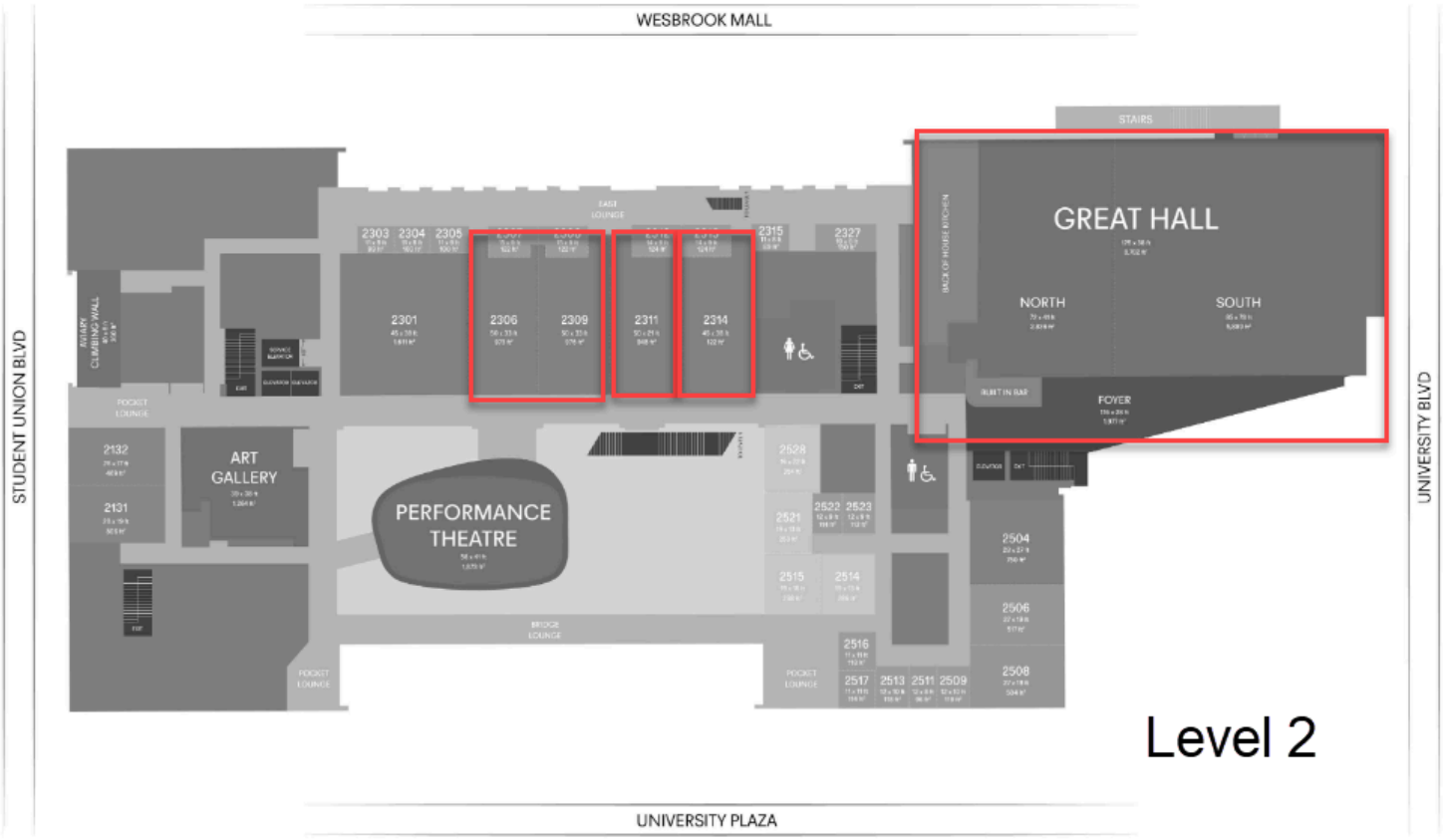


UBC NEST Map



The Exhibit Hall will be located on the North side of the Great Hall.

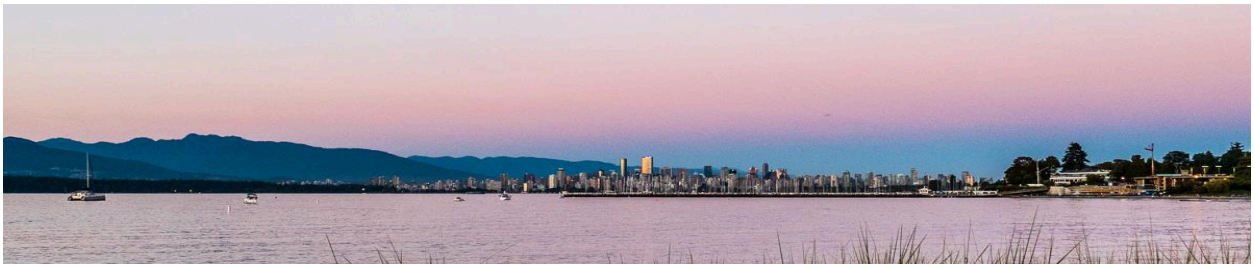
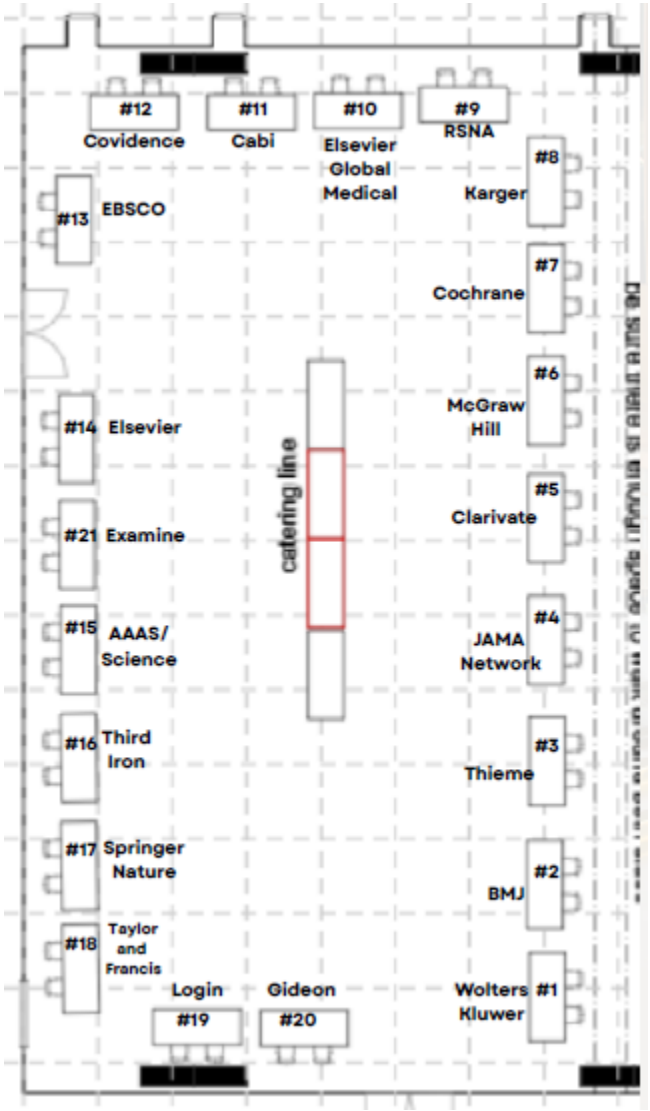
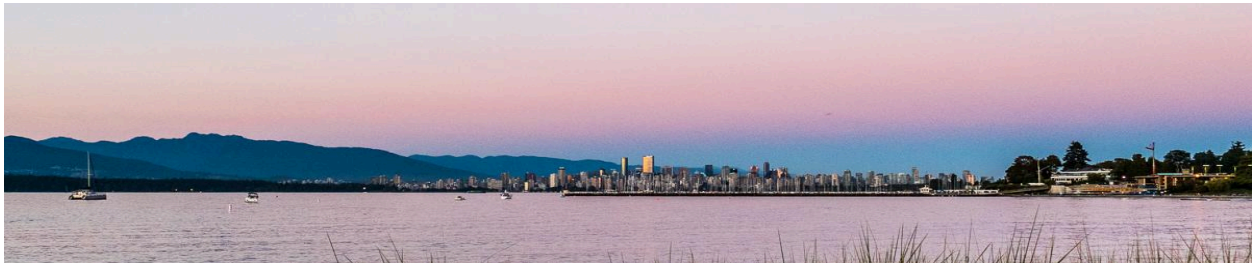


Exhibit Hall Floor Plan





Program at a Glance

CHLA CONFERENCE 2025

SCHEDULE AT A GLANCE

PLENARY SESSION | MEALS/BREAKS* | SOCIAL | CONTRIBUTED CONTENT | BOARD | OTHER

*Please note that exhibits will be available to view at all Meal/Break times

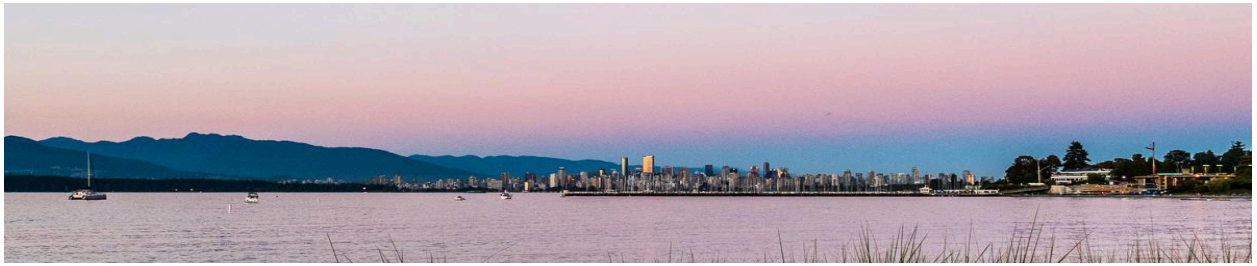
6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00

TUES. JUNE 3

- Board Meeting
- First Timers' Reception
- Opening Reception
- CE: Disability in the Workplace
- CE: Equity Diversity, and Inclusion: Cultural Awareness and the Intricacies of Allyship
- UBC Farm Tour
- Registration Opens

WED. JUNE 4

- Morning Walk
- Opening Keynote: Maura Brown
- Workshop
- Workshop
- Workshop
- Dine Arounds
- Breakfast/ Exhibits
- Vendor Talks
- Break
- Contributed Content: Artificial Intelligence
- Lightning Talks
- Lunch/ Exhibits
- Contributed Content: Knowledge Synthesis
- Contributed Content + Lightning Talks: Social Justice & Outreach
- Break
- Contributed Content: Library Services & Collections
- Contributed Content: Knowledge Synthesis
- Registration Opens



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SCHEDULE AT A GLANCE

PLENARY SESSION
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MEALS/BREAKS*
BOARD
SOCIAL
OTHER

*Please note that exhibits will be available to view at all Meal/Break times

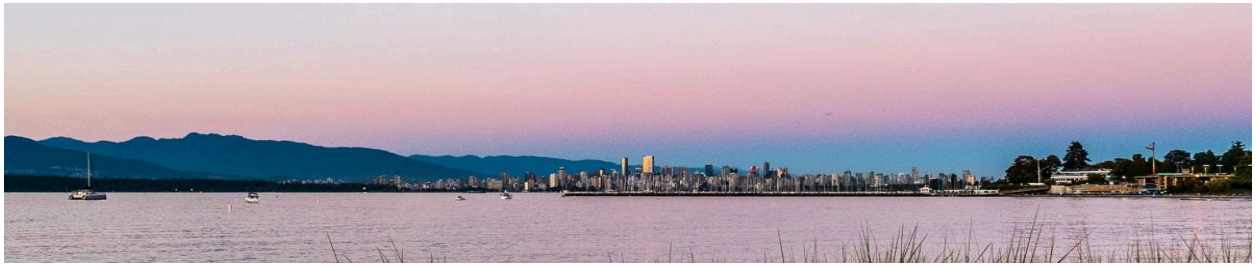
6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00

THURS. JUNE 5

- Plenary Session: Artifical Intelligence
- Workshop
- Workshop
- Poster Session
- Awards banquet
- Breakfast/ Exhibits
- Break
- Contributed Content: Collections and Outreach
- Lunch/ Exhibits
- Contributed Content: Advocacy and Decision-Making in Health Libraries
- Break
- SIG Meetings
- Vendor Talks
- Chapter Presidents Lunch
- Contributed Content: Lightning Talks & Papers
- Contributed Content: Knowledge Synthesis
- Registration Opens

FRI. JUNE 6

- Contributed Content: Health Research
- Closing Keynote: Devon Greyson
- Self-Guided Tour: MOA
- Closing Remarks
- Breakfast/ Exhibits
- Break
- Registration Opens



Programme en Bref

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REPAS/PAUSES*
CONSEIL D'ADMINISTRATION
ACTIVITÉS SOCIALES
AUTRE

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6:00	7:00	8:00	9:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00

MARDI 3 JUIN

- Réunion du conseil d'administration
- Accueil des nouveaux venus
- Réception d'ouverture
- Formation continue
- Formation continue
- Evénements sociaux
- Ouverture du bureau d'inscription

MERCREDI 4 JUIN

- Exercices du matin
- Session plénière: Maura Brown
- Atelier
- Atelier
- Atelier
- Souper aux alentours
- Déjeuner/ Expos
- Pause café
- Contenu contribué: Intelligence artificielle
- Dîner/ Expos
- Contenu contribué: Synthèse de connaissance
- Pause café
- Contenu contribué: Services de bibliothèque & collections
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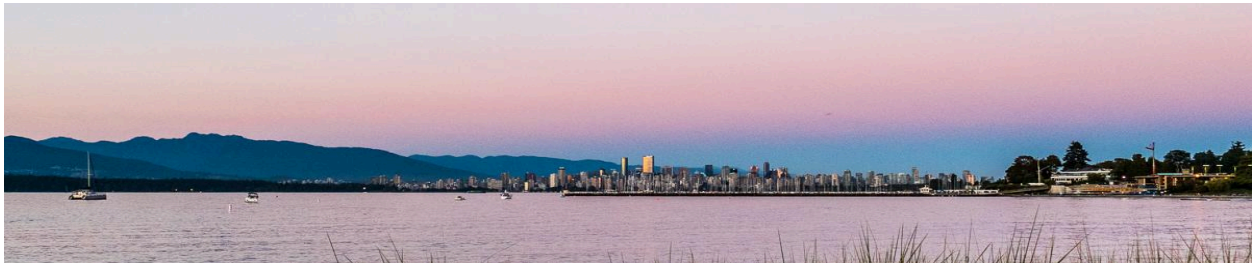
- Contenu contribué: Synthèse de connaissance
- Inscription



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- SESSION PLÉNIÈRE
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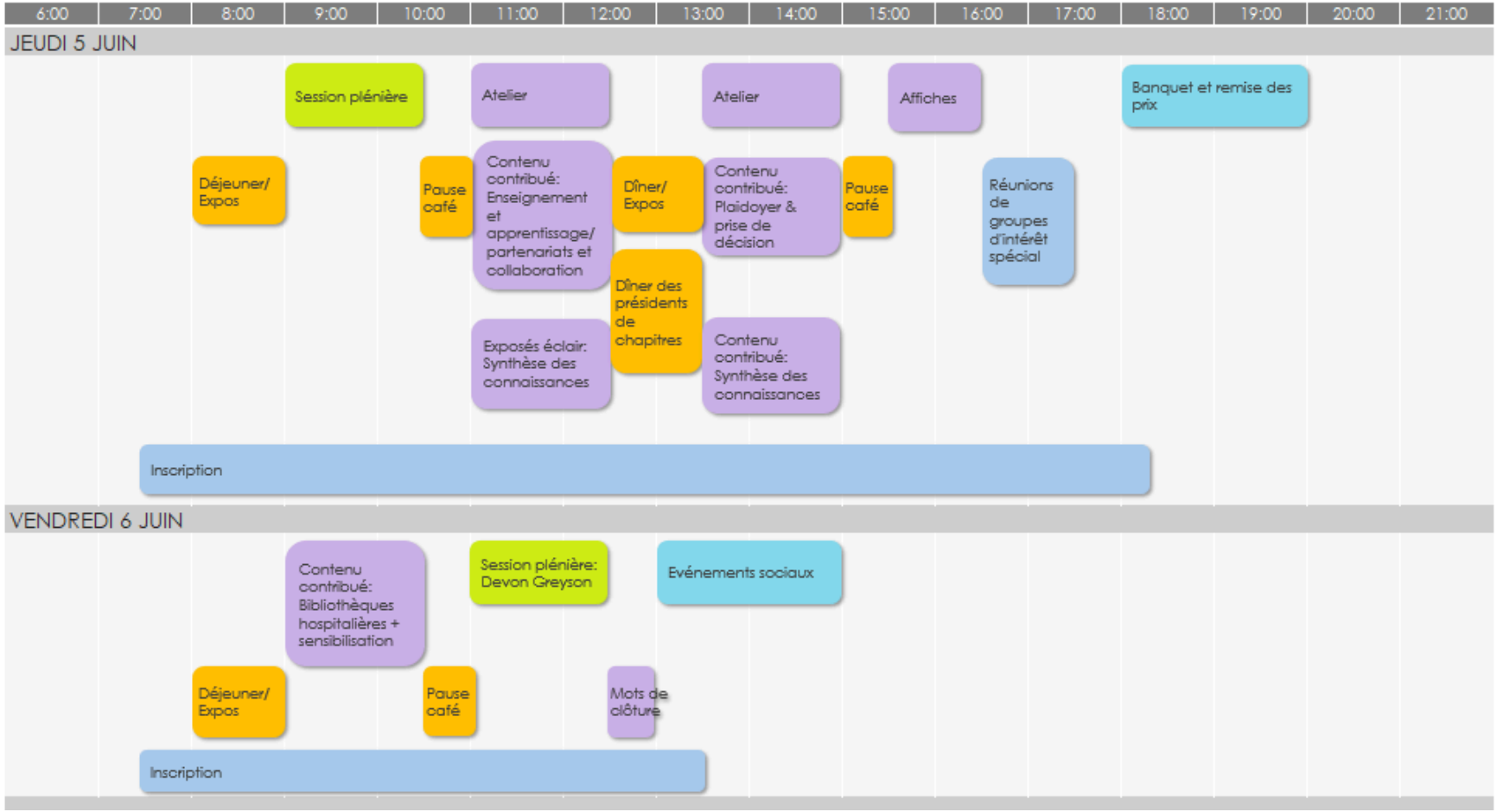

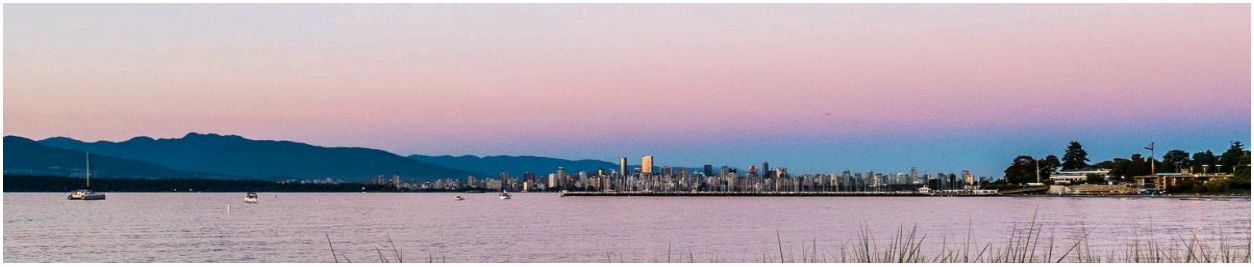

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