

Information on IMIA

International Medical Informatics Association

IMIA BOARD

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2004-2007

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IMIA Web site: www.imia.org

Regional Groups

EFMI: European Federation for Medical Informatics

Liaison:

Assa Reichertz, Israel

IMIA-LAC: Federation of Health Societies in Latin America

President:

Lincoln de Assis Moura, Brazil

APAMI: Asian Pacific Association for Medical Informatics

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WELCOMETOIMIA!

General

The International Medical Informatics Association is an independent organization established under Swiss law in 1989. The organization was established in 1967 as Technical Committee 4 of the International Federation for Information Processing (IFIP). In 1979, it evolved from a Special Interest Group of IFIP to its current status as a fully independent organization. IMIA continues to maintain its relationship with IFIP as an affiliate organization.

The organization also has close ties with the World Health Organization (WHO) as a NGO (Non Government Organization).

The working language of IMIA is English.

Purpose, Goals, Objectives

IMIA plays a major global role in the application of information science and technology in the fields of healthcare and research in medical, health and biomedical informatics. The basic goals and objectives of the association are to:

- promote informatics in health care and research in health, bio and medical informatics;
- advance and nurture international cooperation;
- stimulate research, development and routine application;
- move informatics from theory into practice in a full range of health delivery settings, from physician's office to acute and long term care;
- further the dissemination and exchange of knowledge, information and technology;
- promote education and responsible behaviour; and
- represent the medical and health informatics field with the World Health Organization and other international professional and governmental organizations.

In its function as a bridge organization, IMIA's goals are:

- moving theory into practice by linking academic and research informaticians

with care givers, consultants, vendors, and vendor-based researchers;

- leading the international medical and health informatics communities throughout the 21st century;
- promoting the cross-fertilization of health informatics information and knowledge across professional and geographical boundaries; and
- serving as the catalyst for ubiquitous worldwide health information infrastructures for patient care and health research.

Membership

IMIA membership consists of National, Institutional and Affiliate Members and Honorary Fellows.

National Members represent individual countries. A member is a society, a group of societies, or an appropriate body, which is representative of the medical, and health informatics activities within that country. In the absence of a national member society, IMIA accommodates involvement by individuals through a "Corresponding" membership in developing countries and provides encouragement to form a representative society.

National IMIA members may organize into regional groups. Currently, such regions exist for Latin America and the Caribbean (IMIALAC), Europe (EFMI), Asia/Pacific (APAMI) and Africa (Helina).

Institutional Members consist of corporate and academic members. Corporate members include vendor, consulting, technology firms as well as national professional organizations. Academic members include universities, medical centres, research centres and other similar institutions.

Affiliate Members consist of international organizations that share an interest in the broad field of health and medical informatics. In addition to WHO and IFIP, the International Federation of Health Records Organizations (IFHRO) is an affiliate member of IMIA

Honorary Fellows are individuals who have demonstrated exceptional meritori-

International Medical Informatics Association (Continued)

ous service in furthering the aims and interests of the IMIA; fellowship is conferred for life. In 2004 the honour of fellowship was awarded to Dr. K.C. Lun, IMIA Past President, from Singapore for his demonstrated leadership and his many years of self-less service to IMIA

Governance

IMIA is governed by a General Assembly that consists of one representative from each IMIA National and Institutional member, Honorary Fellows, Chairs of IMIA's Working Groups and a representative from IFIP, the World Health Organization, and each of IMIA's Regions. Only National Members have full voting rights. The General Assembly meets annually.

The Board of IMIA, elected by the General Assembly, conducts the association's affairs. The day-to-day operations are supported by the IMIA's Executive Director who is also responsible for IMIA's electronic services.

The officers of the Board and IMIA's vice presidents vigorously pursue IMIA's mission to:

- Monitor the range of special interest areas and focus support on new developments.
- Capitalize on the synergies and collective resources of IMIA's constituents.
- Minimize fragmentation between scientific and professional medical informaticians.
- Ensure successful adaptation to changes in the medical informatics marketplace and discipline.
- Raise the profile and awareness of IMIA within and outside of the IMIA organization.
- Encourage cooperation between the scientific and commercial health informatics communities.
- Equitably balance support to emerging and existing IMIA members.
- Establish and maintain cooperation and harmony with organizations that emerge to address medical informatics issues.
- Continue to position IMIA as the gatekeeper for medical informatics issues in the international community

Activities

MEDInfo's

IMIA organizes the internationally acclaimed tri-annual "World Congress on Medical and Health Informatics", MedInfo. MedInfo 2007 will be held in Brisbane, Australia August 20-24, 2007. Potential participants and exhibitors are encouraged to visit their web site at www.medinfo2007.org. The Health Informatics Society of Australia Ltd (HISA) is the hosting society for MedInfo 2004. This marks the 1st time that a MedInfo has been held "Down Under".

Previous MedInfo's have been held in Stockholm, Sweden (1974), Toronto, Canada, (1977), Tokyo, Japan (1980), Amsterdam, The Netherlands (1983), Washington, USA (1986), Beijing/Singapore (1989), Geneva, Switzerland (1992), Vancouver, Canada (1995), Seoul, Korea (1998) London, United Kingdom (2001) and San Francisco, USA (2004).

Working and Special Interest Groups

The IMIA family includes a growing number of Working and Special Interest Groups, which consist of individuals who share common interests in a particular focal field. The groups hold Working Conferences on leading edge and timely health, medical and bio-medical informatics issues.

Current and future activities of the Working and Special Interest Groups are posted on the IMIA Website at www.imia.org.

Activities & Initiatives

IMIA code of Ethics

IMIA reached a major milestone by the adoption of the "IMIA Code of Ethics for Health Information Professionals". The approval of the code in 2002 was the culmination of years of ongoing effort on the part of IMIA's Working Group on Data Protection in Health Information Systems under the leadership of Prof. Ab Bakker (The Netherlands). The primary author of the code, based on the contributions of a multiplicity of individuals, agencies and organizations, is Dr. Eike-Henner W. Kluge (Canada). The code has been translated into several languages and is freely available to the public at IMIA's website www.imia.org.

International Medical Informatics Association (Continued)

IMIA-UMIT Medical Informatics Award of Excellence

Through the generosity of TILAK, one of IMIA's Corporate Institutional members, IMIA approved the creation of the tri-annual IMIA-UMIT Medical Informatics Award of Excellence. This honour is awarded to an individual whose personal commitment and dedication to Medical Informatics has made a lasting contribution to medicine and health care through their achievements in research, education, development or application in the field of medical informatics. The Award includes a Diploma, a cash prize and the opportunity to give the IMIA/UMIT Medical Informatics Award Lecture at a plenary session at MedInfo 2004.

The first recipient of this prestigious award was Prof. Francois Grémy. Prof. Grémy established TC4, a Technical Committee within the International Federation for Information Processing (IFIP) in 1967. As the first chairman and moderator of TC4, Grémy is considered to be the one of the founders of its renamed and refocused successor, the International Medical Informatics Association (IMIA).

IMIA Strategic Alignment Survey

IMIA has instituted a project to collect the opinions and thoughts of its members in respect to where IMIA needs to be going over the next 6 Years. Dr. Nancy Lorenzi, IMIA President, championed this process in early 2004 in order to determine how IMIA members can shape IMIA's future - to be a more visible and important organi-

zation by better meeting the needs of members and the global health informatics community worldwide. It is anticipated that this will result in the development of a strategic plan for IMIA at the 2005 IMIA General assembly meeting.

General

IMIA continues to develop its communication capabilities through its web-site www.imia.org. The site contains profiles on its members, working groups and activities. A dynamic database is employed to facilitate user-friendly communications for news, announcements, and an events calendar for the public, and access to e-mail communications, minutes, reports and association information for its members.

In addition, IMIA has reached an agreement with one of its corporate members, Schattauer GmbH, whereby *Methods of Information in Medicine*, publishes IMIA news and a Calendar of events in each issue of the journal.

Schattauer's *Methods of Information in Medicine* and Elsevier Science's *International Journal of Medical Informatics* were accorded the status of "an Official Journal of the International Medical Informatics Association" in 2003.

IMIA is constantly striving to further the services it provides to its members and the informatics community in general by promoting free interaction among and between its member network and the medical and health informatics community at large.

Progress Report by the President of IMIA

President:

Nancy M. Lorenzi, Ph.D.
Professor of Biomedical Informatics and
Assistant Vice Chancellor for Health
Affairs
Vanderbilt University Medical Center
Nashville, Tennessee, USA
Email: nancy.lorenzi@vanderbilt.edu

The IMIA General Assembly met during the Medinfo Conference, September, 2004, San Francisco, California, USA. A number of items were discussed. The following are several of the most significant. Approximately 73 people were present for some portion of the meeting. Participants included national and regional representatives, corporate and academic members, corresponding delegates and general guests. This was the largest IMIA General Assembly meeting in our history. The IMIA leadership was thankful for this showing of commitment and support.

Medinfo 2004

Medinfo 2004 was a tremendous success. Patrice Degoulet reported to the General Assembly as the IMIA Vice President of Medinfo. The Organizing Committee was chaired by Ted Shortliffe; the Scientific Program Committee was chaired by Mario Stefanelli and Casimir Kulikowski; and the Editorial Committee was chaired by Marius Fieschi. There were 100 student competition papers from 45 countries, 20% of them from countries outside North America and Europe. The ratio was North America 45%, Europe 35%, others 20%. The main tracks were Clinical Informatics and Knowledge Management. Over 180 events were had been scheduled, and space was a limiting factor. More than 2,200 people had pre-registered for this conference—too many to fit in the ballroom for the opening ceremony, and closed circuit television was provided to accommodate the overflow in another venue. The keynote speaker was excited Alan Kay, a dynamic and thought provoking speaker.

The next Medinfo conference will be in Brisbane, Australia in 2007. We are looking forward to 2007 and participation in the next world congress—Medinfo 2007!

Working Groups

IMIA has nineteen working groups. These groups are responsible for organizing conference on relevant topics. Readers of this report are encouraged to check the IMIA website (www.imia.org) for the most recent news about the activities of each of the following IMIA working groups.

- Biomedical Pattern Recognition (WG07)
- Biomedical Statistics and Information Processing (WG12)
- Consumer Health Informatics (WG2)
- Data Protection in Health Information Systems (WG04)
- Dental Informatics (WG11)
- Health and Medical Informatics Education (WG1)
- Health Informatics for Development (WG09)
- Health Information Systems (WG10)
- Informatics in Genomic Medicine (IGM)
- Intelligent Data Analysis and Data Mining (WG03)
- Medical Concept Representation (WG06)
- Mental Health Informatics (WG08)
- Open Source Health Informatics
- Organizational and Social Issues (WG13)
- Primary Health Care Informatics (WG05)
- SIGNI Nursing Informatics
- Standards in Health Care Informatics (WG16)
- Technology Assessment & Quality Development in Health Informatics (WG15)
- Telematics in Health Care (WG18)

The IMIA Yearbook

Beginning in 2004 the IMIA Yearbook is available in both print and CD format. IMIA is currently in the process of reviewing the future of the Yearbook. To many the Yearbook has represented the best place to see an integrated compilation of the “best of the best” articles on specific topics. However, reprinting papers is largely obsolete. Therefore, IMIA has begun the process of determining what the “Yearbook” of the future will be. If you have any comments, consult the IMIA web site (see above) for contact information.

Review of IMIA Statutes

The IMIA bylaws/statutes had not been reviewed in several years and the IMIA

Progress Report by the President of IMIA (Continued)

Board approved a review of the statutes to bring them in accord with current operational practice. The Statutes are located on the IMIA website. We anticipate a preliminary assessment to be completed by the IMIA Board meeting in March of 2005 and followed by a presentation to the IMIA General Assembly in August of 2005.

Financial Issues

The IMIA 5 Year Budget that is based on fundamental conservative principles was presented. The IMIA 5 year budget was approved. However, it is clear that IMIA needs to consider alternative sources of income to be able to effectively meet its many plans and obligations.

IMIA Strategic Planning

Nancy Lorenzi presented the “the IMIA Possibility Framework” from her editorial in *Methods of Information in Medicine* as a cornerstone to building the IMIA strategic plan in order to support what IMIA “wants to be”! A survey of IMIA members was the first step in the strategic planning process. The survey collected data on what our mission could be. Survey responses included: IMIA being the leading worldwide organization and main meeting place in the field; an advisor to WHO; recognized by international bodies and influencing governments; a source of authoritative opinion, advice and publications.

After the initial presentation Nancy asked, “what should be included?” Several other comments included:

- That IMIA would move to a true interdisciplinary thrust, not restricted to doctors and nurses.
- There is a need for IMIA to gain greater recognition from other groups.
- There is a need for IMIA to establish liaison relationships with other professional organizations.
- That IMIA must look at what its membership should be, and focus on the areas identified.
- That IMIA could organize itself along lines of topics rather than as a United Nations.
- There was a request for a better definition of national representatives’ functions.
- That IMIA covers such a wide area of interest that it needed a framework and a focus for its activities.
- That IMIA needs better objectives at the national level
- That IMIA needs both the topical and the national approach. The Working Groups can be strong on topics.
- That IMIA establishes its website as the international repository and learning resource.

Nancy announced that she will appoint a team to prepare a draft strategic plan for the next General Assembly meeting in 2005.

IMIA and YOU

IMIA is growing organization representing the field of medical informatics world-wide. IMIA membership and conferences provide an opportunity for participation by all interested people. We hope that you will join us and help to make our organization even stronger in the future.

Honorary Fellows

Dr. William C. Abbot
Hartland Bideford, United Kingdom

Prof. Dr. Ab Bakker
Noordwijk, The Netherlands

Dr. Marion J. Ball
Healthlink Incorporated
Baltimore, MD, USA

Dr. Morris Collen
The Permanente Medical Group
Oakland, USA

Prof. Malcolm Forsythe
University of Canterbury
Canterbury, United Kingdom

Prof. Shigekoto Kaihara
Medical Information System Development
Centre (MEDIS-DC)
Toyko, Japan

Prof. Donald A.B. Lindberg
National Library of Medicine
Bethesda, USA

Prof. Hans E. Peterson
Bromma, Sweden

Prof. Dr. Otto Rienhoff
Georg-August-University Goettingen
Goettingen, Germany

Jan Roukens
European Commission
Luxembourg

Dr. Davied Shires
The Woodlands, TX, USA

Prof. Edward H. Shortliffe
Columbia University Medical Center
New York, USA

Ian H. Symonds
Wellington Pathology Ltd.
Waikanae Beach, New Zealand

Prof. Jan H. van Bommel
Ersamus University
Rotterdam, The Netherlands

Prof. Valerio Yacubsohn
San Isidro, Argentina

National and Corresponding Members

National Members

Argentina	Argentine Association of Medical Informatics
Australia	Health Informatics Society of Australia Ltd. HISA)
Austria	Austrian Computer Society Working Group Medical Informatics
Belgium	Belgian Medical Informatics Association
Bosnia & Herzegovina	Society for Medical Informatics of Bosnia and Herzegovina
Brazil	Brazilian Society of Health Informatics
Canada	COACH: Canada's Health Informatics Association
China	China Medical Informatics Association
Croatia	Croatian Society for Medical Informatics
Cuba	Cuban Society of Medical Informatics
Czech Republic	Czech Society for Biomedical Engineering and Medical Informatics
Denmark	Danish Society for Medical Informatics
Finland	Finnish Social and Health Informatics Association (FinnSHIA)
France	French Medical Informatics Association (AIM)
Georgia	Georgian Association of Medical Informatics and Biomedical Engineering (Observer Status)
Germany	German Association for Medical Informatics, Biometry and Epidemiology
Greece	Greek Health Informatics Association
Hong Kong	Hong Kong Society of Medical Informatics
Hungary	Biomedical Section of John von Neumann Society for Computing Sciences
Iran	Iranian Medical Informatics Association
Ireland	Healthcare Informatics Society of Ireland
Israel	The Israeli Association for Medical Informatics
Italy	Italian Medical Informatics Society AIIM)
Japan	Japan Association for Medical Informatics
Kazakhstan	Medical Pharmaceutical Information Association (MedPharmInfo)
Korea	The Korea Society of Medical Informatics (KOSMI)
Malaysia	Malaysian Health Informatics Association (MHIA)
Mexico	Mexican Medical Informatics Association (Observer Status)
The Netherlands	VMBI, Society for Healthcare Informatics
New Zealand	Health Informatics New Zealand
Norway	The Norwegian Society for Medical Informatics
Peru	Peruvian Health Informatics Association (Observer Status)
Philippines	Philippine Medical Informatics Society, Inc.
Poland	Polish Society of Medical Informatics
Romania	Romanian Society of Medical Informatics
Singapore	Association for Medical Bio-Informatics, Singapore (AMBIS)
Slovak Republic	Slovak Society of Biomedical Engineering and Medical Informatics
Slovenia	Slovene Medical Informatics Society (SIMIA)
South Africa	South African Health Informatics Association
Spain	Spanish Society of Health Informatics
Sweden	Swedish Federation for Medical Informatics
Switzerland	Swiss Society for Medical Informatics
Turkey	Turkish Medical Informatics Association (TURKMIA)
Ukraine	The Ukraine Association for Computer Medicine (Observer Status)
United Kingdom	British Computer Society Health Informatics Committee
Uruguay	Uruguay Society of Health Informatics
USA	American Medical Informatics Association

Corresponding Members

Algeria, Armenia, Azerbaijan, Bangladesh, Cameroon, Chile, Egypt, India, Indonesia, Iraq, Kenya, Mexico, Moldova, Nigeria, Oman, Pakistan, Peru, Portugal, Russian Federation, Saudi Arabia, Syria, Tanzania, United Arab Emirates, Venezuela, Yemen, Zimbabwe

Institutional Members

CORPORATE MEMBERS

American Health Information Management Association (AHIMA)

Chicago, IL - USA *Advertorial see page X*

Cerner Corporation

Kansas City, MO - USA

Elsevier Science, Health Sciences Division *Advertisement see pp. 532, 576, 578, 580-582*

London - UK

Healthcare Informatics, McGraw-Hill Healthcare Information Group

Edina, MN - USA

Healthcare Information & Management Systems Society (HIMSS)

Chicago, IL - USA

Healthlink Incorporated

Houston, TX - USA

Ormed Information Systems Ltd.

Edmonton, AB - Canada

Schattauer GmbH

Stuttgart - Germany

Siemens Medical Solutions Health Services Corporation

Malvern, PA - USA

TILAK Tiroler Landeskrankenanstalten GmbH

Innsbruck - Austria *Advertorial see page 38*

ACADEMIC MEMBERS

Academic Medical Center (AMC)

Amsterdam - The Netherlands

Central Queensland University

Rockhampton, NSW - Australia *Advertorial see page 8*

Centre for Health Informatics, Research and Development (CHIRAD)

Winchester - UK

Centre for Healthcare Informatics, University College Dublin

Dublin - Ireland

Columbia University Medical Center

New York, NY - USA *Advertorial see page 102*

Erasmus MC - University Medical Center Rotterdam, Dept. of Medical Informatics

Rotterdam - The Netherlands *Advertorial see page 20*

Erasmus University Medical Center, Institute of Health Policy and Management

Rotterdam - The Netherlands *Advertorial see page 16*

Galil Center for Telemedicine and Medical Informatics

Haifa - Israel

Georg-August-University Goettingen

Goettingen - Germany

Harvard MIT Division of Health Sciences and Technology

Boston, MA - USA *Advertorial see page 4*

Indiana University

Indianapolis, IN - USA

Mayo College of Medicine, University of Minnesota

Minneapolis, MN - USA

Medical Informatics Foundation (Fundacion de Informatica Medica)

Miami Beach, FL - USA

National and Kapodistrian University of Athens

Athens - Greece

National Health Service (England)

Yorkshire - United Kingdom

National Library of Medicine

Bethesda, MD - USA

Oregon Health and Science University

Portland, OR - USA *Advertorial see page 24*

Institutional Members (Continued)

Politecnico di Milano

Milan - Italy

St George's Hospital Medical School

London - United Kingdom

Stanford University School of Medicine

Stanford, CA - USA

Taiwan Association for Medical Informatics

Taipei - Taiwan

Technical University of Braunschweig

Braunschweig - Germany

The Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM) of AHIMA

Chicago, IL - USA

University College London (UCL)

London - United Kingdom

Advertorial see page 12

University Department of Rural Health, Tasmania

Launceston, Tasmania - Australia

University of Alabama at Birmingham

Birmingham, AL - USA

University of California Los Angeles

Los Angeles, CA - USA

University of Colorado Health Sciences Center, School of Nursing

Denver, CO - USA

Advertorial see page 84

University of Heidelberg

Heidelberg - Germany

University of Iowa, College of Nursing

Iowa City, IA - USA

University of Maryland, School of Nursing

Baltimore, MD - USA

Advertorial see page 114

University of Missouri-Columbia

Columbia, MO - USA

University of Pittsburgh

Pittsburgh, PA - USA

University of Sydney

Lidcombe, NSW - Australia

University of Texas School of Health Information Sciences at Houston

Houston, TX - USA

University of Washington

Seattle, WA - USA

University of Waterloo

Waterloo, ON - Canada

Advertorial see page 298

University of Wisconsin - Madison

Madison, WI - USA

University of Wollongong

Wollongong, NSW - Australia

Vanderbilt University Medical Center

Nashville, TN - USA

Yearbook Advertorial

IMIA Institutional Members are offered the opportunity to publish an advertorial, i.e. a corporate description of their institute's or company's activities linked to Medical Informatics in the IMIA Yearbook. The number of the page on which you can find an advertorial of an institutional member is indicated on the list of institutional members (see above).

Publications

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Information on IMIA Societies

Argentina



Nora Oliveri, IMIA Representative

The Argentine Association of Medical Informatics "AAIM" is an academic institution born as an encompassing organization created to fulfill the needs related to the development and application of Medical/Health Informatics in Argentina. AAIM is open to all representatives of business and academic groups, and independent professionals, which produce developments in the field of Medical/Health Informatics all over the country.

AAIM Objectives are as follows:

- Promote the development and application of Medical Informatics in the scope of improving patient health care.
- Implement teaching programs in the Health area
- Develop Health care Administration programs and investigation projects
- Promote the knowledge interchange between national and international

academic Centers, Business firms, and Health Institutions.

- Transmit and expand the Health Informatics knowledge
- Represent all associates into national and international institutions

Since 1996, AAIM is the national Representative of IMIA. Activities of AAIM are performed in coordination with the Medical Informatics Foundation (Fundacion de Informatica Medica de Argentina) (www.informaticamedica.org)

AAIM Periodical Congress: Argentine Chapter of „Informedica“: Hispano-american Virtual Congress of Medical Informatics in Internet (www.informedica.org)

AAIM Publications: Argentine Chapter of „Informedica Journal“ (www.informedicajournal.org)

Australia

HISA Vision

Improving health care through health informatics

HISA Mission

HISA is a member-friendly, professional organisation, focusing on healthcare informatics with benefits for practitioners, disciplines and sectors of healthcare in any geographic region of Australia and the world.

Member services are developed with the aim of value-adding knowledge for the individual member and enhancing networking opportunities between members.

HISA Objectives

- A national focus for health informatics in Australia
- Management and administration of HISA
- National assistance to members and others
- Publishing through print and electronic media
- Information collection, analysis and distribution
- Research promotion, support and coordination

Host organisation MEDINFO 2007, Brisbane Australia

Austria



Bernhard Tilg, President

Computers and information systems have become very important for medicine and for the health sciences. At the beginning of the 21st Century, information technology, computer science, knowledge management and communication engineering are of increasing importance as interfaces between patients, health professionals and health organisations. Improved medical technology has helped doctors to raise the level of health care. Advanced communication technology enables modern telemedicine applications.

Biomedical Informatics becomes more and more relevant because of the huge synergies between medical informatics and bioinformatics.

The Austrian working group for Medical Informatics aims at bringing together informaticians and engineers together with clinicians and with other health professionals for further enhancement of the health services. The working group is part of the Austrian Society of Biomedical Engineering (ÖGBMT) and of the Austrian Computer Society (OCG).

Austria (Continued)



Reinhold Haux,
IMIA Representative

Topics:

- Health Information Systems
- Human-Computer Interaction
- Information Systems
- Internet and Intranet
- Knowledge Management
- Knowledge Technology
- Clinical Bioinformatics
- Biomedical Signal and Image Processing
- Multimedia and e-Learning in Health Education
- Quality Management
- Standards
- Telemedicine

Belgium



Etienne De Clercq, President



Francis H. Roger France,
IMIA Representative

The Belgian Society for Medical Informatics ("MIM") was established in 1974 to promote and develop medical information science and technology in Belgium. It is a national bilingual (French and Dutch) society consisting of about 300 members, all involved or interested in the use of computers and telematics in the health-care environment. The administrative board includes 15 members (physicians, engineers and computer specialists) from academic institutions, hospitals, computers and the software industry.

The MIM is a scientific society. Its major activities focus on improving communication among researchers and developers in the field of medical computing and telematics. It is also the place of choice where problems related to the role of medical

informatics in society and its ethical aspects are discussed.

International related medical informatics societies:

- The MIM is the Belgian member of EFMI (European Federation for Medical Informatics) and of IMIA (International Medical Informatics Association). As such, the MIM is involved in the setting up of whose congresses, scientific events and publications.
- The MIM cooperates closely with the Dutch (VMBI), French (AIM) and Swiss (SSIM) medical informatics societies to organize annual scientific meetings: the «Medish Informatica Congres» (MIC) and the «Journées Francophones d'Informatique Médicale» (JFIM).

Bosnia and Herzegovina



Izet Masic, President

The Society of Medical Informatics of Bosnia and Herzegovina (DMI BiH) was founded 1988, as member of former Yugoslavian Association of Medical Informatics, founded also in 1988, and member of EFMI in 1990. The Society has now over 100 members. The Society become member of EFMI in 1994 (EFMI Council in Lisbon), and member of IMIA in 1994 (General Assembly in Dresden). National representative in EFMI and IMIA is current president prof. dr. Izet Masic.

The Society carries out the following activities:

- a) Promotion and improvement of informatics within the health-care system, health insurance and biomedical research,
- b) Engagement of experts in the field of medical informatics in B&H on development and establishment of health care information systems
- c) Assistance in research, development and professional work in the field of medical informatics in B&H
- d) Distribution and development of technical information in the field of medical informatics in B&H

Bosnia and Herzegovina
(Continued)

- e) Assistance in education of medical informatics experts
- f) Exchange of professional experience on national and international level
- g) Publishing activities in the field of medical informatics

Since 1993, twice a year, the Society for Medical Informatics of Bosnia and Herzegovina continuously publish its own professional magazine «ACTA INFORMATICA MEDICA» where papers from area of medical informatics have been published.

The Society for Medical Informatics of Bosnia and Herzegovina organizes annually, its professional meetings with actual topics from medical informatics. During past years, the following meetings and workshops were held: Classification systems in health care, Health and information systems, Electronic medical records, Appliance of expert systems in health care, Tele-education in health care systems, etc.

Also, the Society has organized two congresses of Medical informatics in Bosnia and Herzegovina with international participation; first held in 1999 in Sarajevo with over 100 participants, mostly from

Bosnia and Herzegovina, Croatia and Slovenia and few neighbour countries from southeast Europe and the congress was opened by actual EFMI chair, prof. dr. Attila Naszlady. Second congress of Medical informatics was also, held in Sarajevo, and had international character, and on plenary meeting, papers presented members of the EFMI Board: Assa Reichert, John Braiden, Robert Baud, Rolf Engelbrecht, Jakob Hofdyk, Patrick Veber, as well as colleagues from Canada, Croatia, Slovenia and etc. During the congress, from 18 to 20 April 2004, there were organized the EFMI Board meeting in the facilities of the Rector office of University of Sarajevo. Papers from the congress were published in the magazine «MEDICINSKI ARHIV» and could be retrieved on Medline database. EFMI Board meeting was organized in order to promote candidature of both societies for Medical Informatics of Bosnia and Herzegovina and Croatia as potential organizers of MIE 2009 in Sarajevo. Candidature of MIE 2009 in Sarajevo officially was presented on EFMI Council meeting in Munich on 14 June 2004 and the final decision on organization of MIE 2009 will be made in Athens in spring of 2005.

Brazil



Lincoln de Assis Moura Jr.,
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Umberto Tachinardi,
IMIA Representative

The Brazilian Health Informatics Association - SBIS - aims at improving the quality and reducing the costs of healthcare via the use of Health Informatics techniques, concepts and technologies, by:

- Stimulating educational activities related to Health Informatics;
- Stimulating scientific research and technical development in Health Informatics;
- Organising conferences, symposiums, courses, seminars, and other activities

that lead to experience and knowledge exchange;

- Joining individuals, groups and organizations together;
- Cooperating with sister societies;
- Contributing to the construction of healthcare policies;
- Promoting of Health Informatics as a means to reduce costs and improve the quality of healthcare services;
- Promoting the use of standards for healthcare information.

Canada



Don Newsham, President



Kathryn Hannah,
IMIA Representative

Celebrating its 30th Anniversary in 2005, COACH: Canada's Health Informatics Association, represents a strong community of approximately 900 members from a broad range of health care related backgrounds who are committed to advancing the practice of health informatics as a profession. COACH is an organization dedicated to promoting a clear understanding of health informatics within the Canadian health system through education, information, advocacy, networking and communication in order to achieve its vision of taking Health Informatics "mainstream". It also works to ensure that the profession is recognized and accepted by health sector leaders and others.

Key activities include the newly released on-line version of the Guidelines for the Protection of Health Information, available through the COACH Web site, and partnering with the Canadian Institute for Health Information

(CIHI) in the annual delivery of e-Health, a major national conference on health informatics in addition to the development of programs and services for members.

COACH provides an excellent opportunity for networking among members and with other related organizations locally, nationally and internationally.

China



Debing Wang, President



Ling Zhu, IMIA Representative

The China Medical Informatics Association (CMIA), established in 1980, is an academic organization constituted by physicians, researchers, technologists, and administrators who are researching how to utilize computer science and information science in health care field. CMIA is a National Member in International Medical Informatics Association (IMIA), and is the only representative of China in IMIA. There are more than 5,700 members, 31 professional committees and 22 regional branches in CMIA.

The development of CMIA, also named as China Medical Informatics Association of Chinese Institute of Electronics, has won

support from Ministry of Information Industry, Ministry of Health, State Economy and Trade Commission, State Drug Administration, etc. CMIA has built up broad relationship with hospitals, universities, academic institutions and industries.

Medical informatics is developed with a rapid speed in today's China. CMIA's goals and objectives are to advance the understanding and use of information technologies in China health care; to support the development of medicine and pharmacy; to build up the bridges among researchers, scientists, practitioners, suppliers, managers in health care field.

Croatia



Gjuro Dezelic, President



Josipa Kern, IMIA Representative

The Croatian Society for Medical Informatics is a non-profit organization concerned with the scientific field of medical informatics, which comprises the theory and practice of information science and technology within health care and health care science. The basic objectives of the CSMI are as follows:

- (1) to advance dissemination of information in the field of MI in Croatia,
- (2) to promote high standards in the application of work in this field,
- (3) to promote research and development in this field,
- (4) to encourage high standards in education in this field,
- (5) to advance international cooperation in this field.

Since 1993 the CSMI has organized professional and scientific meetings with international contributions (Bosnia and Herzegovina, Czech Republic, Slovenia, and Spain). The meetings named "Medical Informatics"; have been held biannually.

The recent meeting "Medical Informatics 2003" was held on the 26th of November 2003. There were 21 presented papers, published in Proceedings of the 6th Symposium of Medical Informatics (ISSN 1330-1799).

The meeting ended with a round table discussion on medical informatics as a profession as well as on the status of medical informatics professionals in Croatia.

The CSMI initiated the establishment of Technical Committee for standardization in medical informatics. It follows work of CEN TC251 and ISO TC215 and assists in the health care information system development in the Republic of Croatia.

IMIA Recommendation on Health and Medical Informatics Education and IMIA Code of Ethics were translated into Croatian language and published on CSMI's web site.

The Society publishes a bulletin with papers of the CSMI members, and relevant information two times a year.

Cuba



Esperanza O'Farrill,
President and IMIA Representative

The Cuban Society of Medical Informatics groups specialists of different fields working on Medical and Health Informatics throughout the country. Health Research Centers, Medical Sciences Faculties, Specialized Informatics Centers working on Medical and Health Computerized Applications are also involved. The main goal of the Society is to develop and widespread scientific and updated informatic knowledge in all medical and health fields supporting the Health Policy of the National Health System. A major

movement towards generalizing Medical Informatics is being developed through the creation in Provincial and Municipal Health Administrative Levels as well as in most Health Institutions of Health Informatics Groups. This groups are in charge of training the current staff of health organizations and institutions on the use of computers and the application of specific Medical and Health Informatics Systems performed. A National Policy on Health Informatics is ongoing with the active support of the Society

Czech Republic



Jaromir Cmíral, President



Jana Zvárová, IMIA Representative

The Czech Society of Biomedical Engineering and Medical Informatics is one of the medical societies gathered in the Czech Association of Medical Societies of J.E. Purkyne. The Medical Informatics Section of the Czech Society of Biomedical Engineering has been established in 1978.

Through this section the activities in the field of medical informatics has been developed. Nowadays the Society is mostly concerned with activities in three sections: "Medical Informatics", "Clinical Engineering", and "Biophysics".

The Czech Society of Biomedical Engineering is the member of International Medical Informatics Association (IMIA), European Federation for Medical Informatics (EFMI) and International Federation for Medical and Biological Engineering (IFMBE).

The Society is ruled by the general board of eleven elected society members. The president of the Czech Society of Biomedical Engineering and Medical Informatics is J. Cmíral, the Medical Informatics Section is headed by J. Zvárová (IMIA representative), the Clinical Engineering Section by V. Grospic and Biophysics Section by Z. Grossman.

The Czech Society of Biomedical Engineering and Medical Informatics has issued the journal „Physician and Technology“, edited by J. Zvárová. The journal is published bimonthly and basic information about the journal can be found at the www address: lat.euromise.cz.

The medical informatics section of the Society has organized the main activities in the field of medical informatics. Apart from several national seminars held on different topics of medical informatics each year, the

conferences on medical informatics were held in Prague 1981 and 1988, and IMIA international working conference took place in Prague in 1985 and 1990.

The proceedings of the IMIA working conferences were published by Elsevier Publishing Company (North Holland) under the titles „Diagnostic Strategies and Expert Systems“ and „Knowledge, Information and Medical Education“.

In 2004 the Society organized or co-organized several national and international conferences e.g. Biosignal, Brno and 51st Neurophysiological Congress, Srní. It highly co-operated in the IMIA working conference „Statistical Methodology in Bioinformatics and Clinical Trials“ held in frame of the International Joint Meeting EuroMISE 2004 in Prague, Czech Republic, April 12-14, 2004 (www.euromise2004.org).

The programme committee of the IMIA conference was chaired by Casimir A. Kulikowski, USA and Norbert Victor, Germany. The programme was divided into 8 scientific sessions covering topics on bioinformatics, bridging hospital information systems and clinical trials, microarrays analysis, statistical methods in clinical research and epidemiology, decision support and data mining, computational statistics and clinical genetics. The proceedings of abstracts were published (ISBN 80-903431-0-4) and full versions of selected papers will be published in a special issue of the journal *Methods of Information in Medicine*.

The Society is the main organizer of the forthcoming EMBEC'05 - 3rd European Medical & Biological Engineering Conference, Prague, Czech Republic 20.11.-25.11.2005.

Denmark



Ole Hejlesen, President

The interest in medical informatics, or more appropriate - health care informatics - is increasing in the Danish community. The awareness among health care professionals is growing, the topic is clearly on the political agenda, and the marketplace is expanding.

It is interesting to note, that the Government has published its IT strategy - where health care has a very high priority. An agreement has been reached with the Counties (which runs the hospitals) for a strategy and the financing of an expansion of IT use in hospitals. The national health

care network programme (MedCom) has been made a permanent activity. More than 1,5 million health care messages are sent via the network every month. (www.health-telematics.dk) The Ministry of Health is supporting 10 project regarding the development of Danish electronic patient records. An increasing number of hospitals are starting to use electronic health care records. (www.hep.dk) The National Panel for Standardisation of Medical Informatics has published a popular booklet on standardisation of electronic

Denmark (Continued)

Knut Bernstein, IMIA Representative

health care records the use of Internet in health care is increasing. The Danish Medical Association has established a medical intranet and supplies all Danish doctors with free Internet access.

The Danish Society for Medical Informatics - Dansk Selskab for Medicinsk Informatik (DSMI) was established in 1966. It is an independent society with an associated status to the Danish Medical Societies. The aim of the society is to compile and disseminate theoretical and practical knowledge in medical informatics, and to stimulate research and the use of medical information systems. The 429 members are physicians, nurses and others who work with theoretical or practical aspects of medical information technologies.

DSMI organises meetings, conferences and courses to pursue the goals of the society. One of the largest efforts for the Society was the organisation of MIE '96 in Copenhagen. More than 1000 participants participated in the high quality scientific programme and the large exhibition.

Other meetings have been successfully organised on Intranetworking, the Master of Information Technology programme at Aalborg University, Usability seminar, the Internet patient and The New Danish National IT-Strategy etc. In 2000 there will be organised conferences and meetings on EPR, clinical databases, a joint Danish/Brasilien Conference, etc. Meetings are also organised in cooperation with the Danish Society for Quality Assurance, the Danish National Board of Health and the Virtual Center for Health Informatics at Aalborg University.

The Society is represented in various groups, i.e. the Ministry of Health's advisory group and the Danish Standardisation Committee. The Society publishes a newsletter with abstracts of the meetings, papers, book reviews, announcements of international conferences and other relevant information. The DSMI homepage is playing a large role in the communication with the members: www.dsmi.dk

Finland

Mikko Korpela, IMIA Representative

The Finnish Social and Health Informatics Association was founded in 1974 and it organised the MIE conference in 1985. After that the association's activities decreased and it became dormant by the mid 1990s.

Since research, education and development projects in health informatics have been increasing strongly in Finland recently, the association was re-vitalised in May 2000. The scope of the association was expanded to social services informatics in June 2001.

The activities of the association focus on international relations (IMIA, EFMI and HUSITA), expanding the membership base, and maintaining a web site and an e-mail list for information dissemination. The main event of the association is the annual national Social and Health Care Informatics Research Days (SoTeTiTe-tutkimuspäivät), the sixth of which will be held in May 2003.

France

P. Degoulet, IMIA Representative

AIM, the acronym for the Association pour les Applications de l'Informatique en Médecine, was created in 1968. Since its beginning, the association has been involved in the promotion of computer applications in health care through the organization of scientific meetings, publications and various educational efforts.

In the early seventies, AIM was directly involved in the organization of the Journées d'Informatique Médicale de Toulouse, which were among the first international

meetings devoted to medical informatics. AIM is the official representative of France within the IMIA and EFMI boards and counts approximately 500 affiliate members. AIM currently organizes one or two meetings per year. Proceedings are published by in the collection "Informatique et Santé" from the Springer-Verlag (Paris) under the direction of Patrice Degoulet and Marius Fieschi - <http://www.cybermed.jussieu.fr/Broussais/InforMed/InfoSante.html>

Germany



Herbert Witte, IMIA Representative



H.-Erich Wichmann, President

The GMDS, Deutsche Gesellschaft für Medizinische Informatik, Biometrie und Epidemiologie (German Association for Medical Informatics, Biometry and Epidemiology) is the only scientific organization in this field and as such the official national member within EFMI and IMIA. It closely cooperates with two professional organizations: the Berufsverband Medizinischer Informatiker (BVMI) and the Deutsche Verband Medizinischer Dokumentare (DVMD).

The scientific association GMDS was founded in the Fifties and is with more than 1600 members one of the largest scientific societies in this field in the world.

The basic structure of the GMDS consists of four divisions (medical informatics, medical biometry, epidemiology and medical documentation), with a wide variety of working groups. The management board of the GMDS is led by its president (Prof. Lehmacher, Köln, 2001-2003, Prof. Wichmann, Oberschleißheim, 2003-2005, Dr. Zöllner, Stuttgart, 2005-2007). The full structure of the GMDS and its work is described in www.gmds.de.

The GMDS issues a national scientific journal: *Biometrie, Informatik und Epidemiologie in Medizin und Biologie* (Gustav Fischer Verlag, Stuttgart, Eugen Ulmer Verlag, Stuttgart). The journal includes a newsletter of the national society.

Besides a spring congress on Hospital Information Systems and some smaller working conferences, the GMDS annually organizes one large national meeting with about 700 to 900 participants. The 2003 GMDS congress was held in Münster. The 2004 congress will be held in Innsbruck, Austria (Sept. 26th-30th; <http://www.gmds2004.de/>). All national congresses have been published in proceedings volumes.

As education is a main concern of GMDS it has published a national strategic plan for education in medical informatics as well as for medical biometry. The GMDS is also actively involved in the definition of the medical curriculum and of the content of CME for physicians and for certified further professional qualification of medical informaticians, biometricians, epidemiologists and medical documentalists.

Greece



John Mantas, President and IMIA Representative

Scope: The Greek Health Informatics Association aims to evolve and promote the scientific field of Health Informatics. Health Informatics is the scientific discipline concerned with the systematic processing of data, information and knowledge in health care. Its domain covers computational and informational aspects of processes and structures in health care. Its aim is to study all the applications of informatics and computer science in Health Sciences (Medicine, Nursing, Dentistry, Biology, and Pharmacy) and health care.

Activities: The scientific Greek Health Informatics Association (GHIA) specializes in research, training and documentation of Health Informatics in terminology, documentation and standardization.

Members: Members of GHIA can become university graduate individuals who have a special scientific interest in the evolving and study of Health Informatics.

Establishment: GHIA first was established by a court decision on 1997 and an amendment was endorsed in 2000.

Hong Kong



Chun Por Wong, President
and IMIA Representative

The Hong Kong Society of Medical Informatics was founded in April 1987 by a group of medical practitioners with special interests in medical informatics and computing. It expanded rapidly and now encompasses all workers in the health care information technology industry. In 2002, the Society had more than 300 members.

The specific objectives of the Society are:

1. To promote applications of computers and information technology in medicine, and to maintain knowledge on information science and computer basics for health care workers in Hong Kong.
2. To provide a forum for the exchange of ideas and experience in medical computing among its members.
3. To hold lectures, seminars, exhibitions and conferences on subjects related to medical informatics.
4. To liaise with overseas medical informatics organizations, in order to capture first-hand information on the

development of medical informatics.

The most important projects undertaken by the Society were the hosting of the series of five Hong Kong Asia-Pacific Medical Informatics Conferences since 1990. The Society has also acted as the technical organizer in the Medical Informatics Pavilions of various computer exhibitions in Hong Kong. We coordinate most of the health informatics activities in Hong Kong, where 95% of the hospitals are being computerized in a single platform serving 6.7 million population.

We look forward to a joint effort in Asia Pacific countries to further promote the standing of Medical Informatics in the region to a more prominent level in the global scene, and more importantly, to assist under-developed countries to develop and improve the medical informatics development in their region.

Iran



Ramin Moghaddam,
President and IMIA Representative

The Iranian Medical Informatics Association (IrMIA) is a not-for-profit organization. It was founded on February 2003 by Dr Ramin Moghaddam, a pioneer in Iranian Healthcare Informatics with over a decade of academic and professional experience with Medical/ Health Informatics in the country.

IrMIA was established in response to the need for education and awareness of Medical/Health Informatics as a key to continuous quality improvement in the Health industry. For several years, there had been a growing recognition that a professional body specializing in Medical/Healthcare Informatics was needed, however, it was necessary to await emergence of greater awareness in the Iranian Medical/Healthcare Professional Community before IrMIA could be established.

IrMIA, as a burgeoning association, is looking forward to joining and working with the IMIA and other professional bodies that would offer advice and assistance in achieving its goals and objectives.

Vision

The Iranian Medical Informatics Association is the premier professional association to advance and advocate the use of information & communication technologies at every level in the delivery of healthcare and medical services in Iran.

Mission

The mission of the Iranian Medical Informatics Association is to facilitate continuous quality improvement in health through advocating and advancing the use of advanced information & communication technologies throughout the country.

Goals

- To be the premier membership and peer communication association in Medical/Health Informatics
- Heighten awareness amongst Iranian healthcare professionals & to also raise public awareness with respect to Medical/Health Informatics usage in the community health improvement
- Promote Medical/Health Informatics as a viable and respected profession in the country
- To encourage IMIA to establish a new IMIA Region (MEAMI: Middle East Association for Medical Informatics) in the Middle East in collaboration with other regional societies (e.g. Saudi Arabia, UAE, Kuwait, etc.)
- To foster enhanced collaboration and establish relationships with relevant organizations world wide
- To further foster and enhance research, development, and the diffusion and dissemination of Medical/Health Informatics to solve healthcare issues and lend their weight to the continuous

Iran (Continued)

quality improvement process in the healthcare industry

Objectives

- To serve as an authoritative body in the field of Medical/Health Informatics and to provide local representation in international-related forums
- To strengthen and support Medical/Health Informatics activities in Iran. It brings together a professional association solely devoted to Medical/Health Informatics, and will benefit from the collage of recognized world leaders that have made major contributions to field.
- Promote Medical/Health Informatics in undergraduate and postgraduate education
- Assist in the coordination of Medical/Health Informatics-related activities with international organizations and institutes
- Plan and conduct domestic scientific, technical, and educational meetings and programs with respect to the Medical/Health Informatics field
- Help to foster intra-discipline liaisons across the spectrum between those involved in the healthcare field and those involved in the field of information & communication technologies
- Distribute educational materials about the Medical/Health Informatics field

Activities

- Represents Iran in both the regional

and international arena of Medical/Health Informatics

- Engages in holding scientific, technical and educational forums in the field of Medical/Health Informatics
- Stimulates & collaborates with other regional societies to assist IMIA to establish a new IMIA Region (MEAMI: Middle East Association for Medical Informatics) in the Middle East.
- Provides a medium for the exchange of ideas, development of problem-solving skills, and coordinated action with respect to Medical/Health Informatics.
- Provides a locus for the development of native Medical/Health Informatics standards involving collaboration with recognized international bodies
- Provide a locus for the development of National Health Information Strategy involving collaboration with experts around the world
- To serve in an advisory role to the government, organizations and institutes in a project management & consulting role
- To stimulate, conduct, and sponsor research into the application & evaluation of Medical/Health Informatics with the involvement of world experts
- Provide world class proposals that will serve to attract needed funding for implementation of national Medical/Health Informatics projects utilizing international donations targeted for that specific purpose

Ireland



Diarmuid UaConaill, IMIA Representative

From 1976 to 1996, Healthcare Informatics interests in the Republic of Ireland were represented by the Health Care Specialist Group of the Irish Computer Society. This group represented Ireland at the European Federation for Medical Informatics (EFMI) and the International Medical Informatics Association (IMIA). It hosted the European Medical Informatics conference, MIE 82, and was associated with the IMIA Working Group 8 international symposium on Nursing Informatics held in Dublin in 1988.

In May 1996 the members of the Health Care Specialist Group formed a new society, the Healthcare Informatics Society of Ireland (Cumann Ríomheolais Sláinte), in order to broaden the base of membership and increase the range of services offered. By formal agreement with the Irish Computer Society, the

Health Care Specialist Group was disbanded, and its functions, assets and liabilities transferred to the new Society, which then became affiliated to the Irish Computer Society.

The Healthcare Informatics Society of Ireland was inaugurated formally at its First Annual Conference in the Burlington Hotel, Dublin, on Thursday 10th October 1996. The new society incorporates the Healthcare Informatics section of the Royal Academy of Medicine in Ireland. Thus the Healthcare Informatics Society is in a position to build bridges between computer professionals interested in health care, and health care professionals interested in computing, while supporting and embracing the new professionals of health care informatics. There are currently some 270 members, drawn from information technology, medicine, nursing, other professions allied to medicine, education, government and industry.

Ireland (Continued)

The officers of the Society are:

President: Prof. Jane Grimson, Trinity College, Dublin.

Chair: Mr. Gerard Hurl, Mater Misericordiae Hospital, Dublin.

Secretary: Ms. Ann Sheridan, University College, Dublin.

Treasurer: Mr. Diarmuid UaConaill, Portmarnock, Co. Dublin.

The objectives, as set out in the Constitution, are:

1. To develop and disseminate knowledge

of the use of informatics in health care.

2. To promote research and education in health care informatics.

3. To participate internationally with bodies of similar interests.

In pursuit of the third objective, the Healthcare Informatics Society of Ireland has been accepted as a member of the European Federation for Medical Informatics, and the International Medical Informatics Association.

For further information, see our website at: <http://www.hisi.ie>

Israel



Batami Sadan,
President and IMIA Representative

The Israeli Association of Medical Informatics (ILAMI) was established in 1983 with the following goals:

- To promote knowledge of Medical Informatics by organizing scientific and professional conferences, seminars, courses and exhibitions.

- Advance cooperation among health professionals in the field of Medical Informatics *Provide forums for exchange of information and ideas

- Present the interest of health professionals in government committees and other bodies.

Italy



Cristina Mazzoleni, President and IMIA Representative

The Italian Association for Medical Informatics (AIIM) was founded 1975 to promote the applications of informatics in the different areas of medicine.

The objectives of the AIIM are the dissemination and exchange of information on medical informatics, for support patient care, teaching, research and health care administration; to advance international cooperation in medical informatics; to promote medical informatics education and to organize courses for health services personnel.

AIIM is a Member of the European Federation for Medical Informatics (EFMI) and the International Medical Informatics Association (IMIA).

The Membership categories are:

(a) Regular members including physicians, nurses, dentists, teachers, researchers, biomedical engineers, health services administrators, other health care professionals who have a strong interest in medical informatics;

(b) Honorary members: very important persons in the field of medical informatics;

(c) Correspondent members, including representatives of other Organizations and Associations having similar aims;

(d) Promoter members

The President of AIIM and the national council (10 members), are elected every four years by the membership.

At present, AIIM organize a National Congress every two years, and annually other meetings and workshops on specific topics. The previous AIIM National Congresses have been held in Parma (1977), Catania (1985), Firenze (1988), Como (1989), Cassino (1990), Catania (1991), Genova (1992), Roma (1994), Venezia (1996), Taranto (1998) and Padova (2001). In 2003 hosted the European Federation of Medical Informatic Special Topic Conference.

AIIM organized in Rome the Seventh European Congress on Medical Informatics (MIE 1987)- about 1,000 participants coming from 32 countries all over the world took part in the Congress.

The proceedings of the national congresses published by AIIM are an

Italy (Continued)

important source of information for the knowledge of medical informatics progress in Italy.

AIIM cooperates with governmental and not governmental Authorities as an adviser in the field of medical informatics.

Guidelines on Telemedicine and Telematics in Health Care and on Health Cards, were

approved during the national Congress in Venice(1996) with the participation of representatives of governmental and military health organizations, health professionals and scientific associations, researchers, telecommunication and information technology companies and industries, national research council, and citizen's associations.

Japan



Hiroshi Tanaka, President



Ken Toyoda, IMIA Representative

Activities of the Japan Association for Medical Informatics (JAMI) are mainly performed through 5 committees and 15 research groups supported by 2,350 members.

The new president of JAMI, Dr. Hiroshi Tanaka, Professor of Tokyo Medical and Dental University was elected Nov. 2003.

Six issues of „Iryo Jouhou Gaku“ (Japan Journal of Medical Informatics), the official journal of JAMI, have been published in 2004 (Volume 24). Included are two supplements for „The JAMI Symposium“ and „The 24th Joint Conference on Medical Informatics“.

The „JAMI Symposium 04“ entitled „Development of Local Area Networks for Medical care based on EMR: from Patient's View Point“ was held at Mielparque in Hiroshima city on June 10 and 11. There were 480 attendees.

„The 23rd Joint Conference on Medical

Informatics“ was held on November 22-24 at Makuhari city. The chairperson of the organization committee was Mr. Ken Toyoda, BearingPoint. The main theme was „IT that supports HealthCare - Think about the origin of Medical Informatics“. More than 2,200 members participated and about 500 papers were presented.

The 5th China-Japan-Korea Joint Symposium on Medical Informatics was held with APAMI & KOSMI Conference 2003 on October 20-22 in Daegu, Korea.

The 24rd Joint Conference on Medical Informatics will be held in conjunction with The 6th China-Japan-Korea Joint Symposium on Medical Informatics at Nagoya city on November 26-28, 2002. The chairperson of the organization committee is Pro. Kazunobu Yamauchi, Nagoya University.

For more information about JAMI, contact to jami-office@umin.ac.jp or the homepage of JAMI (<http://jami.umin.ac.jp/>).

Kazakhstan



Azat Abdrakmanov, President

MEDICAL PHARMACEUTICAL INFORMATION ASSOCIATION MedPharmInfo is a non-governmental, voluntary, non-commercial public organization registered in the Republic of Kazakhstan in accordance with the effective laws.

Background:

MedPharmInfo Association (medical - pharmaceutical information) was established in March, 2000 on the basis of The Information Center and Institute of Standardization, Metrology and Certification jointly with an inquiry-information bureau under private company ZdravTechStandard. Besides mentioned organizations founders of the Association include several non-governmental medical centers, pharmaceutical companies, educational and scientific institutions.

The need for such association was due to an absolute necessity of an operational and professional information for specialists engaged in various healthcare organizations. First and foremost, this provides an opportunity to obtain the full code of laws and standard Acts, regulating public healthcare activity, production and supply of medicines and medical products etc. In the course of professional activities medical men quite often search for specialized information covering different fields of medical sciences as well as practical issues. Population lacks accessible sources of popular information as to preventive methods, diseases, treatment and so forth. The list of problems can be extended further. Taking into account the aforesaid grounds, founders of the Association set a goal to create a public organization uniting all the

Kazakhstan (Continued)

concerned medical and pharmaceutical organizations, scientific institutions, chemists, institutes of higher education and colleges, industrial enterprises etc., which are in need of access to contemporary information technologies. The Association initiated the creation of a large specialized informational center, which already comprises highly qualified specialists (doctors, pharmacists, marketing and information experts, computer programmers, electronics engineer etc.).

Modern material and logistic support is being created, new communication and technological solutions are in the process of implementation. This Center is meant for a large-scale information support in the field of healthcare in Kazakhstan, medical achievements and rendering various information to both specialists and vast population strata.

Activities:

In the sake of the users large marketing and analytical research of the pharmaceutical market is being conducted in Kazakhstan, wholesale and retail prices for medications and medical equipment are being monitored. The Center has developed unique schemes for gathering and processing of information concerning wholesale and retail pricing in Almaty and other regions of Kazakhstan.

A free of charge round-the-clock phone inquiry office Medicines and Medical Services is successfully working under the jurisdiction of the Association. Every month more than 70000 citizens use its services by multi-line telephone (3272) 50-50-60. This number is constantly growing.

The Center regularly publishes information bulletins: „Wholesale Prices for Medicines in Almaty, Kokshetau, Karagandy, Petropavlovsk and Shymkent“ (twice a month), „Average Retail Process for Medicines in Almaty City“ (monthly), and „Cost of Medical Services in Almaty“ (at request). The bulletins are being distributed at pharmacists and clinics, in

large pharmaceutical companies in Almaty, Astana, Aktyubinsk, Atyrau, Karagandy, Kokshetau, Kostanai, Pavlodar, Petropavlovsk, Semipalatinsk, Taraz, Ust-Kamenogorsk, Shymkent.

The Center's information database has been updated every day. Electronic versions of any information are available at the first request. Analytical data as to the population's requests allow obtaining extra information on the demand for certain medications.

For the first time in Kazakhstan The Center is publishing information materials on diverse healthcare issues in the Internet - on the website <http://www.med.kz>, which enlarges possibilities of the users to get necessary information such as code of laws and standards Acts on pharmaceutical and medical undertakings in the Republic of Kazakhstan; medical equipment producers and manufacturers; wholesale pharmaceutical companies; pharmacists in Almaty; medicines registered in Kazakhstan, wholesale and retail prices; international conferences and exhibitions, and many other aspects.

Since August 2000 there was launched a project „Telemedicine in Kazakhstan“ <http://www.tele.med.kz>, within which framework the Association started to implement educational projects - monthly seminars Contemporary Internet technologies in the healthcare sphere (for free), and quarterly 3-day computer courses for medical specialists.

The Association is intended to widen up its services in the future for local and foreign organizations. It's planned to establish international co-operation in informational support for the healthcare system.

Conferences:

Conferences and meetings are being held on the regular basis. Conference Achievements of Internet Technologies in Healthcare was arranged.

Korea

The Korean Society of Medical Informatics (KOSMI) was founded in 1987 with a specific aim to promote and collaborate multidisciplinary specialties in medicine and health care. For the last 17 years, the research activities in medical informatics are rapidly increasing to become a major focus of the medical community. Domestic KOSMI conferences have been carried out biannually. Due to the increasing number of paper submissions, biannual publication of the Journal of KOSMI has been promoted to quarterly.

During the 1990s, tremendous efforts were put into the development and implementation of hospital information systems for major hospitals, and a great amount of funding support was provided simultaneously. As a result, Korea is probably regarded as one of the most well-informatized countries in the globe at the present time. Network infrastructure is established enough to support not only electronic commerce in general but also small business units such as the PC chamber (or PC-bang in Korean).

Ubiquitous computing based on wireless technology is another new fad in healthcare settings. As applications of e-Commerce appear to be in its continuous expansion, e-Health (and/or u-Health) is expected to settle in seamlessly in the foreseeable future.

In addition to clinical applications of medical informatics, two major topics of medical informatics are of interest: education and standardization.

There are 41 medical schools (including 10 national universities) in Korea, and most schools are now considering education reform. Because patient needs are constantly on the rise, lecture based medical education methods are found to be inefficient as societal and clinical environmental changes pervade. MEDINFO '98 in Seoul was found to provide great momentum for promoting medical informatics in many respects in Korea. Medical education for example, the first academic department of medical informatics was inaugurated at Kyungpook National University School of Medicine in 1999. Medical informatics has been gradually recognized as a standard curriculum in many medical schools. Recently, nursing informatics was launched

as the first formal graduate study program in College of Nursing, Seoul National University.

With the continuing efforts of KOSMI, the Korean Society of Medical Education recognizes the suggestions of the Medical School Objectives Project by American Association of Medical Colleges (AAMC). Also, the medical informatics curriculum set out by IMIA WG1 is highly recommended to be included in the regular medical school course work. Although medical education in Korea is in transition, the role of medical informatics should include more than computer literacy to play a critical role in the medical education reform.

Standardization is another major thrust in medical informatics. Due to rapid proliferation of computer technology in both hospitals and medical practices throughout the world, system developers became aware of the significance of information standards in healthcare networking. In this regard, the Health Informatics Standardization Committee was formed in KOSMI in 1999 in order to participate in the international standardization (ISO TC215, Health

Informatics) activities. The Standardization Committee in KOSMI plays a central role in several government agencies: Korean Agency for Technology and Standards (KATS), the Ministry of Commerce, Industry and Energy (MOCIE), Korea Health Industry Development Institute (KHIDI), Ministry of Health and Welfare (MOHW), and Ministry of Communication (MOC), just to name a few. Recently, an ambitious project has been on-going in an effort to develop a national information infrastructure to exchange and share clinical information among healthcare inst

Because of successful progress and implementation of health informatics standardization, we are not surprised to find that Professor Yun Sik Kwak, the President of KOSMI, has been appointed to take position of the Chair of ISO/TC215 Health Informatics during 2003-2006.

All members of KOSMI are determined to accomplish multidisciplinary objectives that we all face up to now, and we have no doubt that the spirit of KOSMI will continue and prosper.



Yun Sik Kwak, President



Hune Cho, IMIA Representative

Malaysia



Abu Bakar Suleiman, President



HM Goh, IMIA Representative

The Malaysian Health Informatics Association (MHIA) is a nonprofit organization registered with the Registrar of Societies under Societies Act 1966 of Malaysia. (Registration Number: 2575/96, W.P.)

MHIA is an association consisting of healthcare and IT professionals, institutions, and corporations dedicated to enhancing the development and innovation of health informatics, and increasing the utilization of Information Technology to improve Malaysian healthcare services and outcomes.

MHIA is the official Malaysian representative to the International Medical Informatics Association (IMIA) and Asia Pacific Association for Medical Informatics (APAMI). MHIA collaborates with international health informatics organizations, authorities and academic institutions in

enhancing local IT development in healthcare through participations in international conferences, meetings and paper presentations.

MHIA plays a pivotal role in educating, promoting IT concepts and adoptions, and business development of the e-Health market in Malaysia. It also provides a platform for health informatics professionals and other interested parties/individuals to interact and collaborate to advance their mutual interests and knowledge through MHIA organized conferences, workshops and meetings.

MHIA also serves an advisory role to Malaysian healthcare stakeholders in the adoption, policy development, innovation in health informatics and e-Health.

URL: www.ehealth.org.my

Email: info@ehealth.org.my

The Netherlands



Johan van der Lei,
President and IMIA Representative

The goal of the VMBI, the Dutch Society for Health Care Informatics, is to promote research, development, and applications in medicine and health care, and in the biological sciences. The Society is a meeting place for people in medical informatics in the broadest sense, i.e. physicians, nurses, informaticians, physicists, hospital administrators, and health care managers.

All hospitals in The Netherlands have systems installed to support administration, communication and patient care. In primary care, over 95% of GPs, all retail pharmacists, dentists, and the majority of physiotherapists have systems in use. An increasing number of systems are interconnected by EDI and networks. Development of computer-based patient records has much attention in R&D institutions. The Dutch professional medical societies play a major role in the promotion of information systems in healthcare.

Most universities offer some training in medical informatics as part of the curriculum. This dynamic activity is a very healthy environment for the VMBI.

The activities of the VMBI include meetings (lectures, demonstrations) in Utrecht, in

the center of the country, most of them in the late afternoon / early evening, annual two-day Conferences (called MIC, Medical Informatics Conference), together with the Belgian Society for Medical Informatics MIM, where about 600 people meet around lectures, workshops and a large exhibition, this conference is alternately held in The Netherlands and Belgium. The VMBI publishes an electronic magazine called I&Z (Informatie & Zorg, in english: Information & Care).

Over the past years, several IMIA Working Conferences have been organized in The Netherlands on subjects such as Telematics in Health Care, Hospital Information Systems, Electronic Patient Records in Medical Practice and Software Engineering in Health Care.

In 2006 the VMBI will be hosting the Medical Informatics Europe (MIE) conference.

The VMBI developed a strategy to reinforce the relationships with professional medical societies and to increase its membership of practicing physicians. A working group has been established to develop concrete plans to widen the scope of the Society.

New Zealand



Kannan Subramaniam,
IMIA Representative

Vision

Health Informatics New Zealand (HINZ) seeks to facilitate improved health care outcomes through the dissemination and utilisation of information, knowledge and technology.

Mission

To foster throughout New Zealand the development of knowledge and the utilisation of Informatics within all areas of clinical practice, education, and the provision of healthcare in general.

Goals

The HINZ Executive committee through consultation with our members has identified three key goals for our organisation. Each goal has a set of objectives and action points, which enables our organisation to obtain and maintain our purpose and service our members. These goals are dynamic representation of our organisation purpose and will evolve over time to reflect our changing internal and external environments.

Goal 1

To promote the development and sharing of health informatics knowledge

Goal 2

To influence Information Management & Technology policy (development and implementation) at organisational, regional, national and international levels

Goal 3

To represent NZ and collaborate with international organisations

Benefits for our members:

- Secure members-only website with enriched information on news, resources, current projects, and administrative information
- Quarterly seminars expanding the knowledge of health informatics
- Annual conference inviting national and international speakers to showcase local and global initiatives
- Regular forums to share knowledge and information on health informatics
- Financial assistance to attend relevant conferences, workshops or seminars.

Norway



Karl Øyri, President



Irma Iversen, IMIA Representative

The Norwegian Society for Medical Informatics - Forum for Databehandling i Helsesektoren (FDH) was established in 1972 as a special interest group of The Norwegian Informatics Society - Den Norske Dataforening (DND). Since 1989 FDH has been an independent society with primary interest in medical informatics and an associated status to DND. FDH has a long-established membership in EFMI and IMIA.

The society has both individual and

institutional members. Most of the individual members are health care workers

FDH organizes meetings, seminars and courses to share knowledge and information with the members as well as to promote involvement of medical informatics in the Norwegian health care system.

FDH arranges seminars and meetings regularly on topics like EPR, Data Security, Trusted Third Parties, Legal Issues and Healthcare Legislation, Healthcare Politics.

Philippines

The Philippine Medical Informatics Society is an acknowledged proponent of open source development for health. Realizing the public health is for the public good, it maintains that all health applications must be open to peer review and analysis. Among the activities it has offered through its eight years were lectures from international medical informatics experts, seminars on use of online bibliographic databases, handheld devices, electronic health records, and security of electronic health information.

The PMIS is a strong partner in the Standards for Health Information in the Philippines project as well as the BuddyWorks Telehealth Project and the upcoming Philippine National Health Information Infrastructure. The Society's bias is for the deployment of health information systems in support of national development and poverty alleviation through the full implementation of the Primary Healthcare Approach. Among the beneficiaries of its technical seminars are community health workers, government midwives, and private practitioners.

Romania

The Romanian Society for Medical Informatics, RSMI, is a scientific, professional, non-governmental organization aimed to promote the activities in the development of medical informatics in Romania and to represent the activities in the country and abroad.

RSMI was founded in 1990 and has now over 120 members: physicians, computer scientists, engineers, mathematicians and other professionals working in the field of medical informatics. It continues the tradition of a group of specialists who started to work in this field in 1977.

The activities of RSMI concern stimulation and co-ordination of the activities of its members in promoting medical informatics in the country and to support international co-operation in this field, which implies:

- organizing scientific and professional conferences, symposia, courses and exhibitions and collaboration in such activities with related organizations;
- publication of scientific, professional and educational documents and papers in the field of medical informatics;
- dissemination of information about conferences, publications and links to websites web sites on medical and health informatics
- promoting scientific and professional contacts with similar societies at the international level;
- active involvement to support scientists to attend international

meetings

- collaboration with Romanian Academy and the Academy of Medical Sciences in medical informatics research;
- collaboration with medical universities in developing education and training in medical informatics.

Romania was represented as a corresponding member in IMIA since 1986 and RSMI has become a full member in 1994, having now representatives in several active working groups of IMIA and EFMI. In the same year 1994 RSMI also joined EFMI.

RSMI members serve in several professional and scientific committees and also in various expert groups of the Ministry of Health and the Ministry of Education. RSMI president was recently elected as EFMI vice-president. RSMI is an institutional member of „Prorec Romania“, a national society promoting implementation of EHR in Romania.

During 2004 RSMI members participated in two major international events: STC2004 in Muenchen and MEDINFO 2004 in San Francisco.

At a national scale RSMI kept the tradition of yearly conferences, The 27th Conference, organized in co-operation with the University of Medicine and Pharmacy in Targu-Mures took place in October 14-16, 2004. The 2006 event will be organized in Timisoara, April 5-8, as a joint conference with EFMI: 2006 Special Topic Conference.



George I. Mihalas, President and IMIA Representative

Singapore



KC Lun, IMIA Representative

The Association for Medical and Bio-Informatics, Singapore (AMBIS) is an organisation that promotes excellence in Medical and Bio-Informatics and advances the development of this exciting discipline in Singapore. Previously, AMBIS was known as the Association for Informatics in Medicine, Singapore (AIMS). In 2003, it was unanimously agreed that AIMS should be expanded into informatics in the life science, ie. both Medical and Bio Informatics. Today, there is a tremendous need for all organisations to understand how new technologies such as the Internet are revolutionising the way they operate. The practice of medicine, life science research

and healthcare delivery organisations are not exempted.

AMBIS is at the forefront of such activities and is best positioned to initiate projects in these areas. Some of the past achievements of AMBIS (when it was known as AIMS) include the successful MEDINFO conference, the pioneering initiation of Medical Websites in Singapore, and achieving world's firsts in this area, as well as initiating the formation of the Asia Pacific Association for Medical Informatics APAMI by our illustrious past president, Professor KC Lun. Our future initiatives include the forthcoming Asia Pacific Telemedicine consortium initiative.

Slovak Republic



Peter Kneppo, President



Mikulas Popper, IMIA Representative

[The following regards only the Medical Informatics branch of the Society]

Annually 2-3 larger scale country-wide events organized:

- Conference on Hospital Information Systems NIS-'200x - addressing professionals from application domain, as well as vendors
- 'On Current Issues in Medical and Healthcare Informatics and their implementations,' addressing managerial personnel in the country's healthcare establishments
- Workshop on Developments in Medical Informatics - an accompanying event held in the frame of the SLOVMEDICA exhibition

In addition to these, diverse smaller or small scale (local) seminars are held in frame of various establishments or as accompanying sessions of more general professional events, e.g. regular seminars held at the · Institute of Medical Physics and Biophysics, Medical Faculty, Comenius University, · Institute of Informatics, Faculty of Mathematics, Physics, and Informatics, Comenius University, · Faculty of Electrical Engineering and Informatics, Slovak Technical University. · Annual Slovak and Czech conference on Artificial Intelligence and Cognitive Science,

The Society's steering board meets 3-4 times in a year (i.e. approx. quarterly).

South Africa



John D. Tresling, President

The South African Health Informatics Association (SAHIA) was formed to promote the professional application of Health Informatics in South Africa.

The goals of the organisation include:

- to represent South African Health Informatics nationally and internationally;
- to stimulate the advancement of Health Informatics in South Africa;
- to promote and uphold the status of the Health Informatics profession by
- Striving for the recognition of Health Informatics as a specialty registrable with the Health Professions Council of South Africa

- Stimulating appropriate conditions of service for Health Informaticians
- Participating in the definition of standards of education and professionalism of Health Informatics at Universities, Schools of Public Health and Technikon
- Promoting human resource development in Health Informatics
- Promoting the use of Health Informatics in the planning and delivery of health services
- Promoting the interests of IMIA in South Africa;
- to promote the interests of members.

Spain



Fernando Martin-Sanchez,
IMIA Representative

The Spanish Society of Health Informatics is a non-profit scientific society, build up in 1976 and joining today more than five hundred professionals, technicians or health scientists with interest in the promotion of the use of Information and Communication Technologies in the health sector. In this way it arises as a common debate forum for the professionals of medicine, informatics, pharmacy, nursery, biology, and all the other Health Sciences, as well as for the students of any related career.

Among the multiple activities and projects developed by the society in the recent years, outstands the National Congress

on Health Informatics that, in a annual basis, has had six editions until date. In addition to this general congress (INFORSALUD), the society organises more specific congresses targeted to professional sectors (Pharmacy and Informatics, Medical Informatics, Nursery and Informatics, Bioinformatics) or technological aspects (Internet in Health, medical data protection, ...).

SEIS periodically publishes technical reports on several aspects related to applications of IT in Healthcare and a bimonthly journal (I+S) (Informatica y Salud).

Sweden



Rolf E. Nikula, IMIA Representative

The Swedish Federation for Medical Informatics is an association of persons with an interest in issues of medical informatics. Anyone working in health care and dental care is welcome as a member regardless of profession. The Federation is also a section of The Swedish Society of Medicine founded in 1807; the oldest organisation for the medical profession in Europe.

Our main objective is to create a platform for discussion and information exchange in the Medical Informatics field. We arrange an annual Conference „IT in Health Care“ and a scientific seminar at the annual general meeting for doctors.

Switzerland



Antoine Geissbühler,
IMIA Representative

A Short Presentation of the Swiss Society for Medical Informatics

Before February, 1985, the date of the creation of the Swiss Society for Medical Informatics (SSMI), most of the medical activities related to the application of computer sciences, were held within the Swiss Society for Biomedical Engineering where, as expected, most of the professionals were engineers. The SSMI, on the contrary, has been set up and led, since its creation, by a majority of health-care professionals: physicians as well as nurses. Already from its first year the SSMI became a member of the Swiss Federation for Informatics, which regroups all the other

Swiss informatics Societies being the Swiss national society and a member of IFIP.

Naturally, the SSMI became an IMIA and EFMI member, within the Swiss IFIP Chapter, and the former place of TC4 (Technical Committee 4) is held by the IMIA representative delegated by the SSMI. It follows that our IMIA national society is associated with all the other computer science activities handled by the IFIP special interest groups as well as its technical committees.

More information on the society and its various activities can be found on its website: <http://www.sgmi-ssim.ch>

Turkey

TURKMIA is a nonprofit membership organization, dedicated to guiding development and organisation of health and medical informatics in Turkey. TURKMIA was founded in 1999 in Ankara. It organized First Medical Informatics Symposium in November 1999.

Aims of TURKMIA include:

- to collect, process and distribute information about the activities related to health and medical informatics of companies, governmental and non-governmental organizations.
- to stimulate all the professionals related to health and medical informatics to reach the contemporary level of knowledge and skills, prepare the background for communication and interaction between the professionals in the field, promote multidisciplinary study.
- to determine the problems related to health and medical informatics domain in Turkey, suggest solutions to these problems, collaborate with other organizations to realize the projects, announce the results of the projects or applications.
- to enhance the knowledge of health care providers and demanders about

health and medical informatics, organize meetings and publish materials to shape public opinion.

- to inform, sensitize and stimulate the decision making and administrating people and organizations about the issues related to medical informatics.

Activities of TURKMIA:

- TURKMIA started SBS 2000 (Health Information Strategies of Turkey in the New Millenium) project in June 2000 by a meeting in Ankara. Preliminary reports of the study groups was discussed in the First Congress of Medical Informatics which was held in 28-29th April 2001 in Istanbul. Final reports were collected in a book. This book have been presented to the governmental and civil organizations, healthcare institutions, professional associations, commercial companies and non governmental organizations which are active in the healthcare sector in order to establish the health information vision, goals, strategy and politics of Turkey
- TURKMIA organizes regular meetings in Turkey, to bring together people responsible of and/or interested in health information systems.



Hakan Gülkesen, IMIA Representative

United Kingdom

The British Computer Society Health Informatics Committee (BCS HIC) is the leading voice in the UK, through its own activities and those of its constituent specialist and liaison groups, regarding informatics to support health. The British Computer Society (BCS), through HIC, is also the internationally recognised body for health informatics in the UK. BCS HIC acts as co-ordinator of the activities of the BCS Health Informatics Specialist Groups (SGs) and is responsible for developing and proposing new SGs when relevant. It provides funding for special activities of the SGs and funds for SG members to do pieces of work and to participate in accredited international conferences.

Currently BCS HIC is an umbrella body for seven established health SGs:

- BCS Health Informatics Specialist Group: Nursing
- BCS Health Informatics Specialist Group: Primary Care
- BCS Health Informatics Specialist

Group: London

- BCS Health Informatics Specialist Group: North East
- BCS Health Informatics Specialist Group: Northern
- BCS Health Informatics Specialist Group: Scotland
- BCS Health Informatics Specialist Group: South West

The formation of other groups covering aspects of, or clinical groups within, health informatics, including Allied Health Professions, is under active exploration. ASSIST (the Association of ICT Professionals in Health and Social Care) are in the process of joining the BCS as a specialist group, bringing an additional 2,000 members, many of whom work directly in information management in the National Health Service (NHS) in the UK. This process will consolidate the development of a Health Informatics Forum within BCS, and a higher profile for health informatics.



Peter Murray, IMIA Representative

United Kingdom (Continued)

In addition to informatics professionals working within healthcare delivery and research, HIC represents clinical professionals and health managers with a significant interest and involvement in informatics to support health. HIC works in conjunction with over 40 Liaison Groups who attend HIC as observers. These constitute all the major organisations concerned with healthcare IT across the UK.

HIC, which has been established for over 30 years, has a threefold role:

- to assist its constituent groups;
- to act for the BCS in all aspects of health and healthcare matters; and
- to run its own activities.

HIC has collective objectives addressing:

- the provision of a focus and point of contact for health informatics for and about the UK, both nationally and, increasingly, on an international basis.

The coalition of relevant bodies for the purpose of exchanging ideas, promoting developments, maximising synergy and co-ordinating efforts;

- the effective dissemination of the message of sound principles and good practice in health informatics;
- the submission of informed comment on topical issues and major initiatives; and
- the facilitation of communication of UK activity in health informatics on a wider basis.

The most important of HIC's activities is the management of an annual conference and exhibition (and contribution to similar focused specialist group events) as a recognised national forum for these objectives. The annual Healthcare Computing (HC) Congress, is the largest such event in Europe, attracting over 1200 conference attendees and approaching 5,000 exhibition visitors. It is held annually in March in Harrogate; the twenty second event will be held on 21-23 March 2005. Each of the HC conferences results in a book (or recently CD-ROM) of proceedings, carrying the full text of all the papers presented. HIC has also published a series of books on a range of topics in the field of health informatics. The Specialist Groups also organise their own conferences and meetings, details of which can be found on their own websites or through the HIC website.

Other specific activities of HIC currently include:

- the publication of Ethics Guidance for Health Informaticians;
- workshops considering how the Department of Health (DoH) strategies can be achieved;
- commenting on all major reports, consultations and proposals from government in health and other pertinent areas;
- liaison with senior members of the Department of Health and NHS, and latterly the Department of Social Services; and
- working with the NHS, the Medical Royal Colleges, nursing professional bodies, NHS IT organisations and other bodies towards developing health informatics professionalism in the UK.

Through the BCS, HIC appoints the UK representatives to relevant international health informatics bodies, including the International Medical Informatics Association (IMIA) and the European Federation of Medical Informatics (EFMI). The current representatives are Dr Peter J. Murray at IMIA and Dr Helen Betts at EFMI.

In keeping with HIC's role of acting for the BCS on healthcare matters, it has recently provided expert opinion and commentary on important issues affecting health informatics and the health services in the UK. Among recent activities, HIC has commented on reports commissioned by the chancellor of the Exchequer to help inform the Government's Spending reviews. HIC has also been involved in evaluating the proposals for the NHS University, commenting on Government policy on open source software, and in commenting on major policy initiatives in the National Health Service, such as the National Programme for IT (NPfIT).

HIC also has an established series of thinktank meetings (held since 2002) on innovative ways to move forward informatics in support of health, the 'Radical Steps' series. After an invited workshop or thinktank meeting, involving from a few dozen to several hundred attendees, wide consultation has been invited on key themes such as confidentiality, information governance, implementation management, standards, procurement, partnership with

United Kingdom (Continued)

industry, ensuring capacity and coordinating change. This model has been expanded to thinktank forums on other issues, including open source software and health informatics education. Full reports on these events and all consultation response documents are available through the HIC website.

HIC is involved in leading the creation of an umbrella organisation to bring together existing professional bodies and interest groups and develop a register of professionals who are 'fit to practice' health informatics through the establishment of the UK Council for Health Informatics Professions (UKCHIP - www.ukchip.org). Partnership working has established voluntary registration and regulation processes, with the parallel requirements for continuing professional development (CPD), a Code of Conduct, and procedures for removal from the register.

The British Computer Society (www.bcs.org.uk) is the industry body for IT professionals, and a Chartered Engineering Institution for Information

Technology (IT). BCS holds a Royal Charter (Information Science) and has over 40,000 members world-wide, with approx. 5,000 of them involved in the health domain. With members in over 100 countries around the world, the BCS is the leading professional and Learned Society in the field of computers and information systems.

The BCS exists to provide service and support to the IT community, including IT practitioners and employers of IT practitioners. The Society also acts to generate public awareness and appreciation of the concomitant social and economic benefits IT. The BCS was formed to establish and maintain appropriate standards of education and experience for persons engaged in the profession or practice of IT and computing or those entering upon courses of study in computing and allied subjects.

Full and latest information on HIC and the BCS Health Informatics Specialist Groups is available through the website: www.bcshic.org

United States of America



Nancy Lorenzi, IMIA Representative

Leaders shaping the future of health information technology.

The American Medical Informatics Association (AMIA) was incorporated in the District of Columbia in 1988 following more than a year of discussions among the boards of directors of the American Association for Medical Systems and Informatics, the American College of Medical Informatics, and the Symposium on Computer Applications in Medical Care (SCAMC). It brings together a professional association solely devoted to medical informatics, the organization responsible for the major annual meeting in the field, and the College of recognized leaders who have made major contributions to the field.

The oldest of the three organizations was the Symposium on Computer Applications in Medical Care. The Symposium was first conducted in 1977 as a regional effort in the Washington-Baltimore area. Two years later, SCAMC expanded its horizon, and quickly grew to a meeting attracting more than 2,000 participants. The name of the meeting was eventually changed to the AMIA Annual Symposium. Now over 100 organizations/companies and 2,000+ atten-

dees participate in the Annual Symposium featuring scientific paper presentations, panel discussions, tutorials, workshops, system demonstrations, posters and commercial product exhibits. The Proceedings of the Annual Symposium reflects the body of work that is accomplished each year in medical informatics in the United States and abroad and is indexed by the National Library of Medicine.

The American Association for Medical Systems and Informatics (AAMSI) was formed in 1981 through a merger of the Society for Computer Medicine and the Society for Advanced Medical Systems. This union of two organizations with nearly 500 members each resulted in the largest membership society in the country at that time, with a principal interest in the advancement of medical informatics. A tradition was established of a spring meeting held annually on the West Coast, known as the AAMSI Spring Congress.

In response to a perceived need for the recognition of experts and leaders in the medical informatics field, the American College of Medical Informatics was established in 1985. Candidates are

United States of America (Continued)

proposed by the Fellows and elected by mail ballot. ACMI meets three times each year, which includes an ACMI Symposium and meetings held in conjunction with the AMIA Annual Symposium and the AMIA Spring Congress.

By 1987 it had become clear that the leadership of the three organizations created an interlocking directorate. It appeared to many that the interests of the organizations and of the field would best be served by a merger. Early in 1988 representatives of the three organization began meeting and in November, 1988 they formed the American Medical Informatics Association (AMIA), a society that can speak with one voice to the United States and to the international medical informatics community.

Purpose

The purpose of AMIA is to advance the public interest through charitable, scientific, literary and educational activities and by promoting the development and application of medical informatics in the support of patient care, teaching, research and health care administration.

AMIA shapes the future of health information technology by:

- Serving as the integrating force in the field of medical informatics through which the country creates and manages the science and knowledge base of health care;
- Providing expert counsel to leaders in government and industry;
- Educating the next generation of informatics leaders;
- Supporting the development of international informatics standards;
- Disseminating information about current innovations and innovators in health information;
- Linking developers and users of health information technology;
- Hosting the world's most comprehensive annual conference on medical informatics - the AMIA Annual Symposium;
- Publishing and distributing educational materials through various media;
- Coordinating medical informatics activities with other national and international organizations to advance the public's interest; and
- Carrying on other activities as are

necessary, suitable, and proper for the fulfillment of the Association's charitable, scientific, literary and educational purposes.

These objectives are accomplished through a variety of activities and services that AMIA offers:

- Holding scientific, technical and educational meetings;
- Publishing and disseminating white papers, reports, digests, proceedings and other pertinent documents and contributing to the professional literature;
- Publishing the Journal of the American Medical Informatics Association (JAMIA) - the top journal in medical informatics;
- Sponsoring professional interest Working Groups (WGs);
- Representing the United States in the international arena of informatics and health information technology;
- Advising and coordinating matters of mutual interest to its members.

The American Medical Informatics Association (AMIA) appointed Don E. Detmer, MD, MA to serve as the President and Chief Executive Officer for the association. At the time of the publication of this Yearbook, AMIA was working on a strategic vision to be released in 2005.

Membership Categories

- Regular Member: AMIA's regular membership is for any individual interested in medical informatics from research, development, or applied perspective. AMIA's members span a wide spectrum of health care professionals and include physicians, nurses, dentists, biomedical engineers, computer scientists, systems developers and analysts, educators, researchers, medical librarians, and others. Regular members receive JAMIA (both print and on-line versions), AMIA ePublications, AMIA Yearbook & Directory and the IMIA Yearbook of Medical Informatics at no extra charge. Regular members also receive membership in any of AMIA's working groups as part of their membership fee. Discounts for AMIA Annual Symposium, and Spring Congress apply, as well as the opportunity for

*United States of America
(Continued)*

special discounts on other publications and meetings throughout the year. \$250/year

- Institutional Member: AMIA's institutional membership is designed for non-profit organizations that have members, departments, faculty, or staffs with an interest in health care informatics. Institutional members of AMIA include hospitals, other clinical settings, colleges and universities, libraries, and associations. All regular member benefits apply for one individual designated as the AMIA contact person. Additional benefits include JAMIA on-line access for the institution, conference publications and promotional opportunities offering support and exposure. \$450/year
- Corporate Member: For-profit corporations that are supporters of the medical informatics community. Numerous corporate membership benefits apply at the four levels of membership-bronze, silver, gold, and platinum. Corporate members have representatives that receive all the benefits of regular members plus additional advertising and sponsorship opportunities. \$1,500, \$3,500, \$7,500 or \$12,500/year
- Retired Member: Retirees at least 65 years of age who have been members of AMA for the past two years or longer. All benefits of regular membership apply. \$100/year
- Student Member: Full-time undergraduate students, graduate students, medical residents, and post-doctoral fellows. A certified letter attesting to the student's full time status at an academic institution is required along with membership application. JAMIA is not included in student membership fees, but students may subscribe at a special rate of \$45 for a year's subscription (6 issues) and on-line access. Students are automatic members of the student working group and may apply to any other working groups at no additional charge. Special conference discounts apply. \$35/year
- Associate Member: Individuals may join one working group or special interest group for one year only. No regular member benefits apply. No journals or conference discounts will be given. \$30/year

Member Services

Membership in AMIA provides a means of staying abreast of the rapid changes in medical systems and informatics, and is open to anyone with interest in the field. AMIA offers a growing array of services designed to meet professional needs:

- Web Site: AMIA's Web site is a comprehensive resource for medical informatics. It provides valuable information to members and prospective members about the association, but also contains current, relevant information about academic and training programs, conferences, public policy initiatives, news and developments in the field, current research and white papers, and grant information. Be sure to visit the site at www.amia.org.
- Meetings & Conferences: AMIA holds two major meetings each year, the AMIA Spring Congress and the AMIA Annual Symposium usually held in late October or early November. The AMIA 2005 Spring Congress will be held in Boston, MA April 11-13, 2005 on the topic: Best practices for Ambulatory Care Provider Order Entry and Population Management with Electronic Health Records: Maximizing the Value of Electronic Health Record Investments. AMIA will be hosting its Annual Symposium in Washington, DC, October 22-26, 2005. The title of the meeting is Biomedical and Health Informatics: From Foundations to Applications, to Policy.
- Working Group Program: AMIA members are encouraged to join and participate in the association's working groups. The working groups conduct programs and activities and produce products to benefit AMIA and the medical informatics community. Working groups are also important in helping members develop personal networks within specific professional or topic areas.
- Continuing Education Credits: By attending the AMIA Annual Symposium and Spring Congress, members may earn valuable continuing medical education credits and nursing contact hours.
- Job Exchange: An excellent resource for those looking for or trying to fill positions in the field of informatics.

United States of America (Continued)

- President's Club: AMIA's Member-Get-A-Member Campaign: Any AMIA member can participate in the campaign. Each new member who signs-up for membership and indicates the name of the AMIA member who sponsored his/her membership, will earn the current AMIA member one point toward the campaign. All current AMIA members earning at least one point in the campaign will be invited to the President's Club Reception held at the Annual Symposium where awards are given.

Publications

AMIA members have the opportunity to subscribe at discounted rates to numerous publications. We also offer the following periodical publications when you join:

- JAMIA - The Journal of the American Medical Informatics Association: AMIA's timely and informative journal is the primary source of information for professionals in medical informatics. All regular, institutional, corporate and retired members receive JAMIA bi-monthly and receive 24 hour on-line access. Students may order JAMIA at a special student member rate (which also includes on-line access).
- AMIA News Bytes: e-mailed to all members, this is a weekly summation of articles on the field that appeared in trade publications, or other general news media.
- AMIA eNewsletter: e-mailed monthly to all members, provides updates on the work of the Association.
- AMIA Yearbook & Directory: This valuable networking tool, available exclusively to AMIA members for noncommercial purposes, provides completed address, phone, fax and e-mail information for each AMIA member.
- IMIA Yearbook of Medical Informatics: Published by the International Medical Informatics Association, this annual

publication includes the best papers in medical informatics from an international arena.

Journal of the American Medical Informatics Association (JAMIA) AMIA's bimonthly journal, JAMIA, presents peer-reviewed articles that assist physicians, informaticians, scientists, nurses, and other health care professionals develop and apply medical informatics to patient care, teaching, research, and health care administration. JAMIA has rapidly established a reputation for presenting high-quality, cutting-edge information. Each issue contains state-of-the-art reviews, discussion forums, and invited editorials presented as brief reviews or full-length papers. A variety of formats accommodates work at all stages, from model formulation through definitive studies.

JAMIA received an impact factor for 2003 of 2.51 from the Thomson Institute for Scientific Information (ISI). The Impact Factor is a measure of the frequency with which the „average article“ in a journal has been cited in a particular year. This impact factor is a ratio between citations and recent citable items published. The impact factor is useful in clarifying the significance of absolute citation frequencies. This rating places JAMIA #1 among 19 other journals in the field of medical informatics for 2003.

The Journal is indexed in Index Medicus, MEDLINE, EMBASE/Excerpta Medica, CINAHL, Science Citation Index, Social Sciences Citation Index (SSCI), SciSearch, Social SciSearch, Research Alert, Current Contents/Social & Behavioral Sciences, and Current Contents/Clinical Medicine.

JAMIA is owned, copyrighted and sponsored by AMIA and is an automatic member benefit to most AMIA members. When subscribing to JAMIA, members also receive access to the on-line version of the journal available at www.jamia.org. Outside subscriptions are also available.

Uruguay

Uruguay is a small Country, located in the Southern Cone of South America. SUIS, its health informatics society, was created in 1996, and currently has about 100 active members.

SUIS goals are:

- To create a favorable environment for the development of health informatics.
- To promote the inclusion of informatics in the education of health professionals.
- To create multidisciplinary links among professionals.
- To create ties with similar societies in the Americas and the World.
- To promote the use of standards in health informatics.
- To contribute to regulate the integrity and confidentiality of electronic medical records.
- To disseminate the importance and use of informatics among health professionals.

It has been active in trying to reach the above-mentioned goals, in the following ways:

- Fifteen educational activities were organized since SUIS was created, including courses, congresses, international and national videoconferences, seminars and workshops; with local, regional and international experts. Some of the subjects addressed were: the electronic patient record, privacy of health information, health informatics standards, quality improvement and health informatics, nursing informatics, telemedicine and distance education in health. Attendance

reached up to two hundred registrants for the electronic health records Conferences. It is currently giving an introductory course on health information systems, described in the IMIA-LAC chapter.

- The importance and use of informatics among health professionals was stressed, and computer literacy courses were promoted by SUIS and its members. This was one factor leading to about 75% of Uruguayan physicians using computers on a regular basis, according to the 2001 National Medical Survey.
- Infosuis, a Society bulletin, has been published since 1998 (see www.suis.org.uy). Starting in 2002, InfoSuis has an Internacional Standard Serial Number (ISSN 1688-0994 online and ISSN 1510-2173 hard copy).
- Regarding the development of National standards for clinical information in electronic format, SUIS participated, with several of its authorities and members, in the definition of a regulation requested by the Secretary of Health. Therefore, a regulation was approved by the Uruguayan Government regarding the electronic health record and health informatics standards: please see <http://www.presidencia.gub.uy/decretos/2003093001.htm>
- In the international arena, SUIS is a member of IMIA, IMIA-LAC and of the telemedicine and health informatics Spanish - Latin American CYTED working group.



Alvaro Margolis, IMIA Representative

Evelyn J.S. Hovenga
Guest-editor

IMIA's Working Groups and Special Interest Groups:

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Ubiquitous Health Care Systems

Health information systems first relied in mainframe computing, then this changed to a greater reliance on personal computers. The third significant 'wave' is about using computing technologies in a way that makes this invisible to the user, a phenomenon often referred to as 'ubiquitous computing'¹. Such unobtrusive, active and non-invasive technologies are especially useful to create awareness, suggest, prompt, urge or undertake any number of functions or activities to assist health care consumers, carers and providers to better manage health care. Such technologies may be used to minimise the impact on lifestyle of specific deficiencies such as cognitive or functional impairments. As a consequence their effective use will enable the continuation of independent living of the elderly and make healthcare available everywhere and at anytime.

IMIA does not yet have a specific working group promoting the necessary research, development and adoption of these types of computing applications. There is an existing international network of researchers, practitioners, educators and others working in this area although these scientists are not specifically concerned with the application of these technologies to support consumer health and wellbeing. The last international conference on ubiquitous computing did not include one health related paper². The technologies and concepts covered in this area are many and varied. It includes wearable computing, telepresence, smart rooms, human computer interaction, interactive workspaces, integrated design, handheld devices, distributed and mobile computing, vision based systems, display technologies, automatic identification, networked sensors, biometrics, embedded web servers, voice recognition, wireless networking, motion tracking, on-line communities and more. Such technologies have many potential applications within the health industry to benefit all of us once employed effectively to suit both provider work practices and consumer lifestyles. Perhaps this yearbook will stimulate some to establish a new working group to promote the adoption of these technologies in this manner.

Meanwhile we have many very active working groups and a special interest group undertaking many activities in support of IMIA's mission. We may well see some working groups changing to become special interest groups in line with IMIA's constitutional definitions of these groups as each reviews its future directions. It is with great pleasure that I present you with their reports detailing current objectives and future activities.

¹ Morris M, Lundell J 2003 Ubiquitous Computing for Cognitive Decline: Findings from Intel's Proactive Health Research. http://www.alz.org/Research/Care/Intel_UbiquitousComputing.pdf accessed 24 November 2004.

² Ubicomp2004 Sixth International Conference on Ubiquitous Computing held in Nottingham, England http://ubicomp.org/ubicomp2004/prg.php?show=papers_technotes accessed 25 November 2004

Nursing Informatics (Special Interest Group 1)

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IMIA Special Interest Group on Nursing Informatics (IMIA-NI) provides a key forum for promoting nursing informatics worldwide. To ensure that IMIA-NI continues to move forward in the right direction and achieve its objectives, it has revisited its strategy. A draft strategy has been developed for discussion at The IMIA-NI General Assembly being held during MEDINFO 2004. It describes IMIA-NI's vision, principles, aims and objectives, implementation responsibilities and monitoring arrangements. IMIA-NI's vision is to provide leadership in the development, implementation, and evaluation of Nursing Informatics world wide, as an inter-related component of Health Informatics, to ensure Nursing Informatics supports the nursing profession, organizations, communities and patients in pursuing and achieving health for all. The principles on which its activities are based include leadership, patient and public focus, ethics, innovation and evidence. Implementation will be guided by the 3 Ps, the Past – learning from; the Profession - informing, involving and consulting; and the Possibilities – developing creative solutions. It will be implemented by its officers, national and honorary members and working groups and monitored by IMIA-NI Executive and the IMIA Board.

Activities:

- IMIA-NI, its working groups and the nursing profession were well represented in the scientific programme of MEDINFO 2004. Activities included 5 panels, 2 workshops, 34 papers and 18 posters.
- The publication of the proceedings from the working conference that followed NI2003 “Improving Patient Safety with Technology.” has been distributed to conference participants and delegates of NI2003
- The next IMIA-NI conference will be held in Seoul, South Korea in 2006. Planning is well underway and the organizing committee will shortly issue invitations to participate.
- Two bids to host NI 2009 by Switzerland and Finland were presented at the IMIA-NI General Assembly at MEDINFO 2004 and Finland was chosen to host NI2009
- The IMIA-NI Honorary Members Forum held its first meeting at MEDINFO 2004.
- A number of the 10 IMIA-NI working groups held meetings, workshops, panels and presented papers at MEDINFO 2004 and continue to focus on a range of activities within their topic area. These topics include consumer health informatics, education, evidence based practice, nursing informatics history, nursing informatics management, nursing concept representation, nursing informatics research, telematics, standards, and open source. Some specific activities are listed below.
- Nursing Informatics Management Working Group held a meeting during MEDINFO to explore improving collaboration with nurse managers.
- Members of Consumer Health Informatics Working Group from USA, Korea and South Africa have presented papers and workshops at a range of nursing and health informatics events. The working group plans to revisit the conceptualisation of CHI in different countries and re-issue its survey and review its website.
- USA and UK are compiling a history of nursing informatics for their respective countries.
- An International Certificate of Nursing Informatics Specialist has been developed; the criteria and process are presently being piloted.
- The Open Source Nursing Informatics Working Group have established a

Nursing Informatics (Special Interest Group 1) (Continued)

website and mailing list; held meetings, tutorials and workshops at AMIA 2003, UK Open Steps Think Tank meeting, HC2004, Summer Institute in Nursing Informatics 2004; contributed to UK Government consultation on Open Source Policy; and are working closely with the IMIA OSWG. Its activities will continue to support the sharing of knowledge and ideas to promote benefits of Open Source in nursing through its website, which it intends to translate into other languages, at conferences and in partnership with IMIA OSWG.

In addition to the activities listed above national members contribute to a wide range of activities in their own countries. National reports relating to these activity are available on IMIA-NI website.

Many of the national members, honorary members and working groups members met during MEDINFO 2004 to consolidate the work they have undertaken since they met last year at NI2003 in Brazil and to plan future strategies to help realise the vision of IMIA-NI.

WG 1 - Health and Medical Informatics Education

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Homepage and IMIA HMI database
on [health/medical informatics:](http://www.imia.org/wg1)
<http://www.imia.org/wg1>

Objectives:

- To disseminate and exchange information on Health and Medical Informatics (HMI) programs and courses.
- To promote the IMIA HMI database on programs and courses on HMI education.
- To produce international recommendations on HMI programs and courses.
- To support HMI courses and exchange of students and teachers.
- To advance the knowledge of: (1) how informatics is taught in the education of health care professionals around the world, (2) how in particular health and medical informatics is taught to students of computer science/informatics, and (3) how it is taught within dedicated curricula in health and medical informatics

Recent Activities:

- The recommendations of the IMIA on Education in Health and Medical Informatics have now been translated into Spanish, Chinese, Italian, Turkish, Czech and Japanese. Anyone undertaking further translations must (1) formally seek permission from Schattauer, the publisher of the recommendations, (2) notify Dr Reinhold Haux at (Reinhold.Haux@umit.at) and (3) forward the URL to Dr. John Mantas so that a link can be established on the WG 1 website.
- IMIA HMI has a mailing list and anyone interested is able to join this list by via the IMIA webpages.
- Webpages are accessible via the IMIA homepage at <http://www.imia.org>
- The Book 'Global Health Informatics Education' edited by Hovenga E.J.S and Mantas J published by IOS Press was released for sale in San Francisco. The book can be purchased at half price (\$US80) directly from the IMIA office while stocks last.
- A meeting was held during September, 2004, in San Francisco, in conjunction with the Medinfo2004, the next meeting will be held in Geneva in conjunction with MIE2005.

WG 2 - Consumer Health Informatics

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Objectives:

- To provide a forum to enhance collaboration, share experiences, and promote research in Consumer Health Informatics (CHI.)
- To increase communication with other working groups at IMIA and other informatics organizations relevant to CHI.
- To establish itself as a group for funding agencies to consult on issues related to information technology projects in health care.

Background:

The Consumer Health Informatics Working Group (CHIWG) became an official IMIA Working Group in 2000. The CHIWG is concerned with electronic information related to health care available to the public (e.g. Internet, wireless, standalone electronic media). For its purposes, it defines Consumer Health Informatics as “the use of modern computers and telecommunications to support consumers in obtaining information, analyzing unique health care needs and helping them make decisions about their own health” (U.S. General Accounting Office, 1996, p.1.), in which the consumer interacts with the applications directly with or without the presence of health care professionals. The group’s interests focus on, but are not limited to, world wide web sites that offer advice about healthy living, research findings, and recommendations on specific disease conditions, descriptions of products, medications, and self-care health programs available to the public. Issues of concern may be the evaluation of the quality of information, education of the public, ethical issues related to electronic information and its effect on a person’s health care and relationship with health care providers.

1. Recent Activities:

- a. IMIA –NI CHI Working Group presented a workshop at the 8th International Congress in Nursing Informatics in Rio de Janeiro entitled, *Consumer Health Informatics within a Nursing Framework*.
- b. Paper Presentation by Nolwazi Mbananga on *Health Medical Terms: A foundation for Consumer Health Informatics*.
- c. Paper Presentation by Betty L. Chang on results of *USA CHI scope and definitions survey*
- d. Paper Presentation by Jeongeun Kim on results of *Korea and USA comparison on definitions of CHI*.
- e. Poster presentation by Graduate Students at the University of California, Los Angeles (Peggy Thomas, et al.): *Sources of Consumer Health Information for Alternative and Conventional Therapy*.
- f. Presentation by Nolwazi Mbananga entitled, *Challenges Facing Nursing Informatics Education and Research in South Africa*.
- g. Chairing sessions at NI 2003 conference

2. Discussion of Activities for 2003-2004:

- a. Working Group discussions indicated a desire to: Revisit current conceptualizations of Consumer Health Informatics in the different countries.
- b. Re-evaluate to see if our WEBSITE current survey taps domains under current conceptualizations.
- c. Modify survey according to conceptualizations.
- d. Add sociodemographics to survey: type of training, education, age, gender, number of years in training.

Consumer Health Informatics (IMIA WG 2) (Continued)

Members discussed ways of distributing the survey. Leadership positions for survey will reside with IMIA – NI Sig CHI Working Group members.

3. Follow-up Activities (after Rio de Janeiro conference)

- a. WEBSITE Concepts pertaining to consumer health informatics in nursing were circulated for input by all NI CHI working group members. Several modifications and revisions were made based on comments and additions of group members.
- b. CHI WG Chair drafted a proposal, “Perceptions of Concepts” based on the above discussion (attached, circulated to WG members)....this idea needs to be revisited to see if group wants to go ahead. WG also needs to examine this activity in view of strategic plan for the NI SIG (from Heather Strachan)
- c. Summary and recommendations of AMIA Spring 2003 Congress has resulted in the following publication: Betty L. Chang, Suzanne Bakken, S. Scott Brown, Thomas K. Houston, Gary L. Kreps, Rita Kukafka, Charles Safran, and P. Zoe Stavri, **Bridging the Digital Divide: Reaching Vulnerable Populations**, J. Am. Med. Inform. Assoc. 2004;11(6):448-457. PrePrint published November 1, 2004.

4. Looking to the future.

- a. Ascertain agreement on WEBSITE modifications. Submit for implementation on website.
- b. Re-evaluate proposal drafted based on previous discussions, and make a decision about action(s).
- c. Identify issues of critical importance to nursing and consumer health informatics. For example:
 - (1) nurses’ role and responsibilities in information and health literacy for consumers.
 - (2) critical challenges in education for consumer health informatics.
 - (3) review NI CHI WG goals, and develop a plan for the next 3-5 years.

WG 3 - Intelligent Data Analysis and Data Mining

Chair:

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(2003-2006)

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Objectives:

- To increase the awareness and acceptance of intelligent data analysis and data mining methods in medical community.
- To foster scientific discussion and disseminate new knowledge on AI-based methods for data analysis and data mining techniques applied to medicine. To promote the development of standardized platforms and solutions.
- To provide a forum for presentation of successful intelligent data analysis and data mining implementations in medicine, and for discussion of best practices in introduction of these techniques in medical and health-care information and decision support systems.

Recent Activities:

- A joint effort to disseminate the results and practice of DM methodologies has been planned with the Special Interest Group on Data Mining and Knowledge Discovery of AMIA (chair: J. Holmes) during last AMIA business meeting.
- A workshop co-sponsored by the IMIA WG and the AMIA SIG on KDD held at Medinfo2004:
- The IDAMAP 2004 workshop was held in Stanford on September 6th, just prior Medinfo 2004.

Intelligent Data Analysis and Data Mining (IMIA WG 3) (Continued)

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Future Activities:

- The working group will focus on specific topics of interest for the scientific community. In particular, the following issues will be explored:
 - the exploitation of predictive data mining in clinical medicine.
 - knowledge-based functional genomics and temporal data mining.
- The working group's web site will be further enriched, in order to offer a list of most relevant publications, technical notes and recent results to the general audience.
- A Special Issue is foreseen as the outcome of last IDAMAP workshop.

WG 4 - Data Protection in Health Information Systems

Chair:

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Objectives:

To examine the issues of data protection and security within the health-care environment. The Data Protection in Health Information Systems Working Group addresses state-of-the-art security of distributed electronic patient records (EPR).

Recent Activities:

- Working conference "Realizing Security of the Electronic Health Record" May 31-June 3 2003 at Varenna Italy. Proceedings have been published as a special issue of the Int. Journ. Medical Informatics, Volume 73, Issue 3, Pages 215-331 (31 March 2004) Realizing Security into the Electronic Health Record, Edited by Barry Barber, Dimitris Gritzalis, Kees Louwerse and Francesco Pinciroli.
- In the discussions during the Varenna working conference the following items were identified that were considered to deserve attention from IMIA:
 - The question whether for the EHR it is necessary to be able to reproduce its contents for a certain patient as it would have been presented to a specified health professional at a specified point in time in the past (the "time-machine"). This to be able to assess his professional behavior in view of the information he did retrieve from the EHR or could have retrieved from the EHR. The consequences of such functionality were briefly explored and found to be huge. The working conference suggests to the board to raise wider interest for this question not only of the IMIA members, but also of other professional associations.
 - A more active role of IMIA in the EHR modeling domain in co-operation with other professional associations and bodies (e.g. WHO), to stimulate transparency and coherence of the modeling activities.
 - Case descriptions of implementation of access control and authorization management were considered to be quite useful. A problem is how the effort involved could be rewarded. It was recommended that IMIA

Data Protection in Health Information Systems (IMIA WG 4) (Continued)

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stimulates the development of such case descriptions and makes these accessible through the IMIA website. The Security working group could develop and maintain a list of aspects that at least should be addressed in a case description.

- A need was recognized for a better definition of the health information professional. This could go hand in hand with a better positioning in general of Medical Informatics. In this respect a link with the IMIA working group on Education is important. It is also part of Information Governance. Although several groups are addressing this idea of core competencies, a more active role of IMIA was considered to be necessary.
- The Ethical Code of Practice was endorsed by the IMIA AGM 2002 (at Taipei).
- The Code has been translated in several languages (Croatian, Czech, Dutch, Finnish, French, Japanese, Greek, Korean, Portuguese, and Spanish), more translations are in preparation.
- From Brazil the issue was raised that the Code ought to be applicable also to paper records. Eike Kluge has prepared some changes in the Code to take this into account. A separate memo on this issue will probably be on the agenda. A complication could be that if we adapt the Code, then all translations would have to be adapted as well. The GA in Rome discussed this issue it was decided not to change the Code, rather it was proposed that each member country could amend the Code to deal with records other than electronic records. On this proposal no vote was taken. Jochen Moehr was elected as Chair of the Working group by e-mail ballot and appointed by the IMIA GA at its meeting in Rome in October 2003.
- The working group is preparing its next working conference in Dijon France in 2006. Francois Allaert (FR) is Chair of the Local Organizing Committee and Francis Roger France (B) Chair of the Scientific Program Committee. One Planning Teleconference involving the WG Chair and the Chairs of the OC and SPC has taken place. The date suggested for the conference is Thursday April 27 to Sunday April 30, 2006. In keeping with the preceding discussions, the Theme will be **“Time and space independent security in health data”**. A meeting of the Scientific program Committee was held on Friday Sep. 10, during Medinfo 04.
- An e-mail survey among the WG membership was conducted in October regarding the
 - Mission and Name of Working Group
 - Membership in Working Group
 - Awarding of Conference Sites
 - Other

Considerate responses were received, compiled and presented to the membership during a business meeting of the WG on Thu. Sep. 9, 2004 during Medinfo in San Francisco. The revision of the IMIA By-laws will impact these activities. They are therefore watched closely.

Future activities:

- Preparation of a draft Security Policy Framework. Little progress has been made in this matter since the leader of this effort, Barry Barber has retired from active professional activities.
- Further objectives, beyond the EHR may include usability of high technology, telecommunication security, genomic/proteomic/metabolomic data bases, long term data security, etc. The setting of priorities among these alternatives is subject to further discussion in the working group.

WG 5 - Primary Health Care Informatics

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Objectives:

To promote primary care computing by:

- acting as a forum for exchange of ideas between its members.
- providing information to its members to assist them in progressing primary care computing in their own country.
- increasing the understanding of primary care computing issues with a view to publishing the results of these discussions.

Recent Activities:

- The journal, *Informatics in Primary Care*, has been relaunched by Radcliffe Publishing, with endorsement from IMIA WG5 and involvement of members of the working group on the Editorial Board. The journal has now received Medline listing. Full text available at: www.radcliffe-oxford.com/ipc.
- Members of the working group continue to liaise at an international level on key local and regional initiatives in primary care informatics. Our key international partners include EFMI Working Group 7 (Primary Care), Informatics Working Party of WONCA (The World Organization of Family Doctors), and the American Medical Informatics Association's Primary Care Informatics Working Group.

Future Activities

- Review papers for *Yearbook of Medical Informatics 2005*
- Continued development of recruitment plan for working group.
- Continued development of work plan to deliver our stated objectives.
- Continued collaboration with *Informatics in Primary Care* journal.
- Website presence through the IMIA web site.
- Sharing outcomes from each nation and region.

WG 6 - Medical Concept Representation

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Objectives:

To provide a forum for state of the art dialogue and collaboration on natural language processing and concept representation in healthcare applications. IMIA's Medical Concept Representation Working Group is the international forum for issues related to informatics in the classification and coding of health data. The working group is charged with:

- 1) Reviewing health data nomenclature and classification needs for the world community.
- 2) Evaluating information processing technology in meeting these defined needs; and
- 3) Recommending methods for future classification and nomenclature systems.

Recent Activities:

- Joint panels on Terminology and Natural Language Processing were held at Medinfo 2004 with MIE and AMIA working groups.
- A resumption of the triennial meeting series will follow in 2005, to be located in Europe. Dr. Barry Smith of the University of Buffalo and The Institute for Formal Ontology and Medical Information Science, part of the Faculty of Medicine of the University of Leipzig, will be Program Chair.

WG 7 - Biomedical Pattern Recognition

Chair:

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Objectives:

- promote applications in medicine and biology focusing on methods of pattern recognition and interpretation.

This means that this WG is primarily oriented to methodology. However, WG7 should address a large variety of different problems in all kinds of clinical disciplines, environmental medicine, behavioural sciences and psychology. All kind of observable phenomena recorded as signals, images and other meaningful patterns are regarded in respect to diagnoses, therapy planning, surgery and modelling. Four different steps are always involved in these complex procedures:

1. data acquisition of biosignals and medical images,
2. digital data processing for deriving significant features,
3. classification, and
4. interpretation.

According to this broad spectrum of different tasks, technology and methodology have to be optimally adopted to a specific problem solution. Multidimensional statistical methods as well as heuristics are used for feature extraction and for classification procedures. However, in order to develop useful systems and strategies for clinical routines, and to derive validated models for interpretation purposes a comprehensive medical knowledge is as important as methodological skills.

Because WG7 is yet an active and successfully working unit of IMIA, the agreed principal orientation with respect to its contents, - particularly biosignal processing - should be maintained. Furthermore, I will try to extend the application area to image processing and related subjects as there are computer assisted planning and performance of surgical operations and navigation. Because these subjects show an increasing importance for current clinical routine one should think of a new WG dedicated to these objectives. Presently, since this field is not covered by an independent working group, WG7 could be a suitable unit to champion those activities.

Workplan:

The approved practice of organizing working conferences with peer reviewed proceedings under the patronage of IMIA and IFMBE on special current topics should be maintained. These activities provide an ideal forum for discussion and planning of collaborations between interested experts worldwide. Furthermore, it offers opportunities to young colleagues to get in touch informally with experts and leaders of their fields. For next year, such an event is already planned in Japan. Furthermore, one could think about joint sessions for International and European conferences like IEEE EMB, IEEE SPIE, MEDICON, EMBEC which provide many themes belonging also in the field of Medical Informatics. Particularly, the pattern recognition community has a great overlap with colleagues of Biomedical Engineering and Medical Informatics Societies.

Interactions with other IMIA working groups and overlaps:

As far as the brief statements of the other IMIA working groups allow interpretation, there could be interesting collaborations with

- Biomedical Statistics and Information Processing (WG12)
- Intelligent Data Analysis and Data Mining (WG03)
- Technology Assessment & Quality Development in Health Informatics (WG15)
- Telematics in Health Care (WG18).

Overlaps with other groups are not really obvious.

Recruitment of other working group members

WG7 is proud to exhibit a list of wellknown approved and recognized international experts. Despite this positive situation WG7 will try to contact colleagues in this field in order to expand the group.

WG 8 - Mental Health Informatics

Chair:

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Objectives:

- This group was established at the IMIA Board meeting in August 2000 with formal confirmation being received in October 2000. The proposal was triggered by an increasing recognition of the need to consider the special information and informatics needs of this domain, which represents some 10% of all healthcare activity. The domain has special information-handling requirements, and a range of challenges commencing with the longer-term, multi-site nature of much mental health care and the emphasis on qualitative and attitudinal data. At the same time, it is hoped that techniques to assist with these particular needs in health informatics will enrich more biophysical care domains as well.

Recent Activities:

The intended work of the group continues to be frustrated by lack of resource support, largely indicative of the problem faced by mental health services more generally. The last report indicated how it was hoped to link the working group to a large integrated electronic patient record research project seeking European Commission funding, so as to provide a funded platform for wider work. Unfortunately, it has just been learned that funding for this integrated project has not been secured, so that opportunity will not be available. This means that yet further attempts must be made to find support.

Meanwhile, the Working Group will be represented at an exploratory expert workshop funded by the European Science Foundation (the co-ordinating bodies of all the national research councils in Europe) assessing the practical and ethical issues of networked e-Health solutions.

Future Activities:

Unfortunately, future activities must continue to focus on finding funding and practical support.

WG 9 - Health Informatics for Development

Chair:

Nora Oliveri (2004-2007)
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Medical Informatics Foundation
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@informedica.org

Homepage:

<http://www.mifound.org/WG9>

Objectives:

- To find out how health care informatics could improve live conditions in developing regions and implement programs in that direction.
- Organization of forums to exchange of experiences of colleagues working in the field of health informatics.
- Making a list of the needs and resources in medical informatics for each country.
- Organization of educational activities in developing regions, especially through the implementation of professors' exchange.
- Organizing workshops and seminars with international experts participation.

General Information:

- Web Page: Information about activities, publications, how to join the WG Health Informatics for Development and links to web sites related are available at URL: www.mifound.org/WG9.
- Mailing List: To facilitate communication between members and all professionals interested in IMIA-Health Informatics for Development goals. Language: English and Spanish. To subscribe, send a message to: IMIA-WG9@pccorreo.com.ar. Subject: Subscribe. Body: name last name e-mail contact data.

*Health Informatics
for Development
(IMIA WG 9)
(Continued)*

- Related Mailing Lists:
 - HELINA-List: HELINA-L@uku.fi, Contact: Mikko Korpela
 - International Network for the Availability of Scientific Publications: INASP_Health@compuserve.com, Contact: Neil Pakenham-Walsh
 - SUPERCOURSE: super3+@pitt.edu, Contact: Ron Laporte;
 - WG94 : wg94-1@uku.fi

Activities:

- Workshop during Medinfo 2004 in San Francisco. This WKS focused on the study of different means and actions to solve the digital divide in Health Care in countries in transition. The goal of the Workshop was to further the depth and scope of innovative and efficient usage of Information and Communication Technology (ICT) in the development of Healthcare sector, identify good practices and discuss the newest trends at international level. The WKS focused on applications of ICT in Health.
- Management Meeting during Medinfo 2004. Renew of Authorities (Chair) and Planning main topics and agenda for the new period.

***WG 10 - Health
Information Systems***

Chair:

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Co-chair:

Dr. Dario A. Giuse (2000-2006)
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Eskind Biomedical Library
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Objectives:

- To provide a forum for collaboration among world members, and to promote systematic development and research in the field of health information systems.
- To identify and assess problems and success factors of health information systems and to provide intensive feedback between the scientific community, healthcare professionals, and the health IT industry. This implies a "horizontal" orientation with close contact to other working groups.

Recent Activities:

- Preparations have started for the WG working conference in Nashville, TN, USA. Discussion groups and elaboration of critical aspects will play a significant role in this conference.

Future Activities:

- The next major activity will be a working conference in Nashville, TN, USA in spring 2005.

WG 11 - Dental Informatics

Chair:

Dr. Wook-Sung Yoo (2000-2006)
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Co-chair:

Gary F. Guest, DDS (2003-2006)
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Email: guest@uthscsa.edu

Objectives:

To bring the small, but rapidly growing, community of dental informaticians around the world into closer contact.

Recent Activities:

- More members have joined this working group. There are currently 83 list members and 48 web members.
- The Dental Informatics working group home page (<http://www.ecs.gannon.edu/IMIA>) has been updated and more dental informatics related literature information was entered to the "Dental Informatics Literature Survey" site.
- On March 11th, 2003, during The 80th ADEA Annual Session, ADEA Technofair & Expo 2003, Interfacing Informatics to Dental Education was held. The meeting was chaired by Dr. Gary Guest, co-chair of WG 11. The presented workshop and Expo were highly appreciated and broadly discussed by the participants. All these contributions were published on Journal of ADEA.
- A meeting and workshop were held at MedInfo 2004 in Sept. 7-11, 2004, in San Francisco, California, USA. The proposal for organizing the IMIA WG 11 conference is under preparation.

Future Activities:

- Improve access to information of dental informatics through IMIA WG 11 home page.
- The next addition to the home page will be a "News" page identifying current dental informatics activities in countries and posting summaries or links to news items or web-sites related to these activities.
- Develop a close collaboration with other dental informatics groups.

WG 12 - Biomedical Statistics and Information Processing

Chair:

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Objectives:

- Statistical methodology plays a great role in many tasks of information processing. It contributes to both biomedical research and healthcare applications. There is no possibility of critically analyzing papers in biomedical journals without understanding principles of statistics.
- Papers published in reviewed journals should guarantee both a scientific quality and practical significance of published results. However, we can often find wrong statistical analyses of collected data that lead to misleading conclusions. It is clear that often we need to generalize findings received only from samples drawn from populations under consideration. In this case statistical inductive reasoning makes it possible to calculate the degree of confidence of generalized conclusions objectively. Therefore, statistical methodology concerns itself with different aspects of data collecting (sampling methods) and data processing (computational statistics) using statistical tools for estimation of unknown population parameters and hypotheses testing. Statistical methods are often used in a broad field of biomedical applications, e.g. clinics, epidemiology, genetics, pharmacology, and other areas of healthcare. The Working Group will focus on a broad scope of statistical methods in medicine and health care including their contribution to the topics of clinical trials, meta-analysis, data mining, and decision support.

*Biomedical Statistics
and Information
Processing
(IMIA WG 12)
(Continued)*

Co-Chair:

Prof. Leon Bobrowski
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Recent Activities:

- The WG members have been active in the past in different conferences and workshops connected with statistics in biomedicine and healthcare. Every two years, workshops on Statistics in clinics have been organized at the Institute of Biocybernetics and Biomedical Engineering and the Polish Academy of Sciences. The most recent workshop was held in June 2000. These workshops combine education and research in the field of clinical statistics. The working group seeks to organize sessions at these conferences, as well as in the future MIE, IMIA conferences. It intends to establish closer co-operation in this field with IMIA member countries as well as with international societies and other bodies in the field of biomedical and health statistics, e.g. Biometric Society, International Society for Clinical Biostatistics, and International Society for System Science in Health Care.
- The membership of the IMIA WG 12 is open to all interested in more active contributions to the field of biomedical statistics and information processing. To the end of August 2003 there were 28 active members.
- A meeting and IMIA working conference Statistical Methodology in Bioinformatics and Clinical Trials was held in Prague, April 12-14, 2004 <http://www.euromise2004.org>. Selected papers were published in the special issue of an international journal.

***WG 13 -
Organizational and
Social Issues***

Chair:

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Objectives:

- To investigate organizational, social, ethical, and individual behavioral issues surrounding the introduction and use of informatics applications.
- To determine strategies for product design and technological change to support health care delivery through information and communication technologies.
- To provide a forum for the discussion, exploration, and sharing of expertise concerning effective evaluation of informatics interventions for clinicians, patients, and others.
- To incorporate attention to organizational, change management, social, evaluation, and ethical issues into information technology projects.
- To foster and present scholarly work and sound policy related to the WG objectives.
- To serve as a resource on organizational, social, evaluation, and ethical issues.
- To identify additional resources and develop educational programs and curricular materials.

Recent Activities:

Medinfo 2004 Activities

- panel on Gender and Role Identity in IT Design and Use

AMIA Symposium Activities

- A tutorial on Evaluating the Impact of Health Care Information Systems, was presented by the chair of the AMIA Quality Improvement WG and the chair of IMIA WG13 at the AMIA Fall Symposium 2002 and 2003

Outreach and Collaborative Activities

- Coordination with sister EFMI and AMIA working groups produced the Information Technology in Health Care: Socio-technical Approaches conference in Portland, OR, 2004
- The chair's activities to raise awareness of organizational and social issues in medical informatics included:

Organizational and Social Issues (IMIA WG 13) (Continued)

Chair:

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- serving as a Program Chair for the IFIP 8.2 conference on “Relevant Theory and Informed Practice: Looking Forward from a 20 Year Perspective on Information Systems Research” in Manchester, England, 2004
- organizing panels on the relationship between the medical informatics and information systems disciplines for three conferences:
 1. Americas Conference on Information Systems, July 2004
 2. IFIP WG8.2 conference on Relevant Theory and Informed Practice: A 20 Year Retrospective on IS Research, August 2004
 3. Information Technology in Health Care: Socio-technical Approaches, September 2004

Continuing Collaborative Projects

- Together with AMIA People and Organizational Issues WG, creating and maintaining a bibliography of classic papers for the AMIA People and Organizational Issues web site.
- Nominating and reviewing papers for the Diana Forsythe Award of the AMIA People and Organizational Issues WG.

Future Activities:

Doctoral Consortium

- joint with the AMIA POI WG

WG 15 - Technology Assessment and Quality Improvement (TAQI)

Chair:

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Co-chair:

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Objectives:

- To promote comprehensive assessments of healthcare information technologies.
- To demonstrate the value of assessment methods in healthcare information technologies.
- To promote international cooperation toward developing methodological issues.

Recent Activities:

- Collaboration with the EFMI working group on evaluation is ongoing.
- Further collaboration with other working groups will be established. The website that will be developed in the Netherlands will also be made available for the IMIA working group. Members of TAQI and from other interested working groups will be contacted to provide feedback.

WG 16 - Standards in Health Care Informatics

Chair:

Michio Kimura, M.D., Ph.D.
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of Medical Informatics
Professor and Director
of Medical Informatics Department
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Objectives:

- To advise about standards from an academic perspective.
- To promote the mutual identification of needed standards world-wide.
- To share information to facilitate mutual coordination of standards development in health informatics.

Expanded description of the content areas that will be worked on by the proposed Working Group

- WG 16 itself does not create a new “standard”, rather, it devotes its activity on promotion of mutual identification and coordination by posting and maintaining an inventory of health informatics standard activities.
- Usually, standard development activities are by volunteers, vendors, and immediate users. It is quite natural and fine for them to devote efforts to acquire fruitful outcomes. Sometimes, however, potential future users’ profit could be underrated.
- IMIA is academically oriented, and is a world-wide organization which has connections with countries which participate less currently in existing standard development activities.
- Therefore, IMIA WG 16 inputs thoughtfulness for future users and for multi-cultural environments, as advisory to standard development activities.

Recent Activities:

- Post and maintain an inventory of health informatics standard activities, for the purpose of promoting mutual identification between activities, as well as proliferation to users. A web site (<http://mi.hama-med.ac.jp/stds/index-en.html>) is maintained which reports up to date activities of ISO and CEN.
- A workshop was held at APAMI 2003 at Taegu, Korea, October 2003. Prof. Ed Hammond, and Prof. Yun Sik Kwak (new ISO TC 215 chair) joined.
- A workshop was held at MEDINFO 2004 at San Francisco.

Future Activities:

- Provide advising from academy side to activities and ISO/TC215 and CEN TC 251. (IMIA is already a liaison of ISO/TC 215.)
- Supply advice to activities for them to be world-wide, with thoughtfulness of multi-cultural environment. Virtually, initial mission is to high-light differences of health and personal information handling caused by each country’s health and medical cultural differences.

WG 18 - Telematics in Healthcare

Chair:

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Objectives:

- To explore the rationale and perspective of Health Telematics
- To promote the design and development of open architecture and interoperability tools
- To promote the analysis, design and development of methodologies and applications to support collaborative work in healthcare information systems
- To share experiences on E-health, Telemedicine and Professional Healthcare networks.

Recent Activities:

- 1/ The organization of a workshop on the subject of « Regional Healthcare Networks » during the last MIE2003 congress in Saint-Malo (France). This workshop draw a very interesting landscape of the current researches and developments of Medical Regional Networks and future research perspectives on the applications of CSCW to Medicine.
- 2/ Building a website to give information on this large subject including: Telemedicine, Open Hospital Information Systems, Healthcare Regional Networks.
- 3/ A workshop on this topics was held during the Medinfo Meeting in San Francisco (2004).

Open Source Health Informatics Working Group

Chair:

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Co-Chair:

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Objectives:

The objectives of the group as developed at its formation in 2002 remain relevant. While the group is named 'open source', our areas of interest include free/libre software and open source software, including GNU/Linux.

The objectives of the group are:

- To provide a forum for discussion and for a collaborative, non-judgemental work environment to explore, and where appropriate promote and facilitate, the application of free/libre and open source solutions within health, healthcare and health informatics.
- To bring together experts and interested individuals from a wide range of health professions and with a range of interests in the potential application of free/libre and open source solutions within their domains of expertise.
- To explore the implications of the free/libre and open source approaches for all aspects of IMIA's areas of interest.
- To work with other IMIA Working and Special Interest Groups to explore the appropriate use of free/libre and open source solutions and applications.
- To facilitate both the use of other groups' expertise in the areas under consideration, and the input of IMIA views to those other groups' work and discussions.

Recent Activities:

1. A new mailing list for the Working Group has been established at oswg-1@lfmotol.cuni.cz It is being moderated by Dr Vejvalka.
2. Prof. Wright and Dr Murray additionally held several meetings with AMIA members interested in open source, and as a result of our encouragement, a proposal was developed to the AMIA Board, and accepted, which has resulted in the setting up of an AMIA Open Source Working Group. Dr Murray is a member of the interim Executive Committee of the AMIA OSWG. The IMIA OSWG will work closely with the AMIA OSWG, and joint activities were held at medinfo2004.

Open Source Health Informatics Working Group (Continued)

Co-Chair:

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3. A very successful two-day meeting was held at the Marwell Hotel, Winchester, UK on 10-11 February 2004. Dr Murray and Prof Wright were instrumental in the organization and delivery of the event, which brought together 30 people, mainly from the UK, but also from other EU countries and from North America, to discuss priorities for open source work in the health and health informatics areas. Dr Veyvalka spoke about the OSWG and its activities. The meeting was significantly organized in conjunction with OSHCA (Open Source Health Care Alliance) and also helped to showcase the WG and IMIA to other important bodies represented at the meeting, including the European Commission, the WorldVista organization, and NICTIZ (the Dutch National IT Institute for Healthcare).
4. A report of the Marwell meeting is available through the WG website, at <http://www.chirad.info/marwell04/marwellreportv01.htm>.
5. A follow-on meeting to the Marwell meeting was held at HC2004 (Harrogate, UK, 22 March). Titled 'After 'Open Steps': priorities for open source and free software in delivering health informatics at the point of care', the meeting is being organized by Prof. Wright and Dr Murray. Attendance was disappointing (due to competing sessions at the conference) and so a separate report will not be made of this meeting, but it will be wrapped up in an overall report of the series after the medinfo2004 meeting.
6. The Working Group continues its contact with OSHCA (Open Source Health Care Alliance) and a number of other free/libre/open source groups, and is exploring other ways of working with organisations and individuals. Contacts are maintained with other groups, for example, through Dr Murray's membership with the UK-based Association for Free Software (AFFS).
7. The IMIA OSWG has been accepted as an observer to the Sixth Framework European Commission-funded COSPA project, which aims to analyse the effects of the introduction of open source software and open data standards in European public administration organizations - <http://www.cospa-project.org/>
8. Dr Murray and Pat Evans have written a chapter for a new version of Saba and McCormick's nursing informatics textbook.
9. Dr Murray has presented a session on free/libre/open source software at SINI2004, the Summer Institute in Nursing Informatics organised by the University of Maryland School of Nursing and held in Baltimore in July 2004.
10. The WG held a business meeting at medinfo2004 in conjunction with the AMIA OSWG and the IMIA-NI Open Source Nursing Informatics WG.
11. The WG co-sponsored a tutorial at medinfo2004 (Open Source and Free Software: the Potential for Applying Open Source Solutions to Health Informatics Problems in Education, Research and Practice) delivered by several WG members.
12. The Working Group website has been developed in parallel with development of the IMIA-NI OSNI website (www.osni.info)

Future Activities:

- The Working Group is aiming to hold a scientific meeting in 2005. Currently, we are having discussions with colleagues in the Cuban Medical Informatics Society to explore the possibility of it being held in Havana, Cuba, in 2005. Other options are also being explored for meetings in 2005 and 2006.
- The WG will submit proposals for meetings, workshops, and other activities

**IMIA Working
Group Web Site
Review Task Force**

**Report to the Board and General Assembly, San Francisco,
7th September 2004**

Members of the Taskforce:

Peter Murray - National Representative, United Kingdom

Virginia Saba - Immediate Past Chair, Special Interest Group in Nursing Informatics

Karl Øyri – member, IMIA-NI Open Source Nursing Informatics Working Group

Steven Huesing - Executive Director, IMIA Rod Ward (co-opted member; webspinner, British Computer Society Nursing Specialist Group)

Reporting to Evelyn Hovenga, Vice President, Working Groups and Special Interest Groups.

Scope of the Taskforce

The IMIA Working Group Web Site Review Task Force was established in July 2003 by Nancy Lorenzi, then Vice President, Working Groups and Special Interest Groups. Its work was based on the assumption that:

IMIA selected the Nursing Informatics Special Interest Group as the prototype web site based on the richness of the Nursing Informatics Working Group structure and content. IMIA would like to have the working group web sites modeled after the NI web site.

Tasks to be accomplished:

1. To review IMIA's working group web sites in context of the above assumption and to make a report with suggestions for each Working Group. This report should be made available to the Working Group Chair, the VP of Working Groups and the Executive Director.
2. To work with the Working Group Chair (or the delegate) and the Executive Director to implement the suggested changes.

Activities Undertaken by the Taskforce:

1. An initial survey was undertaken (July 2003) of the status of WG websites. Of the 18 Working Groups listed on the IMIA website:

- 8 did not have a group website (they only had the information that is listed on the group's page on the IMIA website, ie the same information as appears in the IMIA Yearbook),
- the rest had their own website either as an additional area on the IMIA website or hosted externally.

Most of the websites, however, had little content and/or had material that was out of date or had not been updated for at least many months. Some of the links listed on the IMIA website were not working or had other problems.

2. A short survey was sent in January 2004 to all the WG chairs and co-chairs as listed on the IMIA website. This essentially asked them to confirm the information on the IMIA website regarding WGs' web presence and to indicate who, if anyone, was responsible for its maintenance. Replies were received from 9 WGs.

In addition, a check was again made of the information provided in WGs' pages on the IMIA website. This confirmed that the situation was essentially the same as in July 2003.

*IMIA Working
Group Web Site
Review Task Force
(Continued)*

3. A questionnaire was emailed to all WG chairs and co-chairs in February 2004. This asked them a number of questions about whether their WG wished to have a web presence additional to the WG information page that is maintained on the IMIA website (or whether that page was sufficient), and if they did wish to develop a larger web presence, which of various options they favoured. Replies were received from 10 WGs.
4. An interim report was submitted to the IMIA Board meeting of April 2004 and a final report was presented to the IMIA Board meeting of September 2004.

Current status and issues:

- i. A brief analysis of the survey replies indicates that most of the groups that currently have websites wish to maintain them themselves.
- ii. Three WGs have indicated that they would like to develop websites and for IMIA to maintain them.
- iii. WGs are generally evenly divided as to whether they want flat html files or dynamic sites (content management system or database-driven); many want both.
- iv. WGs are evenly divided as to whether all WG websites should conform to an IMIA standard format, but most want the flexibility to maintain their sites as they feel most appropriate.
- v. WGs without current websites wish to develop them, and are seeking suitable individuals within their WGs to be involved.
- vi. Most WGs want the facility for a designated person within the WG to be able to directly update the information held on the WG on the main IMIA website.

Proposals:

1. As IMIA's financial situation will become clearer after the medinfo2004 accounts are settled, and in light of current financial constraints, it may be unwise to try and proceed too fast in developing recommendations from this taskforce if IMIA is then unable to actually deliver on them. We suggest that the work of the taskforce be held in abeyance until IMIA's financial situation is clarified and it is able to devote an identified budget to supporting any recommendations from this taskforce. Once these areas are clarified, the Vice President, Working Groups and Special Interest Groups should recommend how to take forward any work.
2. If it is decided to reactivate the taskforce, then a suggested outline plan of action would include:
 - a detailed analysis be undertaken, and the specific needs of each WG be identified, with a report with suggestions to be prepared for each WG (as per task 1). The reports will also be sent to the VP of Working Groups and the Executive Director (as per task 1) (suggested timescale: within 3 months of reactivation)
 - the implications of the reports for IMIA (in terms of service provision, finance, etc.) will be identified in general terms and for each WG, through discussions between the taskforce, the WG chairs and co-chairs, and the VP of Working Groups and the Executive Director (as per task 1)
 - a final report of the taskforce will be prepared for the IMIA General Assembly and Board meeting. This will cover the issues identified above and the final suggestions for taking matters forward (to achieve task 2).

Dr Peter J. Murray (UK representative to IMIA; Co-chair, IMIA Open Source Health Informatics Working Group) on behalf of the taskforce.

EFMI

Regional Editor: Arie Hasman

Structure

The constitutional bodies of EFMI are

- The EFMI-Council, a General Assembly of all members, officers and working group chair persons.
- The Board of officers, treasurer, vice presidents and president
- Working Groups organised by a chairperson (see also the EFMI-homepage, addresses, member societies)

Objectives

The objectives of the European Federation for Medical Informatics (EFMI) founded in 1976 are:

- To advance international co-operation and dissemination of information in Medical Informatics on a European basis;
- To promote high standards in the application of medical informatics;
- To promote research and development in medical informatics;
- To encourage high standards in education in medical informatics;
- To function as the autonomous European Regional Council of IMIA

Activities

All European countries are entitled to be represented in EFMI by a suitable Medical Informatics Society. The term medical informatics is used to include the whole spectrum of Healthcare Informatics and all disciplines concerned with Healthcare and Informatics. The organisation operates with a minimum of bureaucratic overhead and each national society supports the Federation by sending and paying for a representative to participate in the decisions of the Federation's Council. Also, and again to reduce overhead, English has been adopted as the official language, although simultaneous translation is often provided for congresses in non-English speaking countries.

Information about EFMI and EFMI related activities can be obtained via the website: <http://www.efmi.org>

Countries

Currently, 27 countries have joined the Federation, and are named as

Austria, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Finland, France, Germany, Greece, Hungary, Ireland, Israel, Italy, Moldavia, The Netherlands, Norway, Poland, Portugal, Romania, Slovenia, Spain, Sweden, Switzerland, Ukraine and United Kingdom. Application are open to representative societies in countries within the European Region of WHO. The EFMI council and board normally meet twice a year. Furthermore, it is represented by a Vice President (Europe) at meetings of the Board and the annual General Meetings of the International Medical Informatics Association (IMIA).

Congresses and Publications

So far 17 general congresses (Medical Informatics Europe – MIE) have been organised by EFMI. These have taken place in Cambridge (1978), Berlin (1979), Toulouse (1981), Dublin (1982), Brussels (1984), Helsinki (1985), Rome (1987), Oslo (1988), Glasgow (1990), Vienna (1991), Jerusalem (1993), Lisbon (1994), Copenhagen (1996), Thessaloniki (1997), Ljubljana (1999), Hannover (2000), Budapest (2002) and St. Malo (2003).

EFMI has started a new series of meetings: the Special Topic Conferences. Its concept has the following components:

- Organization by a member society in combination with its annual meeting
- EFMI council meeting is integral part
- Topic defined to the needs of the member society
- Relevant EFMI Working groups are engaged for the content
- Contributions mostly on invitation
- Small 2-day conference with 100+ participants

EFMI (Continued)

The first conferences took place in Bucharest/Romania 2001, Nicosia/Cyprus 2002, Rome/Italy in 2003 and Munich/Germany in 2004. The last conference was about the content of the EHR in relation to continuity of care and evidence based medicine. For 2004 Athens/Greece is envisaged.

The proceedings of these congresses were usually published by Springer in the series "Lecture Notes in Medical Informatics" and by IOS Press in the series "Studies in Health Technologies and Informatics".

A selection of the best papers from the MIE-conferences were published in a special volume of the International Journal of Medical Informatics. The next MIE congress will take place in Geneva/Switzerland in 2005.

To date five official journals adopted by the Federation are: *Methods of Information in Medicine, Medical Informatics & The Internet in Medicine, Health Informatics Europe, International Journal of Medical Informatics, Informatics in Primary Care.*

EFMI WG MCMS MBDS, Case Mix and Severity of Cases

Chair:

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Objectives:

The organisation of special topic conferences, workshops, Teaching sessions in the European Region on MBDS, Case Mix and Severity of cases and their applications to Resource management and outcomes of care.

The communication of up to date experiences and/or references between members, including national uniform data sets, terminology, coding system and patient classification methods for resource management and quality of care.

The dissemination of results about informatics tools and telematics systems in this specific area among EFMI and IMIA affiliated members and participants to their meetings.

Recent activities:

Special Topic Conference 2001 in Collaboration with PCS-E, Patient Classification Systems Europe. "Case Mix: Global Views, Local Actions" Bruges, 10-13 October 2001.

MIE2002 Workshop (26 Aug 02 Budapest – Hungary): Case Mix and outcomes measurements: experience in Hungary and situation in 20 countries.

MIE2003 Workshop (5 May 03, 17h30): St Malo, France on Case Mix data future (organized by J.M. Rodrigues and F.H. Roger France).

MIE Special Topic Conference 2003 (4-7 October, Rome, Italy). The content of Electronic Health Records: Clinical Data Sets for continuity of care and evidence based medicine. (Joint Working Conference promoted by EFMI and AIIM organised by Prorec Italia).

20th PCS/E Conference 2004 Budapest, Hungary (27-30 October 2004). Bridging countries, connecting continents, synchronising concepts and experiences with Case Mix.

Future activities:

MIE2005 Geneva, Switzerland (28 Aug – 1 Sep 05). Workshop on Case Mix variations among European countries.

Publications:

Roger France F.H., De Moor G., Hofdijk J., Jenkins L. (Eds.) *Diagnosis Related Groups in Europe*, Ghent, Goff BVBA, ISBN 90-73045-01-0, 259 p., 1990

Roger France F.H., Noothoven van Goor J., Staehr Johansen K. (Eds) *Case-Based Telematics Systems towards Equity in Health Care*, IOS Press, Amsterdam, ISBN 90-51991-82-7, 207 p., 1994

Roger France F.H., Mertens I., Closon M.C., Hofdijk J. (Eds) *Case Mix: Global Views, Local Actions – Evolution in Twenty Countries*, IOS Press, Amsterdam, No 86, 177 p., 2001

Roger France F.H. *Case Mix use in 25 countries : a migration success but international comparisons failure*. *International Journal of Medical Informatics*, 2003, 70, 215-219.

EFMI WG IPAM Information Planning and Modelling in Health Care

Chair:

Bryan Manning
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@btinternet.com

Objectives:

To develop generic approaches across an ever-widening range of health and linked social care domains.

Focus:

The Group operates as a "think-tank" drawing together leading-edge expertise not only from across the clinical and medical informatics spectrum but also from other professions with relevant generic input to focus on selected topic areas in support of clinical and healthcare management processes.

Recent activities:

Whilst the group tends to focus on specific core topic area for each year it sets this in the context of previous work, which is aimed at drawing together generic best practice models of service provision. Areas covered include:

- Resource Management – planning and performance management systems
- Clinical Pathways and Decision Support – process mapping systems
- Inter-agency linked Case Management - e-GIF and secure intranets
- Clinical Case Planning and Audit – performance monitoring systems
- Remote Patient Monitoring and Case Management - mobile computing
- Epidemiology and Service Logistics – geo-spatial and community care
- Clinical Knowledge Access – care process-linked indexing

In addition to the workshop held at MIE'2003. The WG delivered a paper on "Clinical Process Maps as an Indexing Link to Knowledge and Records" at the ECDL 2003 Healthcare Workshop in Trondheim, Norway as part of the international conference on Research and Advanced Technology for Digital Libraries. This year have been focusing on Risk and Security Modelling and presented some of these concepts at a two day Conference "Making Medical Informatics Work" held in Manchester in the Spring.

Future activities:

It is hoped to present two papers at the HUSITA 7 in Hong Kong in 2004 on "Joining-up Community Services: A Framework Utility Approach" "Optimising Child Protection: Inter-agency Networked Records"

The former was originally accepted for HUSITA 6 in the USA but cancelled due to the 9-11 tragedy. In addition to continued work on the areas covered above other sub-groups are working on Risk Management and techniques for Managing Major Healthcare Programmes More Effectively.

EFMI WG NURSIE Nursing Informatics in Europe

Chair:

Patrick Weber
Nice Computing
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@nicecomputing.ch

Objectives:

- To support nurses and nursing organizations in the European countries with information and contacts and the field of informatics
- To offer nurses opportunities to build contact networks within the informatics field. This could be accomplished by arranging sessions, workshops and tutorials in connection with the Medical Informatics European (MIE) conferences or by arranging separate meetings.
- To support the education of nurses with respect to informatics and computing.
- To support research and developmental work in the field and promote publishing of achieved results.
- To publish in 2005 a book in collaboration with nurses from USA, New Zealand about today nursing informatics situation.

Recent activities:

May 2003 St-Malo MIE: Workshop with good participation and Working group meeting
June 2003 Rio-Janeiro NI: Active participation of many members from our group as well as for Tutorial, Workshops, and Scientific presentation. Also for the post congress Workshop we had a good participation. The results are edited in a proceedings entitled: Marin H.F, Mendoca E., Pedreira M. Pereira Marquez E. Improving Patient Safety with Technology. E-papers editor. 2003.

EFMI WG NURSIE Nursing Informatics in Europe (Continued)

Co-chair:

To be elected next meeting August 2005

Secretary:

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Active participation of 2nd European Nursing Informatics congress In September 2003, in Frankfurt Germany.

November 2003 Bled Slovenia together with our Slovenian representative active participation in their annual conference where I gave a keynote speech.

March 2004 Sarajevo active participation at the conference organized by the EFMI Bosnian representative

Finland wins the competition for the organization of NI 2009

Several of our members are very active and participate in many congresses and Workshops on Open source. Karl Oyri or Peter Murray could be contacted.

Together with editors from US, New Zealand and myself for Europe we have collected documents from experts from all over the world in order to publish a book in Autumn 2005

Several country's members of our WG are directly involved into developments corresponding to our aims please look at country reports on the Website www.nicecomputing.ch/nieurope

Future activities:

Prepare for MIE 2005 in Geneva a big event concerning nursing activities with probably a one full day track. Do not hesitate to come: it will be very interesting with high value presentations.

The day after the closing of MIE one more day is dedicated to nursing with the 3rd ENI European Nursing Informatics conference.

End of 2005 the book will be on the market place.

Weaver C.A., Delaney C.W., Carr R.L., Weber P., "Nursing and Informatics for the 21st Century: An International Look at Practice, Trends and the Future" editor HIMMS.

EFMI WG EDU Education in Health Informatics

Chair:

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Co-chair/Secretary:

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The Netherlands
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Objectives:

To organize workshops and possibly tutorials dedicated to the WG topics at each MIE conference, and other events.

To cooperate with IMIA WG 1 regarding Recommendations about Health Informatics Curricula and other subjects involving education and training in health informatics.

To disseminate knowledge about education and training in health informatics by various activities, such as conferences, educational events, publications and electronic means.

To encourage individuals to publish their research and other work in journals.

To provide a forum for discussion and debate.

Recent activities:

The last activities of WG EDU were organised during the MIE 2003 at San Malo, in 2003.

In San Malo during MIE2003 a formal workshop was held. During the workshop presentations were made by a number of speakers in the area of Education and Training in Medical Informatics.

The idea of building up a database collecting educational material across Europe has been discussed at the workshop. The purpose of it is to collect and distribute freely material for educational purposes to educational institutions in Europe facilitating the idea of Education in Health Informatics. Also it has been decided during the St. Malo Workshop the updating of the educational material developed by the IT Eductra and Nightingale projects. However, cost calculation for such activities could be a real obstacle for building up an implementation.

Educational issues have been discussed also during the ICICTH Conference that was held in Samos Island on 11-13 July, 2003. Panel participants included R. Engelbrecht, A. Hasman, R. Haux, and J. Mantas.

Members of EFMI WG on Education have participated in the publication of the book titled "Global Health Informatics Education" edited by E. Hovenga and J. Mantas, published by IOS Press, Amsterdam 2004.

EFMI WG EDU
Education in Health Informatics (Continued)

An EFMI Special Topic Conference was held in Athens on 19-20 March 2005 according to the decision taken during the EFMI Council meeting in Munich. The main theme was Health Informatics Applications - Educational Aspects

Future activities:

During the MEDINFO Conference 2004 a joint workshop (IMIA and EFMI) will be organized to accommodate educational issues.

A database collecting educational material across Europe will be developed and tested. The purpose of it is to collect and distribute freely material for educational purposes to educational institutions in Europe facilitating the idea of Education in Health Informatics.

Also the process of updating of the educational material developed by the IT Eductra and Nightingale projects will be initiated.

EFMI WG PCI
Primary Care Informatics

Chair:

Dr Simon de Lusignan
Primary Care Informatics
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London
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Introduction:

The Primary Care Informatics Working Group aims to promote the further development of this emerging scientific discipline. In particular, to develop the core generalisable theory that should underpin it. The group aspires to promote good practice, professionalism and the development of primary care informatics as a scientific discipline, within EFMI. Its aim for 2005 is to take a prominent role in the Athens STC in March and at MIE in August in Geneva.

Objectives:

The objectives of the group are parallel to those of EFMI, but focussed on a primary care perspective:

- To advance international cooperation and the dissemination of information in primary care informatics
- To promote high standards in the application of primary care informatics
- To promote research and development to develop a core generalisable theory for primary care informatics
- To encourage high standards in education in health informatics

Themes:

To help achieve its objectives the activities of the working group are to be focussed around defined themes. The list is not mandatory and other themes can be added or removed depending on the wishes of the group. However its aim is to maintain focus, and make it more likely that the group will achieve some useful outcomes.

1. Data quality:

Exploring the barriers to the coding of structured information in Primary Care and how these may be overcome. This work includes data quality initiatives.

2. The use of computers in patient-centred consultations:

Primary care is delivered through consultations. Usually these are one-to-one encounters between the patient and the healthcare professional. Use of the computer tends to interfere with the patient centred tone of the consultation. The challenge is to develop technology that supports patient centred consulting.

3. e-Health initiatives:

Telemedicine and telemonitoring of patients in their own homes has been demonstrated in a wide range of clinical settings. They are slowly being integrated into mainstream practice. The working group will wish to explore the characteristics of the scalable e-health initiative, and how it can be implemented in primary care.

4. Knowledge management for primary care:

Information overload is a real phenomenon in clinical practice. Primary care professionals need to know where to look for information rather than hold it themselves: we need to develop an appropriate knowledge management strategy for primary care.

*EFMI WG PCI
Primary Care
Informatics (Continued)*

Recent activities:

1. Reduced subscription to the Journal of informatics in Primary Care

Members of the working group are able to obtain a reduced subscription. Please see the working group part of the EFMI website for details. New subscribers are also entitled to a free book.

2. Increasing the working group membership

We wish to increase the membership of the primary care working group, and encourage representation from all EFMI member countries. The working group has been expanded over the last year, but needs to develop its membership further. Council members are urged to encourage primary care professionals to join the working group – so that the group contains a pan-European sample of primary care informaticians.

3. Developing an official relationship with WONCA Europe

The EFMI Primary Care Working Group has established an official link with WONCA Europe. Our plan is to make members of both organisations aware of each others activities.

4. Co-organiser of a Pre-Medinfo 2004 International primary care consensus conference: What is primary Care Informatics?

A one day joint conference of AMIA, EFMI and IMIA primary care informatics working groups took place on 7th September 2004. The purpose is to define PCI and to produce a consensus statement by the end of the conference. The meeting attracted over 50 delegates from five continents. A paper based on this conference is to be submitted for publication.

The meeting concluded that: Provision of comprehensive primary care computerised medical records should be part of all national IT strategies. And, that this provision had three components: (1) Adequately resourced technical infrastructure; (2) Training and development of a cadre of knowledgeable practitioners of primary care informatics; (3) Developing the academic discipline of primary care informatics so that the results experimental work underpin its core generaliseable theory.

5. Presentations at the STC in Athens

Members of the working group presented at the Special Topic Conference “Health and Medical Informatics Applications - Educational Aspects.” In addition a working group meeting was held at the conference

Future activities:

MIE2005 – Geneva 2005

The working group plans to take an active part in this conference.

Summary:

The primary care working group would like to hear from any primary care professional with an interest in participating in working group activities. The group is keen to boost its membership, and keen to encourage primary care informatics streams within EFMI events.

Publications:

de Lusignan S. Introduction to the Primary Care Informatics Working Group of the European Federation for Medical Informatics (EFMI). *Informatics in Primary Care*. 2003;11(3):175-6.

de Lusignan S. What is primary care informatics? *Journal of the American Medical Informatics Association* 2003 Jul-Aug;10(4):304-9.

EFMI WG NLU Natural Language Understanding

Chair:

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Co-chair:

Patrick Ruch
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Objectives:

To organize workshops dedicated to the WG topics at each MIE conference, and other events. To participate to related MEDINFO workshops.

To organize special topic conferences on Natural Language related subjects.

To have personal connections with people involved in NLP in the medical domain, especially in Europe, and to learn about their current developments and activities. To develop connections with experts in the general NLP domain and to participate to related events (ACL, COLING, ...).

To represent EFMI at IMIA WG on Knowledge Representation; to represent EFMI at AMIA SIG on NLP; to represent EFMI at MEDINFO; to represent EFMI at AIME. In general, to participate to events of these entities.

Recent activities:

- AMIA SIG on NLP has been open under chairmanship of Stephen Johnson; EFMI NLU WG is actively represented by chair and co-chair persons. Last meeting was in San Francisco, Medinfo 2004.
- Organisation of the Special Topic Conference on NLPBA (Natural Language Processing for Biomedical Applications) at COLING in Geneva, August 2004. Following this event, a special issue of an international journal should publish the most relevant papers.
- A workshop on NLU has taken place at the Saint Malo MIE'2003 conference.
- A joint workshop of NLU with AMIA and IMIA corresponding working groups was organized in Medinfo 2004, on the junction of medical informatics and bioinformatics, seeking for common tools and possibly common developments in the future. An attendance of some 50 persons debated on this topic and others.

Future activities:

- The IMIA WG6 has now decided to organize a working conference in 2005 in Rome, Italy. After two rounds in the US, the next one is in Europe. Professor Barry Smith has been elected as chair of the WG6 with the mandate of organizing the next working conference. EFMI WG8 is in close contact with the organizers helping in the setting up of this event.
- The next MIE 2005 conference in Geneva is a target for a new workshop of the NLU WG. A keynote speaker from the US will be invited for the conference and this should drive discussions on the future of NLP applications.
- Several groups involved with NLP have recognized the need of more elaborated ontologies. NLU is a forum of discussion in Europe with the goal to prepare and to submit new ontology-based research projects to the European Union for funding. The existence of several languages in Europe makes the need of such ontologies more important than it is at other places.

EFMI WG OIMI Organisational Impact of Medical Informatics

Chair:

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and Management
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Objectives:

To organize workshops and tutorials dedicated to the WG topics at MIE conferences and other events

To establish networks of people involved in human and organizational issues in the healthcare domain, and to learn about new developments and their activities

To disseminate knowledge about human and organizational issues by various activities, such as conferences, educational events, publications

To encourage individuals to publish their research and other work in journals

Recent activities:

A workshop was held at MIE2003 in St Malo (France), May 2003.

The special issue of *Methods of Information in Medicine* with selected papers from the first ITHC conference (*Information Technology in Health Care: Sociotechnical Approaches*) has been published in the fall of 2003 (vol. 42 no. 4).

At Medinfo2004 IMIA Working Group 13 'Organizational and Social Issues of Medical Informatics' AMIA People and Organizational Issues Working Group and EFMI WG OIMI organized a joint business meeting.

Several papers, workshops and panels covering the domain of EFMI WG OIMI have been presented at MedInfo2004.

After Medinfo2004, on September 13 and 14, 2004, a two-day working conference 'Sociotechnical Approaches in Health Informatics' was held in Portland, Oregon. This working conference was a follow-up to the successful sociotechnical conference in Rotterdam. Selected papers will be published in a special issue of the *International Journal of Medical Informatics*. The conference aimed at presenting new research and insights from the medical informatics, information systems and social studies of science and technology communities.

The website is <http://medir.ohsu.edu/ithc2004/>.

Enquiries about the follow-up of ITHC2004 and the special issue can be from Paul Gorman (OHSU), at e-mail: gormanp@ohsu.edu, or Jos Aarts at e-mail: j.aarts@bmg.eur.nl.

Future activities:

As custom a workshop and a business meeting will be held at MIE2005, and colleagues will be encouraged to submit papers in the domain of OIMI. See <http://www.mie2005.net>.

ITHC2007 will be held in Australia in conjunction with Medinfo2007.

EFMI WG MICIT Medical Informatics in Countries in Transition

Chair:

Ass. Prof. Lăcrămioara Stoicu-Tivadar
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Objectives:

To promote exchange of information between actors in Europe, developing regions and world-wide, for improved access and use of data and knowledge.

To investigate the needs, opportunities and obstacles for health information systems, informatics and telematics in developing regions.

To disseminate European and world-wide results and experiences across developing regions and professionals

To facilitate access to European groups and their facilities and outcomes by students, medical practitioners, nurses, health managers and any other person from developing regions interested in learning and working together with partners in Europe and other industrialised countries

To analyse and promote the use of Internet resources and applications to bridge gaps between north and south and between west and east, to act as a clearinghouse of information on resources of all kinds of mutual interest to health informatics and telematics participants in Europe and developing regions.

To review and select from different education options for the medical informatics domain from a range of experien

EFMI WG MICIT
Medical Informatics in
Countries in Transition
(Continued)

Co-chair/Secretary:

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Recent activities:

November 2003: Meeting in Bruxelles between M. Sosa and L. Stoicu-Tivadar and in Timisoara with George Mihalas in order to establish a good “transition” and harmonize the groups’ interests and objectives.

May 2004: Organizing a Workshop on European dimensions of health informatics: barriers and driving forces.

Results:

- An exchange of information between individuals from Romania and Hungary mostly regarding the education in the medical informatics domain, seen from a Medical University and from 2 technical universities points of view.
- Discussions on the Bologna document and presentation of various intentions of implementation for the two countries.

September 2004: Participation as co-organizer at the workshop “Bridging the Digital Divide: e-Health for Development”, prepared jointly with IMIA Working Group 9 “Health Informatics for Development”, within the frame of MEDINFO 2004 in San Francisco.

Future activities:

Establish an Internet based discussion group concerning implementation of healthcare information systems, to attract experts from consulting companies to express their opinions on practical cases and launch the need for standards in all countries, including the ones in transition.

Identify the ability of the countries in transition to approach the interoperability concept and the capacity of integration regarding the health information systems.

EFMI WG EHR
Electronic Health
Record

Chair:

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Co-chair:

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Objectives:

The working group deals with the issue of electronic health records in the different levels of development. Such levels concern the case level, organisational level, regional level, national level, and international level. In that context, the Working Group supports

- studies on specification, implementation, and promotion of standards for EHR,
- the modelling of its architecture and its interoperability, as well as
- the education on that topic.

The EFMI Working Group “Electronic Healthcare Records”

- organises workshops dedicated to the WG’s topics,
- supports contacts to the scene,
- represents EFMI to corresponding structures within IMIA as well as other organisations dealing with the topic.

The EFMI Working Group “Electronic Healthcare Records” especially deals with the

- analysis of different EHCR approaches, harmonising tools and methods for specification, presentation, implementation and use for common views,
- consideration and evaluation of the single model versus the dual model approach, especially,
- population of CEN prENV OCC with KR and Archetypes,
- harmonisation of terminology used,
- correction, refinement and harmonisation of UML models defined in different approaches,

The EFMI Working Group “Electronic Healthcare Records” strongly co-operates with the EUROREC initiative and its supporting institutions as well as with global EHR activities such as the openEHR Foundation

The Working Group co-operates strongly with the EFMI WGs “Security, Safety and Ethics” and “Communications and Interoperability” and other organisations dealing with the issues of EHR

EFMI WG EHR
Electronic Health Record
(Continued)

Recent activities:

During the report period, several working conferences and workshops have been organised and tutorials have been provided partially in co-operation with other organisations. In that context, Chair and Co-Chair acted as Conference Organisers, Chair of the Scientific Programme Committee as well as Keynote Speakers. With strong support of the former EFMI President, Rolf Engelbrecht, the following activities have been realised:

- EHR Working Group Meeting during the MIE 2003 in St. Maló
- EHR Workshop at the Annual Conference of the German Society for Medical Informatics, Biometry and Epidemiology (GMDS), organised in co-operation with the GMDS Working Group “Standards for communications and interoperability” (14-18 September 2003, Muenster, Germany)
- EFMI Special Topic Conference 2003 “The content of EHR: Clinical Data sets for continuity of care and evidence-based medicine” (6-7 October 2003, Rome, Italy)
- 6th EuroRec Conference (12-15 November 2003, Dublin)
- EFMI Symposium on “Electronic Health Record, Healthcare Registers and Telemedicine“ within the framework of the International Joint Meeting EuroMISE 2004 (13-16 April 2003, Prague)

Among others, invited presentations on behalf of the EFMI Working Group “Electronic Health Record” or presentations on the WG’s topics have been given to:

- IMIA WG4 Working Conference “Realising Security of Electronic Health Record” (31 May – 3 June 2003, Varenna, Italy)
- TEHRE 2003 (2-4 December 2003, London)

Beyond the report period, the following activities of the EFMI Working Group “Electronic Health Record” have been prepared and partially realised:

- EFMI Workshop on EHR Security within the framework of the International Conference for Medical Communications and Compunetics (ICMCC; 2-4 June 2004, The Hague, The Netherlands), organised in co-operation with the EFMI WG “Security” and the GMDS Working Group “Standards for communications and interoperability”
- EFMI Special Topic Conference 2004 “MIE 2004 - Contributions of Medical Informatics to Health” (14-15 June 2004, Munich, Germany)

Further activities have been dealt with the following aspects:

- Promotion of modelling and tooling for advanced EHR
- Moving the structure-based models to real components specifying structure and functionality
- Contributions to activities within ISO TC 215 and CEN TC 215 for representing the Working Group interests
- Official partner of the global openEHR initiative

Future activities:

Selected results of the aforementioned conferences will be published as Special Issues in international journals:

Selected papers from EFMI Symposium on “Electronic Health Record, Healthcare Registers and Telemedicine“ (Prague) will be published as Special Issue of the International Journal of Medical Informatics

Selected papers from EFMI Special Topic Conference 2004 “MIE 2004 - Contributions of Medical Informatics to Health” (Munich) will be published as Special Issue of Methods of Information in Medicine and Biology

Support of, and contributions to, conferences, tutorials, and other activities on the EFMI WG’s topics.

Detailed information about the events mentioned as well as about publications provided in the WG’s context can be requested by the WG Chair.

Publications:

Blobel B, Stassinopoulos G, Pharow P (2003) Model-Based Design and Implementation of Secure, Interoperable EHR Systems. In: Musen MA, Friedman CP, Teich JM (Eds.): AMIA 2003 Symposium “Biomedical and Health Informatics: From Foundations to

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Electronic Health Record
(Continued)*

Applications”, pp. 96-100. American Medical Informatics Association 2003 Proceedings, Bethesda.

Blobel B (2003) Architecture and tools for open, interoperable and portable EHRs. In: Nerlich M and Schaechinger U (Edrs.): *Integration of Health Telematics into Medical Practice*, pp. 25-33. Series Studies in Health Technology and Informatics, Vol. 97. IOS Press, Amsterdam.

Routsalainen P (2004) Security Requirements in EHR systems and Archives. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Nordberg R (2004) Policy Management and Access Control in Practise. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 428-433. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Katsikas S, Kokolakis S (2004) High Level Security Policies for Health Care Establishments. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 407-415. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Defteraious S, Lambrinouidakis C, Gritzalis D (2004) High Level Security Policies for Health: From Theory to Practice. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 416-423. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Pommerening K, Reng M (2004) Secondary Use of the EHR via Pseudonymisation. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 441-446. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Trpisovsky T (2004) Electronic Health Record on Cards. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1* 459-464. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Quantin C et al. (2004) A Peculiar Aspect of Patients’ Safety: The Discriminating Power of Identifiers for Record Linkage. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 400-406. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Louwerse K (2004) Access Control Management in Practical Settings. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 442-447. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Posthumus L (2004) Use of the ISO/IEC 17799 Framework in Healthcare Information Security Management. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 447-452. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Blobel B, Pharow P (2004) Implementing MDA-based Distributed Interoperable, Flexible, Scalable, Portable and Secure EHR Systems. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 394-399. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

Blobel B, Pharow P (2004) MDA-based EHR Application Security Services. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 387-393. Series Studies in Health Technology and Informatics, Vol. 103. IOS Press, Amsterdam.

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EFMI WG EHR
Electronic Health Record
(Continued)

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EFMI WG SSE
Security, Safety
and Ethics

Chair:

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Objectives:

Speeding up the use of ICT for health care increases the challenge for trustworthiness, security and safety of solutions and infrastructure deployed. The EFMI Working Group “Security, Safety and Ethics” aims to promote development, education and training on the field of security and privacy in health.

Relationships to other Working Groups:

The EFMI Working Group “Security, Safety and Ethics” establishes close collaboration with other Working Groups within EFMI and beyond for securing their ICT solutions for health and for promoting the awareness on security and privacy in this domain. It realises close relationships with and supports the IMIA WG 4 the European perspectives.

Activities:

The EFMI Working Group “Security, Safety and Ethics” organises conference, conference sessions, workshops, tutorials and training courses on the security and privacy field, especially using the framework of EFMI Conferences and other MI events such as MEDINFO.

The EFMI Working Group “Security, Safety and Ethics” publishes scientific and practical papers and materials, especially using EFMI-related groups and means such as the EFMI WG “Education”, “Public Relations” and the International Journals of Medical Informatics.

Recent activities:

During the report period, a working conference and has been organised in co-operation with the EFMI Working Group “Electronic Health Records”. Furthermore, a tutorial was given in co-operation with IMIA WG 4 during MEDINFO 2004.

The Chair acted as Conference Organiser, Chair of the Scientific Programme Committee as well as Keynote Speaker.

Following activities have been realised:

- EHR Working Group Meeting during the MIE 2003 in St. Maló (managed by Ragnar Nordberg)
- IMIA WG4 Working Conference “Realising Security of Electronic Health Record” (31 may – 3 June 2003, Varenna, Italy)
- EFMI Workshop on EHR Security within the framework of the International Conference for Medical Communications and Compunetics (ICMCC; 2-4 June 2004, The Hague, The Netherlands), organised in co-operation with the EFMI WG “Security” and the GMDS Working Group “Standards for communications and interoperability”

EFMI WG SSE
Security, Safety and
Ethics (Continued)

- Open Working Group Meeting during the ICMCC (managed by Ragnar Nordberg on behalf of the workshop's organiser Bernd Blobel)

Next activities:

Support of, and contributions to, conferences, tutorials, and other activities on the EFMI WG's topics.

The EFMI WG "Security, Safety and Ethics" will actively contribute to the IMIA WG4 Working Conference in Dijon (27-29 April 2006).

Publications:

Routsalainen P (2004) Security Requirements in EHR systems and Archives. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1. Series Studies in Health Technology and Informatics*, Vol. 103. IOS Press, Amsterdam.

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Blobel B, Pharow P (2004) Implementing MDA-based Distributed Interoperable, Flexible, Scalable, Portable and Secure EHR Systems. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 394-399. *Series Studies in Health Technology and Informatics*, Vol. 103. IOS Press, Amsterdam.

Blobel B, Pharow P (2004) MDA-based EHR Application Security Services. In: Bos L, Laxminarayan S, Marsh A (Edrs.): *Medical and Care Compunetics 1*, 387-393. *Series Studies in Health Technology and Informatics*, Vol. 103. IOS Press, Amsterdam.

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EFMI WG MIP Medical Image Processing

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Objectives:

To establish a reference image database for medical image processing research and development groups within the EFMI member countries

To establish a web-based information system for European image processing groups and their current activities

To create and maintain a working group website providing public information and (in a protected sub-area) WG-internal documents and work plans

To organize and conduct workshops dedicated to the WG topics at the MIE conferences and other events

To build and maintain close relationship with persons, groups, organizations and standardization bodies working on the MIP field and medical domains involved

Recent activities:

The *Reference Image Database Work Prototype RID-WP 1.0* has been under discussion in the working group. Promotion of the initiative has been done on various occasions, such as national image workshops and conferences, or by a conceptual publication in a special Issue of the *Methods of Information in Medicine* journal. Close collaboration with the US *Cancer Imaging Program* of the *National Cancer Institute*, and the *Insight Software Consortium* and *Kitware Inc.* has been started. This shall in particular help in pushing the efforts, create synergies and avoid uncoordinated parallel developments.

On behalf of the working group, co-chair Thomas Wittenberg has participated as panelist in the Breakout Session 2: *Databases as Required for Assessment and Application of Software Tools* (moderated by Maryellen Giger) at the National Institutes of Health (NIH) symposium on *Biomedical Informatics for Clinical Decision Support: A Vision for the 21st Century*, jointly organized and coordinated by the Bioengineering Consortium (BECON) and Technology Initiative Consortium (BISTIC), June 21-22, 2004 on the NIH main campus in Bethesda, Maryland. The meeting was very fruitful, ending up with short term (<5 years) and long term (>5 years) recommendations for how to build up reference databases. The recommendations are available on the WG Website www.efmi-wg-mip.net.

The 2nd WG workshop with seven presentations has been held successfully at Medical Informatics Europe (MIE) conference 2003 in Saint Malo on Monday, May 5th, 2003 on the topic *Integration of Medical Image Processing into Clinical Workflow and the Electronic Patient Record*. The 3rd WG Workshop with the topic *Medical Image Processing for Health – State of the Art, Challenges and Obstacles* has taken place on 16 June 2004, Munich, Germany, at the EFMI Special Topic Conference 2004. The participation for both events was very good. Lively discussions and new contacts made have made both events a success for the working group. All presentations are available on the WG Website.

The cooperation with CARS (Computer Assisted Radiology and Surgery) has been continued, the contacts to the organizers have been intensified. After the jointly organized scientific session on "Image Processing and Display" consisting of 15 presentations at CARS'2003 in London, UK, it was decided to skip the CARS'2004 in Chicago and concentrate on the next conference in Berlin, 2005 (see below).

A WG meeting has taken place at EFMI Special Topic Conference in Munich on June 16th, 2004. Strategy and harmonization of efforts for reference image databases stood in the focus of this very productive meeting (protocol see WG Website).

Future activities:

It has been decided in a WG chair meeting in Munich in June 2004, not to postpone the implementation of a Web-based Information System for European Image Processing Groups any more until funding is available. Instead, a first version shall be implemented with students at Kaunas University, Lithuania, under the leadership of WG co-chair Vytenis Punys.

For CARS'2005 conference in Berlin it is planned to organize a special track about "Medical Image Data Reference Archives and Correlated Software Tools and

EFMI WG MIP
Medical Image Processing
(Continued)

Technologies” co-operatively by CARS and EFMI.

With the Cancer Imaging Program of the National Cancer Institute the working group will harmonize the efforts and try to strengthen the position for another application for funding by the European Commission. Human networking will be intensified for this purpose, taking the preparatory work, done for a Network of Excellence application to the EC last year, as a starting point.

With the Insight Software Consortium and Kitware Inc. an improved version of the RID-WP will be used for hosting of the image datasets of a new medical image processing online journal. Contributors to this journal will have to deliver their image datasets, algorithms and parameters they have used to create the results to be published, and the image datasets shall be stored in the database of the working group.

Publications:

Clarke L: The LIDC Database Project. In: Blobel B, Gell G, Hildebrand C, Engelbrecht R (eds): Contribution of Medical Informatics to Health (EFMI STC’2004). Aka Verlag, Berlin, 2004, 128

Horsch A, Prinz M, Schneider S, Sipilä O, Spinnler K, Vallée JP, Verdonck-de Leeuw I, Vogl R, Wittenberg T, Zahlmann G: Establishing an International Reference Image Database for Research and Development in Medical Image Processing. *Methods Inf Med* 43(4)2004:409-412

Horsch A: The Potential of Medical Image Processing and the Need for Reference Data and Software to Accelerate its Exploitation for Patients’ Health. EFMI STC’2004, 126

Punys V: About an Initiative to Build a European Network of Excellence for Medical Image Processing. EFMI STC’2004, 127

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EFMI WG EVAL
Evaluation

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Objectives of the WG:

- To foster interdisciplinary discussion on evaluation issues in health informatics.
- To support communication on evaluation topics by organizing tutorials and workshops.
- To promote European networking on evaluation issues in health informatics.

Recent activities:

The working group was founded in August 2002 during MIE2002 in Budapest. Recent activities:

- Operation of a website (<http://www.umit.at/efmi>) and an international mailing list on evaluation (<http://www.umit.at/mailman/listinfo/eval>)
- Organization of an evaluation tutorial and of two workshops (one on evaluation education, the other on evaluation practice) at MIE2003 in St. Malo, May 2003.
- Contribution to the ESF Exploratory Workshop on Systematic Evaluation of Health Information Systems (HIS-EVAL), April 2003, Innsbruck.

Future activities:

- Operation of a website (<http://www.umit.at/efmi>) and an international mailing list on evaluation (<http://www.umit.at/mailman/listinfo/eval>) with now more than 230 members.
- Organization of a workshop on ”Good evaluation of Health Informatics Applications” with more than 60 participants at Medinfo 2004, September 2004, San Francisco, together with IMIA WG 15.
- Contribution as SPC members to the organization of the EFMI Special Topic Conference MIE STC 2004 in Munich, June 2004, on ”Contribution of Medical Informatics to Health Care”. A special issue on this conference in an international journal is co-edited by the WG chair.
- Organization of a tutorial on evaluation of IT in health care with around 20 participants

EFMI WG EVAL Evaluation (Continued)

during MIE STC 2004, June 2004, Munich.

- Finalization and publication of the Declaration of Innsbruck (see Publications).
- Creation of a web page on "How bad health informatics can negatively affect patient care" (<http://www.umat.at/efmi>).
- Creation of an Inventory of more than 1.000 abstracts on evaluation studies, available at <http://evaldb.umat.at>.

Future activities:

The working group is working on the following activities, which are done in cooperation with IMIA WG 15:

- Development of guidelines for Good Evaluation Practice (GEP-HI).
- Development of standards for reporting on evaluation studies (STARE-HI).
- Contribution to the establishment of an evaluation portal.

Publications:

- Ammenwerth E, Brender J, Nykänen P, Prokosch H-U, Rigby M, Talmon J, on behalf of the HIS-EVAL network. Visions and strategies to improve evaluation of health information systems - Reflections and lessons based on the HIS-EVAL workshop in Innsbruck. *Int J Med Inf* 2004 Jun 30;73(6):479-91.

EFMI WG Cards

Chair:

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Co-chair:

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Membership 34 members

The membership is open to everyone who agrees to the WG's objectives, tries to actively participate and references to the WG whenever applicable.

Objectives:

EFMI WG Cards aims at being a European competence centre to watch ongoing activities and to provide knowledge to policy makers and architect designers involved in the deployment of cards related projects in the field of the healthcare sector.

Three basic sectors are to be addressed:

- Card oriented competence and know-how (incl. infrastructure)
- Standardisation, harmonisation and interoperability
- Marketing, dissemination and deployment of WG ideas and results

In more detail, the following activities are planned for:

- Card oriented competence and know-how
 - Structured repository of card projects in the health sector
 - Acceptance and usability of cards/smart tokens
 - Security and safety aspects of cards
- Standardisation, harmonisation and interoperability
 - Standardisation, harmonisation and interoperability; Health strategy – legislation, assessment from the user's point of view
 - HPC + PDC interoperability / harmonisation
- Marketing, dissemination and deployment of WG ideas and results
 - List interests / competence of the different partners
 - Identify IT-trends
 - Watch the market: worldwide / Europeanwide
 - Lobbying
 - Educate people on cards and make them have a positive attitude
 - Review and monitor tenders and calls for applicable projects
 - Services, results of WG activities

The EFMI Working Group "Cards" strongly co-operates with EHTEL.

The Working Group is open to everyone who

- is interested in
 - attending the meetings; and in
 - contributing to the working islands/activities.
- and who agrees
 - to the Working Group Cards' Action Plan; and

EFMI WG Cards (Continued)

- to stating the origin of any background information drawn from the WG/ respectively the WG's activities

Recent activities:

The working group was established in December 2004 continuing the activities of Smart Card Charter TB11.

A home page was set up (http://medis.gsf.de/aktuell/EFMI_WG_CARDS/efmi.php).

An activity plan was designed, discussed amongst the members of the WG and agreed upon. Work on the activities has been assumed.

A form for establishing a data base on the members' competence has been designed.

WG meetings have taken place in Munich and in Budapest.

A presentation on the WG is being designed for use of the members

Members of the WG actively participated in

- eHealth2003
- OSC#7 - meeting Milan Dec 2003
- Workshop on Cards on EUROMISE Prague April 2004 (co-organised by EHTEL/ Medtel and EFMI WG Cards)
- OSC#8 - meeting London May 2004
- International Congress on Medical and Care Compunetics

Members of the WG are actively contributing to activities within

- ISOTC215;
- CEN/ISSS eHealth Standardisation Focus Group; and
- CENTC215

Future activities:

- WG meetings scheduled to take place in Munich June 16, 2004 and in Prague Dec. 9-10, 2004.
- Contributing to various conferences, e.g. Medtel 2004 / eESC 9 Joint International Conference Prague, Dec 2004
- Contributing to
 - Promotion of the European Health Insurance Card.
 - Promotion of the interoperability of the patient cards.
 - Promotion of the introduction of Health professional Cards in different European Countries.
 - support of national card strategies & projects.
- Contributing to activities within ISO TC 215, CEN/ISSS eHealth Standardisation Focus Group and CEN TC 215 for representing the Working Group interests.

Next activities:

- Organisation of the Workshop "Cards" at EFMI STC in Neuherberg, Germany 2004 June 16, 2004
- Medtel 2004 / eESC 9 Joint International Conference Prague, Dec 2004
- Support of and contribution to conferences, tutorials, and other activities on the EFMI WG's topics.

Publications

EFMIWG Cards homepage (http://medis.gsf.de/aktuell/EFMI_WG_CARDS/efmi.php)

Trpišovský T., Electronic Health Record on Cards, in: Medical and Care Compunetics 1, Vol. 103 Studies in Health Technology and Informatics, L. Bos, S. Laxminarayan and A. Marsh (eds.), 2004, 488 pp.

Hildebrand C., Trpišovský T., Health Cards and the need for a working group, Proceedings MIE 2004 Special Topic Conference, Blobel, Gell, Hildebrand, Engelbrecht (Eds.), AKA, Berlin (2004).

APAMI

Regional Editor: Yun Sik Kwak

*Regional Representative's Report - Dr Yun Sik Kwak (APAMI President 2003-2006)***1. Membership of APAMI**

Since reported in the IMIA Year Book 2004, there has not been a significant change; currently membership of the APAMI consists of 15 medical informatics societies representing Australia, China, Hong Kong SAR, India, Japan, Korea, Malaysia, New Zealand, Pakistan, Philippines, Singapore, Sri Lanka, Taiwan, Thailand and Vietnam. Bangladesh, Indonesia and Kazakhstan have been observer members. Bangladesh, India and Indonesia are very keen on forming its own national societies and many of their members have applied for correspondence membership with the IMIA.

2. GA Meeting of APAMI

There have been two APAMI GA Meetings in 2004, the first GAM of the APAMI was held in Kuala Lumpur, Malaysia on April 6, 2004 in conjunction with e-Health Asia 2004 with 12 member societies attending (Hong Kong SAR, Indonesia, Japan, Korea, Malaysia, New Zealand, Philippines, Singapore, Sri Lanka, Thailand, Taiwan and Vietnam).

In the AGA Meeting the following resolutions were made:

- a. Dr. Kumara Mendis (Sri Lanka) was appointed by members as the Chair of Working Group 2, Developing Countries.
- b. Members agreed to form a new Working Group 3, Decision Support and members were invited to volunteer to work with WGs.
- c. Members agreed to create a free Medical Informatics e-learning site on the APAMI web site.

The second APAMI GAM was held in San Francisco, U.S.A. on September 8, 2004 during MedInfo 2004 with 9 member societies attending (Australia, China, Hong Kong SAR, Japan, Korea, Philippines, Singapore and Taiwan).

In the second AGA Meeting the following resolutions were made:

- a. The minutes of the previous meeting will be circulated through an electronic means to have it approved.
- b. Treasurer's (Dr. CP Wong) report and

audit report were presented and approved unanimously by the members present.

- c. As had been discussed in 2003 AGA Meeting, the APAMI account will be kept as an independent account in a most efficient manner in an APAMI member society country in the future. For this Treasurer will study the possible method to achieve it.
- d. Ms Joan Edgecombe (HISA) made presentation on Med Info 2007 which will be held in August 2007 in Brisbane Convention Hall, Australia.
- e. Members were reminded of WG Standardization inaugural meeting which will be held in Juju, Korea during October 7 – 9 and implementation of SNOMED-CT discussion will also be included at this meeting. Forth coming NI Conference 2006 in Seoul, Korea was also announced.
- f. It is agreed that APAMI MIC will be held in between years of regular triennial APAMI MIC and Med Info to make annual conference of APAMI. The host society of this between year conferences will not have obligation to contribute fund to APAMI account, however, it hosts AGA Meeting.

3. Activity of APAMI Member Society

- a. e-Health Asia 2004 was held in Kuala Lumpur, Malaysia during April 6 – 8, 2004 with approximately 300 attendees and distinguished speakers from around world.
- b. The 2nd CHITA (China Health Informatics Technology Association) annual Meeting was very successfully held in Shanghai, China during May 16 – 18, 2004. The meeting was also participated by many distinguished speakers from the US and other countries.
- c. Korean Society of Medical Informatics 2004 Spring Conference was held on June 25, 2004 with approximately 300 attendees; the "Theme" was e-Health and u-Health.
- d. The 3rd Asia HL7 Cross Strait Conference was held in Taipei, Taiwan during July 9 – 10, 2004. Approximately 300 attended the excellent meeting with international HL7 experts speaking.
- e. The HL7 Japan Annual Meeting was held in Tokyo, Japan on July 13 with approximately 200 attendees. Speakers introduced new development in HL7 standards activities.

APAMI (Continued)

- f. The Taiwan government announced an ambitious 5-year project on NHII (National Health Informatics Infrastructure) in conjunction with already existing IC card application in health.
- g. Vietnam Ministry of Health established the National Health Informatics Development Centre and Prof. Ngyuen Phuong was appointed as the Director.
- h. At MedInfo 2004, 9 of the APAMI member societies (Australia, China, Hong Kong SAR, India, Japan, Korea, Philippines, Singapore and Taiwan) made total of 81 presentations including paper presentations, workshops and panel discussions.

The major future regional activities include:

- a. JAMI (Japan Association of Medical Informatics) and CJK (China, Japan, Korea) MI Annual Conference is scheduled to be held in Nagoya International Convention Center, Japan during October 26–27, 2004.
- b. HKSMI (Hong Kong Society of Medical Informatics) is going to organize a local health informatics conference — “The Next Generation — Alternative Approaches” on 10th December 2004 at the Hong Kong Convention and Exhibition Centre. The theme will encompass both Health Informatics and Enterprise Resource Planning.
- c. International Conferences on Health

Informatics and Application of Fuzzy Theory in Healthcare are planned to be held in December, 2004 in Hanoi, Vietnam.

Many other member society activities have also been planned to be held in fall, 2004.

4. APAMIWG Activity

- APAMI WG1, Standardization (Chair: Yun S Kwak) inaugural meeting is planned to be held in Jeju, Korea during October 7–9, 2004 to discuss future work items including EHR, messaging and communication, SNOMED-CT, Healthcard and others.
- WG 2, Developing Country (Chair: Kumara Mendis) and
- WG 3, Decision Support (Chair: TBA) have been approved to start activities in 2004.

5. Next APAMI Meetings

- a. The next APAMI MIC2006 is scheduled to be held in Taiwan in 2006.
- b. The next APAMI GAM will be held in the Philippines in conjunction with the first APAMI between year Annual MI Conference in the spring of 2005.

6. APAMI Web Site

A new site is being updated at <http://www.apami.net> by APAMI former secretary Dr. H Tolentino, secretary Dr. HM Goh and Vice-president Dr. Jack Li.

Helina - African Region

Regional Editor: Sedick Isaacs

Helina2003, the Africa Regional Conference took place in Gauteng in South Africa. The conference was a great success a great success. Abstracts will be published on the Helina web. More participants from the French speaking countries are needed.

An Africa Regional meeting was also held. The meeting made the following decisions:

1. Interest groups will be set up to try and present a papers on the respective interest at the next Helina. Follow up reports on projects presented at the current conference will also be invited.
2. Sedick Isaacs was nominated to another term as African Representative at IMIA. Sedick however, indicated that this will

be his third successive term. Dr Maduhu was then elected as joint representative with Sedick.

3. The next Helina Conference will take place in Arusha in Tanzania in 2005 with support from the other East African Countries. Dr I Maduhu will start this initiative.

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IMIA-LAC **The Latin-America and Caribbean Federation of Health Informatics**

Regional Editor:
Lincoln A. Moura Jr.

Regional President's Report

1. Conferences:

The IX Brazilian Conference on Health Informatics will be held in Ribeirão Preto, SP, from November 7th to 10th, 2004. Ribeirão Preto has 3 Medical Schools and a large student community. The Conference is expected to attract some 1,000 people. Details can be found on www.cbis.org.br.

The Conference will have as Keynote Speakers, Dr Nancy Lorenzi, from IMIA; Dr Kunio Doi, from the US; Mr Joseph Dal Molin, from Canada; and Drs Andrés Martinez Fenandes and Pablo Garcia Tahoces, from Spain. Around 440 papers have been submitted to the Conference, of which some 20% come from countries other than Brazil, including Argentina, Cuba and Spain.

The IV Latin-American Conference on Biomedical Engineering was carried out in João Pessoa, Brazil from September 17-20. The Brazilian Health Informatics Association took part indirectly in the Meeting, as Dr Lincoln A Moura, President of SBIS and President of IMIA-LAC coordinated the themes related to Health Informatics. Some 40 papers on Health Informatics were presented at the Conference, from which some 10 were from countries other than Brazil, and included Cuba and Argentina.

2. From the Member Countries:

Argentina

AAIM - Asociación Argentina de Informática Médica

www.aaim.org.ar

Publications

Informedica Journal. Edited by Medical Informatics Foundation, Full Text in Spanish with abstracts in English. URL: www.informedicajournal.org. Informedica Journal is a scientific forum dedicated to the study of Medical Informatics and related topics, new technologies, ICT and its application to the Healthcare sector.

Education

Hispano-American Virtual University was launched at the beginning of 2004. Graduate Courses and Continuous Medical Education for Healthcare professionals

available in Spanish and English.

www.informaticamedica.org

Cuba

SOCIM - Sociedad Cubana de Informática Médica

www.cecarn.sld.cu/socim/

In Cuba, a series of activities have been developed that reinvigorates the Cuban Health Informatics Society, SCIS, as a catalyzer of Healthcare Information Systems for the Country.

Keynotes Speeches:

“Speaking of Science”, Dr. Ismael Clark, President of the Cuban Academy of Sciences.

“Cyber-infrastructure for Healthcare”, Mr. Pedro Urrea, Director of the Medical Sciences Information Center.

Meetings

Health Informatics 2004, “Towards Information Systems for Primary Care”, carried out in March 24-27, 2004.

Publications

Cuban Journal of Medical Informatics, biannual publication.

Main Focus

Information Systems for Primary Care Consulting for the Public Health Ministry Strengthen our ties with other countries in the Region

Uruguay

SUIS – Sociedad Uruguaya de Informática en la Salud

www.suis.org.uy

The Uruguayan Society of Health Informatics, SUIS, has been active in promoting Health Informatics in the Country. As an example, it has organized and implemented an Introductory 24-hour Course on Health Information Systems, jointly with the School of Medicine. The course is supported by PAHO-WHO, the Secretary of Health and the School of Engineering. It counts on the participation of over ten experts from the Academia, Health Care Organizations and Software Companies. Participation is stimulated

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through problem-based small-group discussions and writing of a paper along the course. There is web-based support for the course on www.suis.org.uy.

There has been a permanent relationship with regional experts in health informatics, particularly with the participation in the Latin American Virtual Congresses of Health Informatics organized by AAIM, with other Argentinean experts who organized LatinMednet 2002 and SIS 2000-2002, with the Brazilian SBIS, and through CYTED with Chile, Colombia, Cuba and other Latin American Countries. We have fostered regional expert participation in Infosuis articles.

Brazil

*SBIS – Sociedade Brasileira de
Informática em Saúde*

www.sbis.org.br

A Manual of Best Practices in Developing Health Care Information Systems has been launched by SBIS, as part of the Electronic Patient Record Software Certification Process conducted by SBIS on behalf of the Brazilian Medical Council (CFM). CFM launched a set of regulations, in 2002, laying down the requirements Health Information Systems must meet to be certified by the Council. Organizations with certified systems will be released from keeping the information on paper. SBIS has become the certifying body for CFM, and has defined sets of procedures for certification. In February 2004, SBIS signed a covenant with CFM that provides SBIS with funding to support the task. The process is now in the self-certification phase, but it is

expected that by mid 2005 there will begin the second phase which includes auditing by SBIS accredited serviced. In September 2004 the self-certification process began. Some 12 companies have so far undergone the process. The next step is to prepare auditors that will be able go through the whole process.

SBIS is deeply committed to promoting the use of healthcare information standards and practices in the country, a process that is gaining momentum as the Health Ministry has announced that it will distribute software and components as “open software”.

3. Prospecting New Members

Many an effort has been developed by the country members of IMIA-LAC to attract other countries to join IMIA. Ecuador, Peru, Salvador, Chile, Colombia and Mexico are among the countries who have somehow been attracted to IMIA-LAC. Several unlisted small conferences and seminars have taken place among Latin-American countries. It is IMIA-LAC's intent to develop more aggressive and focused action towards increasing the number of member countries in the Region.

4. Contact information:

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North American Medical Informatics (NAMI)

Regional Editors:

Elizabeth Di Chiara, Don E. Detmer

North American Medical Informatics (NAMI)

Although IMIA's North American members COACH and AMIA have not yet agreed on forming an official North American region, there is a wealth of activity to report.

Health Informatics in Canada

COACH: Canada's Health Informatics Association

www.coachorg.com

Canada's Health Informatics Association, founded in 1975, represents a strong community of over 900 members from a broad range of health care related backgrounds who are committed to advancing the practice of health informatics. The Association's mandate is to promote understanding and adoption of health informatics within the Canadian health system through professional development, advocacy, and a strong and diverse membership. Key activities include:

- continuation of our major networking opportunities including the partnership with the Canadian Institute for Health Information (CIHI) in the development of e-Health, a major national conference,
- building new capacity to enhance health informatics as a profession and leveraging the professional development series consisting of three workshops focusing on Information Management, Security and Privacy and the Electronic Health Record,
- continued growth of members services including the publication of resource information such as the Guidelines for the Protection of Health Information and supporting the participation of COACH members on national initiatives in standards.

COACH provides an excellent opportunity for networking among members and with other related organizations locally, nationally and internationally. COACH's web site (www.coachorg.com) provides the first level of contact for the health informatics community in Canada. This community includes many leaders, not

the least of which are the Executive Director, Board Members and IMIA Representative for COACH. These dedicated individuals (see contact list) undertake the work and leadership for COACH and are supported by numerous volunteer committee members and COACH association staff. Those individuals are the door into the Canadian health informatics community for international contacts, national networking and communications and identification of key e-health initiatives across the country.

Another key networking opportunity is the annual e-Health Conference. In partnership with the CIHI, COACH hosts the primary national meeting for the health informatics community. The 2004 e-Health Conference featured over 1,100 attendees addressing the "Challenges Today for Success Tomorrow" which was held in beautiful Victoria BC, on May 8-11. Stimulating keynotes, including a hallmark presentation by the new President and CEO of Canada Health Infoway, Inc. (Infoway), Richard Alvarez, on the Electronic Health Record – Holy Grail were accompanied by the Great Debate series and numerous concurrent presentations on the successes and issues of health informatics initiatives across Canada. The 2005 e-Health Conference, "Realizing the Vision", is scheduled to take place April 30th to May 3rd, 2005 in Toronto, Ontario. It will continue the major focus on the electronic health record and augment that priority with sessions on putting more health into e-health, the human factors, leveling the playing field for vulnerable groups, telehealth, and future-proofing the health system. Concurrent with the Conference is the largest Canadian trade show for health informatics, an annual preview and presentation of what's new in health information systems and services by vendor, consulting and industry companies.

COACH will lead the way for Canadian efforts in advancing and advocating health informatics as an essential component of Canada's health care system. This will involve a number of strategies including partnering with other associations in the Health Informatics Association Collaborative (HIAC), a new initiative in cooperation with Infoway, partnering with

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(Continued)

industry through the Canadian Healthcare Information Technology Trade Association (CHITTA), and promoting the Patrons of COACH (organizations and vendors that are significant and highly valued contributors as key supporters of health informatics advancement and of COACH). All of these reflect the leadership efforts of COACH in building the profile, place and value proposition of health informatics as a means of change and sustainability for health care. Similarly, COACH maintains strong international partnerships through IMIA, through participation as a Co-Sponsor of the US HIMSS annual conference and through leadership on international and domestic standards initiatives.

COACH will also play a leadership role in the development of professional credentialing and minimum standards of practice for health informatics professionals in support of building the capacity and quality of professionals. As the \$2.0 Billion investments of Infoway and government jurisdictions drives real projects, there is a great need for expertise, skills and experience in implementing electronic health records and associated registries and domain repositories.

As Canada, and indeed the rest of the health informatics world advances its knowledge, training and curriculum for health informatics, so too must the means for delivering such training and information. COACH, in partnership with industry and other associations, will be advancing its tools for education services including e-learning services, easy to use web based course-ware, on-demand education modules and other related professional development options. Our busy world demands easy to use and timely education tools and many countries are developing such tools. COACH will re-use, leverage and build where necessary to meet the member needs for professional development.

Current best practice tools such as the COACH Guidelines for the Protection of Health Information, 2004 now available on-line, are a great demonstration of a leveraged COACH service that provides information and the knowledge of multiple experts applied to the key area of security and privacy. This "Information on IMIA

Regional Groups" yearbook of Medical Informatics 2005 is another example of an information tool that reflects the needs, interests and dynamics of the health informatics community, both nationally and internationally.

Standards for health information, including data structure, data content and data messaging standards are key to many EHR and related initiatives in Canada and worldwide. COACH is the conduit for communicating, assessing and engaging in consultations amongst much of the health care community. Whether those standards be domestically developed or come from international accredited standards development organizations such as the ISO Technical Committee 215, or from HL7, COACH is serving as the connection point for the health informatics community. With leaders in ISOTC215, HL7 and other standards also serving as COACH volunteers (Don Newsham, Kathryn Hannah, Dr Marion Lyver (COACH Liaison to ISO TC215), Roger Girard, Dennis Goikas and others), there is assurance that effective communication and participation in the standards approval process will take place.

Promoting the community of health informatics and the profession of health informatics requires visibility and recognition. For our members and volunteers, our leaders and for the exciting advancements in health informatics demonstrated across Canada COACH is developing an awards program that will celebrate achievements and excellence in the health informatics community that will be launched in 2005.

Related Organizations

COACH is an integral and leading member of the larger health care community that addresses the need for better information for better care. The following organizations all play a key part in the broader health information scene in Canada. An important member of this community due to its size and impact Canada Health Infoway, Inc. (Infoway), is amplified below.

Canada Health Infoway
www.infoway-inforoute.ca

Canada Health Infoway is an independent, not-for-profit corporation working to ac-

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celerate the development and implementation of electronic health information systems in Canada. It was created in 2001 and its members are the Deputy Ministers of Health of the federal, provincial, and territorial governments in Canada. This organizational model allows Infoway to move quickly, maintain a consistent approach, and work collaboratively with both the public and private sectors. The priority for Infoway is to accelerate the development and adoption of interoperable electronic health record (EHR) solutions across Canada, as well as integrating telehealth applications and public health surveillance tools. To achieve its mission, Infoway has received commitments to date totaling \$1.1 billion from the Government of Canada. As a strategic investment partner Infoway does not itself build, implement, nor hold EHR solution components. Its core business is investing with public sector sponsors, leveraging existing initiatives to develop, replicate, align and deploy reusable, interoperable EHR solutions faster, and at less cost and risk, than any of the partners can do alone. Its approach is based on sustained collaboration with governments, the healthcare community and the technology sector. Equally important, Infoway shares knowledge and facilitates change through communication and the sharing of best practices, tools, and lessons learned.

Additional key related organizations in the Canadian health informatics community include:

CIHI: Canadian Institute for Health Information
www.cihi.ca

CHITTA: Canadian Healthcare Information Technology Trade Association
www.chitta.ca

CST: Canadian Society of Telehealth
www.cst-sct.org

CHIMA: Canadian Health Information Management Association
<http://www.chra.ca/org/index.html>

CNIA: Canadian Nursing Informatics Association
www.mtsinai.on.ca/cnia

Academic Programs

The following health informatics programs offer both academic and research programs in health informatics.

School of Health Information Science,
University of Victoria
www.hinf.uvic.ca

HTU: Health Telematics Unit,
University of Calgary
Global e-Health Research and Training Program
www.ucalgary.ca/telehealth

The Waterloo Institute for Health Informatics Research
University of Waterloo
www.hi.uwaterloo.ca

Health Informatics Unit
Faculty of Medicine
Dalhousie University
www.healthinformatics.dal.ca

Health Informatics Unit
Faculty of Medicine
University of Sherbrooke
www.usherbrooke.ca

Health Informatics Activities in the United States

American Medical Informatics Association

The American Medical Informatics Association (AMIA) was formed in 1990 through a merger of three medical informatics organizations, the Symposium on Computer Applications in Medical Care (SCAMC), the American Association for Medical Systems and Informatics (AAMSI), and the American College of Medical Informatics (ACMI).

AMIA has more than 3,500 members including individual, institutions, and corporations. It is governed by a Board of Directors that includes 16 elected and 2 ex-officio members. The business of the Association is conducted through a the President and Chief Executive Officer and a division of responsibility among the Board, standing and ad hoc committees, 20 topic-oriented Working Groups and headquarter office with staff. AMIA holds two meetings per year – the Spring Congress in

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May, and the Annual Symposium in the autumn. It publishes a scholarly journal, the *Journal of the American Medical Informatics Association*, a Proceedings of its Annual Symposium, a monthly electronic newsletter, and weekly digest, *Medical Informatics News Bytes*, distributed to AMIA members. AMIA engages in public policy initiatives both on its own and in collaboration with other organizations, and carries out a number of other programs.

Highlights of 2004

AMIA Names Don Detmer President and Chief Executive Officer

The Board of Directors of the American Medical Informatics Association appointed Don E. Detmer, MD, MA as the President and Chief Executive Officer of the association in September, 2004.

“We are pleased that such a distinguished fellow of our college of informatics and a world renowned physician will be leading AMIA in these exciting times,” commented Charles Safran, MD, Chairman of the Board. “Our members in the field of medical informatics, the experts in the use of information technologies in health care. Now a full time leader will represent our organization in these exciting times of possibility and challenge.”

In his first action as President and CEO, Dr. Detmer spoke of his vision for the association. Today we face virtually unlimited opportunities to create a national and global health information infrastructure and with it come the corresponding challenges. We have too few experts to lead the effort, limited funding to pursue substantial research questions, and pressing needs to educate citizens and both entry level and practicing health professionals. Our goal is to build upon AMIA’s excellent reputation nationally and throughout the world and enhance crucial linkages with academic centers that comprise the diverse branches of biomedical, clinical, and nursing informatics as well as relevant stakeholder groups and organizations. The Institute of Medicine said it well when it asserted that without real commitment to communications and information technology, our capability to reach new levels of performance in health care is limited. Simply working harder won’t

create the needed changes; only changing the system of care will. I intend to do all that I can to move this agenda forward and I am very excited about our prospects to make a difference.”

Don E. Detmer, MD, MA, will retain his position of Professor Emeritus and Professor of Medical Education in the Department of Health Evaluation Sciences at the University of Virginia. He is also Senior Associate of the Judge Institute of Management, University of Cambridge, a trustee of the Nuffield Trust of London, and a fellow of Clare Hall at Cambridge. He is a member of the Institute of Medicine, a lifetime Associate of the National Academies, and a fellow of AAAS, Academy Health, and the American Colleges of Medical Informatics, Surgeons, and Sports Medicine. From 1999-2003 he was the Dennis Gillings Professor of Health Management and Director, Cambridge University Health at the Judge Institute of Management, Cambridge’s business school. Prior to the years in England, he was Vice President for Health Sciences at the Universities of Virginia and Utah and on the faculty at the University of Wisconsin-Madison. He is immediate past chairman of the Board on Health Care Services of the IOM as well as the National Committee on Vital and Health Statistics. He has also chaired the Board of Regents of the National Library of Medicine.

Dr. Detmer received his Doctor of Medicine in 1965 from the University of Kansas with subsequent training at the National Institutes of Health, the Johns Hopkins Hospital, Duke University Medical Center, the Institute of Medicine, and Harvard Business School. In 1979 he received a Chancellor’s Award for Distinguished Teaching at the University of Wisconsin-Madison. His bibliography is extensive and spans a number of fields relating to healthcare delivery and policy. He received a Master of Arts from the University of Cambridge in 2002.

2004 AMIA Spring Congress

For its annual Spring Congress, AMIA addressed the topic, “Practical Strategies for Implementing Electronic Health Record (EHR) Systems.” The Congress took place April 28-29, 2004, at the Hilton McLean

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Tysons Corner in McLean, Virginia, USA, and was attended by nearly 300 attendees. It was chaired by Paul C. Tang of the Palo Alto Medical Foundation, Palo Alto, California, USA. This practical, interactive conference was a perfect venue for learning and networking by information professional who currently, or soon would be implementing electronic health record systems. Participants of the conference were able to interact with national experts and other peers.

Presentations from national experts discussed topics from gaining executive buy-in to designing and executing successful implementation plans. Other discussions were in the areas of putting together the implementation team; selecting the right system for the individual organization; designing a rollout plan; incorporating change management strategies in the implementation plan; recovering gracefully from missteps; and future generations of EHR systems.

This meeting was supported by Siemens and Epic, and other meeting sponsor organizations included the American Health Information Management Association; College of Healthcare Information Management Executives; eHealth Initiative; Healthcare Information and Management Systems Society and the National Alliance for Health Information Technology.

AMIA Hosts Medinfo 2004

Medinfo is a triennial congress that has met since 1974 under the auspices of the International Medical Informatics Association (IMIA). It brings together an international community of health care professionals and scientists who are key thought-leaders, practitioners, and policy makers in the application of information technology in health care in their respective countries and globally. Medinfo 2004 was hosted by the American Medical Informatics Association, the official USA representative to IMIA. It marks the first time Medinfo has been held in the USA since 1986.

Information technology is deeply transforming the shape of healthcare organizations and institutions, the systems they use, and the knowledge they produce.

Long at the forefront of these developments, the international informatics community has since 1974 assembled the industry's leaders once every three years to put on Medinfo, the World Congress on Medical Informatics.

The American Medical Informatics Association (AMIA) was honored to serve as host for this prestigious World Congress this year - Medinfo 2004. The Medinfo 2004 AMIA Organizing Committee, chaired by Edward Shortliffe, led a coordinated effort in working with the International Medical Informatics Association (IMIA), the staff and organizational resources of the AMIA office, an international Scientific Program Committee and Editorial Committee, and hundreds of contributors and reviewers to put together a 5-day Congress that presented the latest developments and examined the most important issues in informatics and information technology in healthcare as it is applied throughout the world.

Medinfo 2004 featured more than 800 presentations of all types. The Scientific Program Committee, chaired by Mario Stefanelli and Casimir Kulikowski, selected contributions that include 300 papers, more than 400 posters, two dozen panels, and a number of demonstrations and workshops that collectively span the field of informatics and health information technology. In addition, attendees had the opportunity to participate in state-of-the-art tutorials covering essential foundational topics and techniques in informatics. A series of semi-plenary presentations at the Congress featured some of the most widely known names in informatics and related fields, including Wil van der Aalst, Russ B. Altman, Heimer F. Marin, Pawel Lukowics, and Dennis Giokas.

Presenters for this meeting arrived from some 50 countries on six continents from a variety of venues, notably from some of the most technologically innovative healthcare facilities in the world, as well as from enterprises at all levels that are aspiring to incorporate additional information technologies for patient care and management. In addition to the educational programs, attendees spoke with some of the most innovative companies in health

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information technology in the exhibit hall, and networked with colleagues during the welcome reception, gala banquet, and events conducted by professional Special Interest Groups and Working Groups of the informatics societies represented at the Congress.

Medinfo Organizing Committee

Edward Shortliffe
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New York, NY
Donald A.B. Lindberg
Chair Emeritus
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Marion Ball
Baltimore, MD
Parvati Dev
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Pavia, Italy
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Patrice Degoulet
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Paris, France
Charles Friedman
National Library of Medicine
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Dario Giuse
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Sherbrooke (Fleurimont)
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Reinhold Haux
University for Health Informatics and
Technology
Innsbruck, Austria
Heimar Marin
Universidade Federal de Sao Paulo
Sao Paulo, Brazil
Fernando Martin-Sanchez
National Institute of Health "Carlos III"
Madrid, Spain
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National Library of Medicine
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Sydney, Australia

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JAMIA – the Journal of the American Medical Informatics Association

AMIA's bimonthly journal, JAMIA, presents peer-reviewed articles that assist physicians, informaticians, scientists, nurses, and other health care professionals develop and apply medical informatics to patient care, teaching, research, and health care administration. JAMIA has rapidly established a reputation for presenting high-quality, cutting-edge information. Each issue contains state-of-the-art reviews, discussion forums, and invited editorials presented as brief reviews or full-length papers. A variety of formats accommodates work at all stages, from model formulation through definitive studies. In 2003, JAMIA received an impact factor of 2.51 from the Thomson Institute for Scientific Information (ISI). This rating places JAMIA #1 among 19 other journals in the field of medical informatics.

The Journal is indexed in Index Medicus, MEDLINE, EMBASE/Excerpta Medica, CINAHL, Science Citation Index, Social Sciences Citation Index (SSCI), SciSearch, Social SciSearch, Research Alert, Current Contents/Social & Behavioral Sciences, and Current Contents/Clinical Medicine.

AMIA Working Groups

In 2004, AMIA restructured the Working Groups and Special Interest Groups. It was decided to bring all these special topical areas to the same level, so AMIA dissolved the level of "Special Interest Group". Where appropriate, groups were combined with existing AMIA Working Groups.

Additionally, the AMIA Board approved the creation of new groups.

AMIA Working Groups serve as a mechanism for members to exchange information on a particular topical area of medical informatics with their colleagues and to become involved in the development of positions, issues, white papers, programs, and other activities to benefit the informatics community. Each Working group has an online discussion list in which members discuss key issues and developments in the field.

The "new" AMIA Working Groups are now:

- Clinical Information Systems
- Clinical Trials
- Consumer Health Informatics
- Dental Informatics
- Education
- Ethical, Legal, and Social Issues
- Evaluation
- Formal (Bio)Medical Knowledge Representation
- Genomics
- Knowledge Discovery & Data Mining
- Knowledge in Motion
- Medical Imaging Systems
- Natural Language Processing
- Nursing Informatics
- Open Source
- People & Organizational Issues
- Pharmacoinformatics
- Prevention and Public Health
- Primary Care Informatics
- Student

HIMSS
*IMIA Institutional
 Member*

**HIMSS –
 The Healthcare Information
 and Management Systems
 Society**

The Healthcare Information and Management Systems Society (HIMSS) is the U.S. healthcare industry's membership organization exclusively focused on providing leadership for the optimal use of healthcare information technology and management systems for the betterment of human health. The Society's global collaborations with healthcare information technology (IT) organizations have helped HIMSS frame and lead U.S. healthcare public policy and industry practices. Through its advocacy, educational and professional development initiatives, HIMSS continues its mission to promote information and management systems' contributions to ensuring quality patient care.

During 2004, HIMSS has focused on the adoption of an interoperable and portable electronic health record (EHR) as part of a national healthcare information infrastructure. This initiative is truly international in scope as the Society continues to be part of and learn from the health informatics community throughout the world. The review that follows provides an update of HIMSS activities from September 2003 – December 2004.

Conferences

2004 Annual HIMSS Conference & Exhibition: HIMSS 2004 brought together more than 20,000 health care information and management systems professionals from all segments of the industry. Health care vendors, providers, consultants and payers converged on Orlando, Florida, from Feb. 22-26, 2004, to attend more than 200 education sessions, visit more than 700 exhibits and network with IT

leaders in the health care industry.

Keynote speakers included Newt Gingrich, former Speaker of the U.S. House of Representatives; Dr. Gro Harlem Brundtland, former Director-General of the World Health Organization; U.S. Representative Patrick J. Kennedy (D-Rhode Island – 1st), Aron Ralson, mountaineer who shared his story of survival and patient rehabilitation, and Tom Wolfe, author.

Recognizing the expanding and influential roles nurses now play in clinical informatics, HIMSS introduced the Nursing Informatics Symposium, a one-day program designed by nurses for nurses and attended by more than 300 nursing informatics professionals. The Physicians' IT Symposium and International Program returned to HIMSS 2004 providing these key audiences with IT information and insights.

Two special conferences for members of the HIMSS users groups, Sun Solutions for Healthcare, Information, Networking and Education (SunSHINE) and Microsoft Healthcare Users Group (MS-HUG), offered education geared to developers and users of these vendor products. To demonstrate IT solutions for implementation of electronic health records, HIMSS grouped exhibits and sessions together in two new exhibit areas - Product Pavilions and Emerging Technologies and Issues.

For the first time, Health Level Seven (HL7) and the Integrating the Healthcare Enterprise (IHE) collaborated in an interoperability demonstration to raise awareness of the importance of standards and the national health information infrastructure (NHII). The HIMSS Advocacy Committee Fact Finding Field Hearing asked the question: "Should the (U.S.) Federal Government Help Accelerate Clinician Adoption of the Electronic Health Record?" - where the testimony of expert witnesses on this topic was provided to key government policy makers.

*HIMSS (Continued)***HIMSS Summer Conference 2004**

– Held in Las Vegas, Nevada, the two-day summer conference welcomed almost 400 healthcare senior level executives to review key healthcare issues from a strategic management perspective. The conference featured six education tracks: the business of IT; clinical information systems; new technology; outsourcing; adoption, analysis and outcomes; and achieving excellence. Keynote speakers were Paul C. Tang, MD, FHIMSS, FCHIME, CMIO, Palo Alto Medical Foundation, who chaired the Institute of Medicine Committee on Data Standards for Patient Safety; Arnold Milstein MD, MPH, medical director, Pacific Business Group on Health, worldwide partner at Mercer Human Resource Consulting, and co-founder of the Leapfrog Group; and Robert Stevenson, MBA, former all-American athlete, corporate executive and author of *How to Soar Like an Eagle in a World Full of Turkeys*. At the Innovative Technology sessions, attendees learned about vendor healthcare IT solutions, now implemented in the marketplace, for nursing documentation, staffing, return-on-investment, and medication management.

Industry Affairs

Advocacy: HIMSS continued public policy and advocacy outreach in Washington, D.C. and at the grassroots level by both educating policy makers and influencing key legislation related to healthcare information technology and the improved delivery of patient care. HIMSS reviewed over 20 separate legislative proposals involving patient safety, national health information infrastructure, offshore outsourcing, and electronic health records. Position statements were created on key legislative and regulation proposals.

At the annual HIMSS Advocacy Day in April, HIMSS members heard

presentations from Representative Jim Greenwood (R-PA) and Dr. Rex Cowdry from the White House. Panels discussed key policy topics such as voluntary patient identifiers and off-shore outsourcing. This year, the event was co-sponsored by the eHealth Initiative and the American Health Information Management Association (AHIMA). Following the educational sessions, members visited with their respective legislators in Washington, D.C. to present the HIMSS policy agenda and discuss key health IT issues.

In addition, at a congressional reception held in conjunction with the Vendors' Solution Showcase, the Honorable Tommy Thompson, Secretary of the U.S. Department of Health and Human Services (HHS), received the HIMSS Advocacy Award, for his leadership and initiative in promoting the adoption of the electronic health record, at an evening reception and technology demonstration. U.S. Representative Patrick J. Kennedy also addressed the attendees. In addition to Advocacy Day held in April, the Society launched the HIMSS Public Policy Forum, an annual event in 2003 that looked at federal investment in the electronic healthcare information infrastructure, and in 2004, discussed solutions to overcoming IT barriers in ambulatory care.

HIMSS continues to grow and evolve as a national advocate for healthcare IT by providing monthly congressional updates for Capitol Hill staff on key issues of importance to the Society, visiting local HIMSS chapters to discuss advocacy and collaborating with industry partners who share and can help deliver key input on health IT legislation. In addition, HIMSS opened a new Washington, D.C., area office at 901 King Street, Suite 400, in Alexandria, Virginia.

Working with key congressional staff and other associations, HIMSS helped launch the 21st Century Health

HIMSS (Continued)

Care Caucus, a bipartisan group of U.S. House members dedicated to improving healthcare using information technology and management systems. HIMSS helped to recruit co-chairs, members, plan programs, and produce the monthly electronic newsletter.

The Society launched a new grassroots effort known as the Chapter Advocacy Liaison Roundtable. This group of chapter advocates promotes advocacy and public policy at the chapter level.

Federal affairs: In addition to its advocacy initiatives, HIMSS expanded its outreach and staff to include federal affairs, the executive branch of the U.S. government, to positively affect the adoption of the electronic health record and leverage the collective expertise of HIMSS members to assist the federal government's development of priorities for health information technology implementation. In spring 2004, the administration announced its goal that most Americans have access to electronic health records within the next decade. David J. Brailer, MD, PhD, was appointed as the first National Coordinator for Health Information Technology, a position within HHS that HIMSS had also advocated as part of its advocacy agenda.

Dr. Brailer released a Strategic Framework document that called for patient- and clinician-centric education initiatives to achieve a national health information network. HIMSS and its members were actively involved in the efforts to bring Dr. Brailer's goals and actions to fruition, particularly the development of the Commission for the Certification of Health Information Technology.

HIMSS federal affairs efforts have been supported by volunteer member involvement in the HIMSS National Health Information Infrastructure (NHII) Task Force, the National Preparedness and Response (NPR)

Task Force, the HIMSS Government Relations Roundtable (HGRR), and the Chapter Advocacy Liaison Roundtable. These volunteer members have engaged federal agency representatives in policy discussions on such issues as disaster management, local health information exchange networks, and the potential impact federal efforts will have on health IT penetration.

Electronic Health Record Initiatives: HIMSS continued to work for the passage of the Health Level Seven (HL7) Definitional Model for the electronic health record, which is a national standards-based effort to define the EHR. A mock ballot and education sessions provided attendees at the 2004 Annual HIMSS Conference with detailed information to better understand the benefits and positive impact of the HL7 definitional model. Following the conference and until summer 2004, when the draft standard was approved, HIMSS worked with the EHR Collaborative, other key health organizations, and stakeholders to ensure its passage.

Clinical Decision Support Implementers' Workbook (CDSIW): This workbook was published in February 2004 providing healthcare organizations guidance on developing and implementing clinical decision support (CDS) systems for clinical care. Developed by the HIMSS Clinical Decision Support Workbook Workgroup, the guide, including downloadable worksheet templates, is available on the HIMSS Web site. The second edition will be distributed in 2005 as an updated, printed workbook.

Clinical Information Systems (CIS) Benefits Database: The Society began work on a Clinical Information Systems Benefits Database to assist healthcare providers and organizations in the process of selecting CIS. By

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providing evaluations from organizations now using clinical information systems products, the database will focus on “advanced” CIS capabilities including computerized provider order entry (CPOE), CPOE-driven decision support, automated clinical documentation, electronic medical record (EMR) functionality and the ability to integrate ancillary systems. The HIMSS National CIS Benefits Database Task Force, led by an advisory group of national experts on CIS, will complete the development and introduction of the pilot version of the database in early 2005.

Continuity of Care (CCR) Record: HIMSS continued its efforts in support of the Continuity of Care Record (CCR), a standard for a core data set of the most relevant and timely facts about a patient’s healthcare. The ASTM International, Massachusetts Medical Society, American Academy of Family Physicians, American Academy of Pediatrics, American Medical Association, and Patient Safety Institute are sponsors of the Continuity of Care Record. The CCR ballot is scheduled for December 2004.

Davies Award of Excellence: As manager of the Davies Award of Excellence, HIMSS awarded the first Primary Care Davies Award in 2003. Three recipients were chosen: Roswell Pediatric Center, Alpharetta and Cumming, Georgia; Cooper Pediatrics, Duluth, Georgia; and Evans Medical Group, Evans, Georgia. In addition, Cincinnati Children’s Hospital Medical Center in Cincinnati, Ohio, received the 2003 Organizational Davies Award.

HIMSS introduced the Public Health Davies Award of Excellence in partnership with the Centers for Disease Control and Prevention (CDC), American Public Health Association (APHA), Association of State and Territorial Health Officials, Council of State and Territorial

Epidemiologists (CSTE), National Association of City and County Health Officials (NACCHO), and the Association of Public Health Laboratories (APHL). The winners of the 2004 Davies Public Health Award were Utah Statewide Immunization Information System (USIIS), South Dakota Department of Health for the Electronic Vital Records and Screening System (EVRSS), and Pennsylvania’s National Electronic Disease Reporting System (PA-NEDSS).

Ambulatory Care: The Society added a medical director to its staff in December 2003 to lead HIMSS in its ambulatory care, or outpatient, initiatives for the adoption by physicians of the electronic health record.

Certification Commission for Healthcare IT: To address the challenge many physicians face when selecting an EHR system for their practices, HIMSS introduced the Certification Commission for Healthcare Information Technology in collaboration with the National Alliance of Health Information Technology (the Alliance) and AHIMA. Designed as a voluntary, private-sector certification of EHR systems, in support of the direction of the U.S. Department of Health and Human Services, the program will let physicians and other healthcare professionals select and implement these products with greater speed and confidence, knowing that patient data can be securely exchanged in the nation’s developing health information infrastructure.

Physicians Adopting Computer Technology (PACT): In November, the Ambulatory Care Steering Committee launched a series of regional events designed to bring educational opportunities to physicians who want to computerize their practices while minimizing the interruption to their patient care schedules and those who

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want to maximize efficiencies of the installed systems. The program, PACT – Physicians Adopting Computer Technology – was conducted in Jacksonville, Florida, and Portland, Oregon. Physicians, who have successfully implemented healthcare IT in their practices, provided keynote presentations, followed by two education tracks and a demonstration of vendor IT solutions.

Integrating the Healthcare Enterprise (IHE): The Integrating the Healthcare Enterprise expanded this year to include two additional components for the application of IHE in healthcare delivery.

The American College of Cardiology (ACC) introduced its technical framework in this clinical practice area. The initial three profiles, Retrieval of Electrocardiograms for Display, Echocardiography Workflow, and Cardiac Catheterization Workflow, can help improve patient care by providing a common approach to collecting, coordinating and sharing cardiology images and information related to cardiology.

The Cross Enterprise Document Sharing supplement, one of four supplements in the information technology infrastructure framework, facilitates the sharing across health care settings—from a private physician to a clinic to an acute care in-patient facility—of electronic documents with text and structured content. This supplement contributes to the foundation of a shared electronic health record, a key initiative for HIMSS and the healthcare industry in the U.S.

Auto-ID Virtual Tour: The HIMSS Bar Coding and Auto ID Task Force introduced the “Auto-ID Virtual Tour,” an online or CD-ROM review of the significant benefits that Auto-ID technologies bring to healthcare by taking a journey through a typical healthcare encounter. Access the

virtual tour on the HIMSS Web site at: http://www.himss.org/asp/autoid_tour.asp

Standards - ISO TC 215: As the secretariat for the Technical Committee 215 (TC 215) of the International Standards Organization (ISO), HIMSS continued its support of international standards activities for health informatics. The Society joined other international standards experts at a weeklong meeting in Washington, D.C., with 112 international delegates from 16 countries. Carolyn M. Clancy, MD, and director of the Agency for Healthcare Research and Quality (AHRQ), was the speaker at a dinner sponsored by HIMSS.

New members joined the U.S. delegation to the international technical committee TC 215 that included (as of September 2004) AHRQ, the National Institutes of Health, Department of Veterans Affairs, and Department of Defense—Health Affairs participating with Siemens, Philips, GE Health Solutions, Quadramed, Booz-Allen-Hamilton, Kaiser Permanente, United Health Care, SNOMED and others.

Standards Task Forces: HIMSS launched two standards-related task forces this year. The Professional Practice Standards Task Force completed a business ethics standard while the Standards Task Force will provide an overview for all HIMSS standards initiatives and activities.

Membership Services

HIMSS Membership: HIMSS membership reached 15,000 individual and 250 corporate members during 2004. The Society provides a diverse range of high-quality resources, including education, professional advancement, and networking for its individual members that include executives such as chief executive officers (CEOs), chief information

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officers (CIOs), chief operations officers (COOs), senior executives, and industry specialists such as senior managers, information services (IS) technical staff, physicians, nurses, consultants, attorneys, financial advisors, technology vendors, academicians, management engineers and students. HIMSS corporate members include leading software and hardware suppliers, consultants, executive recruiters, publishers, e-health, telecommunications firms, and other IT and healthcare industry professionals. The Society has 41 chapters throughout the United States and Canada that provide local programming and networking for members.

HIMSS Foundation: The HIMSS Foundation, a separate non-for-profit corporation, is the philanthropic arm of HIMSS and is dedicated to inspiring charitable giving, research, education and to enhancing the management and application of healthcare information and technology. The Foundation offers six scholarships to students at the undergraduate, graduate and doctoral level through Foundation and corporate support.

Society for Health Systems: HIMSS and the Society for Health Systems (SHS) affiliated to offer dual membership in and membership benefits of the two organizations. SHS members are healthcare management engineers and performance improvement professionals.

Alliance for Nursing Informatics: Eighteen national and regional nursing informatics groups in the U.S. established the Alliance for Nursing Informatics (ANI). The boards of directors for both the American Medical Informatics Association (AMIA) and HIMSS agreed to provide ongoing support, coordination, and leadership for the Alliance, which represents more than 2,000 nurses in the 18 distinct

groups that function separately at local, regional, national and international levels and have established programs, publications and organizational structures for their members. The ANI Steering Team includes representatives of organizational groups that have a nursing informatics focus and will guide the strategic goals and activities of the Alliance throughout the year. The members of the Capital Area Roundtable on Informatics in Nursing (CARING) were instrumental in the formation of the Alliance for Nursing Informatics providing support and leadership throughout the collaboration process; the American Nurses Association (ANA) assisted in developing the Alliance.

New Special Interest Groups (SIGS): HIMSS Special Interest Groups offer members an opportunity to participate in subject matter areas of interest. To better represent key initiatives and issues in healthcare, the Managed Care SIG changed its name to the Payer SIG and the Management Engineering and Re-Engineering & Performance Improvement SIG merged. In addition, the Society introduced a new SIG, Healthcare Security.

Professional Education

HIMSS On-Line Education and Audio Conferences: HIMSS continues to offer a wide variety of topics in its online education and audio conference programs. Online and distance education collaboration programs offer opportunities for HIMSS members throughout the world to earn health care IT certificates. The University of Connecticut and HIMSS continue to offer their co-developed certificate program in healthcare information technology. The Oregon Health Sciences University extended its graduate level certificate program in healthcare information technology

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at a discount to HIMSS members who wish to gain formal education in healthcare informatics.

Audio conferences from HIMSS are typically 60 to 90 minutes, including time for questions to the presenter, and offer continuing education credits for certification credentials offered by HIMSS. In 2004, the Society focused on the electronic health record for a three-session series. Other topics throughout the year included nursing informatics, return-on-investment, outsourcing, identity management and radio-frequency identification, Health Insurance Portability and Accountability Act (HIPAA) security, evidence-based medicine, clinical decision support, wireless nursing communication and incentives for clinical adoption of the EHR. Healthcare IT vendors, who are also HIMSS members and providers, were part of a new education offering from HIMSS in an audio conference series that illustrated real-world IT solutions in the delivery of health care.

Publications

HIMSS enhanced its publishing efforts by adding its first vice president of publications and communications in October.

HIMSS Books: As a leader in providing the industry with content focused on the healthcare information technology, HIMSS published the following books in summer 2004: **Career Success in Healthcare Information Technology**/by Betsy S. Hersher and Linda B. Hodges; **The Physician-Computer Conundrum: Get Over It!**/by William F. Bria, M.D, and Richard Rydell; and **Clinical Management Systems: A Guide for Systems Deployment**/by Jeffrey Blander and Bryan P. Bergeron, MD. New book titles expected in 2005 relate to the electronic health record, patient safety, clinical

decision support, and nursing informatics. HIMSS books can be ordered online at <http://www.himss.org/bookstore>.

Center for Information Technology Leadership (CITL): HIMSS continued its affiliation with the Center for Information Technology Leadership as publisher of CITL's research report on standardized Healthcare Information Exchange and Interoperability (IHEI). Preliminary results of the CITL research, which was presented at the 2004 Annual HIMSS Conference, found that standardized healthcare information exchange between healthcare IT systems would deliver national savings of \$77.8 billion annually after full implementation. The report is available through the HIMSS online bookstore.

HIMSS Insider The *HIMSS Insider* debuted in November, replacing *HIMSS News*, as the monthly newsletter for HIMSS members. The newsletter appears within another publication, *Healthcare IT News*, which is published by MedTech Publishing in partnership with HIMSS. This trade magazine is a monthly tabloid-sized newspaper for the healthcare IT field with a total circulation of almost 44,000 and is available online at: www.healthcareitnews.com

Peer-reviewed Journal: The *Journal of Healthcare Information Management* provides members and other subscribers with a peer-reviewed publication covering key industry issues with the presentation of current research as well as other articles. Each quarterly issue has a different theme. During 2004, journal themes were: computerized physician order entry (winter), HIPAA (spring), clinical informatics (summer), and new technology trends (fall).

Electronic Newsletters: HIMSS publishes a number of electronic

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newsletters for its members and niche communities. *HIMSS E-News* publishes weekly for HIMSS individual and corporate members; the newsletter contains up-to-the-minute news of HIMSS activities and services and includes industry news briefs. Two monthly e-newsletters serve HIMSS' Microsoft and Sun Microsystems users group communities: the *MS HUG Connection* and *SunSHINE Times*. *Chapter Leader E-News* is published monthly for HIMSS chapter leaders, and *Exhibitor E-News* is published monthly for exhibitors to the Annual HIMSS Conference & Exhibition.

HIMSS Analytics

Recognizing a need in the industry for quality and expanded market research services, the Society formed HIMSS Analytics in February 2004, as a wholly owned, for-profit subsidiary, supporting the HIMSS mission of advancing the delivery of healthcare through the use of information technology.

The Society considered several options in developing the subsidiary including exploring relationships with existing market research organizations and building a new enterprise. With approval from the HIMSS board of directors, HIMSS Analytics acquired the DORENFEST IHDS+ DATABASE™ and related business assets from Sheldon I. Dorenfest & Associates, Ltd., a Chicago-based provider of health information technology consulting and market data. The acquisition was final in July 2004.

The subsidiary, which is headquartered in Chicago, Ill, brought together a strategic and experienced senior leadership team with expertise in healthcare information technology, market research and consulting. Products and services offered by HIMSS Analytics support improved

decision-making for healthcare organizations, healthcare IT companies, and consulting firms by delivering high quality data, information and analytical expertise. The company collects and analyzes healthcare organization data relating to IT processes and environments, products, IS department composition and costs, IS department management metrics, healthcare delivery trends and purchasing related decisions. HIMSS Analytics also provides custom market research services to support strategic decision making in areas such as product planning, business and marketing strategy.

Visit <http://www.himssanalytics.com> for more information on HIMSS Analytics.

The HIMSS research efforts, supported by the HIMSS Foundation, are now housed in HIMSS Analytics, positioning the subsidiary to be the single source for authoritative research in the healthcare information technology and management systems marketplaces. The Annual HIMSS Leadership Survey, sponsored by Superior Consultant Company, now in its 15th year, provides insight on the priorities, barriers and future of healthcare IT from a variety of perspectives, including CIOs, CEOs and physician and nursing executives. Other research topics addressed during 2004, in collaboration with industry leaders, included nursing informatics, national health information infrastructure, networking technology, national preparedness and response, ambulatory technology, and HIPAA compliance.

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