Information on IMA Regional Groups

APAMI

REGIONAL REPRESENTATIVE’S REPORT – APAMI

1. Membership of APAMI

There has been no change as previously reported; currently membership of the APAMI consists of 15 medical informatics societies: Australia, China, Hong Kong SAR, India, Japan, S Korea, Malaysia, New Zealand, Pakistan, Philippines, Singapore, Sri Lanka, Taiwan, Thailand and Vietnam. Bangladesh, Indonesia and Kazakhstan have been observer members.

2. General Assembly Meeting of APAMI (AGM)

The AGM 2005 was held in Taipei on July 22, 2005 in conjunction with the 6th HL7 international Affiliates Meeting. The Taipei meeting was attended by 8 member societies (Australia, Hong Kong SAR, Japan, Republic of Korea, Malaysia, New Zealand, Singapore, Taiwan). In the AGM the following resolutions were made:

a. It is reconfirmed that the APAMI Conference will be held in-between years (currently APAMI Conference is held in every third year and attend MedInfo so that there is a year without conference which is called in-between years). The hosting member society of this in-between year APAMI Conference does not have obligation to donate 70% of profit of the conference to the APAMI Fund.

b. It is resolved that a new Working Group 4 Nursing Informatics be established to study matters pertaining to NI in the region and further resolved that WG 4 NI will be able to form NI SIGs within the WG as deemed to be necessary. This will make total of 4 WGs such as WG 1, Standardization, WG 2, Developing Countries, WG 3, Decision Support, and WG 4, Nursing Informatics.

c. It is resolved that APAMI Web site be reconstructed within short period of time under the leadership of the website committee (Jack Li, Taiwan Lead). This reconstruction is with setting up a homepage for APAMI MIC 2006 by an outsourcing vendor. For this project USD 2000 will be allocated from the APAMI Fund.

d. It is resolved that USD 5000 be allocated to activate WG 2, Developing Countries and the fund be used for forthcoming 2 years after submission of a written request by the Chair of WG for obtaining approval from the APAMI member societies.

3. Activity of APAMI Member Society

APAMI member society countries have been advancing national projects of health information technology (HIT) for deployment of National Health Information Networks and some examples are as followings:

a. The Hong Kong Society of Medical Informatics hosted the local Health Informatics Conference December 2004 and 2005 successfully with the theme of “The Next Generation Clinical Management System — Alternative Approaches.” A total of 350 delegates participated and 15 vendors joined the exhibition and workshops. There are busy activities in Hong Kong considering an upgrade and revamp of the Hospital Information System in the 40 public hospitals and they are aimed to partner with commercial vendors to jointly develop their future generation of HIS.

b. Australian HealthConnect, the national health information infrastructure program office, initiated 21+ pilot/proof-of-concept health IT projects in 2004/05. A number of nationally significant projects included electronic discharge summary and referral trials in Tasmania and Queensland, the electronic transmission of prescription pilots in Ballarat (State of Victoria) and Tasmania, and the clinical data group and structure project undertaken by the Clinical Information Program Office. Evaluation results of the trial projects are extremely encouraging. The clinical data group project produced a set of well defined and robustly structured data elements that form the important components for the discharge summary, referral, electronic prescription, electronic laboratory and health event summary projects.

- Standards Australia, the sponsor of national Health Level 7 messaging standards project, provides the administrative support for development of a number of HL7 standard-based messaging artefacts.

The National e-Health Transition Authority (NeHTA), which has been set up in 2005 as the administrative and program office, will oversees the development of strategic directions and plans for national Health IT activities and forge “public-private partnership” in project funding and implementation. The initial priority has been set to enhance connectivity and interoperability between different healthcare sectors.

c. The NZ Health Information Standards Organization (HISO) is a ministerial committee established to establish a national strategy on health information standards. HISO has endorsed HL7 as the national messaging standard and three national priorities in standards development:
   - Referral, status report, and Discharge summary (RSD)
   - Electronic laboratory ordering and results reporting
   - Electronic transmission of prescriptions

d. Korean Society of Medical Informatics has been instrumental to be engaged in the Korea Ministry of Health and Welfare initiated large center grants to develop health informatics infrastructure in the country for deployment of Electronic Health record (EHR) from 2006 through 2009 for public sector.
The Korea Ministry of Commerce, Industry and Energy funded grants through Korea Agency for Technology and Standards to develop various health informatics standards; 28 Korean Standards (KS) in the area of health informatics have been developed to date.

e. The 6th HL7 International Affiliates Meeting and 4th Asia HL7 Cross Strait Conference was held in Taipei, Taiwan during July 21-22, 2005 with approximately 240 attendees from 12 countries.

f. JAMI (Japan Association of Medical Informatics) and the Ministry of Health and Labor of Japan launched national master plan for implementing EHR.

g. CJK (China, Japan, Korea) MI Annual Conference was held in Shenzhen, China in November 2005.

h. Viet Nam National Health Information Development Centre (Director, Prof. Nguyen Phuong) has been setting up a national education program and HIT applications.

4 APAM WG Activity

a. APAMI WG1, Standardization (Chair: Yun S Kwak) has been active and other new WG2, Developing Countries, WG3, Decision support and WG4, NI are planning to have activities in 2006.

5 Next APAMI Meetings

a. The next APAMI MIC2006 and AGM are scheduled to be held with the theme on “Towards Global Interoperability for Electronic Health Records” in Taipei Medical University, Taipei, Taiwan on October 28-30, 2006.

APAMI Web Site


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Helina

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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IMA-LAC

The Latin-American and Caribbean Federation of Health Informatics

President: Alvaro Margolis, MD MS, Uruguay
Secretary: Nora Oliveri, MD, Argentina

1. Current Status

After 4 years, Lincoln A Moura shall be replaced as IMIA-LAC Representative. At the time of this writing the election process is on its way. Years ago the country members agreed informally that IMIA-LAC representation should rotate among the countries, which is natural but requires discipline and will. The new Representative shall take office by middle April.

Apart from organizing joint activities, one of the major tasks to be faced by IMIA-LAC is to discuss and give directions to the proposal of joining Latin-America and Caribbean with North America, to form IMIA-Americas.

2. From the Member Countries

Uruguay

SUIS – Sociedad Uruguayana de Informática en la Salud
www.suis.org.uy

The year 2005 has been very important for Uruguay concerning Health Informatics: After a strong support of SUIS regarding standardization efforts, involving an event about HL7 with foreign experts, there was a National move towards standardization of health information. A new association involving the Secretary of Health, the Universities
and Scientific Societies, and most Health Care Delivery institutions in the Country was created. SUIS was one of the founding members of that Association called SUEIIDISS. The first area to be standardized will be the adoption and adaptation of HL7 to our specific needs. Regarding SUIS, a new President and Board was elected in 2005: Dr. Julio Leivas is the new President. He is a physician from the northern part of Uruguay, who has experience in health administration and health information systems.

Argentina
AAIM - Asociación Argentina de Informática Médica
www.aaim.org.ar

Publications

Education
The 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.cecamb.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.

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

Brazil
SBIS – Sociedade Brasileira de Informática em Saúde
www.sbis.org.br

a) New Portal
SBIS has launched a new Portal directed towards services and information. As part of the site, SBIS also launched its Electronic Newsletter, which is open to contribution from members and non-members as well.

b) E.H.R. Conference
SBIS has a long tradition of promoting meetings on the Electronic Health Record. In October 2005, PEP 2005 was carried out in São Paulo, counting on several international speakers including James Cimino, Charles Safran and Patrice Degoulet. There were more than 400 participants.

c) CyberHealth Observatory
Under the auspices of PAHO – the Pan American Health Organization, SBIS took part in a meeting on the use of IT in Healthcare across the World, held in Brasilia. The initiative aims at designing strategies for supporting the use of Information Technologies in the Americas. Also, under the auspices of PAHO and the Ministry of Health, SBIS took part in a meeting to develop a manual of standard requirements for regulation systems. Visit www.paho.org

d) CBIS 2006
SBIS is about to become twenty years old, and as part of the celebrations, CBIS 2006, the X Brazilian Congress on Health Informatics will be held in October, in Florianopolis. Visit www.cbis.org.br

e) E.H.R. Certification (Working group report)
SBIS and the Brazilian Medical Council (CFM) have carried on with the Electronic Health Record Software Certification Process, by lying down the requirements Health Information Systems must meet to be certified by the Council. It is expected that, in the future, organizations with certified systems will be freed from having to keep the information on paper. The process is now in the self-certification phase, but in mid 2005 a second phase began, which includes auditing by SBIS accredited services.

f) Area of Research
SBIS and CNPq (Brazilian Council of Research) are working together to include the area of health informatics and telehealth as an area of research. This achievement represents an important result to the researchers in the country; since the area is recognized the funds will be more available and the research projects will be analyzed by health informatics professionals.

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.

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North American Medical Informatics (NAM)

Health Informatics in Canada

COACH: Canada’s Health Informatics Association

www.coachorg.com

Founded in 1975 as the Canadian Organization for the Advancement of Computers in Health, Canada’s Health Informatics Association celebrated its 30th anniversary this past year. Representing a community of over 900 members across Canada, COACH is committed to a vision of taking health informatics mainstream. The Association’s mandate is to promote the understanding and adoption of health informatics within the Canadian health system through professional development, advocacy and a strong, diverse membership. COACH is focusing on fulfilling this mandate through a number of key initiatives in addition to the continued enhancement of member services.

While celebrating its 30th anniversary with the publication of its history (available through the COACH web site) and the introduction of the first Canadian Health Informatics Awards Gala to recognize achievements in the health informatics community in 2005, COACH launched a significant and exciting initiative to provide leadership in the evolution of health informatics as a profession in Canada. COACH, in consultation with other key stakeholders in the health informatics community, is addressing the need for professional credentialing by exploring a number of options to best meet the needs of the community in Canada, and has drafted a set of high level ethical principles to guide the profession during this evolution. COACH has committed to a process that is collaborative and transparent, builds on existing knowledge and resources where possible, uses a “best practices” approach, is feasible and sustainable, and will be flexible enough to allow for future developments. An extensive consultation process is about to begin at the time of writing and it is anticipated that the decision-making and the mapping out of a path will take place over the next six months.

One of the key stakeholder groups actively involved in this initiative is the Canadian health informatics academic community. A post-doctoral strategic training program in health informatics launched in 2002 under the Canadian Institute for Health Research includes the development of a comprehensive curriculum/competency framework for health informatics practice in Canada which will tie in very closely with COACH’s initiative.

COACH has long contributed to the development of standards for the protection of health information in Canada. Originally published in 1995, revised in 2001 and with the first on-line edition published in 2004, the Guidelines for the Protection of Health Information continues to be a key resource for members of the health informatics community. COACH has now launched a new program to provide assistance to provincial jurisdictions across Canada charged with the implementation of privacy legislation. The COACH Guidelines provide a “best practices” approach beyond legislation which link to ISO standards and provide strategies for implementation. The new program provides for the purchase of a “licence” by a jurisdiction to use the content of the COACH Guidelines for the implementation of its own program through the development of policies, controls, resource information and training programs for all those responsible in that jurisdiction – employees, contractors, physicians, pharmacists, etc. Two provinces are now on board and COACH is working on the next edition of the Guidelines to fulfill its commitment to ensuring the document is current and reflects best practice within the international community.

One of COACH’s most successful programs is the annual e-Health Conference, held in partnership with CIHI, which attracts over 1,500 members of the health informatics community. This year’s Conference, e… for Everyone, will be held April 30 through May 3, 2006 in beautiful Victoria, British Columbia. The Conference will identify the benefits, lessons learned and best practices in tackling the enormous and critical task of giving all Canadians an EHR. It will look at making electronic health records (EHRs) commonplace at all levels of care, giving individuals, their families and their caregivers access to personal health information. This is no small task, but one with huge value to both patients and the health professionals that work with them. The availability of a secure, private, lifetime record of an individual’s health history and care within the health system would improve timeliness, safety and quality of care. And the reasons for making it happen stretch even farther — costs, time, space and error rates all stand to benefit.

COACH continues to be an active participant in the development and implementation of international standards for health information as the key to electronic health record initiatives in Canada and worldwide. Many members of COACH are actively involved as volunteers in, and in several cases, chair working groups for the ISO Technical Committee 215 and HL7, such as Don New sham (COACH President), Kathryn Hannah, Dr. Marion Lyver, Dennis Giokas, Roger Girard to name...
but a few) and provide an effective conduit for communication and consultation in the process of standards development and approval.

**Related Organizations**

Canada Health Infoway  
www.infoway-inforoute.ca  
Canadian Institute for Health Information (CIHI)  
www.ciih.ca  
Canadian Healthcare Information Technology Trade Association (CHITTA)  
www.chitta.ca  
Canadian Nurses Informatics Association (CNIA)  
www.cnia.ca  
Canadian Society of Telehealth (CST)  
www.cst-sct.org  
Canadian Health Information Management Association (CHIMA)  
www.chima.ca

**Health Informatics Actions in the United States**

*Leaders shaping the future of health information technology*

The American Medical Informatics Association (AMIA) is the premier organization in the United States dedicated to the development and application of medical informatics in the support of patient care, teaching, research, and health care administration. AMIA was founded in 1990 through the merger of three existing health informatics associations, 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 from 42 countries worldwide including individuals, institutions, and corporations. Together, these members represent all basic, applied, and clinical interests in health care information technology. It is governed by a Board of Directors that includes 17 elected and 1 ex-officio members. The business of the association is conducted through the President and Chief Executive Officer, who works with the Board of Directors, standing and ad hoc committees, and 20 topic-oriented working groups. AMIA holds two meetings per year – the Spring Congress in May, and the Annual Symposium in autumn. It publishes a scholarly journal, the *Journal of the American Medical Informatics Association*, proceedings of its Annual Symposium and Spring Congress, 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 works closely on advocacy issues with AHIMA, the premier association of 50,000 health information management professionals and other organizations. In 2005, the Board of Directors, members and AMIA staff undertook a strategic planning exercise to re-define the vision, mission and goals of the association. Here are the statements of the renewed strategic plan:

**Envisioned Future for AMIA**

The American Medical Informatics Association will play a pivotal role in the transformation of the US health system and will make measurable contributions to the improvement of health of the nation through continued development and implementation of health information technology. AMIA will be an integrating force that strengthens the nation’s ability to create and manage the science and knowledge base of health care. AMIA will be an active participant in the development of global health information policy and technology with particular emphasis on using health information technology to meet the health needs of underserved populations around the world.

**AMIA Mission**

AMIA advances the informatics professions relating to health and disease. To this end it advances the use of health information technology in clinical care, personal health management, public health/population, and research with the ultimate objective of improving health.

**AMIA Domains**

AMIA’s programs and initiatives support three major domains of informatics:

1. Clinical or health care (including personal health management)
2. Public health/population
3. Translational bioinformatics

**AMIA 2006 Annual Symposium**

*Biomedical and Health Informatics: From Foundations to Applications to Policy*


The AMIA Annual Symposium is recognized internationally as the key venue for the exchange of ideas concerning biomedical and health informatics. It is the place to hear about leading edge scientific work, to learn about evolving standards and policies for management of biomedical information, and to understand how cutting-edge technologies can best be developed and deployed. The AMIA Annual Symposium emphasizes sound, unbiased, peer-reviewed work, mixed with panels of the leading experts in the field. The result represents an outstanding forum for presenting research results in clinical informatics and biomedical informatics, both practical and theoretical.
AMIA 2006 is organized into two separate, but interrelated and coordinated tracks: Foundations of Informatics and Applications of Informatics.

Davis W. Bates, MD, MSc serves as Scientific Program Committee Chair of the AMIA 2006 Annual Symposium.

2006 AMIA Spring Congress: Informatics Across the Spectrum from Clinical Care to Biomedical Research

May 16-18, 2006: Pointe South Mountain Resort - Phoenix, AZ

Recent natural and man made events have shown us with certainty that our health care system is in desperate need to increase its use of health information technology. From gathering and organizing data for public health responsiveness to genomic research applied to clinical medicine, to individual responsibility for medical history knowledge - IT will change the face of the US health care system. In 2006, the American Medical Informatics Association (AMIA) is expanding its traditional single-track focused Spring Congress into a multi-tiered event to better address many of today’s critical issues in health care.

The 2006 AMIA Spring Congress will revolve around four issues:

- Electronic Health Record Systems in Rural and Small Practice Settings
- Personal Health Records (PHR)
- Translational Bioinformatics
- Evaluation

This meeting will feature:

- Plenary, semi-plenary, and interactive breakout presentations that detail work, progress, and challenges related to the thematic tracks.
- Poster sessions presenting research and applied methodologies and results.
- Information exchange and networking opportunities for attendees.

William Hersh, MD serves as Scientific Program Committee Chair of the 2006 AMIA Spring Congress.

JAMA – 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 2004, JAMIA received an impact factor of 2.61 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.

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EFMI

The European Federation for Medical Informatics (EFMI) is the leading organisation in medical informatics in Europe and represents 31 countries. The objectives when founded in 1976 were:

- 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, 31 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, Iceland, Ireland, Israel, Italy, Moldova, The Netherlands, Norway, Poland, Portugal, Romania, Russia, Slovenia, Spain, Sweden, Switzerland, Turkey, Ukraine and United Kingdom. Applications are open to representative societies in countries within the European Region of WHO.

Congresses and Publications

So far 20 MIE congresses (Medical Informatics Europe) have been organised by EFMI with up to more than 1000 participants. The concept includes reviewed presentations according to the type of paper as oral or poster presentation. Workshops and tutorials prepared or supported by the EFMI working groups are an essential part of EFMI MIE conferences. 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), Geneva (2005), and Maastricht (2006).

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
- 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


The publications in the last years were done in close co-operation with IOS Press for the conference proceedings in the Medline indexed series “Health Technology and Informatics” and the International Journal for Medical Informatics for selected papers from the MIE conferences. For the STC conferences the proceedings are published with AKA Verlag and Methods of Information in Medicine for selected papers.

As complement for the conference proceedings a new series has been established as CD-ROM publication. The ENMI (European Notes in Medical Informatics), Rolf Engelbrecht, Arie Hasman (Eds.), continues the tradition of the Lecture Notes in Medical Informatics and follows the demands of different ways of publication.

Communication

EFMI is running the website www.EFMI.org for external and internal communication for years with some efforts and success. A monthly newsletter for the EFMI council was established in 2005. It can be used by council and board members so far for the distribution of EFMI internal news. This is a basic function which should be used. The newsletters are stored also on the web site and can be read from there every time.

As technologies have changed also for the EFMI portal a new approach was taken on the basis of the open source content management system Mambo. It is flexible and portable. Traditional functions are extended for internal and external news such as council members list, member countries (with additional information), working groups, downloads (council meetings material, reports, presentations, etc.), links, events, and news. There is an extended news management, RSS news feeder (e.g. from IST programme and Journal for Medical Internet Research into EFMI pages, from EFMI news to WG CARDS and the Norwegian society for medical informatics) available. Council members are able to submit news, submit events, to submit files and documents and to do contributions to an internal forum with relevant topics.
Information exchange was also discussed and agreed with AMIA and IMIA. With Elsevier publisher it was agreed to make available EFMI publications on the EFMI portal.

The EFMI portal is well recognised in the medical informatics community. The number of visitors is still increasing. It is a good basis for the promotion of medical informatics and is prepared to take information from EFMI members as well.

EFMI working groups are the most active part in the life of the federation. The spectrum of activities is as broad as the variety of themes. The reports in this yearbook contain only objectives and the most actual information. For a complete list of past activities please visit the working group descriptions on the EFMI portal (http://www.EFMI.org) or on the homepage of the working groups if available.

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EFMI Portal visitors 2005 - 2006

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