



Special Interest Group of the Association for Information Systems on Healthcare related research

AMCIS SIG-HEALTH NEWSLETTER

Editor Nilmini Wickramasinghe, MBA PhD

2009 is already 5 months old and it is again time for our first AMCIS SIG-HEALTH newsletter of the year.

In this action packed newsletter, our central goal is to help you to keep up-to-date with all the great things that are happening in the world of healthcare and IT so that you can continue your good work and/or be inspired to embark upon a new initiative with enthusiasm and energy. Once again we include discussions of key research and industry perspectives from leading experts relating to healthcare – IS initiatives in North America as well as important happenings in other areas of the world. Upcoming events by Ann Fruhling are aimed to help you plan your calendars in advance regarding conferences and possible publishing outlets.

Our feature story from an industry perspective provides us with an interesting initiative focusing on the application of a healthcare technology solution to the area of bariatrics.

This is an exciting time for any healthcare IT researcher in the US given the high profile focus of IT in healthcare by the current administration. So keep a look out for relevant grants and funding opportunities that will help you to pursue your research ideas and disseminate critical research findings.

I want to thank all those who helped to compile this newsletter. I also want to say a special thank you to Fay Cobb Payton (Vice-Chair) and Ron Spanjers (Resource Chair), it was great to work with you both and I wish you all the best in your respective new activities and new position. And this also

then leads me to a warm personal welcome to our new Vice-Chair Monica Tremblay and Bob Folden, Interim Resource Chair. I look forward to working more closely with you both.

In an attempt to keep this newsletter as current and relevant as possible we are going to try a new format of a rolling on-line e-newsletter. This will have several advantages including enhanced searching capabilities on key areas such as the “how tos”. I do urge each and everyone of you to send me your thoughts and ideas for what else you would like to see in future issues. As always please do not hesitate to contact me at nilmini.work@gmail.com

Remember, this is our newsletter and we want it to be as useful as it can be to all at SIG Health. We do our best to ensure that all items are as accurate and up to date as possible but things change quickly in today’s fast paced world so we encourage our readers to double check dates and locations and also continually check the SIG Health website for the latest updates

Looking forward to seeing all of you in San Francisco at AMCIS 2009 and have a great summer.

Nilmini



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AMCIS Pre-Conference Workshop By Cindy LeRouge



Frequent questions from our members include where can we go to get feedback on work in progress, learn more about grants, and learn how to write for a health informatics journal. Join funders, researchers, editors, and leaders in health information systems to obtain some answers and insight. In addition, take this opportunity to socialize and connect with others interested in health information systems research through work in progress round tables and dialog over lunch and breaks. *Registration includes lunch and will be kept at a minimum to defray part of the cost of the lunch.* Sig-Health member cost \$50; Non-SIG health members \$60 (please see <http://www.aissighealth.com> - select **JOIN** option on right for how to become a

member for \$10 per year and save on the registration price). Registration will take place through the AMCIS main conference site. Further details are available on the SIG-Health web site (<http://www.aissighealth.com>) or contact Cindy LeRouge at lerougec@slu.edu. **Register early as space is limited to 50 participants.**

The day will start at 8:30 and end by 3:30 and is planned as follows:

Morning Sessions-

During the morning of the workshop, JAIS Special Issue editors, AEs, and other workshop participants will work with interested authors to advance their works in progress towards journal submission at round table sessions. Most that have attended round table workshops to discuss work-in-progress indicate that this is a means to get some of the most valuable feedback they have received on work-in-progress given the collective dialog among the members at the table. We will particularly showcase work targeted for the [JAIS Special Issue on Health Care IT...Process, People and Patients Call for Papers.](#) Ideally, authors intending to submit to the JAIS special issue will attend the pre-AMCIS workshop. In cases where authors will not attend, feedback will be provided via email after the close of AMCIS 2009. To provide feedback to authors of work in progress, we will conduct the following roundtable and poster sessions:

Work In Progress (full paper) Roundtables – To discuss full paper works in progress submissions

For these sessions, we ask that ALL interested authors submit their initial drafts to Fay Cobb Payton at fay_payton@ncsu.edu by **June 1, 2009**. PLEASE INCLUDE KEY WORDS WITH YOUR SUBMISSION SO THAT WE MAY GROUP RELATED PAPERS AT A ROUND TABLE. The JAIS special issue editorial team and other workshop attendees will work to provide collective feedback and comments to submissions. We anticipate two one-hour sessions.

Abstract Roundtables – To discuss abstract submissions

For those authors who have developed

abstracts, we will also host roundtables to also provide feedback from the JAIS Special Issue's editorial team and other workshop attendees. Authors willing to submit abstracts should do so **by June 15, 2009** at fay_payton@ncsu.edu. PLEASE INCLUDE KEY WORDS WITH YOUR SUBMISSION SO THAT WE MAY GROUP RELATED PAPERS AT A ROUND TABLE. We anticipate one abstract session.

Lunch

Poster Session – To discuss early stage work particularly from doctoral students

We would like to especially encourage doctoral students to participate in a poster session, which will take place during an extended lunch at the workshop. This is an excellent forum to get feedback from all attending the SIG-Health Preconference workshop. It also gives attendees the opportunity to review current research of emerging healthcare IS scholars.

Afternoon -

Presentations – To discuss writing for a Health Informatics Journal and Grant Writing

The day will also include two special presentations. The first presentation, led by Medhu C. Reddy (<http://faculty.ist.psu.edu/reddy/>), will focus on writing for health informatics journals. The second presentation, will actually be a panel led by Kristin Tolle of Microsoft Research (<http://research.microsoft.com/~ktolle/>) and Al Hevner, University of South Florida (<http://coba.usf.edu/departments/isds/faculty/hevner/>) focusing on grant writing. current research of emerging healthcare IS scholars.

Presentations – To discuss writing for a Health Informatics Journal and Grant Writing

The day will also include two special presentations. The first presentation, led by Madhu C. Reddy (<http://faculty.ist.psu.edu/reddy/>), will focus on writing for health informatics journals. The second presentation, led by Kristen Tolle, Microsoft Research (<http://research.microsoft.com/~ktolle/>) and Alan Hevner, University of South Florida, will focus on the grant process.

We look forward to seeing you on August 6, 2009!

AMCIS Update

By Mark Gaynor

AMCIS conference coordinator

This year for AMCIS we have six mini-tracks that will showcase 29 accepted papers, in 10 sessions. The SIG-Health annual meeting will be held on Friday, August 7, from 6pm to 7:15pm (see AMCIS program for room). We will have a pay your own way membership dinner on Friday night after the SIG-Health annual meeting at a venue within walking distance. For those interested in continuing or exploring the opportunity to be a mini-track chair. Please note that we will have a mini-track chairs meeting at AMICS to facilitate better coordination and balance between the mini tracks. Please watch the SIG website and future emails for details regarding day, time and location.

Welcome Monica: New Vice-chair



Monica Chiarini Tremblay is an assistant professor at Florida International University in Miami, Florida. Her research interests are in the areas of data warehouse, data mining, and business intelligence, particularly in the area of healthcare. She is currently working as a co-investigator in two Veterans Administration, Health Services Research and Development funded studies: "Using Knowledge Discovery Strategies to Identify Fall-related Injuries in the VA", and "Using Text Mining to Differentiate Between Post Traumatic Stress Disorder and Mild Traumatic Brain Injury in Operations Iraqi Freedom and Enduring Freedom Veterans". Her teaching interests are in the areas of data analytics and business intelligence, in

particular data warehousing and data mining. She currently teaches business intelligence at both the graduate and undergraduate level, and will introduce a new graduate course in health information management in the spring of 2010. Prior to joining academia, Monica worked for Exxon U.S.A., IBM and Siemens.

Welcome Bob: New (Interim) Resource Chair



With an Ed.D. in Developmental Education, Instructional Systems and Design and a MS in e-Commerce, Dr. Folden is involved in various areas of Informatics. He has special interest in the use of information systems to inform the decision making process. He was involved in the development of NEMSIS dataset that has become the standard for EMS data systems. He served as the chair of the Data, Informatics, and Research Taskforce of the Governor's EMS and Trauma Advisory Committee, where his focus was on developing information sources to improve the provision of EMS and trauma services to the citizens of Texas. He is involved in the information security arena in a variety of capacities. His courses at Texas A&M University-Commerce cover business administration and various aspects of management information systems.



Welcome to the team Gary Poe!

Gary Poe received his JD from Stetson College of Law and his PhD in MIS from the

University of South Florida. His research interests are in the specification of privacy in medical information systems and ethics. Currently he is an assistant professor in the CIS department at Grambling State University in Grambling Louisiana.

Gary is our latest appointed member to the SIG Health team and his main duty is to handle membership issues.

Research Perspective: Role of Wireless technology in the Management and Monitoring of Chronic Diseases

By Elie Geisler and Nilmini Wickramasinghe

Elie and Nilmini were awarded a research grant by IBM to investigate the "Role of Wireless technology in the Management and Monitoring of Chronic Diseases". This report will form one of the publications in the e-government/technology series of the IBM center for the Business of Government. The following summarises some of the key findings and recommendations.

The healthcare delivery system in the United States is in crisis. Runaway expenditures and problems with access and affordability of care are plaguing the industry. Several chronic diseases, such as diabetes and hypertension, consume a disproportionate slice of healthcare services. By some estimates, chronic diseases account for over 70-75 percent of direct healthcare costs.

Diabetes is one of the five major chronic diseases. It afflicts over twenty million people in the United States and accounts for almost \$100 billion in medical costs. The prevalence of diabetes in the United States and worldwide is on the rise.

It has long been established that technology may play a role in contributing to a more efficient delivery of care that may also assist in controlling costs. Of particular interest is the potential use of wireless technology in the monitoring of diabetic patients that would contribute to more efficient management of the disease.

The report presents a comprehensive analysis on the benefits and key success factors for the utilization of wireless technology to support the monitoring and management of chronic disease. To illustrate the benefits the report draws upon preliminary findings from an experiential case study conducted by the in which cellular telephones were used in the monitoring of blood glucose levels by diabetic patients in their homes and the transfer of this information to a central unit in the hospital. The project was a collaborative effort between INET (a Canadian technology company), a large urban hospital in Chicago, and the Center for Management of Medical Technology (CMMT) at the Stuart School of Business, Illinois Institute of Technology.

With the application of wireless technology, the patient enters the blood glucose reading into his cell phone and the information is transmitted to the hospital. The medical staff then follows up and monitors the patient's progress. This improved monitoring process engenders positive outcomes such as savings in time and cost, and better management of the disease.

Lessons Learned

The following lessons were learned from this project.

1. Hospitals are receptive to promising technological solutions in the management of chronic diseases.
2. Implementation of technological solutions requires lengthy negotiations and goodwill from the parties.
3. Small, relatively inexpensive technological improvements in wireless and telecare can produce significant clinical and economic benefits in the management of diabetes.
4. Urban, disadvantaged, and underserved patients with diabetes need not be excluded from the medical benefits of advances in technology when there are solutions (such as INET wireless monitoring

technology) that are inexpensive and highly cost-effective.

Expected Outcomes

The key factors of success of the project and the expected outcomes are in the areas of clinical benefits and economic gains.

Clinical Benefits

- Improved monitoring of daily blood glucose, thus leading to fewer instances of medical emergencies.
- Faster detection of abnormalities in blood glucose allows the medical staff at the hospital to react more efficiently and to offer more successful interventions.
- Improved monitoring of blood glucose and record keeping of these readings may result in fewer infections and loss of lower extremities as well as fewer ophthalmic, kidney, and coronary complications—thus contributing to a longer and more productive life for patients.

Economic Benefits

- For patients and medical staff, wireless technology for monitoring blood glucose saves time otherwise spent recording lost readings and reconstructing the patient's history.
- Electronic record keeping of the patient's readings saves time and money for the medical staff in managing the disease when compared with the manual processing of logbooks.
- For patients and their families there are substantial savings in time and cost compared to readings that are entered in the old manual system. Wireless technology allows for fewer trips to the hospital, thus saving time and money to all involved with the diabetic patient.

Recommendations

From the experience of INET in Canada, the relevant literature, our own experience, and the lessons learned in this project, we provide the following recommendations for leaders in the administration of hospitals, policy making in health care, and all government decision makers in the areas of health care and healthcare delivery:

1. In the management and monitoring of chronic diseases, focus on technologies that improve information collection, transmission, and control—as these tend to be cost-effective and offer clinical benefits.
2. Focus on disadvantaged populations with chronic diseases when implementing technological solutions such as wireless may engender increased benefits because any improvement in the management of chronic disease in these populations adds almost exponentially to the betterment of their condition.
3. Develop a concise plan for the implementation of such technological solutions. The plan must account for the complexity of the hospital environment.
4. Develop a concise plan for justification for the implementation of technology in managing chronic diseases relying on potential outcomes and benefits.
5. For manufacturers of cellular telephones: install as original equipment in every telephone the software necessary to monitor chronic diseases such as diabetes.

SIG-Health is Linked-in

By Cindy LeRouge

SIG-Health is now a group on LinkedIn® (<http://www.linkedin.com>) and all SIG-members are pre-approved to join. LinkedIn is an online social networking site that lends itself to a professional presence. The officers of SIG-health decided to create a group on LinkedIn to provide a way to facilitate peer-to-peer communications among members. Since Linked in participation is optional, this accommodates those members that only want to receive key

information from the officers of SIG-Health as well as those that want more open communication and connections with other members. To date, over 55 of our members have opted to join. LinkedIn can be used by members to reach out to colleagues, voice commentary on Health IT issues, find out who is attending a conference, announce opportunities, and really anything within the scope and propriety of the SIG. So, go ahead members - get linked and let the posting begin.

Research Center Spot Light:

THE IIT CENTER FOR THE MANAGEMENT OF MEDICAL TECHNOLOGY (CMMT)

www.stuart.iit.edu/cmmt

The Center for the Management of Medical Technology (CMMT) is the IIT/Stuart center for research, education, and outreach and dissemination to the community at large. It is directed by Professors Elie Geisler and Nilmini Wickramasinghe.

A. MISSION:

The mission of the CMMT is to become an international center of excellence at IIT and to advance the state of knowledge in the areas of the management of medical technology, via education, research, and dissemination.

B. OBJECTIVES:

There are three principal objectives of the CMMT. 1) The first objective of the CMMT is to conduct high quality research in the management of medical technology and related areas of inquiry. 2) to educate and train students and professionals in the areas related to the management of medical and healthcare technology. 3) to disseminate the knowledge derived from results and findings from the Center's research activities to the academic community, the healthcare sector, the healthcare related industry, other industries, government organizations, and the general public, and to facilitate their

incorporation into practice. This is achieved through cooperation with other academic institutions, with industry and government, and via established venues of academic diffusion such as publications, presentations to learned societies, presentations to the public at large, and conferences which the Center hosts, sponsors and in which it participates.

C. RESEARCH:

In research, the center has five general themes or thrusts:

- (a) Generation, adoption and utilization of medical technologies. This thrust includes research on the organization, financial and managerial aspects of the process of need identification for medical technologies by healthcare organizations, and the acquisition, diffusion, utilization, updating, replacement, and resources allocation for such technologies.
- (b) The nature of medical technologies and innovation and the role it plays in healthcare delivery. This thrust focuses on studies of the generation of medical technologies in industry, universities and the government sectors, and the processes by which such technologies are marketed to the healthcare delivery sector and their consequent impact on resolving the challenges faced by healthcare globally.
- (c) Evaluation of medical technologies. Included in this thrust are evaluation, assessment, monitoring and audit of costs and benefits from medical technologies, in healthcare delivery organizations and in the supporting industries, such as insurance, regulatory agencies, manufacturing of medical technology, and pharmaceuticals.
- (d) Ethics, social implications and patient value. This thrust focuses on ethical considerations and the role of patients in the health delivery sector. The center conducts research on accessibility, availability and value derived from healthcare delivery, and the role that medical technologies play in this regard for

patients in general, the underserved and uninsured, and the emerging empowerment of patients.

- (e) Management of medical information and emerging technologies. This thrust focuses on studies of emerging technologies such as telemedicine, telehealth, computerized medical records, e-health, knowledge and knowledge management, knowledge in healthcare, and the future of medical informatics. Topics include diffusion, evaluation, economics, and applications of these technologies to the healthcare sector.

(1) FUNDED RESEARCH:

The CMMT has received research support from NASA and from private companies such as IBM and Hitachi Medical America. The CMMT currently has several proposals pending for support from public and private organizations.

D. DISSEMINATION OF KNOWLEDGE:

(1) INTERNATIONAL COOPERATION:

The CMMT is a keystone in the international network of over 200 scholars and a dozen universities in several countries worldwide. This network is concentrated around the Healthcare Technology and Management Association (HCTM). Its website is: www.hctm.net The association includes scholars from Europe (The Netherlands, United Kingdom, Germany, Italy, Denmark, Sweden, Austria, Ireland, and Poland); The Americas (USA, Brazil, Mexico and Canada); Asia: (India, China, Japan, and Korea), and Australia.

(4) CONFERENCES:

The CMMT co-sponsors the annual International Conference on the Hospital of the Future (HOF). In 2004 Professors Geisler and Wickramasinghe were instrumental in establishing the "e-knowledge in healthcare" mini-track at Americas conference on Information Systems (AMCIS). This was the first time

that healthcare focused mini-tracks were recognized at AMCIS.

F. ACADEMIC PERSONNEL:

The CMMT is directed by Professor Elie Geisler and Nilmini Wickramasinghe. They are among the pioneers in the systematic study of the management aspects of medical technology, e-health, and knowledge in healthcare. They have authored several books and dozens of papers in these and related areas.

The CMMT also has several research associates:

- (1) Jonathan Schaffer, MD of the Advanced Operative Technology Group and managing director of the e-Cleveland Clinic in the Information Technology Division of the Cleveland Clinic.
- (2) Dr. Gerald Hoffman, Former Chairman of the Board of Directors, Sinai Medical System in Chicago, Illinois.
- (3) Mr. James Austin, Director, Life Sciences, Decision Strategies International, Inc. Philadelphia, PA.
- (4) Professor Yair Babad, Accounting and Information Sciences, University of Illinois at Chicago.
- (5) Professor Koos Krabbendam, University of Twente, The Netherlands.
- (6) Mr. Steve Goldberg, INET Inc. Canada
- (7) Professor Giuseppe Turchetti, University di Prefezionamento. Italy
- (8) Professor Murako Saito, Waseda University and HCTM Research Center Tokyo, Japan.

Recent Publications

We like to point your attention to a valuable report for your research on: Information Seeking Behavior and Viewpoints of Emergency Preparedness and management professionals concerned with Health and Medicine. Final Report Prepared for the National Library of Medicine by Murray Turoff, turoff@njit.edu <http://is.njit.edu/turoff>
Starr Roxanne Hiltz, hiltz@njit.edu <http://is.njit.edu/turoff>.
<http://www.aissighealth.com/wordpress/wp->

[content/uploads/2008/11/information%20seeking%20behavior.pdf](http://www.aissighealth.com/wordpress/wp-content/uploads/2008/11/information%20seeking%20behavior.pdf)

Drye Cannoy, Sherrie (2008). Consumer Empowerment in Healthcare Information Exchange: An Investigation Using the Grounded Theory Approach. University of North Carolina at Greensboro, Greensboro; Advisors: A.F. Salam and Lakshmi Iyer. It is posted at:

<http://www.nchica.org/CACHI/resources.htm>, (Scroll to the Research section at the bottom of the page.)

Special Upcoming Events: Ann Fruling

AMIA 2010 Spring Congress – May 28-29, Orlando, Florida - <http://www.amia.org/meetings/upcoming.asp>

World Congress on Privacy, Security, Trust, and the Management of eBusiness. Please visit the conference site at <http://unb.ca/pstnet/congress2009/eHealth.htm> for more information.

4th Annual Midwest Association for Information Systems Conference (**MWAIS 2009**) on the DSU campus on **May 22-23, 2009**.

AMIA 2009 Annual Symposium – San Francisco, November 7-9, 2009, http://www.amiaconference.com/2009/proposal_forms.html

ICIS2009 – Phoenix, Arizona December 15-18, 2009, <http://www.icis09.org/> [Information](#) Technology in Health Care

HICSS- 43 – Information Technology in Health Care Track - Kauai, January 5-8, 2010

<http://www.hicss.hawaii.edu/> Information Technology in Health Care Track

Mini Tracks:

- * [Bioinformatics Tools for Health Care and Translational Research](#)
- * [Cyberinfrastructure for Public Health and Health](#)

Services* Information Assurance and Interoperability in Health Care* IT Adoption and Evaluation in Healthcare* IT Architectures and Applications in Healthcare Environments* HCI and Consumer Health Informatics Issues in Healthcare IT

Important dates:

June 15, 2009 Final submissions
 August 15, 2009 Review decisions
 Sept 15, 2009 Revised/Final papers due
 Oct 15, 2009 Papers without at least one registered author will be deleted from the Proceedings

AMIA/Medinfo - South Africa
<http://www.medinfo2010.org/>

3d International Workshop on Process-oriented information systems in healthcare (ProHealth '09) In conjunction with 7th Int'l Conf. on Business Process Management (BPM 2009), Ulm, Germany

Workshop URL:
<http://mis.hevra.haifa.ac.il/~morpeleg/events/prohealth09/>

Important dates:

Paper submission deadline: 22 May 2009
 Notification of acceptance: 2 June 2009
 Camera ready: 17 June 2009 (strict deadline)

Workshop day: 7 September 2009

Journal Opportunities:

JAIS Special Issue: Health Care IT...Process, People, and Patients, December 2010

Effectiveness and efficiency of Health Care Information and Management Systems (HIS) will become one of the main challenges in health care in the next decade. According to the World Health Organization (WHO, 2006), significant improvements are being made in healthcare due to information and communication technologies (ICT). In this special issue JAIS seeks to address the future research challenges of HIS through application and extension of IS and related theories. This special issue will give particular consideration to articles that integrate

literatures, approaches, and findings related to technology in health care across related disciplines. To this end the special issue will solicit high quality Healthcare-IS papers that apply and extend theory within and across information systems, sociology, health informatics, medicine, health policy research, health economics and other fields that are rarely bridged in published studies. We seek open dialogue and knowledge sharing among these disciplines.

Guest Editors: Fay Cobb Payton, Guy Pare, Madhu Reddy, Cynthia LeRouge, for more information go to <http://www.aissighealth.com/wordpress/?p=98>
 Important dates:
 January 15, 2010 Final submissions
 April 30, 2010 Review decisions
 August 1, 2010 Revised papers due
 October 2010 Notification of acceptance
 December 2010 Camera ready submission

JDCTA: Call for Papers and Special Issues

International Journal of Digital Content Technology and its Applications (<http://www.aicit.org/jdcta>)

The aim of the journal is to provide fast publication of refereed, high quality original research papers in all branches of the convergence technologies and its applications.

JDCTA is a refereed, multidisciplinary journal for bridging the latest advances in the digital content technologies and its applications. It provides an international forum for presenting authoritative references, academically rigorous research, and case studies. The journal publishes well-written and academically validated manuscripts in both theoretical development and application research.

Scope (<http://www.aicit.org/jdcta>)

JDCTA focuses on the theories/technologies/architecture and its applications on the various aspects of advances in the digital content technologies. JDCTA shall always welcome all research results on the traditional and hybrid areas of the digital content technologies and its applications. JDCTA invites new and original submissions addressing theoretical and practical topics and its applications in convergence/hybrid information technology and next generation information technology fields including an e-health topic area.

Just contact the Editor-in-Chief Dr Nilmini Wickramasinghe nilmini@stuart.iit.edu

Topic 3: HCI /Health/Bioinformatics relevant to Information Technology

Human-Computer Interaction
 Multimedia Services and its Application
 Design: technologies, Content, Design, Services and its Applications
 Entertainment: technologies, Content, Design, Services and its Applications
 Cognitive Sciences
 E-literature
 Bioinformatics and Computational Biology relevant to IT
 Health and Information Technology: Medical and Oriental Medical Information Technologies and its Applications
 E-Hospital/U-Health Care
 Healthcare management and systems in business
 Medical informatics, science informatics, and their business applications
 Any other interdisciplinary research relevant to HCI and bioinformatics

The Journal of Strategic Information Systems special

Issue: "Using Strategic Information Systems to Manage Change: A focus on Healthcare Management Systems". (The deadline is being extended to 30th September 2009.) More details (including submission guidelines) can be found at www.elsevier.com/locate/jsis.

STANDING JOURNAL OPPORTUNITIES:

Remember that you can always submit your high quality healthcare and/or IS manuscript to either of

Intl. J Biomedical Engineering and Technology (www.inderscience.com/ijbet)
 Intl. J. Networking and Virtual Organisations (www.inderscience.com/ijnvo)

And please feel free to take the lead and run a special issue in either of these journals.