Editorial Comments

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AMIA's White Paper Policy Series on Timely Issues in Informatics

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In order to accelerate and support technological advancement and to provide timely resources for developers and users of technology, AMIA and its College seek to develop sound policies and to disseminate them through a series of formal statements. This new initiative complements earlier policy reports and position statements from the organization.

The first paper in the new series appearing in this issue, "Clinical Decision Support in Electronic Prescribing: Recommendations and an Action Plan," was developed by Jonathan M. Teich, MD, PhD, and Jerome A. Osheroff, MD, and coauthored by Eric A. Pifer, MD, Dean F. Sittig, PhD, and Robert A. Jenders, MD, MS, with the support of the CDS Expert Review Panel. The Agency for Health Care Research and Quality (AHRQ) and AMIA fostered its creation through support for the time of those involved in the Expert Panel and the reviewers. The report will immediately benefit policy deliberations related to the National Health Information Infrastructure, especially the Commission on Systemic Interoperability. We commend this report to JAMIA readers for both serious study and enjoyment. It charts a course for future activity in this arena and focuses on what is arguably the most potent advantage of computer-based health records systems—their increasing capacity to offer expert advice to busy clinicians at the time and point of decision making with regard to their patient's needs. Indeed, we anticipate the time when such decision support will assist members of the general population (with and without disease) and public health experts in a similar fashion.

We will not discuss further the report itself here but rather describe how AMIA and its College intend to create additional reports to move the national agenda forward. We are fortunate to have access to the best minds in the field, and, happily,

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these members are willing to commit a substantial amount of time and effort to produce reports that will become foci for discussion and indeed argumentation, future study, and understanding—all with the expectation that better health policy and practice will result.

Over the next two years, AHRQ plans to support a series of additional reports on other dimensions of informatics. We believe that those reports will prove equally relevant to our discipline and our country. Russell Altman is currently preparing a brief paper on policy issues of immediate relevance to development of pharmacogenomics and pharmacogenetics. A separate paper on genetic data and personal health records is under way, and others are on the drawing board. Those having the support of AHRQ will include a panel of experts to support development of findings and recommendations; others may be less extensive.

AMIA's President and Board have developed a rigorous review process, and publication in *JAMIA* may occur under two formats. The first option is for the report to be approved by the AMIA Board and published under this guise since *JAMIA* is the official journal of the organization. The second option would be to submit reports for additional peer review through the standard submission and publication processes of *JAMIA*, supervised as usual by the Editor and Editorial Board.

We commend these important forthcoming papers to you. AMIA is seeking sources of financial support to augment that provided by AHRQ in order to increase the number and frequency of these offerings and to broaden the range of topics. To move forward in the transformation of health care through the use of IT-supported clinical systems, the United States (and, indeed, other nations) will benefit from targeted, timely advice. Such advice must focus on how to create care systems that are safe, equitable, efficient, effective, and both patient-centered and capable of managing the health of populations.

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 Teich JM, Osheroff JA, Pifer EA, Sittig DF, Jenders RA, and the CDS Expert Review Panel. Clinical Decision Support in Electronic Prescribing: Recommendations and on Action Plan. J Am Med Inform Assoc. 2005;12:365–76.