

Common (and Uncommon) Ground

[Save to myBoK](#)

by Claire Dixon-Lee, PhD, RRA

On a trip to Dublin this spring, I met with several officers of the Healthcare Informatics Society of Ireland. During this visit, we talked about health information management, finding common ground on topics like:

- Year 2000 compliance
- the need for clinical vocabulary standards
- DRGs used for budgetary analysis
- master patient index problems
- new clinical data protection legislation in Ireland
- clinical data transfer via the Internet
- efforts toward a computer-based patient record

Although we had never met, these people had responded quickly to my simple e-mail inquiry and had visited AHIMA's Web site in advance of my visit, as I visited theirs. I felt a kinship of sorts with these distinguished professionals who took time from their busy schedules to meet with me. It was both exciting and satisfying to discuss these topics in depth with them.

On the return flight, I thought about the scope of the definition of medical or healthcare "informatics." What made me feel so comfortable and what made HIM so distinctly different?

Blank Looks and Smirks?

Our topics of mutual interest are within the realm of HIM as we know it, but a growing number of professionals now call themselves "medical informaticians." A few graduate schools in the United States advertise medical informatics programs, but there is no widely accepted skill set or standard curricula. Similarly, there are no credentials for medical informatics, although the American and International Medical Informatics Associations are well established and produce a growing body of published research.

I've found a cluster of literature on the subject, including Milton Corn's humorous comment that "introducing yourself as a medical informatician generates only blank looks and a few smirks all around the reunion mixer."¹ This reality—a label that provides no mental image of its subject's profession or abilities—is familiar to HIM professionals, too.

That's not to say that informatics lacks definition. Several experts in the medical informatics field have offered scientific definitions:

- "The field that concerns itself with the cognitive, information processing, and communication tasks of medical practice, education, and research..."²
- "The study, invention, and implementation of structures and algorithms to improve communication, understanding, and management of medical information."³
- "The science that deals with health information, its structure, acquisition, and use."⁴

So what does an informatician do? It's possible to find operational definitions of tasks within the domain of informatics—such as clinical information management, health information networks, standards and policies, information retrieval and digital libraries, user interface issues, training and education, computer-based patient records, image and signal processing, and decision support systems.

Although some of these tasks are highly technical, the bottom line seems to be that medical informatics helps people organize and access data to understand and improve medical practice. The goal is to meet the challenges of technology and knowledge/data representation/exchange while communicating healthcare information across sites, specialties, and a patient's

lifetime. Although there have been some well-known studies such as those on clinical vocabularies and the Unified Medical Language System, medical informatics has yet to make a lasting, dramatic impact on the healthcare industry.

What Sets Us Apart?

The confusion over informatics within a healthcare organization is complicated by the assortment of administrators, technicians, directors, and developers who groom and feed the information technology of an enterprise, Corn points out. The dedicated informatician must look hard to find a departmental home.⁵ Given the common ground and seemingly tangential nature of medical informatics and HIM, how do we as HIM professionals distinguish ourselves?

The answer is clear in our mission statement: "AHIMA values the quality of health information as evidenced by its integrity, accuracy, consistency, reliability, and validity." Perhaps this is implied by the dedication of any professional in the realm of medical informatics, but the commitment of health information managers and AHIMA to quality data is truly our unique signature cause.

Second to this is our dedication as advocates of patient privacy rights and confidentiality of health information. We can be very proud of our long-standing professional history of more than 70 years and realize that our mission has really never wavered. We were organized to uphold improvements and standards in medical documentation, and although the media of information capture and documentation continues to evolve, the spirit of our purpose remains.

Our Part of the Mosaic

Yes, we coexist and interface with medical informatics. The concepts, research, and prototypes generated by this interdisciplinary community lay the groundwork for new technologies. Some of our members may pursue advanced education and become medical informaticians. And, in a global way, as health information professionals we are part of the medical informatics mosaic.

Fundamentally, however, HIM professionals are quite distinct and unique in our focus on quality and confidentiality of health information across the continuum of care and a patient's lifetime. We adhere to an ethical code, have minimum practice competencies, standard academic curricula, professional credentials, continuing education requirements, and a large, viable professional membership organization. But we can't rest on past achievements, and certainly we need to be aware of other disciplines within the healthcare industry that have similar areas of influence.

Our assorted roles within this industry continue to evolve. But our core mission and guiding principles of quality information and patients' rights to privacy and confidentiality set us apart and help us earn the respect of fellow professionals both inside and outside the healthcare industry.

So how did you describe your job at your last reunion mixer?

Notes

1. Corn, M. "Informatics and the Road to Professionalism." *MD Computing* 16, no. 1 (1999): 34-36.
2. Greenes, R.A., and E.H. Shortliffe. "Medical Informatics: An Emerging Academic Discipline and Institutional Priority." *Journal of the American Medical Association* 263, no. 8 (1990): 1114-20.
3. Warner, H.R. "Medical Informatics: A Real Discipline?" *Journal of the American Medical Informatics Association* 2, no. 4 (1995): 207-214.
4. Stead, W.W. "Medical Informatics: On the Path Toward Universal Truths." *Journal of the American Medical Informatics Association* 5, no. 6 (1998): 583-584.
5. Corn, M. "Informatics and the Road to Professionalism."

Article Citation:

Dixon-Lee, Claire. "Common (and Uncommon) Ground." *Journal of AHIMA* 70, no. 6 (1999): 6-7.

Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.