

# Editorial **Comments**

# JAMIA

## A Discipline by Any Other Name . . . .

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The paper by Stagers and Thompson in this issue enriches the ongoing challenge of defining the field of medical informatics. Medical informatics is a maturing field whose research base is well grounded in the basic sciences of computation, information, and decision making; the full range of bench and social sciences supporting health care; the clinical sciences, including medicine, nursing, and pharmacy; and the practical realities of developing and deploying information systems for patient care. The Stagers and Thompson paper takes the perspective of a single clinical discipline, nursing, and explores the development of informatics in that context.

It is important in nursing, as in any basic or clinical health science, to systematically examine how a derived field, such as medical informatics, grows and develops within its boundaries. Three important reasons for this examination emerge. First, the definition of medical informatics, as a discipline derived from health professions and health care policies and practices, is continually changing as it is informed by, and as it informs, the referent clinical discipline. Second, as a discipline that is, itself, continually evolving, medical informatics merits consideration for its concurrent utility to the disciplines in which it is applied. Finally, as science develops and technology changes, the scope of the referent discipline changes and so might the scope of medical informatics.

The most important reason for examining the definition of a clinical informatics domain from the perspective of the referent discipline is to determine its articulation with the parent clinical discipline. Perhaps more than any other constituent disciplines within medical informatics, nursing informatics exists both as an acknowledged constituent body

within the broader field of medical informatics and as a subspecialty within the profession of nursing. Therefore, examination of the adequacy of the definition of nursing informatics requires accountability to the discipline of nursing for the practice domain of nursing informatics.

Several key dimensions of the discipline of nursing are reflected in the practice domain of nursing informatics. Nursing is a practice discipline whose realm of expertise is the diagnosis and treatment of human response. Thus, the conceptual definitions advanced by Stagers and Thompson are anchored both in the substantive content of nursing practice and the syntactic strategies of informatics. As the semantic (nursing) and syntactic (informatics) elements evolve over time, the definition of nursing informatics must also evolve over time, being both reflective of and responsive to the larger disciplinary issues.

In addition, the proposed definition advanced by Stagers and Thompson incorporates not only the substantive matter of nursing informatics but explicit attention to the nature of work conducted by nurse informaticians. Explicit attention to the work of those engaged in nursing informatics practice as well as the substantive knowledge base of nursing informatics may be more relevant to nursing than to other disciplines. This inclusion is congruent with the concept that nurses themselves are the key agents for action—that is, the worker is inseparable from the work. Thus, it is essential that the definition of the practice domain of nursing informatics be consistent with the disciplinary definition of nursing.

The paper by Stagers and Thompson seeks mappings between abstract concepts that are well anchored in a

vision of a referent discipline such as nursing and those that emerge through multidisciplinary attention to the technologies and terminologies that cross the disciplines. The processing of expounding the definitions of practice domains risks being labeled a self-serving exercise by academics, theoreticians, and those concerned more with preserving the integrity of the parent discipline than with advancing the substance of the derived discipline. This charge is appropriate when the exposition becomes an end in itself. But when the definition serves as the basis for accountability for practice, a guide for developing education programs, and an enumeration of the profession's social contract, the worthiness of the "academic exercise" becomes apparent.

#### Reference ■

1. Stagers N, Thompson CB. The evolution of definitions for nursing informatics: a critical analysis and revised definition. *J Am Med Inform Assoc.* 2002;9:255–261.

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Affiliation of the author: University of Wisconsin–Madison, Madison, Wisconsin.

Correspondence and reprints: Patricia Flatley Brennan, RN, PhD, FAAN, President, American Medical Informatics Association, University of Wisconsin–Madison, 1513 University Avenue, Room 372, Madison, WI 53706; e-mail: <pbrennan@engr.wisc.edu>.

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■ *J Am Med Inform Assoc.* 2002;9:306–307.

## ERRATA

### 1) Reference Omitted:

A reference was omitted from those cited after the statement "Many draft and existing standards have helped inform the development of the CDA ...," on p. 553 of the Nov/Dec 2001 issue of *JAMIA*.<sup>1</sup>

The missing reference is:

Miller RS, Culp KS, Myers DL. Enterprise-wide applications of an object-based data model. Proceedings of the 1994 AMIA Spring Congress. Bethesda, Md.: American Medical Informatics Association, 1994.

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1. Dolin RH, Alschuler L, Beebe C, et al. The HL7 clinical document architecture. *J Am Med Inform Assoc.* 2001;8(6):552–69.

### 2) Middle Initial Incorrect:

On p. 361 of the Sep/Oct 1999 issue of *JAMIA*,<sup>1</sup> the middle initial of the author is incorrect. The author's name should read Mark E. Frisse, MD.

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1. Frisse ME. The business value of health care information technology. *J Am Med Inform Assoc.* 1999;6(5):361–7.