The newsletter of the International Society for Telemedicine & eHealth (ISfTeH) is published quarterly for members of the global telemedicine and eHealth community to provide updates about ISfTeH members and activities, as well as other telemedicine and eHealth news.

Updates from the ISfTeH Global Telemedicine & eHealth Network (July 2017)

Read in this issue about the Journal of the ISfTeH, ISfTeH's presence at the World Health Assembly, 25th anniversary edition of the Telemedicine School in Moscow, AMD Global Telemedicine's new solutions and partnerships, ISfTeH WoW's activities and projects, new primary health care service in India, standards around ICT for active and healthy ageing, a job vacancy, conference reports and conference call for papers, and more. Enjoy reading!

STAY CONNECTED:

Letter from the Executive Director (...Guest Editorial by Prof. Maurice Mars)

Dear Reader,

Have you read the Journal? Which Journal I hear you ask? YOUR Journal, the Journal of the International Society for Telemedicine and eHealth. If not why not? Is it because you don't know about it - www.jisfteh.org - or because reading papers required online registration with JISfTeH. We have simplified this, you don't have to register to read an abstract or a paper. You now only need to register if you want to send us a paper, serve as a reviewer or wish to be sent notices when new papers are published.

More importantly, have you submitted a paper yet? Join the many authors from over 20 countries, of the 78 papers already published this year, with another 10 under review. That's enough advertising. By the way you will see that there is no advertising on the JISfTeH site - we'll come to that later.

Why should an organization like the ISfTeH have a journal and what purpose does it serve? The answer to the first question is that a journal is indicative of an organization's level of maturity. The ISfTeH serves as a form of United Nations of Telemedicine Societies and Associations around the World, is an NGO in Official Relations with the WHO and has been around and growing for over 20 years. So it is both important and mature. The ISfTeH needs to promote and facilitate knowledge sharing of new ideas and findings, not only of its far flung and disparate membership but also the many others working in the field of eHealth who are not members of the ISfTeH. This it has done in through conferences. JISfTeH is the new vehicle for this.

We feel very strongly about eHealth, which the WHO neatly defines as "...the use of information and communication technologies to support health and health-related services"
and communication technologies (ICT) for health”. We need to remind ourselves of the WHO definition of health “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” As the use of ICT expands in different ways in the field of “health” around the world there is a lot to cover and be covered in the Journal.

In part I have answered the second question, the dissemination of information and knowledge, but there is more to it. When we set out to publish the first edition in 2013 - yes we are now in our fifth year - we noted that the current eHealth journals were largely Western-centric with few papers from the developing world. Unfortunately, as we predicted, the digital divide continues to grow. We are very aware of the problems faced by eHealth researchers and practitioners in the developing world. While careful not to make JISfTeH the eHealth journal of, and for, the developing world we have been sympathetic in the belief that problems faced and solutions found or proposed in the developing world may be of assistance to others in similar settings.

Another part of the answer is language. We are an international journal and there are over 7,000 languages in the world. Those of us in the eHealth field speak many different languages, an indication of the ubiquity of eHealth. While we currently publish in English, the lingua franca of science - lingua franca by the way was a mixture of Italian with French, Greek, Arabic, and Spanish, formerly used as a common language in the Levant - many of our papers come from authors whose first language is not English. As stated in our most recent editorial, “Being ‘International’ also means that we must be receptive to papers from those for whom English is not their mother tongue or even their second language. To this end we have assisted many authors with English editing, advice on style and format, and revision of their submission.” We are now looking to publish papers in French, Spanish, Portuguese and Arabic, but this entails forming additional editorial boards and finding suitable reviewers which we are investigating.

To get back to advertising. Our journal is “free”! It is open access, free to download and authors pay no article processing fee or publication fee. It is run on goodwill. All papers are peer reviewed by at least two international experts, at no cost, as in most journals. The copy editing, layout and publication is done by the editorial team and the journal site is hosted, also at no cost to us, by the University of KwaZulu-Natal in South Africa. We hope to soon provide DOI numbers for all publications and international backup of all papers, again supported by the University of KwaZulu-Natal.

With the significant increase in papers the workload is becoming too onerous for our small team and people need to be remunerated or helping hands hired. We have three options; charge authors for processing and publishing their papers which we are trying to avoid, seek advertising to cover the costs, or bring on board more volunteers. A blended approach may work, attract advertising, increase the volunteer pool and use publication fees as a last resort. The problem will grow as we move to publishing in different languages and better serve the ISfTeH.

We must find a new generation of people interested in sustaining and growing the JISfTeH.

We began it, you must grow it!

Maurice Mars
Journal Manager JISfTeH
mars@jisfteh.org

P.S. Thanks to Yunkap Kwankam for inviting me to hijack his column in this newsletter. Was he predicting what I would say - find another volunteer to do his work?

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**ISfTeH at the World Health Assembly 2017**

The seventieth session of the World Health Assembly was held in Geneva, Switzerland on May 22 - 31, 2017. As spelled out by the World Health Organization, the World Health Assembly (WHA) "is the decision-making body of WHO. It is attended by delegations from all WHO Member States and focuses on a specific health agenda prepared by the Executive Board. The main functions of the World Health Assembly are to determine the policies of the Organization, appoint the Director-General, supervise financial policies, and review and approve the proposed programme budget." One of the highlights of WHA70 was the election of a new WHO Director-General, in the person of Dr Tedros Adhanom Ghebreyesus, from Ethiopia. For the first time, the final selection of the Director-General was made at the Assembly, by all Member States - a departure from previous practice, where the Assembly appointed a DG selected by the WHO Executive Board.
More information, including all official documents of the WHA70 are available at http://apps.who.int/gb/e/e_wha70.html. Specific views of the event, through varying lenses, are available online. Thus, the ISfTeH Working Group on Women (WoW) may find of particular interest, a gender analysis of WHA70, prepared by the Geneva-based Graduate Institute. Similarly, our WG on Social media could find the analytics on social media at WHA70. These are but two examples. Other viewpoints of the WHA70 abound.

The ISfTeH delegation consisted of the Executive Director and 20 participants, including faculty and student members from Shenandoah University in Virginia, USA. This was the third edition of the Shenandoah University Global Experiential Learning (GEL) programme to the WHA in partnership with the ISfTeH. The collaboration offers Shenandoah students a short-term, faculty-led, study-abroad experience where they observe global health policy-making at the highest level. A reception on May 20 provided an opportunity for the students and faculty to interact with senior officials from organizations heavily engaged in global health, such as, the International Telecommunication Union (ITU), GAVI the Vaccine Alliance, the International Council of Nurses (ICN), the International Hospital Federation, IntraHealth International, the Tropical Health and Education Trust (THET).

WHA70 was also the occasion for the formal signing of an MoU between the ISfTeH (represented by Prof. Yunkap Kwankam, Executive Director) and HealthEnabled (represented by Dr. Peter Benjamin, Country Director). HealthEnabled is a South Africa-based non profit organization, that helps national governments in low- and middle-income countries make short- and long-term decisions to integrate life-saving digital health solutions into their health systems. Visit healthenabled.org for more information. The collaboration aims to grow the network of digital health specialists needed to achieve our shared objective, namely, to invest in, develop and use digital health to help transform and strengthen health and healthcare, particularly in low-, and, middle-income countries.

Join the International Society for Telemedicine & eHealth

- Are you heading a national or regional telemedicine/eHealth organization?
- Do you offer telemedicine products and solutions?
- Are you doing research on telemedicine and eHealth applications and technologies?
- Does your organization provide (or wants to offer) care services by means of telemedicine/eHealth technologies?
- Are you engaged in healthcare policy?

If so, you should consider joining the ISfTeH network to expand your global reach, enhance your network, broaden your knowledge and learn about key issues and new ideas in telemedicine and eHealth by interacting and engaging in partnerships with other ISfTeH members from around the world.

Or if you are interested in obtaining exposure in future editions of this newsletter (through
MeHealth 2017 (22nd ISfTeH International Conference) calls for presentation proposals

The ISfTeH International Conference 2017 (MeHealth 2017), organized annually by one of its members (a tradition since the early days of the ISfTeH), will take place this year in Casablanca, Morocco on December 6-8 (22nd edition), hosted by the Moroccan Society for Telemedicine & eHealth, i.e. the national member for Morocco in the ISfTeH.

The conference will feature practical experiences and research results in the field of Telemedicine and eHealth solutions, and provide opportunities for healthcare providers, industry representatives, policy makers, researchers and scientists to meet and share and discuss current projects, research, and new concepts and ideas in Telemedicine, Telehealth and m/eHealth.

MeHealth 2017 will bring together members of the Moroccan Society for Telemedicine & eHealth, the International Society for Telemedicine & eHealth and a range of other local and international institutions and organizations who are involved in Telemedicine/eHealth development and implementation.

Submit your presentation proposal for the MeHealth 2017 conference here.

Deadline: August 31, 2017

For more information, contact info@isfteh.org.

25th International Telemedicine School in Moscow, Russia

The 25th International Telemedicine School took place in Moscow between May 23rd and June 2nd at the MIRBIS (Moscow International Higher Business School). This educational event, under the leadership of Prof. Valery Stolyar of the RUDN (People's Friendship University of Russia, institutional member in the ISfTeH), covered various aspects of Telemedicine and eHealth for a group of 30 students from all over Russia.

During the opening session on May 23rd, Frank Lievens, Executive Secretary of the ISfTeH, gave a lecture about International Coordination and Cooperation as the Core of Ultimate eHealth Integration, which fitted perfectly in the program as an introductory subject, leading to several more specific topics, such as wearables, sports and rehabilitation, mobile satellite telecommunication systems, global systems for tracking, location and emergency alarms, telemedicine practices in India, Brazil and Germany, and more.

A plan is currently being reviewed to organize every other year a similar school, outside of Russia, appealing to postgraduate students from all over the world, in cooperation with the ISfTeH. More
ISfTeH member organizes 1st World Tinnitus Congress, including focus on telemedicine

In May 2017 the 1st World Tinnitus Congress was organized in Poland by the Institute of Physiology and Pathology of Hearing, institutional member in the ISfTeH. This prestigious conference met with a huge interest of physicians and researchers who came from around the world, as well as media involvement.

One of the most innovative sessions was on "Telemedicine". The session brought together experts from Poland and the rest of the world, incl. chairman Asst. Prof. Piotr Henryk Skarzynski, and panelists Asst. Prof. Mark Krumm, Frank Lievens and Maciej Ludwikowski, members of the ISfTeH.

Mark Krumm from the Kent University underlined the inevitability of the continuous improvement in telemedicine, providing the solutions which outperform the traditional methods in terms of cost-effectiveness and quality. The Polish National Network of Teleaudiology developed by the Prof. Henryk Skarzynski and his team from the Institute of Physiology and Pathology of Hearing was pointed out as a role-model, being the most technologically advanced solution in the world in the field of audiology and teleaudiology.

Frank Lievens, Executive Secretary of the ISfTeH, highlighted that - looking from the wider perspective - there is no way back for telemedicine and eHealth. Telemedicine is the tool providing global help for patients around the world. The diseases have no boundaries, but the access to specialized healthcare is distributed extremely unequally, especially in the developing world. Moreover, no single healthcare system is able to cope alone with more than 20,000 diseases. Fortunately, current technologies have the potential to successfully cross all borders and provide global exchange of information. One of the major challenges facing telemedicine is the financing issue, dependent mostly on political arrangements. For Frank Lievens, it is just a matter of time before eHealth services will gain public funding.

Piotr Henryk Skarzynski, Board Member of the ISfTeH and member of the researching and working group of Nationwide Network of Teleaudiology, stressed that telemedicine is an extremely cost-effective solution in the long run and enables numerous services such as teleconsultations, telediagnosis, telerehabilitation.

Maciej Ludwikowski, MA, MBA, member of ISfTeH and also member of the researching and working group of the Nationwide Network of Teleaudiology, presented a short history about the development of telemedicine in Poland. One of the major technological breakthroughs in the telemedicine progress by the Institute of Physiology and Pathology of Hearing was the creation of a 'telefitting' pilot study. The excellent results of the pilot study resulted in the development of the National Teleaudiology Network. The connection of 20 national centers enabled the direct involvement and close cooperation of specialists and significantly increased the quality of medical
AMD Global Telemedicine announces new, major release and enhancements to AGNES Interactive

AMD Global Telemedicine Inc. (corporate member in the ISfTeH) announces their latest and sixth major enhancement release of AGNES Interactive software. The new release provides users with dramatically enhanced features and additional functionality that deepens third party integrations and expands collaboration between patients and healthcare providers.

AGNES Interactive is web-based telemedicine software that aggregates medical device data and shares it in real time with the remote physician(s). New features of AGNES Interactive include: integrated third-party video conferencing - utilizing Vidyo as its first use case; significantly enhanced system Utilization Reporting; and a universal mechanism for capturing and integrating all telemedicine encounter data with EMR systems.

"This latest release of AGNES Interactive truly does open up tremendous opportunities of enhanced integrations for telemedicine," commented Eric Bacon, President of AMD. "It brings together telemedicine technology, software-based video conferencing and healthcare documentation (EMRs) into a single user experience," continued Bacon.

VidyoWeb is accessed directly through AGNES Interactive, as a "Browser within a Browser" application. This provides users with all of the Vidyo features including multi-point video conferencing, single sign-on and remote PTZ camera controls, right inside the AGNES Interactive platform and interface.

The new Universal EMR filing feature is the next generation of AMD’s previously released HL7 integration capabilities. This new feature allows any EMR capable of importing PDF documents, to receive a compiled report detailing all data captured during patient assessment. In a single step, information from the telemedicine encounter is ready to be stored with the patient’s record. The enhanced User and System Reporting capability allows deeper and more detailed information regarding system and user utilization that can be aggregated and compiled across to any other reporting platform.

For more information on AMD Global Telemedicine, visit www.amdtelemedicine.com.

AMD Global Telemedicine and Adventist Health roll out Unified Telemedicine EMR solution

In other news, AMD Global Telemedicine, also announced that they engineered a unified telemedicine and electronic medical record (EMR) solution, through a collaboration with Adventist Health and Cerner, a global leader in health care technology. AMD’s AGNES Interactive development team worked closely with Adventist Health and Cerner to integrate their telemedicine platform with Cerner’s EMR.

"The integration of AGNES Interactive with Cerner’s EMR has strengthened our telehealth network. Everything that is part of a consult, including images, can now be included in the EMR," said Rob Marchuk, VP Ancillary Services, Adventist Health. Providers now have the ability to query a patient’s record and link it to a telemedicine consult, and then save important health data back into the patient’s medical record. Critical data that is collected during the telemedicine exam such as vitals and real-time, high definition images, is now easily stored directly to Cerner’s EMR.

"This multifaceted integration was a strategic goal from the beginning of our Adventist relationship," commented Dan McCafferty Vice President, Global Sales and Corporate Development. "We developed AGNES Interactive with the intention of aligning our telemedicine solution with EMR platforms to enhance the value of telemedicine consults and maximize the continuity of patient care."
AMD has developed a command and control framework within the AGNES Interactive API that may be used to package all the data into HL7 messages and pass them to any third party application.


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**Aetna International launches its global digital primary health care service in India**

Aetna International, one of the world’s largest health benefits businesses, has announced the first phase of the global launch of ‘vHealth by Aetna’. India is the first market in the world to see the launch of ‘vHealth by Aetna’ and is set to become the centre of excellence for global expansion of this service, with subsequent launches planned in other key global markets later this year. The Indian Health Organisation, Aetna International’s fully-owned subsidiary in India (and ISfTeH corporate member), plans to have 4,000,000 members in India by 2020.

With the focus to make quality health care accessible, vHealth in clinical partnership with Medgate, offers world-class health care service. At its heart are telemedicine trained doctors based in a state of the art telemedicine center. The doctors follow a robust clinical protocol, follow-up measures, and stringent quality control initiatives to ensure quality in care. The team of doctors has completed over 5,000 consults in three months and observed that 70% of the patients were able to avoid any further medical support.

vHealth is supported by 16,500 health partners across 38 cities in India to organize any physical consultations, diagnostic tests, minor and major treatment or even medicine delivery at home making an end-to-end primary care ecosystem a reality.

Digital primary care services have the potential to make quality healthcare accessible and improve the quality of services. vHealth provides unlimited teleconsultations to a family of 4 members annually at a cost of INR 2400 (approx. USD 40).

On the launch of vHealth, Manasije Mishra, Managing Director of Indian Health Organisation & Aetna India said: "Health care can appear complex and hard to navigate. ‘vHealth by Aetna’ can be a guide and partner in managing your family’s health. Our doctors are trained and certified as per Swiss telemedicine standards, and follow robust clinical protocols built by Medgate a Swiss market leader in telemedicine for over 15 years. These protocols, customised for India, enable our doctors to provide evidence based diagnosis and care. We believe that the resulting clinical quality, together with the breadth and convenience of this service will be unparalleled in the Indian health care market."

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**ISfTeH Telenursing Working Group at International Council of Nurses Biennial Congress**

The International Council of Nurses Biennial Congress was held at the end of May in Barcelona, Spain with 8,000 nurses attending. ISfTeH was represented by Dr. Claudia Bartz and other members of the ISfTeH Telenursing Working Group. Dr. Bartz made two presentations about telenursing at the congress to inform nurses about the experiences and opportunities offered by telehealth/telemedicine, and she also presented the ISfTeH at the ICN Telenursing Network meeting and encouraged nurses there to consider joining ISfTeH and its Telenursing Working Group. She also advertised the 22nd ISfTeH International Conference which is scheduled for December 2017 in Casablanca, Morocco and encouraged to submit presentations to this conference (deadline: August 31st) and to attend the event.
ISfTeH and ICN have a memorandum of understanding to support each other's work in eHealth and telehealth. ICN is currently reviewing its eHealth and Digital Health strategies.

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**ISfTeH Working Group on Women in eHealth continues to pursue gender issues and women's health**

**ISfTeH Working Group on Women (WoW) at Med-e-Tel 2017:**
With the support of the Women Observatory for eHealth (WeObservatory), the ISfTeH WoW attended the Med-e-Tel conference in Luxembourg last April and presented two joint sessions with the ISfTeH Telenursing Working Group. It was the opportunity to pursue the dialogue with nurses, medical doctors, students and industry on eHealth, mHealth and Telemedicine progresses for women's health in the world. Four more Interviews with women influencers in eHealth will soon be published on the WeObservatory Blog. The second special theme issue on Women in eHealth of the JISfTeH was also presented at Med-e-Tel and is available online at the JISfTeH website with the editorial of Dr. Regina Ungerer (ISfTeH Board Member), and four articles from innovative programs in Canada, Spain, Egypt and Brazil. A next "Women in eHealth" theme issue is planned for 2019. Stay tuned for more information!

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**Meeting with friends and colleagues at Med-e-Tel 2017: Fatima Sanz de Leon, Yunkap Kwankam (ISfTeH Executive Director), Regina Ungerer (Fiocruz and ISfTeH Board Member), Veronique-Ines Thouvenot (ISfTeH WoW), Misha Kay (WHO)**

**Working Groups meeting at Med-e-Tel 2017 with Angelica Silva (Fiocruz), Lenka Lhotska (ISfTeH WoW), Jehona Krasniqi (ISfTeH Students WG), Claudia Bartz (ISfTeH Telenursing WG), Pirkko Kouri (ISfTeH Board Member and Telenursing Working Group), Veronique-Ines Thouvenot (ISfTeH WoW)**

**Mobile Health for Women’s Health:**
The WoW pursues its activities in mHealth and expands its reach to nurses, midwives and pregnant women in Mongolia! Systematically applying ICT solutions to reduce maternal and newborn mortality is the primary aim of the mobile apps developed at the Women Observatory for eHealth (WeObservatory) of the Millennia2025 Foundation, through a unique private partnership that seeks to bring mobile health solutions to pregnant women to increase their access to healthy pregnancy information and emergency care.
Mentoring in eHealth for Women’s Health - New Mentors Sought:

The ISfTeH Telenursing WG, the ISfTeH WoW and WeMentors are joining their expertise and networks to improve mentoring activities in eHealth and Telemedicine, with a focus on women’s health. As mentors are still rare, a list of mentors, in particular from the speakers the participated at Med-e-Tel in the previous years, will be established and shared broadly. In the future, success stories between mentors and mentees and a presentation at Med-e-Tel 2018 may be considered. Claudia Bartz, leading the WeMentors initiative, proposes an easy guidance in 4 tips: First, decide what you want from a mentor. Second, look at your self. Third, what qualities would you like in a mentor. Fourth, consider your availability. Want to be a Mentor? Please contact Claudia Bartz at cbartz@uwm.edu.

Working on the Reduction of Maternal Mortality in Mongolia:

Mongolia has a population of around 2.8 Mio. The country is large and sparsely populated. Hardly any roads connect the remote areas with the capital city of Ulaanbaatar. Maternal and new-born health is at risk because mothers have to travel long distances over rough terrain to receive proper health care. The maternal mortality rate improved with 76.3 % between 1990 and 2015. Mongolia achieved the Millennium Development Goals 5 (MDG). Anna Schmaus-Klughammer, one of the founding members of the ISfTeH WoW, participated in all major discussions about the implementation of the Mongolian telemedicine project together with Prof. Martin Oberholzer from the University Hospital Basel (Switzerland) and Dr. Tsedmaa from the Mother and Child Hospital, Ulaanbaatar (Mongolia). The project started in 2009 and is still ongoing. To reach the MDG 5 in Mongolia, telemedicine was used. A telemedicine project from UNFPA made it possible to strengthen the capacity of service providers to provide timely and appropriate care, especially to mothers with pregnancy and childbirth complications as well. All the way through this network, health staff had easy access to information and support from experts. The early detection of pregnancy complications and timely management with the distance consultation of an expert team had contributed significantly to the reduction of maternal and new-born morbidity and mortality in project-selected provinces compared to non-project areas. The effective use of a modern telemedicine approach has been demonstrated as being effective in addressing the remoteness and rural-urban discrepancy in the quality of health care in Mongolia. Under the project, modern diagnostic and telemedicine equipment such as 2D&3D digital ultrasound machines with DICOM image processing, high-speed computer with audio visual accessories connected with internet and CTG and digital colposcopes were provided. The telemedicine platform used since 2009 is CampusMedicus which is a collaborative platform for the exchange of medical knowledge, distance consultations, forums and distant teaching in medicine. The Mongolian Ministry of Health supported the telemedicine project.
Standards and guidelines around
ICT for active and healthy ageing -
get involved!

Standards play a crucial part in many aspects of our lives. They ensure that products and services operate safely and properly. But do standards help manufacturers, public authorities and end users to ensure that products, services and public spaces (incl. healthcare and medical products, services) are suitable for older people? This is one of the questions that are driving the PROGRESSIVE project (a project funded by the European Union's H2020 Program, looking specifically at how standards around certain ICT applications, products and services can support an environment for active and healthy ageing). Partners in the project include among others AGE Platform Europe, European Health Telematics Association, Telehealth Quality Group and several European national standardization bodies.

The project is looking for supporters and contributors to help make standards meet the needs of the ageing population. As a supporter of PROGRESSIVE, you will have the opportunity to closely follow the project work and contribute to framing its outputs. You will be able to share your views on:

- how standards should support age-friendly approaches,
- how products and services could be more interoperable,
- and how older people could be better involved in standardisation.

Click here if you are interested in these topics and would possibly like to contribute to this work. No matter whether you develop/manufacture products, provide (healthcare) services, are a standards developing or assessment organisation, represent older people, are an end user, there is bound to be a positive contribution you can make to the project and to your own work!

Or contact the PROGRESSIVE project coordinator (and ISfTeH member) Malcolm Fisk at malcolm.fisk@dmu.ac.uk for more information on how you can get involved. You can also sign up to the PROGRESSIVE newsletter here.

Also mark the date of October 19th for a project workshop in Brussels, Belgium! More info will be released soon. Or contact malcolm.fisk@dmu.ac.uk for details.

Avizia powers MyDocNow medical mission in rural Philippines

Avizia, powering system-wide telehealth, demonstrated its ability to enable care delivery to patients in remote and underserved regions of the globe as part of a rural medical mission in the Philippines. The effort was led by Philippines-based MyDocNow, a telemedicine service provider.

The mission, which included more than 75 healthcare providers from various organizations, screened approximately 450 pregnant women to identify high-risk patients. Clinicians also screened several thousand children under five years old, many of whom were provided with free vitamins and nutritional supplements.
"The mission was a remarkable success," said Hugh McClung, CEO of MyDocNow. "Ninety-five percent of the women screened during this effort had never had an ultrasound. Patients we identified as high-risk will receive telehealth-enabled follow-up care, powered by our partner, Avizia."

According to the World Health Organization, approximately six million children under age five died in 2015. Likewise, more than 300,000 women died from pregnancy-related causes. Approximately 90 percent of these deaths occur in low- to medium-developing countries such as the Philippines.

"You'll find Avizia's solutions around the globe in diverse care settings," says Mike Baird, Avizia CEO. "We're honored to partner with MyDocNow and members of its mission to enable the delivery of quality care to women and children, despite geographic barriers to access."

Learn more about Avizia's approach to powering system-wide telehealth at www.avizia.com.

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**8th Brazilian Congress of Telemedicine and Telehealth opens registrations and call for paper submissions**

Under the theme of "Telehealth Transforming Realities: Trends and Impacts", the Brazilian Association of Telemedicine and Telehealth (ABTms), national member for Brazil in the ISFTeH, organizes the 8th Brazilian Congress of Telemedicine and Telehealth (CBTms) on November 14-17, 2017 in the town of Gramado. Some of the main topics that will be addressed during the congress include: telehealth in medical specialties, mHealth applied to teleassistance, international cases in teleassistance, telehealth in academic curricula, games on telehealth, mobile learning, virtual reality applied to health. The event will feature poster and oral presentations, "unconference" area, health hackathon, and the SBIS meeting.

Papers for presentation at the congress can be submitted on the event's website at congresso.abtms.org.br. Deadline for submission is August 7th. The thematic lines of the submitted papers should be on:

**Tele-education:**
- Design for EAD
- Educational applications
- Health Games
- Active Methodologies in EAD
- Virtual reality
- Massive Open Online Course - MOOC
- Learning analytics
- Course Management
- EAD Rating

**Teleassistance:**
- Ethical and legal aspects
- Monitoring applications
- Second formative opinion
- Access and accessibility of Telehealth
- Homecare
- Use of ICTs for patient care

**Information and Communication Technology:**
- Interoperability
- Development standards
- Development of health systems
- Games and Apps Development
- Social networks in EAD

The Deggendorf Institute of Technology (Germany) is hiring a professor in the field of eHealth/Health Informatics with focus on "IT Management in Health Care" (full-time professorship).

A successful applicant would have:

- A master's degree in computer science or information science, and (preferably) a doctorate (PhD) in medical or health informatics, eHealth, or health IT;
- Sound theoretical knowledge and practical competences and skills in hospital information systems and electronic health records, data standards, interoperability, healthcare data management, healthcare data security and privacy;
- Broad practical experience gained through at least 5 years of professional activity (after completing university studies) in an international context, in the domain of health IT / eHealth (such as hospital IT department, CIO, eHealth project management, industry, consultancies etc.), of which at least three years have been spent outside the academic arena; proof of professional practice outside the higher education sector can be obtained in special cases by providing a substantial part of the professional activity in cooperation between the university and non-academic organization(s) over a period of at least five years;
- A good record of research experience, which is usually demonstrated by the quality of a doctorate and of the scientific publications;
- Excellent teaching capabilities;
- Good international networking and collaboration.

The prospective professor will contribute to further development of the study program Master of Medical Informatics, as well as to the establishment of the new bachelor program Health Informatics. The assignment will mainly be carried out at the European Campus Rottal-Inn (location: Pfarrkirchen), in cooperation with the European partner universities, mainly in English. Some activities can also take place at main campus in Deggendorf.

To apply: [https://bmgmt.th-deg.de/apply.php?site=apply_job_offer_show&job_offer=564](https://bmgmt.th-deg.de/apply.php?site=apply_job_offer_show&job_offer=564)

Applications must be submitted no later than September 8, 2017.

For more information, contact Prof. Dr. Georgi Chaltikyan, Professor of eHealth, Telemedicine and Cross-Border Healthcare Management, and Program Director Master's in Medical Informatics at the Faculty of Applied Health Sciences, Deggendorf Institute of Technology (THD/DIT): georgi.chaltikyan@th-deg.de. Prof. Chaltikyan is also the President of the Armenian Association of Telemedicine, national member for Armenia in the ISfTeH!

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**Change in the ISfTeH board of directors**

Mina Abdulla Hamoodi, CEO of the Abu Dhabi Telemedicine Centre, steps down as board member of the ISfTeH. The reasons for her decision are all positive: she will be on maternity leave for the next few months.

We thank Mina for her contributions to the ISfTeH so far and wish her all the best. We look forward to continue working with her when she is back at work.

The Abu Dhabi Telemedicine Centre - offering high quality, convenient and confidential medical consultations over the phone to UAE residents - is a corporate member in the ISfTeH. Fatima Rashid Al-Ali takes over as CEO of the Centre.

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**Upcoming ISfTeH meetings and conferences**

**22nd ISfTeH International Conference**

6-8 December 2017

Casablanca, Morocco

Other ISfTeH supported events:

Telemedicine and eHealth 2017
8-9 September 2017
Warsaw, Poland
www.konferencje.telemedycyna.org

CATEL Paris 2017
5-6 October 2017
Paris, France
www.catelparis.fr

Successes and Failures in Telehealth (SFT-17) & 8th Annual Meeting of the Australasian Telehealth Society
30-31 October 2017
Brisbane, Australia
www.sftconference.com

4th European Congress on eCardiology & eHealth
8-10 November 2017
Berlin, Germany
www.e-cardiohealth.com

TELEMEDICON-2017 - 13th International Conference of the Telemedicine Society of India
9-11 November 2017
Pune, India
www.telemedicon2017.com

8th Brazilian Congress on Telemedicine and eHealth
"Telehealth: Trends and Impacts on Health"
14-17 November 2017
Gramado, Brazil
www.abtms.org.br

8th International Conference on Revolutionizing Healthcare with IT
1-2 December 2017
Mumbai, India
www.transformhealth-it.org

II Forum Telesalut@ da SITT
19-20 January 2018
Funchal, Madeira, Portugal
sitt-iberica.org

BIOSTEC 2018 - 11th International Joint Conference on Biomedical Engineering Systems and Technologies
19-21 January 2018
Funchal, Madeira, Portugal
www.biostec.org

ICT4AWE 2018. 4th International Conference on ICT for Ageing Well and e-Health
22-23 March 2018
Funchal, Madeira, Portugal
www.ict4ageingwell.org

ISfTeH Supported Events Calendar and Other Telemedicine/eHealth Events

New ISfTeH members
The ISfTeH is pleased to welcome the following new members to its global network:

**National Members:**

[Philippine Medical Informatics Society]
 Philippine Medical Informatics Society, Philippines

**Institutional Members:**

[CNTS - Centro Nacional de TeleSaúde, Portugal]
 CNTS - Centro Nacional de Telesaúde, Portugal

**Corporate Members:**

[AllCare, France]
 AllCare, France

[InTouch Health, USA]
 InTouch Health, USA

**Individual Members:**

Michelle Gamber, USA
Kayathi Vijaya Shekar Reddy, India
Giovanni Staffilano, Italy

**Nurse Members:**

Julien Bouix, France
Dianne Harris, USA
Richard Huls, USA
Rona Cameron, Singapore
Taiwo Ojo, Nigeria
Ali Darwish, Bahrain

**Student Members:**

Melissa Rabinek, USA
Michael Williams, USA
Katheryn Soto, USA
Kierstin Rainey, USA
Mark Mechak, USA
Pamela Lee, USA
Catherine Mahon, USA
Justinas Balčiunas, Lithuania
Kelvin Rojas, Venezuela
Giovani Zago Borges, Brazil
Ingrid Souza, Brazil
Thiago Lima Neves, Brazil
Alaa Qari, USA
Mouhamadou Moustapha Diop, Senegal
Ridian Bici, Albania

Click here for full member list or to join as a new member.

**Partners & Corporate Members**

The ISfTeH is proud to work together with the following Partners, representing doctors, nurses, students, industry and policy makers:

[AEMH]
[Continua Health Alliance]
[Diplomatic Council]
[EJD]
[ENSA]
[Global Health Equity Foundation]
[Health Enabled]
ISfTeH Corporate Members and supporters:

If your organization would like to collaborate with the ISfTeH or if you would like to become a member, contact us at info@isfteh.org.

Questions, suggestions? Our board members listen to you!

The ISfTeH board members will be pleased to hear from you with any questions or suggestions you may have related to the Society itself or regarding any telemedicine and eHealth applications or services that you are working on or that you are looking for:

Andy Fischer  Pirkko Kouri  Andre Petitet  Mauro Feda  Hassan Ghazal
Markus Lindlar  Piotr Skarzynski  Addfo Sparenberg  Regina Ungerer  Rajendra Pratap Gupta

Management Board

Yunkap Kwankam  Frederic Lievens  Frank Lievens  Maurice Mars
ISfTeH Lifetime Achievement Awards

The ISfTeH occasionally recognizes and honours a person who has made great efforts in the development of telemedicine and eHealth, creating awareness and driving its implementation and use. Our four Lifetime Achievement Award laureates so far are:

Louis Lareng  Ron Merrell  Gyorgy Miklos Bohm  Prathap C. Reddy

Watch this space for future ISfTeH Lifetime Achievement Awards!

STAY CONNECTED:

Join the ISfTeH Global Network
Click here for membership application

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