

PERINATAL INFORMATION SYSTEM IN LATIN AMERICA: TWO MILLION BIRTHS AFTER

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The Perinatal Information System (SIP) was initially developed in 1984 and periodically updated since in order to enhance its use in a growing number of Perinatal Settings through-out Latin America. Over 500 Maternities in Latin America are using it; over 1200 diskette versions have been shipped to date and over half a million births are annually entered in computer disks. The total number of births entered and processed with SIP is estimated at 2 million. The following is a summary of SIP-recorded pregnancies sent to CLAP, expressed as percentage of total number of births:

Argentina	8%	Colombia	3%	Honduras	2%	Peru	4%
Bahamas	12%	Costa Rica	14%	Nicaragua	4%	R. Dominicana	2%
Bolivia	2%	Curacao	30%	Panama	3%	Suriname	4%
Chile	13%	El Salvador	10%	Paraguay	17%	Uruguay	65%

Barbados, Belize, Cuba, Guatemala, Ecuador, Haiti, Venezuela, Brasil and Mexico contribute with less than 1% of their annual pregnancies. These percentages refer to cases actually sent yearly to CLAP and are therefore an under-estimate of both the number of pregnancies followed with SIP forms and the number of cases analyzed with local computers. Outside the Region, this package is being used on an experimental basis in Indonesia, Greece, Oman among other.

References:

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HEALTH CARE PLANNING SYSTEM (HCPS)

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In this paper we present a decision support system (DSS) applied to health care planning. The Health Care Planning System ("Sistema de Planejamento dos Recursos da Saúde" - SPRS) is based upon a spatial model of territorial division and assignment of demands for health services centers, in order to minimize total transportation costs (generalized). The system is designed to help planners and decision makers in tasks such as location, technological choices and capacity of new facilities, as well as old ones. In addition, one can use it to analyze the economics of specific services to be offered, such as special care to the elderly, children, etc. In general, the benefits offered by the system rely on its informational capability and easiness of use. The DSS developed was validated in a case study, in which the system was used by decision makers of three cities of southern Brazil. In general they have it of great value fulfilling a need among health care planners.