Improving care of vulnerable elders through computerized clinical decision support
Medlock, S.K.

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Curriculum vitae

Stephanie Medlock was born in Kansas City, Missouri, in 1976. She studied agriculture at the University of Missouri for two years, after which she was accepted into the College of Veterinary Medicine, where she attained a degree of Doctorate of Veterinary Medicine in the year 2000. After six years of working as a general practitioner at the North Bend Animal Clinic in Washington State, she moved to the Netherlands. After completing the pre-master program in 2007, she entered the Master's program in Medical Informatics at the Academic Medical Center of the University of Amsterdam, where she graduated with honors in 2009. In September 2009, she started her PhD research on the Improving Care of Vulnerable Elders (ICOVE) project. In addition to working on ICOVE, Stephanie served on the student editorial board of Methods of Information in Medicine. Stephanie has also taken on teaching and organizational duties within the department, including supervising Master’s students in their scientific research projects, organizing the research meetings for PhD students, developing Health Informatics e-Learning modules, leading the Master’s course “Knowledge representation and reasoning in medicine”, and coordinating the pre-master program to help other students from different backgrounds join the Medical Informatics Master’s program.
Name PhD Student: Stephanie Kay Medlock  
PhD Period: September 2009 to December 2015  
Promoters: A. Abu-Hanna, S.E.J.A. de Rooij; Co-promoter: S. Eslami

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**Other**

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List of Publications


In preparation


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Although it is my name on the cover of this book, a more true attribution of the work that made this thesis possible would look something like this:

Although this passage appears at the end of this book, my promoters and co-promoter, Ameen, Sophia, and Saeid, were there from the beginning. It was their hard work that allowed me to start on this research, removed obstacles and provided guidance along the way, and made a place for me to continue what we’ve started. It is no exaggeration to say that this work would not have been possible without you.

Ameen, my sincerest thanks for everything you’ve done in this research. I hope you know that you’ve earned my deepest respect for your talent, integrity, and commitment as a researcher and teacher. Whether it was navigating the bureaucracy of the AMC or untangling a messy R script, you’ve always been there to help. You always find the time to help when it’s needed, even when I know very well that that time is not easy to come by.

Sophia, you have played the role of both clinical expert and remover of obstacles throughout this project. Your contribution as a geriatrician has been invaluable, but your involvement has gone well beyond that of simply providing the clinical
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perspective. It has been an honor and a pleasure to work together.

Saeid, you have always welcomed collaboration, and I appreciate that you looked for and found ways where our strengths as researchers could complement each other. I think this project is stronger for that collaboration, and I look forward to working together in the future.

I would also like to thank the other members of the “ICOVE team”: Marjan, Derk, Danielle, Esther, Bianca, and Dedan. In addition to Sophia’s advice, we benefited from a wealth of clinical knowledge and experience: Joost Hoekstra, Henk Brouwer, Henk van Weert, Nathalie van der Velde, Peter Wieringa, and especially Gooke Lagaay. Gooke, it is evident to me that you share my belief that the most important task of doctors is to take care of their patients, and that the computer should be a tool to help doctors in that purpose. I appreciate your trust in me to take care of the second one, while you look after the first. I also appreciate the time you’ve invested in helping me achieve that goal, and I hope that investment will be returned in the form of tools that make your job easier.

I’d also like to thank Julia van Weert and Ellen Smets, who advised us on the communication aspects of our systems.

My other colleagues in the field of medical informatics have also provided great assistance. I have always felt welcome to knock on any door in our department, and there is an incredible breadth of knowledge behind those doors. Thanks to everyone for your help, advice, and support. Special thanks to Ellen and Gita, who make sure that everything happens on time and not all at once.

Special thanks also goes to Jeremy Wyatt, who took time from his busy schedule for many weeks to think through the 2SMModel, as well as several visits to Amsterdam to share his wisdom and experience in planning the ICOVE projects.

Alongside my promoters, the other person without whom this work simply would not have happened is my partner, Eric Herman. A supportive partner is a necessity, but I am lucky enough to have an enthusiastic and proud partner. Thank you for being there for me in all of the ways that count - from contributing code to SnelleCor, to kibbitzing with me about team dynamics, to placing an order on thuisbezorgd when I’m working on that “one more thing” before dinner, and especially for making me put the work down and go play outside.

Finally, I’d like to thank our families, and especially my parents, Fran and Steve Medlock. You have always encouraged me in whatever endeavor I wanted to achieve, and to do the right thing, even when that wasn’t the easy thing to do.

There are many others who have given me a leg up or helping hand at the right moment. Thanks to all of you. This book is not the work of one, but of all of us.