PREFACE

This book is both a comprehensive introduction to the concepts and principles of epidemiology, and an application of those principles to healthcare management. The book could be a "stand alone" text for (1) a course that introduces students to the field of epidemiology and provides applications to management; (2) a course that seeks to apply epidemiologic principles to management; and (3) a basic "introduction to epidemiology" course.

This second edition of Managerial Epidemiology: Concepts and Cases represents a significant departure from the first edition, in that it removes the paradigm that was used in the first edition. In the first edition, managerial epidemiology was discussed as the application of epidemiologic principles organized around the "functions of a manager." In this new edition, the book is structured more along the lines of "basic principles first, then specific applications to management."

A second major change with this second edition is the expansion of the descriptive epidemiology chapter (Chapter 2 in the 1st Edition) into four chapters.

A third major change with this edition is the use of more and longer case studies. These 46 case studies are integrated into the text (though highlighted by shaded boxes), and include detailed answers or solutions. The case studies in this book are not optional exercises at the end of each chapter, but rather important aspects of the teaching methodology.

A fourth change with this second edition is the organization of the methods chapters into Part 3: "Evidence-Based Management and Medicine." These chapters include the statistics chapter, the three study design chapters, and the clinical epidemiology chapter.

A final major change with this edition is the addition of three specific application chapters. The purpose of these chapters is to focus on specific kinds of patients (cardiovascular disease, HIV, and dementia), discuss the epidemiology associated with each group of patients, and give case studies that refer back to many of the basic concepts that were discussed in earlier chapters.

Many of us have reviewed or adopted textbooks and asked ourselves, "Why did the authors arrange the chapters in this order?" We designed the syllabus and arranged chapters in what we thought was a "logical" order. The "pioneer" students of the course on which this book is based complained of too much theory and not enough application. In an effort to face their honest and reasonable criticism, I have integrated numerous case study applications throughout the text. Beyond that, however, the chapters are arranged in a more integrated order: morbidity, then two application chapters, then mortality and descriptive epidemiology across time, place, and person. An alternative approach might have been to have the morbidity chapter followed by mortality and
descriptive epidemiology, and then the planning and quality measurement application chapters.

In an effort to encourage the instructor to embrace the case-study approach to teaching, Health Administration Press maintains online Instructor’s Resources for this textbook. On this website, there are numerous case studies. Some of the cases on this website are cases from the text with changed parameters. Other cases include some written by students in my managerial epidemiology courses. Instructors are encouraged to visit the website and use the case studies either in class, as didactic exercises, or as assigned homework for the students. For access information to the Instructor’s Resources, write to hap1@ache.org.

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Steven T. Fleming
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