Computer Applications in Health Care. Reading, PA: Addison-Wesley; 1990.

14. Ball MJ, O'Desky RI, Douglas JV. Status and progress of hospital information systems (CIS). *Int J Biomed Comput* 1991;29:161-168.
15. Collen MF. A brief historical overview of hospital information system (HIS) evolution in the United States. *Int J Biomed Comput* 1991;29:169-189.
16. Korth HF, Silberschatz A. *Database System Concepts.* 2nd ed. New York, NY: McGraw-Hill; 1991.
17. Kuperman GJ, Gardner RM, Pryor TA. *HELP: A Dynamic Hospital Information System.* New York, NY: Springer-Verlag; 1991.
18. Gardner RM, Hulse RK, Larsen KG. Assessing the effectiveness of a computerized pharmacy system. *SCAMC* 1990;14:668-672.
19. Evans RS, Pestotnik SL, Burke JP, Gardner RM, Larsen RA, Classen DC. Reducing duration of prophylactic antibiotic use through computer monitoring of surgical patients. *DICP Ann Pharmacother* 1990;24:351-354.
20. Pestotnik SL, Evans RS, Burke JP, Gardner RM, Classen DC. Therapeutic antibiotic monitoring: surveillance using a hospital information system. *Am J Med* 1990;88:43-48.
21. Gardner RM. Computerized data management and decision making in critical care. *Surg Clin North Am* 1985;65:1041-1051.
22. Tierney WM, Miller ME, McDonald CJ. The effect of test ordering of informing physicians of the charges for outpatient diagnostic tests. *N Engl J Med* 1990;322:1499-1504.
23. Tierney WM, Miller ME, Overhag JM, McDonald CJ.

Physician inpatient order writing on microcomputer workstations: effects on resource utilization. *JAMA* 1993;269:379-383.
24. Greer ML. RXPERT: a prototype expert system for formulary decision making. *Ann Pharmacother* 1992;26:244-250.
25. Evans RS, Pestotnik SL, Classen DC, Burke JP. Development of an automated antibiotic consultant. *MD Comput* 1993;10:17-22.
26. Evans RS, Classen DC, Pestotnik SL, Lundsgaarde HP, Burke JP. Improving empiric antibiotic selection using computer decision support. *Arch Intern Med*. 1994;15:878-884.
27. East TD, Henderson S, Pace NL, Morris AH, Brunner JX. Knowledge engineering using retrospective review of data: a useful technique or merely data dredging? *Int J Clin Monit Comput* 1992;8:259-262.
28. Gardner RM, Golubjatnikov OK, Laub RM, Jacobson JT, Evans RS. Computer-critiqued blood ordering using the HELP system. *Comput Biomed Res* 1990;23:514-528.
29. Barnett OG, Cimino JJ, Hupp JA, Hoffer EP. DXplain: an evolving diagnostic decision-support system. *JAMA* 1987;258:67-74.
30. East TD, Morris AHD, Wallace CJ, et al. A strategy for development of computerized critical care decision support systems. *Int J Clin Monit Comput* 1992;8:263-269.
31. Bria WF, Rydel RL. *The Physician-Computer Connection.* Chicago, Il: American Hospital Publishing; 1992.
32. Medical hardware and software buyer's guide. *MD Computing* 1992;9:339-512.

HIV Transmitted by Bite

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Health officials recently reported a case of a 91-year-old man in Florida who became infected with HIV following a bite on his hand from a prostitute. The man was bitten on his hand, arm, and leg while fighting with the prostitute during a robbery last year.

Although there is only one other case report of HIV being transmitted from a bite, health officials from the Centers for Disease Control and Prevention (CDC) do not believe this case represents a new route of transmission, but rather transmission almost certainly occurred through blood-to-blood contact. During the robbery, the prostitute, whose gums were bleeding, tore skin from her client's hand and bled into the wound.

Serologic testing showed that the man was not infected with HIV when treated after the fight, but did become infected several weeks later. Research laboratory testing of the viruses showed a close genetic relationship "consistent with person-to-person transmission," according to Florida health officials investigating the case.

The CDC said that there was no reason to change current recommendations about bites from people with HIV, particularly children; bites rarely involved blood or breaking skin. The CDC recommends that the education and care of children with HIV should be made on a case-by-case basis and should take into consideration the child's behavior, neurological development, physical condition, and the way they could be expected to interact with other children in a particular setting.

More than 476,000 cases of AIDS have been reported in the United States as of June 30, 1995. Only one other case report involved transmission from a bite. Health officials investigating this case said that if bites and saliva were important in the transmission of HIV, many more cases attributable to such factors would have been identified among the cases.

From: Altman LK. Man is infected with AIDS virus by a bite. *New York Times.* October 28, 1995:7.