BIREME / PAHO / WHO

Latin American and Caribbean Center on Health Sciences Information

Methodology for Legislation

Legal Norms Selection Guidelines for LEYES Database

Version 1.0

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Legal Norms Selection Guidelines for LEYES Database

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BIREME / PAHO / WHO

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This document was produced with the use of Documents Conformation Methodology (NorDoc) developed by BIREME.

Methodology document set

The complete set consists of **3** documents:

- 1. Legal Norms Selection Guidelines for LEYES Database;
- 2. Manual of Bibliographical Description of the Administration Program of Legislation Reference Data (Leisref);
- 3. Manual of Operation of the Administration Program of Legislation Reference Data (Leisref).

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Abbreviations used

- AACR2. Anglo-American Cataloguing Rules 2nd Edition.
- ABNT. Associação Brasileira de Normas Técnicas [Brazilian Association of Technical Standards].
- BIREME. Latin American and Caribbean Center on Health Sciences Information.
- BVS. Biblioteca Virtual em Saúde (see VHL).
- CSS. Cascading Style Sheet.
- DeCS. Health Sciences Descriptors.
- DirEve. Directory of Scientific Events.
- FAPESP. Fundação de Amparo à Pesquisa do Estado de São Paulo [The State of São Paulo Research Foundation].
- FAQ. Frequently Asked Questions.
- GLIN. Global Legal Information Network.

- HTML. HyperText Markup Language.
- HTTP. HyperText Transfer Protocol.
- iAH. Interface for Access on Health Information.
- ISO. International Organization for Standardization.
- LEISREF. Administration Program of Legislation Reference Data.
- LEYES. Latin American and Caribbean Basic Health Legislation.
- LILACS. Latin American and Caribbean Health Sciences Literature.
- LIS. Health Information Locator.
- MEDLINE. Medical Literature Analysis and Retrieval System Online.
- NLM. National Library of Medicine.
- PAHO. Pan American Health Organization.
- SciELO. Scientific Electronic Library Online.
- SHD/HP. Strategic Health Development/Health Policies and Systems Unit.
- UNESCO. United Nations Educational, Scientific and Cultural Organization.
- UNIFESP. Universidade Federal de São Paulo
- UNISIST. United Nations Information System in Science and Technology.
- URL. Universal Resource Locator.
- VHL. Virtual Health Library.

- WHO. World Health Organization.
- WHOLIS. World Health Organization Library Information System.
- **XHTML**. eXtensible HyperText Markup Language.
- XML. eXtensible Markup Language.
- **XSL**. eXtensible Stylesheet Language.
- XSLT. eXtensible Stylesheet Language Transformations.

How to use this manual

This Guide is part of the <u>Methodology for Legislation</u> and presents criteria for the selection of material to be included in the national databases and therefore in the Regional LEYES database.

This Guide has two main sections: the database coverage and the theme-based selection criteria, in addition to two attachments. The first section includes the definitions of the themes, chronology, geographic locations and languages covered by the LEYES database. The second section includes the specific selection criterion per theme. The attachments include a list of thematic areas and a reproduction of DeCS's category SP9 (Sanitary Law).

The Guide was designed to guide the Cooperating Centers in the selection of material to be entered into the LEYES database. It establishes common selection and classification criteria to guarantee the integrity and compatibility of records within the database.

It is not a cataloguing manual, and therefore it was not designed to teach cataloguing practices. It catalogues items according to the AACR-2 (Anglo-American Cataloguing Rules 2). It is neither an indexing manual nor a guide for the operation of a database.

The selection criteria presented in this Guide are not intended to clarify all the doubts that may arise in the decision-making process. If after having analyzed all the elements needed to make a decision, including a specialist's opinion, the indexing technician is still unsure on whether to include a document or not, he/she should include the legal document.

1 Preface

1.1About BIREME

Year after year, BIREME has been following its mission of being a center dedicated to scientific and technical health information for the region of Latin America and the Caribbean. Founded in Brazil in 1967, under the name of Regional Medicine Library (which the acronym BIREME comes from), it has always met the growing demand for up-to-date scientific literature from the Brazilian health systems and the communities of healthcare researchers, professionals and students. Then, in 1982, its name changed to Latin-American and Caribbean Center on Health Sciences Information so as to better express its dedication to the strengthening and expansion of the flow of scientific and technical health information across the region, but kept the acronym.

Networking, based on decentralization, on the development of local capacities, on sharing information resources, on developing cooperative products and services, on designing common methodologies, has always been the foundation of BIREME's technical cooperation work. It has been like this that the center established itself as an international model that fosters professional education with managerial and technical information with the adoption of information and communication paradigms that best meet local needs.

The main foundations that gave origin and which support the existence of BIREME are following:

- ✓ access to scientific and technical health information is essential for the
 development of health;
- ✓ the need to develop the capacity of Latin American and Caribbean
 countries to operate their sources of scientific-technical health
 information in a cooperative and efficient manner;
- ✓ the need to foster the use and to respond to the demands for scientifictechnical health information from governments, health systems, educational and research institutions.

BIREME, as a specialized center of the Pan-American Health Organization (PAHO)/ World Health Organization (WHO), coordinates and conducts technical cooperation activities on the management of scientific information and knowledge with the aim of strengthening and expanding the flow of scientific health information in Brazil and in other Latin American and Caribbean countries as a key condition for the development of health, including its planning, management, promotion, research, education, and care.

The agreement that supports BIREME is renewed every five years by the members of the National Advisory Committee of the institution (PAHO, Brazilian Ministry of Health, Brazilian Ministry of Education and Culture, Secretary of Health of the State of São Paulo, and Federal University of São Paulo — Unifesp). The latter provides the physical infrastructure necessary for the establishment of the institution.

In 2004 the institution took on the responsibility of becoming a knowledge-based institution.

1.1The Virtual Health Library (VHL)

With the rise and consolidation of the internet as the prevailing means of access to information and communication, BIREME's technical cooperation model evolved,

as of 1998, to build and develop the Virtual Health Library (VHL) as a common space for the convergence of the cooperative work of producers, intermediaries, and users of information. The VHL promotes the development of a network of sources of scientific and technical information with universal access on the internet. For the first time there has been a real possibility of equal access to health information.

To BIREME, the Virtual Health Library is a model for the management of information and knowledge, which includes the cooperation and convergence between institutions, systems, networks, and initiatives of producers, intermediaries, and users in the operation of networks of local, national, regional and international information sources favoring open and universal access.

Today, every country in Latin America and the Caribbean (Region) participates either directly or indirectly in the cooperative products and services offered by the VHL, which includes over 1,000 institutions in more than 30 countries.

The VHL is simulated in a virtual space of the internet formed by a collection or network of health information sources in the Region. Users of different levels and locations can interact and navigate in the space of one or many information sources, regardless of where they are. Information sources are generated, updated, stored and operated on the internet by producers, integrators, and intermediaries, in a decentralized manner, following common methodologies for their integration in the VHL.

The VHL organizes information in a structure that integrates and interconnects reference databases, specialist directories, events and institutions, a catalogue of the information resources available on the internet, collections of full texts with a highlight for the SciELO (*Scientific Electronic Library Online*) collection of scientific journals, selective information dissemination services, information sources to support education and decision-making, news, discussion lists, and support to virtual communities. The space of the VHL is, therefore, a dynamic and decentralized network of information sources based on which it is possible to retrieve and extract information and knowledge to support health decision-making processes.

The Virtual Health Library can be visualized as a distributed base of scientific and technical health knowledge that is saved, organized and stored in electronic format in the countries of the Region, universally accessible on the internet and compatible with international databases.

1.2About the Methodology for Legislation

Methodology for Legislation < http://leyes.bireme.br/leisref/entry.php?lang=en was developed to orient institutions and projects that make the registry of the collection of legal instruments of legislation in health and have as public researches and professionals of health in general, specialized in health legislation or with interest in this type of information.

The Methodology, applied in the Administration Program of Legislation Reference Data, allows the treatment, storage, recovery and availability of information related to normative documents in the BVS - Virtual Library in Health.

All the legal instruments are indexed by the descriptors of the DeCS - Health Sciences Descriptions http://decs.bvs.br/I/homepagei.htm>, from which was made a cut for the Legislation area, the DeCS Legislation.

Characteristics of the general structure:

With the purpose of allowing the navigation among the registries of related legal instruments, are registered as hypertext links the following data:

- Amendments to the Act
- Acts Relationship
- Regulation of the Legislative Act
- Revocation of the Legislative Act

When registering the electronic address of the full text of the instrument in the corresponding registry, the users can accede to this text, in addition to the referential data. It is possible also to make the indexing of articles in the case of Constitutions and Codes.

The Methodology was oriented to the use of controlled tables that help in the normalization of the data entry.

2 Introduction

The LEYES database, coordinated by the Area of Strategic Health Development (SHD/OPS-Washington) and BIREME (Latin American and Caribbean Center on Health Sciences Information), contains bibliographic references of the health basic effective legislation in the countries of Latin America and of the Caribbean Region of English language.

At the present time, the most part of the information of the LEYES database is extracted of the registries of Global Legal Information Network (GLIN) coordinated by the Division of Hispanic Law of the United States Library of Congress; Cooperating Centers from several countries of Latin America and Caribbean Region contribute to the database too. When new Cooperator Centers start the collaboration, they will produce the database from their respective countries. BIREME acts as Coordinating Center of LEYES.

The Cooperating Centers have the responsibility to look for, to analyze and to process the legal norms produced in the country with base in their level (national, state/provincial, municipal) and their subject matter content. The focal point of the LEYES Regional base is preferably the national legislation, but the state/provincial and municipal legislation also can consist and be recovered.

As the search and document selection functions for LEYES database are decentralized, it is necessary to have a Legal Norms Selection Guidelines, which give directions in the selection of the material to be entered in the base and establishes common criteria of selection and classification to guarantee the integrity and the compatibility of the registries of the database. The Guidelines do not try to teach cataloguing. To the cataloguing will be adopted the *Anglo-American Cataloguing Rules 2 (AACR-2)*. It is not a manual of indexation neither a guide for the operation of a database.

The Methodology for Legislation

http://leyes.bireme.br/leisref/entry.php?lang=en allows the creation of national databases and the feeding of the regional LEYES database. All of then follow a common methodology.

The presented selection criteria in this guide probably do not solve all the doubts that can arise in the moment of the decision. If, after analyzing all the decision-making elements, even the consultation to specialists, the doubt persists, the indexing person will have to decide on the inclusion of the legal norm.

Like all of the components of Methodology for Legislation, these Guidelines will be improved with the commentaries and suggestions of all people that participate in the cooperative effort of the feeding of the LEYES database, so that a high degree of optimization is reached.

3 Coverage of the database

LEYES database contemplate the following legal norms: health/sanitary codes, laws, decrees, decrees-laws, regulations and/or their equivalent denominations. It also includes constitutional dispositions referred to the health and connected aspects with it, and international treaties (multilaterals/bilateral) ratified by the country.

3.1Subject matter coverage

LEYES contemplate health in their ample concept and multisectorial connotation. That is, "like a physical, mental and social complete well-being state, and not only the absence of affections or diseases". (Constitution and the World Health Organization, Basic Principles).

It must be considered that the community of users of the LEYES database includes decision makers, managers and professionals not only of the health area, but of those that contribute to the profit of health area like human right and the integral part of the process of economic and social development. In our days, the utility of the database is increased when allowing making the following of the norm that the

countries have emitted for the profit of the Objectives of Development of the Millennium.

In general terms, the subject matter coverage of LEYES is in Category SP9 (Health Law) of DeCS - Health Sciences Descriptors, controlled vocabulary that helps the documentalist in the analysis of the content of the legal norms that will be entered, as well as in the later recovery of the same. So whenever the content can be described using one or more of the descriptors of Category SP9 of DeCS, the same one must to be considered for inclusion in LEYES.

DeCS includes a translation to the Portuguese and Spanish of the *Medical Subject Headings (MeSH)*, produced by the U.S. National Library of Medicine, with an extension for the areas of Public Health and Homeopathy. Category SP9 (Health Law), developed for the area of Legislation, is presented in Annex.

The expansion for the Public Health area was made mainly to answer to the necessities of the Specialized Centers and Programs of the Pan American Health Organization of the areas in which the legislation is applied to the thematic ones developed by those institutions. In Category SP9 were incorporated subjects like: Administration and Planning in Health, Delivery of Health Care, Epidemiology and Biometry, Demography, Environmental Health, Nutrition, Health Law, etc.

The limits for the subject matter coverage of LEYES are ample and, therefore, it must to incorporate all those aspects that talk about health in the context of WHO. Must be considered legal norms important to the elimination of the health inequalities, like, for example, those that create programs of elimination of the poverty with health components, or those that establish rules for the international interchange of goods, products and services of health, for example.

3.2Chronological coverage

Includes the legislation produced as from 1978, processing preferentially more recent material to contribute for the actualization of the database, with exception of the Constitutions, Codes and General Laws of Health of which promulgation is previous to that date. The national or thematic databases of the LEYES System will

be able to include documents of previous dates, in agreement to the own selection criteria.

3.3Geographic coverage

LEYES includes legislation promulgated in the countries of Latin America and the Caribbean of English speech, with base in their level (national, state/provincial, municipal). The focal point of the LEYES Regional base is preferably the national legislation, but the state/provincial and municipal legislation also can consist and be recovered.

3.4Language coverage

The index is produced in Spanish for the legislation of Latin America and in English for the Caribbean Region of English language. The vocabulary of the system is trilingue (portuguese/spanish/english) and the documents can be indexed and recovered by any of the three languages.

4 Select criteria for subject matter

As a general rule of selection, the legal norms are considered for inclusion in LEYES in agreement with the subject matter areas and are indexed in agreement with Category SP9 of DeCS (annex).

5 Bibliographic references

- 1. ATIENZA, Cecília Andreotti. *Documentação jurídica*: introdução à análise e indexação de atos legais. Rio de Janeiro: Achiemé, 1979. 265 p.
- 2. BIREME. *Health Sciences Descriptors*. São Paulo, 2004 [cited 2004-02-17T10:06]. Available from internet: http://decs.bvs.br/I/homepagei.htm>.
- 3. BIREME. *Guia de seleção de documentos para a base de dados LILACS*. São Paulo, 2001. 20 p.

6 Glossary

- Analytical. Part of a document, such as the article of a periodical or the chapter of a book.
- Analytical Level. Bibliographic description of part of a document.
 See also Analytical.
- Application. Program used to execute tasks in connection with an application, such as the creation or edition of texts, drawings, animations, layout, etc. E.g.: text processor, database manager, Internet browser, etc.
- Backup. Procedure used to duplicate one or more files and/or directories in another storing device (tape or disc), thus producing a backup copy that may be restored in the event of accidental deletion or physical damage to the original data.
- Bibliographic Database. Electronic version of a catalog or bibliographic index.

- Bibliographic Description. Description of a bibliographic item by using attributes such as author, title, edition, size, etc.
- Browser. Internet page navigator, such as Internet Explorer and Netscape Navigator.
- Controlled or structured vocabulary. Colection of related terms, organized according to a methodology, in order to facilitate the access to the information previously indexed with those terms.
- Cooperating Center. Institution that participates in the VHL and/or contributes bibliographic records to Bireme.
- Database. Collection of data that are structured to be easily accessed and handled. It is formed by units called records whose attributes are represented by fields. For example, in a file called "customer base", each customer is a record, with several fields such as "NAME", "CUSTOMER CODE", "TELEPHONE" etc.
- DeCS Server. Application developed by Bireme using the IsisScript language to manage the database of health descriptors (DeCS).
- Descriptor. Embodies a concept accepted in a controlled vocabulary (like a thesaurus.)
- Electronic Format. Any form of storage, retrieval or presentation of information that may be transmitted on-line or recorded in magnetic or optical media.
- Field. See Database.
- File. In computing, a set of data that may be saved into some type of storing device. The data files are created by applications, such as a text processor for example.

- Glossary. Vocabulary for specific or controlled use, used in publications to clarify the meaning of technical or restricted terms which are not widely used.
- Guide. Defines the processes needed for the production of a source of information or phases of a methodology.
- Indexing. Procedure to identify and describe the content of a document with terms that reflect the corresponding subject matters to allow the document to be retrieved later.
- Manual. Set of steps and operations, whether automatic or manual, required to provide users with instructions on a certain application, program or methodology.
- Methodology. Set of rules and conventions used to standardize a process or the production of a source of information.
- National Coordinating Center. Institution that cooperates with the VHL and whose primary role is the coordination of a region's cooperating centers.
- PDF. File format developed by Adobe whose objective is to maintain the presentation format of a document designed for printing when this document is stored in digital media.
- PubMed. Service of the National Library of Medicine that includes over 15 million citations from MEDLINE and other life science journals for biomedical articles back to the 1950s. PubMed includes links to full text articles and other related resources.
- SGML. Metalanguage standard of the ISO (International Organization for Standardization) used for the definition of languages of marking of electronic texts, making possible the interchange and the

distribution of documents in the most varied formats, from one same source of data.

- TCP/IP Protocol. Standard that defines the method of communication between digital equipment. It employs a single number of identification.
- Technical Cooperation. Exchange between developing countries or between developing countries and developed countries to enable cooperation in certain areas, such as the exchange of specialists and faculty members, development or transfer of technology, exchange of information, exchange of information and experiences to improve sanitary conditions.
- Template. File which contains the basic definition of the type of document that will be used, with style, predefined text, etc.
- Thesaurus. Structured set of vocabulary that points at hierarchical and associative relationships, in addition to the preference relating to terms (descriptors). See also Controlled Vocabulary.
- UNISIST. Intergovernmental program designed to foster cooperation in the field of scientific and technological knowledge.
- URL. Standard defined for the addressing of data contents via the TCP/IP protocol. Internet browsers use the URL to access Web pages.
- Vancouver Group. Was created in 1978 for the elaboration of articles, including the norms for the bibliographical references and was supported of the National Library.
- XML. Language created to allow the arrangement of data in a structured and hierarchical manner, thus facilitating data communication between different systems and platforms.

XSL. Language created to allow the navigation, selection and capture of data of an XML file.

Annex A

Subject matter areas

- 1. Old Age Assistance
- 2. Handicapped Care
- 3. Health Care
- 4. Medical Care
- 5. Constitution and Bylaws
- 6. Substance Dependence
- 7. Sports
- 8. Health Rights
- 9. Technological Development
- 10. Disasters
- 11. Equipment and Supplies
- 12. Health Statistics
- 13. Ethics, Professional
- 14. Pharmacology
- 15. Death
- 16. Nutrition
- 17. Food
- 18. Population Policy
- 19. Accident Prevention
- 20. Radiation
- 21. Health Manpower
- 22. Reproduction

- 23. Environmental Health
- 24. Oral Health
- 25. Family Health
- 26. Women's Health
- 27. Mental Health
- 28. Occupational Health
- 29. Public Health
- 30. Consumer Product Safety
- 31. Social Security
- 32. Treaties, Conventions and International Agreements
- 33. Venoms
- 34. Social Conditions
- 35. Health Promotion

List by categories

- General
 - ♦ Specific
- 1. OLD AGE ASSISTANCE
 - Geriatrics
 - Agjng Health
 - Health Services for the Aged
 - Homes for the Aged
 - Rehabilitation
- 2. HANDICAPPED CARE
 - Handicapped Advocacy
 - Rehabilitation
 - Sheltered Workshops
 - Architectural Accessibility
- 3. HEALTH CARE
 - ° Epidemiology
 - Health Facilities
 - ♦ Hospitals
 - ♦ Hospitais, Psychiatric
 - ♦ Health Facility Merger
 - **♦** Rehabilitation Centers
 - **♦** Ambulatory Care Facilities
 - **♦** Health Resorts

- **♦** Nursing Homes
- ♦ Facility Design and Construction
- **♦** Accreditation
- **♦** Health Infrastructure
- ♦ Patient Discharge
- Health Services
 - **♦** Ambulances
 - **♦** Mobile Health Units
 - **♦** Emergency Medical Services
 - **♦** Transportation of Patients
 - **♦** Patient Transfer
 - ♦ Sperm Banks
 - ♦ Blood Banks
 - **♦** Eye Banks
 - ♦ Organ Banks
 - **♦** Tissue Banks
 - **♦** Laboratories
 - ♦ Laboratories, Public Health
 - ♦ First Aid
 - ♦ X Rays
 - ♦ Radiology
 - **♦** Facility Regulation and Control
 - **♦** Marketing of Health Services
 - ♦ Medicine, Traditional
- Violence in Health Care
- 4. MEDICAL CARE
 - ° Communicable Disease Control
 - **♦** Communicable Diseases
 - **♦** Population Surveillance
 - **♦** Immunization
 - **♦** Vaccination
 - **♦** Mass Vaccination
 - **♦** Disease Outbreaks
 - **♦** Quarantine
 - **♦** Health Certificate
 - **♦** Acute Disease
 - **♦** Acquired Immunodeficiency Syndrome
 - **♦** Zoonoses
 - ° Methods

- **♦** Anesthesia
- ♦ Blood Transfusion
- **♦** Transplantation
- **♦** Dialysis
- ° Comprehensive Health Care
 - ♦ Primary Health Care
 - **♦** Secondary Health Care
 - ♦ Tertiary Health Care
- ° Disease
 - **♦** Primary Prevention
 - ♦ Diagnosis
 - **♦** Diabetes Mellitus
 - **♦** Neoplasms
 - ♦ Alzheimer's Disease

5. CONSTITUTION AND BYLAWS

- **♦** Constitutions
- **♦** General Health Acts

6. SUBSTANCE DEPENDENCE

- ° Tobacco
 - **♦** Smoking
 - ♦ Health Education
 - **♦** Tobacco Marketing
 - **♦** Rehabilitation
- ° Alcohols
 - ♦ Alcoholism
 - ♦ Health Education
 - **♦** Alcohol Marketing
 - **♦** Alcohol Drinking
 - ♦ Rehabilitation
- Drugs
 - **♦** Substance Abuse
 - ♦ Health Education
 - **♦** Street Drugs
 - **♦** Narcotic Dependence
 - ♦ Drug and Narcotic Control
 - **♦** Rehabilitation
 - ♦ Drug Marketing

7. SPORTS

° Sports Medicine

- Doping in Sports
- Recreation
 - **♦** Recreational Zones
 - **♦** Camping
 - **♦** Public Facilities
 - **♦** Sanitation

8. HEALTH RIGHTS

- Consumer Advocacy
- Patient Advocacy
- ° Insanity Defense
- ° Right to Die
- ° Child Advocacy
- Women's Rights
- Aged Rights
- Handicapped Advocacy
- Human Rights
- Criminal Law

9. TECHNOLOGICAL DEVELOPMENT

- Technology Import
- Technology Transfer
- ° Patents
- Equipment Safety
- Information Systems

10. DISASTERS

- Natural Disasters
- ° ManMade Disasters
- Disaster Recovery
- Disaster Sanitation

11. EQUIPMENT AND SUPPLIES

- Surgical Instruments
- Surgical Equipment
- Dental Instruments
- Technology Control
- Equipment Safety
- Equipment and Supplies, Hospital

12. HEALTH STATISTICS

- Medical Informatics
 - **♦** Statistics

- **♦** Hospital Statistics
- **♦** Health Services
- Demographic Statistics
 - **♦** Demography
 - **♦** Vital Statistics
 - ♦ Rates, Ratios and Proportions

13. ETHICS, PROFESSIONAL

- ° Bioethics
- ° Research
- Confidentiality
- Physician-Patient Relations
- Health Certificate
- Medical Records
- Advertising
- Malpractice
- ° Organizational Affiliation

14. PHARMACOLOGY

- Cosmetics
- Drug and Narcotic Control
- Policy Making
- Drug Marketing
- Drug Industry
- ° Drugs, Investigational
- Pharmacy Administration

15. DEATH

- ° Cause of Death
- ° Euthanasia
- ° Brain Death
- ° Forensic Medicine
- Right to Die
- Autopsy
- Cadaver
- Mortuary Practice

16. NUTRITION

- Food, Fortified
- Infant Nutrition
- ° Breast Feeding
- ° Diet

- Food Services
- Dietary Services

17. FOOD

- Food Contamination
- Food Additives
- ° Food Preservation
- Food Microbiology
- ° Food Production
- Food Inspection
- Food Marketing
- ° Publicity Regulation
- Hazardous Waste
- ° Animal Feed
- ° Abattoirs
- Public Health Veterinary

18. POPULATION POLICY

- Family Planning
- Family Planning Programmes

19. ACCIDENT PREVENTION

- Transit Safety
- Automobile Driver Examination
- Accidents
- Accidents, Aviation
- ° Accidents, Traffic
- ° Firearms

20. RADIATION

- Radiation Protection
- Radioactive Pollution
- Background Radiation
- Radioactive Waste
- Hazardous Waste
- ° Radiation, Non-ionizing
- Nuclear Energy
- ° X-Rays

21. HEALTH MANPOWER

- Professional Practice
- Homeopathy
- Allopathy

- Working Conditions
- Personnel Recruitment
- Staff Development
 - ♦ Health Education
 - **♦** Diffusion
 - **♦** Training
 - **♦** Training Support
 - **♦** Specialism
 - **♦** Teaching Care Integration

22. REPRODUCTION

- Sex Education
- ° Fertilization
- ° Insemination, Artificial
- Fertilization in Vitro
- ° Abortifacient Agents
- Contraceptive Devices
- Sterilization, Sexual
- ° Abortion

23. ENVIRONMENTAL HEALTH

- Water Pollution
- Air Pollution
- ° Soil Pollution
- ° Noise
- Noise, Transportation
- Ecology
- ° Conservation of Natural Resources
- Travel and Tourism
- Sustainable Development
- ° Rural Sanitation
- Urban Sanitation
- Housing
- Drinking Water
 - **♦** Water Supply
 - ♦ Water Supply, Rural
- Environmental Impact
- Waste
 - **♦** Refuse Disposal
 - ♦ Biodegradation

- **♦** Sewage
- **♦** Medical Waste
- ♦ Waste Disposal, Fluid

24. ORAL HEALTH

- Fluoridation
- Preventive Health Services
- Preventive Dentistry
- Dental Health Services
- Dental Therapy

25. FAMILY HEALTH

- Family Practice
- ° Counseling
- Genetic Counseling
- Family Planning
- Premarital Examinations
- Sex Education
- Domestic Violence
- ° Maternal and Child Health
 - **♦** Maternal Health Services
 - **♦** Pregnancy
 - **♦** Prenatal Care
 - **♦** Delivery
 - ♦ Labor
 - **♦** Puerperium
 - **♦** Postnatal Care
 - **♦** Breast Feeding
 - ♦ Infant, Low Birth Weight
 - **♦** Maternity Allocation
 - **♦** Parental Leave
 - ♦ RH-HR Blood-Group System
- ° Child Health
 - **♦** Child Development
 - ♦ Growth
 - ♦ Diarrhea. Infantile
 - **♦** Foster Home Care
 - **♦** Child Abuse
 - ♦ Child Psychology
 - **♦** Child Day Care Centers
 - ♦ Nurseries

- ♦ Child, Abandoned
- **♦** Adoption
- Adolescent Health Services
 - **♦** Adolescence
 - **♦** Adolescent Medicine
 - ♦ Pregnancy in Adolescence
 - ♦ Child Labor
 - **♦** Sexual Violence

26. WOMEN'S HEALTH

- Women's Rights
- Violence Against Women

27. MENTAL HEALTH

- Mental Health Services
 - ♦ Hospitals, Psychiatric
 - **♦** Psychiatric Department, Hospital
 - **♦** Emergency Services, Psychiatric
 - **♦** Community Mental Health Services
 - **♦** Commitment of Mentally III
 - **♦** Patient Discharge
- Child Psychiatry
- Psychosurgery
- Psychological Tests
- Counseling

28. OCCUPATIONAL HEALTH

- Occupational Diseases
- ° Working Conditions
- Accidents, Occupational
- Noise, Occupational
- Occupational Health Services
- Working Environment
 - **♦** Contamination
 - **♦** Security Measures

29. PUBLIC HEALTH

- ° Organization and Administration
 - **♦** Health System
 - ♦ Public administration
 - **♦** Government Agencies
 - ♦ Nongovernmental Organizations
 - **♦** Health Planning

- **♦** Health Plans and Programmes
- **♦** Health Facilities
- **♦** National Strategies
- ♦ Strategies, Planning
- ♦ Regional Health Planning
- ♦ Diagnosis of Health Situation
- Health Economics
 - **♦** Health Care rationing
 - **♦** Financial Support
 - **♦** Financing, Government
 - ♦ Costs and Cost Analysis
 - **♦** Cost Allocation
 - **♦** Cost Control
 - **♦** Health Expenditures
 - **♦** Direct Service Costs
 - **♦** Insurance
 - **♦** Private Medical Coverage
 - **♦** Financial Management
 - **♦** Tariffs
 - ♦ Financing, Health
- Health Services Research
 - **♦** Research Support
- Health Care Reform
- ° Health Care
 - ♦ Basic Health Basket
 - **♦** Privatization
 - ♦ Public-Private Mix
 - **♦** Private Practice
 - **♦** Equity
 - **♦** Efficiency
 - **♦** Targeting
 - **♦** Decentralization
 - **♦** Consumer Participation
 - **♦** Health Service Accessibility

30. CONSUMER PRODUCT SAFETY

- Advertising
 - **♦** Publicity Regulation
 - **♦** Food Labeling
 - **♦** Health Surveillance

♦ Product Surveillance, Post marketing

31. SOCIAL SECURITY

- Financing, Social Security
- Delivery of Health Care
- Insurance, Health
- ° National Health Insurance
- Social Insurance Agencies
- Social Security Schemes
- Social Work
- ° Insurance Benefits
 - **♦** Medical Assistance
 - ♦ Dental Care
 - **♦** Maternity Allocation
 - ♦ Insurance, Major Medical
 - ♦ Insurance, Pharmaceutical Service
 - ♦ Insurance, Dental

32. TREATIES, CONVENTIONS AND INTERNATIONAL AGREEMENTS

- International Agencies
- Regional Agencies
- Integration
- Regional Strategies
- Technical Cooperation

33. VENOMS

- Hazardous Substances
- Marketing of Dangerous Substances
- Pesticides
- Toxicology

34. SOCIAL CONDITIONS

- Social Assistance
- Poverty
 - **♦** Income
 - **♦** Impoverishment
 - **♦** Social Justice
 - **♦** Basic Needs
- Minority Groups
- Violence
- Sustainable Development

35. HEALTH PROMOTION

- ° Health Cities
- ° Life Style
- $^{\circ}$ Qualify of Life
- ° Social Environment
- ° Communication
 - **♦** Health Education

Annex B - Public Health Categories of DeCS

SP PUBLIC HEALTH

SP1 HEALTH ADMINISTRATION AND PLANNING

SP2 DELIVERY OF HEALTH CARE

SP3 DEMOGRAPHY

SP4 ENVIRONMENTAL HEALTH

SP5 EPIDEMIOLOGY AND BIOSTATISTICS

SP6 NUTRITION

SP7 HEALTH SECTOR REFORM

SP8 DISASTERS

SP9 HEALTH LAW

Bioethics SP9.010 **Human Rights** SP9.020 Right To Health SP9.020.010 **Health Advocacy** SP9.020.010.010 Non-Governmental Organizations SP9.020.010.010.010 **Child Advocacy** SP9.020.010.020 Adoption SP9.020.010.020.010 **Parenting** SP9.020.010.020.020 Child Labor SP9.020.010.020.030

Consumer Advocacy	SP9.020.010.030
Patient Advocacy	SP9.020.010.040
Handicapped Advocacy	SP9.020.010.050
Right to Die	SP9.020.010.060
Euthanasia	SP9.020.010.060.010
Suicide, Assisted	SP9.020.010.060.020
Women's Rights	SP9.020.010.070
Aged Rights	SP9.020.010.080
Administrative Law	SP9.030
Public Administration	SP9.030.010
Acts of Administration	SP9.030.010.010
Official Abstract	SP9.030.010.010.010
Deliberations	SP9.030.010.010.020
Official Decisions	SP9.030.010.010.030
Ratification	SP9.030.010.010.040
Official Instructions	SP9.030.010.010.050
Legal Interdiction	SP9.030.010.010.060
Legal Intervention	SP9.030.010.010.070
Summons	SP9.030.010.010.080
Licensure	SP9.030.010.010.090
Automobile Driver Examination	SP9.030.010.010.090.010
Notice	SP9.030.010.010.110
Official Letters	SP9.030.010.010.120
Service Orders	SP9.030.010.010.130
Ordinances	SP9.030.010.010.140
Regulations	SP9.030.010.010.150
Resolutions	SP9.030.010.010.160
Police Power	SP9.030.020
Administrative Police	SP9.030.020.010
Constitutional Law	SP9.040
State	SP9.040.010
Federalism	SP9.040.020
Government	SP9.040.030
Local Government	SP9.040.030.010
State Government	SP9.040.030.020
Federal Government	SP9.040.030.030
Public Power	SP9.040.040
Executive Power	SP9.040.040.010
Legislative Power	SP9.040.040.020
Judicial Power	SP9.040.040.030
International Law	SP9.050
	SP9.050.010
International Agencies International Acts	
	SP9.050.020
International Cooperation	SP9.050.030
Procedural Law	SP9.060
Judicial Decisions	SP9.060.010
Legal Process	SP9.060.020
Insanity Defense	SP9.060.020.010
Sanction	SP9.060.020.020
Tax Law	SP9.070
Taxes	SP9.070.010
Documents	SP9.080

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Accreditation	SP9.080.010
Health Certificate	SP9.080.020
Acts of Constitution	SP9.080.030
Certification	SP9.080.040
Credentialing	SP9.080.050
Bylaws (health Law)	SP9.080.060
Medical Records	SP9.080.070
Internal Rules	SP9.080.080
Enacted Statutes	SP9.090
Codes	SP9.090.010
Legal Consolidation	SP9.090.020
Constitution	SP9.090.030
Decrees	SP9.090.040
Legislative Decree	SP9.090.050
Laws	SP9.090.060
Organic Law	SP9.090.070
Provisional Measures	SP9.090.080
Legislation, Health	SP9.100
Sanitary Code	SP9.100.010
Legislation, Drug	SP9.100.020
Drug and Narcotic Control	SP9.100.020.010
	SP9.100.020.010
Legislation, Pharmacy Legislation, Food	SP9.100.030 SP9.100.040
Disaster Legislation	SP9.100.050
Security Measures	SP9.100.060
Contract Liability	SP9.110
Insurance, Health	SP9.110.010
Liability, Legal	SP9.120
Guilt	SP9.120.010
Malpractice	SP9.120.010.010
Imprudence	SP9.120.010.020
Negligence	SP9.120.010.030
Intent	SP9.120.020
Imputability	SP9.120.030
Elder Abuse	SP9.120.040
Spouse Abuse	SP9.120.050
Child Abuse	SP9.120.060
Child, Abandoned	SP9.120.060.010
Child Abuse, Sexual	SP9.120.060.020
Damage Liability	SP9.120.070
Criminal Liability	SP9.120.080
Criminal Law	SP9.120.080.010
Crime	SP9.120.080.010.010
Abortion, Criminal	SP9.120.080.010.010.010
False Representation	SP9.120.080.010.010.020
Homicide	SP9.120.080.010.010.030
Infanticide	SP9.120.080.010.010.030.01
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Cognity Magazines	
Security Measures	SP9.120.080.010.010.040
Ethics, Professional	SP9.130
Physician-Patient Relations	SP9.130.010
Confidentiality	SP9.130.010.010

Forensic Medicine	SP9.140
Coroners and Medical Examiners	SP9.140.010
Legal Assets	SP9.150
Intellectual Property	SP9.150.010
Copyright	SP9.150.010.010
Registered Trademarks	SP9.150.010.020
Patents	SP9.150.010.030
Technology Transfer	SP9.150.010.040
Health	SP9.150.020
Social Welfare	SP9.160
Social Assistance	SP9.160.010
Social Security	SP9.160.020
Accidents, Occupational	SP9.160.020.010
Retirement	SP9.160.020.020
Maternity Allocation	SP9.160.020.030
Parental Leave	SP9.160.020.040
Pensions	SP9.160.020.050
Familiar Allocations	SP9.160.020.060
SUS (BR)	SP9.160.030
Public Health Administration	SP9.160.030.010
Health Planning Guidelines	SP9.160.030.010.010
Decentralization	SP9.160.030.010.010.010
Comprehensive Health Care	SP9.160.030.010.010.020
Consumer Participation	SP9.160.030.010.010.030
Health Conferences (SUS)	SP9.160.030.010.010.030.01
	0
Health Councils (SUS)	SP9.160.030.010.010.030.02 0
Universal Access to Health Care Services	SP9.160.030.010.010.040
Epidemiologic Surveillance	SP9.160.030.020
Health Surveillance	SP9.160.030.030
Health Services	SP9.170
Justice Administration System	SP9.180
Public Defender Legal Services	SP9.180.010
Public Attorneys	SP9.180.020
Civil Police	SP9.180.030