Special Section on Medical Information and Communication Technology for Disaster Recovery and Human Health Care Support

The IEICE Transactions on Communications announces that it will publish a special section entitled "Special Section on Medical Information and Communication Technology for Disaster Recovery and Human Health Care Support" in October 2012.

We experienced the unprecedented disaster on the 11th of March 2011, and a lot of people have been still faced in difficult problems; some have suffered from physical and psychological diseases and others have been forced to live in uncomfortable shelters and temporary houses. Now, it is the time when we, Information and Communication Technology (ICT) engineers and researchers, should discuss together how to make effective use of ICT for people in such life-critical situations more seriously than ever. On one hand, it is essential to develop medical and health care systems which can maintain their high reliability and high robustness against disasters. However, on the other hand, it is important to prepare systems which can be quickly deployed in case of disasters. For this purpose, a broad technical collaboration is required, ranging from circuitry, through radio propagation, to network layer design being aware of medical applications. Because of this reason, a special section is being planned (scheduled to appear in the October 2012 issue) to promote research and development of Medical ICT for disaster recovery and human health care support.

1. Scope:

This special section aims at timely dissemination of research in these areas related to medical ICT for disaster recovery and human health care support. Possible topics include, but are not limited to:

- Electro-magnetic wave propagation around human body area.
- Wireless control and data gathering of contactless and noninvasive vital sensors.
- PHY, MAC and Network layer techniques for enhancing comfortability and accessability in medical services by wired and wireless.
- Remote healthcare monitoring and wireless medical telemetry and telemedicine services.
- Cloud computing and networking for health care services.
- Location and tracking.
- Applications including medical system in and after disaster, networked therapeutic system.

2. Submission Instructions:

The standard number of pages is 8 for a PAPER and 2 for a LETTER. The maximum number of pages for the initial submission of a LETTER is 4. The page charges are considerably higher for extra pages. Manuscripts should be prepared according to the guideline in the "Information for Authors." The latest version is available at the web site, http://www.ieice.org/eng/shiori/mokuji_cs.html. The term for revising the manuscript after acknowledgement of conditional acceptance for this special section could be shorter than that for regular issues (60 days) because of the tight review schedule.

This special section will accept papers only by electronic submission. Prospective authors are requested to follow carefully the submission process described below.

- 1. Submit a manuscript and electronic source files (TeX/Word files, figures, authors' photos and biography) via the IEICE Web site https://review.ieice.org/regist_e.aspx by January 16, 2012 (Japan Time). Authors should choose the Medical Information and Communication Technology for Disaster Recovery and Human Health Care Support as a "Type of Issue (Section)/Category of Transactions" on the online screen. Do not choose [Regular-EB].
- 2. Send "Copyright Transfer and Page Charge Agreement" and "Confirmation Sheet of Manuscript Registration" by E-mail or postal mail to the following address (guest editor of the special section) by the above due date. We may withdraw the submission if these documents have not been received by the due date, even if the manuscript has been received by electronic submission. For additional guidelines on manuscript preparation, please visit: http://www.ieice.org/eng/shiori/mokuji_cs.html

Send the above documents to:

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3. Special Section Editorial Committee:

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^{*} Please note that if the submitted paper is accepted, all authors, including authors of invited papers, are requested to pay for the page charges covering partial cost of publications. Authors will receive 50 reprints.

^{*} At least one of the authors must be an IEICE member when the manuscript is submitted for review. Invited papers are exceptions. We recommend that authors unaffiliated with IEICE apply for membership. For membership applications, please visit http://www.ieice.org/eng/member/OM-appli.html