Resource Summary Report

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Informatics for Integrating Biology and the Bedside

RRID:SCR_013629
Type: Tool

Proper Citation

Informatics for Integrating Biology and the Bedside (RRID:SCR_013629)

Resource Information

URL: http://www.i2b2.org

Proper Citation: Informatics for Integrating Biology and the Bedside (RRID:SCR_013629)

Description: i2b2 (Informatics for Integrating Biology and the Bedside) is an NIH-funded National Center for Biomedical Computing based at Partners HealthCare System. The i2b2 Center is developing a scalable informatics framework that will enable clinical researchers to use existing clinical data for discovery research and, when combined with IRB-approved genomic data, facilitate the design of targeted therapies for individual patients with diseases having genetic origin. For some resources (e.g. software) the use of the resource requires accepting a specific (e.g. OpenSource) license.

Abbreviations: i2b2

Resource Type: organization portal, data set, data or information resource, portal, software resource, training resource

Keywords: genetic, biology, biomedical, computing, genomic, health, healthcare, informatic, origin, patient, therapy, predoctoral, postdoctoral

Funding: NLM U54LM008748

Availability: Free, Public, Acknowledgement requested

Resource Name: Informatics for Integrating Biology and the Bedside

Resource ID: SCR_013629

Alternate IDs: nif-0000-33133

Record Creation Time: 20220129T080317+0000

Record Last Update: 20250519T203814+0000

Ratings and Alerts

No rating or validation information has been found for Informatics for Integrating Biology and the Bedside.

No alerts have been found for Informatics for Integrating Biology and the Bedside.

Data and Source Information

Source: SciCrunch Registry

Usage and Citation Metrics

We found 27 mentions in open access literature.

Listed below are recent publications. The full list is available at dkNET.

Uebachs M, et al. (2024) SCAview: an Intuitive Visual Approach to the Integrative Analysis of Clinical Data in Spinocerebellar Ataxias. Cerebellum (London, England), 23(3), 887.

Szaflarski JP, et al. (2024) Traumatic Brain Injury Outcomes After Recreational Cannabis Use. Neuropsychiatric disease and treatment, 20, 809.

Katz J, et al. (2022) Increased odds ratio for erectile dysfunction in COVID-19 patients. Journal of endocrinological investigation, 45(4), 859.

Wu H, et al. (2022) A survey on clinical natural language processing in the United Kingdom from 2007 to 2022. NPJ digital medicine, 5(1), 186.

Kenner BJ, et al. (2021) Early Detection of Pancreatic Cancer: Applying Artificial Intelligence to Electronic Health Records. Pancreas, 50(7), 916.

Dagliati A, et al. (2021) Health informatics and EHR to support clinical research in the COVID-19 pandemic: an overview. Briefings in bioinformatics, 22(2), 812.

Sohag MMH, et al. (2021) OMICS approaches in cardiovascular diseases: a mini review. Genomics & informatics, 19(2), e13.

Rossetti SC, et al. (2021) Healthcare Process Modeling to Phenotype Clinician Behaviors for Exploiting the Signal Gain of Clinical Expertise (HPM-ExpertSignals): Development and evaluation of a conceptual framework. Journal of the American Medical Informatics Association : JAMIA, 28(6), 1242.

Nikiema JN, et al. (2021) Aligning an interface terminology to the Logical Observation Identifiers Names and Codes (LOINC®). JAMIA open, 4(2), ooab035.

Capobianco E, et al. (2019) Data-driven clinical decision processes: it's time. Journal of translational medicine, 17(1), 44.

Oleynik M, et al. (2019) Evaluating shallow and deep learning strategies for the 2018 n2c2 shared task on clinical text classification. Journal of the American Medical Informatics Association : JAMIA, 26(11), 1247.

Zhao YS, et al. (2018) Leveraging text skeleton for de-identification of electronic medical records. BMC medical informatics and decision making, 18(Suppl 1), 18.

Satagopam V, et al. (2016) Integration and Visualization of Translational Medicine Data for Better Understanding of Human Diseases. Big data, 4(2), 97.

Murphy SN, et al. (2015) High throughput tools to access images from clinical archives for research. Journal of digital imaging, 28(2), 194.

Liao KP, et al. (2015) Methods to Develop an Electronic Medical Record Phenotype Algorithm to Compare the Risk of Coronary Artery Disease across 3 Chronic Disease Cohorts. PloS one, 10(8), e0136651.

Leung KY, et al. (2015) IT Infrastructure to support the secondary use of routinely acquired clinical imaging data for research. Neuroinformatics, 13(1), 65.

Liao KP, et al. (2015) Development of phenotype algorithms using electronic medical records and incorporating natural language processing. BMJ (Clinical research ed.), 350, h1885.

Wei WQ, et al. (2015) Extracting research-quality phenotypes from electronic health records to support precision medicine. Genome medicine, 7(1), 41.

Scheufele E, et al. (2014) tranSMART: An Open Source Knowledge Management and High Content Data Analytics Platform. AMIA Joint Summits on Translational Science proceedings. AMIA Joint Summits on Translational Science, 2014, 96.

Weiler G, et al. (2014) p-BioSPRE-an information and communication technology framework for transnational biomaterial sharing and access. Ecancermedicalscience, 8, 401.