**Curriculum Vitae for Peder Jest, November 2024**

Born: 04.02.1949

**Education**

• MD June 1975

• ​Specialist - Internal Medicine 1988

• ​Specialist - Geriatric Medicine 1990

• ​Qualified and function as Ass. Professor in Geriatrics at The University of Southern Denmark 1992

**Positions in Medical leadership**

• Hospital Medical Director, Geriatrics/Medical Dept. Rudkøbing 1990-1996 (responsible for implementing the first hospital-based EHR (electronic health record) in DK, 1992)

• Head of Medical Centre, Sygehus Fyn, South Centre, 1996-1997

• Hospital Medical Director/ Exec. Director, Sygehus Fyn, 1997-2007

• Exec. Director, Hospital Medical Director at Odense University Hospital/Svendborg Hospital 1 January 2008 – Sept.2020

**Academic positions**

• Associate professor, University of Southern Denmark, 1987 – 1995, establishment of the field of geriatric studies.

• External censor 2000 -2011 in the e-censor corps, Aalborg University, in the areas of: Informatics and Master degree programmes and the engineering programme: Health Technologies.

**Scholarly activities:**

Approx. 100 publications (peer-reviewed journals, international journals and other publications)

Approx. 200 scholarly lectures and posters.

In later years, focus has been on publications and international lectures on the application and implementation of Health-IT (tele-medicine, sensor technologies) and strategic management in areas connected with Health-IT and Innovation in Healthcare.

Supervisory functions in relation to academic projects in the field of tele-medicine., IT -technology and Innovation.

Supervisor of Ph.D. projects.

**Organisation/Management:**

Experience from professional, scientific as well as organisational work under the auspices of the Danish Medical Association:

Chairman of several boards, Member on several boards, task groups, departmental management, hospital management, management of medical centres, area management, university hospital executive management and other managerial tasks and positions at County or Regional levels.

• Chairman of the interim executive management for the vocational university college in Odense from 1990 until the establishment of UC South (the current provider of healtheducation programmes)

• 1994 -96 Chairman of DSG (Danish Medical Society for Geriatrics). Contributed to the introduction of geriatrics in the plan for medical specialities by Danish Health and MedicineAuthority

• 2002- 07 Chairman of DSKL (Danish Society for Clinical Management). Initiator of the establishment of the society (see [www.DSKL.dk](http://www.dskl.dk)). Member of the board until 2008.

• 2005 Member of the steering committee for Health-IT, a national organisation for the dissemination of knowledge and research, to institutions of further education and public institutions of education

• 2007 -2008 Deputy Chairman for DSKTM. (The Danish Society for Clinical Telemedicine)

• 2007 - 2009 Member of the advisory board for the national Growth Fund (Vækstfond)

• From 2008 member of the board of University College Lillebælt (UC South)

• From 2011 Deputy Chairman for the Danish Association of Heads of Medical Centres and Medical Directors

• From 2011 member of the board of directors for patient@home – A public-privatepartnership research and development project with a 5-year timespan. The project is focused on welfare technologies and has a budget of approx. 22.8 Mill. Euro (DKK 170 mill.) ([www.patientathome.dk](http://www.patientathome.dk))

• From 2013 member of the board of Welfare Tech and from 2016 member of the Chairmanship ([www.welfaretech.dk](http://www.welfaretech.dk))

• From 2014 member of the Advisory Board for a commercialisation incubator in Odense

• From 2015 member of VIBIS (Knowledge center for patient empowerment) expert group, Program Pro.

• From 2016 member of Advisory Board, Health.DK ([Sundhed.dk](http://sundhed.dk))

• From 2016 member of the National Portofolio Steering Committee of Tele -COPD

• From 2016 member of Organizing Committee of Whinn Tele Health

Member of numerous steering committees at local, regional and national levels (Danish Health and Medicines Authority), particularly in the fields of: Health-IT, quality management, development of medical technologies, research, clinical guidelines, pharmaceutical products and collaboration withGeneral Practitioners (GPs).

Particular focus is also put on demographics and epidemiology in relation to elderly medical patients, equality as regards accessibility and treatment in the health systems and also immigrant medicine. Initiator behind the establishment of the Clinic for Performing Arts Medicine.

Specific focus area: Innovation.

Chairman of the Innovation Council at Odense University Hospital (a collaboration between The University of Southern Denmark and Syddansk Sundhedsinnovation (Health Innovation of Southern Denmark)). The Council focuses on the introduction of new medical technologies, collecting evidence concerning the effects of implementing such technologies, and clinical implementation of proven technologies. Initiator of the establishment of CIMT (Centre for Medical Technologies).

Many years of collaboration and cooperation in projects, development assignments and operations solutions under OPI, particularly with private enterprises in the areas of IT and development of technology.

Peder is the idea maker and the initiator of the Danish Healthdrone project, supported by the danisk innovation Council. Member of the advisory board during the project period.

**Jest-Consulting**

Peder established the company in May 2020. We are supervising smaller up-starts companies, especially companies working with Health technologies, IT, digitalizing functions and devices, diagnostic systems, laboratory functions, hospital hygiene devices, AI, Robots and Drones, use of health data, apps etc.

We have cooperated with big international business and legal firms in reports to The Danish Regions and the Danish Life Science Cluster, the Health Ministry and the Ministry for Industri, Business and Financial Affairs. We have an ongoing and tight cooperation with big German and Swedish and Danish innovative companies.

We have given lectures and keynotes at the national and international level. We are member of several advisory boards. We still work with development and research, especially in the use of robots and drones together with The Tech Faculty at The University of Southern Denmark, The Danish Institute of Technology and Hospitals in Denmark. We focuse on different private partners trying to establish commen use of tool drones, both in Denmark, Australia and Brazil.

We have until now performed 19 keynotes and presentations, published 19 chronicles and articles in Health & Innovation magazines and written 75 columns in newspapers.

Take a look at some of the activities:

Peder Jest. Chairman, Whinn Conf. 2024.Safe sector transitions: Medication upon admission and discharge. Danish Life Science Cluster. Odense. 31.10.2024.

Peder Jest. Kronik: Reformer kommer og går – Patienter og personale består. Dagens Medicin. 31.05.2024

Peder Jest. Kronik: Eventyr kan ende sørgeligt uden politisk strategi. Om Sundhedsdroner i Danmark. Sundhedsmonitor. 19.02.2024.

Peder Jest. Presentation: The Funen adventure of Healthdrones. Danish Life Science Cluster, Svendborg 10.01.2024.

Peder Jest. Kronik: Nej, jeg er ikke ude efter den praktiserende læge- Sundhedsmonitor 15.12.2023.

Peder jest. Kronik: Ledelsen i sundhedsvæsenet bør sammensættes andeledes. Del 2. 27.11.2023.

Peder Jest. Kronik: Ledelsen i sundhedsvæsenet bør sammensættes anderledes. Del 1. KronikSundhedsmonitor 20.11.2023.

Peder Jest. Kronik: Menneskers adfærd er en overset faktor i sundhedsplanlægning. Sundhedsmonitor, 14. 08.2023.  
  
Peder Jest. Kronik  :Det tyske spørgsmål. Hvorfor virker den danske innovation ikke? Sundhedsmonitor, 10.07. 2023  
  
Peder Jest:  Workshop om Fremskudt Diagnostik. Region Nord og Danske Regioner, Odeon, Odense 30.05. 2023.  
  
Peder Jest. Interview Medicinsk tidsskrift 5.o2.23. Praktiserende læger bør have samme journalsystem som hospitalerne.  
  
Peder Jest. Kronik. EPJ: Løkke tager fejl. Igen . Sundhedsmonitor 23.01.23. Også publiceret i ny udgave i tillæg i Politiken. 2023.  
  
Peder Jest, Kronik: Sundhedsinnovation skal være konkret, ikke strategisk. Sundhedsmonitor , 28.11.22 2022.  
  
Peder Jest. Hvorfor planlægger vi ikke teknologifremtiden på sundhedsområdet mere risikofyldt?  Gæsteklumme.  
CareNet. 10.11.22  
  
Peder jest. Oplæg. Opsamling og take outs. Paneldiskussion efterfølgende. E-Sundhedsobservatoriets Årskonference: 13.-14.10.22.  
  
Peder Jest.Kronik, medunderskriver: politikerne skal holde deres løfte, hvis Danmarks droneindustri skal have luft under vingerne. Berlingske Tidende 3. april 2023.  
  
Peder Jest. Kronik. Tag ældrepandemien alvorligt. Den kan vi ikke stoppe. Sundhedsmonitor, 12.09. 2022.   
  
Mindeord Mogens Felsby, Ugeskriftet no. 12/2022  
  
Peder Jest. Digitaliseringen kommer- men hvad betyder det?, Interview, Radiografen. No.4-2022. Juni.  
  
Peder Jest. Kronik. Flere patienter er ikke den største demografiske trussel, det er mangelen på personale. Sundhedsmonitor 9.05.2022  
  
  
Peder Jest. Din næste patientjournal er en video. Tidsskrift for  dansk sundhedsvæsen. 98. Årgang. Nr. 1. 2022. P 45-58.  
  
Peder Jest. Den digitale patient er klar til virtuel behandling og opfølgning. Foredrag. Også publiceret i Regionens hjemmeside. Digital Patientinddragelse, Region Sjælland. 5. Maj 2022.   
  
Peder Jest. Perspektiver fra sundhedsvæsenet. Foredrag og paneldeltager. Signaturprojektkonference om Kunstig intelligens, Arrangeret af Center for Offentlig Innovation. Statens Museum for Kunst . 25.10 2021.  Kbh.  
  
P. Jest, Teknologi og personale ved borgere med kroniske tilstande.Møde , Oxymoron og Novartis. Sundhed og ulighed - ved kroniske tilstande. Kbh. 19.01.22.   
  
Peder jest: Strategy of  Leadership in Healthcare, Focus on Innovation. Seminar, IDA/ SDSS, The University of Aalborg, 16.06.21.  
  
Peder Jest: The burning Platform and the use of innovation as a strategy for cooperation between non profit organisations and private companies. Tyskland, 25.04.21.  Keynote, AOK-Plus, Die Gesundheitskasse für Sachsen und Thüringen. Zukunftswerkstatt Sachsen.  
  
  
IFBLS/DEKS 2021, 25.08.2021, Copenhagen. Donated and supported by Roche Diagnostics: Peder Jest. Keynote: Diagnostics - The Heart of Healthcare.   
  
Geriatric Scientific Research Retreat, the University of Southern Denmark , Svanninge Bakker. 04.06.2021. Peder Jest: The future Healthcare System, Challenges, Solutions and Visions. Focus on the need of innovation.  
  
  
. Peder Jest: The use of video consultations in primary care and in Immigration Clinics. Chairman of the session. Whinn 2020 25.11.20. The research Park. Odense  
  
OPI-Summit 2020. Healthy growth.10.09.20.  Odense, Odeon. Peder Jest: Public-Private Cooperation in Healthcare. Challenges - but great opportunities, too.  
  
  
Altinget. 11.11.2021. Chronicle by Peder Jest and Karen Andersen-Ranberg, Prof in Geriatric medicine: Local hospitals do not solve it - the elderly citizens still left in the lurch.  
  
Peder Jest: Perspectives on a futuristic Electronic Health Care Record,  Tidsskrift for ledelse i sundhedsvæsenet. August 2021.  
  
Monthly Columnist, mainly on Healthcare and Sustainability issues. Fyns Amtsavis, June 2020-. Until now 50 columns.  
  
Rotary, Fåborg. 21.09202. Peder Jest: Healthcare technology in the future and the need of health innovation  
  
  
Rotary, Odense, 28.10. 2021. Peder Jest: The Need of Innovation in future Health Technology.  
  
København. Statens Museum for Kunst. 25.10.2021. AI data, Conference on Signatur projects in Denmark. Peder Jest: Executive Panel participant.   
  
Vejle, AI Innovation House. 01.11.2021. DigitalLead: AI and Health data. Favorite Drink or Explosive Cocktail? Peder Jest, keynote. AI- A revolution in Healthcare?  
  
  
PodcastRoche, Publication December 2020. What is the Diagnose? The Use of Drones and Point of Care Test devices in Healthcare. Peder jest and Jakob Riis, CEO, Falck.  
  
Folkeuniversitetet. Svendborg. 09.09.2020. Lecture by Peder Jest: The Use of New Technology in Healthcare. 

**Contact information**

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**List of publications**

**Peder Jest. MD**

**A. Peer reviewed publications**

1. Jest P. ***Human albumin of placental origin tested for tolerance***. Acta MedicaScandinavica 1977;202:409—11.1.

2. Hemmingsen L, Jensen H, Jest P, Skaarup P.. ***The diagnostic value of protein çlearances in rejection of human renal allografts***. Acta Medica Scandinavica1978;203:107—12.

3. Voetmann C, Jest P. ***Myastenisk reaktion fremkaldt af lithiumkarbonatbehandling***.(*Induced* m*yasthenic reaction via treatment with lithium carbonate*) Ugeskrift for Læger 1978;140:2375—76.

4. Hilden T et al (Danish Multi Center Study Organizing Doctor on collaboration Medical Dep Jest P???) ***Emergency treatment of servere hypertension Comparison of chlorpromazine, diazoxide and dihydralazine***. Acta Medica Scandinavica 1 980 ;280:473—80.

5. Mellemgård K et al Danish Multi Center Study Organizing Doctor on CollaborationDep Jest P. ***Verapamil in the treatment of patients with myocardial infarction. Calcium antagonism in cardiovascular disease***. Excerpta Medica 1981 ;301—9. ISBN [90211994720](tel:90211994720).

6. Nielsen PE et al Danish Multicenter Study Organizing Doctor on Collaborating Dep.Jest P ***Behandling af akut svær hypertension bedømt i en multicenterundersøgelse***. (*Multi centre study for assessing treatment of acute severe hypertension)*Ugeskrift for Læger 1981,[143 1451—57](tel:143%201451%E2%80%9457)

7. Andersen PE jr, Heslet L, Jest P ***The chest radiograph in chronic obstructive lung disease compared with measurements of single—breath nitrogen washout and spirometry.*** Clinical Radiology Journal 198233::51 —5.

8. Kvetny J, Orthman-Brask H, Frederiksen PK, Jest P, Jensen E, Jacobsen JG. ***Hypercalcaemia due to primary hyperparathyroidism or malignant disease Evaluated by means of biochemical tests and the steroid suppression test***Acta Medica Scandinavica 1982:212:163—6.

9. Andersen M, Andreasen E, Jest P, Larsen S. ***Successful pregnancy in a woman with severe congenital 21 —hydroxylase deficiency of the salt loosing type.***Pediatric and Adolescent Gynaecology 1983:1:47—52.

10. Hørder M, Hansen LK, Lytken- Larsen M, Jest P, Klitgaard NA, Ulrich M, Strate M. ***Hjemmemåling af blodsukker. Overvejelser før indførelse af en test som led i behandling***. (*At-home measuring of blood glucose levels. Deliberations prior to introduction of a test as an instrument for treatment*) Ugeskrift for Læger1984;146:2385—89.

11. Lytken-Larsen M, Klitgaard NA, Jest P, Hørder M, Strate M, Hansen LP, Ulrich M. ***Hjemmemåling at blodsukker. En kvalitetsvurdering***.(*At-home measuring of blood glucose levels. Quality assessment)* Ugeskrift for Læger 1984;146:2394—97.

12. Krogsgaard AR et al. Danish multicenter study, organizing doctor on coll. department. Jest P. ***Cerebral symptoms and blood pressure during parental administration of chlorpromazine, diazoxide and dihydralazine. Danish Multicenter study on acute severe hypertension***. Acta Medica Scandinavica1984; suppl. 678:51—60.

13. The Danish Study Groups on verapamil in acute myocardial infarction. Co—investigation at participating centre. Jest P. ***Verapamil in acute myocardial infarction.*** European Heart Journal 1984;5:516—28.

14. The Danish Study Group on verapamil in acute myocardial infarction Co—investigation at participating centre. Jest P ***Abrupt withdrawal of verapamil in ischaemic heart disease***European Heart Journal 1984,5 529—32

15. Lytken-Larsen M, Klitgaard NA, Jest P, Hørder M, Strate M, Hansen LP, Ulrich M. ***Hjemmemåling af blodsukker. En kvalitetsvurdering*** (udvalgt til “månedens artikel”).(*At-home measuring of blood glucose. Quality assessment – ”Article of the Month”))* Nord Med 1984, [99 284—87](tel:99%20284%E2%80%9487)

16. Pedersen KE, Rokkedal Nielsen J, Klitgaard NA, Jest P, Johansen T. ***Lymphocyte sodium efflux in normotensive and borderline hypertensive subjects with and without heredity forhypertension.*** Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986; 46 (suppl 180):101—103.

17. Rokkedal Nielsen J, Johansen T, Jest P, Pedersen KE, Klitgaard NA ***Cell membrane disturbance and the pathogenesis of essential hypertension several hypotheses*** Scandinavian Journal of Clinical and Laboratory lnvestigation,1986;46 Suppi 180:7—10.

18. Jest P. ***lontransport og hypertension*** (*Ion transport and hypertension)*. Ugeskrift for Læger 1985;147:3498—99.

19. Jest P, Pedersen KE, Klitgaard NA, Arentoft A, Rokkedal Nielsen, J. ***Lymphocyte sodiurn concentration and blood pressure during sodium depletion in healthy normotensives***. Journal of Hypertension 1985; suppl 3:32.

20. Jest P. ***Det almindelige salt***.(*Ordinary salt)* Bibliotek for læger (Library for Doctors)1986;178: 14—23.

21. Hansen LP, Ulrich M, Lytken-Larsen M, Klitgaard NA, Jest P, Strate M, HørderM. ***Hjemmemåling af blodsukker hos en uselekteret gruppe børn med diabetes***.(*At-home measuring of blood glucose in a randomly chosen group of children diagnosed with diabetes)*Ugeskrift for Læger 1986,[148 944—47](tel:148%20944%E2%80%9447)

22. Pedersen K, Jest P, Klitgaard NA, Rokkedal Nielsen J, Johansen T. ***Effect of oral salt loading on blood pressure and lymphocyte sodium metabolism in borderline hypertension.*** Acta Medica Scandinavica, 1.987; suppi 714:81—85.

23. Jest P, Pedersen KE, Klitgaard NA, Rokkedal Nielsen J, Arentoft A, Johansen T.***Sodium homeostasis in lymphocytes and blood pressure alterations before and during salt restriction in normotensives and in essentiat hypertensives***. Acta Medica Scandinavica 1987;suppl. 714:75—79. . . . . .

24. Jest P, Pedersen KE, Klitgaard NA, Arentoft A, Rokkedal Nielsen J. ***Cell. membrane handling of sodium ifl lymphocytes during salt restrictibn in normotensives***. Scandinavian Journal of Clinical and Laboratory lnvestigation1987;47:813—18. . . .

25. Pedersen, KE, Klitgaard NA, Jest P ***Volume, sodium content and sodium effiux in human mononucleated cells Characteristics and methodological problems***Scandinavian Journal of Clinical and Laboratory lnvestigation, 1987:47:801—11. .

26. NcNair A, Krogsgaard AR, Hilden T, Nielsen PG Org doctor on call dep. Jest P ***Severe hypertension with cerebral symptoms treated with furosemide, fractionated diaxoside or dihydralazine***. Danish Multicenter Study Acta MedicaScandinavica 1986,[220 15—23](tel:220%2015%E2%80%9423)

27. Krogsgaard AR, McNair A, Hilden T, Nielsen PG. Org. doctor coll. dep. Jest P.***Reversibility of cerebral symptoms in severe hypertension in relation to acute antihypertensive therapy*** Danish Multicenter Study Acta Medica Scandinavica1986,[220 25—31](tel:220%2025%E2%80%9431)

28. Jest P, Pedersen KE, Klitgaard NA, Thomsen N, Kjaer K, Simonsen E, Jacobsen JG. ***Lymphocytic sodium and potassium homeostasis in Bartter’s Syndrome. Acta Endocrinologica*** i 989;1 21:61—65. . . . .

29. Jest P, Pedersen KE, Klitgaard NA, Kjaer K, Thomsen Nr Simonsen E. ***Angiotensin— converting enzyme inhibitor as a therapeutic principle in Bartter’s syndrome***. European Journal of Clinical Pharrnacology 19.1 ;41 :303—305.

30. Den danske studiegruppe over verapamil ved akut myocardiefinfarkt. Organizing doctor on collaberating dep. Jest P. ***Verapamilbehandling forbedrer prognosen efter et akut myokardieinfarkt.****(Verapimil treatment improves prognosis after actute myocardial infarction)* Ugeskrift for Læger 1 992;1 54:398—404.

31. Jest P. ***Leadership in a time of change***. Public Services Summit.December 2010, Oslo, Norway

32. A. D. Sorknæs, H. Madsen, J. Hallas, P.Jest, M.Hansen-Nord .***Nurse tele-consultations with discharged COPD patients reduce early readmissions – An inverventional study.*** Clinical Respiratory Journal..2011;5.1.26-34

33. P.Jest. ***Elektronisk medicinordination. Dobbeltkontrol dobbelt så godt?***(*Electronic dispensing of medicine. Is twice the control twice as good?)*Ugeskrift for Læger 2011; 173:561. editorial

34. Sorknæs A.D., Bech M., Madsen H., Titlestad I.L., Hounsgaard L., Hansen-Nord M., Jest P., Olesen F., Lauridsen J., Østergaard B. ***The effect of real-time teleconsultations between hospitalbased nurses and patients with severe COPD discharged after an exacerbation.*** Journal of Telemedicine & telecare. 2013;19.8.1-9

**B. Abstracts, published in international publications**

1. Jest P, Lytken-Larsen M, Kvetny J. ***Alterations in hormones ifl anorexia nervosa***. Acta Medica Scandinavica, 1984;685 (suppl):56.

2. Pedersen C, Lytken-Larsen M, Jest P, Mogensen E. ***Clinical evaluation of soluble insulin administration by Novo Pen combined with injections of intermediate—açting insulin before dinner or at bed time.*** Diabetes Research and ClinicalPractice, 1985: Suppl 1:440.

3. Jest P, Pedersen KE, Klitgaard NA, Nielsen JR, Johansen T, ArentoftA. ***Sodium pump activity in lymphocytes during salt restriction*** Scandinavian Journal ofClinical and Laboratory lnvestigation, 1986,46 Suppl. 86150

4. Jest P, Pedersen KE, Klitgaard NA, Nielsen Rokkedal J, Johansen T, Arentoft A ***Alterations in lymphocytic sodium transport in essential hypertension during prolonged salt restriction*** Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986,446, Suppl 86 150

5. Jest P, Pedersen KE, Klitgaard NA, Kjær K, Nielsen Rokkedal J, Johansen T, Lytken-Larsen M ***Lymphocytic sodium homeostasis in insulin dependent diabetes mellitus*** Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986,46 Suppl 86 151

6. Jest P, Pedersen KE, Klitgaard NA, Kjaer K, Rokkedal Nielsen J, Johansen T, Lytken-Larsen M ***Cell membrane handling of sodium in lymphocytes in insulin dependent diabetes mellitus of short duration*** Diabetologia 1986,29 412A

7. Kjaer K, Jest P, Pedersen KE, Klitgaard NA, Thomsen N, Jacobsen JE, Simonsen E ***Lymphocyte sodium and potassium homeostasis in Bartter’s Syndrome***Scandinavian Journal of Clinical and Laboratory lnvestigation,1986, 46 Suppl. 86 150

8. Pedersen KE, Jest P, Klitgaard NA, Rokkeldal Nielsen J, Johansen T ***Effect of oral salt loading on blood pressure and lymphocyte in borderline hypertension***Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986; Suppl 86:149.

9. Klitgaard NA, Pedérsen KE, Jest P***. Methodological aspects of the determination of volume, sodium content and sodium effect of human mononucleated cells***. Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986:46 Suppl 86:152.

10. Johansen T, Nielsen JR, Poulsgaard C, Knudsen T, Møller B, Vaag A, Pedersen KE, Klitgaard NA, Jest P. ***Na÷-K÷ pump activity in leucocytes from offspring of essential hypertensive patients*** Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986, 46 Suppl 86 148

11. Pedersen KE, Jest P, Klitgaard Na, Nielsen JR, Johansen T. ***Ion transport abnormalities in essential hypertension***. Scandinavian Journal of Clinical and Laboratory lnvestigation, 1986; 46 Suppl. 86:96.

12. Jest P, Pedersen KE, Klitgaard NA, Kjaer K, Nielsen JR, Larsen ML. ***Cell membrane handling of sodium in lymphocytes in IDDM***. Acta Clinica Belgica1988; 43 (Suppl12):124.

13. Pedersen KE, Nielsen JR, Klitgaard NA, Johansen T, Jest P. ***Cellular sodium handling in normotensive and borderline hypertensive subjects predisposed to hypertension***

14. European Meeting on hypertension, Milano. ***Ricerca scientifical et educazione Permanente 1985***; Suppl. 49 Abstract no. 414

15. Jest P, Jakobsen S, Wedeby IM. ***Local Clinical databases in EPHR***. Nordic Congress of Gerontology, 1996.

16. Tynan L, Jest P, Bernstein K. ***Four years experience with electronic patient records. User participation in development, validation and dissemination***. EPRIM. Rotterdam 1998.

17. Bernstein K, Jensen HB, Jest P, Tynan L. ***Electronic Patient Record: A part of health care network. Edi, internet and multimedia communication in the European project CoCo***. EPRIM.98. Rotterdam.

18. Tynan L, Jest P. ***Experiences with implementing a casemix-system in 3 different hospital units in The Hospital of Funen***. PCS, Odense 1999.

19. Jest P, Tynan L. ***lmproving Quality in Health Care by implementing an electronic Health Record in 3 cooperating units***. 1999. Tehre, London 1999.

20. Jest P, Tynan L. Bernstein K, Jakobsen S. ***Electronic communication between providers of primary and secondary care — a clear advantage for the geriatric patient.*** Nordic Congress of Gerontology 2000.

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