Simulating medical practices: Analysing the construction and use of a gynaecological simulator'
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My research at the IAS-STS is part of a project that is studying the use and design of a pelvic simulator. This simulator represents the female pelvic anatomy and is used for teaching gynaecological exams to medical students. It has been designed and developed in an academic university hospital in the USA, uses an existing gynaecological mannequin from a UK-based firm, and is marketed and distributed through a commercial company in the USA.

The project examines how the simulator came to look and feel the way it does, what practical considerations were made during its construction and production that influenced its final form, and the design path the simulator followed. I address how the female patient body is understood and represented by the various actors and the way these understandings evolve into the physical artefact.

So far in Graz, I have been writing about how medical simulators in general, and the pelvic simulator in particular, address issues of validity and realism. I am examining how the patient body is known and represented in medical simulators, using an analysis of medical discussions about simulators and new research on the development of a pelvic simulator. The work, which draws on theories of agential realism by Barad, suggests that the concept of knowledge as constructed in specific medical practices is unarticulated, yet taken into account when designing, building and testing simulators, despite rhetoric about valid simulators which tends to suggest a concern for mimicking an ontologically pre-existing anatomy. At the moment, I am working on an article manuscript that explores how medical practice, and not bodies, is reified in training simulators. I think understanding that it is the phenomenon of knowing the body and not the body itself which is simulated, should have important consequences for future simulators.

