



# Evidence-based answers at the point-of-care

Presenter Name  
Title and Affiliation

***SAMPLE SLIDES***



# Course objectives

- Gauge knowledge of current best practices
- Recognize the frequency of clinical questions and the impact of unanswered questions on quality of care
- Understand how to use online resources to get evidence-based answers to clinical questions

## The best practices challenge

How well can we answer clinical questions  
without a resource to help us?

*Interactive presentation of clinical questions  
followed by demonstration of searches  
using selected resources*

# How well do your colleagues do?

Data show:

- 1 out of 6 physicians fail the ABIM recertification exam
- 1 out of 10 fail the ABFM recertification exam
- Physicians who have been in practice longer may be at risk for providing lower quality of care

# How well do we answer questions in our practices?

Recent research shows that:

- Physicians have approximately 11 clinical questions a day
- Only 40% of questions get answered

# Top reported obstacles to answering clinical questions

- Doubt about the existence of relevant information
- Ready availability of consultation leading to a referral rather than a search
- Lack of time to initiate a search for information

# New generation of tools to address this need

Electronic resources synthesize the available evidence and knowledge into practical management recommendations that can be found quickly and easily at the point-of-care

# EBM in clinical practice

Conscientious, explicit and  
judicious use of the current best  
evidence in making decisions  
about the care of patients

# Characteristics of a good resource

## *Content*

- Comprehensive topic coverage that anticipates and answers clinical questions likely to occur
- Specific information that can be applied directly to patient care
- Detailed treatment recommendations with full prescribing information
- Evidence-based rationale for recommendations incorporates research, clinical experience and expert opinion
- Practical treatment recommendations – even when evidence is insufficient
- Trusted, authoritative resources
- Regular updates

# Characteristics of a good resource

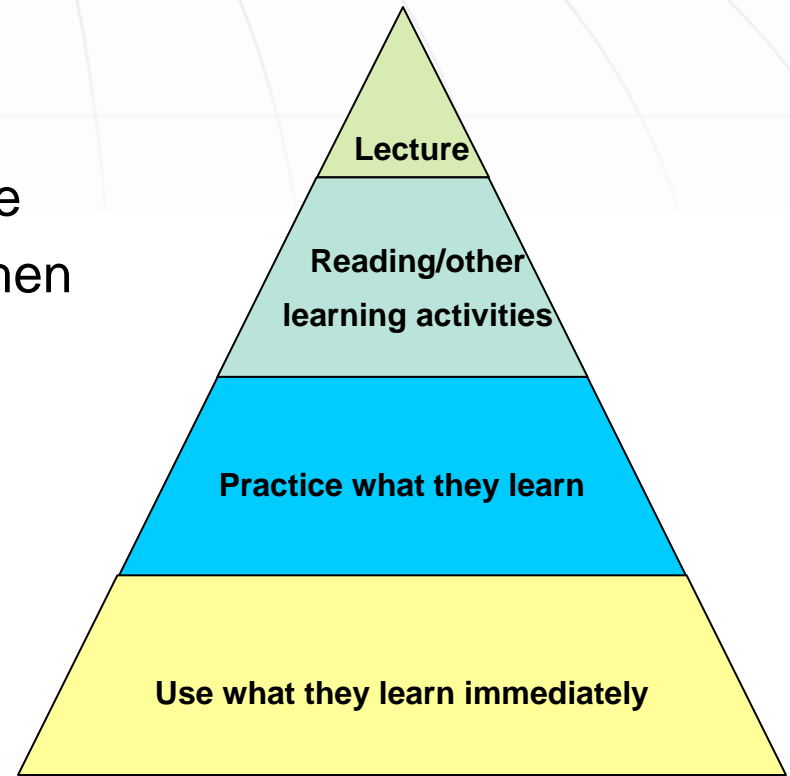
## Access

- Includes alternate and abbreviated clinically-oriented terms
- User-friendly intuitive search function
- Clinical versus disease oriented organization
- Links to cited studies, articles and related topics
- Fast and easy access to information in user-friendly formats

# Use of resources at point-of-care creates sustainable learning

Retention rate of learners is:

- 5% when they learn from a lecture
- Dramatically increases to 75% when learners practice what they learn
- Further increases to 90% when learners use what they learn immediately at the point-of-care



**The Learning Pyramid**

# Access to point-of-care tools changes practice

In a study of physicians who had access to a point-of-care tool (*UpToDate*) compared to a control group who did not:

- 79% more questions were answered
- 75% more answers led to a change in patient approach

# Access to point-of-care tools changes practice

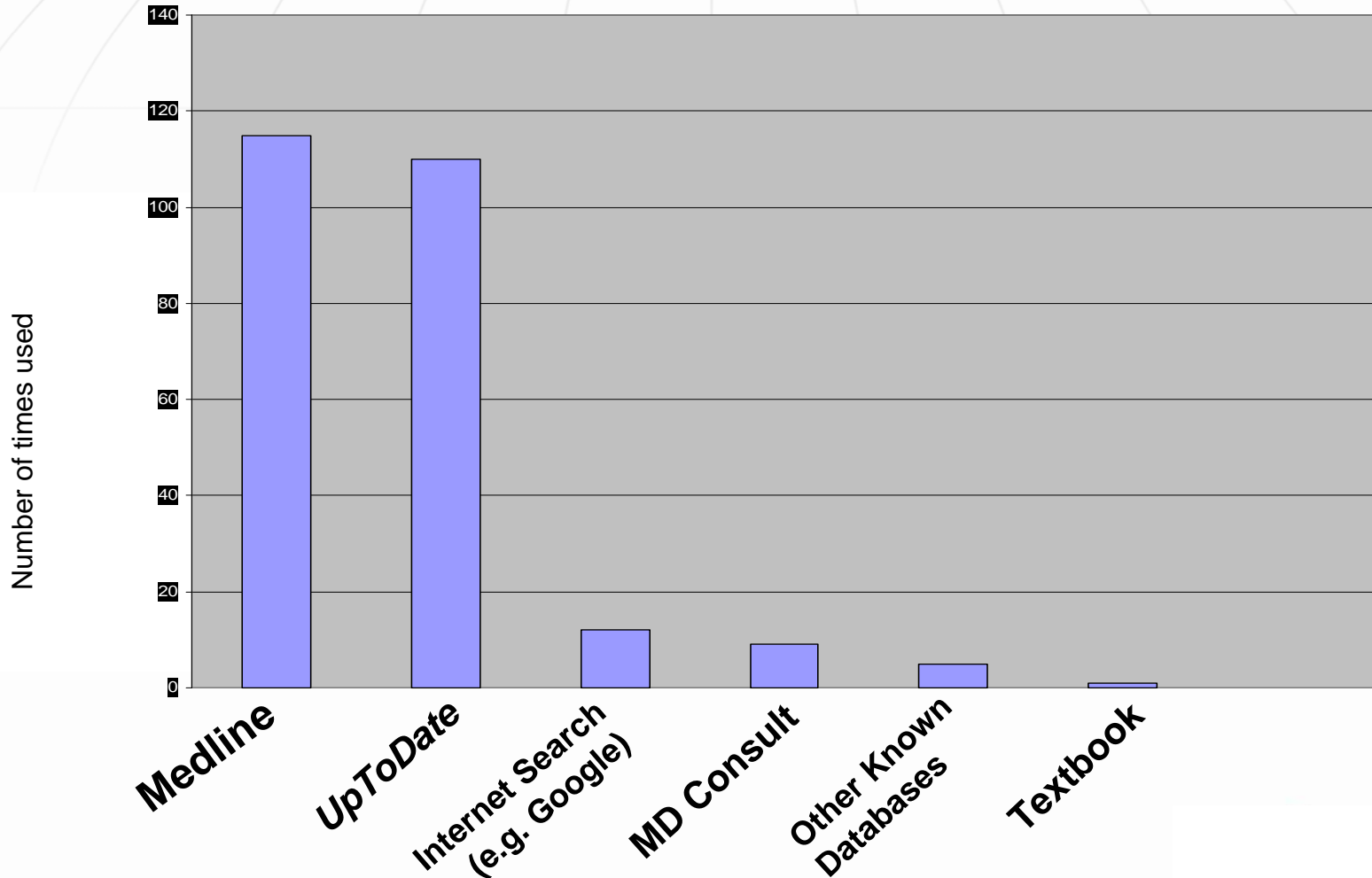
In a study of physicians who had access to a *range* of point-of-care tools:

- 89% of questions were answered (compared to a norm of 30%)
- 78% of answers changed patient care

Tools included: Medline, UpToDate, MDConsult, Harrison's Online, Cochrane Library, Micromedex, EBM Reviews/ ACP Journal Club, Bookmarked Web sites (e.g. Centers for Disease Control and National Guidelines Clearinghouse)

# Point-of-care tools get used

Information sources used in answering 158 clinical questions



# Challenges for all doctors:

- We can't remember everything
- Medical knowledge is constantly changing
  - 1,500 new articles are added to Medline each day
- We need tools to find and apply the best available evidence
  - Answer more questions
  - Provide better care
  - PLUS, Improve your knowledge base, because you are applying what you learn in real-time