

# 文獻搜尋

臺中榮總護理部

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103.03.23

# 大 綱

- 實證問題類型與檢索策略
- 實證文獻搜尋的技巧
- 中文實證資源介紹
- 西文實證資源介紹

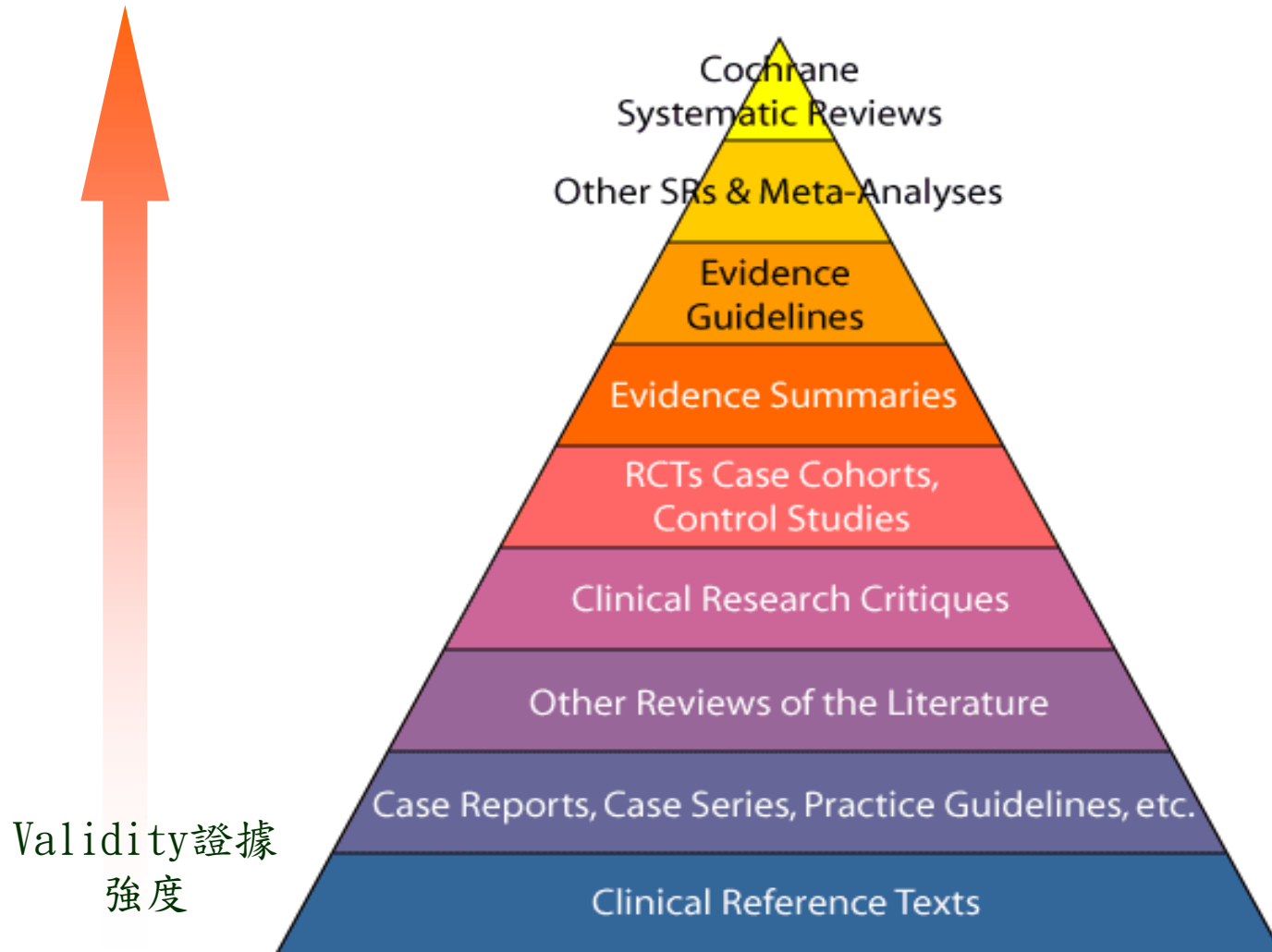
# 實證醫學的5A步驟



- **ASKING** an answerable question (PICO)  
將臨床上遇到的問題轉換成一個可以回答的問題
- **ACQUIRING** best evidence study  
尋找可以回答此問題的最佳實證資料及相關文獻
- **APPRAISING** the study acquired with CAT  
謹慎評估這些資料對於臨床的正確性、作用及適用性
- **Applying** your evidence into your patient  
of unique biology, values, status  
將實證資料與臨床專業及病人特殊狀況整合，找出最適的臨床決策
- **Auditing** your efficiency in steps 1-4  
評估以上的步驟及治療效果

# 證據強度金字塔

( The Evidence Pyramid for Therapy/Harm Problem )

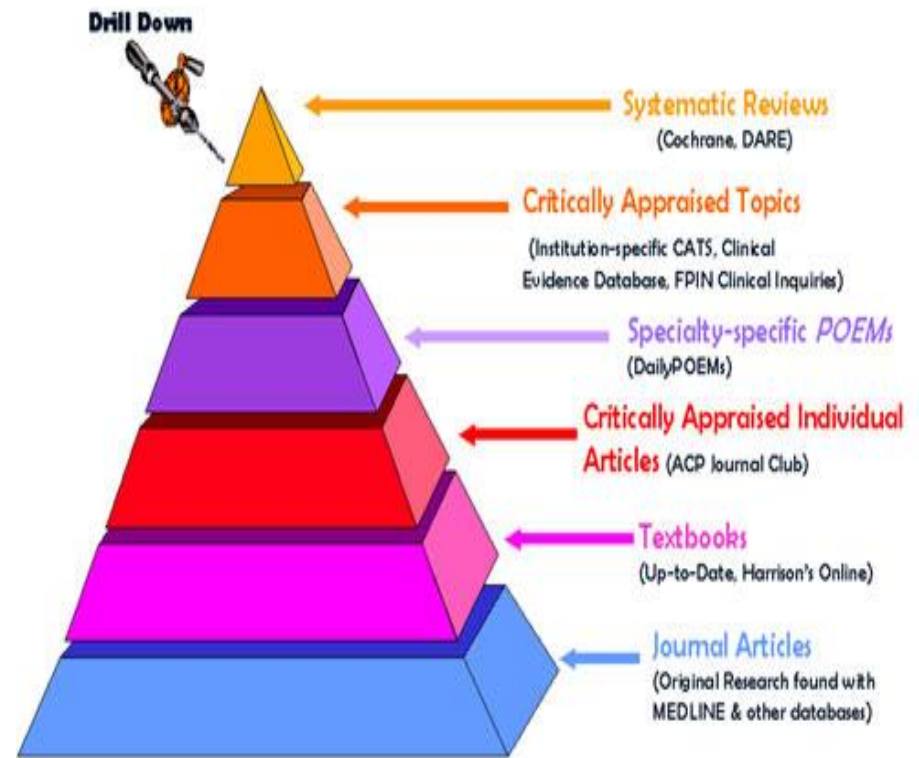


# 臨床問題的類型

## Step 1

### Determining question type

- **Therapy**
  - 如何選擇好的治療、介入或預防措施
- **Harm / Etiology**
  - 如何確認疾病的病因或醫源性傷害
- **Diagnosis (tests)**
  - 如何選擇好的診斷工具或測驗
- **Prognosis**
  - 如何評估（預測）可能的臨床病程與併發症



瞭解何者是最好且最適合的研究設計，研究結果才是最佳證據等級的文獻。

# 實證資料之資源

## (Evidence-Based Resources)

### ■ 圖書館

- 電子期刊、紙本、資料庫、電子書、其他資源

### ■ 網路資源

- Google

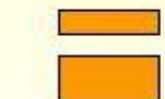
- Web Sites

- HINT (醫藥衛生研究資訊網)

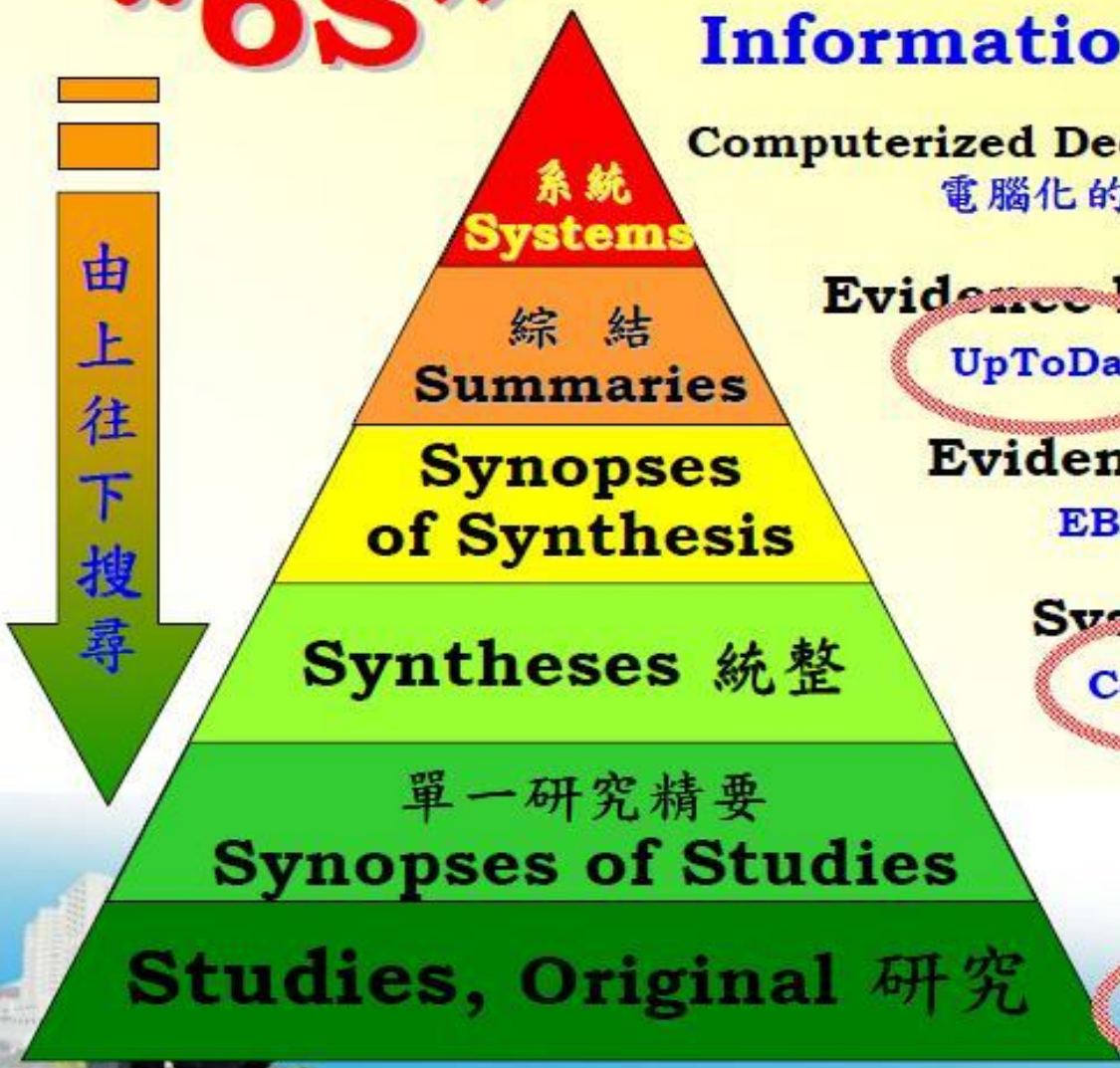
# EBM 文獻搜尋 6S 原則

DiCenso A, Haynes, RB. ACP J Club. 2009; 151: JC3-2.

## “6S”



由上往下搜尋



## Information Resources

**Computerized Decision Support System**  
電腦化的決策支持系統

**Evidence based textbooks**

UpToDate, DynaMed ...

**Evidence based journals**

EBM, EBN, DARE...

**Systematic Review**

Cochrane reviews ...

**Evidence based journals** DARE

**Original articles**

PubMed clinical queries



# 如何搜尋資料

- 以 **key word** 進行搜尋，善用各種搜尋技巧，尋找相關之文章
- 搜尋證據等級較高之文章
  - 文章有等級之分（hierarchy），亦即systematic review的文章最有價值，randomized controlled trials次之，controlled trials又次之，其他類型的文章又在其後。由最重要的文章先閱讀。
- 文章中之參考文獻亦是資源之一



# Search Strategies For Therapy/Prevention

## Step 1. Searching the Disease or Disorder

- Enter terms best describing the disease or disorder.
- Possible Subheadings (for broadest coverage, select "all subheadings")
  - Diet Therapy (DH)
  - Drug Therapy (DT)
  - Prevention & Control (PC)
  - Radiotherapy (RT)
  - Rehabilitation (RH)
  - Surgery (SU)
  - Therapy (TH)
  - Transplantation (TR)

## Step 2. Searching for the Intervention

- Enter terms best describing the intervention.
- Possible subheadings (for broadest coverage, select "all subheadings")
  - Administration and dosage (AD)
  - Therapeutic use (TU)
  - Pharmacology (PD)

## Step 3. Combine Previous Searches with boolean operator "and"

## Step 4. Quality Filters for Therapy/Prevention Articles

- Quick Filter
  - Ovid Medline : (randomized controlled trial or meta analysis).pt. or double blind\$.tw.
  - PubMed : randomized controlled trial [ptyp] OR systematic review[ptyp] OR double blind\* [word] OR "double-blind-method" [mh]
- Clinical Queries



# Search Strategies For Prognosis

## Step 1. Searching the Disease or Disorder

- Enter terms best describing the disease or disorder.
- Possible Subheadings (for broadest coverage, select "all subheadings")
  - Classification (CL)
  - Complications (CO)
  - Diagnosis (DI)
  - Epidemiology (EP)
  - Etiology (ET)
  - Mortality (MO)
  - Physiopathology (PP)

## Step 2. Combine Previous Searches with boolean operator "and"

## Step 3. Quality Filters for Prognosis Articles

- Quick filter
  - Ovid Medline : exp cohort studies/ or exp survival analysis/
  - PubMed : Cohort studies [mh] OR survival analysis [mh]
- Clinical Queries

# Search Strategies For Harm/Etiology

## Step 1. Searching the Suggested Source of Harm

- Enter terms best describing the source of harm.
- Possible Subheadings (for broadest coverage, select "all subheadings")
  - Adverse Effects (AE)
  - Contraindications (CT)
  - Poisoning (PO)
  - Toxicity (TO)
  - Mortality (MO) (not always an option)

## Step 2. Searching for the Relevant Disorder/ Anticipated Outcome

- Enter terms best describing the disease or disorder/outcome.
- Possible Subheadings (for broadest coverage, select "all subheadings")
  - Abnormalities (AB)
  - Chemically Induced (CI)
  - Epidemiology (EP)
  - Etiology (ET)
  - Mortality (MO)
  - Transmission (TM)

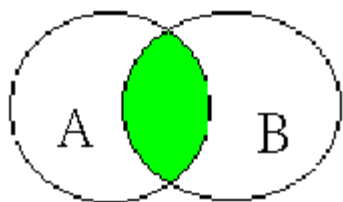
## Step 3. Combine Previous Searches with boolean operator "and"

## Step 4. Quality Filters for Harm/Etiology Articles

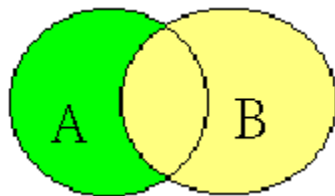
- Quick Filter
  - Ovid Medline : case control studies/ or cohort studies/ or risk/
  - PubMed : case-control studies [mh:noexp] OR cohort studies [mh:noexp]
- Clinical Queries

# 布林邏輯(AND、OR、NOT)

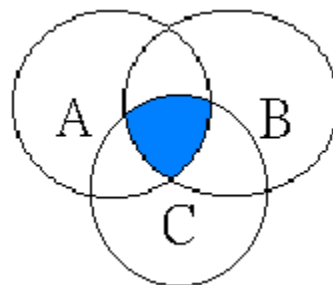
A AND B



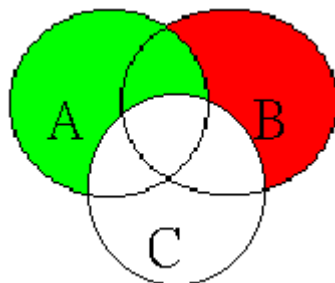
A OR B



A AND B AND C



A OR B NOT C



資料庫會先處理括弧內的條件，再與括弧外的條件結合檢索

◎ A AND (B OR C) ---A 及(符合B或C的結果)

◎ A OR (B NOT C) ---A 或(符合B但不包含C的結果)

◎ A NOT (B AND C)---符合A但不包含(同時符合B及C的結果)



# 中文資源

# Google之學術性資源

- Google Book Search

- <http://books.google.com/>

- Google Scholar

- <http://scholar.google.com.tw/schhp?hl=zh-TW>



# Google Scholar之一般檢索

周邊靜脈更換 - Google 學術搜尋 - Windows Internet Explorer

http://scholar.google.com.tw/scholar?q=%E5%91%A8%E9%82%8A%E9%9D%9C%E8%84%88%E6%9B%84%E6%8F%9B&hl=zh-TW&btnG=%E6%90%9C%E5%B0%8B&lr=

Google 學術搜尋

周邊靜脈更換

搜尋 進階學術搜尋

搜尋所有網站 搜尋所有中文網頁 搜尋繁體中文網頁

學術搜尋 不限時間 只包含書目/引用資料 建立電子郵件快訊

共約有170項查詢結果，這是第1-10項。(0.10 秒)

[\[PDF\] 肺動脈導管留置引發感染之危險因素與防護措施](#) nimg.org.cn 提供的 [PDF]  
陳瑛瑛... 院內感染控制雜誌, 2002 - nimg.org.cn  
... 5 公分, 置入無菌容器後送半定量或定量細菌培養; 並同時進行周邊靜脈血液培養, 以作為治療之依據。  
肺動脈導管應確實固定以減少移動, 避免傷害血管而使得置入部位皮膚的微生物向內移行, 傷口並以  
無菌紗布或透氣膜敷料覆蓋, 當更換裝置; 敷料潮濕、鬆脫或污染; ...  
相關文章 - HTML 版 - 全部共 4 個版本

[Complications Associated with Peripherally Inserted Central Venous Catheter in Neonatal Intensive Care Unit](#)  
楊文傑, 陳曉能, 余偉傑... - 中華民國兒童胸腔醫學會雜誌, 2008 - airtilibary.com  
... 卷期/出版年月, 5卷4期(2008/08/01), 頁次, 11 - 19. 內容語文, 英文. 中文摘要, 目的: 以回溯的方式  
分析在一年之內因周邊靜脈置入中央靜脈導管所產生的併發症, 比較在更換廠牌之後產生的併發  
症, 並試圖分析產生併發症的原因。材料: 在2005年7月份更換導管品牌(Bard, Per-Q plus 2Fr ...  
全部共 2 個版本

[\[PDF\] 高脂血症性胰臟炎施行血漿交換療法之血中物質清除效果研究](#) fju.edu.tw 提供的 [PDF]  
葉建宏, 李美芬, 邱浩彰... - 輔仁醫學期刊, 2004 - mc.fju.edu.tw  
... 部放置於股靜脈, 二例使用周邊靜脈穿刺。每個療程採每天一次, 連續兩天之PE 治療 ...  
TMP: 穿膜壓, D: 中心靜脈(雙腔導管), P: 週邊靜脈, FFP: 新鮮冷凍血漿, \*# 第一次/第二次 Page  
5 ... 量, 如仍無法改善時, 則必須更換血液分離器或直接中止該次治療。本研究之高TMP 值, 係肇 ...  
相關文章 - HTML 版 - 全部共 3 個版本

[The hydrodynamic performance of various resuscitation fluids in intravenous catheters](#) yuntech.edu.tw 提供的 [PDF]  
WH Lin - 2000 - ethesus.yuntech.edu.tw

完成

開始 周邊靜脈更換 - Goo... D:\fvghtc\EBN\補藥 資料庫介紹與文獻... hr9525.ppt [相容模式] 網路網路 中 正 注

DEC 8 56 FRI

# Google Scholar之進階檢索

Google 進階學術搜尋 - Windows Internet Explorer

http://scholar.google.com.tw/advanced\_scholar\_search?q=%E5%91%A8%E9%82%8A%E9%9D%9C%E8%84%88%E6%9B%B4%E6%8F%9B&hl=zh-TW&as\_sdt=0,5

檔案(E) 編輯(E) 檢視(V) 我的最愛(A) 工具(T) 說明(H)

我的最愛 台中榮民總醫院 --員工版... 台中榮總圖書館首頁 Google 進階學術搜尋 Yahoo! 奇摩 Google+

所有網頁 圖片 影片 地圖 新聞 翻譯 Gmail 更多

Ellie Chang

## Google 學術搜尋 進階學術搜尋

進階搜尋秘訣 | 關於 Google 學術搜尋

尋找文章 包含所有字詞 同邊靜脈更換 每頁結果數： 10 搜尋學術搜尋

包含完全符合詞組 同邊靜脈

包含至少一個字詞

不包含此字詞

字詞出現之處 文章中任何地方

作者 傳回此作者撰寫的文章 例如, "PJ Hayes" 或 McCarthy

出版品 傳回此刊物內的文章 例如, J Biol Chem 或 Nature

日期 傳回介於下列發表時間的文章: 1996

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完成 網際網路

開始 Google 進階學術搜... D:\fvghntc\EBN\補美 資料庫介紹與文獻... hr9525.ppt [相容模式] DEC 9 00 PM

# 如何找到英文關鍵字

- 中文資料中之英文摘要
- Google 或Google Scholar之查詢結果
- 翻譯軟體或線上翻譯功能

Google 翻譯 # - Windows Internet Explorer

http://translate.google.com.tw/?hl=zh-TW&tab=wT#zh-CN|en|%E5%91%A8%E9%82%8A%E9%9D%9C%E8%84%88%E6%9B%B4%E6%8F%9B

檔案(E) 編輯(E) 檢視(V) 我的最愛(A) 工具(T) 說明(H)

我的最愛 台中榮民總醫院 Portal Google 翻譯# Yahoo! 奇摩 Google+

所有網頁 圖片 影片 地圖 新聞 翻譯 Gmail 更多

Ellie Chang

Google

翻譯

原文是 中文 翻譯成 英文 翻譯

中文 英文 日文

周邊靜脈更換

允許以拼字方式輸入

英文 中文(繁體) 中文(簡體)

Replacement of peripheral intravenous

新! 按住 Shift 鍵，點擊並拖曳與上面的字詞即可重新排序。 關閉

Google 翻譯企業版： 譯者工具包 網站翻譯工具 全球商機搜尋器

關閉即時翻譯

關於 Google 翻譯 行動版 隱私權 說明 提供意見

開始 資料庫介紹與文獻... Clinically-indicated re... Google 翻譯# - Wind... DEC 21 3:18 PM

# airiti Library 華藝線上圖書館

(CEPS中文電子期刊資料庫平台服務+CETD中文碩博士論文資料庫平台服務)

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台中榮民總醫院, 您好

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訊息快速: 答客問 購買點數問題 研討會訊息公告

文章查詢 進階查詢 出版品查詢

所有欄位  
 所有欄位  
 所有欄位

AND AND

**查詢** **清除**

搜尋:  所有文章  繁體中文  簡體中文  英文文章  其他語言文章  
 文獻類型:  所有類型  CEPS電子期刊  會議論文  CETD碩博士論文  電子書  
 出版地區:  所有地區  臺灣  中國大陸  美國  其他地區  
 電子全文:  不限  限有全文  單位已採購  
 年代: 2000以前 到 2011  
 每頁顯示筆數:  10  20  50

airiti 華藝數位  
台灣唯一官方 DOI 註冊中心

### 精選期刊



疫情報導/行政院衛生署疾病  
管制局

### 推薦閱讀 Free!

篇名: 圓形圖及探針圓形圖上的  
拓展圖  
來源: 臺灣大學資訊工程學研究  
所學位論文 (201  
作者: 李孟哲

### 優質網站推薦

高學術影響力期刊盡在華藝線上圖書館

全國收藏

排序方式：相關程度高在前 共1頁 1

序號 簡易書目 其他服務

1 篇名：周邊靜脈留置護理改善專案  
 作者：于普華(Pu-Hua Yu)  
 來源：澄清醫護管理雜誌  
 關鍵字：靜脈留置護理；非

2 篇名：成人周邊靜脈留置  
 作者：方莉(Li Fang);陳季  
 來源：長庚護理 20卷4期  
 關鍵字：靜脈炎；導針；成人

3 篇名：周邊靜脈留置金  
 作者：全民健康保險爭議  
 來源：臺灣醫學 12卷3期

全文下載  
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共1頁 1

檔案下載

0% / searchresult\_1.aspx 從 www.airitilibrary.com...

是否要開啟或儲存這個檔案？

名稱: 201112020915330523.enw  
 類型: EndNote Import File  
 從: http://www.airitilibrary.com/searchres...

開啟舊檔(O) 儲存(S) 取消

雖然來自網際網路的檔案可能是有用的，但是某些檔案有可能會傷害您的電腦。如果您不信任其來源，請不要開啟或儲存這個檔案。有什麼樣的風險？

匯出書目 匯出格式

所有欄位 看詳目資料

基本書目(篇名,作者,出版品名稱,年代) 儲存為txt

基本書目+關鍵字+摘要 **輸出至Endnote**

自選欄位 輸出至Refworks

Email至 [ ] 送出



一般民眾 研究人員 校院系所及研究生

簡易查詢 進階查詢 瀏覽查詢 排行榜 我的研究

姓名：張麗銀(140.128.153.200)

離開系統

字體大小：+ - 預設

## 進階檢索

檢索結果 [點我看建議檢索詞](#)

檢索策略："跌倒".ti(精準)；檢索結果共 43 筆資料 [加入檢索歷史](#) [加入SDI](#)

在搜尋的結果範圍內查詢：  不限欄位

條列式 排序：相關度(遞減) 跳至 1 /5頁 每頁顯示 10 筆

全選 書目資料

1. 護腕材質與**跌倒**策略對向前**跌倒**時地面衝擊力的影響

朝陽科技大學／工業工程與管理系碩士班／93／碩士

研究生：卓旻賢

指導教授：羅世忠

[電子全文](#)

被引用：1 點閱：21 評分：☆☆☆☆☆ 下載：0 收藏：0

2. 曾**跌倒**老年人、不曾**跌倒**老年人與年輕人多方向自主性跨步動作控制之比較

輸出管理 查詢結果分類

輸出記錄

- 勾選紀錄(0)筆
- 所有勾選紀錄(0)筆
- 此次策略紀錄(43)筆

輸出欄位

- 簡易書目
- 完整書目
- 欄位選擇

書目資料輸出格式

- APA
- MLA Style
- Chicago Style
- CNS-13611 Style
- CSE Style
- Turabian Style

- 公佈欄
- 系統簡介
- 查詢服務
- 收編期刊瀏覽
- 篇目分類瀏覽

- 期刊授權
- 館外讀者如何取得全文
- 軟體工具下載
- 檢索歷程
- 熱門期刊資訊
- RSS

現在位置 首頁 > 查詢服務 > 進階查詢

簡易查詢 進階查詢 自然語言查詢 指令查詢

查詢條件 > 周邊靜脈 在 全部欄位

AND 留置 在 全部欄位

AND 在 全部欄位

出版日期 > 西元 年 月 ~ 年 月

資料性質 > 學術性 一般性

資料類型 > 全部 書評

語文 > 全部

查詢模式 > 精確 同音 模糊 漢語拼音

查詢結果 > 排序依 出版年月 遞增 遞減

每頁顯示 > 20 筆資料

查詢 清除



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### 查詢結果

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共 17 筆資料，第 1/1 頁， 依 出版年月 遞增 遞減 排序

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[國圖館藏目錄](#) [全國期刊聯合目錄](#) [電子期刊聯合目錄](#)
- 3. [周邊靜脈留置針置換給付之爭議](#) 全民健康保險爭議審議委員會 [臺灣醫學](#) 12:3 2008.05[民97.05] 頁342-345  
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- Overview of hand infections
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- Tunnel and peritoneal catheter exit site infections in continuous peritoneal dialysis
- Approach to the adult with recurrent infections
- Overview of Candida infections in children
- Evaluation of infection in the older adult
- Infections in the intensive care unit
- Treatment of prosthetic joint infections
- Pathogenesis of and risk factors for central venous catheter-related infections

### Topic Outline

#### INTRODUCTION

#### DETERMINANTS OF INFECTION RISK

- Type of catheter
- Location
- Duration
  - Peripheral venous catheters
  - Central venous or pulmonary artery catheters
  - Arterial catheters
  - Peripherally inserted catheters

#### CATHETER MATERIAL

- Peripheral catheters
- Central catheters
  - Antimicrobial impregnated catheters
  - Silver impregnation
  - Heparin bonding
  - Antibiotic locks

#### SITE CARE

- Chlorhexidine bathing
- Sterile technique
- Insertion site preparation
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  - Transparent versus gauze

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**TOPIC OUTLINE**

**INTRODUCTION**

**DETERMINANTS OF INFECTION RISK**

- Type of catheter
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  - Heparin bonding
  - Antibiotic locks

**SITE CARE**

- Chlorhexidine bathing
- Sterile technique

Prevention of intravascular catheter-related infections

<b>Authors</b> Jeffrey D Band, MD Robert Gaynes, MD	<b>Section Editor</b> Anthony Harris, MD, MPH	<b>Deputy Editor</b> Elinor L Baron, MD, DTMH
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Last literature review version 19.3: 九月 2011 | This topic last updated: 四月 11, 2011 (More)

**INTRODUCTION** — Infection, phlebitis, and less often bacteremia remain a major problem with intravascular catheters [1]. The majority of serious catheter-related bloodstream infections are associated with central venous catheters (CVCs), particularly those placed in an intensive care unit [2]. CVC-related bloodstream infection is likely if a primary bloodstream infection develops in a patient who had a CVC within the 48-hour period before the development of the bloodstream infection. If the time interval is longer than 48 hours, there must be compelling evidence that the infection was related to the vascular access device. (See "[Epidemiology and microbiology of intravascular catheter infections](#)".)

Strict adherence to hand hygiene recommendations and the use of aseptic techniques during insertion and dressing changes remain the most important measures for the prevention of catheter-associated infections. These measures are emphasized in guidelines from the Healthcare Infection Control Practices Advisory Committee (HICPAC), the Centers for Disease Control and Prevention (CDC), and a working group composed of members from professional organizations representing a variety of medical disciplines [2-4].

- Other preventive measures include:
- Choosing appropriate sites for catheter insertion
  - Using the appropriate type of catheter material
  - Using barrier precautions during insertion



# 多資料庫搜尋

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**Changes from v1:** 1) faster; 2) search strategies are validated; 3) automated summaries are provided as well as bibliometric markers of article quality; 4) Guidelines from PubMed and National Guidelines Clearinghouse are merged into one list sorted by year of publication, 5) systematic reviews from DARE and PubMed are merged into one list and sorted by year of publication.

**History:** SUMSearch is written by Bob Badgett was first online as "Medical SmartSearch" in October, 1998. SUMSearch was moved to SUMSearch 2 in August, 2010.

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**Original studies**Systematic reviewsGuidelines

149 possible original studies PubMed found after 3 searches. The first 50 citations are:

1. **Assessing Guidelines for the Discontinuation of Prehospital Peripheral Intravenous Catheters.**  
J Trauma Nurs 2011;.: PMID: [22052246](#) , doi: [10.1097/JTN.0b013e31822e5998](#). [Cite](#)

**Conclusion:** Less than 1% of patients exhibited an associated complication. Guidelines for replacement of prehospital PIV catheters should focus less on time since insertion and more on patient factors.

2. **[Peripheral intravenous catheter-related phlebitis].**  
Ned Tijdschr Geneeskd 2011;155:40. PMID: [21988756](#) . [Cite](#)

**Conclusion:** Until recently, routine replacement of peripheral intravenous catheters after 72-96 h was recommended, but randomised controlled trials have not shown any benefit of this routine. A recent Cochrane Review recommends replacement of peripheral intravenous catheters when clinically indicated only.

3. **Factors influencing nurses' decision-making process on leaving in the peripheral intravascular catheter after 96 hours: a longitudinal study.**  
J Infus Nurs 2011 Sep-Oct;34:5. PMID: [21915006](#) , doi: [10.1097/NAN.0b013e3182290a20](#). [Cite](#)

**Conclusion:** Several factors were taken into account in regard to replacement of the PIV catheters by nurses, ranging from analysis based on their own clinical experience with PIV complications and analysis of the patient's clinical situation to the critical analysis of their own work situation. This clinical decision-making process is valuable: leaving the PIV in place for more than 96 hours is a complex decision and not simply a

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1. **Vascular access on the 21st century military battlefield.** J R Army Med Corps. 2010 PMID: [21302661](#) ([DARE summary](#) if available); [Cite](#)
2. **The handling of peripheral venous catheters--from non-compliance to evidence-based needs.** J Clin Nurs. 2010 PMID: [20964751](#) ([DARE summary](#) if available); [Cite](#)
3. **Clinically-indicated replacement versus routine replacement of peripheral venous catheters.** **Cochrane Database Syst Rev.** 2010 PMID: [20238356](#) ([DARE summary](#) if available); [Cite](#)
4. **Vascular access management 1: an overview.** J Ren Care. 2008 PMID: [18498572](#) ([DARE summary](#) if available); [Cite](#)
5. **Epidural analgesia compared with peripheral nerve blockade after major knee surgery: a systematic review and meta-analysis of randomized trials.** Br J Anaesth. 2008 PMID: [18211990](#) ([DARE summary](#) if available); [Cite](#)
6. **Percutaneous central venous catheters versus peripheral cannulae for delivery of parenteral nutrition in neonates.** **Cochrane Database Syst Rev.** 2007 PMID: [17636749](#) ([DARE summary](#) if available); [Cite](#)
7. **Central venous catheter-related bacteremia in chronic hemodialysis patients: epidemiology and evidence-based management.** Nat Clin Pract Nephrol. 2007 PMID: [17457359](#) ([DARE summary](#) if available); [Cite](#)

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**Guidelines**

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Merged list:

- Guidelines for the prevention of intravascular catheter-related infections, 2011**  
**American Academy of Pediatrics** - Medical Specialty Society; **American College of Chest Physicians** - Medical Specialty Society; American Society for Parenteral and Enteral Nutrition - Professional Association; American Society of Critical Care Anesthesiologists - Professional Association; American Thoracic Society - Medical Specialty Society; Association for Professionals in Infection Control and Epidemiology, Inc. - Professional Association; **Centers for Disease Control and Prevention** - Federal Government Agency [U.S.]; Infectious Diseases Society of America - Medical Specialty Society; Infusion Nurses Society - Professional Association; Oncology Nursing Society - Professional Association; Pediatric Infectious Diseases Society - Professional Association; Society for Healthcare Epidemiology of America - Professional Association; Society of Critical Care Medicine - Professional Association; Society of Interventional Radiology - Medical Specialty Society; Surgical Infection Society - Professional Association. 2011 NGC: [008683](#)
- Summary of recommendations: Guidelines for the Prevention of Intravascular Catheter-related Infections.** Clin Infect Dis. Healthcare Infection Control Practices Advisory Committee (HICPAC) (Appendix 1). 2011 PMID: [21467014](#); [Cite](#)
- Management of massive and submassive pulmonary embolism, iliofemoral deep vein thrombosis, and chronic thromboembolic pulmonary hypertension: a scientific statement from the American Heart Association.** Circulation. American Heart Association Council on Arteriosclerosis, Thrombosis and Vascular Biology. 2011 PMID: [21422387](#); [Cite](#)

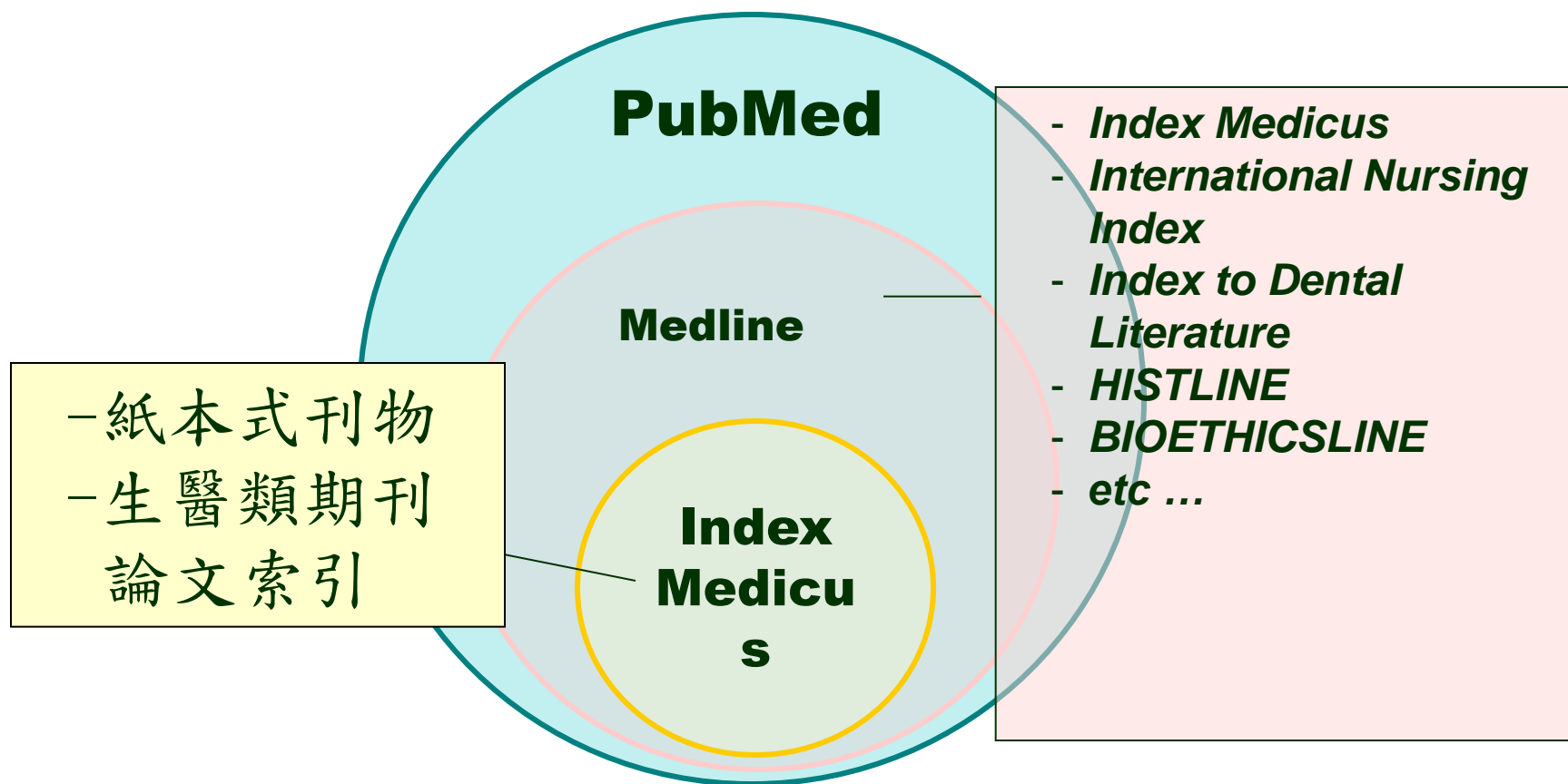
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A, Fan VS, Daniel SL, Deem S, Yanez ND 3rd, Hough CL, Dellit TH, Treggiari MM. 2014 Mar 5. [Epub ahead of print]  
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2. [Sedation and symptom distress within the final seven days of life among cancer patients in the intensive care unit.](#)

era A, San Miguel-Arregui MT, Williams J, Chisholm G, Bruera E. 2014 Feb 20:1-6. [Epub ahead of print]  
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3. [Practice of a sedation protocol on sedation and consciousness levels of patients on mechanical ventilation.](#)

Abdar ME, Rafiei H, Abbaszade A, Hosseinrezaei H, Abdar ZE, Delaram M, Ahmadinejad M. Iran J Nurs Midwifery Res. 2013 Sep;18(5):391-5.  
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Ann Am Thorac Soc. 2014 Mar 5. [Epub ahead of print]

## Improved Analgesia, Sedation and Delirium Protocol Associated with Decreased Duration of Delirium and Mechanical Ventilation.

Dale CR<sup>1</sup>, Kannas DA, Fan VS, Daniel SL, Deem S, Yanez ND 3rd, Hough CL, Dellit TH, Treggiari MM.

### Author information

#### Abstract

Purpose: Introduction of sedation protocols has been associated with improved patient outcomes. It is not known if an update to an existing high quality sedation protocol, featuring increased patient assessment and reduced benzodiazepine exposure is associated with improved patient Process and Outcome quality metrics. Methods: Observational before (n = 703) and after (n = 780) cohort study of mechanically ventilated patients in a 24-bed trauma-surgical ICU from 2009 to 2011. The three main protocol updates were: 1. Requirement to document Richmond Agitation Sedation Scale (RASS) scores every 4 hours; 2. Requirement to document Confusion Assessment Method-ICU (CAM-ICU) twice daily; and 3. Systematic, protocolized de-escalation of excess sedation. Multivariable linear regression was used for the primary analysis. The primary outcome was the duration of mechanical ventilation. Pre-specified secondary endpoints included days of delirium; the frequency of patient assessment with the RASS and CAM-ICU instruments; benzodiazepine dosing; durations of mechanical ventilation, ICU stay and hospitalization; hospital mortality and ventilator associated pneumonia (VAP) rate. Results: Patients in the updated protocol cohort had 1.22 more RASS assessments per day (5.38 vs. 4.16; 95% CI, 1.05-1.39; P < 0.01) and 1.15 more CAM-ICU assessments per day (1.49 vs. 0.35; 95% CI 1.08-1.21, P < 0.01) than the baseline cohort. The mean hourly benzodiazepine dose decreased by 34.8% (0.08 mg lorazepam equivalents/hour; 0.15 vs. 0.23; P < 0.01). In the multivariable model, the median duration of mechanical ventilation decreased by 17.6% (95% CI, 0.6-31.7%; P = 0.04). The overall OR of delirium was 0.67 (95% CI: 0.49-0.91, P = 0.01) comparing updated versus baseline cohort. A 12.4% reduction in median duration of ICU stay (95% CI, 0.5-22.8%; P = 0.04) and a 14.0% reduction in median duration of hospitalization (95% CI, 2.0-24.5%; P = 0.02) were also seen. No significant association with mortality (OR 1.18; 95% CI 0.80-1.76, P = 0.40) was seen. Conclusion: Implementation of an updated ICU analgesia, sedation and delirium protocol was associated with an increase in RASS and CAM-ICU assessment and documentation; reduced hourly benzodiazepine dose; and decreased delirium, median durations of mechanical ventilation, ICU stay and hospitalization.

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Effect of sedation with dexmedetomidine vs lorazepam on acute brain dysfunction in mechanically ventilated patients: a randomized controlled trial [JAMA. 2007]

Dexmedetomidine vs midazolam for sedation of critically ill patients: a randomized trial [JAMA. 2009]

**Review** Benzodiazepine versus nonbenzodiazepine-based sedation in mechanically ventilated patients: a systematic review [Crit Care Med. 2013]

**Review** Protocolized versus non-protocolized sedation in mechanically ventilated patients: a systematic review [Cochrane Database Syst Rev. 2010]

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Dale CR, Kannas DA, Fan VS, Daniel SL, Deem S, Yanez ND 3rd, Hou...  
Ann Am Thorac Soc. 2014 Mar 5. [Epub ahead of print]  
PMID: 24597599 [PubMed - as supplied by publisher]  
[Related citations](#)
  - [Delirium, agitation, and symptom distress within the final seven days of receiving hospice care.](#)  
de la Cruz M, Noguera A, San Miguel-Arregui MT, Williams J, Chisholm...  
Palliat Support Care. 2014 Feb 20:1-6. [Epub ahead of print]  
PMID: 24556057 [PubMed - as supplied by publisher]  
[Related citations](#)
  - [Effects of nurses' practice of a sedation protocol on sedation and consciousness levels of patients on mechanical ventilation.](#)  
Abdar ME, Rafiei H, Abbaszade A, Hosseinrezaei H, Abdar ZE, Delaram M, Ahmadinejad M.  
Iran J Nurs Midwifery Res. 2013 Sep;18(5):391-5.  
PMID: 24403942 [PubMed] [Free PMC Article](#)  
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  - [Nursing Activities Score \(NAS\): 5 Years of experience in the intensive care units of an Italian University hospital](#)

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Effects of nurses' practice of a sedation protocol on sedation and consciousness levels of patients [Iran J Nurs Midwifery Res. 2013]  
Safety and efficacy of dexmedetomidine for long-term sedation in critically ill patients [J Anesth. 2014]  
Enteral vs. intravenous ICU sedation management: study protocol for a randomized controlled trial [Trials. 2013]

See all (20)...

# 醫學主題詞MeSH terms檢索

- MeSH : Medical Subject Headings  
美國國家醫學圖書館(National Library of Medicine, NLM)於1954年編製的醫學控制詞彙表, 將所有相關同義詞集中在統一的詞彙下
- 1960年由Index Medicus 發行, 出版醫學標題表 (Medical Subject Headings, MeSH)
- 點選sidebar之MeSH database -- 輸入檢索詞-- 選擇適當之MeSH terms
- 選擇“PubMed” 或 “PubMed - Major Topics” 進行檢索

# 醫學主題詞MeSH terms檢索

NCBI Resources How To Sign in to NCBI

MeSH MeSH sedation Search

Save search Limits Advanced Help

Display Settings: Summary, 20 per page

Send to:

Results: 10

[Deep Sedation](#)

1. Drug-induced depression of consciousness during which patients cannot be easily aroused but respond purposely following repeated painful stimulation. The ability to independently maintain ventilatory function may be impaired. (From: American Society of Anesthesiologists Practice Guidelines)  
Year introduced: 2008

[Conscious Sedation](#)

2. A drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patent airway. (From: American Society of Anesthesiologists Practice Guidelines)  
Year introduced: 1991

[Anti-Anxiety Agents](#)

3. Agents that alleviate ANXIETY, tension, and ANXIETY DISORDERS, promote **sedation**, and have a calming effect without affecting clarity of consciousness or neurologic conditions. ADRENERGIC BETA-ANTAGONISTS are commonly used in the symptomatic treatment of anxiety but are not included here.  
Year introduced: 1995

[Promethazine](#)

4. A phenothiazine derivative with histamine H1-blocking, antimuscarinic, and sedative properties. It is used as an antiallergic, in pruritus, for motion sickness and **sedation**, and also in animals.

PubMed Search Builder

Empty search builder box

Add to search builder AND

Search PubMed

YouTube Tutorial

Find related data

Database: Select

Find items

Search details

sedation[All Fields]



# 醫學主題詞MeSH terms檢索

MeSH    
[Limits](#) [Advanced](#) [Help](#)

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## Conscious Sedation

A drug-induced depression of consciousness during which patients respond purposefully to verbal commands, either alone or accompanied by light tactile stimulation. No interventions are required to maintain a patent airway. (From: American Society of Anesthesiologists Practice Guidelines)  
Year introduced: 1991

PubMed search builder options  
[Subheadings:](#)

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> adverse effects   | <input type="checkbox"/> instrumentation                 | <input type="checkbox"/> standards                     |
| <input type="checkbox"/> classification               | <input checked="" type="checkbox"/> methods              | <input type="checkbox"/> statistics and numerical data |
| <input checked="" type="checkbox"/> contraindications | <input type="checkbox"/> mortality                       | <input type="checkbox"/> therapeutic use               |
| <input type="checkbox"/> economics                    | <input checked="" type="checkbox"/> nursing              | <input type="checkbox"/> therapy                       |
| <input type="checkbox"/> epidemiology                 | <input type="checkbox"/> organization and administration | <input type="checkbox"/> trends                        |
| <input type="checkbox"/> ethics                       | <input checked="" type="checkbox"/> pharmacology         | <input type="checkbox"/> utilization                   |
| <input type="checkbox"/> history                      | <input type="checkbox"/> psychology                      | <input type="checkbox"/> veterinary                    |

- Restrict to MeSH Major Topic.  
 Do not include MeSH terms found below this term in the MeSH hierarchy.

**Subheadings**

Tree Number(s): E03.250

- Entry Terms:
- Sedation, Moderate
  - Moderate Sedation
  - Sedation, Conscious

### PubMed Search Builder

( "Conscious Sedation/adverse effects"[Mesh] OR "Conscious Sedation/contraindications"

[YouTube Tutorial](#)

- ### Related information
- [PubMed](#)
  - [PubMed - Major Topic](#)
  - [Clinical Queries](#)
  - [NLM MeSH Browser](#)

- ### Recent Activity
- [Turn Off](#) [Clear](#)
- "Conscious Sedation/adverse effects"[Mesh] OR "Conscious Sedation..." (3287) PubMed
  - "Conscious Sedation"[Mesh] (6646) PubMed

# 醫學主題詞MeSH terms檢索

PubMed ( "Conscious Sedation/adverse effects"[Mesh] OR "Conscious Sedation/contraindications"[Mesh] )

Search

RSS Save search Advanced

Help

Show additional filters

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Send to: Filters: Manage Filters

## Article types

Clinical Trial  
Review  
More ...

## Text availability

Abstract available  
Free full text available  
Full text available

## Publication dates

5 years  
10 years  
Custom range...

## Species

Humans  
Other Animals

## Languages

English  
More ...

## Ages

Child: birth-18 years  
Infant: birth-23 months  
Adult: 18+ years

Results: 1 to 20 of 2939

<< First < Prev Page 1 of 147 Next > Last >>

[Efficacy and safety of dexmedetomidine versus propofol for the sedation of tube-retention after oral](#)

1. [maxillofacial surgery.](#)

Chen J, Zhou JQ, Chen ZF, Huang Y, Jiang H.  
J Oral Maxillofac Surg. 2014 Feb;72(2):285.e1-7. doi: 10.1016/j.joms.2013.10.006. Epub 2013 Oct 25.  
PMID: 24438599 [PubMed - indexed for MEDLINE]  
[Related citations](#)

[Surgeon-administered conscious sedation and local anesthesia for ambulatory anorectal surgery.](#)

2. Hina M, Hourigan JS, Moore RA, Stanley JD.  
Am Surg. 2014 Jan;80(1):21-5.  
PMID: 24401505 [PubMed - indexed for MEDLINE]  
[Related citations](#)

[Overview of Paediatric Dental Sedation: 1. current UK guidelines.](#)

3. Wilson KE.  
Dent Update. 2013 Nov;40(9):728-30.  
PMID: 24386764 [PubMed - indexed for MEDLINE]  
[Related citations](#)

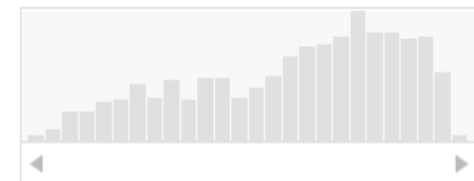
[Outcomes following prehospital airway management in severe traumatic brain injury.](#)

4. Sobuwa S, Hartzenberg HB, Geduld H, Uys C.  
S Afr Med J. 2013 Jul 29;103(9):644-6. doi: 10.7196/samj.7035.  
PMID: 24300684 [PubMed - indexed for MEDLINE]

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Try the new Display Settings option -  
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## Results by year



## Titles with your search terms

Validity and reliability of an intuitive **conscious sedation** scoring tool: the n [Crit Care Med. 2010]  
The value of end-tidal CO2 monitoring when comparing three **metf** [Pediatr Emerg Care. 1997]  
**Pharmacology of drugs for conscious sedation.** [Scand J Gastroenterol Suppl. 1990]

See more...





# THE COCHRANE LIBRARY

# 資料庫背景介紹

- 1972年 英國流行病學家Archie Cochrane
    - 使用已被證明有效果的醫療措施，可避免醫療資源浪費
    - 呼籲健康照護的成效應有實證研究→RCT研究支持
  - 1993年 成立Cochrane Collaboration
    - 13個研究中心(亞洲的分支：新加坡、泰國、香港等)
    - 53個Cochrane Review Groups(如:急性呼吸道感染、麻醉等 Topic ...)
    - 15,000位醫療專業人士(科學家、健康專家、研究人員)投入 Systematic Review，皆經過 peer review
  - 研究成果收錄進CDSR (Cochrane Database of Systematic Review)
    - 平均2-3年 重新進行資料收集及評讀
- |       |           |
|-------|-----------|
| 5,838 | Reviews   |
| 2,342 | Protocols |

# The Cochrane Library 實證醫學資料庫 包括七個文獻庫

- **Cochrane Database of Systematic Reviews (Cochrane Reviews)**
  - 針對特定臨床問題(健康照護)的介入方式評斷其療效，是**全文資料庫**
- **Database of Abstracts of Reviews of Effects (Other Reviews)**
  - 收錄經過嚴格審核標準的系統評論**摘要**資料庫
- **Cochrane Central Register of Controlled Trials (Clinical Trials)**
  - 收錄隨機臨床實驗的**書目**資料庫
- **Cochrane Methodology Register (Methods Studies)**
  - 蒐集已出版的journal articles, books, and conference proceedings，且針對產生對照實驗方法研究的**書目**資訊
- **Health Technology Assessment Database (Technology Assessments)**
  - 提供全是接已經完成或正在進行的健康醫療技術之評估報告**摘要**，目的在於改善健康照護的品質及成本效益
- **NHS Economic Evaluation Database (Economic Evaluations)**
  - 收錄不同治療方式的成本比較和治療效果比較等**摘要**資料



**Title, Abstract, Keywords**

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Notice to all users: No new CENTRAL records were published in February 2014. [Read More...](#)

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Issue 3 of 12, March 2014

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[Cancer \(495\)](#)

[Child health \(5667\)](#)

[Complementary & alternative medicine \(977\)](#)

[Consumer & communication strategies \(72\)](#)

[Dentistry & oral health \(154\)](#)

[Developmental, psychosocial & learning problems \(114\)](#)

[Diagnosis \(58\)](#)

[Ear, nose & throat \(133\)](#)

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[Laparoscopy for diagnosing resectability of disease in patients with advanced ovarian cancer](#)

[Decision aids for people facing health treatment or screening decisions](#)

[Peginterferon alpha-2a versus peginterferon alpha-2b for chronic hepatitis C](#)

[Endometriosis: an overview of Cochrane Reviews](#)

[Inhaled steroids and risk of pneumonia for chronic obstructive pulmonary disease](#)

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建議詞彙下拉選單

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- diabetes associated peptide
- Diabetes Care Profile
- diabetes control
- diabetes education research
- diabetes gravidarum
- diabetes insipidus
- diabetes mellitus
- diabetes mellitus ketoacidosis
- diabetes mellitus type 1
- diabetes mellitus type I
- diabetes mellitus type-I
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Cochrane Reviews (39)

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Other Reviews (15)

- Trials (186)
- Methods Studies (11)
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- Cochrane Groups (1)

All

- Current Issue

There are 39 results from 7481 records for your search on 'children in title abstract keywords and antibiotic and "acute otitis media" in Cochrane Reviews'

Pages 1 - 26 | 26 - 39

Sort by

[Select all](#) | [Export all](#) | [Export selected](#)

- Interventions for acute otitis externa  
Vivek Kaushik , Tass Malik and Shakeel R Saeed  
January 2010
- Antibiotics for acute otitis media in children**  
Sharon Sanders , Paul P Glasziou , Chris B Del Mar and Maroeska M Rovers  
September 2010

# MeSH搜尋

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Search Manager Medical Terms (MeSH) Browse

Enter MeSH term  
Heart Failure

1

輸入預查詢的關鍵字  
例如:心臟衰竭

Select MeSH qualifiers  
Blood - BL  
Cerebrospinal fluid - CF  
Chemically induced - CI  
Classification - CL  
Complications - CO  
Congenital - CN  
Diagnosis - DI  
Diet therapy - DH  
Drug therapy - DT  
Economics - EC  
Embryology - EM  
Enzymology - EN

Lookup Clear

2

點選Lookup

View MeSH search tips

Definition

Heart Failure - A heterogeneous condition in which the heart is unable to pump out sufficient blood to meet the metabolic need of the body. Heart failure can be caused by structural defects, functional abnormalities (VENTRICULAR DYSFUNCTION), or a sudden overload beyond its capacity. Chronic heart failure is more common than acute heart failure which results from sudden insult to cardiac function, such as MYOCARDIAL INFARCTION.

Search results

There are 5016 results for your search on

- MeSH descriptor: [Heart Failure]
- explode all trees

Save search Add to Search Manager

Cochrane Reviews	23
Other Reviews	284
Trials	4419
Methods Studies	0
Technology Assessments	115

3

顯示在各個子資料庫中所查詢到的筆數，以Cochrane Review來說，查詢到了23筆“心臟衰竭”的相關資料

Thesaurus matches

Exact Term Match

Heart Failure

Phrase Matches

Heart Failure

Synonyms: Cardiac Failure; Myocardial Failure; Heart Failure, Left-Sided; Heart Failure, Left Sided, Left-Sided Heart Failure; Left Sided Heart Failure; Heart Failure, Right-Sided; Heart Failure, Right Sided; Right-Sided Heart Failure; Right Sided Heart Failure; Congestive Heart Failure; Heart Failure, Congestive; Heart Decompensation; Decompensation, Heart

Heart Failure, Systolic

Synonyms: Heart Failures, Systolic; Systolic Heart Failures; Systolic Heart Failure.

Heart Failure, Diastolic

MeSH trees

MeSH term - Heart Failure

Explode all trees

Single MeSH term (unexploded)

Explode selected trees

Select

Use the checkbox next to each tree to explode selected trees

Tree Number 1

Cardiovascular Diseases [+5]

Heart Diseases [-24]

Arrhythmias, Cardiac [+14]

Carcinoid Heart Disease

Cardiac Output, Low

Cardiac Tamponade

Endocarditis [+2]

Heart Aneurysm



# MeSH搜尋(續)

1

2

3

如果您想要查詢的其實是治療心臟衰竭的藥物資料，就請在右邊的格子中選擇Drug therapy

4

5

右下方就會顯示在各個子資料庫中所查詢到的筆數，以Cochrane Review來說，查詢到了10筆關於治療“心臟衰竭”的藥物資料

Search	Search Manager	Medical Terms (MeSH)	Browse								
Enter MeSH term Heart Failure	Select MeSH qualifiers Blood - BL Cerebrospinal fluid - CF Chemically induced - CI Classification - CL Complications - CO Congenital - CN Diagnosis - DI Diet/therapy - DT <b>Drug therapy - DT</b> Economics - EC Embryology - EM Enzymology - EN	<b>Lookup</b> <b>Clear</b>									
<p>There are 2609 results for your search on</p> <ul style="list-style-type: none"><li>MeSH descriptor: [Heart Failure]</li><li>explode all trees</li><li>with qualifier(s) Drug therapy</li></ul> <p><b>Save search</b> <a href="#">Add to Search Manager</a></p> <table border="1"><tr><td>Cochrane Reviews</td><td>10</td></tr><tr><td>Other Reviews</td><td>88</td></tr><tr><td>Trials</td><td>2444</td></tr><tr><td>Methods Studies</td><td>0</td></tr></table>		Cochrane Reviews	10	Other Reviews	88	Trials	2444	Methods Studies	0		
Cochrane Reviews	10										
Other Reviews	88										
Trials	2444										
Methods Studies	0										







# 考科藍實證醫學資料庫

Cochrane Database of Systematic Reviews  
(Abstracts')

首頁 | 專有名詞查詢 | 平台操作Q&A | 網站導覽 | 聯絡我們

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睡眠

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(The Cochrane Collaborat
- ▷ 考科藍實證醫學資料庫51群
- ▷ 實證醫學指引平台
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以運動治療60歲以上成年人的睡眠問題

[The Cochrane Library 原文連結](#)

編輯群體: Cochrane Developmental, Psychosocial and Learning Problems Group. 發表狀態與日期: 編輯(結論未改變) · 於2009年第1期發表. 回顧內容更新為重新: 2002年2月2日. 引用本文請按下列參考文獻書目格式註明: Montgomery P, Dennis JA. Physical exercise for sleep problems in adults aged 60+. Cochrane Database of Systematic Reviews 2002, Issue 4. Art. No.: CD003404. DOI: 10.1002/14651858.CD003404. 版權所有: 2009 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.

原作者: Montgomery P, Dennis J

2002-4

翻譯者: 成大醫院 尹子高

## 摘要

### 背景

睡眠問題在成年人的盛行率,隨著年齡增加,雖不是所有中年後的睡眠變化都是病態的,然而嚴重惡化可能引起憂鬱,認知障礙,對照顧者亦是種壓力和增加醫療支出. 最常見的睡眠障礙(尤其是失眠)治療是藥物. 非藥物治療的療效一般認為比藥物佳,但沒有藥物耐受性或依賴性的風險. 規律運動可能可以促進放鬆和攝來身體基礎溫度,這些都有助睡眠和維持睡眠狀態.

### 目標

評估老人(60歲以上)運動的療效

### 搜尋策略

搜尋MEDLINE (1966 - October 2001); EMBASE (1980 - January 2002), CINAHL ( 1982 - January 2002; PsychINFO 1887 to 2002; The Cochrane Library (Issue 1, 2002); National Research Register (NRR [2002]),搜尋本領域現有參考資料和所有得到的試驗報告. 也有諮詢本領域專家.

### 選擇標準

隨機及對照試驗,以運動治療原發性失眠,受試者80%以上都超過60歲. 有效果或憂鬱的受試者會被排除.

### 資料收集與分析

隨信由電子資料庫中挑出的試驗摘要,以評估是否符合納入條件. 資料依照客觀的或主觀的試驗結果而分開分析.

### 主要結論

僅有43位失眠受試者的試驗. 檢視運動對老年人的療效. 治療後,進入睡眠狀態所需的時間包括男性及女性有輕微的改善和以意識睡眠品質指數及總睡眠時數,都有顯著進步. 睡眠改善效率方面,則沒有顯著改善. 某些個案進步的程度超過病態學層面,但信賴區間太大和小樣本數,使的解釋這些研究結果時要小心.

### 作者結論

因標準治療(安眠藥)的可能副作用,就可以討論陸地上對老人是否該使用其他治療. 運動,雖然不適用於此族群所有人,可增進睡眠和生活品質. 需要研究為老人設計的運動計畫.

### 總結

以運動治療老年人睡眠問題. 睡眠問題隨年老而常見,可能影響個人和家庭生活品質,增加醫療花費. 老年人常接受處方一些藥物治療睡眠問題(包含睡眠問題),其中很多有副作用. 本回顧研究評估為老年人量身訂做的運動療程(快走和中度訓練)的療效. 回顧研究由一個小試驗中,發現一個正面的證據,需要更進一步的研究.

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## Physical exercise for sleep problems in adults aged 60+

Editorial group: Cochrane Developmental, Psychosocial and Learning Problems Group. Publication status and date: Edited (no change to conclusions), published in Issue 1, 2009. Review content assessed as up-to-date: 2 February 2002. Citation: Montgomery P, Dennis JA. Physical exercise for sleep problems in adults aged 60+. Cochrane Database of Systematic Reviews 2002, Issue 4. Art. No.: CD003404. DOI: 10.1002/14651858.CD003404. Copyright © 2009 The Cochrane Collaboration. Published by John Wiley & Sons, Ltd.

Montgomery P, Dennis J



# The Joanna Briggs Institute

<http://www.joannabriggs.edu.au/about/home.php>





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The Joanna Briggs Institute (JBI) is an international not-for-profit, membership based, research and development organisation based within the Faculty of Health Sciences at the University of Adelaide, South Australia. The Institute collaborates internationally with over 70 entities across the world. The Institute and its collaborating entities promote and support the synthesis, transfer and utilisation of evidence through identifying feasible, appropriate, meaningful and effective healthcare practices to assist in the improvement of healthcare outcomes globally.

We provide you with the best available evidence to inform your clinical decision-making at the point of care.

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\* 2011 convention speaker ppt, presentations coming soon

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Available soon on  
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**JBI CoNNECT+ makes your job easier.mov**

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Page last modified 16/11/2011.

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The institute performs rigorous evidence reviews; delivers education and training in EBHC; and conducts evidence based assessments and evaluations of health, aged and social services and policies.

### Our Expertise

Our team has extensive experience in teaching, postgraduate research training and supervision, research, evaluation and consultancy and has staff with expertise in the science and practice of evidence synthesis, knowledge management, and quality improvement and change management from a broad range of disciplines.

### Our Clients

The Institute has conducted consultancy work for the following international groups and organisations:

- Australia-Korea Foundation, Department of Foreign Affairs and Trade, The Australian Government
- Australian Patient Safety and Quality Commission
- Australian Government Department of Health and Ageing
- Australian Diabetes Educators Association
- Australian Government Department of Education, Science & Training
- Australian Government Department of Industry and Science/Leading Management Consultants
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3629	Burns Unit: Preparation for Transfer	Anne Darton	Burns Care			23/08/2010					
2070	Chemotherapy: Infection Management: Febrile Neutropaenia		Cancer Care			24/10/2011					
1841	Peripheral Intravenous Lines: Insertion		Infection Control			24/10/2011					
1843	Peripheral Intravenous Lines: Maintenance		Infection Control			24/10/2011					
3632	Total Parenteral Nutrition		Cancer Care, General Medicine, Surgical Services			23/08/2010					

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Item 1 to 6 of 6



## Strategies to reduce medication errors with reference to older adults

### Recommendations

- Computerised physician order entry (CPOE) can reduce the risk of misreading medication errors in prescriptions. **(Grade A)**
- The use of medical administration records (MAR), or the use of computer adverse drug events/ effects (ADE) detection and alerts

### Information Source

This Best Practice Information Sheet, which updates and supersedes the JBI information sheet of the same title published in 2005,<sup>2</sup> has been derived from six systematic reviews published in 2006-2008.<sup>3-8</sup> Of 6 included systematic reviews, 4 reviews<sup>3,5-7</sup> address only Computerised

staggering with one estimate putting the cost of preventable medication errors in the USA alone between \$17 and \$29 billion per year.<sup>9</sup> In Australia, the cost has been estimated at over \$350 million annually.<sup>10</sup> As medication errors can occur at all stages in the medication delivery process, from prescription by physicians to delivery of medication to the patient by nurses, and



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**Falls and catastrophic thoughts about falls predict mobility restriction in community-dwelling older people: A structural equation modelling approach.**  
Delbaere K - *Aging Ment Health* - 01-JUL-2009; 13(4): 587-92  
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**Building an infrastructure to prevent falls in older Californians: the Fall Prevention Center of Excellence.**  
Rose DJ - *Ann N Y Acad Sci* - 01-OCT-2007; 1114: 170-9  
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**A multifactorial approach to understanding fall risk in older people.**  
Delbaere K - *J Am Geriatr Soc* - 01-SEP-2010; 58(9): 1679-85  
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1. [Adult respiratory distress syndrome > Treatment > Therapeutic Options > Medications And Other Therapies > Chest physical therapy](#)  
 Chest physical therapy is essential for any patient on a ventilator to... ..Assisted coughing can be used to clear secretions after extubation...
2. [Acute ethanol poisoning > Treatment > Patient And Caregiver Issues > Forensic And Legal Issues](#)  
 ...patients may require physical or chemical restraints. As in all such circumstances, the restraints used must be the least...
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1. <a href="#">A prospective study of agitation in a medical-surgical ICU: incidence, risk factors, and outcomes.</a> Full Text  Abstract - Find Similar Articles From NIH/NLM MEDLINE	Jaber S - <i>Chest</i> - 01-OCT-2005; 128(4): 2749-57
2. <a href="#">Further considerations regarding the effects of physical restraint in the intensive care unit.</a> Full Text  PDF - Find Similar Articles From NIH/NLM MEDLINE	Happ MB - <i>Crit Care Med</i> - 01-SEP-2004; 32(9): 1977; author reply 1977
3. <a href="#">Safety in the pediatric ICU: the key to quality outcomes.</a> Review Full Text  Abstract  PDF - Find Similar Articles From NIH/NLM MEDLINE	Rice BA - <i>Crit Care Nurs Clin North Am</i> - 01-DEC-2005; 17(4): 431-40, xi

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1. <a href="#">Safety in the pediatric ICU: the key to quality outcomes.</a> Review Full Text  Abstract  PDF - Find Similar Articles From NIH/NLM MEDLINE	Rice BA - <i>Crit Care Nurs Clin North Am</i> - 01-DEC-2005; 17(4): 431-40, xi

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- National Guideline Clearinghouse (NGC)
  - <http://www.guidelines.gov/>

The screenshot shows the National Guideline Clearinghouse (NGC) website in a Windows Internet Explorer browser window. The browser's address bar displays the URL <http://www.guidelines.gov/>. The website header includes the U.S. Department of Health & Human Services logo and the AHRQ Agency for Healthcare Research and Quality logo, with the tagline "Advancing Excellence in Health Care". The main content area features a search bar with the text "Search the site:" and a "GO" button. Below the search bar, there are three sections: "Find" (Browse guideline summaries by Topic or Organization), "Learn" (Broaden your knowledge with Guideline Resources), and "Compare" (Compare Guideline Syntheses). A sidebar on the left contains a navigation menu with items like Home, Guidelines, Expert Commentaries, and Guideline Syntheses. On the right, there are sections for "New This Week" (November 08, 2010) and "Announcements" (U.S. Food and Drug Administration (FDA) Advisories).



- *American College of Physicians Journal Club (ACPJC)*
  - <http://www.acponline.org/journals/acpjc/jcmenu.htm>

ACP: ACP Journal Club - Windows Internet Explorer

http://www.acponline.org/clinical\_information/journals\_publications/acp\_journal\_club/acp\_journal\_club\_plus.html

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# Agency for Healthcare Research and Quality (AHRQ), formerly known as the Agency for Health Care Policy and Research (AHCPR): Clinical Guidelines and Evidence Reports

<http://www.ahrq.gov/clinic>

The screenshot shows a Windows Internet Explorer browser window displaying the AHRQ Clinical Information Index Page. The browser's address bar shows the URL <http://www.ahrq.gov/clinic/>. The page header includes the U.S. Department of Health & Human Services logo and the AHRQ logo with the tagline "Advancing Excellence in Health Care". A search bar is visible with the text "Search AHRQ" and a "Go" button. The main content area is titled "Clinical Information" and lists several categories: Evidence-based Practice, Outcomes & Effectiveness, Effective Health Care, Technology Assessment, Preventive Services, Clinical Practice Guidelines, and National Guideline Clearinghouse™. A left sidebar contains an "A-Z Quick Menu" and a "Main Menu" with links to various sections. A right sidebar features a "Spotlight" section with news items and a "News & Information" section with links to various resources. The browser's taskbar at the bottom shows several open applications, including Microsoft PowerPoint and a PDF viewer, and the system tray displays the date and time as 15 NOV 1 49 MON.

Health Care: Clinical Information Index Page - Windows Internet Explorer

http://www.ahrq.gov/clinic/

U.S. Department of Health & Human Services

www.hhs.gov

**AHRQ** Agency for Healthcare Research and Quality

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www.ahrq.gov

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## Clinical Information

**Evidence-based Practice**  
Scientific reviews — evidence reports — centers and topics — methodology

**Outcomes & Effectiveness**  
Medical treatment findings — pharmaceutical therapy — outcomes research

**Effective Health Care**  
Comparative clinical effectiveness — pharmaceuticals, devices, and health care services — consumer and stakeholder input

**Technology Assessment**  
New technology reviews — risks & benefits — clinical effectiveness

**Preventive Services**  
U.S. Preventive Services Task Force — Put Prevention into Practice screening — counseling — immunizations — chemoprevention

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Current and archived Clinical Practice Guidelines — beta blockers practice advisory — treating tobacco use and dependence

**National Guideline Clearinghouse™**  
Comprehensive database of evidence-based clinical practice guidelines and related documents with syntheses and comparisons

**A-Z Quick Menu**  
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- Human Growth Hormone Shows Promise Treating Cystic Fibrosis Symptoms
- HHS Awards \$473 Million in Patient-Centered Outcomes Research
- Education Opportunities for Health Professionals

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- Newsroom
- Media Resources
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15 NOV 1 49 MON

## ■ Centre for Evidence Based Medicine (CEBM)

- <http://cebm.jr2.ox.ac.uk/>
- The University of Oxford/Oxford Radcliffe Hospital Clinical School Web site includes links to CEBM within the Faculty of Medicine, a CATbank (Critically Appraised Topics), links to evidence-based journals, and EBM-related teaching materials.

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http://ktclearinghouse.ca/cebm/

colchicum

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### Welcome to the CEBM

The goal of this website is to help develop, disseminate, and evaluate resources that can be used to practise and teach EBM for undergraduate, postgraduate and continuing education for health care professionals from a variety of clinical disciplines. This site also serves as a support for the book entitled, [Evidence-based Medicine: How to Practice and Teach EBM](#) by David L. Sackett, Sharon E. Straus, W. Scott Richardson, William Rosenberg, and R. Brian Haynes.

For evidence-based urology, please go to [The International Evidence Based Urology Working Group](#).

Third Edition  
**Evidence-Based Medicine**  
*How to Practice and Teach EBM*

Sharon E. Straus  
W. Scott Richardson  
Paul Glasziou  
R. Brian Haynes  
Churchill Livingstone

Second Edition  
**EVIDENCE-BASED MEDICINE**

12 NOV 2008 38 FRI

# 搜尋歷程範例

**標題 (title) :**

心臟手術後病人使用非侵入性呼吸器 (noninvasive ventilation (NIV)) 是否改善動脈氧合 (Arterial Oxygenation) ?

**臨床最重要的結論 (clinical bottom line) :** 【建議分級】 【A】

心臟手術後病人使用 **非侵入性呼吸器** 可以改善 **動脈氧合**。

**實證PICO問題：類型** 治療 診斷 預後 其他：

P: 心臟手術後病人

I: 使用非侵入性呼吸器 (noninvasive ventilation , NIV)

C: 未使用

O: 動脈氧合 (Arterial Oxygenation)

**資料庫資源 (database source) :**

Cochrane PubMed ACP Journal Club 其他：

**搜尋關鍵字 (search terms) :** cardiac surgery and NIV or NCPAP and oxygenation

搜尋歷程：

**關鍵字【NIV and oxygenation】** → PubMed → **Limits Activated:** → only items with links to full text, Humans, Male, Female, Randomized Controlled Trial, English, All Adult: 19+ years Hits:9篇

**關鍵字【NCPAP and oxygenation】** → PubMed → **Limits Activated:** → only items with links to full text, Humans, Male, Female, Randomized Controlled Trial, English, All Adult: 19+ years Hits:3篇

選擇二篇符合臨床問題探討心臟手術後病人使用非侵入性呼吸器是否改善動脈氧合？且證據等級較高、出版年代最近，一篇作為主要評審文獻另一篇作為評論引用文獻。

敬請指教

