



Joanna Briggs Institute Evidence-Based Practice Resources

全球領先的實證式實務 (EBP) 資源

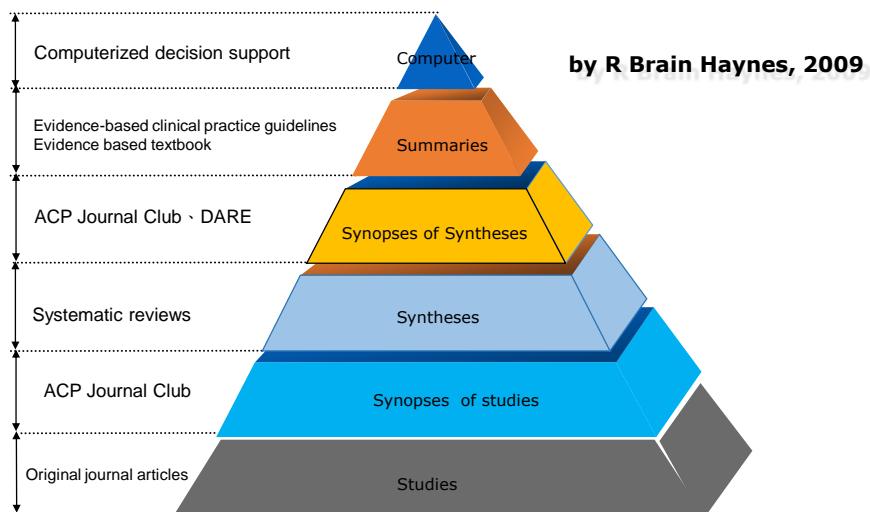
Joanna Briggs Institute (JBI)是怎樣的機構

- 附屬於澳洲阿德雷德大學
- 國際公認實證實務資訊權威機構之一
- 其開發的實證基礎實務模式，被醫療照護產業視為基準指標。
- 與全球 70 多個實證照護中心合作，提供經由研究分析、評價、專家
- 評論編輯而成，同時兼顧研究的質與量之實證實務資訊。

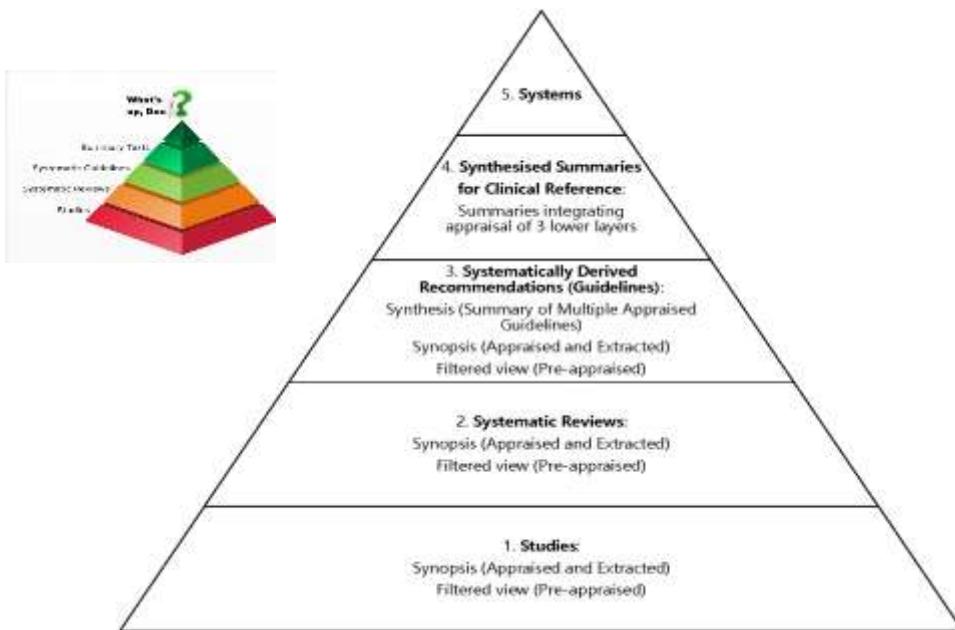
什麼是Evidence-Based Practice

所謂的 Evidence-Based Practice 是指臨床工作者在進行臨床介入決定之前，需透過詳盡地辨認、評估，尋求最適當的臨床證據佐證欲執行之臨床決策以 提高相關臨床決策之有效性，即治療者做介入時在意識上與行為上應該使用當前 最新的研究證據，以支持其決策去治療他們的患者

The “6S” levels of organization of evidence from health care research



Evidence-based healthcare pyramid 5.0 for finding preappraised evidence and guidance.



Brian S Alper, and R Brian Haynes Evid Based Med 2016;21:123-125

JBI EBP Databases主要文獻類型

- A. Evidence Summaries 實證摘錄：針對常見醫療照護主題及作業流程的現有相關國際文獻進行總合性文獻評論。
- B. Evidence-Based Recommended Practices 實證式建議實務：以豐富實證資訊為基礎的照護程序資料庫，針對各種臨床主題說明和/或建議實務
- C. Best Practice Information Sheet 最佳實務資訊表：專為執業醫療照護專業人士編寫的資訊指引表系列。
- D. Consumer Information Sheets 患者衛教資訊：專為醫療照護對象（病患、親友、照護提供者）所設計的照護標準程序摘錄。
- E. Systematic Reviews 系統式評論：由具備專業素養的JBI審閱人員彙編的完整國際研究文獻系統式評論典藏。

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Search Journals Books Multimedia My Workspace Links EBP Tools What's New

View Search

Search History

1 Family and stroke rehabilitation (including Limited Related Terms)

2 Int'l. to five sites

Results Type Actions Annotations

1945 Basic Display Results More ▾

36 Advanced Display Results More ▾

Save All Edit Create RSS View Saved Email All Search History Copy Search History Link Copy Search History Details

SUMMARY：整理相關處置重點文獻，並給予證據等級資訊

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search

1 Resource selected | Hits | Details | JBI EBP Database Current as April 26, 2021

Limits (0/0) Search

Full Text Include Multimedia Include Related Terms

Publication Year

Publication Types

- Evidence Summaries
- Best Practices Information Sheets
- Systematic Review Protocols
- Evidence-Based Practice
- Systematic Reviews

Subject Area Nodes

- Aged Care
- Burns Care
- Cancer Care
- Cardiovascular Care
- Chronic Disease

Additional Limits Edit Limits

Email Document

JBI-document

JBI EVIDENCE SUMMARY

POST STROKE REHABILITATION: NUTRITION MANAGEMENT

Search date
10/02/2020

Author
Ebony Piot BHSc, BPsych

Publication date
08/04/2021

Question
What is the best available evidence for nutrition management of stroke inpatients in the rehabilitation phase?

Clinical Bottom Line
Stroke is one of the leading causes of death and disability in adults and the risk of stroke increases with age. Effects of stroke, such as swallowing difficulties and cognitive dysfunction, can leave stroke patients vulnerable to malnutrition and dehydration which can lead to poor outcomes. Medical nutrition therapy, tailored to meet individual needs, is an important aspect of rehabilitation.¹

Clinical Bottom Line

Stroke is one of the leading causes of death and disability in adults and the risk of stroke increases with age. Effects of stroke, such as swallowing difficulties and cognitive dysfunction, can leave stroke patients vulnerable to malnutrition and dehydration which can lead to poor outcomes. Medical nutrition therapy, tailored to meet individualized needs, is an important aspect of rehabilitation.¹

- Clinical guidelines recommend all stroke patients are screened early for dysphagia, prior to oral intake, and where indicated receive a thorough assessment of swallowing function. For stroke patients who are malnourished or at risk of malnutrition, medical nutrition therapy is recommended. An individualized nutrition care plan should be developed and monitored by a dietetic professional. (Level 5)
- Clinical guidelines recommend all stroke inpatients are screened for malnutrition upon admission and rescreened weekly.² (Level 5)
- Due to the risk of subsequent stroke, clinical guidelines recommend consideration of secondary prevention strategies. All stroke survivors should be referred to a dietitian for the provision of individualized dietary advice.
- These guidelines for stroke management also recommend goal setting during rehabilitation. This process should take a collaborative approach and include the stroke survivor, their families and carers, and the rehabilitation care team. Clear communication and documentation of well-defined and specific goals is recommended.³ (Level 5)

Evidence supports the use of the Malnutrition Universal Screening Tool (MUST) to identify stroke patients who may benefit from nutritional support. A statistically significant and graded association between risk of

Characteristics Of The Evidence

This evidence summary is based on a structured search of the literature and selected evidence-based health care databases. The evidence in this summary comes from:

- Clinical guidelines specific to the management of stroke.^{1,2,3}
- A prospective observational study of 543 stroke patients.⁴
- AN RCT of 102 undernourished patients admitted to a stroke rehabilitation service.⁵
- Systematic review of 33 RCTs involving 6,779 dysphagic and non-dysphagic stroke patients, average age 71 years.⁶
- A prospective cohort study of 2,570 patients admitted to hospital with ischemic stroke and 573 with hemorrhagic stroke divided into dehydrated and non-dehydrated groups.⁷

Best Practice Recommendations

- Dietitians should be involved in recommendations related to medical nutrition therapy for stroke patients who are malnourished or at risk of malnutrition. An individualized nutrition care plan should be developed and monitored by a dietetic professional. (Grade B)
- All stroke patients should be screened for dysphagia prior to commencement of oral intake. Safe swallowing advice and appropriate dietary modifications should be introduced early for stroke patients with swallowing difficulties with input from a dietitian. Early initiation of tube feeding, when indicated, is recommended (Grade B)
- All stroke patients should be screened for malnutrition upon admission and rescreened weekly for malnutrition using a validated malnutrition screening tool. (Grade B)
- Routine oral supplementation is not recommended for non-dysphagic stroke patients who are well

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View Search

Search History (1)

1. Family and stroke rehabilitation (including Limited Related Terms) 1

2. limit 1 to five items 2

3. limit 2 to evidence summaries 3

Results Type Actions Annotations

1945 Basic Display Results More ▾

25 Advanced Display Results More ▾

3 Advanced Display Results More ▾

Save Remove Combine with Save All Edit Create RSS View Search

Email All Search History Copy Search History Link Copy Search History Details

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search

1 Resources selected (this (2))

JBI EBP Database Current as April 26, 2021

Search 3

Limits (1) Full Text Publication Year Abstracts

Publication Topic Best Practice Information Sheets Evidence Summaries Recommended Practices Clinical Review Protocols Systematic Reviews Additional Limits Edit Limits

Subject Area Nodes Aged Care Burns Care Cancer Care Cardiovascular Care Chronic Disease

2 Recommended Practices

jb-document

JBI RECOMMENDED PRACTICE

STROKE: OCCUPATIONAL THERAPY FOR ACTIVITIES OF DAILY LIVING

Publication date
10/12/2019

Equipment

- Patient's records
- Activities of Daily Living (ADL) assessment instrument
- Appropriate environment for ADL assessment and retraining

Recommended Practice

Stroke can have a profound impact on a person's way of life, especially on their capacity to perform many of the activities that are necessary and relevant in daily living. Occupational therapy interventions are an integral part of stroke rehabilitation and aim to improve a person's daily living skills and optimize their independence and safety in performing personal and instrumental ADL as well as leisure and vocational activities. Personal ADL include those activities that enable us to maintain personal level of care such as feeding, bathing, dressing and grooming. Instrumental activities are those that are necessary to enable us

Recommended Practice

Stroke can have a profound impact on a person's way of life, especially on their capacity to perform many of the activities that are necessary and relevant in daily living. Occupational therapy interventions are an integral part of stroke rehabilitation and aim to improve a person's daily living skills and optimize their independence and safety in performing personal and instrumental ADL as well as leisure and vocational activities. Personal ADL include those activities that enable us to maintain personal level of care such as feeding, bathing, dressing and grooming. Instrumental activities are those that are necessary to enable us to stay productive both at home and in the community including tasks of meal preparation, housework, shopping and finance management.

When working with persons who had stroke occupational therapy assessments and interventions should be based around the person's goals for occupational performance. Goal setting is a collaborative process between the occupational therapist, the person and significant others (e.g. family/carers), where goals are negotiated and agreed on and help establish an intervention plan. The goals should be specific, measurable, attainable, realistic and timely (SMART).

ASSESSMENT:

- Occupational therapists should gain a thorough understanding of the person's previous level of occupational performance, roles, home environment and desired goals through the completion of an initial interview.
- Occupational therapists should gain an understanding of the person's current level of occupational performance and occupational performance components (e.g. upper limb strength and coordination, vision, cognition, perception, mobility and transfer) through direct observation in relevant occupations including personal care, instrumental activities of daily living, vocation and leisure as appropriate for

Occupational Health and Safety Considerations





The author declares no conflicts of interest in accordance with International Committee of Medical Journal Editors (ICMJE) standards.

How to cite: JBI Recommended Practice. Stroke - Occupational Therapy for Activities of Daily Living. The JBI DBP Database. 2019; JBI00759.

For details on the method for development see Munn Z, Lockwood C, Moher D. The development and use of evidence summaries for point-of-care information systems: A streamlined rapid review approach. *Worldviews Evid Based Nurs*. 2018;20(2):131-4.

Note: The information contained in this Recommended Practice must only be used by people who have the appropriate expertise in the field to which the information relates. The applicability of any information must be established before relying on it. While care has been taken to ensure that this Recommended Practice summarizes available research and expert consensus, any loss, damage, cost or expense or liability suffered or incurred as a result of reliance on this information (whether arising in contract, negligence, or otherwise) is, to the extent permitted by law, excluded.

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View Search

Search History (1)

1. Family and stroke rehabilitation (including Limited Related Terms)

2. Limit 1 to five stars 1

3. Limit 2 to evidence summaries

4. Limit 2 to recommended practices

Results Type Actions Annotations

1945 Basic Display Results More ▾

25 Advanced Display Results More ▾

8 Advanced Display Results More ▾

2 Advanced Display Results More ▾

Save Remove Combine with AND OR

Save All Edit Create RSS View Search

Email All Search History Copy Search History Link Copy Search History Details

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search

F Resource selected | Edit | Change
JBI EBP Database Current as April 28, 2021

3

+ Limits (closed) Include Multimedia Include Related terms

Full Text Abstracts

Publication Year: Publication Type: Subject Area Notes:

2 **Information Sheet** **Best Practice** **Recommenadations** **Systematic Review Protocols** **Descriptive Reviews**

Aged Care Burns Care Cancer Care Cardiovascular Care Clinical Disease

Additional Limits | Edit Limits

Information Sheet最佳實務資訊表：為執業醫療照護專業人士編寫的資訊指引

Email Download

JB023156.pdf

JOANNA BRIGGS INSTITUTE Rehabilitation

Best Practice
Evidence-based information sheets for health professionals

Experiences of stroke survivors, their families and unpaid carers in goal setting within stroke rehabilitation

Recommendations*

- Individual practitioners and providers of inpatient stroke rehabilitation services should reflect upon and evaluate the impact they have on goal setting interactions. They should endeavor to positively encourage and empower the stroke survivor. They should get to know the person, listening to them and finding out "who they are", in order to develop meaningful goals (together) that are individualized to the stroke survivor. (Grade B)



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▼ Search History (1)

	Results	Type	Actions	Annotations
1 - Family and stroke rehabilitation (including Limited Related Terms)	145	Basic	Display Results More ▾	<input type="checkbox"/>
2 - limit 1 to five stars	35	Advanced	Display Results More ▾	<input type="checkbox"/>
3 - limit 2 to evidence summaries	8	Advanced	Display Results More ▾	<input type="checkbox"/>
4 - limit 2 to recommended practices	2	Advanced	Display Results More ▾	<input type="checkbox"/>
5 - limit 2 to best practice information sheets	1	Advanced	Display Results More ▾	<input type="checkbox"/>

Save Remove Combine with

Save All Edit Create RSS View Saved Email All Search History Copy Search History Link Copy Search History Details

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search
1 Resource selected | Edit | Change
JBI EBP Database Current as April 28, 2021

2 3
Full Text
Publication Year
Publication Type: Recommended Practices, Systematic Review Protocols, Systematic Reviews, Letters to the Editor, Methodology
Subject Area Nodes: Aged Care, Burns Care, Cancer Care, Cardiovascular Care, Chronic Disease

Systematic Reviews由具備專業素養的JBI審閱人員彙編的完整國際研究文獻系統式評論

Email Journalist

Thomson

1 / 36 | - 167% +

SYSTEMATIC REVIEW

Experiences of stroke survivors, their families and unpaid carers in goal setting within stroke rehabilitation: a systematic review of qualitative evidence

Anna Lloyd^{1,2} • Katrina Bennigan^{2,5} • Thavapriya Sugavanam^{1,4} • Jennifer Freeman^{2,5}

¹Wardon Neurological Rehabilitation Centre, Royal Devon and Exeter NHS Foundation Trust, Exeter, United Kingdom, ²School of Health Professions, University of Plymouth, Devon, United Kingdom, ³Wolfson Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, University of Oxford, Oxford, United Kingdom, ⁴National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care South West Peninsula (PenCLAHRC), Centre for Clinical Trials and Population Studies, Plymouth University, Plymouth, United Kingdom, and ⁵The University of Plymouth Centre for Innovations in Health and Social Care: a Joanna Briggs Institute Centre of Excellence

ABSTRACT

Objective: The objective of the review was to synthesize the best available qualitative evidence regarding the experiences of stroke survivors, their families and unpaid carers, about goal setting within stroke rehabilitation.

Introduction: Clinical guidelines recommend person-centered goal setting in stroke rehabilitation but many barriers exist to its implementation. Individual differences and preferences, of both the stroke survivor and practitioner, may influence involvement in goal setting. A stroke survivor's relationship with close family members and unpaid carers can be influential and could influence rehabilitation outcomes and social settings.

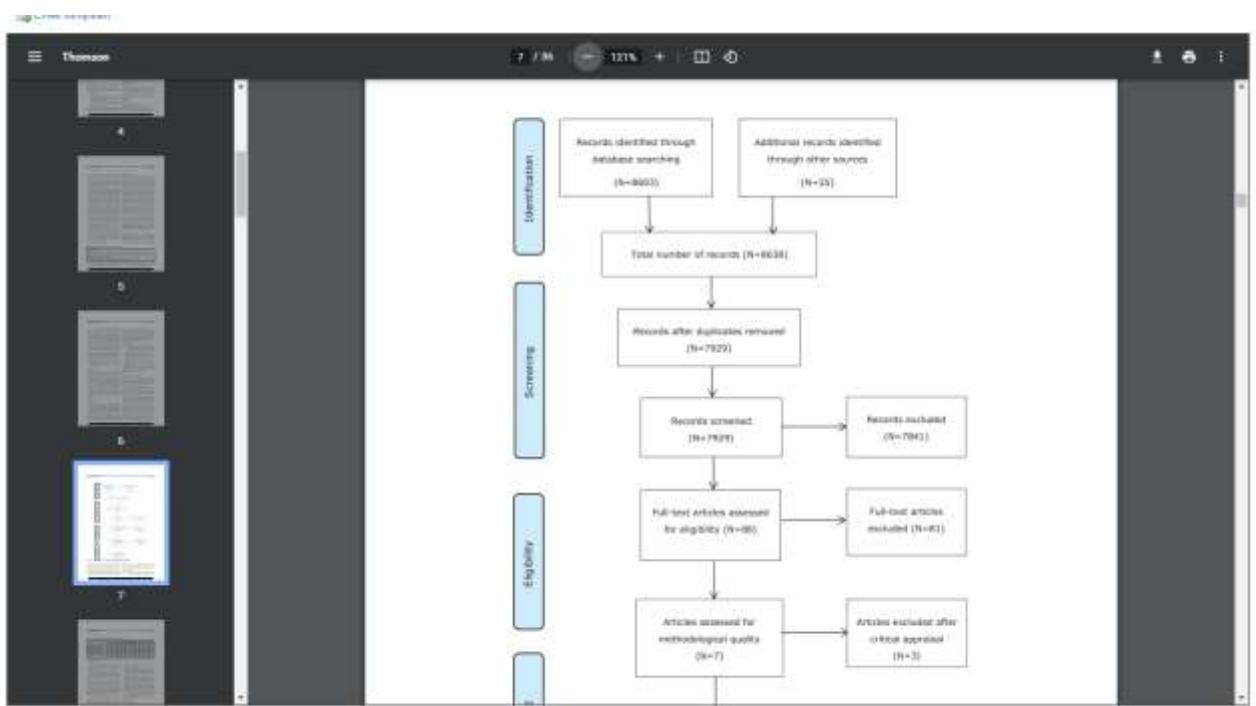


Table 2: Methodological assessment of included articles

Citation	Question									
	1	2*	3*	4*	5	6*	7*	8	9	10
Brown <i>et al.</i> (2014) ²²	N	U	Y	Y	Y	N	U	Y	U	Y
Levack <i>et al.</i> (2011) ¹⁷	Y	Y	Y	Y	Y	N	U	Y	U	Y
Martin <i>et al.</i> (2015) ²³	Y	Y	Y	Y	Y	N	U	Y	N/A**	Y
Rosewilliam <i>et al.</i> (2016) ⁴²	U	Y	U	U	U	U	Y	Y	Y	Y
%	50%	75%	75%	75%	75%	0%	25%	100%	25%	100%

* Yes; N: No; U: Unclear; N/A: Not Applicable
 *Dependability questions.
 **NA rating given as the authors stated in the paper that the study had been deemed by a Regional Ethics Committee as sufficiently low risk as to not require ethics committee review.

Of the included studies, all achieved 2 or 3 marks out of 5 for dependability questions (Q2–4, 5, 6); no study included a clear statement locating the researcher culturally or theoretically and only one⁴² clearly addressed the influence of the researcher on the research. Two studies had clearly stated the philosophical perspective and specific qualitative methodology from which to determine congruence.^{17,23} Two studies did not state their philosophical perspective^{22,42} and congruence between methodology and research aim,¹⁷ or the methodology, methods and data analysis⁴² were not clear. In all included studies, participants' voices were well represented and conclusions grounded in (only the stroke survivor data was included in this systematic review).

- Martin *et al.*²³ used qualitative semi-structured interviews with people with severe Acquired Brain Injury (ABI), including three stroke survivors (only the stroke survivor data was included in this systematic review), residing in a New Zealand residential care setting (n=5), to explore life goal planning in rehabilitation from an interpretive phenomenological perspective.
- Rosewilliam *et al.*⁴² used multiple qualitative methods of data collection to explore whether the current goal setting practice in acute stroke rehabilitation was patient-centered, and what

Appendix I: Search strategy

Database searches

Search for published studies: (Start of database until 16 th November 2017.)		Search for unpublished studies: (Start of database until 16 th November 2017.)	
Name	Hits	Name	Hits
MEDLINE	1408	Open Grey	313
Embase	8063	ProQuest Conference Papers and Proceedings	1*
CINAHL	362	Google Scholar	1410**
AMED	164	Social Care Online (published & unpublished studies)	See earlier
BNI	65	HMIC (published and unpublished studies)	See earlier
Social Care Online (published and unpublished studies)	32	Author search: Databases MEDLINE, CINAHL (Start of database until 16 th November 2017)	
HMIC (published and unpublished studies)	11	Jones, Fiona	113
OT seeker	13	Levack, William	58
PEDRO	69	Rosewilliam, Sheeba	9
		Scobbie, Leslie	19

Unpublished searches conducted in November and December 2017.
 The initial search of ProQuest Conference Papers and Proceedings only produced one paper, which was not relevant to this review, and the database was not fully available, so not excluded from the updated search.
 *Database excluded after screening 30 papers as no-relevant references were identified.

JBI EBP Databases 十四大主題

Aged Care 老年保健	Burns Care 燒燙傷護理
Cancer Care 癌症護理	Infection Control 感染控制
Chronic Disease 慢性症護理	Mental Health 心理健康
Diagnostic Imaging 影像診斷	Midwifery Care 助產護理
Emergency & Trauma 急診及創傷	Rehabilitation 復原照護
General Medicine 全科醫學	Surgical Services 外科服務
Health Management & Assessment 健康管理與評估	Wound Healing and Management 傷口癒合和管理

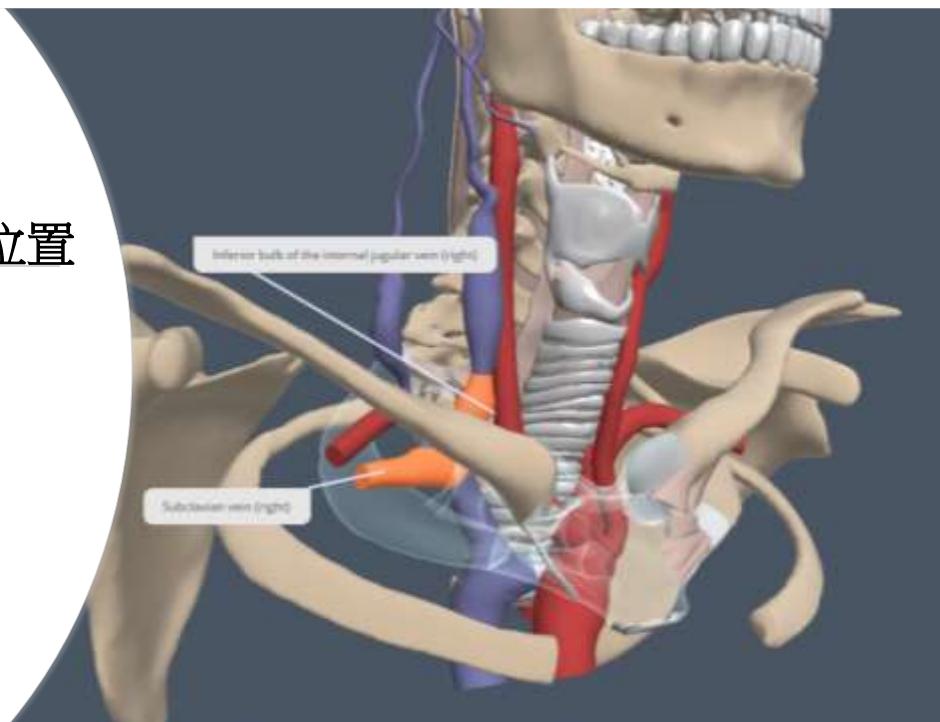
JBI 的資源特色

- JBI EBP 清楚的提供醫療照護人員可以立即運用在臨床上的作法
- 非提供冗長的治療方式比較與研究過程
- 在國際醫療單位間具豐富使用經驗，能確實地提高工作上的效率與病患安全。

為什麼需要 JBI Evidence-Based Practice

- 高品質的內容可以加強醫療照護人員尋找最新實證資源的能力，協助其實務工作
- 根據豐富實證資訊，可以確保最高質量的護理照護與患者治療效果
- 臨床實務指引，藉此改善病患治療結果，提高臨床照護能力和患者滿意度
- 減少健康照護醫療的地區性差異
- 降低醫療照護人員周轉率，降低醫療成本

中央靜脈導管位置



Basic Search

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search

1 Resource selected | Edit | Change
JBI EBP Database - Current to January 13, 2021

輸入關鍵字

Full Text Abstracts Publication Year Publication Types Subject Area Nodes

Best Practice Information Sheets Evidence Summaries Recommended Practices Systematic Review Protocols Systematic Reviews Aged Care Burns Care Cancer Care Cardiovascular Care Chronic Disease

Additional Limits Edit Limits

輸入關鍵字

篩選文獻類型及領域

Print Email Export + My Projects Home Selected Options

You searched:
central versus catheter infection prevention (Including Limited Related Terms)

Search terms used:
infection
infectious disorder
infectious diseases
infectious disease
prevention
prevention
central versus catheter
central line
central intravenous catheter
central versus line

輸入同義字

1. CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTION: PICC VS CVC.
Najat Chikwadi [MBBS, MPH]
[Evidence Summaries]
AN: JBI10830
Year of Publication
2019
Cite + My Projects + Annotate

Complete Reference
JBI Database PDF
JBI Topic Request

OPEN ACCESS RESULTS
Central Line Associated Blood Stream Infection Rate after Intervention and Comparing Outcome with National Healthcare Safety Network and International...
Bukhari, SZ; Banjar, A; Baghdad: BS-Below, BA; Ashraf, AM; Hassan, WM
Effect of intensive Education and Training of Nurses on Ventilator-associated Pneumonia and Central Line-associated Bloodstream Infection Incidence in...
Saifi, Neera (Basit); Marisha Gandhi, Komal Kaur, Kubeer Birni, Vikas Yadavendrapudi, Lakshminarayana N.
Central line complications
Kontos, Craig Lee, Kathryn C Hughes, Gwendolyn D Finstenberg, Michael B
International Nosocomial

2. HEMODIALYSIS: CENTRAL VENOUS CATHETER LOCK SOLUTIONS (ANTICOAGULANT).
See, Kymberly Kyawt [PhD, MNSc, BNSc, Dip Med Ed].
[Evidence Summaries]
AN: JBI10491
Year of Publication
2017
Cite + My Projects + Annotate

Complete Reference
JBI Database PDF
JBI Topic Request

Search Returned:
63 text results
Sort By:
Score
Customize Display
Filter By

Advance Search

Basic Search | Find Citation | Search Tools | Search Fields | **Advanced Search** | Multi-Field Search

1 Resource selected | Edit | Change
JBI EBP Database - Current to January 13, 2021

Enter keyword or phrase Keyword Author Title Journal
(* or \$ for truncation)

central venous catheter and infection prevention

Limits (2008) Include Multimedia

Full Text Abstracts

Publication Year: -

Publication Types:

- Best Practice Information Sheets
- Evidence Summaries
- Recommended Practices
- Systematic Review Protocols
- Systematic Reviews

Subject Area Nodes:

- Aged Care
- Burns Care
- Cancer Care
- Cardiovascular Care
- Chronic Disease

Additional Limits | Edit Limits

Print | Email | Export | My Projects | Keep Search | To search Open Access content on Ovid, go to Basic Search

Options | All | Range | Clear | 10 Per Page | 1 | Go | Next >

You searched:

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Search Journals Multimedia My Workspace EBP Tools +

My Account Admin Tools JBI Advice Support & Training Help Feedback Log Off

View Saved

Search History (4):

	Results	Type	Actions	Annotations
1 older falls control (including Limited Related Terms)	126	Basic	Display Results More	
2 older falls control exp. (exp=term, heading word, subject area node, title)	9	Advanced	Save More	
3 (older and falls control) exp. (exp=term, heading word, subject area node, title)	9	Advanced	Save More	
4 (older or falls control) exp. (exp=term, heading word, subject area node, title)	119	Advanced	Display Results More	

Save Remove Combine with AND OR

Save All Edit Create RSS View Saved

Basic Search | Find Citation | Search Tools | Search Fields | **Advanced Search** | Multi-Field Search

1 Resource selected | Edit | Change
JBI EBP Database - Current to June 24, 2020

Enter keyword or phrase Keyword Author Title Journal
(* or \$ for truncation)

central venous catheter and infection prevention

Limits (use) Include Multimedia

Publication Year: -

整合查詢多個資料庫

The screenshot shows the Ovid EBP Tools interface. A modal window titled 'Select Resource(s) to search:' is open. Under the 'All Resources' section, two items are selected and highlighted with a red box: 'Jamaica Briggs Institute EBP Database - Current to June 24, 2020' and 'Ovid MEDLINE(R) and Excerpta Medica® (EMBASE)® Ahead of Print, In-Process & Other Non-Indexed Citations, Daily and Versioned(R) TM to June 24, 2020'. The 'Actions' column for these resources includes 'Display Results' and 'More'.

The screenshot shows the Ovid search history. A query for 'central venous catheter infection prevention' has been run. The results table shows 3819 items from the 'JBI EBP Database - Current to January 13, 2021' and 3758 items from 'Ovid MEDLINE(R) All - 1946 to January 25, 2021'. The JBI EBP Database entry is highlighted with a red box. A callout box points to this entry with the text '同時查詢JBI(次級文獻)& MEDLINE(初級文獻)'.

Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search

2 Resources selected | Edit | Delete
Jessica Briggs Institute SBB Database • Current to June 30, 2020, **Ovid MEDLINE(R) and Epis Ahead of Print, In-Process & Other Non-Indexed Citations, Daily and Versions(R)** • Last updated June 30, 2020

Enter keyword or phrase:
 * or # for truncation

Keyword Author Title Journal

Limits: (10,647) Include Multimedia

Abstracts Full Text Human Pharmacological Actions English Language
 No Language Specified Mammals Latest Update Review Articles
 Structured Abstracts COVID-19

Publication Year:

Publication Types: Subject Area Index:
 Best Practice Information Sheets Aged Care
 Evidence Summaries Burn Care
 Recommended Practices Cancer Care
 Systematic Review Protocols Cardiovascular Care
 Systematic Reviews Chronic Disease

Additional Limits: Edit Limits

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Search Information: All Range Clear 10 Per Page 1 97 Next

1. Nursing students' experiences with clinical placement in residential aged care facilities: a systematic review of qualitative evidence.
 Kuegler-Ritter, Lisa, McCloskey, Ross, Donovan, Cindy, Wilmar, Linda, Goddard, Alisa.

Abstract References Complete References

Albanian English Language Core Clinical Journals (AIM)
 English Language Full Text Mammals
 Humans Latest Update Pharmacological Actions
 No Language Specified Ovid Full Text Available Review Articles
 Structured Abstracts COVID-19

Publication Year:

To select or remove multiple items from a list below, hold down the Shift, Ctrl, or 'Alt/Option' key while selecting.

Age Groups: 年齡

- All Infant (birth to 23 months)
- All Child (0 to 18 years)
- All Adult (19 plus years)
- Newborn Infant (birth to 1 month)
- Infant (1 to 23 months)

Clinical Queries:

- Reviews (maximizes sensitivity)
- Reviews (maximizes specificity)
- Reviews (best balance of sensitivity and specificity)
- Therapy (maximizes sensitivity)
- Therapy (maximizes specificity)

Languages:

- Afrikaans
- Albanian
- Arabic
- Armenian
- Azerbaijani

Special Ovid Filters for MEDLINE:

- Adverse effects
- Adverse effects - focussed
- Adverse effects - medical devices

臨床應用

Animal Types: 臨床應用

- Cats
- Cattle
- Chick Embryo
- Dogs
- Goats

Journal Subsets:

- AIDS/HIV Journals
- Core Clinical Journals (AIM)
- Bioethics Journals
- Biotechnology Journals
- Communication Disorders Journals

Publication Types: 期刊主題

- Best Practice Information Sheets
- Evidence Summaries
- Recommended Practices
- Systematic Review Protocols
- Systematic Reviews

Star Ranking: 文獻類型

- ***** Five Stars (0)
- **** Four Stars (0)
- *** Three Stars (0)

MEDLINE特有的篩選條件

The screenshot shows a search results page from Ovid MEDLINE. The search term is "Nursing students' experiences with clinical placement in residential aged care facilities: a systematic review of qualitative evidence". The results are displayed in two sections:

- Result 1:** "Nursing students' experiences with clinical placement in residential aged care facilities: a systematic review of qualitative evidence..." by Keeling-Burke, Lisa; McGehee, Rose; O'Dowd, Cindy; Whittaker, Michelle; Lutka, Goodhue, Alex. From the Journal of Clinical Nursing, Volume 20, Issue 14, pages 1988-1998, 2011. It includes links for Abstract Reference, Complete Reference, Document Delivery, JBI Database PDF, and JBI Topic Report.
- Result 2:** "Teaching strategies and activities used for students' clinical placement in residential-aged care facilities: a scoping review protocol." by McGehee, Rose; Keeling-Burke, Lisa; O'Dowd, Cindy; Whittaker, Michelle; Cook, Jessica; Ugnat, Nicholas. From the Journal of Clinical Nursing, Volume 20, Issue 14, pages 1988-1998, 2011. It includes links for Abstract Reference, Complete Reference, Document Delivery, JBI Database PDF, and JBI Topic Report.

On the left, there is a sidebar for "Search Information" and "Filter By" (Years: All Years). On the right, there are buttons for "Export" (highlighted with a red box), "Abstract Reference", "Complete Reference", "Document Delivery", "JBI Database PDF", and "JBI Topic Report". A large blue box labeled "書目輸出" (Output) surrounds the "Export" button and the reference links. A red arrow points from the "Export" button to the "書目輸出" box.

The screenshot shows a search results page from Ovid MEDLINE. The search term is "The effectiveness of modified, group-based CBT for dementia worry among Chinese elders". The results are displayed in two sections:

- Result 1:** "The effectiveness of modified, group-based CBT for dementia worry among Chinese elders." by An Q, Wang K, Ren F, Zhang A. From the Journal of Alternative and Complementary Medicine, Volume 27, Issue 1, pages 76-84, 2020 May 22. It includes links for Abstract Reference, Complete Reference, Full Text (highlighted with a red box), and Internet Resources.
- Result 2:** "Report of 2 Pediatric Cases With Li-Fraumeni Syndrome Related Malignancy in a Family." by Takeoka M, Toyota H, Hayayama J, Suzuki N, Hasuda R, Amano K, Maruno S, Hayayama M. From the Journal of Pediatric Hematology/Oncology, Volume 2009, Issue 16. It includes links for Abstract Reference, Complete Reference, Document Delivery, and Internet Resources.

On the left, there is a sidebar for "Search Information" and "Filter By" (Years: All Years). On the right, there are buttons for "Full Text" (highlighted with a red box), "Internet Resources", "Cited Full Text" (highlighted with a red box), and "Complete Reference". A large blue box labeled "全文取得" (Full Text Acquisition) surrounds the "Full Text" and "Cited Full Text" buttons. A red arrow points from the "Full Text" button to the "全文取得" box.

醫學標題MeSH的應用

The screenshot shows the Ovid MEDLINE(R) Advanced Search interface. At the top, there are two search boxes: the first contains 'Central Venous Catheters' and the second contains 'INFECTION'. Below these are buttons for 'Save', 'Remove', 'Combine with: AND', 'OR', 'Save All', 'Edit', 'Create RSS', and 'View Saved'. The search results table has two rows: the first row shows '2' results for 'Randomized controlled trial' or 'systematic reviews' with 486 items; the second row shows '3' results for 'Central Venous Catheters' with 2499 items. At the bottom of the search interface, the 'Advanced Search' tab is highlighted.

The screenshot shows the Ovid Subject Heading tree for the term 'Central Venous Infection'. The main heading is 'Central Venous Infection' (感染主標題). The tree includes terms like 'Central Venous Catheters', 'Catheterization_Central Venous', 'Humans', 'Bacillus', 'Female', 'Male', 'Adult', and 'Catheter_Infusing'. A red box highlights the 'Central Venous Infection' heading. To the right, there is a table with columns for 'Select', 'Subject Heading', 'Explode', 'Focus', and 'Scope'. The 'Scope' column contains blue circular icons. At the bottom, there is a 'Hints' section with instructions: 'Trigger a Subject Heading link to view its tree - related terms that are more general and more specific.' and 'Select the Explode box if you wish to retrieve results using the selected term and all of its more specific terms.'

Search Journals Books Multimedia My Workspace EBP Tools What's New

Subheadings for: Catheter-Related Infections

Combine with: OR Continue

Include All Subheadings (5261)
-- or choose one or more of these subheadings --

id - Blood (102)
 id - Cerebrospinal Fluid (7)
 id - Chemically Induced (2)
 id - Classification (18)
 id - Complications (179)
 id - Congenital (1)
 id - Diagnosis (693)
 id - Diagnostic Imaging (29)
 id - Drug Therapy (228)
 id - Economics (150)
 id - Embryology (1)
 id - Enzymology (1)
 id - Epidemiology (1784)
 id - Ethnology (9)
 id - Ecology (265)
 id - Genetics (9)
 id - History (1)

Central Venous Infection 感染副標題，分類關於中央靜脈導管感染相關文獻

im - Immunology (34)
 im - Metabolism (11)
 im - Microbiology (1530)
 imo - Mortality (197)
 insu - Nursing (103)
 ips - Parasitology (2)
 ips - Pathology (92)
 ips - Physiotherapy (14)
 ipc - Prevention & Control (2236)
 ips - Psychology (10)
 issu - Surgery (29)
 itb - Therapy (210)
 itm - Transmission (26)
 itz - Urine (14)
 itv - Veterinary (10)
 ivi - Virology (6)

選擇跟預防相關的文獻

Ovid PICO Widget



PICO篩選工具可以協助您快速在Ovid Medline 及 Embase 資料庫查詢您的PICO問題。請注意這是用於協助您建立PICO問題的入門工具，並不是用於取代更詳細、精準的進階查詢。

Example PICO: P=Teenagers who smoke, I=Brief intervention, C=None, O=Outcome.

PICO範例: 利用 vaccination 疫苗 (I) Prevention 預防 (O) adults 成人 (P) whooping cough 百日咳 (P)

*並非所有問題都一定有相對應PICO元素，在這個範例中 "C" 就沒有被選取。

P: Patient, Population, Problem or Disease

P: 病患/人口/問題/疾病 => 病患是誰、有什麼問題

central venous catheter infection prevention

I: Intervention or Issue

治療方式或問題 => 我們可以做些什麼來處置、或病患正面臨的問題

intervention or issue

C: Outcome

預期效果 => 會有什麼預期結果發生

Outcome

C: Comparison Intervention or Issue

治療或問題的對比組 => 我們用什麼方式與前述處置方式做比較

intervention or issue

Publication Type 出版類型

Publication Year 出版年代

Randomized Controlled Trial

Between yyyy AND yyyy'

Randomized Controlled Trial



Systematic Reviews



Age Groups 年齡

Preschool Child (2 to 5 years)



Preschool Child (2 to 5 years)



What is SUMARI ?

The System for the Unified Management, Assessment and Review of Information

- 新的JBI SUMARI 目的在促進整個審查過程, 包含：從開始建置、團隊管理、研究選擇、內容評估、數據匯整、數據整合和編寫系統審查報



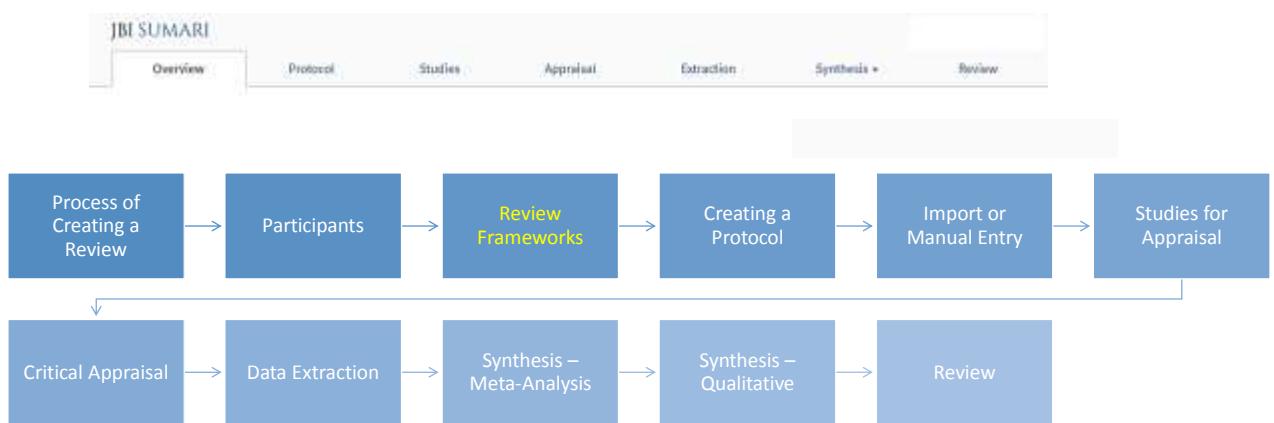
What has changed?

- JBI SUMARI 支援完整的閱審流程，有效的管理團隊並產出相關Review文獻資料。
- 線上平台應用，不需要安排其他工具，新的SUMARI同時支援多種Review類型



SUMARI 建置流程

- The System for the Unified Management, Assessment and Review of Information



Project - Process of Creating a Review

Project開始, 決定專案負責人及審閱者(可以是單人/多人)
The process of creating a systematic review involves the phases listed across the top of the screen; it would involve the project owner/author and at least one other reviewer. The project owner first creates the Project and invites one or more participants

[+ Create Project](#)

Project - Participants

Project Owner:

James Taylor	james.taylor@wolterskluwer.com	Change
--------------	--------------------------------	------------------------

Pending (2)

Allan Finn	Allan.Finn@wolterskluwer.com	Select role...	Resend	Remove
Laura Jennings	laura.jennings@wolterskluwer.com	Reviewer	Resend	Remove

Name: _____ Email address: _____ [Send invite](#)

Project – Creating a Protocol

The screenshot shows a search result for "Using Hypnosis for Smoking Cessation". The left sidebar has a red arrow pointing to the "Search filters" section, which includes categories like Title, Authors, and Date. The main content area shows the title, authors (Miles H, James Taylor, Luisa Jimenez), and abstract. Below the abstract is a "Background" section with a note about hypnosis as a method for smoking cessation. The "Review Question" section asks about the effectiveness of hypnosis in smoking cessation. The "Methods" and "Inclusion Criteria" sections are also visible.

Using Hypnosis for Smoking Cessation

Authors

Miles H, James Taylor, Luisa Jimenez (View author details)

Background

Hypnosis is widely promoted as a method for aiding smoking cessation. It is proposed as an unchartered technique to assist the smoker to smoke or smother their self-to-self. This review of 12 studies evaluate the efficacy of hypnosis for smoking cessation.

Review Question

The question of this review is related to the effectiveness of hypnosis in smoking cessation. [Update presented: 1](#)
[Add primary to queue](#)

Methods

Inclusion Criteria

Project – Creating a Protocol

Add Citations – Import or Manual Entry

The screenshot shows the EndNote interface. On the left, there's a library view window. In the center, a 'New Citation' dialog box is open, displaying a citation for 'Cross-Topic Learning for Work Prioritization in Systematic Review Creation and Update'. Below it, a 'Citations' list window shows three other citations: 'Cross-Topic Learning for Work Prioritization in Systematic Review Creation and Update' (2006), 'Mg, K. H.; Pei, W., C. G.: Writing a systematic review' (2010), and 'Sax, A. A.; Martino-Rata, V. O.: The influence of organizational culture on writing a systematic review' (2017). A blue box highlights the 'Import via ENDNOTE XML' text.

Import via
ENDNOTE
XML

Study Selection and Appraisal

The screenshot shows a 'Study Selection' interface. On the left, a list of studies is shown with their titles and years. On the right, a dropdown menu for 'Select appraisal form' is open, showing various options. A blue box highlights the 'Randomized Controlled Trial' option in the list.

Author(s)	Title	Year
Burke, R. A.; Hastings, J. T.; Jackson, R. T. L.	The effects of rapid writing and hyperuse in the development of writing	2007
Bilali, G.; Marzouq, F.; Bahri, A.; Hassan-Bilali, M.; Cook, T.	Intensive hypnotherapy for smoking cessation: A prospective study	2008
Konker, J. M.; Rohr, S. M.; Spiegel, A.	Health outcomes perceptions of smokers after one month of smoking cessation: Results of a community trial	2009
Cannady, T. P.; Duncan, E.; Sirbu, J. A.; SeRifford, S.; Higgins, J.; Lee, S.; Belachoff, K.	Hypnosis for smoking cessation: A meta-analysis	2010
Myslinski, L. J.; Stirling, R. D.; Barnes, G. B.; Horne, D. J.	Treatment effectiveness of hypnosis and behavioral therapy in smoking cessation: A meta-analytical synthesis	2010

Appraisal

Filter appraisals...

Randomized Controlled Trial

Select appraisal form

Randomized Controlled Trial

Quasi-Experimental Study

Case Study

Case-Control Study

Analytical Cross-Sectional Study

Case Series

Case Reports

Prevalence Study

Text and Opinion Study

Diagnostic Test Accuracy

Systematic Review and Research Synthesis

Economic Evaluation

Interpretive and Critical Research

Cochrane Risk of Bias

Appraisal

JBI SUMARI

Design	Protocol	Method	Appraisal	Evaluation	Implementation	Implementation II	Review
Burkley, R. A.; Hopkins, J. C.; Jackson, Jr., T. L. Predictors of sport training and hypothesis testing in the National Football League [dissertation]	1971						
<p>Question</p> <p>1. Were the randomization used for assignment of participants to treatment groups?</p> <p>2. Were allocation to treatment groups concealed?</p> <p>3. Were treatment groups similar at the baseline?</p> <p>4. Were participants blind to treatment assignment?</p> <p>5. Were those delivering treatment blind to treatment assignment?</p> <p>6. Were outcome assessors blind to treatment assignment?</p>							
<p>Response</p> <p>1. Were the randomization used for assignment of participants to treatment groups?</p> <p>2. Were allocation to treatment groups concealed?</p> <p>3. Were treatment groups similar at the baseline?</p> <p>4. Were participants blind to treatment assignment?</p> <p>5. Were those delivering treatment blind to treatment assignment?</p> <p>6. Were outcome assessors blind to treatment assignment?</p>							
<p>Comments</p> <p>1. Allocation was used for assigning participants to treatment groups.</p> <p>2. Allocation was concealed.</p> <p>3. Treatment groups were similar at the baseline.</p> <p>4. Participants were blind to treatment assignment.</p> <p>5. Those delivering treatment were blind to treatment assignment.</p> <p>6. Outcome assessors were blind to treatment assignment.</p>							
<p>Rating</p> <p>0 = No 1 = Yes 2 = Uncertain 3 = Not applicable</p>							

Reviewer Appraisal

JBI SUMARI

Design	Protocol	Method	Appraisal	Evaluation	Implementation	Implementation II	Review
<p>Appraisal</p> <p>Filter applied...:</p>							
<p>Editorial偏倚风险</p> <p>Fundamental Controlled Trial</p> <p>Quasi Experimental Study</p> <p>Cohort Study</p> <p>Cross Current Study</p> <p>Analytical Cross Sectional Study</p> <p>Case Series</p> <p>Case Report</p> <p>Prospective Study</p> <p>Two and Systematic Study</p> <p>Degraded Trial, Assimilate</p> <p>Evaluation, Review and Research Synthesis</p> <p>Economic Evaluation</p> <p>Interventions and Clinical Research</p> <p>Cost-effectiveness Analysis</p>							
<p>Burkley, R. A.; Hopkins, J. C.; Jackson, Jr., T. L. The effects of sport training and hypothesis testing on the performance of football players</p>							
<p>Holm, S.; Harrell, F.; Kalbfleisch, J.; Prentice, R.; Crowley, T. Interpretation of confidence intervals: A proposal for study 2</p>							
<p>Kazlins, J. M.; Kazlins, E. W.; Appelbaum, A. Health care costs associated with a number of alternative treatments for lowering cholesterol: The U.S. controlled trial</p>							
<p>Gronlund, T. H.; Duncan, C.; Weston, A. K.; Hollmann, G.; Wagnleitner, G.; Reichenbacher, R. Hypertension screening in patients with cardiovascular risk</p>							
<p>Kyriacos, G. J.; Stansbie, D. J.; Karmous, S.; Kyriacos, G. Treatment effectiveness of cognitive and behavioral therapy in treating depression in a community-based setting</p>							
<p>Redden, S. L.; Schlegel, M. G.; Johnson, R. M. Assessing the impact of pre-treatment treatment on a working individual's prognosis</p>							
<p>Arshad, V.; Iqbal, S. B. A pragmatic pilot study of exercise training in heart failure patients with coronary artery disease involving a telecare system</p>							
<p>Redden, S. L.; Schlegel, M. G.; Johnson, R. M. Comparison of hypnosis plus relaxation, aerobic exercise, and a hypnosis-aerobic exercise community-based involving a telecare system</p>							
<p>The Last Open Study</p>							

Study Appraisal

Burnett, K. G.; Hastings, J. L.; Jackson, A. L.

The effects of hypnosis plus cognitive behavioral smoking cessation

Summary

1. Was this intervention used for quit-smoking participants in your group?

Discuss +1 more detail -1 less detail
Enter your comments...
Done your comments.

2. Was this intervention group successful?

Discuss +1 more detail -1 less detail
Enter your comments...
Done your comments.

3. Were these groups similar across baseline?

Discuss +1 more detail -1 less detail
Enter your comments...
Done your comments.

4. Were participants blind to treatment assignment?

Discuss +1 more detail -1 less detail
Enter your comments...
Done your comments.

Export RIS

Data Extraction

Extraction

Filter extractions...

Export RIS

Barkley, R. A.; Hastings, J. E.; Jackson Jr, T. L. The effects of rapid smoking and hypnosis in the treatment of smoking behavior	1977	Start
Kaufert, J. M.; Robbie, S. W.; Syrotiuk, J. Health beliefs as predictors of outcome of alternate modalities of smoking cessation: Results of a controlled trial	1988	Start
Elkin, G.; Marin, A.; Bates, J.; Hasan Rajah, M.; Cook, T. Intensive hypnotherapy for smoking cessation: A prospective study	2008	Start
Camacho, L. P.; Duran, C.; Werner, J. A.; Solkowitz, S.; Huggins, J.; Lee, S.; Delucchi, K. Hypnosis for smoking cessation: A randomized trial	2008	Start
Hynes, G. J.; Starkey, R. G.; Barnes, G. G.; Herre, D. J. Treatment effectiveness of hypnosis and behavioral therapy in smoking cessation: A methodological refinement	1988	Start
Pedersen, L. L.; Springsteen, W. B.; Lefford, H. M. Variables of hypnosis which are related to success in a smoking cessation program	1978	Start
Westfield, V.; Lyne, S. J. A self-access group self-hypnosis smoking cessation treatment: a brief communication	1988	Start
Pedersen, L. L.; Springsteen, W. B.; Lefford, H. M. Comparison of hypnosis plus counseling, counseling alone, and hypnosis alone in a community service smoking withdrawal program	1975	Start
Barkley, R. A.; Hastings, J. E.; Jackson Jr, T. L. The effects of rapid smoking and hypnosis in the treatment of smoking behavior	1977	In Progress

Synthesis – Meta-Analysis

The screenshot shows the JBI SUMARI software interface. At the top, there is a navigation bar with tabs: Overview, Protocol, Studies, Appraisal, Evaluation, Synthesis, and Review. The 'Synthesis' tab is active. A dropdown menu under 'Synthesis' shows three options: Synthesis, Qualitative, and Meta-Analysis. The 'Meta-Analysis' option is highlighted with a red box and has a mouse cursor pointing at it. Below the dropdown, the main workspace is titled 'Smoking Cessation' and 'Rapid Smoking and Hypnosis vs Placebo'. It contains sections for 'Parameters', 'Effect Labels', and 'Data'. The 'Data' section includes a table for 'Study' with columns for 'Experimental Group', 'Total Sample', 'Control Group', and 'Total Sample Control'. There are also buttons for 'Add Study' and 'Import...'. At the bottom right of the workspace are 'Analyze' and 'Export' buttons.

Synthesis – Qualitative

The screenshot shows the JBI SUMARI software interface. At the top, there is a navigation bar with tabs: Overview, Protocol, Studies, Appraisal, Evaluation, Synthesis, and Review. The 'Studies' tab is active. A red arrow points from the 'Studies' tab to the 'Qualitative' synthesis type in the dropdown menu. The 'Qualitative' option is highlighted with a red box and has a mouse cursor pointing at it. Below the dropdown, the main workspace is titled 'Studies' and 'Barkley 1977'. It contains sections for 'Findings' and 'Credibility'. The 'Findings' section contains a box with text about smoking cessation and hypnosis. The 'Credibility' section has a dropdown menu with options: Credible, Not Sustained, and Unreliable. The 'Not Sustained' option is highlighted with a red box. At the bottom right of the workspace are 'Create Finding' and 'Delete' buttons.

Review

The screenshot shows a search result for "Using Hypnosis for Smoking Cessation" on the JBI Database of Systematic Reviews and Implementation Reports. The page includes a header with the JBI logo, a navigation bar with links like Home, Protocol, Review, and Contact, and a search bar. The main content area displays the title "Using Hypnosis for Smoking Cessation" and details about the review, such as authors (Alan Fawcett, James Taylor, Louise McEvoy, Emma Webster, and Helen Doherty), publication date (2008), and a brief summary of the review's findings. To the right, there is a sidebar titled "JBI Author Resources" with links to various resources and a "About This Journal" section.