Answering Clinical Questions at the Point of Care

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Today’s Agenda

- Introduction of UpToDate
- UpToDate Demo
- Questions & Answers
- Feedback
UpToDate® is an evidence-based clinical decision support system authored by physicians to help clinicians to:

- Answer your clinical questions
- Attain the most advance clinical knowledge
- Improve patient care
Evidence is derived from a number of sources.................including but not limited

- **Journals**: 450+ peer reviewed journals
- **Databases**: MEDLINE, The Cochrane Database, Clinical Evidence and ACP Journal Club
- **Guidelines**
- **Clinical trials**: FDA, CDC, NIH
- **Proceedings**
- **Clinical experiences and observations**
Quick Facts about UpToDate

- Topic reviews
- Patient Information
- What’s New
- PCUs
- Calculators
- Drug Interaction
A New Way to Practice Medicine

- 10,500 Clinical topics
- 5,400 Drug entries
- 1,500 Patient topics
- 28,000 Graphics
- 160 Medical calculators
- 400,000 Evidence links
- 22 Specialties
Specialties

- Adult and Pediatric Emergency Medicine
- Adult Primary Care & Internal Medicine
- Allergy and Immunology
- Cardiovascular Medicine
- Dermatology
- Endocrinology & Diabetes
- Family Medicine
- Gastroenterology & Hepatology
- General Surgery
- Geriatric Specialty
- Hematology
- Hospital Medicine
- Infectious Diseases
- Nephrology & Hypertension
- Neurology
- Obstetrics, Gynecology & Women’s Health
- Oncology
- Pediatrics
- Psychiatry
- Pulmonary, Critical Care & Sleep Medicine
- Rheumatology
- Palliative Care (Launched in July 2014)

In Development

- Anesthesiology
- Sleep Medicine
In 2001, we began a collaboration with Gordon Guyatt, a world leader in EBM, and his colleagues in the international GRADE collaborative to implement a grading system for recommendations.

UpToDate grades specific treatment and screening recommendations.
### Evidence Grading

#### Recommendation Grades

<table>
<thead>
<tr>
<th>Grade 1</th>
<th>Strong Recommendation</th>
<th>Benefits clearly outweigh the risks and burdens (or vice versa) for most, if not all, patients</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>“We recommend...”</td>
<td></td>
</tr>
<tr>
<td>Grade 2</td>
<td>Weaker Recommendation</td>
<td>Benefits and risks closely balanced and/or uncertain</td>
</tr>
<tr>
<td></td>
<td>“We suggest...”</td>
<td></td>
</tr>
</tbody>
</table>

#### Evidence Grades

<table>
<thead>
<tr>
<th>Grade A</th>
<th>High Quality Evidence</th>
<th>Consistent evidence from randomized trials, or overwhelming evidence of some other form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade B</td>
<td>Moderate Quality Evidence</td>
<td>Evidence from randomized trials with important limitations, or very strong evidence of some other form</td>
</tr>
<tr>
<td>Grade C</td>
<td>Low Quality Evidence</td>
<td>Evidence from observational studies, unsystematic clinical observations, or from randomized trials with serious flaws</td>
</tr>
</tbody>
</table>
How to Search

New Search
- Search → display results → topic review → output
- Graphic Search
- Local Language Search

Others
- Evidence grading
- Drug Information
  systemic, topical, inhalation, nasal, ophthalmic
- Test & Cases
Case:
19 year old male injured in an explosion with 75 percent total body surface area burns, multiple injuries, including lacerations and an open fracture of his femur.

Question:
What is the initial management in the field and upon arrival in the emergency room?