

RESOURCES FOR EVIDENCE-INFORMED PRACTICE & LITERATURE SEARCHES (“Acquire” step of EIP cycle) – focus on open access and those of foundational importance

SOURCE	RESOURCE TYPE	ACCESS	AVAILABLE @
PubMed	Health research database	Abstracts freely available; some full-text articles freely available	www.ncbi.nlm.nih.gov/pubmed <i>Quick tip:</i> use the Clinical Queries and PICO tools
BioMed Central	Publisher of 290 (and counting) open access peer reviewed journals	Open access	http://www.biomedcentral.com/ <i>Quick tip:</i> journal, BMC Pregnancy and Childbirth
Directory of Open Access Journals	A directory of multiple discipline open access journals	Open access	www.doaj.org/
North American Journal of Medical Sciences	Individual journal	Open access	http://www.najms.org/
Google Scholar	Scholarly search engine	Abstracts freely available; some full-text articles freely available	www.scholar.google.com
Cochrane Reviews	Cochrane Library of Systematic Reviews	Abstracts freely available; some reviews freely available	www.cochranelibrary.com
PLOS One	Peer reviewed journal focused on science and medicine	Open access	http://www.plosone.org/
Elsevier Open Access Journals	Publisher with open access journals on a range of topics	Open access	https://www.elsevier.com/about/open-science/open-access/open-access-journals
High Wire	Large archive of free full-text science articles/journals	Open access	http://highwire.stanford.edu/lists/freart.dtl
ERIC: Institute for Educational Studies	Directory of scholarly and grey literature	Open access searching; some full-text articles freely available	http://eric.ed.gov/?q=midwifery <i>Quick tip:</i> go to the collection “midwifery”
Academic Journals	Publisher with open access journals on a range of topics	Open access	http://academicjournals.com/
Journal of Midwifery & Women’s Health	Individual journal	Subscription; some full-text articles freely available	http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1542-2011
Birth: Issues in Perinatal Care	Individual journal	Subscription; some full-text articles freely available	http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1523-536X
Midwifery	Individual journal	Subscription; some full-text articles freely available	https://www.journals.elsevier.com/midwifery/
DynaMed	Pre-appraised Literature	Subscription	http://www.dynamed.com/home/
EvidenceUpdates	Critically assessment of existing literature	Register for free searching; some full-text articles freely available	https://plus.mcmaster.ca/evidenceupdates/
UpToDate	Pre-appraised literature	Subscription	http://www.uptodate.com/home
Clinical Evidence	Pre-appraised literature	Subscription	http://clinicalevidence.bmj.com/x/index.html
CINAHL Plus	Journals, care sheets, lessons	Subscription	https://health.ebsco.com/products/cinahl-plus

Quick Tip: for those users of handheld devices, check out the free app, PubMed for Handheld (search in the app store for “PubMed4HH”)

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TOOLS FOR CRITICAL APPRAISAL OF PUBLISHED RESEARCH (“Appraise” step of the EIP Cycle)

Review forms (courtesy of: Center for Optimal Integration)

These documents (provided courtesy of the University of Western States) provide tools to summarize the evidence-informed practice process and assess the validity and quality of differing study designs.

- ❖ Harm Critical Review form (case control, cohort study)
- ❖ Systematic Review
- ❖ Therapy Review
- ❖ Prognosis Review
- ❖ Diagnostic Test Critical Review Form

Located at: <http://optimalintegration.org/project-perl/developing-programs/students-course-material.php>

Question Type	Study Design (ideal)	Review Form to Use
Therapy	RCTs, Clinical trials	Therapy review
Diagnosis	RCTs, Clinical trials	Diagnostic test review
Prognosis	Cohort studies, Case control studies	Prognosis review
Etiology/Harm	Cohort studies, Case control studies	Harm review
ALL (start here)	Systematic reviews, Meta-analyses	Systematic review (can use for both)

STRENGTH OF EVIDENCE (LEVELS OF EVIDENCE) PYRAMID FOR CLINICIANS

Note: “best evidence/evidence guidelines & summaries” do not count as original research nor a study design

As you move up:

- Stronger methodology
- Less chance of bias
- Controls for comparisons
- Fewer studies

