Evidence Based Clinical Practice Curriculum 2004

	Knowledge	Attitudes	Skills
Assess: Assess the patient and the clinical scenario	- Basic clinical skills (H&P) and disease specific knowledge	- Acceptance of knowledge deficits - Interest in self-improvement and in increasing fund of knowledge	- Formulation of clinical assessment of the individual patient - Assessment of learning needs as a health professional
Ask: Clinical Question Formation	- The anatomy of a question - The Map for Clinical Questions (e.g therapy vs diagnostics vs prognosis) -	- Curiosity - Comfort with Uncertainty - Value active learning - Learn to sort through which questions are of greatest importance to you or your patients.	- Formulate a question - Identify it's "location" on the Map for clinical questions - Identify the research method that will best answer the question (e.g. RCT vs cohort) - Create a hierarchy of importance for which questions you will invest time and energy in
Acquire: Selecting and getting the evidence			
A) Searching the Medical Literature	- Medline as a database - MeSH vs. Textword Searching - Methodologic filtering	- Fear of the volume of available medical literature - Deal with aversion to technologies	- Tie key elements of the question to specific search strategies - Timely and efficient searching - Boolean Logic - (And / Or / Not) - Explode, Focus, Truncation, Limits and Subheadings
B) CD-Rom and Web based Resources	- Awareness of alternative CD-Rom and Web based resources	- Address Computer phobia - Value efficiency	- Computer literacy - Informatics

Evidence Based Clinical Practice Curriculum 2004

	Knowledge	Attitudes	Skills
Appraise: Critical Appraisal	- Practical clinical epidemiology (User's Guide to the Medical Literature) - Primary Guides vs secondary guides for validity - Fatal Flaws - Survival Statistics - Creating a hierarchy of evidence	- Address innumeracy - Promote readiness to challenge authority (Challenge them to be critical, don't accept it as it must be so) - Promote enthusiasm and avoid Nihilism	- Identify which article will answer your question - Apply these skills real time settings
Apply: Application of Evidence to Clinical Care	- Getting the individual patient Number needed to treat (NNT) or Number needed to Harm (NNH) - Going from pre-test to post-test probabilities (likelihood ratios) - Strength of inference	- The recognition that value judgments are implicit in every clinical decision and are being made all the time by physicians based on the MDs and patient's value systems - Comfort with making value-based recommendations	- Solicit patient preferences - Assess co-morbidity - Consider social support of patient - Assess where the patient's value system lies on the paternalism to technical continuum
Evaluation of Performance	- Understanding the elements of quality measurement and self assessment	- Addressing reluctance to assess one's own behavior to identify areas for improvement - Readiness and willingness to change one's own behavior	- Measure / Assess - Intervene - Remeasure /Reassess