

# Users' Guides to the Medical Literature: Online Guide

*You may wish to print this guide for easy reference.*

The Users' Guides to the Medical Literature Web site is the online equivalent to the textbook *Users' Guides to the Medical Literature: A Manual for Evidence-Based Clinical Practice*. The Users' Guides to the Medical Literature Web site also contains features and tools that can help health care practitioners and policy makers better appraise and apply medical literature in practice.

## Accessing the Users' Guides to the Medical Literature

The Users' Guides to the Medical Literature Web site can be accessed by those with subscriptions to *JAMA & Archives Journals*.

**Individual access:** individuals with personal subscriptions to *JAMA & Archives Journals* ([www.jama.com](http://www.jama.com)) must activate their online subscriptions in order to obtain a username and password to access the Users' Guides to the Medical Literature Web site. Individuals can access the site using the following instructions:

1. go to [www.usersguides.org](http://www.usersguides.org)
2. click the "log in" button at the top of the screen
3. enter their username and password, click "Sign In"
4. select "Access UGI" from the resulting screen if prompted

**Institutional access:** institutions with subscriptions to *JAMA & Archives Journals* ([www.jama.com](http://www.jama.com)) can access the Web site using the following instructions:

1. go to [www.usersguides.org](http://www.usersguides.org)
2. click the "log in" button at the top of the screen

If institutions would like to create a direct link to the Users' Guides to the Medical Literature Web site within their online collections, they can use the following:

[http://pubs.ama-assn.org/cgi/ugi\\_redirect?external\\_ref=http://ugi.usersguides.org/usersguides/hg/hh\\_logon\\_hw.asp](http://pubs.ama-assn.org/cgi/ugi_redirect?external_ref=http://ugi.usersguides.org/usersguides/hg/hh_logon_hw.asp)

This link will only allow access to users within the designated IP range for the institutions *JAMA & Archives Journals* subscription.

For information about subscriptions to *JAMA & Archives Journals*, please visit [www.jama.com](http://www.jama.com).

## Settings

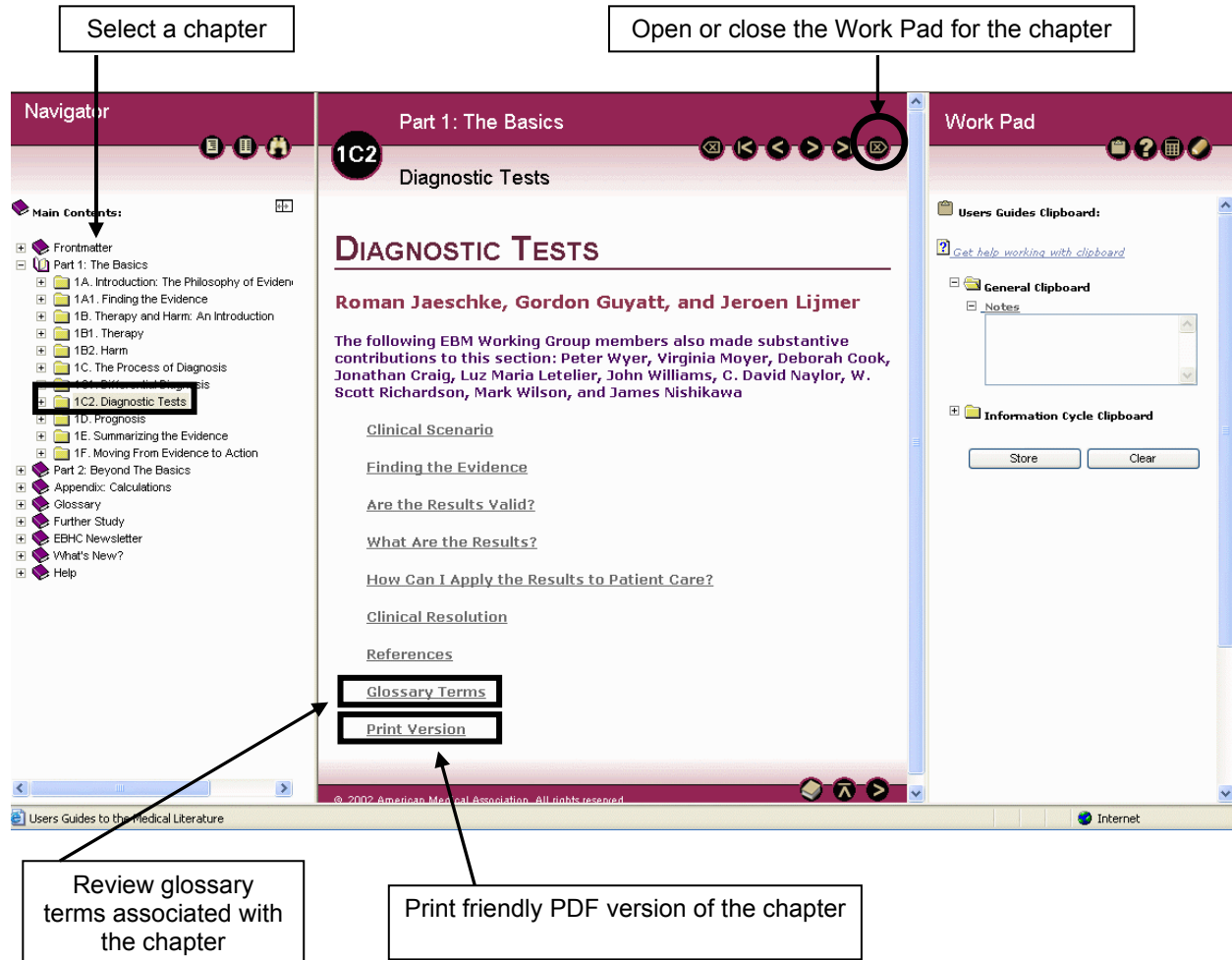
The Users' Guides to the Medical Literature Web site is currently best viewed using Internet Explorer 5 or better.

The Users' Guides to the Medical Literature Web site table of contents uses Active X, therefore, Active X should be enabled for Internet Explorer. This can be done by going into the Internet Options > Security and checking off the appropriate options.

In order to take advantage of online features, we recommend using a screen resolution of 1024x768 or greater.

## Web site Layout

The Users' Guides to the Medical Literature Web site has 3 main panels, the table of contents, the main reading panel and the Work Pad.



The screenshot displays the website layout with three main panels:

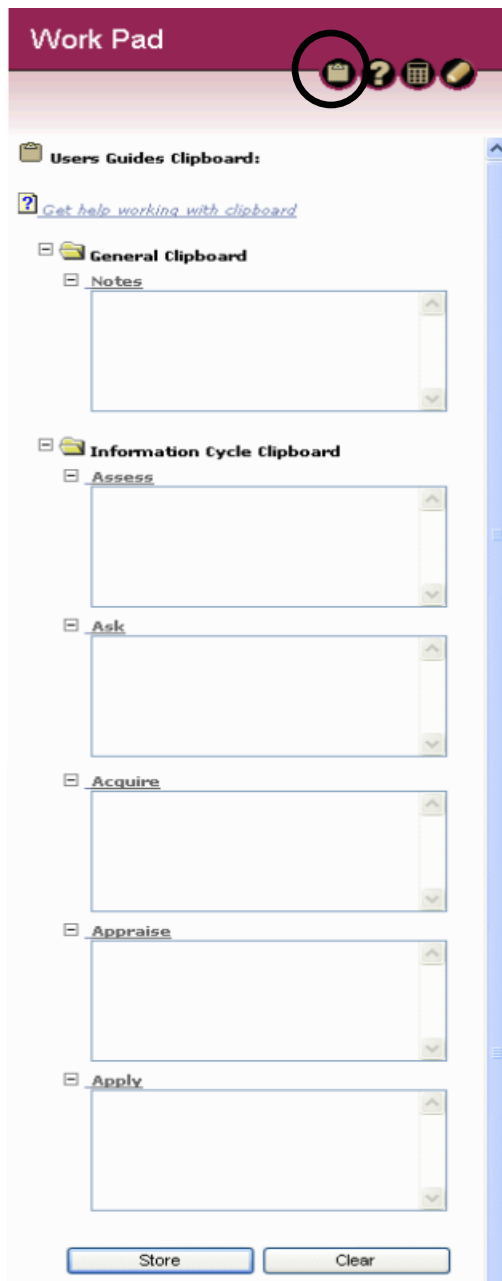
- Navigator Panel (Left):** Contains a tree view of the site's content. A callout box labeled "Select a chapter" points to the "1C2. Diagnostic Tests" item in the tree.
- Main Content Panel (Center):** Displays the chapter "1C2 Diagnostic Tests" under "Part 1: The Basics". It includes the title "DIAGNOSTIC TESTS", authors "Roman Jaeschke, Gordon Guyatt, and Jeroen Lijmer", a list of EBM Working Group members, and several sub-sections: "Clinical Scenario", "Finding the Evidence", "Are the Results Valid?", "What Are the Results?", "How Can I Apply the Results to Patient Care?", "Clinical Resolution", and "References". At the bottom of this panel, there are two callout boxes: "Review glossary terms associated with the chapter" pointing to the "Glossary Terms" link, and "Print friendly PDF version of the chapter" pointing to the "Print Version" link.
- Work Pad Panel (Right):** Features a "Users Guides Clipboard" with a "Get help working with clipboard" link, a "General Clipboard" with a "Notes" field, and an "Information Cycle Clipboard" with "Store" and "Clear" buttons. A callout box labeled "Open or close the Work Pad for the chapter" points to a circular icon in the top right corner of the main content panel.

## Work Pad

The Work Pad is configured differently for each chapter of the Users' Guides to the Medical Literature Web site. Therefore, the set of tools that appears when you are working with the Therapy chapter will be different than the set of tools that appears when you are working with Diagnostic Tests chapter, and so on.

In general, most chapters will have some combination of the following Work Pad tools:

### Clipboard



The clipboard is a place for users to store notes while they are reading or working with the Users' Guides to the Medical Literature. Used in conjunction with other tools such as the worksheets or question builder, the clipboard is a useful way to organize ideas or capture key concepts while reading the text.

Text can be copied and pasted or simply dragged and dropped into the text area boxes.

Information can be organized using the Information Cycle:

- **Assess:** use this space to indicate all relevant issues with the clinical/policy scenario or patient/population problem.
- **Ask:** use this space to store notes that will help in formulating a well-built clinical question.
- **Acquire:** use this space to indicate keywords and key resources that can be used in order to acquire evidence needed to solve the clinical/policy problem.
- **Appraise:** use this space to write notes about the validity, importance, and applicability of the information that has been acquired.
- **Apply:** use this section to write any notes about how information acquired can be applied to the original clinical/policy problem.

If a user selects the "Store" button at the bottom, their information will be stored for the duration of their session. This information will also transfer to other relevant Work Pad sections.

Information is only stored for the current session. Leaving the Users' Guides to the Medical Literature Web site or closing the browser window, deletes any entries. You cannot save or print this information.

## Question Builder



### Asking Questions:

#### PICO Format

##### Patient

Please enter keywords giving clinically significant characteristics of the patients or populations of interest

##### Test (Intervention)

##### Gold Standard (Comparison)

##### Health Condition

##### Outcome

Draft question

##### Question

Save

Clear

The question builder is a Work Pad tool found in most Part 1 chapters and a few chapters in Part 2. The question builder is different in each chapter, but works quite similarly. The example to the left is from the Diagnostic Tests chapter.

The question builder provides users with a structure for formulating well-built questions using variations of the PICO mnemonic.

Users can use the plus/minus buttons to get more information about each component of the question.





Once information about each component has been entered, the user can select the “Draft question” button to generate a well-built question.


If a user selects the “Save” button at the bottom, their question information will be stored for the duration of their session. This information will also transfer to other relevant Work Pad sections.

Information is only stored for the current session. Leaving the Users' Guides to the Medical Literature Web site or closing the browser window, deletes any entries. You cannot save or print this information.

## Calculators

### Work Pad









 **102. Diagnostic Tests Tools:**

- [+ Kappa and Baseline Concordance](#)
- [+ Kappa Statistic](#)
- [+ 2X2 table with Sn,Sp,N,Prev for diagnostic tests](#)
- [+ Basic Math Calculator](#)
- [- Given Sn,Sp,N,Prev for diagnostic tests](#)

**Instructions:** Does not require any additional software.

**Description:** This simple calculator uses a conventional 2X2 table to enter true positives, false positives, true negatives and false negatives. Sensitivity, specificity, predictive value and likelihood ratios are calculated. All formulas are shown.  
*Hayward RS, Leung R, Centre for Health Evidence*

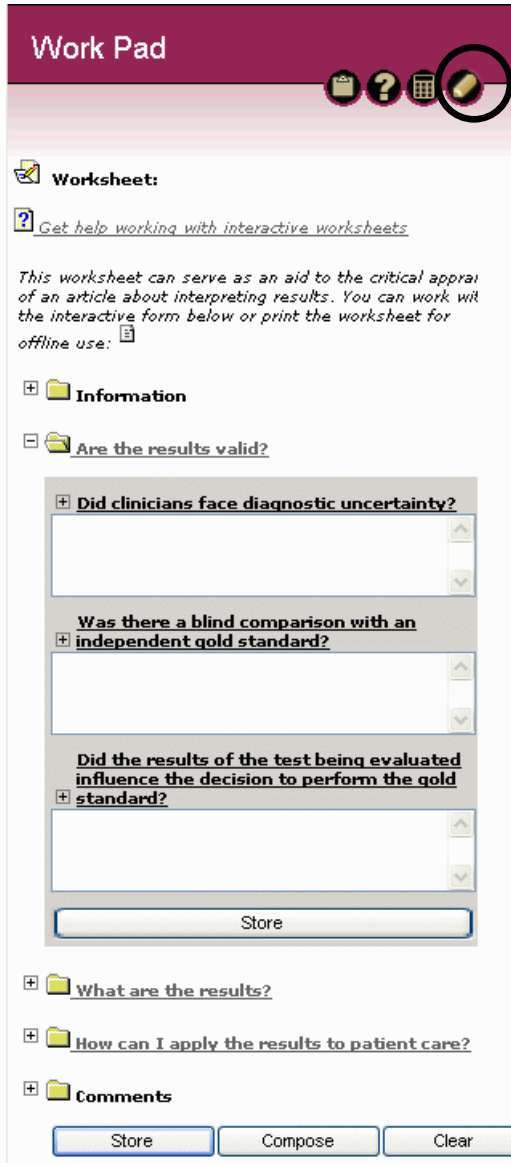
- [+ Likelihood Ratios: Pre and Post Probabilities 2](#)
- [+ Likelihood Ratios Pre and Post-test Probabilities 1](#)
- [+ 2X2 table for diagnostic tests](#)
- [+ 2X2 Table with Sn, Sp, PPV, NPV, LR](#)
- [+ Sensitivity, Specificity, Prevalence](#)
- [+ Likelihood Ratio Nomogram](#)

Calculators have been developed for sections of the Users' Guides to the Medical Literature where quantitative measures are discussed. They can be accessed by opening the Work Pad and clicking on the calculator icon.

Although some of the calculators link to outside Web sites, many have been developed for the Users' Guides to the Medical Literature and have unique interactive properties.

All calculators indicate whether or not additional software will be required to run the calculator and include descriptive information about how to use the tool.

## Worksheets



**Work Pad**

**Worksheet:**

[Get help working with interactive worksheets](#)

*This worksheet can serve as an aid to the critical appraisal of an article about interpreting results. You can work with the interactive form below or print the worksheet for offline use.*

**Information**

**Are the results valid?**

**Did clinicians face diagnostic uncertainty?**

**Was there a blind comparison with an independent gold standard?**

**Did the results of the test being evaluated influence the decision to perform the gold standard?**

Store

**What are the results?**

**How can I apply the results to patient care?**

**Comments**

Store    Compose    Clear

Interactive worksheets are associated with all chapters that have a Users' Guide. This includes most chapters in Part 1 and a few chapters in Part 2.

Open and close various sections of the interactive worksheet using the plus/minus buttons.

Each question of the Guide is hyperlinked to the appropriate chapter and section to give the user quick access to more detailed information.

Short tips are included for each question and can be accessed by using the plus/minus buttons.

A printable PDF version of the worksheet is included and can be downloaded by selecting the document icon.

Once a user has completed a section of the interactive Guide, they can select the "Store" button and continue working on other sections.

After all sections are complete, the user can choose to "Store" the information (again, this only stores for the duration of the Internet session).

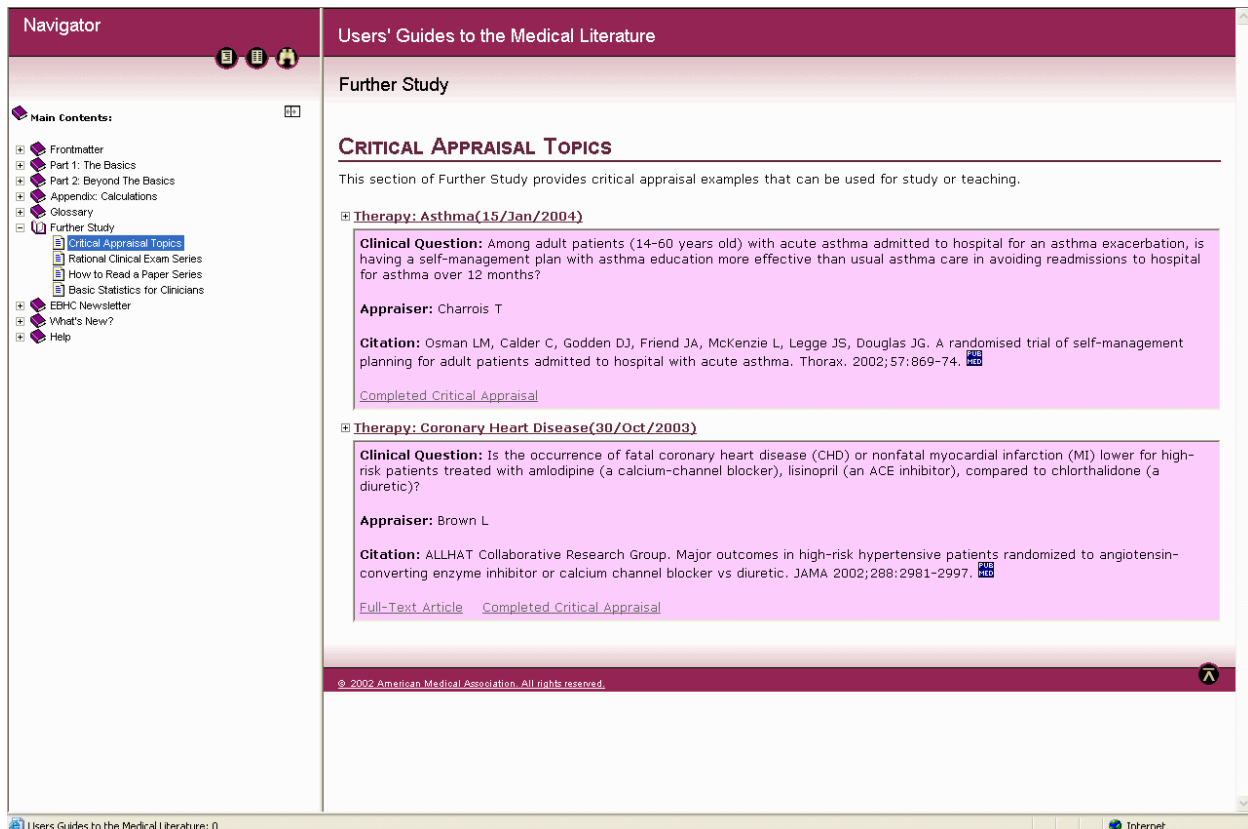
Users can also choose to "Compose". Compose will reformat the user's responses into a display that is suitable for printing or saving to disk.

## Further Study

A further study section has been added to provide access to evidence-based practice bibliographies and examples of completed critical appraisals.

This section is dynamic and will expand over time based on user feedback and new developments in the field.

Current critical appraisal topics are selected from student assignments submitted to the Critical Appraisal of the Health Sciences Literature, a master's level course at the University of Alberta. High quality critical appraisals can be submitted for review to [tanya.voth@cche.net](mailto:tanya.voth@cche.net).



The screenshot shows a web browser window displaying the 'Users' Guides to the Medical Literature' website. The page is titled 'Further Study' and features a section for 'CRITICAL APPRAISAL TOPICS'. A left-hand 'Navigator' menu lists various site sections, with 'Critical Appraisal Topics' highlighted. The main content area contains two examples of critical appraisals, each with a clinical question, appraiser name, and citation. The first example is for Asthma (15/Jan/2004) and the second is for Coronary Heart Disease (30/Oct/2003). Both examples include links for 'Completed Critical Appraisal' and 'Full-Text Article'.

**Users' Guides to the Medical Literature**

**Further Study**

**CRITICAL APPRAISAL TOPICS**

This section of Further Study provides critical appraisal examples that can be used for study or teaching.

**Therapy: Asthma(15/Jan/2004)**

**Clinical Question:** Among adult patients (14-60 years old) with acute asthma admitted to hospital for an asthma exacerbation, is having a self-management plan with asthma education more effective than usual asthma care in avoiding readmissions to hospital for asthma over 12 months?

**Appraiser:** Charrois T

**Citation:** Osman LM, Calder C, Godden DJ, Friend JA, McKenzie L, Legge JS, Douglas JG. A randomised trial of self-management planning for adult patients admitted to hospital with acute asthma. *Thorax*. 2002;57:869-74. [PubMed](#)

[Completed Critical Appraisal](#)

**Therapy: Coronary Heart Disease(30/Oct/2003)**

**Clinical Question:** Is the occurrence of fatal coronary heart disease (CHD) or nonfatal myocardial infarction (MI) lower for high-risk patients treated with amlodipine (a calcium-channel blocker), lisinopril (an ACE inhibitor), compared to chlorthalidone (a diuretic)?

**Appraiser:** Brown L

**Citation:** ALLHAT Collaborative Research Group. Major outcomes in high-risk hypertensive patients randomized to angiotensin-converting enzyme inhibitor or calcium channel blocker vs diuretic. *JAMA* 2002;288:2981-2997. [PubMed](#)

[Full-Text Article](#) [Completed Critical Appraisal](#)

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Users Guides to the Medical Literature: 0 Internet

## In Text Features


Additional interactive tools are available in text; usually these appear as small icons embedded in the text or as hypertext links. The image below highlights 2 in text tools that can be helpful to users:

1. Pre-loaded PubMed searches can be found in most "Finding the Evidence" sections
2. Pop-up citations are linked throughout the text and provide quick access to full-text articles where available.

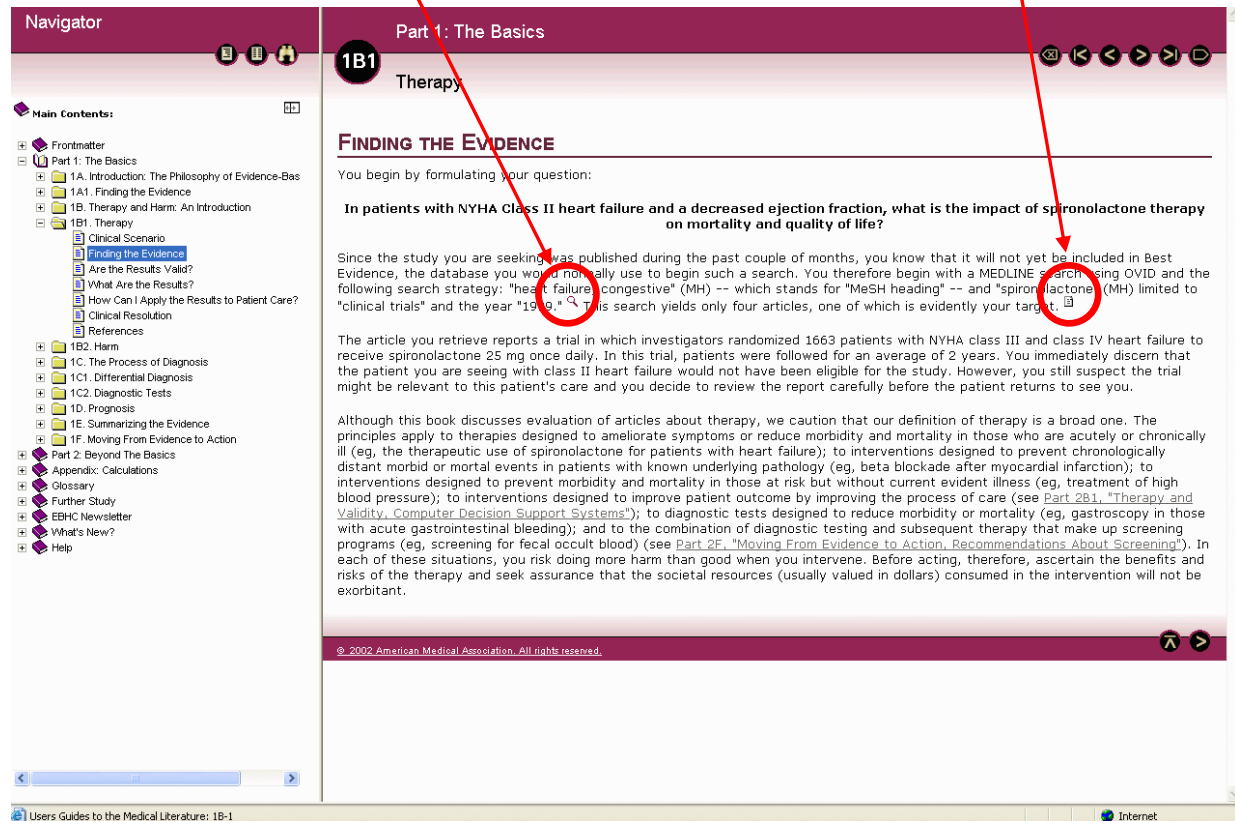
Additional tools include pop-up glossary terms, hypertext links to other chapters and sections, links to outside resources that are referenced.



Pre-loaded PubMed searches run a live search using original search strategies.



Pop-up citations include bibliographic details and links to full-text where available.



The screenshot shows the 'Part 1: The Basics' section, specifically '1B1 Therapy'. Under the 'FINDING THE EVIDENCE' heading, it provides an example of formulating a question: "In patients with NYHA Class II heart failure and a decreased ejection fraction, what is the impact of spironolactone therapy on mortality and quality of life?". Below this, it describes a search process using MEDLINE and OVID, and a citation from a study on spironolactone therapy. Red circles highlight the search strategy and the citation link in the original image.

## Contacts

The Users' Guides to the Medical Literature Web site is developed and maintained by the Centre for Health Evidence at the University of Alberta on behalf of *JAMA & Archives Journals*.

For more information about subscriptions, copyright and permissions, please direct inquiries to *JAMA & Archives Journals* ([www.jama.com](http://www.jama.com)).

The Centre for Health Evidence ([www.cche.net](http://www.cche.net)) has been working to develop companion curriculum for the Users' Guides to the Medical Literature that can be licensed by groups interested in providing online learning opportunities in evidence-based practice. Curriculum requires that groups have access to one or more of the following health literature repositories: OVID EBM Reviews, Cochrane Library, ACP Journal Club, Evidence-Based Medicine/Evidence-Based Nursing, UpToDate, Clinical Evidence, online health sciences journal collections. Online curriculum includes narrated slide presentations, reading lists, online exercises for self-study or examination, bulletin board, and discussion forums. Curriculum and resources are integrated using an Internet Desktop program that controls user authentication, allows local instructors to manage select areas, provides detailed usage statistics, and can be accessed from any computer terminal where the program is installed. This integrated online evidence-based practice environment is called the Users' Guides Interactive (UGI) Desktop. The UGI Desktop programs are not licensed to individuals, as they are custom online environments tailored to group needs. Examples may include (but are not limited to):

- medical schools or residency programs
- faculty development programs
- continuing professional development programs

For more information about costs and processes involved in developing a UGI Desktop program for your institution, please contact:

Tanya Voth, MLIS  
Program Manager  
Centre for Health Evidence  
University of Alberta  
[tanya.voth@cche.net](mailto:tanya.voth@cche.net)