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Using Clinical Apps to Access and Decipher Information: A Pilot Study

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ABSTRACT

Evidence Based Practice (EBP) encourages health professionals to consider not only the patient history and test results, but also to investigate the latest treatments, research, and available medications.¹ Librarians often teach EBP classes within health professional programs. In 2013, Jonathan Eldredge discussed the importance of adapting content and activities in EBP classes to fit into the fast-paced health professionals curricula.² In 2015, a Minnesota Medicine article discussed the incorporation of tablets, phones, and electronic devices into the daily routine and practice of health professionals.³

During orientation for many first year health professional programs, students begin working with the Electronic Health Record, Simulation Centers, Clinical Applications (Clinical Apps), and other technology used by currently practicing health professionals. When teaching EBP classes, the trend is to teach basic skills but not incorporate Clinical Apps into activities. If the content of EBP classes was revised to include Clinical Apps and other skills immediately relevant to health professional programs, students would be better prepared for clinical years of study. Results indicate that some incorporation of Clinical Apps is starting to occur within EBP classes.

HYPOTHESIS

If activities using Clinical Apps are included in EBP classes, then students will be more likely to participate, to retain the skills, and later to apply the knowledge as practicing health professionals.



<https://www.pexels.com/photo/silver-iphone-6-near-blue-and-silver-stethoscope-48603/>

STUDY DESIGN AND METHODS

A three question survey, created in Survey Monkey, was distributed electronically to members of a group interested in EBP and to members of the Midwest Region of the Medical Library Association. Questions on the survey discussed the availability and use of Clinical Apps when teaching EBP classes or when meeting with students in one-on-one or small group settings. One-on-one or small group settings were requested by students or faculty members and these sessions did not always include use or discussion of Clinical Apps. Twenty-six members of the Midwest Region and twenty-two members of the EBP group participated.

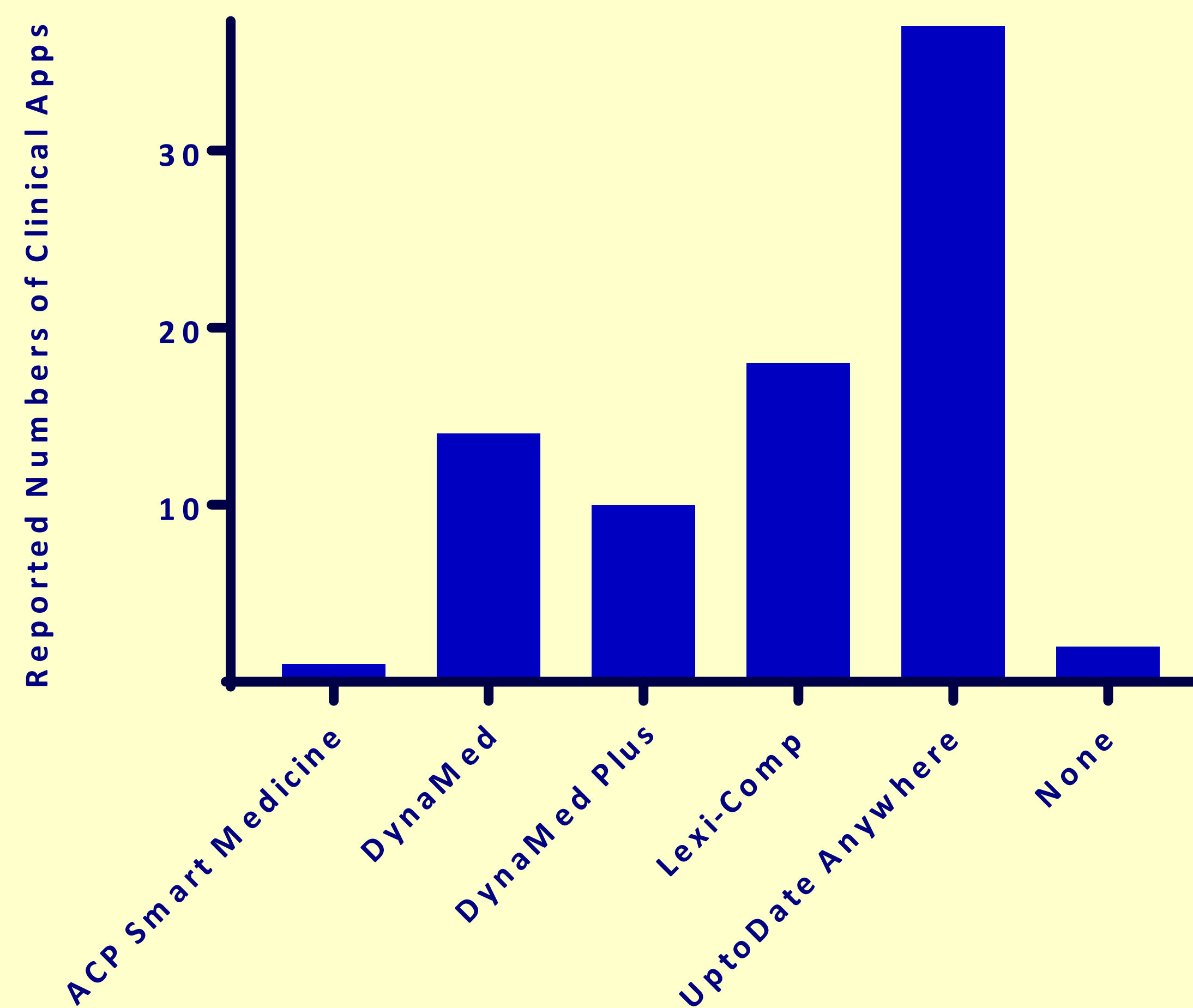


Figure 1. Reported availability of Clinical Apps

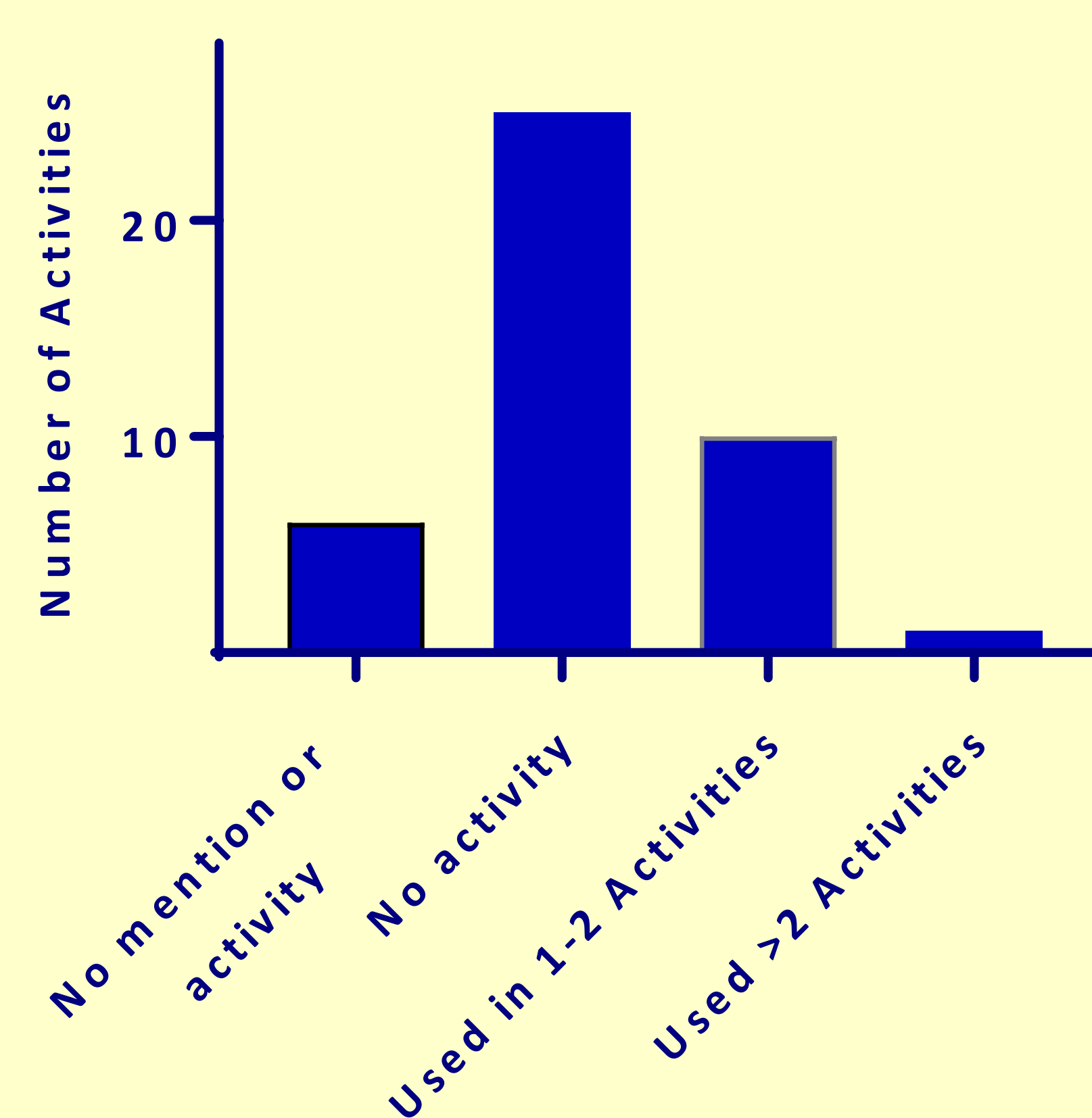


Figure 2. Inclusion of Clinical Apps Activities in EBP Classes

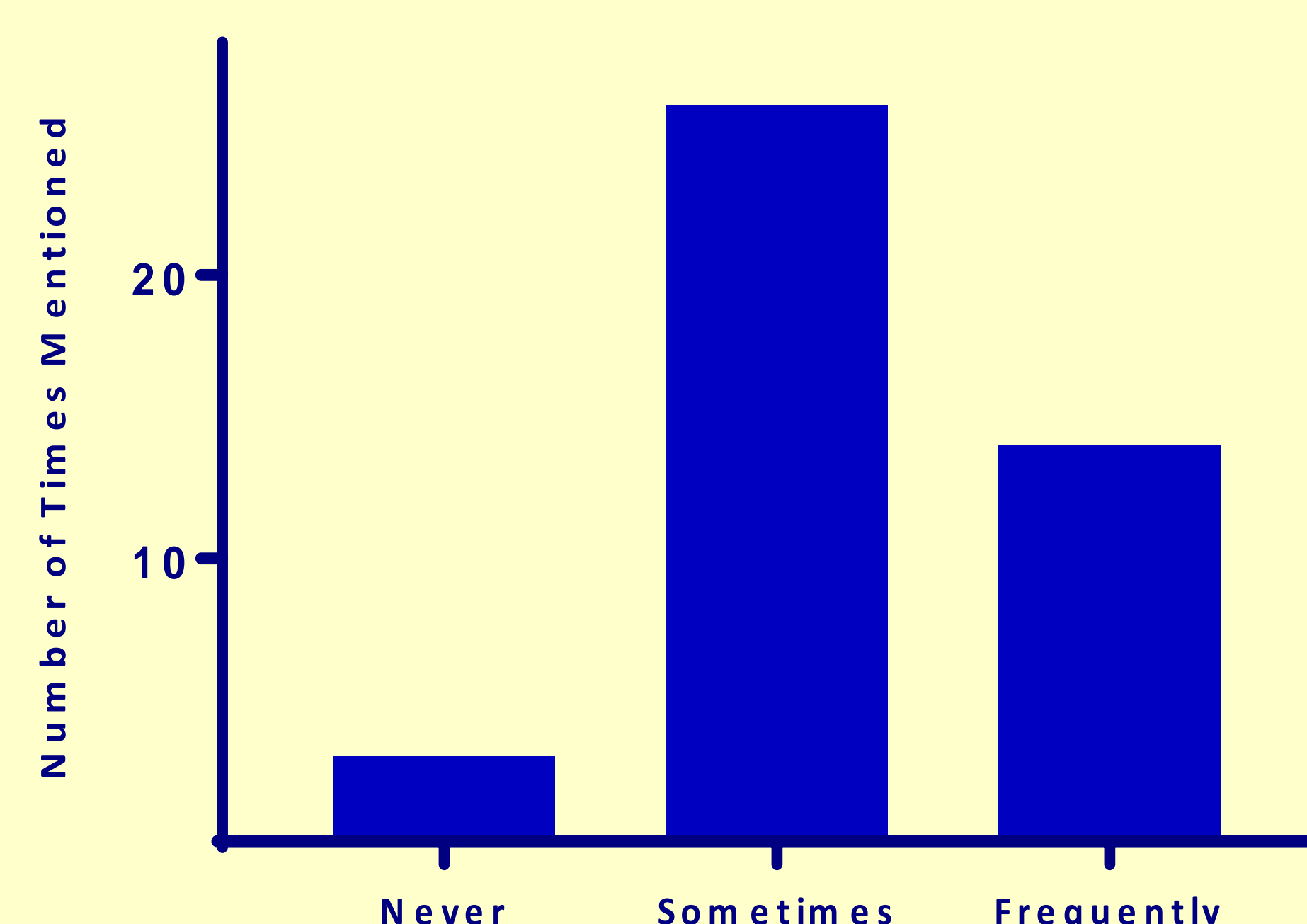


Figure 3. Inclusion of Clinical Apps in small groups or one-on-one sessions.

RESULTS

Survey respondents reported providing access to a minimum of three Clinical Apps (**Figure 1**). In EBP classes, inclusion of Clinical Apps is limited due to lengthy setup time and large numbers of participants (**Figure 2**). The flexibility and smaller number of participants in one-on-one settings and in small group sessions makes using Clinical Apps more feasible (**Figure 3**).

FUTURE CONSIDERATIONS

Connecting Clinical Apps to the Electronic Health Record is becoming a standard procedure. Use of Clinical Apps on a regular basis, however, is not a common occurrence among all practicing health professionals. Use of Clinical Apps in EBP classes is increasing. Future studies should address the following questions:

- 1) If using a mobile-friendly version in addition to the App version of the same product is possible, will EBP classes include more Clinical App activities?
- 2) If EBP class content includes more activities similar to challenges presented in clinical settings, will time allotted for EBP classes increase?

This pilot study indicates trends within the field. Future studies should include a larger sample size, which could include partnering with other departments and getting student input on using Clinical Apps in EBP classes.

CONCLUSIONS

Results from this pilot study indicate some inclusion of Clinical Apps in EBP classes. As health professional programs continue adapting curricula to include clinical content within the early weeks of programs, use of Clinical Apps in EBP classes will likely increase. Future research should find a way to increase the sample size and this could include collaborating with other departments.

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