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ACCESSING ELECTRONIC MEDICAL INFORMATION QUICKLY: A REVIEW

<http://www.med.fsu.edu/informatics>

Objectives

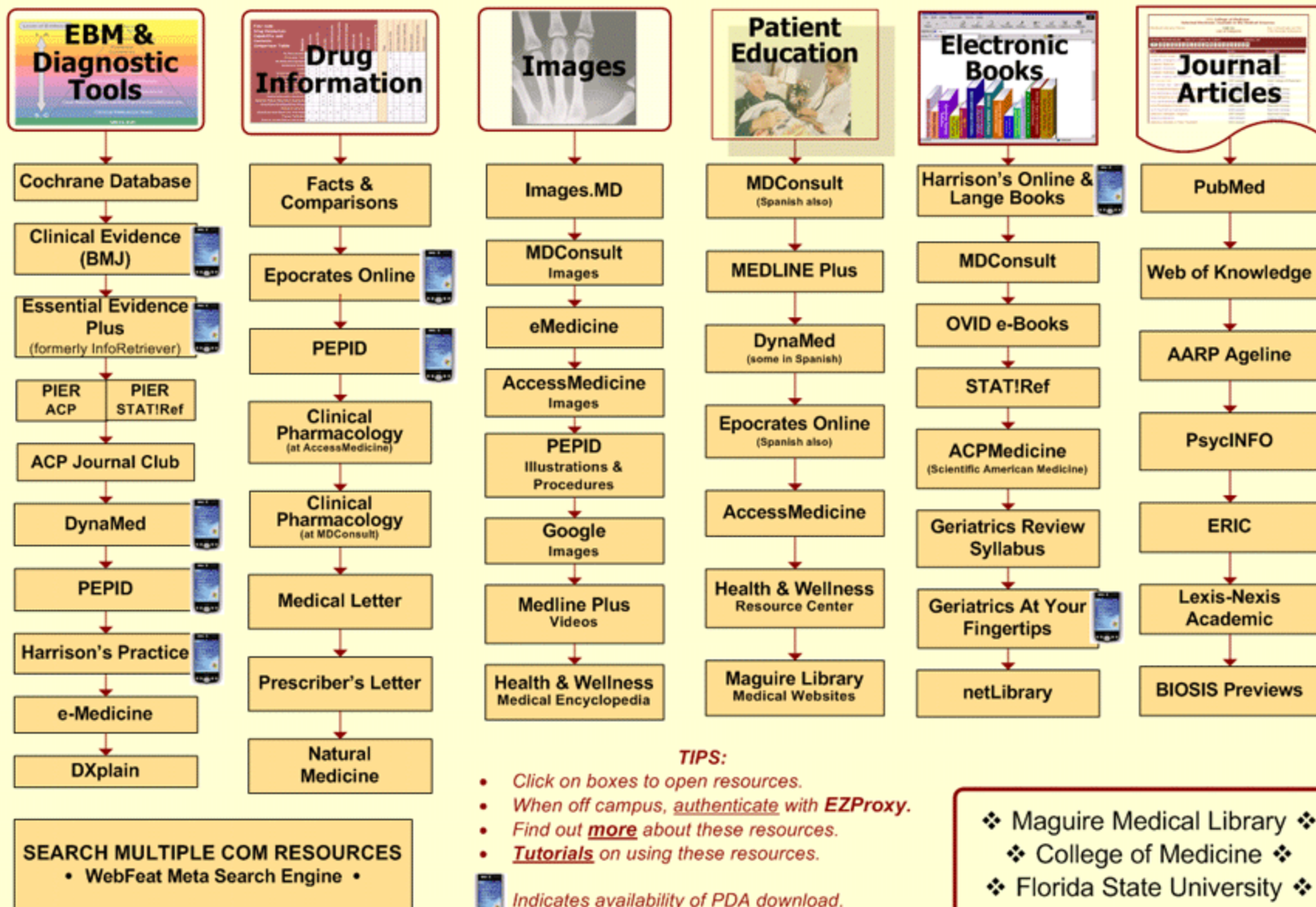
Students will improve their ability to

- Quickly locate current disease information
- Answer clinical questions in small group cases, preceptors
- Using library subscription resources
- Using their PDA
- Using reliable, free resources

PPT and Handouts

- ◎ [Accessing Medical Information Quickly](#) (PPT) on Informatics web site under Medical References
- ◎ [Finding Clinical Information Quickly](#) [Handout](#)
- ◎ [Decision Support Handout](#)
- ◎ [Drug References Handout](#) (on BB)

FIND MEDICAL INFORMATION (START HERE)



When to Use Which Resource?

- ⦿ Diagnosis versus list of complaints/symptoms
- ⦿ Zebras versus common problems
- ⦿ Detailed information/explanations versus bottom line
- ⦿ Lots of time versus short on time
- ⦿ Internet connection versus PDA only

Types of Clinical Questions



- ⦿ Definition of a term (Stedman's in PEPID, eMedicine)



- ⦿ Drug question



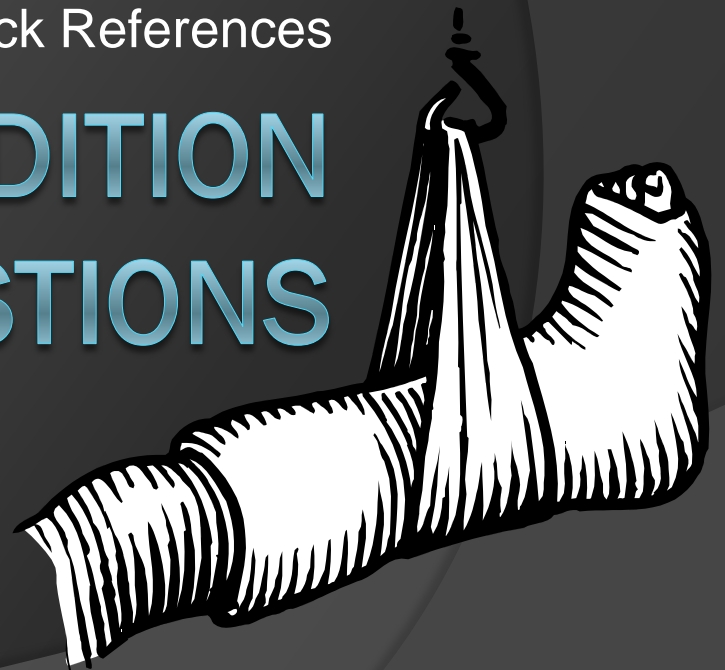
- ⦿ DDx (DxPlain and Epocrates Sx)

- ⦿ Question about a known disease or condition

- ⦿ Lab test question

Disease Quick References

DISEASE/CONDITION QUESTIONS



Types of Disease Questions

◎ **BACKGROUND** Questions:

- Description
- Cause/etiology
- Incidence and prevalence/Epidemiology
- ICD-9 codes
- Risk Factors
- Signs and Symptoms
- Associated Conditions
- History and physical

Types of Disease Questions

- ◎ Types of Questions that require current information:
 - Diagnosis
 - Treatment
 - Surgery, medications, therapy, diet....
 - Initial versus ongoing management (follow-up)
 - Harm of certain treatments
 - Prognosis
 - Outcomes or course of the disease
 - Prevention and screening

Knowing type of question
makes using resources more
efficient

Bottom line

Disease Quick References

WEB

- ⦿ ACP PIER
- ✓ ⦿ DynaMed
- ✓ ⦿ eMedicine
- ⦿ Harrison's Practice
- ⦿ PEPID

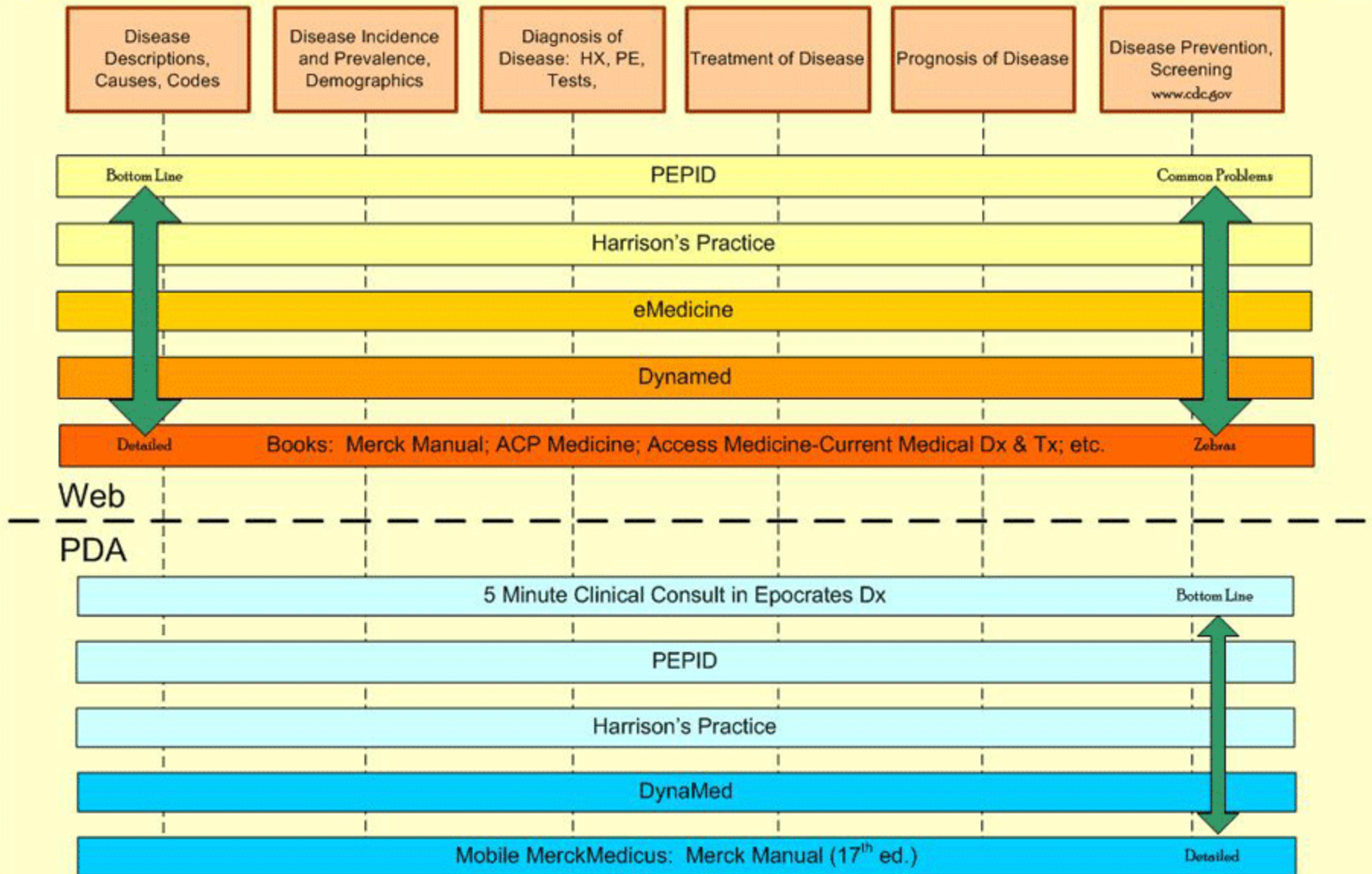
PDA

- ✓ ⦿ DynaMed
- ✓ ⦿ Epocrates Dx 5MCC
- ⦿ Harrison's Practice*
- ⦿ PEPID

How do the resources differ?

- ◎ Interface issues
 - Ease of use, organization of subtopics...
- ◎ Scope of content - # diseases, symptoms
- ◎ Depth of Content
 - Bulleted lists versus lengthy commentary
 - Links out to original research articles
- ◎ Currency of content
- ◎ Specialty perspective

Disease Quick References



PEPID

- ⦿ Contains disease information with images (check out Diverticular Disease)
- ⦿ Bottom line bulleted lists
- ⦿ Very little background information geared to 3rd year students or higher
- ⦿ Links within to drugs, diagnostic tests, associated conditions, evidence based summaries
- ⦿ On Web and PDA

Harrison's Practice

- ⦿ Internal Medicine focus
- ⦿ Background information
- ⦿ Signs and symptoms as well as diagnoses
- ⦿ Moderate depth, scope is growing
- ⦿ Linked to Access Medicine content
- ⦿ Has drug information from GoldStandard
- ⦿ Can be downloaded to PDA

eMedicine

- ⦿ Moderate amount of detail and information
- ⦿ Several monographs on one topic by different specialties
- ⦿ One long page (CTRL-F)
- ⦿ Background information good
- ⦿ Stedman's is built in
- ⦿ Navigation variable between monographs
- ⦿ Google searches it

Dynamed

- ⦿ Highly evidence based resource
- ⦿ Contains signs and symptoms as well as diagnosis
- ⦿ Very in-depth, thorough
- ⦿ Background information as well
- ⦿ On PDA as well

Epocrates Dx on PDA

- ⦿ 5 Minute Clinical Consult
- ⦿ Content depth light
- ⦿ Bottom line resource with background
- ⦿ No signs or symptoms
- ⦿ Popular- updated annually
- ⦿ Scope: 800 diseases

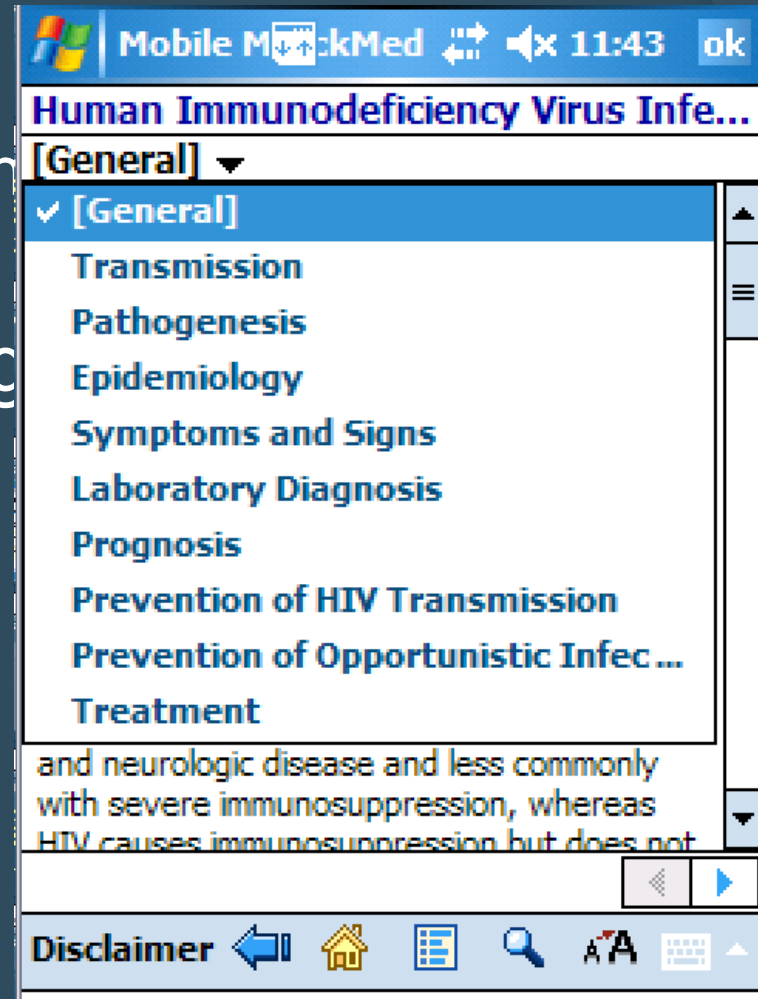
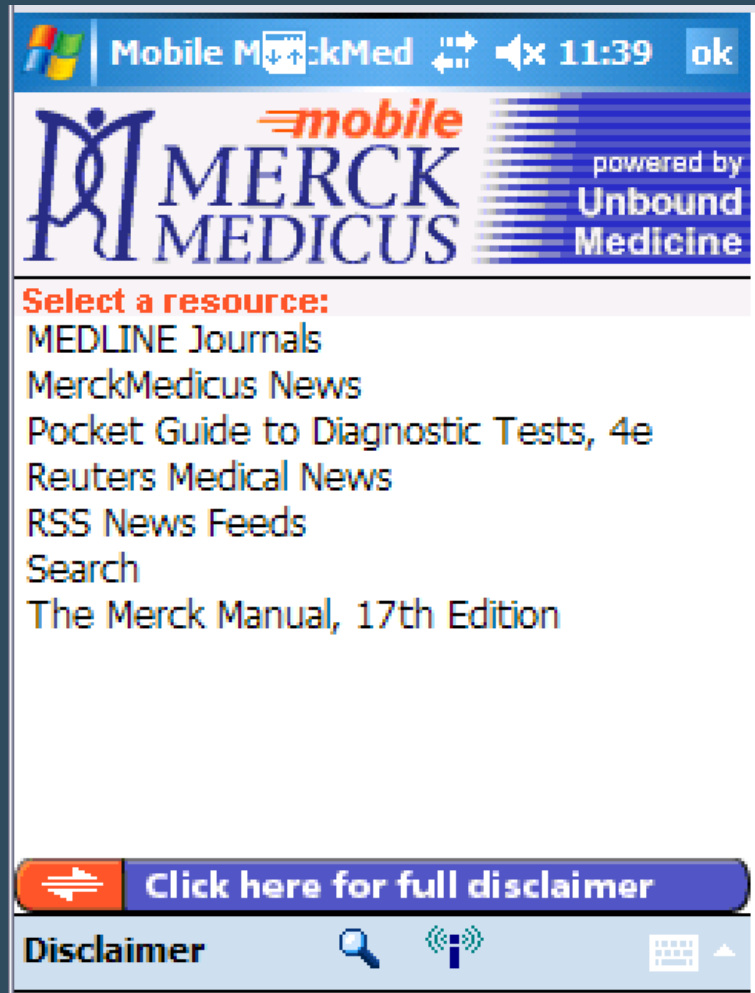
Compare Resources

- ⦿ *Background:* What is the incidence and prevalence of acute pancreatitis?
- ⦿ *Diagnosis:* What tests should you order with Gilberts Disease to confirm diagnosis?
- ⦿ *Treatment:* What are the general treatment methods for acute otitis media (AOM)?
- ⦿ *Prognosis:* What is the 5 year survival rate for someone with Stage II adenocarcinoma of the lung?

Books

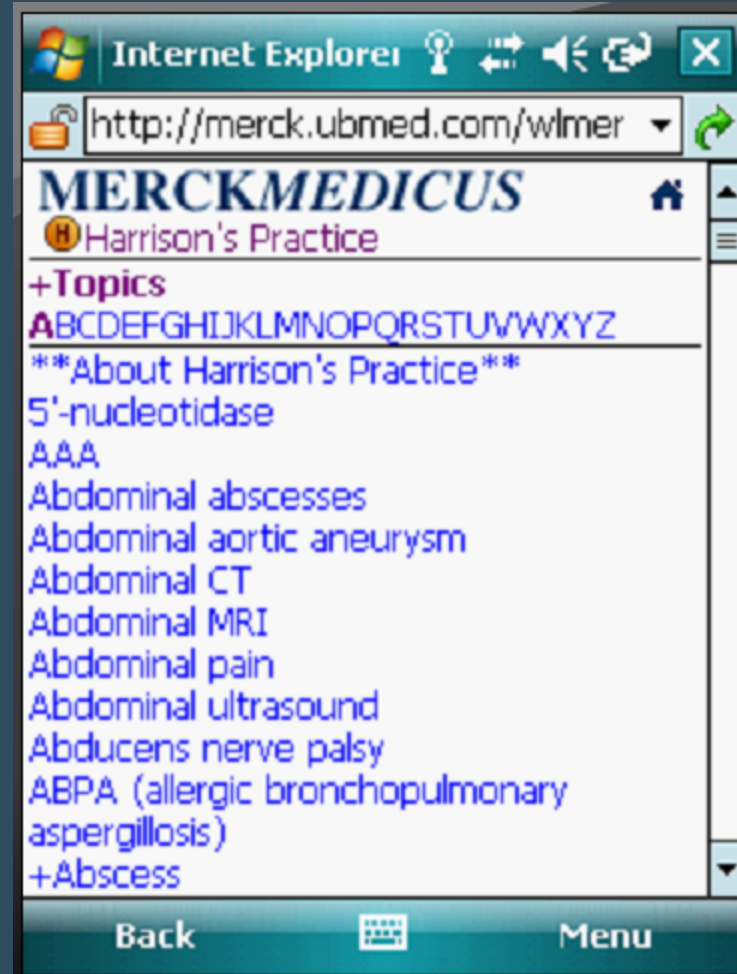
- ◎ Merck Manual available online and free on PDA in Mobile MerckMedicus
 - Access wirelessly on IE: Merck Manual, Harrison's Practice, Pocket Guide to Diagnostic Tests, Reuter's Medical News
 - Free to all practicing physicians and medical students
- ◎ ACPMedicine – Scientific American Medicine online

Mobile Merck Medicus



Installed on PDA

Mobile Merck Medicus



Wirelessly via Internet

LAB RESOURCES

LAB Resources

- ◎ Epocrates Essentials Labs PDA
 - Laboratory tests only
- ◎ PEPID Lab Manual – online and PDA
- ◎ Pocket Guide to Diagnostic Tests
 - Laboratory, imaging, and microbiology tests
 - Online at Access Medicine and MerckMedicus
 - PDA in Mobile MerckMedicus

Interpretation of diagnostic tests

- ⦿ What are normal lab values?
- ⦿ What diseases could cause these findings?
- ⦿ What medications could cause these findings?

Epocrates Labs

Epocrates ssentia 3:45

Rx Sx Dx Lab ID Tables

creatinine

Description

Muscle breakdown product, proportional to muscle mass. Normal BUN/Creatinine ratio 10:1; dehydration 15-20:1; renal disease 10:1; pre/post renal >10:1. Creatinine clearance can be estimated by the following formula:

Basics (selected)
Reference Range
Interpretation
Prep/Collection
Cost/Billing
Notes

App Edit Tools

Epocrates ssentia 3:48

Rx Sx Dx Lab ID Tables

creatinine

Reference Range

Adults
males: 0.8-1.4 mg/dl
(61-107 mcmmol/L SI units)
females: 0.6-1.2 mg/dl
(46-92 mcmmol/L SI units)

Children
< 1yr: 0.3-1.1 mg/dl
(23-84 mcmmol/L SI units)
1-6 yr: 0.2-0.5 mg/dl

Reference Range

App Edit Tools

Epocrates ssentia 3:49

Rx Sx Dx Lab ID Tables

creatinine

Result: High

Diseases or Conditions

[acromegaly](#) ^
[hyperthyroidism](#) ^
[muscular dystrophy](#) ^
[renal failure](#) ^
[rhabdomyolysis](#) ^

Medication Causes


[ACE](#)
[acetaminophen](#)
[acyclovir](#)

Interpretation

App Edit Tools

PEPID Lab Manual

Start

 **My PEPID**

[PEPID: CRC Suite](#)
Updated: 03/14/2008
Expires: 04/14/2009
[Register](#)

[PEPID: Dictionary](#)
Updated: 09/21/2007
Expires: 04/14/2009
[Register](#)

[PEPID: LAB Manuals](#)
Expires: 04/14/2009
[Register](#)

Navigation icons: back, forward, search, etc.



PEPID: CRC Sui 10:36

[{Lab Test TOC}](#)

Lab Manual Index

A B C D E F G H I
J K L M N O P Q R
S T U V W X Y Z

[Acanthocytes, Blood Smear](#)
[Acetaminophen](#)
[Acid Phosphatase](#)
[Agglutination, Blood Smear](#)
[AIDS](#)
[Albumin](#)
[Alkaline Phosphatase, Subforms](#)
[Alkaline Phosphatase, Total](#)

Navigation icons: back, forward, search, etc.

PEPID: CRC Sui 10:44

[{Lab Manual TOC}](#)

Hematocrit (Hct)

Critical Values

- High:** > 60% [SI: >0.60]
 - See [treatment](#)
- Low:** < 15%
 - See [treatment](#)

Description

- Indirect measurement of RBC number & volume
- Rapid measurement of RBC count

Normal Reference Ranges

Navigation icons: back, forward, search, etc.

Lab tab in Access Medicine

⦿ Contains

- Diagnostic imaging
- Cultures
- laboratory

Lab Questions

1. A basic metabolic panel reveals that a 30 year old man suffering from bipolar disorder has a serum calcium level of 10.9 mg/dL. Is this normal, high or low?
2. A 32 Yr old female patient complaining of fatigue and weight gain is evaluated for hypothyroidism. Her TSH (thyroid stimulating hormone) comes back 0.1 mIU/L. Is this high, low or normal?

Bottom Line

- ◎ Pick your favorites that match your taste in depth of information
- ◎ Learn which resource to use to answer certain types of questions.
- ◎ Resources should be current, accurate, evidence based, respected.
- ◎ Resources should be easy to use.
- ◎ Practice... **this is lifelong learning**