



Implementing Evidence Program Roger Suss and Allison Paige May 2019

INTRODUCTION

In family medicine, we believe in applying the best available medical evidence to improve the lives of our patients. The Implementing Evidence Program is an integral part of that and residents play an essential role.

Family medicine has a very broad scope of practice, which makes keeping up with relevant evidence a continual challenge for family physicians during their careers. During the Implementing Evidence Program, you will learn the skills to critique guidelines, evaluate primary evidence, and ensure that valuable evidence results in changes in patient care. Ideas for what evidence to implement in our practice can come from many sources. Clinical practice guidelines (CPGs) are the most common source, but primary and secondary literature, including systematic reviews and meta analyses, are other alternatives.

VALUES

- Although we are mindful of expert opinion and standard of care, we consider evidence to be the most important factor influencing our practice decisions.
- Although each of us must take responsibility for our own actions, we practice in a collaborative setting and provide care to our patients as a team. Therefore, it is desirable for us to make practice changes as a group when possible. This approach helps us to practice to a local standard of care and to monitor our efforts at implementing quality care.
- We aim to create an environment which is simultaneously respectful of the values of other team members, and critically challenging to both new and old ideas.

PEARLS

A high quality CPG will systematically review the literature and evaluate its strength for us, but most CPGs do not meet our expectations of quality. We need the skills to evaluate the evidence supporting CPGs ourselves. In addition, not all evidence comes to us in the form of a CPG. Some ideas for potential changes come to us from expert opinion, by observing the actions of our colleagues, or by perusal of the medical literature. PEARLS are an opportunity to evaluate the strength of evidence directly.

During PGY-1 residents will complete four PEARLS exercises:

- **PEARLS #1G – Guideline:** [Worksheet](#) & [Evaluation Form](#)
- **PEARLS #2SR – Systematic Review:** [Worksheet](#) & [Evaluation Form](#)
- **PEARLS #3RCT – Randomized Control Trial:** [Worksheet](#) & [Evaluation Form](#)
- **PEARLS #4SYN – Synthesis of PEARLS 1 – 3:** [Worksheet](#) & [Final Evaluation](#) & [Conclusions](#)



JOURNAL REVIEW

Journal Review is an opportunity to critically appraise practice recommendations made by experts based on the best available evidence and to decide which recommendations are of sufficient expected benefit and strength of evidence to implement and monitor. Family medicine delivers a large majority of medical care in Canada. As a result, many stakeholders desire to influence the medical decisions of family physicians. This takes many forms, but one of the most influential is clinical practice guidelines. At their best, clinical practice guidelines (CPGs) are based on high quality evidence, which has been systematically collected and evaluated through a transparent process. These high quality CPGs avoid conflict of interest and are made by family physicians for family physicians. Their product is practice recommendations, which communicate both the expected benefit to patients and the strength of the supporting evidence. Unfortunately, these high ideals are not always met and family physicians need to be able to evaluate for themselves which guideline recommendations will likely benefit their patients. CPGs do not exist for every medical topic and other sources of information, such as systematic reviews, may be required to guide clinical practice.

Residents may be asked to complete a Journal Review as part of their PGY-2 year and can choose to appraise either a CPG or systematic review.

RESOURCES

A podcast which explains the shortcomings of current CPGs:

Therapeutics Education Collaboration

<https://therapeuticseducation.org/>

Episode 333, 335, and 336

A guide for where to draw the line on clinical practice guidelines – parts I, II, and III.

Introduction to Evidence Based Medicine

User's Guides to the Medical Literature

Chapter 2: What is Evidence-Based Medicine

This is available through the Evidence Based Medicine Toolkit Homepage on the University of

Manitoba Health Sciences Library website: [https://jamaevidence-mhmedical-](https://jamaevidence-mhmedical-com.uml.idm.oclc.org/content.aspx?bookid=847&ionid=69031458)

[com.uml.idm.oclc.org/content.aspx?bookid=847&ionid=69031458](https://jamaevidence-mhmedical-com.uml.idm.oclc.org/content.aspx?bookid=847&ionid=69031458)