Ninik Yunitri

Posttraumatic stress disorder
Eye movement desensitization & reprocessing
Meta-analysis
Network meta-analysis
Systematic review
Scooping review

Evidence-based Nursing Practice

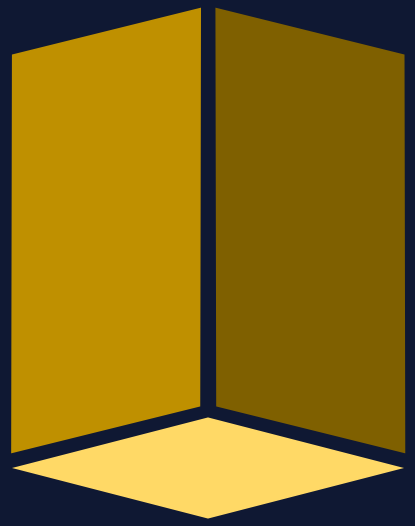
An Overview

NURSING PRACTICE

- Berperan penting dalam pelayanan kesehatan
- Memberikan asuhan keperawatan
- Mengendalikan penyakit dan gangguan
- Subjek asuhan adalah individu, keluarga dan kelompok

BEST PRACTICES OF NURSING CARE

Berbasis bukti ilmiah



Biaya terjangkau

Pelayanan berkualitas

THE GAPS

Pasien tidak menerima asuhan keperawatan berdasarkan hasil pembuktian ilmiah terkini

30%

Grol, Richard PhD. Successes and Failures in the Implementation of Evidence-Based Guidelines for Clinical Practice. Medical Care: August 2001 - Volume 39 - Issue 8 - p II-46-II-54
Tan T, Little P, Stokes T. Antibiotic prescribing for self limiting respiratory tract infections in primary care: summary of NICE guidance. BMJ2008;337:a437

THE GAPS

≥20%

Pasien mendapatkan intervensi yang tidak diperlukan bahkan berpotensi membahayakan kesehatan

Grol, Richard PhD. Successes and Failures in the Implementation of Evidence-Based Guidelines for Clinical Practice. Medical Care: August 2001 - Volume 39 - Issue 8 - p II-46-II-54
Tan T, Little P, Stokes T. Antibiotic prescribing for self limiting respiratory tract infections in primary care: summary of NICE guidance. BMJ2008;337:a437

17-23 tahun

Jarak antara ”penelitian” ke “lahan praktik”

Morris ZS, Wooding S, Grant J. The answer is 17 years, what is the question: understanding time lags in translational research. J R Soc Med. 2011 Dec;104(12):510-20. doi: 10.1258/jrsm.2011.110180

PASIEN
TIDAK MENDAPATKAN PELAYANAN YANG SEHARUSNYA

The fact that an opinion has been widely held is no evidence whatever that it is not utterly absurd

Stephen A Margolis

EVIDENCE BASED PRACTICE

Menjadi kunci untuk meningkatkan kualitas pelayana dan kesehatan pasien

Chien LY. Evidence-Based Practice and Nursing Research. J Nurs Res. 2019 Aug;27(4):e29. doi: 10.1097/jnr.0000000000000346. PMID: 31313747; PMCID: PMC6641093.

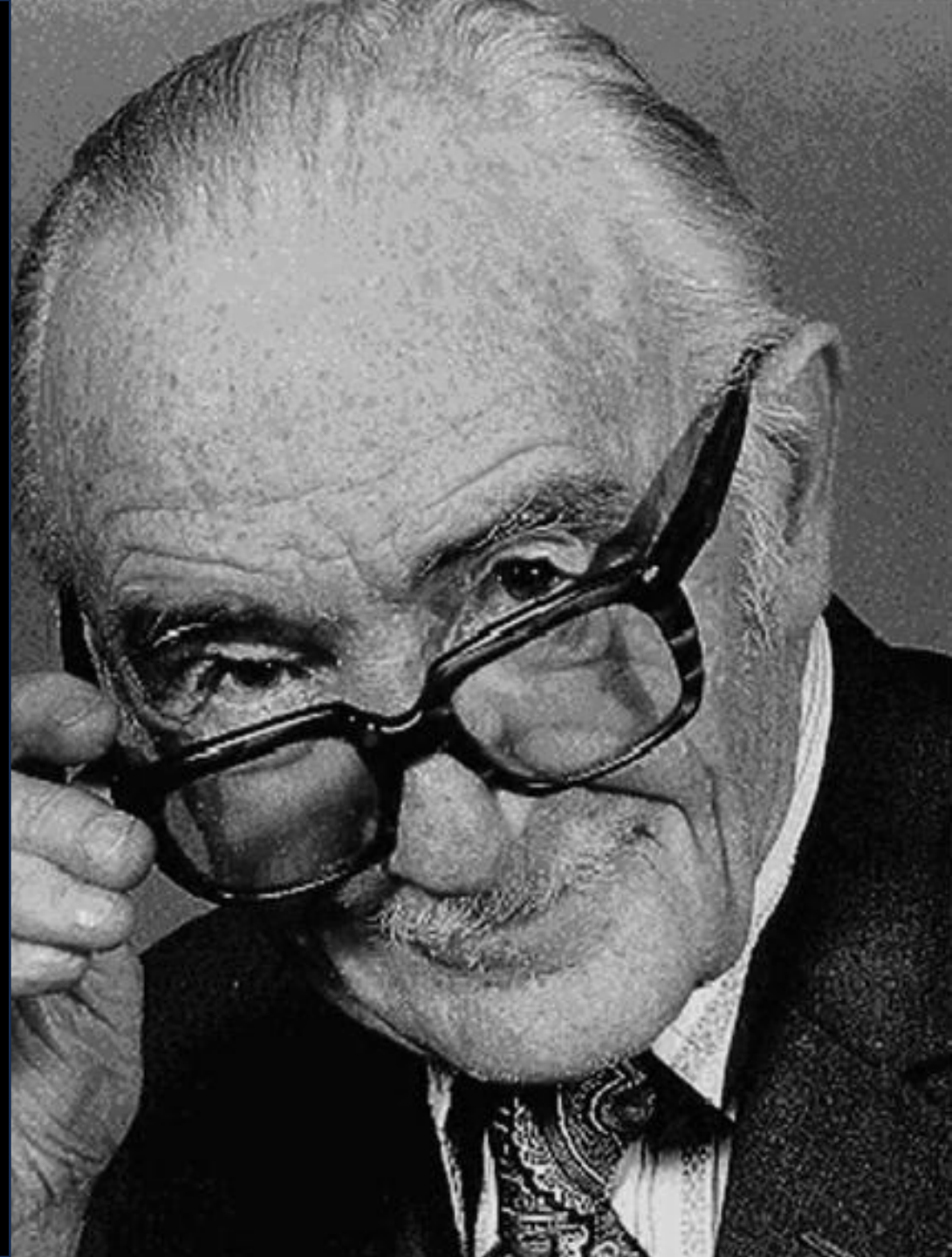
ILMU KEPERAWATAN PERLU MENERAPKAN PENELITIAN YANG BERSIFAT KOMPREHENSIF

from discovery
to
translation

from bench
to
bedside

from mechanistic
to
holistic

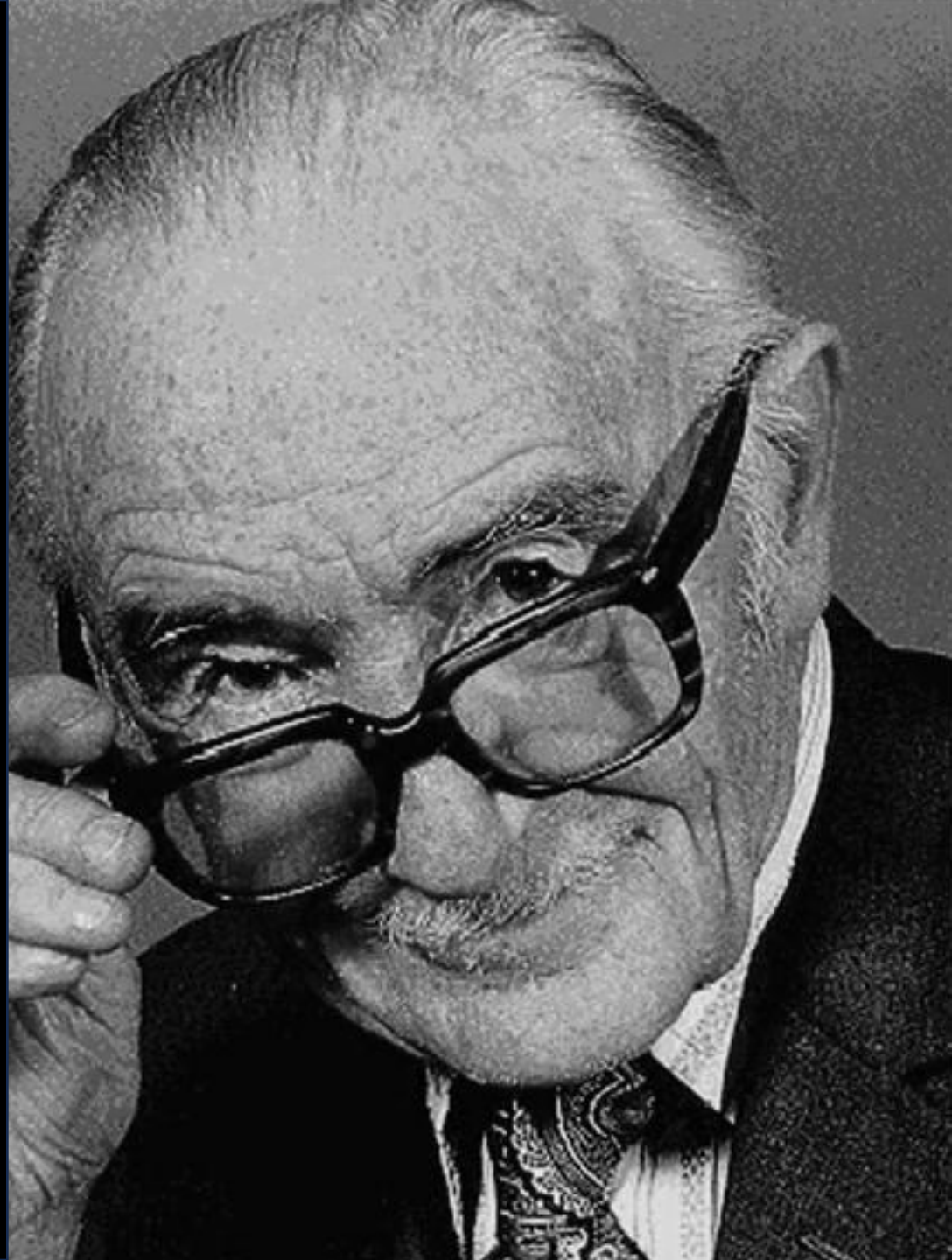
ARCHIE COCHRANE



ARCHIE COCHRANE

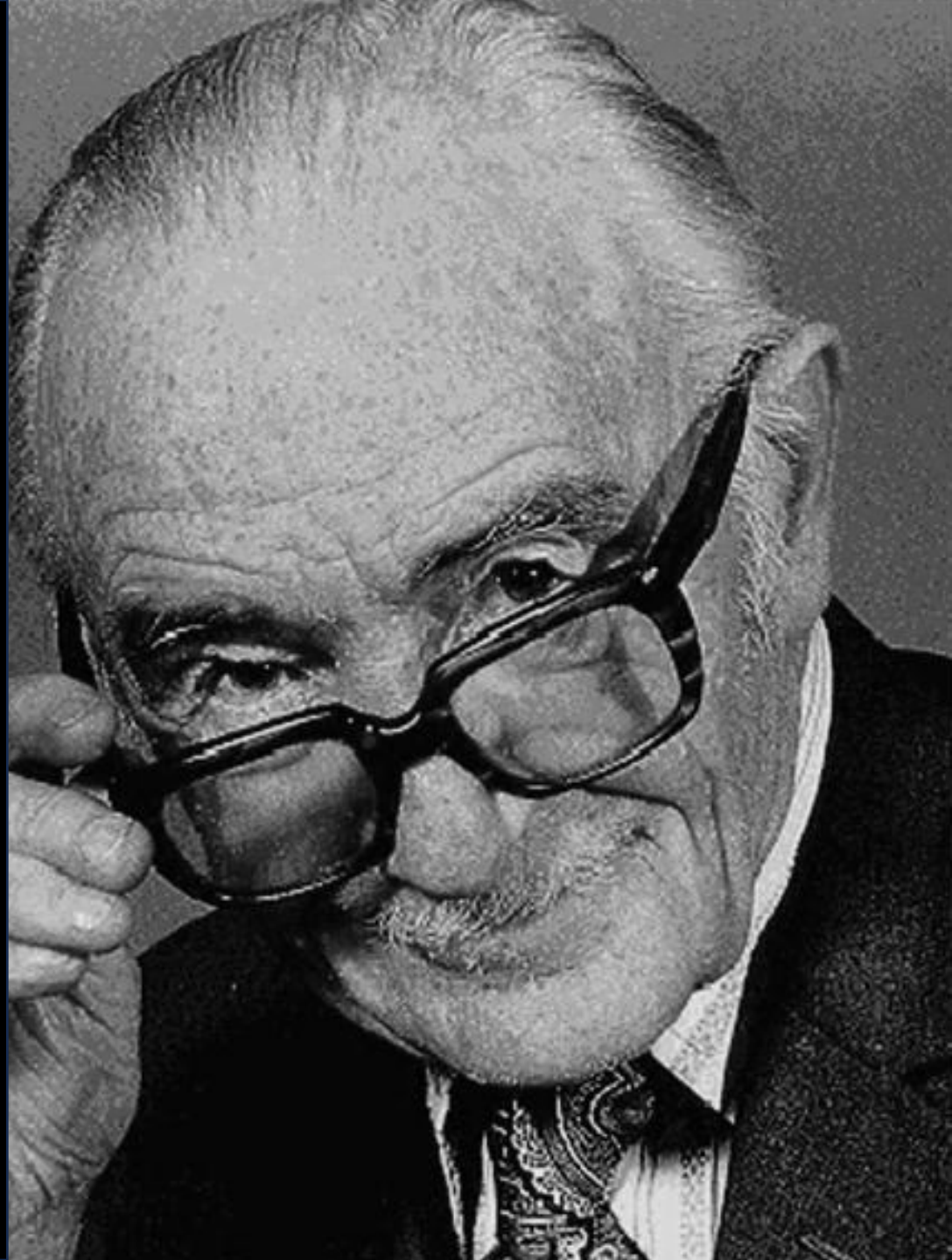
"Effectiveness & efficiency"

Membuktikan bahwa banyak terapi medis tidak dibuktikan melalui metode
Randomized Control Trial (RCT)



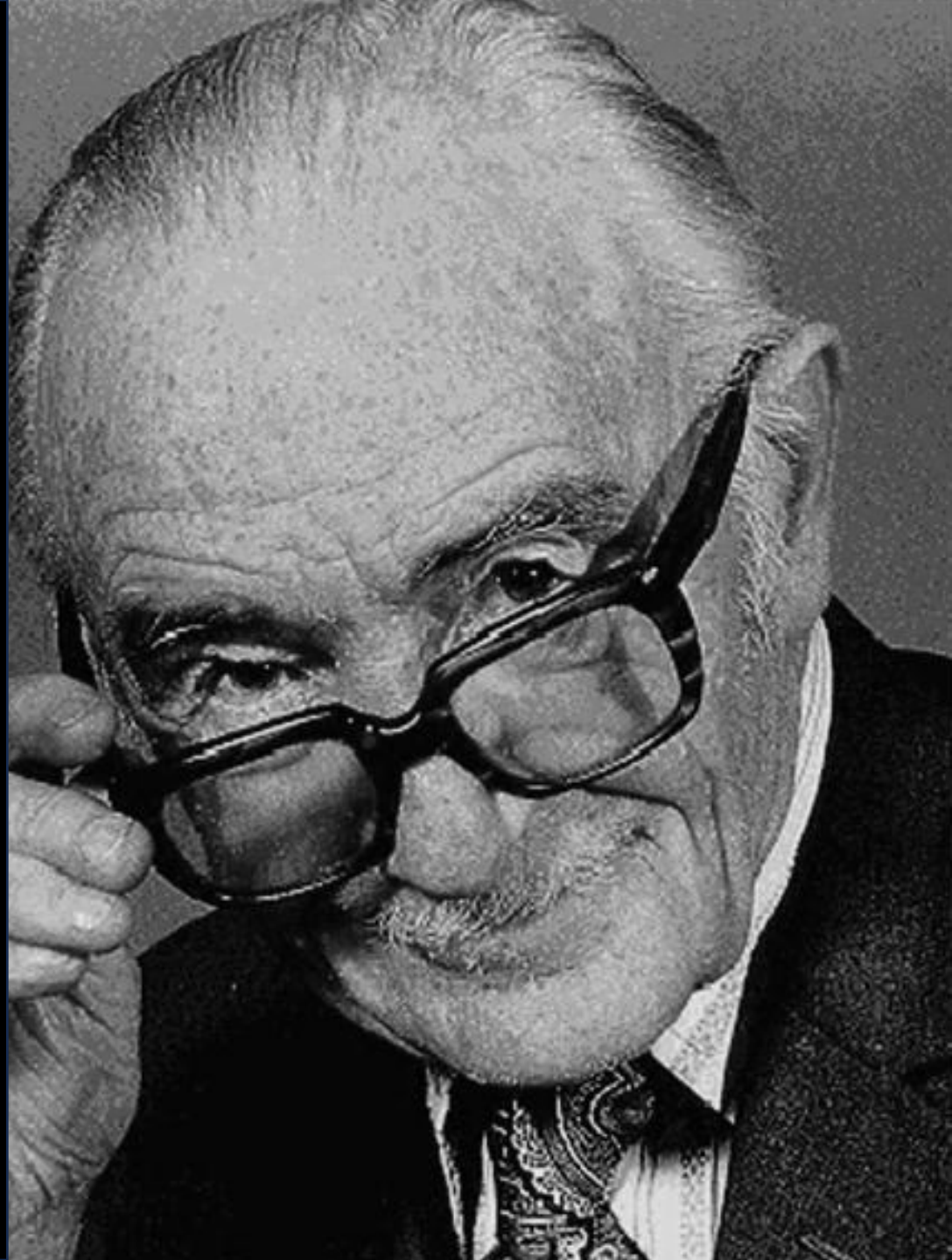
ARCHIE COCHRANE

Berpersepsi bahwa pengambilan keputusan dokter harus berdasarkan metode penelitian terbaik, RCT



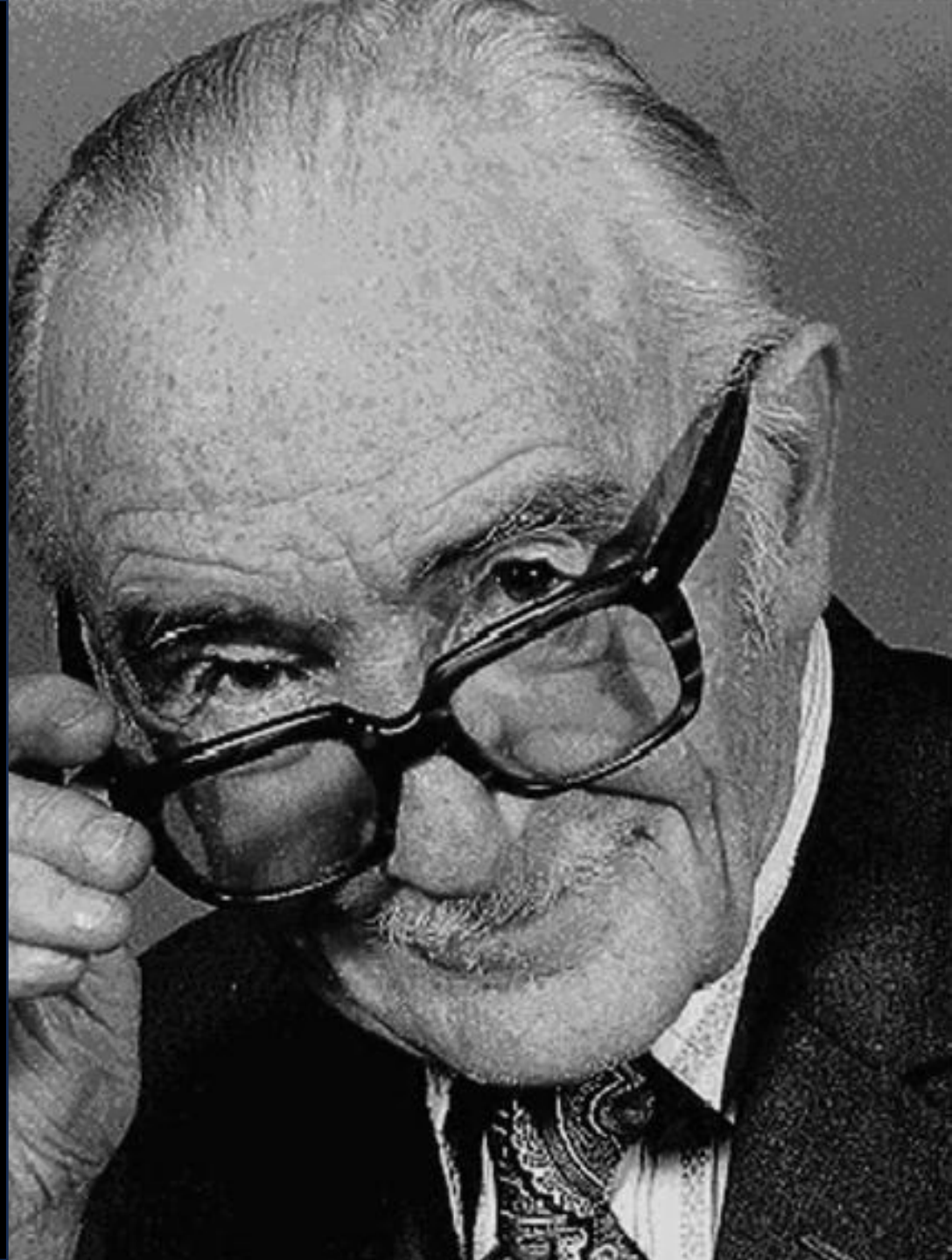
ARCHIE COCHRANE

In 1979, Cochrane khawatir dengan tidak adanya hasil penelitian yang merupakan simpulan dari semua RCT terkait topik tertentu



ARCHIE COCHRANE

Meyakini bahwa kumpulan studi RCT berkualitas dapat membantu tenaga kesehatan dalam pengambilan keputusan



EBP

Review, Analyse, Translate

the latest scientific evidence

EBP

Tujuan: Menggabungkan hasil penelitian terbaik, pengalaman klinik, dan kebutuhan pasien dalam mengambil keputusan intervensi terbaik saat memberikan asuhan

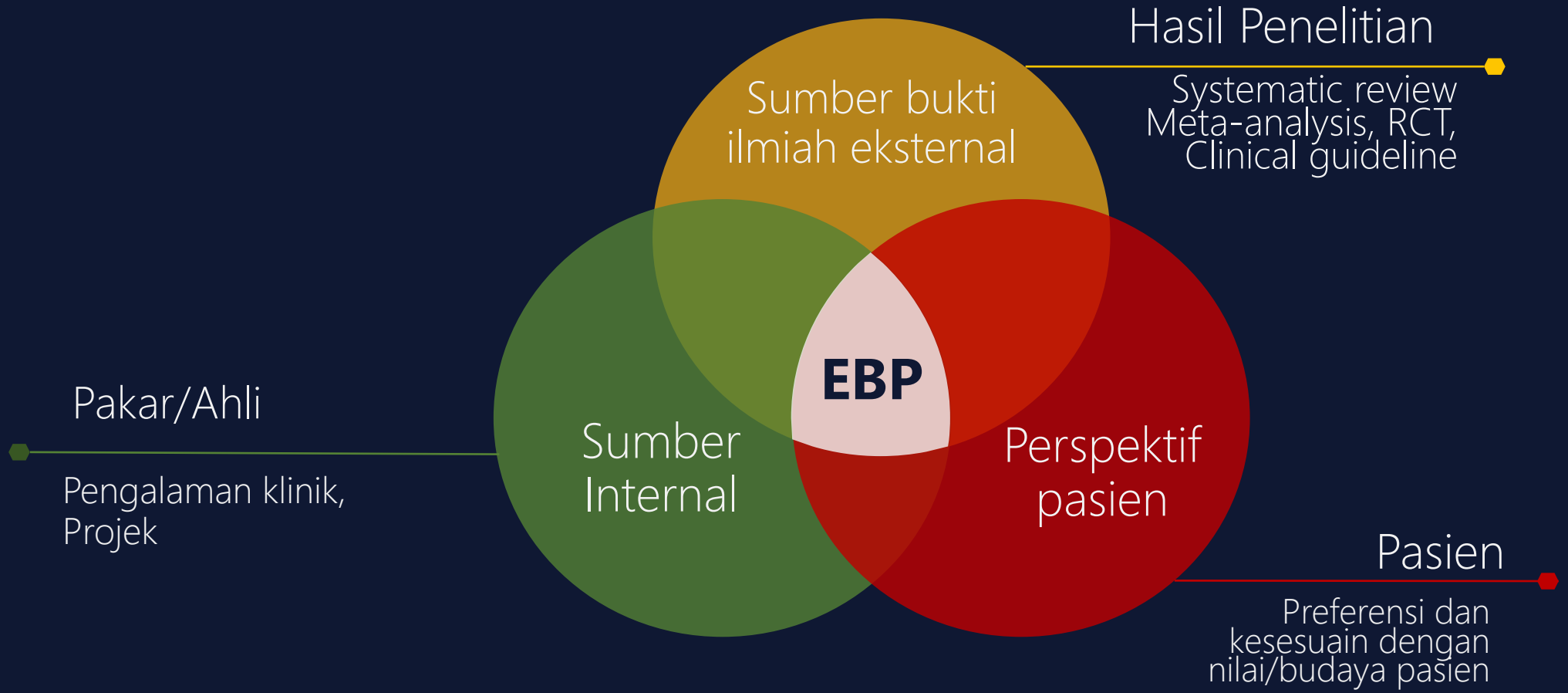
MENDUKUNG ASUHAN KEPERAWATAN YANG ADA

MENDUKUNG PERUBAHAN ASUHAN

BENEFIT EBP

- Meningkatkan kualitas pelayanan kesehatan
- Meningkatkan kemampuan tenaga kesehatan dan kepuasan kerja
- Menurunkan biaya pelayanan kesehatan
- Menurunkan keberagaman intervensi kesehatan akibat faktor geografi
- Menurunkan kejadian turn-over tenaga kesehatan
- Mampu mencapai kinerja dan hasil sesuai ekpektasi masyarakat

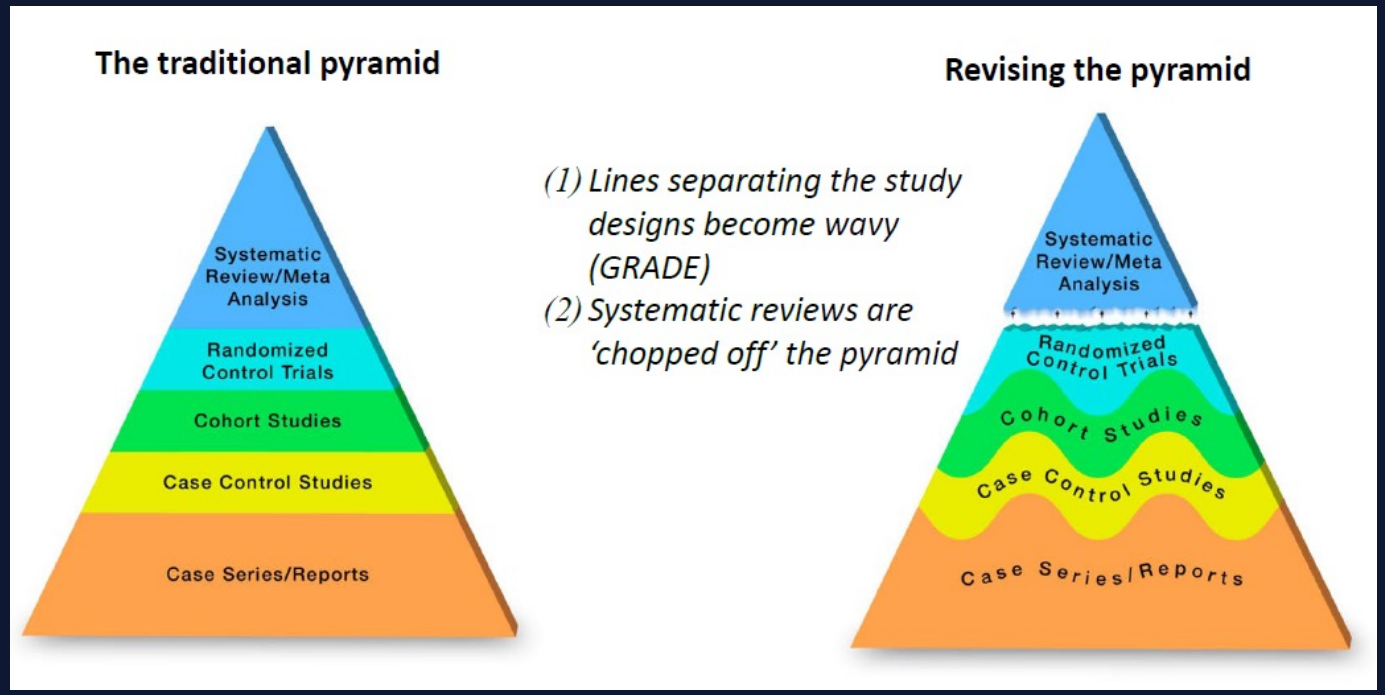
COMPONENTS OF EBP

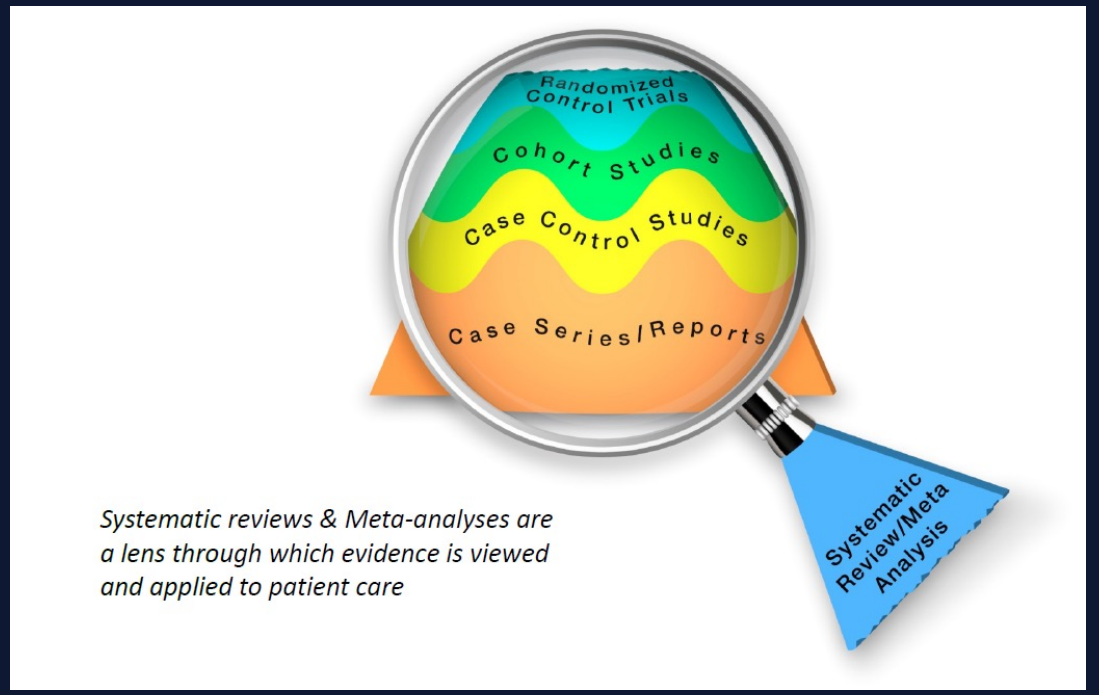


Rees C. Understanding evidence and its utilization in nursing practice. In: Holland K, Rees C (eds). New York (NY): Oxford University Press; 2010

SUMBER BUKTI ILMIAH EKSTERNAL

EVIDENCE BASED PYRAMID





Murad MH, Asi N, Alsawas M, & Alahdab F. 2016. New evidence pyramid. Evid Based Med, Vol 21, No 4, p. 125-127 doi: 10.1136/ebmed-2016-110401

" Tidak ada studi individual, meskipun telah di desain secara baik, dapat menjawab permasalahan di lahan praktik
Oleh karenanya, tidaklah bijak untuk mengambil kesimpulan dari studi individual secara eksklusif"

S.L. Braver, F.J. Thoemmes, R. RosenthalContinuously cumulating meta-analysis and replicability. Perspectives on Psychological Science, 9 (3) (2014), pp. 333-342 http://dx.doi.org/10/5k2; L.V. Hedges, I. OlkinStatistical methods for meta-analysis. Academic Press, Orlando, FL (1985); J.E. Hunter, F.L. SchmidtMethods of meta-analysis: Correcting error and bias in research findings. (2nd ed.), Sage, Thousand Oaks, CA (2004); H. Pashler, C.R. HarrisIs the replicability crisis overblown? Three arguments examined. Perspectives on Psychological Science, 7 (6) (2012), pp. 531-536, 10.1177/1745691612463401; H. Pashler, E.-J. WagenmakersEditors' introduction to the special section on replicability in psychological science: A crisis of confidence?. Perspectives on Psychological Science, 7 (6) (2012), pp. 528-530, 10.1177/1745691612465253; S.J. Ritchie, R. Wiseman, C.C. FrenchReplication, replication, replication. Psychologist, 25 (5) (2012), pp. 346-348

Multipel studi seharusnya dilakukan untuk menguji hubungan, hipotesis atau efek intervensi. Merujuk pada studi meta-analysis mampu mengatasi masalah jumlah sampel, power, dan presisi yang ditemukan pada studi individual

S.L. Braver, F.J. Thoemmes, R. RosenthalContinuously cumulating meta-analysis and replicability. Perspectives on Psychological Science, 9 (3) (2014), pp. 333-342 http://dx.doi.org/10/5k2; L.V. Hedges, I. OlkinStatistical methods for meta-analysis. Academic Press, Orlando, FL (1985); J.E. Hunter, F.L. SchmidtMethods of meta-analysis: Correcting error and bias in research findings. (2nd ed.), Sage, Thousand Oaks, CA (2004); H. Pashler, C.R. HarrisIs the replicability crisis overblown? Three arguments examined. Perspectives on Psychological Science, 7 (6) (2012), pp. 531-536, 10.1177/1745691612463401; H. Pashler, E.-J. WagenmakersEditors' introduction to the special section on replicability in psychological science: A crisis of confidence?. Perspectives on Psychological Science, 7 (6) (2012), pp. 528-530, 10.1177/1745691612465253; S.J. Ritchie, R. Wiseman, C.C. FrenchReplication, replication, replication. Psychologist, 25 (5) (2012), pp. 346-348

IN FACT,.....

- Keterbatasan waktu
- Jumlah studi banyak
- Kualitas beragam
- Ketiadaan akses
- Jumlah publikasi terus meningkat

Shah HM, Chung KC. Archie Cochrane and his vision for evidence-based medicine. Plast Reconstr Surg. 2009 Sep;124(3):982-988. doi: 10.1097/PRS.0b013e3181b03928. PMID: 19730323; PMCID: PMC2746659.

SYSTEMATIC REVIEW / META-ANALYSIS

Merupakan pendekatan penelitian yang mengambil kesimpulan berdasarkan seluruh penelitian yang telah dilakukan pada topik tertentu.

Metode penelitian ini menggunakan proses yang transparent, sistematis untuk meminimalisir bias sehingga mampu memproduksi hasil yang terpercaya untuk digunakan dalam pengambilan keputusan

Systematic review
Meta-analysis

Antman EM, Lau J, Kupelnick B, Mosteller F, Chalmers TC. A comparison of results of meta-analyses of randomized control trials and recommendations of clinical experts. JAMA 1992:268:240-248
Oxman AD, Guyatt GH. The science of reviewing research. Ann N Y Acad Sci. 1993 Dec 31;703:125-33; discussion 133-4. doi: 10.1111/j.1749-6632.1993.tb26342.x. PMID: 8192290.

INTERNAL EVIDENCE

Panel tenaga ahli

Pemberi pelayanan kesehatan

Peneliti

PREFERENSI PASIEN

INDIKATOR

Evaluasi kepuasan pasien

Umpan balik pasien selama/setelah intervensi

Dampak negatif yang dirasakan pasien

Angka drop-out pasien saat mendapatkan terapi

MODEL PENERAPAN EBNP

MODEL PENERAPAN EBNP

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
Stetler Model of Research Utilization (1976, USA) Individual Scientific evidence	Establish purposes for literature review; to carefully evaluate the research findings; comparing the results of the studies with the practice of care; make a decision (use, expect to use, reject or not use); detail and justify the steps for the implementation of the new procedure and evaluate formally.
Conduct and Utilization of Research in Nursing (CURN) (1978, USA) Individual Organizational Scientific evidence	Concern about changes in Nursing practice; define and evaluate a problem in patient care; seek solutions; selecting a potential solution; perform experiments or test the proposed solution; evaluate satisfaction or dissatisfaction with the solution, therefore repeat the steps
Quality Assurance Model Using Re- search (QAMUR) (1987, USA) Organizational Scientific evidence	Ask questions or identify problems; seek solutions, review and evaluate literature (conducting research); plan to change; implement innovation (protocols, procedures and policies); evaluate the expected results; formulate care standards (ensure quality improvement).

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
Iowa Model (1994, USA) Organizational Scientific evidence	Identify practical problems and formulate research questions; determine how much of a problem the priority topic is for the organization; identify terms for searching for evidence, critically analyze and synthesize this evidence; determine if the evidence is sufficient otherwise conduct a search; if evidence is sufficient and the changes are appropriate, conduct a pilot study to change the practice; evaluate pilot results, disseminate results and implement change.
Ottawa Model of Research Use (OMRU) (1999, Canada) Individual Organizational Scientific evidences	Identify people with authority to legitimize the change process and the required resources; clearly specify what innovation need to be implemented; evaluate innovation: potential actors that can adopt it, barriers and facilities implementation; select strategies to sensitize those involved about the value of innovation, its diffusion in the organization until reaching the direct care to the patient; evaluate the impact and disseminate the results.
Promoting Action on Research Implementation in Health Services Framework (PARIHS) (1998, United Kingdom) Organizational Scientific evidence	Seek evidence from scientific research, clinical experience, patient experiences, institution data and reports; adopt innovation in order to influence organizational culture by supporting leadership and reviewing practices; incorporate people into the organization whose knowledge and skills can support change in practice according to the evidence.

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
The Rosswurm and Larrabee Model (1999, USA) Individual Best scientific evidence	Identify the need to change practice; approximate the problem with outcome indicators; summarize the best scientific evidence (systematic review) considering feasibility, benefits and risks for its implementation; develop a plan for changing the practice, including the necessary resources; implement and evaluate change (inform if a pilot study is conducted); integrate and maintain change in practice (communicate results to strategic leaders); monitor implementation (evaluate process and results).
Advancing Research and Clinical Practice Through Close Collaboration (ARCC) (1999, USA) Organizational best evidence	Understand organizational culture and readiness to change; identify strengths and barriers for the implantation of EBP in the organization; identify the professionals specialized in the organization to assist in the implementation of the EBP with the assistance teams in the clinical units; implement the evidence in practice and evaluate the results.

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
The Tyler Collaborative Model (2004, USA) Organizational Scientific and non scientific evidence	Breaking the ice: identifying forces in the organization that can affect change; building collaborative relationships among strategic leaders to adopt change; diagnose the problem: identify areas to implement EBP; acquiring resources: raising financial and human requirements for the implementation of change; move: engage nursing assistants to identify solutions to their demands based on EBP (organize working group); choose a solution: rigorous review of scientific pro-duction; gain acceptance and followers: implement the evidence through a pilot study, in which they can evaluate the care given to the adoption of the evidence regarding their non-adoption; Stabilize: include evidence in the organization's rules and routines; evaluate results in the organization against the incorporation of evidence into work routines, and prepare reports that evaluate the results.
Johns Hopkins Nursing Evidence- based Practice Model (JHNEBP) (2007, USA) Individual Scientific and non scientific evidence	Identify a question of practice, formulate the research question using terms appropriate to the search for evidence; search, critically evaluate, summarize and classify levels of evidence; use "non-scientific" evidence (financial data, professional experience and patient preferences) for decision making; determine the feasibility of applying the evidence, draw up an action plan for its translation, implement the change, evaluate and communicate the results.

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
Academic Center for Evidence-Based Practice (ACE) (2004, USA) Individual Scientific evidence	To seek new knowledge through research; to carry out a rigorous review of multiple primary studies (in view of the different designs) to formulate new knowledge; prepare a document or guide to translate the evidence into practice; integrate evidence into practice by influencing changes in people and organization; evaluate the impact of the change in practice and its increase in the quality of care provided.
The Clinical Scholar Model (2009, USA) Individual Organizational Scientific and non scientific evidence	Identify opportunities to implement change in the organization; review internal evidence (information and service data) and external evidence (search results); determine the strength of the evidence and conduct a plan for its implementation. If they are not safe enough, conduct a search; to simulate its application with different means; apply them and obtain the results in context; disseminate the results to the internal and external community of the organization.
Model in an Academic Medical Center (2009, USA) Individual Organizational Best evidence	Formulate a clinical question; search for the best evidence (systematic review of primary experimental studies); critically review the evidence; integrate evidence into practice; communicate the results.

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
The Colorado Model (2011, USA) Individual Organizational Scientific and non scientific evidence	Identify factors that facilitate organizational change; elaborate a clinical question using the PICO strategy; identify the patient's needs; evaluate patient's values and preferences; seek scientific evidence according to a protocol (if the hospital has a protocol for EBP) or to carry out a rigorous review of the literature (in the absence of an institutional EBP protocol). In the absence of scientific evidence, use evidence from other sources: infection control data, cost-effectiveness analyzes, and clinical expertise; summarize the evidence considering their level of classification; use them according to the context and decisions of the patient; evaluate the results.
The Multisystem Model of Knowledge Integration and Translation (MKIT) (2011, USA) Organizational Scientific and non scientific evidence	Induce the development of research that can be applied in practice; identify trans- formational leadership in organizations; perform a search, critical evaluation and synthesis of the evidence by the actions of nurses with specialty for the action; to promote the translation of evidence through meetings between nurse researchers and nursing assistants; prepare a pilot study and intervention plan with the support of specialized nurses; integrate evidence into the work process and orga- nize normative documents (protocols and clinical guidelines); monitor the results achieved by the implementation; to disseminate implementation results.

Model (year/country), emphasis of approach and type of evidence	Synthesis of steps
The Research Appreciation, Acessibil- ity and Application Model (RAAAM) (2015, Australia) Organizational Scientific and non scientific evidence	To value research in the hospital context (through partnerships between universities and hospitals); access research results that can support the improvement of the quality of practice (organization of committees or specific groups and inclusion of specialist tutors in the hospital context); apply research (the development of research is an integral activity of the role of nurses in the hospital context); ensure the sustainability of the model (the development of communication strategies for dissemination and reporting to evaluate EBP).
Melnyk et al, 2010	Step 0 relates to cultivating a spirit of inquiry, which involves health professionals adopting an inquisitive approach to practice: Step 1 involves developing a focused question with one relevant framework: Step 2 relates to searching for the best evidence using the key words and synonyms: Step 3 involves critically appraising the evidence sources: Step 4 relates to integrating the evidence sourced, along with clinical expertise and patient preferences in making the best clinical decisions Step 5 involves evaluating the outcome(s) of the EBP approach, to determine the impact: Step 6 relates to disseminating the outcome(s) to enable others to learn and develop their practice.

Camargo FC, Iwamoto HH, Galvão CM, MonteiroDAT, Goulart MB, Garcia LAA. MODELS FOR THE IMPLEMENTATION OF EVIDENCE-BASED PRACTICE IN HOSPITAL BASED NURSING: A NARRATIVE REVIEW Texto Contexto Enferm, 2017; 26(4):e2070017. doi: 10.1590/0104-07072017002070017
Melnyk BM, Fineout-Overholt E, Stillwell SB, Williamson KM. The Steven Steps of Evidence-Based Practice. Am J Nurs. 2010; 110:(1)51-53 https://doi.org/10.1097/01.NAJ.0000366056.06605.d2

STAGES OF EBP

TETAPKAN PERMASALAHAN

POPULATION

INTERVENTION

COMPARISON

OUTCOME

TIME

STUDY DESIGN

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

TETAPKAN PERMASALAHAN

POPULATION, pada pasien trauma

INTERVENTION, apa dampak terapi CPT

COMPARISON, dibandingkan CBT

OUTCOME, terhadap gejala PTSD & insomnia

TIME, 3 bulan setelah terpapar bencana

STUDY DESIGN, meta-analysis atau systematic review

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

PENCARIAN SUMBER EVIDENCE

DATABASE: PubMed, CINAHL, Embase, web of science

REGISTRATION PLATFORM: PROSPERO, trial.gov, Open science framework

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

PENCARIAN SUMBER EVIDENCE

Evaluasi kualitas study menggunakan instrument yang sesuai:

Meta-analysis/systematic review, AMSTAR
Randomized control trial, RoB

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

PENILAIAN SUMBER EVIDENCE

SPO intervensi
validitas hasil penelitian
efek samping
implikasi penerapan

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

TRANSLASI SUMBER EVIDENCE

Integrasi antara sumber evidence dengan ekspert dan preferensi pasien

Susun SPO untuk diterapkan

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

TRANSLATE EVIDENCE UNTUK LAHAN PRAKTIK

Integrasi antara sumber evidence dengan ekspert dan preferensi pasien

Susun SPO untuk diterapkan di tatanan pelayanan

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

EVALUASI DAMPAK PENERAPAN EBNP

Evaluasi dampak penerapan EBNP terhadap luaran yang telah ditetapkan

Evaluasi kualitas dampak penerapan EBNP pada pasien

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

DISEMINASI HASIL PENERAPAN EBNP

Publikasi atau sosialisasikan hasil penerapan EBNP dalam skala local, regional, nasional, atau global

Melnyk, Bernadette Mazurek PhD, RN, CPNP/PMHNP, FNAP, FAAN; Fineout-Overholt, Ellen PhD, RN, FNAP, FAAN; Stillwell, Susan B. DNP, RN, CNE; Williamson, Kathleen M. PhD, RN. Evidence-Based Practice: Step by Step: The Seven Steps of Evidence-Based Practice. AJN, American Journal of Nursing 110(1):p 51-53, January 2010. | DOI: 10.1097/01.NAJ.0000366056.06605.d2

evidence from research (effective innovation) must be accompanied by **effective implementation**, and an enabling context to achieve significant outcomes.

STUDI CROSS-SECTIONAL PADA 521 FULL-TIME RN DARI RUMAH SAKIT TERSIER DI KOREA

"clinical nurses had a positive level of EBP beliefs, but the level of EBP knowledge, organizational readiness and EBP implementation were insufficient"

Yoo JY, Kim JH, Kim JS, Kim HL, Ki JS. Clinical nurses' beliefs, knowledge, organizational readiness and level of implementation of evidence-based practice: The first step to creating an evidence-based practice culture. PLoS One. 2019 Dec 26;14(12):e0226742. doi: 10.1371/journal.pone.0226742. PMID: 31877147; PMCID: PMC6932768.

PERSIAPAN PENERAPAN EBNP

- Melatih fasilitator
- Menyusun program dasar EBNP (visi, kebijakan, rangan biaya, sumber daya manusia, dan fasilitas lainnya)
- Berpartisipasi aktif dalam pelatihan terkait EBNP
- Mengembangkan kurikulum atau program untuk meningkatkan pemahaman EBNP pada semua lini tenaga kesehatan

Yoo JY, Kim JH, Kim JS, Kim HL, Ki JS. Clinical nurses' beliefs, knowledge, organizational readiness and level of implementation of evidence-based practice: The first step to creating an evidence-based practice culture. PLoS One. 2019 Dec 26;14(12):e0226742. doi: 10.1371/journal.pone.0226742. PMID: 31877147; PMCID: PMC6932768

References

- Grol, Richard PhD. Successes and Failures in the Implementation of Evidence-Based Guidelines for Clinical Practice. Medical Care: August 2001 - Volume 39 - Issue 8 - p II-46-II-54
- Morris ZS, Wooding S, Grant J. The answer is 17 years, what is the question: understanding time lags in translational research. J R Soc Med. 2011 Dec;104(12):510-20. doi: 10.1258/jrsm.2011.110180
- Tan T, Little P, Stokes T. Antibiotic prescribing for self limiting respiratory tract infections in primary care: summary of NICE guidance. BMJ 2008;337:a437
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