

Information Mastery Practicum Guidelines:

As a reminder in order to ensure that the weekly Information Mastery Practicum conferences are educational and stimulating, remember to follow the formats described below.

Also, please remember the following timelines for preparation/follow-up:

- 3 weeks in advance of conference: Inform Coordinator and/or Fellow of any special resources required (laptops, handhelds, HSL computer classroom reservations, etc.)
- Friday before Wednesday's conference: send Coordinator information on any articles, worksheets, or PowerPoint slides that will be used
- By the end of the week of the conference: send Fellow a summary of the conference discussing the question, the article, LOE & if it changes things (or confirms status quo). Fellow may make a few suggestions prior to passing it onto Coordinator for dissemination

Article Reviews (# dependent on available slots, at least 3 each)

(treatment, diagnosis, prognosis, practice guidelines, review, and decision analyses)

Three minutes: Present a case scenario, either real or "made up," and conclude with a specific clinical question. (See Clinic Notebook for some real clinical questions.)

Example: "We often see patients with acute sinusitis, and I saw an article in *JAMA* saying that three days of treatment was adequate. I wonder if I should change the way I treat sinusitis?" Also provide information on how the article was obtained.

Three minutes: Lead a discussion among participants regarding their answers to the question and obtain a vote commitment. Example: "How many people currently treat sinusitis for only three days, seven days, ten days, fourteen days? What have you been taught?"

Three minutes: Brief discussion by presenter from the abstract of the results (avoid any discussion of the methods). This must be limited, since it is assumed that the participants have read the article in advance.

Fifteen minutes: Presenter **leads** discussion regarding relevance and validity of article, based on appropriate worksheet. This is a seminar where **you are the teacher and not a lecturer**. **Discussion is important, and everyone should participate.** Answers should not be given solely by the presenter, and the presenter should be prepared for the discussion to go off-topic at times. Worksheets should be obtained in advance from Coordinator and distributed with the article. If there is any confusion regarding which worksheet to use, please see the assigned fellow or faculty member. Occasionally an article will not fit any of the worksheets. This is okay. Be sure to conclude with a brief discussion about the Level of Evidence rating.

Fifteen minutes: Group discussion of clinical relevance of information obtained from article. It is very important to conclude with something positive – what useful things can we do with this information? How does it help us care for our patients? Does it help answer our original question? Example: “So, how are we all going to manage sinusitis now? Does this information change anyone’s behavior?”

Hunting/STEPS Sessions (# 4 each/year)

(Hunting for an answer to a specific question or doing STEPS on new drug)

Three minutes: Present a case scenario, either real or “made up,” and conclude with a specific clinical question, which you hope to address that day.

Three minutes: Lead a discussion among participants regarding their answers to the question and obtain a vote commitment (i.e. get a feeling for what the group knows/does).

Fifteen minutes: Have the group break up into smaller groups (2-4 persons, or they can look individually). They can either select their own method of searching or be given a prescribed use of tools (i.e. Google, InfoRetriever, Up-To-Date, Dynamed, library resources, book, Clinical Evidence). Allow them to look, explore, etc.

Fifteen minutes: Bring the group back together and have everyone to discuss how they looked for an answer and what they used to find their answer. They may also give you an answer. All of this should go up on the SmartBoard/ Dry-erase board.

Fifteen minutes: The presenter will lead discussion of how useful the tools were at finding an answer, and any limitations encountered. In particular, were some answers more “relevant, trustworthy, timely”? See the Hunting Tool Worksheet for more information. If STEPS session, handout formal STEPS evaluation from *AFP website*

Foraging Sessions (#1 or 2 per year)

(Looking at tools to apprise you of new, important information)

One option is to talk about a specific important medical news item and comparing different takes on this news from the different sources. Another option is to look at one particular tool for foraging and see how it does in a short time period.

Three minutes: Discuss ‘important’ medical news and how you have heard of it. (Recent example: Now we should wait 2 minutes before clamping cord after normal delivery)

Five minutes: Ask how participants get their medical news (drug rep, NPR, InfoPOEMs, rounds, pimping, etc.), and if they have heard the news you have.

Five to ten minutes: Talk about the groups’ ideas about the news you are discussing.

Fifteen minutes: Go through worksheet to evaluate different sources- BMJ updates, Dynamed Alerts, Journal Club, Daily POEMs, MedScape, etc.

Fifteen minutes: Go through the important news as it is given to you. Compare methodology and trustworthiness, relevance of various sources.