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Finding Health Information on the Web to Improve Patient Care

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Objectives

- Identify **10 ways** to improve patient care using library and internet resources
- Describe different tools to **navigate the web** to find clinical resources
- Describe web resources for **evidence-based practice**
- Identify ways to find and obtain **full-text articles**

#1

***Search a Database to find
Journal Articles***

Databases

- PubMed

pubmed.gov

- NLM Gateway

gateway.nlm.nih.gov/gw/Cmd

PubMed

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- Includes MEDLINE (1950's to present)
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Language
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PubMed is a service of the [U.S. National Library of Medicine](#) that includes over 16 million citations from MEDLINE and other life science journals for biomedical articles back to the 1950s. PubMed includes links to full text articles and other related resources.

for hispanic attitude tuberculosis [Save Search](#)

Limits

Limits: **English, Humans**

Display Show: 20 Sort

All: 11 Review: 1

Items 1 - 11 of 11

1: [Ailinger RL, Armstrong R, Nguyen N, Lasus H.](#)

Latino immigrants' knowledge of tuberculosis.
Public Health Nurs. 2004 Nov-Dec;21(6):519-23.
PMID: 15566556 [PubMed - indexed for MEDLINE]

2: [Coreil J, Lauzardo M, Heurtelou M.](#)

Cultural feasibility assessment of tuberculosis prevention among persons of Haitian origin in South Florida.
J Immigr Health. 2004 Apr;6(2):63-9.
PMID: 15014223 [PubMed - indexed for MEDLINE]

3: [Rodriguez-Reimann DI, Nicassio P, Reimann JO, Gallegos PI, Olmedo EL.](#)

Acculturation and health beliefs of Mexican Americans regarding tuberculosis prevention.
J Immigr Health. 2004 Apr;6(2):51-62.
PMID: 15014222 [PubMed - indexed for MEDLINE]

4: [Berg J, Blumberg EJ, Sipan CL, Friedman LS, Kelley NJ, Vera AY, Hofstetter CR, Hovell MF.](#)

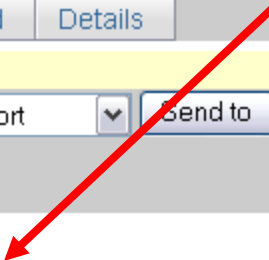
Somatic complaints and isoniazid (INH) side effects in Latino adolescents with latent tuberculosis infection (LTBI).
Patient Educ Couns. 2004 Jan;52(1):31-9.
PMID: 14729288 [PubMed - indexed for MEDLINE]

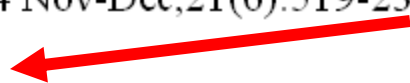
5: [D'Lugoff MI, Jones W, Kub J, Glass N, Thompson D, Brinkley-Laughon S, Chaisson RE.](#)

Tuberculosis screening in an at-risk immigrant Hispanic population in Baltimore city: an academic health center/local health department partnership.
J Cult Divers. 2002 Fall;9(3):79-85.
PMID: 12484001 [PubMed - indexed for MEDLINE]

6: [Poss JE.](#)

Developing an instrument to study the tuberculosis screening behaviors of Mexican migrant farmworkers.



Limits Limits: **English, Humans**Display Show: Sort 1: Public Health Nurs. 2004 Nov-Dec;21(6):519-23.[Related Articles](#)

Latino immigrants' knowledge of tuberculosis.

Ailinger RL, Armstrong R, Nguyen N, Lasus H.

George Mason University, Fairfax, Virginia 22030-4444, USA. railinge@gmu.edu

This study examined tuberculosis (TB) knowledge in Latino immigrants receiving latent TB infection (LTBI) therapy. The design was descriptive correlational. Knowledge was measured using the LTBI Knowledge Instrument. The sample included 82 Latino immigrants primarily from Central America and Bolivia who attended a public health clinic for TB therapy. The mean TB knowledge score was 66%. Knowledge scores were correlated with years of education, but not with number of years in the United States. More than 80% of study participants correctly answered questions about the importance of keeping monthly appointments and how Isoniazid works to eradicate TB germs in the human body. Questions about the contagiousness of active TB and how the disease spreads received the most incorrect responses. Public health interventions should focus on increasing Latino immigrants' knowledge of TB, both in public health clinics and in the community.

PMID: 15566556 [PubMed - indexed for MEDLINE]

Latino Immigrants' Knowledge of Tuberculosis

Rita L. Ailinger, R.N., Ph.D.,
Rachel Armstrong, M.S.N.,
Nga Nguyen, M.P.H., R.N., and
Howard Lasus, Ph.D.

Abstract This study examined tuberculosis (TB) knowledge in Latino immigrants receiving latent TB infection (LTBI) therapy. The study design was descriptive correlational. Knowledge was measured using the LTBI Knowledge Instrument. The convenience sample included 82 Latino immigrants primarily from Central America and Bolivia who attended a public health clinic for their LTBI therapy. The mean TB knowledge score was 66%. Knowledge scores were correlated with years of education, but not with age or number of years in the United States. More than 80% of study participants correctly answered questions about the importance of keeping monthly appointments and how Isoniazid works to eradicate TB germs in the human body. Questions that pertained to the contagiousness of active TB and how the disease spreads received the most incorrect responses. Public health nursing interventions should focus on increasing Latino immigrants' knowledge of TB, both in public health clinics and in the community.

Key words: knowledge, Latino, LTBI, tuberculosis.

the United States, particularly among immigrant and refugee populations, the elderly, and those with human immunodeficiency virus infection. While the number of TB cases in the United States decreased by 7% from 1999 to 2000, 46% of those cases were foreign-born individuals. Among the foreign born, individuals from Central and South America and the Caribbean account for 41% of the TB cases in the United States [Centers for Disease Control and Prevention (CDC), 2002].

Those individuals who are infected with *Mycobacterium tuberculosis*, but do not have active TB and therefore cannot spread the infection to others, are said to have LTBI. Treatment for LTBI is often indicated to ensure that the infection does not become active TB. LTBI therapy consists of a 9-month course of daily Isoniazid (INH) and monthly clinic visits to be monitored for side effects of the medication. If left untreated, approximately 10% of LTBI cases turn into active TB. Active cases of TB infect about 20% of contacts, and the rate of TB among contacts is 75 times higher than that among the general population (CDC, 2000). An estimated \$700 million per year is spent in the United States on health care for TB (Brown et al., 1995).

The objective of this study was to assess knowledge of

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To watch the instructional video clips (see VIDEO below) RealOne player is required ([download free player](#))

PubMed provides access to all of MEDLINE back to the mid-1960's and to additional life sciences journals. Updated daily. VIDEO

Basic Search Techniques VIDEO

Step 1: Enter your terms

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Type any key word or phrase into the search box as shown above.

Use an asterisk (*) to retrieve variations on a word, e.g., *bacter** retrieves *bacteria*, *bacterium*, *bacteriophage*, etc. VIDEO

- **For a Subject Search:** Enter one or more words (e.g., *asthma drug therapy*) in the **query box** and click on **Go**. PubMed automatically combines (**ANDs**) terms together so that all terms or concepts are present and “translates” your words into MeSH terms.
- **For an Author Search:** Enter the author's name in the format of last name first followed by initials (e.g., *byrnes ca*).
- **For a Journal Search:** To retrieve articles from a specific journal use *PubMed's Journals Database* or *Single Citation Matcher* features (available from the left

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Instructional Video Clips

- [Introduction](#) (1:54)
- [Basic search](#) (0:40)
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- [Connecting to fulltext](#) (3:44)
- [Printing and saving](#) (1:31)
- [Ordering articles](#) (2:13)
- [Documenting your search strategy](#) (0:31)
- [Related Articles](#) (0:50)
- [Clipboard](#) (1:42)
- [History](#) (2:12)
- [Single citation matcher](#) (0:30)
- [Clinical queries](#) (2:46)
- [MeSH Browser](#) (3:04)
- [Additional Help](#) (0:28)



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 - ClinicalTrials.gov - information for the public about clinical trials
 - DIRLINE® - Directory of Health Organizations
 - Genetics Home Reference™ - consumer info for genetic conditions
 - Household Products Database
 - HSRProj - health services research projects
 - OMIM - Online Mendelian Inheritance in Man
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[MedlinePlus](#) - Medical Encyclopedia

[MedlinePlus](#) - Current Health News

[MedlinePlus](#) - Other Resources

[ClinicalTrials.gov](#)

[DIRLINE](#) - Directory of Health Organizations

[Genetics Home Reference](#)

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- For UW Affiliates: use the Proxy service to access full-text e-journals from off-campus
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Loansome Doc

1: [Circulation](#). 2007 Feb 20;115(7):855-60.

Prehypertension and cardiovascular disease risk in the Women's Health Initiative.

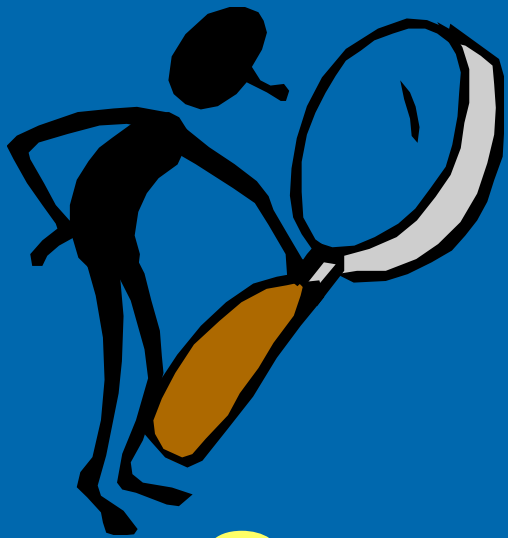
[Hsia J](#), [Margolis KL](#), [Eaton CB](#), [Wenger NK](#), [Allison M](#), [Wu L](#), [LaCroix AZ](#), [Black HR](#); [Women's Health Initiative Investigators](#).

Department of Medicine, George Washington University, 2150 Pennsylvania Ave NW, Washington, DC 20037, USA. jhsia@mfa.gwu.edu

BACKGROUND: Prehypertension is common and is associated with increased vascular mortality. The extent to which it increases risk of nonfatal myocardial infarction, stroke, and congestive heart failure is less clear. METHODS AND RESULTS: We determined the prevalence of prehypertension, its association with other coronary risk factors, and the risk for incident cardiovascular disease events in 60,785 postmenopausal women during 7.7 years of follow-up using Cox regression models that included covariates as time-dependent variables. Prehypertension was present at baseline in 39.5%, 32.1%, 42.6%, 38.7%, and 40.3% of white, black, Hispanic, American Indian, and Asian women, respectively (P<0.0001 across ethnic groups). Age, body mass index, and prevalence of diabetes mellitus and hypercholesterolemia increased across blood pressure categories, whereas smoking decreased (all P<0.0001). Compared with normotensive women (referent), adjusted hazard ratios for women with prehypertension were 1.58 (95% confidence interval [CI] 1.12 to 2.21) for

Related Links

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- ▶ Prevalence of h persons with p
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- ▶ The course of v occurrence of v
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#2

Search for Evidence



What is evidence-based practice?

- Evidence based medicine is the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients.
- The practice of evidence based medicine means integrating individual clinical expertise with the best available external clinical evidence from systematic research.

Sackett DL et al. *Evidence based medicine: what it is and what it isn't.* BMJ 1996 Jan 13; 312 (7023): 71-2.

EBP and Guidelines Resources

- PubMed Clinical Queries/Systematic Reviews
www.ncbi.nlm.nih.gov/entrez/query/static/clinical.shtml
- Cochrane Library (fee): gold standard
www.cochrane.org
- National Guideline Clearinghouse
guideline.gov
- TRIP (Turning Research into Practice)
www.tripdatabase.com

PubMed Strategies for Evidence-Based Citations

➤ *PubMed* Limits

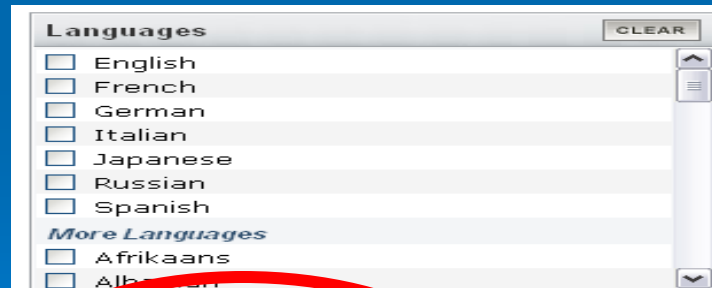
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- Practice Guideline
- Clinical Trial

➤ *PubMed* Clinical Queries and Systematic Reviews

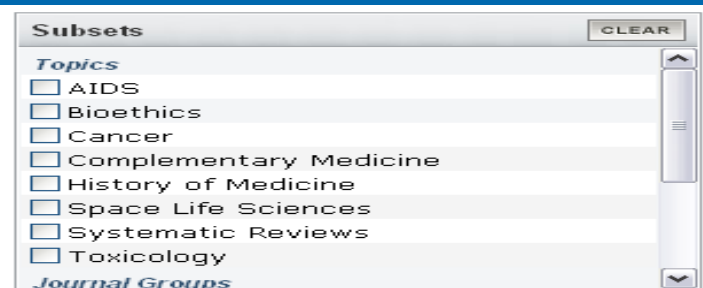
PubMed Limits



The screenshot shows the PubMed website interface. At the top, the PubMed logo is on the left, and the National Library of Medicine (NLM) logo is on the right. Below the logos is a navigation bar with tabs for PubMed, Nucleotide, Protein, Genome, and Structure. A search bar contains the text "for obesity American Indian" with "Go" and "Clear" buttons. Below the search bar are buttons for "Limits", "Preview/Index", "History", "Clipboard", and "Details". The "Limits" button is circled in red. Below these buttons is the text "Limit your search by any of the following criteria."



The "Languages" panel is shown with a "CLEAR" button at the top right. It contains a list of languages with checkboxes: English, French, German, Italian, Japanese, Russian, and Spanish. Below this list is a section titled "More Languages" with checkboxes for Afrikaans and Albanian.



The "Subjects" panel is shown with a "CLEAR" button at the top right. It contains a section titled "Topics" with checkboxes for AIDS, Bioethics, Cancer, Complementary Medicine, History of Medicine, Space Life Sciences, Systematic Reviews, and Toxicology. Below this is a section titled "Journal Groups" with a scrollable list.



The "Type of Article" panel is shown with a "CLEAR" button at the top right. It contains a list of article types with checkboxes: Clinical Trial, Editorial, Letter, Meta-Analysis, Practice Guideline, Randomized Controlled Trial, and Review. Below this list is a section titled "More Publication Types" with checkboxes for Addresses and Bibliography. This panel is circled in red.



The "Ages" panel is shown with a "CLEAR" button at the top right. It contains a list of age groups with checkboxes: All Infant: birth-23 months, All Child: 0-18 years, All Adult: 19+ years, Newborn: birth-1 month, Infant: 1-23 months, Preschool Child: 2-5 years, Child: 6-12 years, Adolescent: 13-18 years, Adult: 19-44 years, and Middle Aged: 45-64 years.

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Privacy Policy

This page provides the following specialized PubMed searches for clinicians:

- [Search by Clinical Study Category](#)
- [Find Systematic Reviews](#)
- [Medical Genetics Searches](#)

After running one of these searches, you may further refine your results using PubMed's [Limits](#) feature.

Results of searches on these pages are limited to specific clinical research areas. For comprehensive searches, use [PubMed](#) directly.

Search by Clinical Study Category

This search finds citations that correspond to a specific clinical study category. The search may be either broad and sensitive or narrow. The search filters are based on the work of [Haynes RB et al.](#) See the [filter table](#) for details.

Search

Category	Scope
<input type="radio"/> etiology	<input checked="" type="radio"/> narrow, specific search
<input type="radio"/> diagnosis	<input type="radio"/> broad, sensitive search
<input checked="" type="radio"/> therapy	
<input type="radio"/> prognosis	

Find Systematic Reviews

For your topic(s) of interest, this search finds citations for systematic reviews, meta-analyses, reviews of clinical trials, evidence-based consensus development conferences, and guidelines.

For more information, see [Help](#). See also [related sources](#) for systematic review searching.

Search

Medical Genetics Searches

[Save Search](#)

All: 16

Items 1 - 16 of 16

- 1:** [Lohman T, Thompson J, Going S, Himes JH, Caballero B, Norman J, Cano S, Ring K.](#)

Re

Indices of changes in adiposity in American Indian children.
 Prev Med. 2003 Dec;37(6 Pt 2):S91-6.
 PMID: 14636813 [PubMed - indexed for MEDLINE]
- 2:** [Stevens J, Story M, Ring K, Murray DM, Cornell CE, Juhaeri, Gittelsohn J.](#)

Re

The impact of the Pathways intervention on psychosocial variables related to diet and physical activity in American schoolchildren.
 Prev Med. 2003 Dec;37(6 Pt 2):S70-9.
 PMID: 14636811 [PubMed - indexed for MEDLINE]
- 3:** [Going S, Thompson J, Cano S, Stewart D, Stone E, Harnack L, Hastings C, Norman J, Corbin C.](#)

Re

The effects of the Pathways Obesity Prevention Program on physical activity in American Indian children.
 Prev Med. 2003 Dec;37(6 Pt 2):S62-9.
 PMID: 14636810 [PubMed - indexed for MEDLINE]
- 4:** [Himes JH, Ring K, Gittelsohn J, Cunningham-Sabo L, Weber J, Thompson J, Harnack L, Suchindran C.](#)

Re

Impact of the Pathways intervention on dietary intakes of American Indian schoolchildren.
 Prev Med. 2003 Dec;37(6 Pt 2):S55-61.
 PMID: 14636809 [PubMed - indexed for MEDLINE]
- 5:** [Story M, Snyder MP, Anliker J, Weber JL, Cunningham-Sabo L, Stone EJ, Chamberlain A, Ethelbah B, Suchindran C, Ring K.](#)

Re

Impact of the Pathways intervention on physical activity in American Indian schoolchildren.
 Prev Med. 2003 Dec;37(6 Pt 2):S62-9.
 PMID: 14636810 [PubMed - indexed for MEDLINE]



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SEARCH

Pressure ulcers beds

Title, Abstract or

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[Review] Support surfaces for pressure ulcer prevention

[PDF](#) (Size 366K)

- [Abstract](#)
- [Plain language summary](#)
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- [Search methods for identification of studies](#)
- [Methods of the review](#)
- [Description of studies](#)
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- [Discussion](#)
- [Authors' conclusions](#)
- [Potential conflict of interest](#)
- [Acknowledgements](#)
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[Review] Support surfaces for pressure ulcer prevention

N Cullum, E McInnes, SEM Bell-Syer, R Legood

Cochrane Database of Systematic Reviews 2007 Issue 1

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DOI: 10.1002/14651858.CD001735.pub2 This version first published online: 19 July 2004 in Issue 3, 2004

Date of Most Recent Substantive Amendment: 20 May 2004

This record should be cited as: Cullum N, McInnes E, Bell-Syer SEM, Legood R. Support surfaces for pressure ulcer prevention. *Cochrane Database* No.: CD001735. DOI: 10.1002/14651858.CD001735.pub2.

Abstract

Background

Pressure ulcers (also known as bedsores, pressure sores, decubitus ulcers) are areas of localised damage to the skin and underlying tissue caused by prolonged pressure and friction. They are common in the elderly and immobile and costly in financial and human terms. Pressure-relieving beds, mattresses and overlays are used to prevent pressure ulcers. This review assesses the effectiveness of pressure-relieving beds, mattresses and overlays to prevent pressure ulcers in both institutional and non-institutional settings.

Objectives

This systematic review seeks to answer the following questions:

- to what extent do pressure-relieving cushions, beds, mattress overlays and mattress replacements reduce the incidence of pressure ulcers on support surfaces?
- how effective are different pressure-relieving surfaces in preventing pressure ulcers, compared to one another?

Search strategy

The Specialised Trials Register of the Cochrane Wounds Group (compiled from regular searches of many electronic databases including

Search

adhd

20 Results

Search

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Browse

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- » [Treatment / Intervention](#)
- » [Organization](#)

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NGC Search Results

Your search criteria:

Keyword: *adhd*

Your search found 7 related guidelines, which are listed below.

To view a guideline summary, click on a title. The default view is the Brief Summary, from which you can view the Full Summary, XML View, Full Text, Palm Download, MS Word, Adobe PDF, or Guideline Synthesis by choosing the appropriate Summary Box on the side menu.

To prepare a Guideline Comparison, add any of the guidelines listed to "My Collection" by selecting that guideline and clicking the "Add to My Collection" button. For additional help, see [Guideline Comparison Help](#).

Remember - Check the box next to a guideline to add it to "My Collection". Then click on the "Add to My Collection" button on the page.

Search Results:

The following guidelines were retrieved because they are linked to [concepts related to your query](#) or because they are [in your query](#). Search results are listed in order of [relevance](#), unless otherwise specified in a Detailed Search.

Display results 1 to 7 of 7

Title

- [Diagnosis and management of attention deficit hyperactivity disorder in primary care for school age children](#)
Institute for Clinical Systems Improvement - Private Nonprofit Organization. 1997 Oct (revised 2000)
- [Clinical practice guideline: diagnosis and evaluation of the child with attention-deficit/hyperactivity disorder](#)
Pediatrics - Medical Specialty Society. 2000 May. 13 pages. NGC:001506
- [Clinical practice guideline: treatment of the school-aged child with attention-deficit/hyperactivity disorder](#)
Pediatrics - Medical Specialty Society. 2001 Oct. 12 pages. NGC:002298
- [Practice parameters for the assessment and treatment of children, adolescents, and adults with mental disorders](#).
American Academy of Child and Adolescent Psychiatry - Medical Specialty Society

Brief Summary

GUIDELINE TITLE

Clinical practice guideline: diagnosis and evaluation of the child with attention-deficit/hyperactivity disorder.

BIBLIOGRAPHIC SOURCE(S)

American Academy of Pediatrics. Clinical practice guideline: diagnosis and evaluation of the child with attention-deficit/hyperactivity disorder. *Pediatrics* 2000 May; 105(5):1158-70. [60 references]

BRIEF SUMMARY CONTENT

[RECOMMENDATIONS](#)

[EVIDENCE SUPPORTING THE RECOMMENDATIONS](#)

[IDENTIFYING INFORMATION AND AVAILABILITY](#)

[Go to the Complete Summary](#)

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

Excerpted by the National Guideline Clearinghouse:

RECOMMENDATION 1: In a child 6 to 12 years old who presents with inattention, hyperactivity, impulsivity, academic underachievement, or behavior problems, primary care clinicians should initiate an evaluation for attention-deficit/hyperactivity disorder (**ADHD**) (*strength of evidence: good; strength of recommendation: strong*).

Presentations of **ADHD** in clinical practice vary. Symptoms may not be apparent in a structured clinical setting that is free from demands and distraction of the home and school. The following general questions may be useful at all visits for school-aged children to heighten attention about **ADHD** and as an initial screening for school performance:

1. How is your child doing in school?
2. Are there any problems with learning that you or the teacher has seen?
3. Is your child happy in school?
4. Are you concerned with any behavioral problems in school, at home, or when your child is playing with friends?
5. Is your child having problems completing classwork or homework?

Alternatively, a previsit questionnaire may be sent to parents or given while the family is waiting in the reception area.

RECOMMENDATION 2: The diagnosis of **ADHD** requires that a child meet *Diagnostic and Statistical Manual of Mental Disorders*

Search NGC:

[Search Help](#)[Detailed Search](#)

Browse NGC:

[Disease/Condition](#)[Treatment/Intervention](#)[Organization](#)

Compare Guidelines

[View Guideline Collection](#)

Guideline Comparison

	Am Acad Child Adolesc Psychiatr 1997 Feb 14	Am Acad Pediatr 2000 May
TITLE:	Practice parameters for the assessment and treatment of children, adolescents, and adults with attention-deficit/hyperactivity disorder.	Clinical practice guideline: Diagnosis and evaluation of the child with attention-deficit/hyperactivity disorder.
ADAPTATION:	Not applicable: The guideline was not adapted from another source.	Not applicable: Guideline was not adapted from another source.
LENGTH:	37 pages	13 pages
DEVELOPER(S):	American Academy of Child and Adolescent Psychiatry - Medical Specialty Society	American Academy of Pediatrics - Medical Specialty Society
FUNDING SOURCE:	Not stated	American Academy of Pediatrics (AAP)
RATING SCHEME:	The validity of scientific findings was judged by design, sample selection and size, inclusion of comparison groups, generalizability, and agreement with other studies.	Not applicable
METHODS TO ANALYZE EVIDENCE:	Review	Systematic Review with Evidence Tables
VIEW MAJOR RECOMMENDATIONS:	View Major Recommendations	View Major Recommendations
AVAILABILITY OF FULL TEXT:	View Availability Information	View Full-text Guideline

TRIP Database

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More children suffering from back pain, study says

February 20, 1999
Web posted at: 12:36 p.m. EST (1736 GMT)

From Reporter Joan MacFarlane

(CNN) -- Carol Gray, 15, suffers from back pain -- a condition becoming increasingly common among young people. According to researchers at a University of Michigan spine program, up to 60 percent of children will experience back pain by the time they reach age 18.

A study recently published in the journal Spine found that 6 percent of 10-year-olds complained of back pain, while 10 to 15 percent of 12-year-olds reportedly had back pain.



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Overview of the management of osteoporosis in women

[Hillel N Rosen, MD](#)
[Marc K Drezner, MD](#)

UpToDate performs a continuous review of over 330 journals and other resources. Updates are added as important new information is published. The literature review for version 13.3 is current through August 2005; this topic was last changed on September 13, 2005. The next version of UpToDate (14.1) will be released in February 2006.

INTRODUCTION — Prevention and treatment of osteoporosis consists of non-drug and drug or hormonal therapy [1,2]. This topic review will provide an overview of the approach to therapy of osteoporosis in postmenopausal women. The treatment of osteoporosis in men, and the pathogenesis, causes, and diagnosis of osteoporosis are discussed separately. (See "[Overview of osteoporosis in men](#)", see "[Epidemiology and causes of osteoporosis](#)", and see "[Pathogenesis of osteoporosis](#)" and see "[Clinical manifestations and diagnosis of osteoporosis](#)", section on Suggested approach to exclude secondary causes).

In the past, estrogen replacement was considered a primary therapy for the prevention of postmenopausal osteoporosis. Estrogen had the additional advantages of controlling menopausal symptoms and presumptive prevention or delay of cardiovascular disease. However, data from the Women's Health Initiative (WHI) revealed that estrogen-progestin therapy does not reduce the risk of coronary heart disease, and increases the risk of breast cancer, stroke, and venous thromboembolic events [3]. (See "[Postmenopausal hormone therapy: Benefits and risks](#)").

As a result of these findings, other antiresorptive agents are now the drugs of choice, and are prescribed more frequently for the prevention and treatment of osteoporosis in postmenopausal women [4].

NONPHARMACOLOGIC THERAPY — There are three components to the nondrug therapy of osteoporosis: diet, exercise, and cessation of smoking. In addition, affected patients should avoid, if possible, drugs that increase bone loss, such as glucocorticoids. (See "[Glucocorticoids and osteoporosis: Pathogenesis and clinical features](#)" and see "[Drugs that affect bone metabolism](#)").

Calcium/Vitamin D — An optimal diet for treatment (or prevention) of osteoporosis includes an adequate intake of calories (to avoid malnutrition), calcium, and [vitamin D](#).

Postmenopausal women (and older men) should take adequate supplemental elemental calcium (generally 500 to 1000 mg/day), in divided doses, at mealtime, such that their total calcium intake, inclusive of food calcium, approximates 1500 mg/day [5]. (See "[Calcium supplementation in osteoporosis](#)"). In addition to its beneficial effects on the skeleton, calcium supplementation may favorably affect serum lipids [6]. Furthermore, there is some evidence that calcium intake is inversely associated with cardiovascular disease in postmenopausal women. (See "[Lipid lowering with diet or dietary supplements](#)", section on Calcium).

Women should also ingest a total of 800 IU of [vitamin D](#) daily. Higher doses are required if they have malabsorption or rapid metabolism of vitamin D due to concomitant anticonvulsant drug therapy. Data on the efficacy of vitamin D replacement for osteoporosis are discussed in detail elsewhere. (See "[Vitamin D therapy in osteoporosis](#)", section on Recommendations).

Diet — When celiac disease is a major contributor to osteopenia, a gluten-free diet will result in improvement in bone mineral density [7]. (See "[Management of celiac disease in adults](#)").

Protein intake may be an important component of the diet, particularly in women who already have osteoporotic fractures. This was

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Chapter 27 - Otitis Media

STEPHEN I. PELTON

Otitis media is a disease of early childhood. Its relevance to child health has evolved from an association with suppurative otitis media to the current concern of prolonged conductive hearing loss as well as language or cognitive delays. Furthermore, the widespread use of antibiotics for the treatment of acute **otitis media** (AOM) results in more than 20 million antibiotic prescriptions annually. The widespread use of antibiotics has placed selective pressure on bacterial respiratory tract pathogens, contributing to the emergence of antibiotic resistance and making the diagnosis and treatment of this disorder.

ACUTE OTITIS MEDIA

Pathogenesis

Knowledge of the pathogenesis of AOM has evolved from clinical observation to animal modeling to analysis of events at a molecular level. The physiologic changes that result in acute **otitis media** are provided by clinical observations, such as (1) a seasonal peak during the winter months of upper respiratory tract infection (URT),^[1] (2) an attack rate that is highest in children younger than 2 years and greatest in children with cleft palate,^[2] and (4) higher frequency in populations with immune dysfunction, such as those with immunoglobulin (Ig) G or IgG subclass deficiency.^[3]

What is an ear infection?

An ear infection is a bacterial infection of the middle ear (the space behind the eardrum). It usually is a complication of a cold, occurring after the cold blocks off the middle ear to the back of the throat). Your child's ear is painful because trapped, infected fluid puts pressure on the eardrum, causing it to bulge. Other symptoms are

Most children will have at least one ear infection, and over one fourth of these children will have repeated ear infections. In 5% to 10% of children, the pressure in the drain a yellow or cloudy fluid. This small hole usually heals over the next week. Children are most likely to have ear infections between the ages of 6 months and 2 years of illness until the age of 8 years.

If the following treatment is carried out your child should be fine. Permanent damage to the ear or to the hearing is very rare.

How can I take care of my child?

- **Antibiotics** Your child's antibiotic is _____. Your child's dose is _____ given _____ times a day during waking hours for _____ days causing the ear infection. Try not to forget any of the doses. If your child goes to school or a baby sitter, arrange for someone to give the afternoon dose. If the refrigerator and use a measuring spoon to be sure that you give the right amount. Give the medicine until the bottle is empty or all the pills are gone. (Do not stop loses its strength.) Even though your child will feel better in a few days, give the antibiotic until it is completely gone. Finishing the medicine will keep the ear
- **Pain relief** Acetaminophen or ibuprofen can be used to help with the earache or fever over 102°F (39°C) for a few days until the antibiotic takes effect. These hours. Earaches tend to hurt more at bedtime. To help ease the pain, you can put an ice bag or ice wrapped in a wet washcloth over the ear. This may decrease physicians recommend a heating pad instead. Remove the cold or heat in 20 minutes to prevent frostbite or a burn.
- **Restrictions** Your child can go outside and does not need to cover the ears. Swimming is permitted as long as there is no perforation (tear) in the eardrum or mountains is safe; just have your child swallow fluids, suck on a pacifier, or chew gum during descent. Your child can return to school or day care when he or infections are not contagious.
- **Ear recheck** Your physician will schedule a return appointment in 2 to 3 weeks for your child. At that visit, the eardrum will be looked at to be certain that the needed. Your physician may also want to test your child's hearing. Follow-up exams are very important, particularly if the infection has caused a hole in the e

How can I help prevent ear infections?

If your child has recurrent ear infections, it's time to look at how you can prevent some of them. The following list includes ways you can help your child prevent ear in your child, try to use them or talk to your health care provider about them.

- **Protect your child from second-hand tobacco smoke.** Passive smoking increases the frequency and severity of infections. Be sure no one smokes in your
- **Reduce your child's exposure to colds during the first year of life.** Most ear infections start with a cold. Try to delay the use of large day care centers du or a small home-based day care.
- **Breast-feed your baby during the first 6 to 12 months of life.** Antibodies in breast milk reduce the rate of ear infections. If you're breast-feeding, continue.
- **Avoid bottle propping.** If you bottle-feed, hold your baby at a 45° angle. Feeding in the horizontal position can cause formula and other fluids to flow back into his own bottle also can cause milk to drain into the middle ear. Weaning your baby from a bottle between 9 and 12 months of age will help stop this problem.

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Appendicitis

Appendicitis is inflammation and infection of the appendix.

The appendix is a small finger-length portion of intestine that does not appear to have any essential bodily function (see [Digestive System](#) ). Appendicitis is a medical emergency that requires surgery. Appendicitis is rare in children younger than 1 year but becomes more common as children grow older and is most common in adolescents.

Appendicitis seems to develop when the appendix becomes blocked either as a result of infection in the digestive tract or elsewhere in the body or, less commonly, as a result of obstruction with hard feces. In either case, the appendix becomes infected. If an infected appendix is unrecognized or untreated, the appendix can rupture, creating a pocket of infection outside the intestine (abscess) or spilling contents of the intestines into the abdomen (peritonitis).

Symptoms and Diagnosis



Appendicitis almost always causes pain. The pain may start in the middle of the abdomen, near the navel, and gradually move to the lower right area of the abdomen. However, children younger than 2 years are often not able to complain of pain and are therefore more likely to be irritable or listless. They may lose consciousness partly or completely if a delay in diagnosis has led

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Diabetic Retinopathy

Diabetic retinopathy is development of retinal microaneurysms, hemorrhages, exudates, neovascularization, and macular edema in patients who have had diabetes for at least several years. The cause is unknown but may involve excess glucose in pericytes. Diagnosis is by slit-lamp examination and ophthalmoscopy. Treatment includes control of diabetes and coexisting hypertension and laser coagulation. In advanced cases, vitrectomy may also be indicated.

Diabetic retinopathy is the 3rd leading cause of adult blindness and is the most common cause of blindness in middle-aged patients; it accounts for almost 7% of cases of blindness in the US. Risk increases with duration of diabetes; therefore, as the population ages and as patients with diabetes live longer, the prevalence of diabetic retinopathy will increase.

Diabetic retinopathy may be nonproliferative or proliferative. Nonproliferative diabetic retinopathy typically develops in patients with type 1 or 2 diabetes before proliferative diabetic retinopathy develops. Proliferative diabetic retinopathy involves growth of new retinal blood vessels (neovascularization). Risk factors for this type are the same as those for atherosclerotic cardiovascular disease, and patients are at higher risk of fatal and nonfatal MI, stroke, diabetic nephropathy, and death.

Pathophysiology

Retinal capillaries have 2 cell types: endothelial cells, which line the capillary lumen, and intramural pericytes (mural cells), which are embedded in the basement membrane of the capillary.



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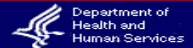
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ACCUPRIL has been evaluated for safety in 4960 subjects and patients. Of these, 3203 patients, including 655 elderly patients, participated in controlled [clinical](#) trials. ACCUPRIL has been evaluated for long-term safety in over 1400 patients treated for 1 year or more.

Adverse experiences were usually mild and transient.

In placebo-controlled trials, discontinuation of [therapy](#) because of adverse events was required in 4.7% of patients with hypertension.

Adverse experiences probably or possibly related to therapy or of unknown relationship to [therapy](#) occurring in 1% or more of the 1563 patients in placebo-controlled [hypertension](#) trials who were treated with ACCUPRIL are shown below.

Adverse Events in Placebo-Controlled Trials		
	Accupril (N=1563) Incidence (Discontinuance)	Placebo (N=579) Incidence (Discontinuance)
Headache	5.6 (0.7)	10.9 (0.7)
Dizziness	3.9 (0.8)	2.6 (0.2)
Fatigue	2.6 (0.3)	1.0
Coughing	2.0 (0.5)	0.0
Nausea and/or Vomiting	1.4 (0.3)	1.9 (0.2)
Abdominal Pain	1.0 (0.2)	0.7

Drug Information: Herbals

➤ MedlinePlus: Drugs, Supplements and Herbal Information

www.nlm.nih.gov/medlineplus/druginformation.html

- Information on thousands of prescription and over-the-counter medications, herbals and supplements provided by *MedMaster* and the *Natural Standard*

Drugs, Supplements & Herbal Information page

[Skip navigation](#)



MedlinePlus

Trusted Health Information for You

A service of the U.S. NATIONAL LIBRARY OF MEDICINE
and the NATIONAL INSTITUTES OF HEALTH

[About MedlinePlus](#) | [Site Map](#) | [FAQs](#) | [Contact Us](#)

[Home](#) [Health Topics](#) [Drugs & Supplements](#) [Encyclopedia](#) [Dictionary](#) [News](#) [Directories](#) [Other Resources](#)

[español](#)

Drug Information

Browse by first letter of generic or brand name drug:

[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](#) [0-9](#)

Information on thousands of prescription and over-the-counter medications is provided through two drug resources

- MedMaster™†, a product of the [American Society of Health-System Pharmacists \(ASHP\)](#)
- USP DI® Advice for the Patient® ‡, a product of the [United States Pharmacopeia \(USP\)](#).

For additional drug information, see the MedlinePlus [drug therapy](#) topic pages.

Herbs and Supplements

[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](#)

Natural Standard is an international research collaboration that aggregates and synthesizes data on complementary and alternative therapies.

- Using a comprehensive methodology and reproducible grading scales, information is created that is evidence-based, consensus-based, and peer-reviewed
- Tapping into the collective expertise of a multidisciplinary Editorial Board.

For additional herb and supplement information, see the MedlinePlus [herbal medicine](#) topic page.

105 Herbs and Supplements Monographs in English & Spanish Peppermint oil

Peppermint oil (*Mentha x piperita* L.)

Natural Standard Bottom Line Monograph, Copyright © 2005 (www.naturalstandard.com).
Commercial distribution prohibited. This monograph is intended for informational purposes only, and should not be interpreted as specific medical advice. You should consult with a qualified healthcare provider before making decisions about therapies and/or health conditions.



While some complementary and alternative techniques have been studied scientifically, high-quality data regarding safety, effectiveness, and mechanism of action are limited or controversial for most therapies. Whenever possible, it is recommended that practitioners be licensed by a recognized professional organization that adheres to clearly published standards. In addition, before starting a new technique or engaging a practitioner, it is recommended that patients speak with their primary healthcare provider(s). Potential benefits, risks (including financial costs), and alternatives should be carefully considered. The below monograph is designed to provide historical background and an overview of clinically-oriented research, and neither advocates for or against the use of a particular therapy.

Related Terms:

- Balm mint, black peppermint, brandy mint, curled mint, Feullis de menthe, Japanese peppermint, Katzenkraut (German), lamb mint, *Mentha arvensis* L. var *piperascens*, menta prima (Italian), *Menthae piperitae aetheroleum* (peppermint oil), *Menthae piperita* var *officinalis*, *Menthae piperitae folium* (peppermint leaf), *Menthe anglaise*, *Menthe poivre*, *Menthe poivree*, *Mentha piperita* var *vulgaris*, Our Lady's mint, pebermynte (Danish), Pfefferminz (German), Porminzen, Schmecker, spearmint (*Mentha spicata* L.), water mint (*Mentha aquatica*), white peppermint, WS(R) 1340.
- **Essential oil constituents:** Cineol, isomenthone, liminene, menthofuran, menthol, menthone, menthyl acetate, terpenoids.
- **Leaf constituents:** Caffeic acid, chlorogenic acid, luteolin, hesperidin, rutin, "volatile" oil.
- **Selected brand names:** Ben-Gay®, Colpermin®, China Maze, Cholaktol, Citaethol, Enteroplant® (contains peppermint and caraway oil), Kiminto, Mentacur, Mentholatum, Mintec, Rhuli Gel®, Robitussin® cough drops, SX Mentha®, Vicks VapoRub®.
- **Combination products:** Absorbine Jr.®, Iberogast®, Listerine®.

Aceite de menta (*menta piperita*)

Natural Standard Bottom Line Monograph, Copyright © 2005 (www.naturalstandard.com).
Se prohíbe su distribución comercial. Esta monografía tiene la intención de servir para fines informativos únicamente, por lo cual no se debe interpretar como un consejo médico específico. Usted deberá consultar con un proveedor médico calificado antes de tomar decisiones respecto a terapias y/o afecciones de salud.



No obstante se han estudiado de forma científica ciertas técnicas complementarias y alternas, para la mayoría de las terapias hay limitación o controversia sobre los datos de alta calidad respecto a la seguridad, eficacia y mecanismo de acción. Se recomienda, al máximo posible, que los practicantes cuenten con licencias expedidas por una organización profesional reconocida que se adhiera a normas claramente publicadas. Además, antes de iniciar una nueva técnica o contratar a un practicante, se recomienda que los pacientes consulten con su(s) proveedor(es) médico(s) principal(es). Se deben considerar atentamente los beneficios y riesgos potenciales (incluye los costos financieros) así como las alternativas. La siguiente monografía está diseñada para ofrecer una historia y un resumen de la investigación con orientación clínica, y la misma ni defiende ni se opone al uso de una terapia en particular.

Términos relacionados:

- Bálsamo de menta, menta negra, menta de brandy, menta crespá, Feullis de menthe, menta japonesa, Katzenkraut (alemán), menta de cordero, menta arvenis, L. var *piperascens*, menta prima (italiano), *Menthae piperitae aetheroleum* (aceite de menta) *Menthae piperita* var *officinalis*, *Menthae piperitae folium* (hoja de menta), *Menthe anglaise*, *Menthe poivree*, *Mentha piperita* var *vulgaris*, Our Lady's mint, pebermynte (danés), Pfefferminz (alemán), Porminzen, Schmecker, hierbabuena (*Mentha spicata*), menta acuática (*Mentha aquatica*), menta blanca, WS (R) 1340.
- **Elementos constituyentes esenciales del aceite:** Cineol, isomentona, limoneno, mentofurano, mentol, mentona, acetato de mentilo, terpenoides.
- **Elementos constituyentes de la hoja:** Ácido cafeico, ácido clorogénico, luteolina, hesperidina, rutin, aceite "volátil".
- **Selección de marcas registradas:** BenGay®, Colpermin®, China Maze, Cholaktol, Citaethol, Enteroplant® (contiene aceite de menta y alcaravea), Kiminto, Mentacur, Mentholatum, Mintec, Rhuli Gel®, Robitussin® cough drops (pastillas para la tos), SX Mentha®, Vicks VapoRub®.

Evidence [Return to top](#)

These uses have been tested in humans or animals. Safety and effectiveness have not always been proven. Some of these conditions should be evaluated by a qualified healthcare provider.

Uses based on scientific evidence	Grade*
Indigestion (non-ulcer dyspepsia) <p>There is preliminary evidence from a small number of controlled trials that a combination of peppermint oil and caraway oil may be beneficial for dyspepsia (heartburn) symptoms. However, most studies have been poorly designed (methodologically weak with small sample sizes, inadequate use of control or placebo groups, unclear descriptions of blinding and randomization, and lack of use of standardized scales for identifying subjects or assessing endpoints). It is not clear which constituent(s) may be beneficial. Nonetheless, the existing evidence does suggest efficacy of this combination. It should be noted that heartburn can actually be a side effect of taking oral peppermint oil, which has been reported by patients in several controlled trials of peppermint oil. Patients with chronic heartburn should be evaluated by a qualified healthcare provider and may be advised to undergo a diagnostic endoscopy prior to initiating any treatment for heartburn.</p>	B
Irritable bowel syndrome (IBS) <p>Multiple randomized controlled trials of peppermint suggest significant improvements in irritable bowel syndrome (IBS) symptoms. Although the mechanism of action is not clear, pre-clinical studies suggest smooth muscle relaxing properties of peppermint (calcium antagonism may play a role). Enteric-coated peppermint preparations are generally recommended. Overall, studies have been brief with small sample sizes and methodological weaknesses (unclear diagnostic criteria, lack of validated measurement scales, unclear blinding and randomization procedures). Well-designed large trials are necessary before a strong recommendation can be made. Future studies should use standardized symptom scales and established diagnostic criteria to classify patients prior to enrollment (such as Rome II Diagnostic Criteria), uniform dosing and standardization, and longer duration.</p>	B
Antispasmodic (gastric spasm) <p>One study reports that peppermint oil solution administered intraluminally can be used as an antispasmodic agent with superior efficacy and fewer side effects than hyoscine-N-butylbromide administered by intramuscular injection during upper endoscopy.</p>	C
Tension headache <p>Application of diluted peppermint oil to the forehead and temples has been tested in people with headache. Studies have not been well conducted, and it is not clear if this is an effective treatment.</p>	C

Drug Information for PDAs

➤ Epocrates Rx

epocrates.com

- monographs for the most prescribed meds
- free download after registration

➤ PDA resources for UW

healthlinks.washington.edu/howto/pda

#6

Explore Patient Ed Sites



MedlinePlus

medlineplus.gov

- **#1 SOURCE** for basic quality consumer/patient information
- Includes drug information
- Medical Encyclopedia – full-text with illustrations
- Spanish version
- Preformulated *PubMed* searches
- Interactive tutorials
- Current health news

MedlinePlus Content

Interactive tutorials:

175 total (soon)

ClinicalTrials links on display:

640 (today)

NIH-Seniorhealth

31 topics

OR-Live surgery videos:

73

Announcement listservs:

11 daily & weekly

Directories:

Over 100 directories covering doctors, hospitals, clinics and libraries.

The screenshot shows the MedlinePlus website interface. At the top, there is a header with the MedlinePlus logo and the text "Trusted Health Information for You". Below the header is a search bar and navigation links. The main content area is divided into several sections: "Health Topics", "Drug Information", "Medical Encyclopedia", "Dictionary", "News", "Directories", and "Other Resources". There are also sections for "Current Health News", "Featured Site", and "In the Spotlight". On the right side, there are links to "Interactive Tutorials", "ClinicalTrials.gov", "NIHSeniorHealth", and "Surgery Videos". A callout box highlights the "español" link in the top right corner. Another callout box points to the "Interactive Tutorials" section. A third callout box points to the "ClinicalTrials.gov" section. A fourth callout box points to the "NIHSeniorHealth" section. A fifth callout box points to the "Surgery Videos" section. A sixth callout box points to the "What's new on MedlinePlus?" section. A seventh callout box points to the "Sign up now!" link. A eighth callout box points to the "Add MedlinePlus to your site" link. A ninth callout box points to the "Take a tour of the site" link. A tenth callout box points to the "Announcement listservs" section. A eleventh callout box points to the "Directories" section. A twelfth callout box points to the "OR-Live surgery videos" section. A thirteenth callout box points to the "Interactive tutorials" section. A fourteenth callout box points to the "ClinicalTrials links on display" section. A fifteenth callout box points to the "NIH-Seniorhealth" section. A sixteenth callout box points to the "OR-Live surgery videos" section. A seventeenth callout box points to the "Announcement listservs" section. A eighteenth callout box points to the "Directories" section. A nineteenth callout box points to the "OR-Live surgery videos" section. A twentieth callout box points to the "Announcement listservs" section.

Health topics (today):

741 English
699 Spanish

2 drug and herbal databases:

approx 1700 monographs

ADAM.com encyclopedia:

approx 4000 monographs

Health news:

Approx 15-20 new stories added per day

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U.S. National Library of Medicine, 8600 Rockville Pike, Bethesda, MD 20894
National Institutes of Health | Department of Health & Human Services
Freedom of Information Act

Page last updated: 07 September 2005
URL for this page: <http://medlineplus.gov>

Cystic Fibrosis



Latest News

- [Screening May Improve Cystic Fibrosis Outcomes](#) (01/15/2007, Reuters Health)
- [Immune Proteins Give Clues to Cystic Fibrosis](#) (11/03/2006, HealthDay)

From the National Institutes of Health

- [Cystic Fibrosis](#) (National Heart, Lung, and Blood Institute)

Overviews

- [Cystic Fibrosis](#) (March of Dimes Birth Defects Foundation)
- [Cystic Fibrosis](#) (Mayo Foundation for Medical Education and Research)
- [Cystic Fibrosis *Interactive Tutorial*](#) (Patient Education Institute) - Requires Flash Player
Also available in [Spanish](#)

Diagnosis/Symptoms

- [Sweat Test](#) (Cystic Fibrosis Foundation)
- [Trypsin Test](#) (American Association for Clinical Chemistry)
- [Trypsinogen Test](#) (American Association for Clinical Chemistry)

Treatment

- [Azithromycin for People with Cystic Fibrosis: Is It Right for You?](#) (Cystic Fibrosis Foundation)
- [Current Treatments](#) (American Association for Respiratory Care)
- [Lung Transplantation and CF](#) (Cystic Fibrosis Foundation)

Prevention/Screening

- [Cystic Fibrosis Carrier Testing: The Decision Is Yours](#) (American College of Obstetricians and Gynecologists)
- [Cystic Fibrosis Testing: What Happens If Both My Partner and I Are Carriers?](#) (American College of Obstetricians and Gynecologists)
- [Newborn Screening for Cystic Fibrosis](#) (Cystic Fibrosis Foundation)

Nutrition

- [Nutrition and Cystic Fibrosis: Changes through Life](#) (Cystic Fibrosis Foundation) - Links to PDF
- [Nutrition for Your Child with Cystic Fibrosis \(Four to Seven Years\)](#) (Cystic Fibrosis Foundation) - Links to PDF
- [Nutrition for Your Infant with Cystic Fibrosis \(Birth to One Year\)](#) (Cystic Fibrosis Foundation) - Links to PDF

Contents of this page:

- [News](#)
- [From the NIH](#)
- [Overviews](#)
- [Diagnosis/Symptoms](#)
- [Treatment](#)
- [Prevention/Screening](#)
- [Nutrition](#)
- [Disease Management](#)
- [Related Issues](#)
- [Financial Issues](#)
- [Clinical Trials](#)
- [Genetics](#)
- [Research](#)
- [Organizations](#)
- [Children](#)
- [Teenagers](#)

Search MEDLINE/PubMed for recent research articles on

- [Cystic Fibrosis](#)

You may also be interested in these MedlinePlus related pages:

- [Lung Transplantation](#)
- [Genetics/Birth Defects](#)
- [Lungs and Breathing](#)



Cystic Fibrosis

Credits & Terms

Introduction

Cystic Fibrosis

Causes

Symptoms

Diagnosis

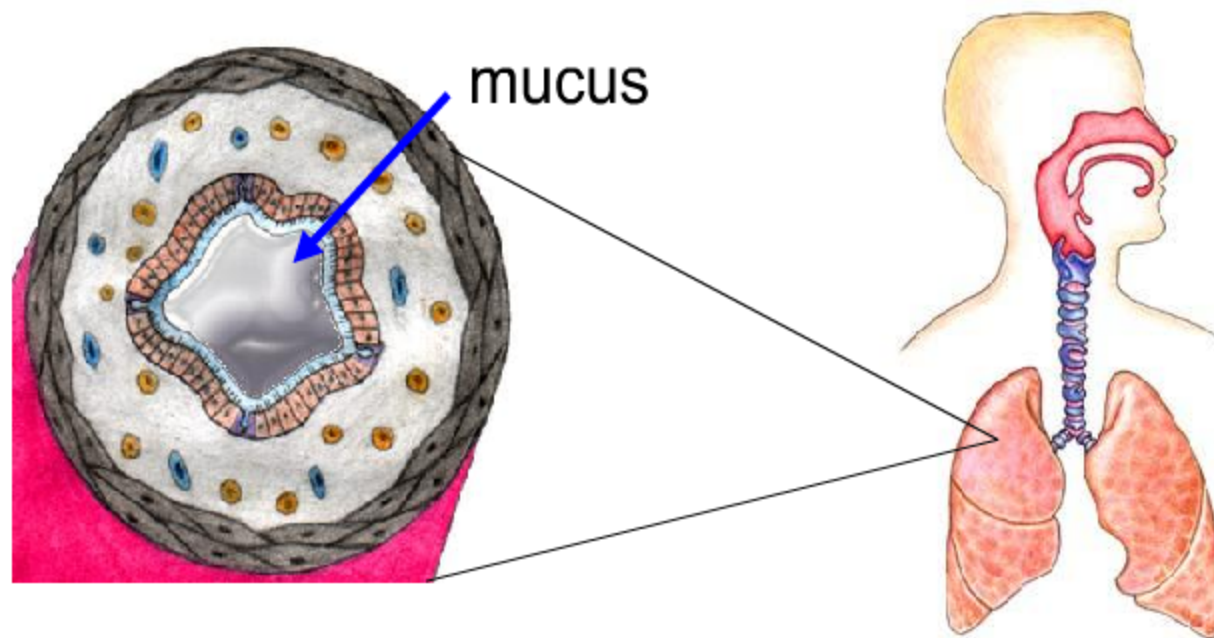
Treatment

Prevention

Facts

Summary

Our bodies depend on special cells that secrete mucus and sweat in order to function normally. Our lungs have these special cells in them. The mucus the special cells secrete is watery and helps trap dirt and expel it to the outside.

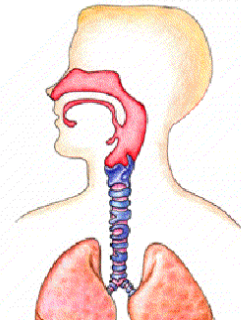


New Interactive Tutorials

➤ New titles:

- Bronchoscopy
- Amniocentesis
- Low testosterone
- Upper GI endoscopy
- Pneumonia

Pneumonia is an inflammation of the lung. Inflammation is the immune system's normal response to contaminants or injury.



Germ such as bacteria or viruses cause People 65 year of age and older are at an increase risk of getting pneumonia.

TRUE

FALSE

Correct.



Recently added OR-Live: Surgical Webcasts

- Pre-recorded webcasts of surgical procedures
- Actual operations performed at medical centers in U.S.
- One-hour programs with printable transcripts



Medical Encyclopedia & Dictionary

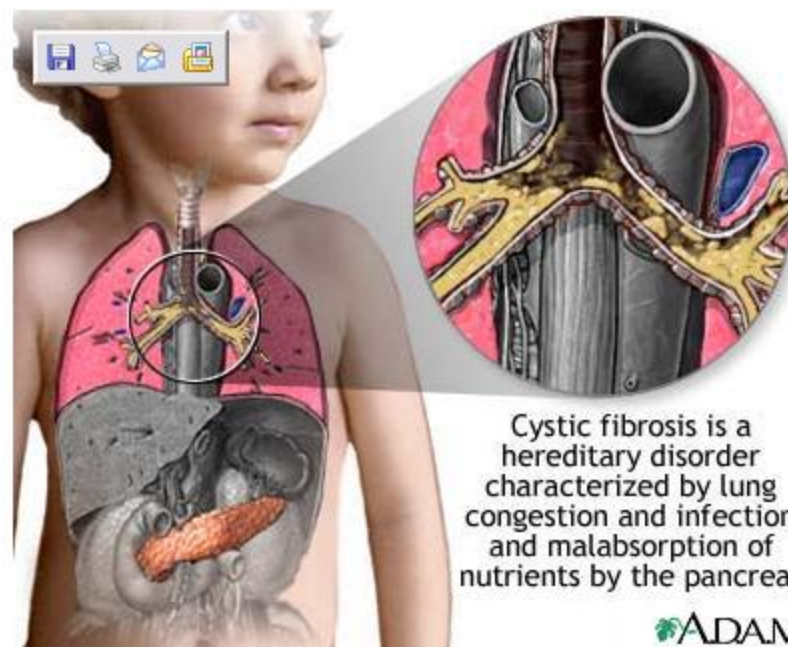
- Encyclopedia includes:
 - 4,000+ entries on diseases, tests, symptoms, injuries and surgeries
 - an extensive library of photographs and illustrations.



 [Home](#) [Health Topics](#) [Drug Information](#) [Encyclopedia](#) [Dictionary](#) [News](#) [Directories](#) [Other Resources](#)

Medical Encyclopedia

Cystic fibrosis



Cystic fibrosis is a hereditary disorder characterized by lung congestion and infection and malabsorption of nutrients by the pancreas

Cystic fibrosis is the most common cause of chronic lung disease in children and young adults, and the most common fatal hereditary disease in the US.

Update Date: 3/23/2001

Updated by: A.D.A.M. Medical Illustration Team

Do you need...

- Articles or research studies:

Go to *PubMed*

- Information written for patients:

Start with *MEDLINEplus*

Additional Patient Ed Resources

- MLA Top 10 Most Useful Health Web Sites
mlanet.org/resources/medspeak/topten.html
- MyHealth Toolkit
healthlinks.washington.edu/myhealth
- Lab Tests Online *labtestsonline.org*

Medical Library Association's Top Ten Most Useful Websites

mlanet.org/resources/medspeak/topten.html

1. Cancer.gov
2. Centers for Disease Control and Prevention (CDC) A-Z Topics
3. familydoctor.org
4. healthfinder®
5. HIV InSite

MLA's Top Ten, continued

mlanet.org/resources/medspeak/topten.html

6. Kidshealth®
7. Mayo Clinic
8. MEDEM: an information partnership of medical societies
9. MedlinePlus (English | Spanish)
10. NOAH: New York Online Access to Health

Quick Guides

- [Living a Healthy Life](#)

Life Stages

- [Children's Health](#)
- [Men's Health](#)
- [Women's Health](#)
- [Senior Health](#)

Selected Topics

- [Cancer](#)
- [Clinical Trials/Medical Research](#)
- [Diagnostic Tests](#)
- [Drug Information](#)
- [Healthcare Delivery](#)
- [Heart Disease and Stroke](#)

Starting Places

Looking for health information? Your health care provider is your best source of information about your personal health. Library staff are not qualified to give medical advice, however there are many excellent resources we recommend when researching your health care questions. Here is a selected list of good starting places:

- [MedlinePlus](#)
Authoritative information from the National Library of Medicine to help answer your health questions.
- [Centers for Disease Control: A-Z Topics Index](#)
- [MayoClinic.com](#)
- [Merck Manual of Medical Information - Home Edition](#)
- [Merriam-Webster Medical Dictionary](#)



Need Help Now?

Immediate assistance is available if you need help dealing with a crisis:

- [Crisis Clinic of King County](#)
- [National Suicide Prevention Lifeline](#)

Find More Information at Your Library

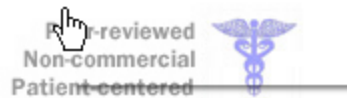
- [Find a Health Library](#)
Consumer health libraries provide services to local residents.
- [Search for a library in Washington near you](#)
- [Search for public libraries nationwide](#)

Other Resources

- [PubMed](#)
Free resource to locate current biomedical research
- [MedlinePlus Guide to Healthy Surfing](#)

Lab Tests Online®

A public resource on clinical lab testing from the laboratory professionals who do the testing



Box and menus below to quickly navigate the Lab Tests Online site:

Go

Lipid Profile

[email this page](#) 
[print this page](#) 

Related tests: [Cholesterol](#), [HDL](#), [LDL](#), [Triglycerides](#)

What is a lipid profile?

The lipid profile is a group of tests that are often ordered together to determine risk of **coronary heart disease**. The tests that make up a lipid profile are tests that have been shown to be good indicators of whether someone is likely to have a **heart attack** or **stroke** caused by blockage of blood vessels (hardening of the arteries).

- [Overview](#)
- [Treatment](#)
- [Risk Factors](#)
- [Common](#)
- [Questions](#)
- [Sources](#)

What tests are included in a lipid profile?

The lipid profile includes **total cholesterol**, **HDL-cholesterol** (often called good cholesterol), **LDL-cholesterol** (often called bad cholesterol), and **triglycerides**. Sometimes the report will include additional calculated values such as HDL/Cholesterol ratio or a risk score based on lipid profile results, age, sex, and other risk factors.

How is a lipid profile used?

The lipid profile is used to guide providers in deciding how a person at risk should be treated. The results of the lipid profile are considered along with other known risk factors of **heart disease** to develop a plan of treatment and follow-up.

Search by disease
or
name of test

#7

***Use Cross-Cultural
Healthcare Resources***



Cross-Cultural Healthcare Resources

➤ EthnoMed

ethnomed.org

A cross-cultural medicine database containing information about cultural beliefs and medical issues pertinent to healthcare of ethnic groups in Seattle area

➤ Culture Clues

depts.washington.edu/pfes/cultureclues.html

Tip sheets designed to increase awareness about concepts and preferences of patients from diverse cultures

➤ SPIRAL

spiral.tufts.edu

Patient ed resources in East Asian languages

Culture Specific Pages

- ◉ [Amharic](#)
- ◉ [Cambodian](#)
- ◉ [Chinese](#)
- ◉ [Eritrean](#)
- ◉ [Ethiopian](#)
- ◉ [Hispanic](#)
- ◉ [Oromo](#)
- ◉ [Somali](#)
- ◉ [Tigrean](#)
- ◉ [Vietnamese](#)
- ◉ [Other groups](#)

Cross Cultural Health

- ◉ [Clinical Topics](#)
- ◉ [Community HouseCalls](#)
- ◉ [Cultural Competency](#)
- ◉ [Immigration](#)
- ◉ [Patient Education](#)
- ◉ [Pearls of Cross Cultural Care](#)
- ◉ [Related Sites](#)

About Ethnomed

- ◉ [EthnoMed](#)
- ◉ [Copyright](#)
- ◉ [Contribute](#)

The EthnoMed site contains information about cultural beliefs, medical issues and other related information of recent immigrants to Seattle or the US, many of whom are refugees fleeing war-torn parts of the world.

Can't find what you want? Try using the Search within EthnoMed using a word or topic.



December 2006
NEW! Important Alert! Carbon Monoxide Poisoning

Recent power outages in the Pacific Northwest has led many to bring generators and/or Barbeques into the home for preparation. A number of people have died from carbon monoxide poisoning as a result. This has affected communities hardest. Below is a link to information about carbon monoxide poisoning, and information translated into several languages:

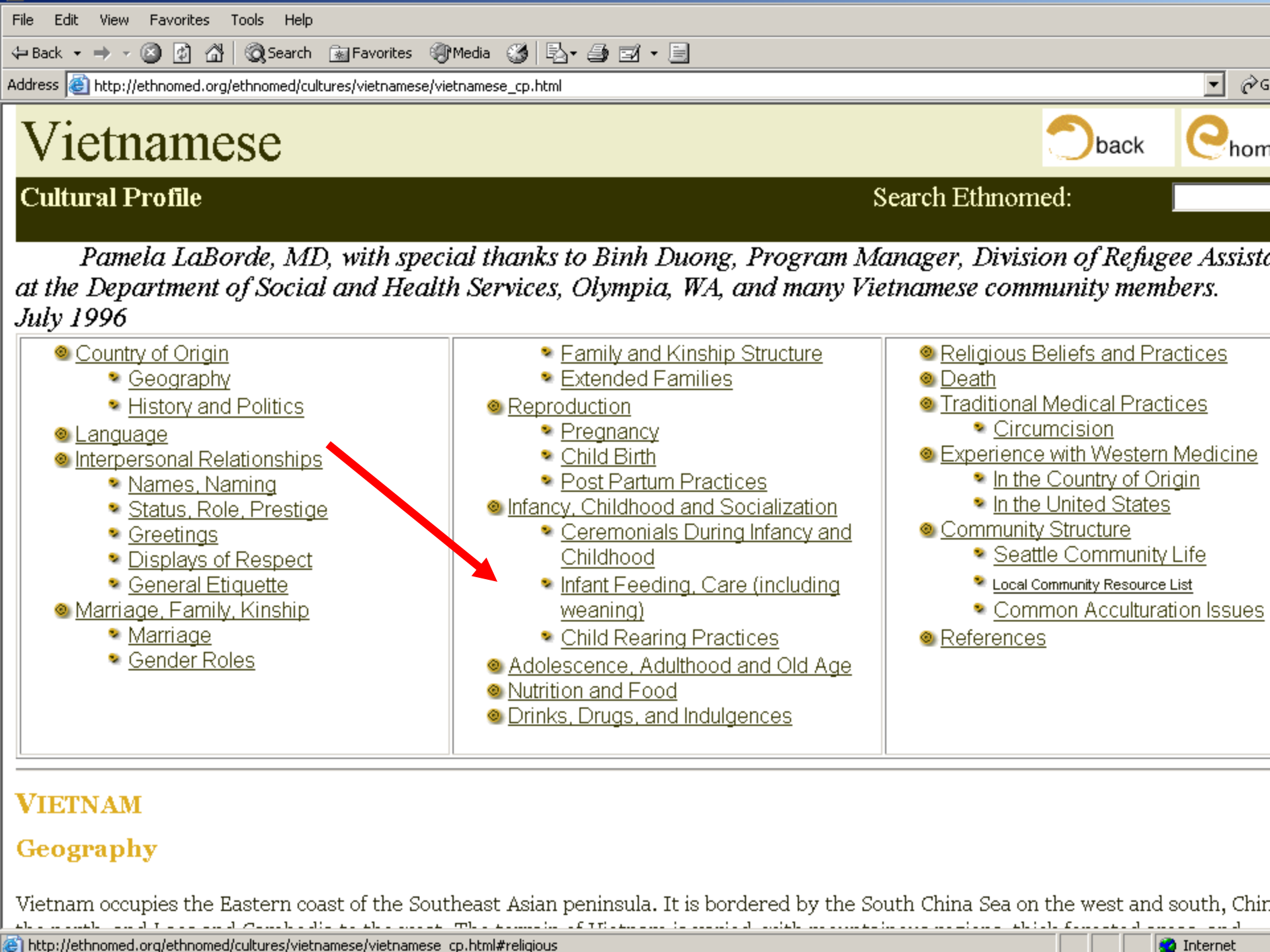
Carbon Monoxide Information from [Public Health Seattle & King County](#)

Recent Featured Materials or Links on EthnoMed

[Translated Nurse-to-Patient Communication Pages](#)
Basic communication pages in 15 languages.

[Somali Bantu Literature Review](#) by Anna Gruen, MSW

Tuberculosis Cultural Profiles:



Vietnamese



Cultural Profile

Search Ethnomed:

Pamela LaBorde, MD, with special thanks to Binh Duong, Program Manager, Division of Refugee Assistance at the Department of Social and Health Services, Olympia, WA, and many Vietnamese community members. July 1996

Country of Origin

- Geography
- History and Politics

Language

Interpersonal Relationships

- Names, Naming
- Status, Role, Prestige
- Greetings
- Displays of Respect
- General Etiquette

Marriage, Family, Kinship

- Marriage
- Gender Roles

Family and Kinship Structure

- Extended Families

Reproduction

- Pregnancy
- Child Birth
- Post Partum Practices

Infancy, Childhood and Socialization

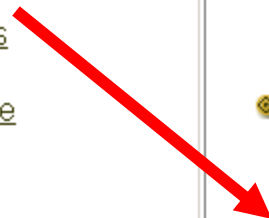
- Ceremonials During Infancy and Childhood
- Infant Feeding, Care (including weaning)
- Child Rearing Practices

Adolescence, Adulthood and Old Age

- Nutrition and Food
- Drinks, Drugs, and Indulgences

Religious Beliefs and Practices

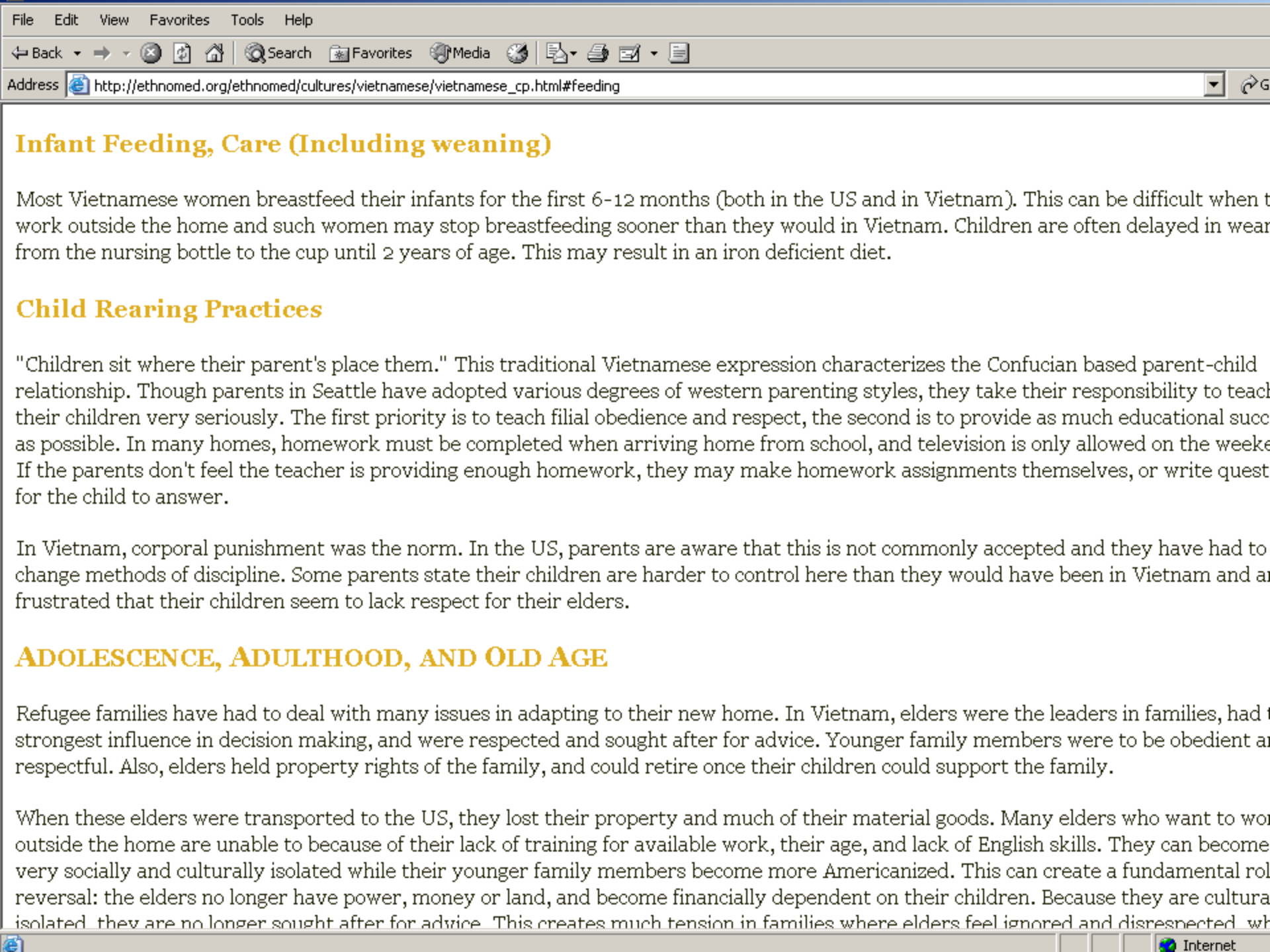
- Death
- Traditional Medical Practices
 - Circumcision
- Experience with Western Medicine
 - In the Country of Origin
 - In the United States
- Community Structure
 - Seattle Community Life
 - Local Community Resource List
 - Common Acculturation Issues
- References



VIETNAM

Geography

Vietnam occupies the Eastern coast of the Southeast Asian peninsula. It is bordered by the South China Sea on the west and south, China to the north, and Laos and Cambodia to the west. The terrain of Vietnam is varied, with mountainous regions, thick forested areas, and



Infant Feeding, Care (Including weaning)

Most Vietnamese women breastfeed their infants for the first 6-12 months (both in the US and in Vietnam). This can be difficult when they work outside the home and such women may stop breastfeeding sooner than they would in Vietnam. Children are often delayed in weaning from the nursing bottle to the cup until 2 years of age. This may result in an iron deficient diet.

Child Rearing Practices

"Children sit where their parent's place them." This traditional Vietnamese expression characterizes the Confucian based parent-child relationship. Though parents in Seattle have adopted various degrees of western parenting styles, they take their responsibility to teach their children very seriously. The first priority is to teach filial obedience and respect, the second is to provide as much educational success as possible. In many homes, homework must be completed when arriving home from school, and television is only allowed on the weekends. If the parents don't feel the teacher is providing enough homework, they may make homework assignments themselves, or write questions for the child to answer.

In Vietnam, corporal punishment was the norm. In the US, parents are aware that this is not commonly accepted and they have had to change methods of discipline. Some parents state their children are harder to control here than they would have been in Vietnam and are frustrated that their children seem to lack respect for their elders.

ADOLESCENCE, ADULTHOOD, AND OLD AGE

Refugee families have had to deal with many issues in adapting to their new home. In Vietnam, elders were the leaders in families, had the strongest influence in decision making, and were respected and sought after for advice. Younger family members were to be obedient and respectful. Also, elders held property rights of the family, and could retire once their children could support the family.

When these elders were transported to the US, they lost their property and much of their material goods. Many elders who want to work outside the home are unable to because of their lack of training for available work, their age, and lack of English skills. They can become very socially and culturally isolated while their younger family members become more Americanized. This can create a fundamental role reversal: the elders no longer have power, money or land, and become financially dependent on their children. Because they are culturally isolated, they are no longer sought after for advice. This creates much tension in families where elders feel ignored and disrespected, which

- ⦿ Adolescent Violence
- ⦿ Anemia/Hemoglobinopathies
- ⦿ Asthma
 - Somali Asthma Cultural Profile
- ⦿ Breastfeeding
 - Infant Care Practices
- ⦿ Common Cold
- ⦿ Degenerative Joint Disease
- ⦿ Depression
- ⦿ Dermatology
 - Dermatology of Pigmented Skin
 - A Self-Teaching slide module for the influence of culture and pigment on skin conditions in children
- ⦿ Female Circumcision
- ⦿ Fungal Infections
- ⦿ Hepatitis
 - Somali Hepatitis Cultural Profile
- ⦿ Hepatitis B
- ⦿ Lactose Intolerance
- ⦿ Male Circumcision
- ⦿ Nutrition
 - **Report on Somali Diet: Common Dietary Beliefs and Practices of Somali Participants in WIC Nutrition Education Groups**
Available formats: Word Document | PDF
 - Group Nutrition Education Project for non-English speaking WIC families: 1 page PDF poster about nutrition class
- ⦿ Oral Health
 - Oral Health Beliefs, Traditions and Practices in the Somali Culture
- ⦿ Parasitic Diseases
- ⦿ Peripartum Practices and Infant Care Issues
 - Peripartum and Infant Care Issues Among Refugee Groups in Seattle
- ⦿ Post Traumatic Stress Disorder
- ⦿ Pubertal Development
- ⦿ Sexually Transmitted Diseases/HIV Infection
- ⦿ Thyroid Dysfunction
- ⦿ Tuberculosis

REPORT ON SOMALI DIET

COMMON DIETARY BELIEFS AND PRACTICES OF SOMALI PARTICIPANTS IN WIC NUTRITION EDUCATION

Content by Aliya S. Haq, MS, RD, CD, WIC and Pediatric Dietitian at Harborview Medical Center, Seattle

Edited by Christine Wilson Owens, B.A. Anthropology

Reviewed by Carey Jackson, MD

Community Reviewer: Salma Musa, Caseworker Cultural Mediator, Harborview

Date August, 2003

Contents of Article:

- [Methods](#)
- [The Somali Diet](#)
 - [Religious Proscriptions](#)
 - [Foods Commonly Consumed and Methods of Cooking](#)
 - [Common Dietary Beliefs](#)
 - [Common Nutrition/Diet Related Health Problems](#)
- [General Recommendations for Providers](#)
- [Discussion of Group Education Intervention](#)
 - [Group Education Outcome and Process Measures](#)
 - [Group Education Topics](#)
 - [Comparison of Show Rates and Nutritional Practices](#)
 - [Patient Satisfaction Surveys](#)
 - [Benefits of Group Nutrition Education](#)

Methods

The following information was collected during more than 70 nutrition education groups for Somali patients taught by dietitian Aliya Haq at Harborview Medical Center (HMC), between 1999 and 2002. WIC is a supplemental nutrition education program for pregnant and postpartum women. Nutrition education is an integral part of the WIC program, which also provides healthy food vouchers to low income families. More than 100 nutrition education groups at Harborview since they began in September 1999. [See below a Discussion of Group Education Intervention](#)

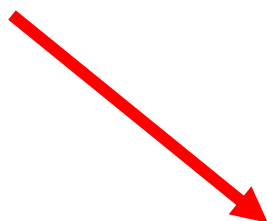
Providers are encouraged to assess the needs and behavior of all patients individually, and to consider that the information presented here is not representative of the dietary practices and beliefs of all Somali immigrants. As Westernization appears to have influenced some aspects of Somali immigrants' diet, we will observe if and how further acculturation impacts diet in the future.

depts.washington.edu/pfes/cultureclues.html

Culture Clues™

Culture Clues© are tip sheets for clinicians designed to increase awareness about concepts and preferences of patients from the diverse cultures served by UWMC. Currently there are ten cultures represented, with additional ones in progress.

- [Albanian](#)
- [African American](#)
- [Chinese](#)
- [Deaf](#)
- [Hard of Hearing](#)
- [Korean](#)
- [Latino](#)
- [Russian](#)
- [Somali](#)
- [Vietnamese](#)
- [End of Life Care:
The Latino Culture](#)
- [End of Life Care:
The Russian Culture](#)





Patient and Family Education Services



Culture Clues™: Communicating With Your Russian Patient

Culture Clues™ is designed to increase awareness about concepts and preferences of patients from the diverse cultures served by UWMC. Every person is unique; always consider the individual's beliefs, needs and concerns. Use *Culture Clues™* and information from the patient and family to guide your communication and your patient care.

- ❖ perception of illness
 - ❖ patterns of kinship and decision making
 - ❖ comfort with touch
-

1. How does the Russian culture deal with illness?

A. HELPING YOUR PATIENT FEEL COMFORTABLE WITH UWMC

- Remember to find out if this is your patient's first visit to UWMC.
 - *If it is your patient's first visit to UWMC, take a few moments for orientation.*
 - *Keep in mind that patients who are new to the system may not be aware of the role of the Primary Care Team or the process for getting a referral to a specialist.*

- Asian Food Pyramid (Nutrition Education for New Americans Project)
 Documents:  [Cambodian/Khmer](#) |  [Chinese](#) | [English](#)
Lus Hmoob [Hmong](#) |  [Korean](#) |  [Lao](#) |  [Thai](#) |  [Vietnamese](#)
- Better Health Begins with You (Nutrition Education for New Americans Project)
 Documents:  [Cambodian/Khmer](#) |  [Chinese](#) | [English](#)
Lus Hmoob [Hmong](#) |  [Korean](#) |  [Lao](#) |  [Thai](#) |  [Vietnamese](#)
- Better Health for Mother and Baby
(Nutrition Education for New Americans Project)
 Documents:  [Cambodian/Khmer](#) |  [Chinese](#) | [English](#)
Lus Hmoob [Hmong](#) |  [Korean](#) |  [Lao](#) |  [Thai](#) |  [Vietnamese](#)
- Better Nutrition for Mature Adults
(Nutrition Education for New Americans Project)
 Documents:  [Cambodian/Khmer](#) |  [Chinese](#) | [English](#)
Lus Hmoob [Hmong](#) |  [Korean](#) |  [Lao](#) |  [Thai](#) |  [Vietnamese](#)
- Caffeine and Your Health (NSW Health Dept.- Australia)
 Documents:  [Chinese](#) | [English](#) (HTML) |  [Korean](#) |  [Thai](#)
 [Vietnamese](#)
- Cholesterol: Too Much is Dangerous (NSW Health Dept.- Australia)
 Documents:  [Cambodian/Khmer](#) |  [Chinese](#) | [English](#) (HTML)
 [Korean](#) |  [Thai](#) |  [Vietnamese](#)
- Diabetes - Food and Nutrition (Diabetes Australia Multilingual Internet Resource)
 [Chinese](#) | [English](#) |  [Thai](#) |  [Vietnamese](#)
- Diabetes Nutrition (Nutrition Education for New Americans Project)
 Documents:  [Cambodian/Khmer](#) |  [Chinese](#) | [English](#)
Lus Hmoob [Hmong](#) |  [Korean](#) |  [Thai](#) |  [Vietnamese](#)

#8

***Navigate the Web
Beyond Basic Google***



Navigation Difficulties

- Size of the Web
- Lack of control or review
- Lack of quality standards



Google

google.com

- Largest: over *8 billion* pages
- *Relevance ranking* based on link analysis
- Google *Advanced Search*
www.google.com/advanced_search?hl=en
- Google *Scholar* *scholar.google.com*

food pyramid vegetarian

Search

Advanced Image Search Preferences

Moderate Safe Search is on

Images

Results 1 - 20 of about 86 for food pyramid

Show:



Vegetarian Pyramid.gif

440 x 432 pixels - 26k

mywebpages.comcast.net/.../p4.htm

vegetarian-food-pyramid.jpg

323 x 400 pixels - 42k

www.weight-loss-i.com/vegetarian-food-pyramid.htm

Pyramid-Vegetarian-01.jpg

500 x 400 pixels - 31k

www.sdada.org/GCNC_Position_Statement_on_Veg...



vegp.gif

363 x 464 pixels - 42k

www.moriahsda.org/pyramid.htm



pyramid.gif

425 x 517 pixels - 130k

www.andrews.edu/NUFS/veggiediet.html



vegetarian pyramid.gif

633 x 785 pixels - 203k

www.state.sd.us/.../vegetarian%20pyramid.htm

Google Advanced Search Features

www.google.com/advanced_search?hl=en

- **File Format**, *i.e.* pdf
- **Date**, *i.e.* pages updated in last 3 months
- **Occurrences**, *i.e.* terms appear in title
- **Domain**, *i.e.* .gov, .edu
- **Links**, *i.e.* pages that link to the page

Find results

- with **all** of the words
- with the **exact phrase**
- with **at least one** of the words
- without** the words

teenage contraception

10 results

Language

Return pages written in

English

File Format

return results of the file format

Adobe Acrobat PDF (.pdf)

Date

Return web pages updated in the

anytime

Occurrences

Return results where my terms occur

anywhere in the page

Domain

return results from the site or domain

edu

e.g. google.com, .org [More info](#)

SafeSearch

No filtering Filter using [SafeSearch](#)

Froogle Product Search (BETA)

Products

Find products for sale

To browse for products, start at the

Page-Specific Search

Similar

Find pages similar to the page

e.g. www.google.com/help.html

Links

Find pages that link to the page

Topic-Specific Searches



teenage contraception site:edu filetype:pdf

Search

[Advanced Search](#)
[Preferences](#)

Search the Web Search English pages

Web

Results 1 - 10 of about 614 English pages for **teenage contracepti**

[\[PDF\] PREVENTING TEENAGE PREGNANCY](#)

File Format: PDF/Adobe Acrobat - [View as HTML](#)

... goes to families that started with a **teenage** birth. **Contraception**. ... While **contraceptive** use has increased among **teenagers** and is almost as prevalent ...

www.education.pitt.edu/ocd/publications/sr1995-03.pdf - [Similar pages](#)

[\[PDF\] background](#)

File Format: PDF/Adobe Acrobat - [View as HTML](#)

... pregnancy rates among **teens**. **Contraception**, the most effective. strategy to date, is often wrapped in. controversy. High Costs ...

www.education.pitt.edu/ocd/publications/backgrounds/TeenPregnancy.pdf - [Similar pages](#)

[\[PDF\] The Contraception Report Volume VI, Number 3 Facts about Teenage ...](#)

File Format: PDF/Adobe Acrobat - [View as HTML](#)

... Many **teens** are afraid to use **contraception** because they fear it is dangerous. • Most **teens** don't realize that using **contraception** is safer than having a ...

uuhs.c.utah.edu/pated/handouts/pdfs/handout1335.pdf - [Similar pages](#)

[\[PDF\] What to Know About Teen Sexuality](#)

File Format: PDF/Adobe Acrobat - [View as HTML](#)

... their older peers to use **contraceptives**. Given this, many **teens** are at risk ... **teens** use **contraception** the. first time they have sexual. intercourse. ...

www.utextension.utk.edu/publications/spfiles/sp491c.pdf - [Similar pages](#)

[\[PDF\] Teenage Pregnancy in the United States](#)

File Format: PDF/Adobe Acrobat - [View as HTML](#)

... (Kann L)' Evidence in itself why there are so many **teenage** ... **Contraception** needs to be taken within 72 hours and the quickest way to obtain it is via ...

web.bvu.edu/students/moreabb/Morey%20Project%202a.pdf - [Similar pages](#)

Google Scholar

scholar.google.com

- Searches for **scholarly literature**, including peer-reviewed papers, theses, books, abstracts and technical reports
- Finds articles from academic publishers, professional societies, universities, etc. as well as scholarly articles on the web
- "**Cited by**" link identifies # that have cited the original
- Access to full text only available with subscription
- **NEW:** Now links to full text articles the UW subscribes to
- **Caution:** Not a reliable sole source for searching scholarly literature

Meta-Search Engines

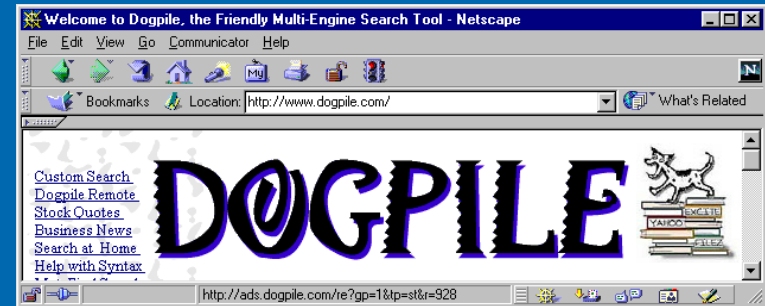
Allow you to send searches to more than one search engine at a time



Meta -Search Engines

DogPile

dogpile.com



Clusty

clusty.com



Clusty

clusty.com

- All the speed and functionality of *Google*, with clustering added
- **Clustered results** in left margin
- Why use clustering?
 - Learn at a glance types of information available
 - Uncover results that are otherwise buried



apple

Cluster by: Topics

Top 275 results of at least 47,680,000 retrieved for the query **apple** (Details)

All Results (275)

- + [Mac](#) (88)
- + [iPod](#) (42)
- + [Apple Store](#) (24)
- + [Hardware](#) (18)
- + [History](#) (15)
- + [QuickTime](#) (13)
- + [Big Apple](#) (10)
- + [Fruit, Family](#) (8)
- + [User Group](#) (9)
- + [Weblog](#) (7)

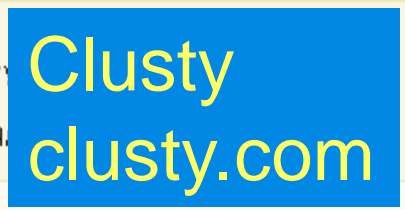
[more](#) | [all clusters](#)

Tell us what you think.
clusty@clusty.com

- Open in new window
- Show in clusters
- Toggle preview frame
- Expand clusters

News

- [Apple drops Samsung joint investment plan](#) (7)
- [Apple Names New Chief Operating Officer](#) (4)



[Official iPod Store](#)

Buy the new iPod, now with videos. Get free engraving & free shipping. www.apple.com/ipod

[Apple](#)

Shop J&R - An **Apple** Authorized Reseller for all your **Apple** items. www.JR.com

1. [Apple](#)

... Visit other **Apple** sites around the world: Choose... Asia Australia Austria Belgium Brazil Europe Finland France Germany Hong Kong India Ireland Italy Japan Korea Latin America
www.apple.com - [cache] - GigaBlast, MSN, Wisenut, MSN Search, Ask Jeeves, Open Directory
2. [apple-history.com](#)

...Look in the gallery for a description and picture of every **Apple** computer ever made. The topic.....Sorry, this site no longer supports browsers incapable of frames..
www.apple-history.com - [cache] - Looksmart, Ask Jeeves, MSN, GigaBlast, Open Directory
3. [Apple Developer Connection](#)

... The definitive online catalog of Mac products. Membership Gets You More Join the **Apple** started today. Pre-Release Software Code-Level Support Marketing Services Hardware ...

Dogpile

dogpile.com

- Makes searching the web easier by returning the best results from these leading search engines:
*Google · Yahoo · Ask.com
About · LookSmart ·*
- Search for audio, images, and multimedia formats

Getting results for query: infant GERD

AltaVista: 10 references returned

Webcrawler: 10 references returned

Thunderstone: 8 references returned

Lycos: 1 references returned

Excite: 10 references returned

Infoseek: 10 references returned

Looksmart: 0 references returned

Finished sending hits ...


 Web Pages
 Images
 Audio
 Multimedia
 News
 Shopping

[Advanced Search](#)
[Preferences](#)
[Tools & Tips](#)

 Dogpile Searches: [Google](#) • [Yahoo](#) • [Ask Jeeves](#) • [About](#) • [Overture](#) • [Teoma](#) • [Learn More](#)

Metasearch results for "infant GERD" (1 - 20 of 97)

[1](#) | [2](#) | [3](#) | [4](#) | [5](#) | [Next >](#)
 Refine Your Results

- "infant GERD"

- + [Disease](#)
- + [Infants and Children](#)
- + [Disorders](#)
- + [Pediatric](#)
- + [Story](#)
- + [TIPS](#)
- + [Health](#)
- + [Asthma](#)
- [Tucker Sling](#)
- [More...](#)

 View By Relevance
 View By Search Engine

1. [Shae Lynne Brooke ~ Infant Reflux ~ What is GERD?](#)
 Personal story of an **infant** suffering from a severe case of **infant** reflux disease or **GERD**, includes links for information and support on Gastroesophageal ...
<http://www.infantrefluxdisease.com/gerdinfo.htm>
2. [Infant Dyschezia](#)
 Introduction **Infant** dyschezia is one of the childhood functional gastrointestinal disorders defined by the Rome Pediatric Working Group.
<http://www.aboutkidsgi.org/InfantDyschezia.html>
3. [Gastroesophageal Reflux in Infants](#)
 Multimedia Tutorial about childhood gastroesophageal reflux written for parents and children...
<http://galen.med.virginia.edu/~smb4v/tutorials/reflux/ger.ht...>
4. [Tucker Sling Therapeutic Baby Mattress](#)
 By keeping babies in an inclined position, the Tucker Sling safely alleviates some of the more uncomfortable symptoms of **Gerd**. Visit us online for more on **infant Gerd**. Sponsored by: <http://www.tuckersling.com>
5. [The Tucker Sling](#)
 Learn about this safe alternative to medicine for **infant** acid reflux. Sponsored by: <http://www.tuckersling.com/>
6. [Shae Lynne Brooke ~ Infant Reflux](#)
 Within this site you will find out what **infant** reflux is, current treatment options for **infant** reflux disease (**GERD**) , and some wonderful links...
<http://www.infantrefluxdisease.com/>
7. [Infants with GERD](#)
 Credit Card Order - Mail Payment. Infants with **GERD**. Most infants occasionally "spit up" or "throw up" after they eat.
<http://www.restright.com/infants.htm>
8. [Gastroesophageal Reflux Disease \(GERD\) / Heartburn - Lucile ...](#)
 ... death syndrome). Infants and children with **GERD** who vomit frequently may not gain weight and grow normally. Inflammation (esophagitis ...
<http://www.lnch.org/DiseaseHealthInfo/HealthLibrary/digest/n>

Tips and Strategies

- Select one or **two tools** and get to know them well
 - Read the **Help**
 - Try **Advanced Search** options
- Know when **NOT** to search: **10 minute rule**
 - Is it worth your time?
 - Would a phone call to a colleague or librarian be more productive?
 - Is the information you seek likely to be on the web?

#9

Evaluate Web Resources



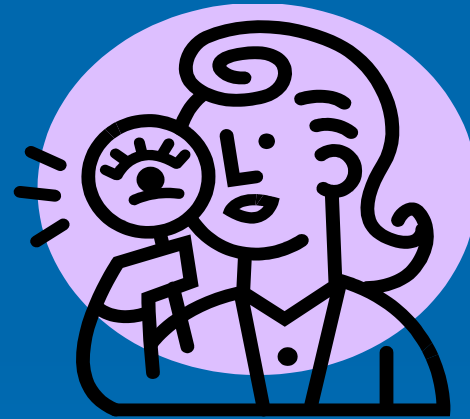
Evaluating Health Website Strategies

- Evaluate using **Criteria for Evaluating Web Resources**
- Determine the type of site by analyzing **website Addresses**
- Use **guides** to evaluating health Information on the web

Criteria for Evaluating Web Sites

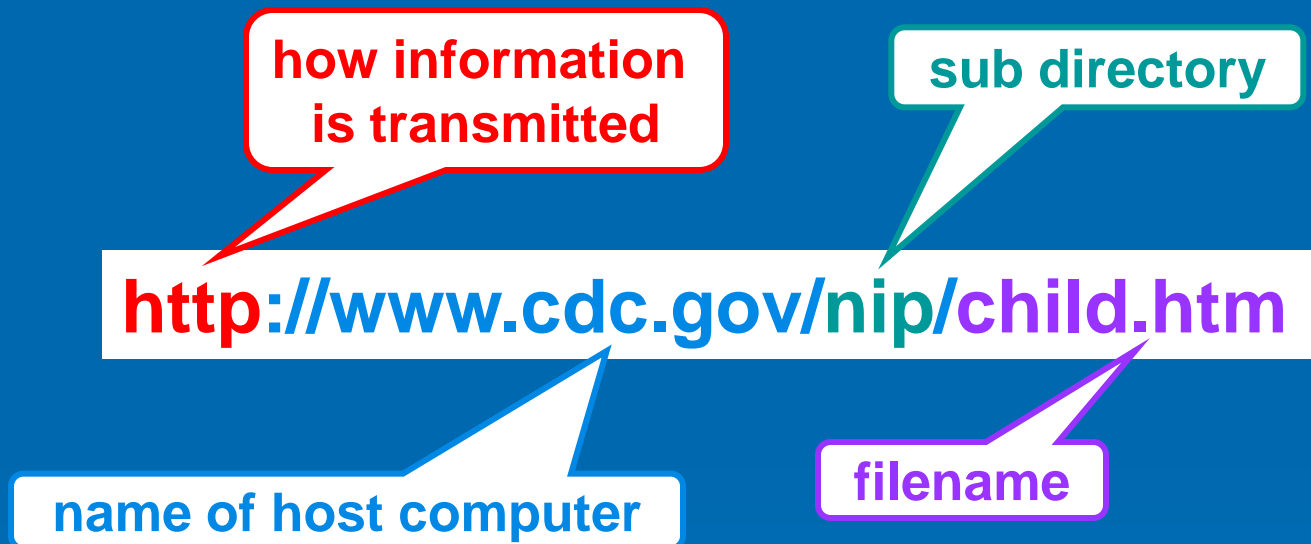
healthlinks.washington.edu/howto/navigating/criteria.pdf

- Authority
- Accuracy
- Objectivity
- Currency
- Coverage



Anatomy of a URL

- edu
- org
- com
- gov



The URL includes the name of the host computer which can indicate the purpose of the web site.

Guides for Evaluating Health Information

- Criteria for Evaluating Web Resources

healthlinks.washington.edu/howto/navigating/criteria.pdf

- Thinking Critically about Discipline-Based World Wide Web Resources

www.library.ucla.edu/libraries/college/help/critical/discipline.htm

#10

***Contact your ultimate search
engine: a librarian!***



Final Thoughts

- Use *Ten Steps for Finding Health Information on the Web to Improve Patient Care*
- Navigate the web efficiently with a search engine, Advanced Google or Google Scholar
- Remember PubMed, MedlinePlus, EthnoMed, and drug resources
- Ask a **colleague or librarian**, your ultimate search engine



For more information...

- If you are **affiliated with the UW**, contact:

Janet G. Schnall, MS, AHIP
206.543.7474
schnall@u.washington.edu



- Or, contact the **National Network of Libraries of Medicine (NN/LM)** for exhibits, workshops, classes, and project collaborations

NN/LM 800.338.7657
Linda Milgrom 206.221.3400
lmilgrom@u.washington.edu

Finding Health Information on the Web To Improve Patient Care

PowerPoint presentation:

healthlinks.washington.edu/hsl/liaisons/schnall/auburn.ppt

Handout:

healthlinks.washington.edu/hsl/liaisons/schnall/auburn.doc