

Outline for Dr. Walsh's Presentation (7-9 minutes)
MLA Informationist conference
April 4-5, 2003

The presentation will include detailed transparencies on the following points:

- Clinical examples
- Details of questions
- Impact of service

Oral Presentation: Introduction. I am a practicing neonatologist who has been taking care of infants for the past 20 years. I have been chief of nurseries at Vanderbilt University for the last ten years. Evidence-based medicine is crucial to all of medicine, but especially to neonatology where the lives are so fragile and the outcomes last for 70 years. We also have a history of making well-intentioned but serious errors when relying upon anecdotal experience as evidenced by the blindness brought on in the fifties when it was observed that preemies had fewer apnea episodes when in a high-oxygen environment. In addition as the premier medical center in Tennessee and the southeast I feel it is crucial that we not adopt policies that are not well founded in the medical literature since what we do is frequently emulated. Finally I am responsible for the education and training of numerous physicians and teaching them how to learn is a crucial part of what I do. Since I graduated from my fellowship in 1981 neonatology has changed so much that I would quickly become obsolete if I did not keep abreast of the latest developments, but I am faced with a veritable avalanche of references numbering in the hundreds of thousands. Therefore you can imagine my pleasure when:

I. Genesis of CICS in Vanderbilt's NICU

Dr. Nunzia Giuse and Sandi Martin first came to my office in April 1997 to clarify the Clinical Informatics Consult Service (CICS) program for me and ask if the Neonatal Intensive Care Unit (NICU) would be interested in participating. At the meeting, Nunzia explained that the CICS program was designed to bring information specialists directly into the clinical intensive care setting in order to provide just-in-time, patient-specific information when and where it was needed for effective clinical decision-making and evidence-based practice. She went on to explain that there would be an immersion period in which Sandi would begin to absorb the NICU culture, build her knowledge base, and learn to apply her librarian skills to our particular setting. The part that really got my attention was when she explained that one of the objectives of this service was to allow the librarians to meet the needs of very busy clinicians more efficiently by providing customized, filtered information packages for their clinical teams. Imagine my surprise and delight when someone of Nunzia's knowledge and expertise asked if a librarian from Eskind could make my job easier by finding and supplying me with evidence-based information that would enable me to treat my patients, give information to families, help medical students learn, and assist nurses with bedside care. The CICS program was definitely something I was interested in pursuing, and the very next week Sandi began going on rounds with the clinical team.

II. Expectations for the Program

Initially, my expectations were that Sandi would bring accurate and timely information that would assist the team in treating patients. I didn't realize how having her at the bedside would alter the way we approach rounds. As a librarian assigned specifically to the neonatal intensive care unit, she has demonstrated the ability to ask questions targeted to the context of individual patients that enable her to search the literature effectively. Using her knowledge base, she is able to return summaries of filtered articles that aid us in making evidence-based clinical decisions.

III. The Information Specialist and the Clinical Team

The neonatology "team" at Vanderbilt consists of an attending neonatologist, a pediatrician training in neonatology as a neonatal fellow, four physicians training to be pediatricians as residents, a neonatal nurse practitioner and frequently a pharmacist and dietician. This team is responsible for the health of up to 28 seriously ill infants. Sandi is definitely a part of the team. When I introduce her to the new members at the beginning of the month, I'll say, "I want you to meet the smartest person on this team. Not because she knows everything, but because she knows where to find it."

IV. Significance of the Information Specialist's Role

The role of the Information Specialist in the clinical setting means having a member of the team with the talent and expertise to search the vast amount of available information using complex medical search strategies and find the best evidence to bring back to the team. Her ability to round with us and get critical patient information firsthand allows the retrieval to have direct relevance to the case we are treating. However, I feel her most important role is that of instructor in how to obtain the needed information. She has the opportunity to teach us how to put search strategies together ourselves, whether it be at the time of rounds or training sessions scheduled outside rounds.

V. Benefits of the Service

Her work in expediting our needs is of inestimable value. She has relieved the busy clinical team of time-consuming, complex medical searches and made our decisions easier by providing just-in-time evidence-based information regarding patient specific problems. We know we can count on her bringing back pertinent findings that reflect all views, even where there is conflict in the medical literature. The filtered articles she provides enable the team to make informed decisions based on the best evidence in the literature.

VI. Acceptance and Integration of the Information Specialist

All members of the team have an enormous respect for Sandi's ability and commitment to the clinical team. Having a clinical librarian has proven to be a wonderful educational resource for the entire neonatal intensive care unit. We all feel free to ask Sandi questions regarding NICU policy and ongoing research as well as specific patient questions. By taking the time to hold mini-sessions during rounds and schedule longer in-depth resource training, she has fostered a lifelong learning attitude among the team members. We have used the information Sandi has gathered and the techniques she has taught us to create a Vanderbilt Guideline Policy Webpage through which we share our present understanding of the literature and as a Website we can change and update as needed.