

Evidence Based Practice (EBP)

The most common definition of EBP is taken from Dr. David Sackett, a pioneer in evidence-based practice. EBP is "the conscientious, explicit and judicious use of current best evidence in making decisions about the care of the individual patient. It means integrating individual clinical expertise with the best available external clinical evidence from systematic research." EBP is the integration of clinical expertise, patient values, and the best research evidence into the decision-making process for patient care.

All continuing education programs wishing to use the label "LEVEL I–EBP Category: Enhanced Continuing Education Program", must be pre-approved through an application process. This application process requires the applicant to demonstrate that the proposal meets specific content and quality requirements. These requirements are intended to facilitate the type of presentation that is best able to contribute to clinical practice in an evidence-based way.

Demonstration of these requirements is necessary for a successful application and subsequent approval for EBP Category CEUs. To be eligible for approval as an EBP, the program topic must adhere to one of the following formats: 1) Clinical EBP or 2) Foundations of EBP.

Clinical EBP Activities

Clinical EBP programs are continuing education activities organized around a clinically oriented topic and must be designed in a way that reflects the basic principles of EBP. Examples of appropriate clinical topics include glenohumeral assessment, ACL rehabilitation, and sport-related concussion. The application for Clinical EBP is meant to facilitate the delivery of a presentation that is similar in approach to that described by Steves and Hootman (2004). The ideal *Clinical EBP* presentation would contain the following components:

- A focused and clinically relevant question structured in PICO or PIO format;
- A detailed search strategy arising from the clinical question, including useful search terms;
- Identification of the information source (e.g., PEDro; Cochrane; PubMed) used in literature search;
- A critical appraisal of relevant literature and a determination of levels of evidence and/or strength of recommendations;
- A clinical application of the evidence, including a clinical bottom-line, as well as information about the role of clinician experience and expertise and;
- An appraisal of the outcome gained through the application of the evidence-based intervention.

It should be acknowledged that a substantive body of literature is not available for all clinical topics. Nor does all available literature provide clear clinical direction for all topics. These facts do not necessarily diminish the clinical importance or the educational value of those topics. Consequently, the application process does not preclude such topics from being presented.

Instead, the application process is meant to ensure that the speaker takes the appropriate preliminary steps to bring a structure to the planning and preparation of the presentation that 1) includes those components and characteristics most helpful to evidence-based practice, and 2) is able to relate the current state of the evidence, regardless of that state, to the audiences.

It should also be acknowledged that within a *Clinical EBP* presentation, several clinical questions may be relevant to the topical focus of the presentation.

Foundations of EBP Activities

Foundations of EBP are programs are continuing education activities organized around the topic of and must address theoretic or practical aspects of EBP, EBP knowledge gaps, or the application of topics relevant to EBP, such as critical appraisal, or statistical analysis. Programming in this category is intended to promote EBP within the profession by enhancing a clinician's ability to find and evaluate evidence, and apply it to their clinical practice. Diversity among topics is encouraged in order to provide appropriate content for all clinicians relative to their level of expertise with EBP. The value of the identified topic should direct applicants' proposal development.

References and Resources

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- Bruce SL, Wilkerson GB. Clinical prediction rules, Part 1: Conceptual overview. *Athletic Therapy Today*, 2010; 15(2): 4-9 AND Part 2: Data analysis procedures and clinical application of results. *Athletic Therapy Today*; 2010; 15(2), pp. 10-13
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- Centre for Evidence Based Medicine: www.cebm.net