

November  
2012

# CRDAMC Med Lib / Sim Center News

CRDAMC Medical Library Room E2024A 2nd Floor, above Emergency 288-8996 Crdamc.library@amedd.army.mil  
Simulation Center Room 3119, 3rd Floor adjacent to Gastro 553-2070

## Leveraging PubMed: Understanding Your Result Set

When searching PubMed, you will see citations appended with various tags which supply information about the nature of the citation. Citations are added to PubMed five days a week.

Many citations are submitted to PubMed electronically by the publisher. As they are received, they will begin to show up in your search results tagged as **[PubMed - as supplied by publisher]**. No quality control measures have been applied to these citations, nor have they been evaluated for inclusion in MEDLINE. Some of these citations will receive no processing and will remain tagged "as supplied by publisher." The tag **[PubMed - in process]** indicates a citation that is being reviewed for accuracy, assignment of subject headings and indexing for author affiliation, mode of drug action (if applicable) and publication type. Citations are evaluated for inclusion in MEDLINE at this point. A tag that says **[PubMed - indexed for MEDLINE]** indicates an item that has been fully processed and meets the criteria for inclusion in MEDLINE. While all MEDLINE citations are part of PubMed, not all PubMed content is included in MEDLINE.

These three types of tags are shown in the screenshot below.

The screenshot shows the PubMed search results for the query 'darnall army'. The search results are displayed in a list format. The first citation is 'Medicinal leech therapy on head and neck patients: a review of literature and proposed protocol' by Elyassi AR, Terres J, Rowshan HH. The tag '[PubMed - as supplied by publisher]' is circled in red. The second citation is 'Fatal gastrointestinal hemorrhage after a single dose of dabigatran' by Kernan L, Ito S, Shirazi F, Boesen K. The tag '[PubMed - indexed for MEDLINE]' is circled in red. The third citation is 'Emergent interfacility evacuation of critical care patients in combat' by Franco YE, De Lorenzo RA, Salyer SW. The tag '[PubMed - in process]' is circled in red. The search results are sorted by 'Recently Added' and display 'Results: 3'.

Two other tags are not shown in this example.

**[PubMed]** – these are fully processed citations which do not meet the criterion for inclusion in MEDLINE. These have been reviewed for accuracy, but no subject headings have been applied, nor will they be applied.

**[PubMed – OLDMEDLINE]** – includes over 2 million citations indexed from journals published from 1946-1965. These items were indexed using index terms that differ from the currently used Medical Subject Headings (MeSH). Beginning in 2005, OLDMEDLINE the index terms used for these citations are being retrospectively mapped to MeSH. As the indexing progresses, the OLDMEDLINE citations are promoted in status to **[PubMed - indexed for MEDLINE]**.

Why does it matter? See page 2 for the answer.

### CRDAMC Contributes to Professional Knowledge

Pugh, Mary Jo, Laurel A. Copeland, John E. Zeber, Chin-Pen Wang, Morgan E. Amuan, Eric M. Mortensen, Jeffrey V. Tabares, Anne C. Van Cott, Toby L. Cooper, and Joyce A. Cramer. "Antiepileptic Drug Monotherapy Exposure and Suicide-Related Behavior in Older Veterans." *Journal of the American Geriatric Society* (2012): Web. 9 Nov. 2012.  
DOI: 10.1111/j.1532-5415.2012.04207.x

Wu, Jinsong, and Drew C. Baird. "What Is the Best Medication for Migraine Prevention?" *Evidence-Based Practice* 15.10 (n.d.): 10. Print.

## Understanding Your Result Set Continued

Have you ever found yourself scratching your head wondering why you found PubMed content in your Google Scholar search that you did not uncover when you searched PubMed? It may be due to your search method. Searchers who discover the power of using the Medical Subject Headings (MeSH) love the focus and relevance that MeSH brings to their searches. They may not realize that when a MeSH heading is applied to a search, the following are excluded from the results:

- Citations tagged [PubMed - as supplied by publisher], [PubMed - in process], and [PubMed – OLD-MEDLINE], because they have no MeSH indexing.
- Citations from journals that are not indexed in MEDLINE.
- Citations from indexed journals that were published before the journal was added to MEDLINE indexing. For example, the journal *The Neurologist* was added to indexing for MEDLINE in 2003, volume 9. Using a MeSH qualifier will exclude all content from this journal that was published prior to that time.

Searching without a MeSH qualifier will search every searchable field of every citation in PubMed for the queried terms. Adding a MeSH qualifier to your search will exclude the non-MEDLINE content of PubMed from your search results. As noted on page 1, MEDLINE is a part of PubMed, but PubMed contains content that is not part of MEDLINE. If your intention is to perform the most comprehensive literature review possible or to find the newest articles on a topic, you will want to include PubMed content that is not indexed for MEDLINE.

If comprehensiveness is not critical to your search, if you are working under a tight time frame or if you want a tightly focused search, it may be better to limit your search output to materials that are indexed for MEDLINE. Regardless of what you want your search to accomplish, your friendly neighborhood library staff will be happy to help you make it happen.

## Care for the Caregiver

In honor of Warrior Care Month, the Medical Library would like to draw your attention to the following library resources for our Medical Warfighters and supporting personnel.

- Caregiver stress and staff support in illness, dying, and bereavement, 2011
- Deployment psychology : evidence-based strategies to promote mental health in the military, 2011
- Handbook of adult resilience, 2010
- Harvard Medical School guide to a good night's sleep, 2007
- Overcoming secondary stress in medical and nursing practice a guide to professional resilience and personal well-being; 2005; electronic book
- Promoting psychological resilience in the U.S. military, 2011, electronic book
- The resilient practitioner burnout prevention and self-care strategies for counselors, therapists, teachers, and health professionals, electronic book
- The therapist's workbook : self-assessment, self-care, and self-improvement exercises for mental health professionals, 2012

We hope that you will take advantage of these items and take time out to give yourself a little TLC.

**ASK US ABOUT LOANSOME DOC!**



# CRDAMC Simulation Center



NOVEMBER 2012

Simulation Medical Director  
254-553-0927

Director of Medical Education  
254-286-7115

CRDAMC Simulation Specialist  
254-618-8368

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## CAE's New EndoVR GI and Bronchoscopy Simulator

The Central Simulation Committee and the CRDAMC Simulation Lab continues to offer CRDAMC Staff simulators that allow for honing skills and developing confidence in a risk free training environment. Our most recent addition is our upgrades to the CAE AccuTouch Endoscopy Simulator; changing the nomenclature to the EndoVR GI and Bronchoscopy Simulator system. Additions to the hardware of the simulator includes a dual monitor and an updated graphic user interface for observing anatomy and scope placement as well as an introduction Endobronchial ultrasound (EBUS) and Transbronchial Needle Aspiration (TBNA). Additional cases are listed on page 2.

These learning platforms provide residency coordinators and staff clinicians the options of designing specific cases based on the learners current skill set. Caseloads are progressive and are numbered 1-6 for Upper GI and 1-8 for EBUS-TBNA cases. For assessment purposes, users have the ability to gauge task performance with a metrics based reporting system.



Bill Deery CAE Field Technician assembles the EndoVR



Tutorial on Flexible Bronchoscopy

**“Trained, Competent and Ready”**



# CRDAMC Simulation Center



NOVEMBER 2012

## CAE's New EndoVR GI and Bronchoscopy Simulator

### Upper GI Tract:

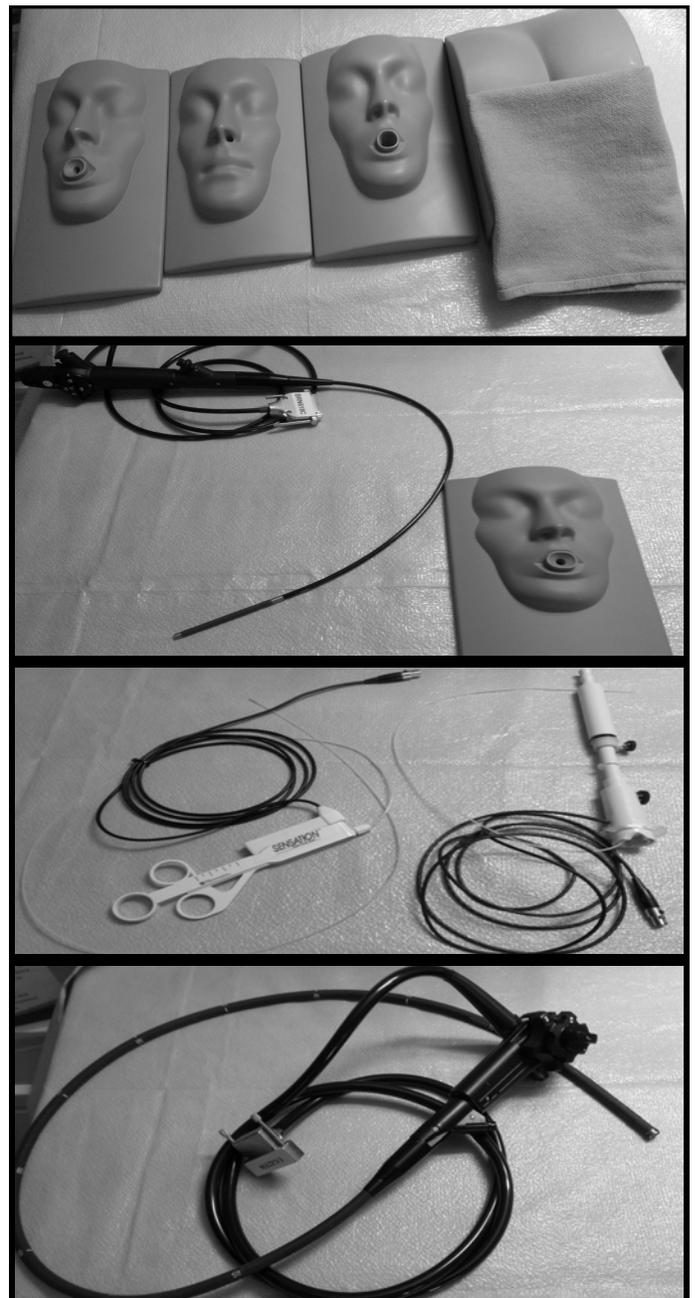
- Esophagoduodenoscopy (EGD)
- Endoscopic Retrograde Cholangiopancreatography (ERCP)
- GI Bleeding

### Lower GI Tract:

- Intro to Sigmoidoscopy
- Intro to Colonoscopy
- Intro to Polypectomy
- Intro to Biopsy

### Bronchoscopy:

- Intro to Bronchoscopy
- Bronchoalveolar Lavage (BAL)
- Transbronchial Needle Aspiration (TBNA)
- Pediatric Difficult Airways
- Endobronchial Ultrasound TBNA (EBUS-TBNA)



Contact the Simulation  
Lab at 254-553-2070  
for scheduling your  
next event.

**“Trained, Competent and Ready”**