

Impact of an online evidence retrieval system on decision-making in general practice

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Registration date 09/09/2005	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 08/11/2022	Condition category Other	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol
Not provided at time of registration

Contact information

Type(s)
Scientific

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Additional identifiers

Protocol serial number
N/A

Study information

Scientific Title
Impact of an online evidence retrieval system on decision-making in general practice

Study objectives
The aim of this trial is to assess the effectiveness of an online evidence retrieval system in improving clinical decision-making processes in general practice. The specific hypotheses to be

tested in this study are that:

1. Online evidence systems are clinically acceptable and will be used by clinicians in real world general practice settings
2. Online evidence systems are effective in changing clinical decision-making behaviour and result in measurable improvements in evidence-based prescribing decisions

Ethics approval required

Old ethics approval format

Ethics approval(s)

Not provided at time of registration

Study design

Randomised controlled trial

Primary study design

Interventional

Study type(s)

Treatment

Health condition(s) or problem(s) studied

Online clinical evidence retrieval technology

Interventions

Participants in the intervention group were given access to Quick Clinical an online clinical evidence retrieval system specifically designed around the needs of family physicians. This system is based on the generic use of search filters focused on clinical questions and retrieves evidence from multiple resources including bibliographic databases, textbooks and summarised guidelines.

Participants in the control group received no intervention.

Intervention Type

Behavioural

Primary outcome(s)

The primary outcome measures are clinician acceptance and use of Quick Clinical and the resulting change in decision-making behaviour. Specific outcome measures are:

1. Physician acceptability focusing on ease of use and usefulness and patterns of use of QC
2. Prescribing patterns in clinical priority areas identified at the start of the study
3. Prescribing patterns in response to new evidence of the effectiveness of new or existing treatments
4. Patterns of non-pharmacological clinical management

Key secondary outcome(s)

1. Referral patterns
2. Management decisions
3. Number, timing and types of investigations

Completion date

01/05/2006

Eligibility

Key inclusion criteria

Registered general practitioners who had a computer with Internet connectivity and prescribed electronically were studied.

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

Clinicians were excluded if they were participating in other studies requiring the provision of prescribing data or if they were planning to retire or move to another practice during the study period.

Date of first enrolment

01/05/2005

Date of final enrolment

01/05/2006

Locations

Countries of recruitment

Australia

Study participating centre

Centre for Health Informatics

Sydney

Australia

2052

Sponsor information

Organisation

University of New South Wales (Australia) - Centre for Health Informatics

ROR

<https://ror.org/03r8z3t63>

Funder(s)

Funder type

University/education

Funder Name

University of New South Wales (Australia) - Centre for Health Informatics

Results and Publications

Individual participant data (IPD) sharing plan

Not provided at time of registration

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article		24/08/2006		Yes	No