

18. Research reports may have more than one author. Which of the following is typically the person who contributes most to a study?
 - a. 2nd author
 - b. 4th author
 - c. 1st author
 - d. 3rd author

19. An evidence pyramid illustrates the relevance and quantity of evidence for practice. Which of the following is likely to be greatest in quantity?
 - a. Ideas, opinions, and anecdotal accounts
 - b. Single case reports
 - c. Cohort studies
 - d. Randomized controlled studies

20. Who will have access to the records of research participants is an issue of:
 - a. Costs to participants
 - b. Legal rights
 - c. Confidentiality
 - d. Risks or discomforts

ESSAY QUESTIONS

1. In what way were participants deceived in the Tudor Study? How does deception violate today's principles of ethics?

2. What is the purpose of Institutional Review Boards?

3. How does the Belmont Report distinguish between practice and research activities?

4. What is an application for the ethical principles: (a) respect for persons, (b) beneficence, and (c) justice?

5. Where do students and researchers find formal statements of research ethics?

6. What are the issues in ethics that concern research participants?

7. Who are possible "participants" in research?

8. What are the critical elements to be included in an informed consent document?

9. What are possible barriers to achieving informed consent?

10. How is "evidence-based practice" related to ethics in research?

ANSWER KEY

1. c
2. b
3. c
4. a
5. c
6. b
7. d
8. a
9. b
10. d
11. a
12. d
13. e
14. c
15. d
16. d
17. b
18. c
19. a
20. c

CHAPTER THREE

EVIDENCE-BASED PRACTICE IN COMMUNICATION DISORDERS

OBJECTIVES

Six objectives address the primary focus of Chapter Three. On completion of Chapter Three, students should:

- 1) Understand the evolution and history that underpins today's evidence-based practice principles;
- 2) Understand the ethics of EBP including risks and benefits;;
- 3) Appreciate the acceptance and adherence issues relevant to EBP;
- 4) Recognize best practices for behavioral change;
- 5) Know what questions to answer for the critical appraisal of evidence;
- 6) Recognize the 10 steps to achieve evidence-based practice.

OUTLINE

- I. What is evidence-based practice?
- II. A Short History of Evidence-Based Practice
 - A. The earliest systematic clinical trial
 - B. The evidence-based practice movement
- III. What are the ethics in evidence-based practice?
 - A. Evidence-based practice benefits
 - B. Evidence-based practice risks
- IV. A Simple Model for Evidence-Based Practice
- V. Implementation Issues for Evidence-Based Practice
 - A. What are clinical practice guidelines?
 - B. What are the acceptance and adherence issues?
 - C. Resistance to change in clinical practices
- VI. Common Misperceptions about Evidence-Based Practice
 - A. Misconception: EBP is a cookbook approach to clinical practice
 - B. Misconception: EBP is solely a matter of science
 - C. Misconception: Textbooks are good sources for answering specific clinical questions
 - D. Misconception: Reading journals and attending conferences are sufficient for EBP
 - E. Misconception: EBP is useless when there is no

good evidence

F. Misconception: EBP is just numbers and statistics

G. Misconception: EBP is ineffective without randomized controlled trials

VII. Evaluating Research for Evidence-Based Practice

VIII. What is the Future of Evidence-Based Practice?

IX. Conclusion: Evidence-Based Practice in Communication Disorders

X. Case Studies: Evidence-Based Practice in Communication Disorders

A. Should I change interventions?

B. Smallville Schools need guidance

C. A revolutionary new device

D. Samuel's private practice

XI. Student Exercises: Evidence-Based Practice in Communication Disorders

TEST BANK

1. Evidence-based clinical decisions are best determined by:
 - a. Client preferences
 - b. Scientific research
 - c. Clinical expertise
 - d. All of these

2. The problem with the original model for evidence-based medicine..
 - a. Clinical questions did not arise at the point of care.
 - b. The search for scientific evidence was not part of the model.
 - c. The original model was difficult to implement.
 - d. The patient's preferences were part of the solution.

3. The Cochrane Collaboration is _____.
 - a. a consortium of experts who offer advice to clinicians.
 - b. a repository for systematic reviews of research.
 - c. a professional group which develops guidelines for practice.
 - d. an association of clinical scientists in audiology and speech-language pathology.

4. Sometimes cited as a criticism of evidence-based practice.
 - a. Individual client autonomy
 - b. Social justice
 - c. Both a and b
 - d. None of these

5. The first step in the evidence-based practice model.
 - a. Evaluate effectiveness and efficiency
 - b. Locate the best evidence
 - c. Evaluate the size of effect and utility
 - d. Formulate an answerable question

6. Among the Institute of Medicine's attributes for good practice guidelines are:
 - a. Validity
 - b. Reliability/reproducibility
 - c. Clarity
 - d. All of these
7. This is NOT one of the prevalent reasons cited for resistance to adopting clinical practice guidelines.
 - a. Work setting
 - b. Poor team work
 - c. High stress levels
 - d. Persistence of the status quo
8. Which of the following practices is NOT likely to facilitate behavioral change?
 - a. Mail educational materials.
 - b. Use focused approaches.
 - c. Adopt educational outreach visits.
 - d. Implement active dissemination techniques.
9. Which of the following traits are associated with clinical expertise?
 - a. Adapting to new situations
 - b. Disregarding irrelevant information
 - c. Continuing to learn
 - d. All of these
10. Which of these factors may NOT be relevant to an individual client?
 - a. The therapist effect
 - b. Efficacy and effectiveness
 - c. Cultural background
 - d. Results from group studies
11. Which of these clinical questions is most SPECIFIC in nature?
 - a. What is an effective treatment?
 - b. For clients with autism, is X or Y the better assessment?
 - c. Who is the best therapist with clients who are hearing impaired?
 - d. How are targets for conversational recasts chosen?
12. Evidence grading assumes that most _____ are better evidence than _____.
 - a. Opinions, cohort studies
 - b. Anecdotal accounts, case reports
 - c. Systematic reviews, collective case reports
 - d. Single-case controlled studies, randomized clinical trials
13. The gold standard for judging clinical efficacy.
 - a. Randomized clinical trials
 - b. Collective case reports
 - c. Single-case controlled studies
 - d. Expert opinions
14. Which of the following components is most important to evidence-based practice?
 - a. Client preferences
 - b. Scientific research
 - c. Clinical expertise
 - d. All three are important