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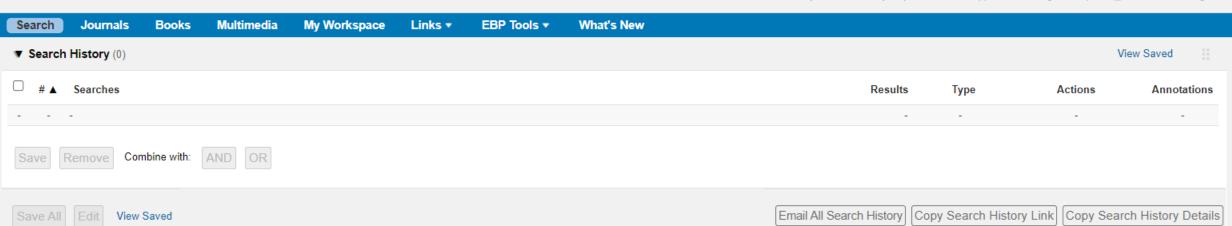
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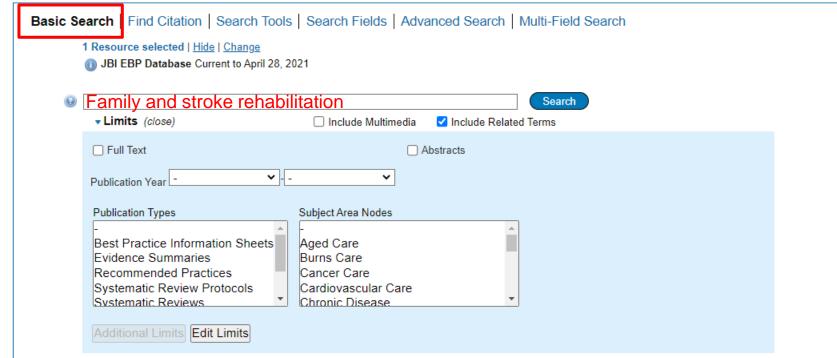
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- ●尋找標題詞的定義
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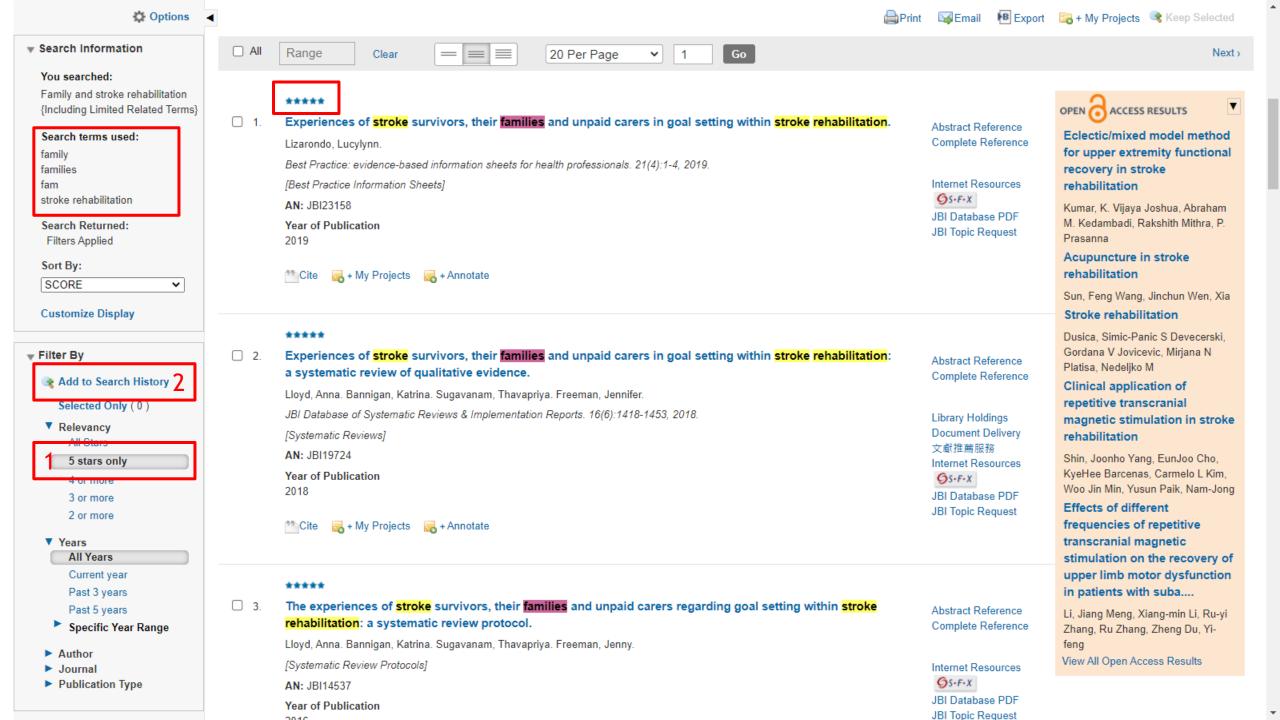


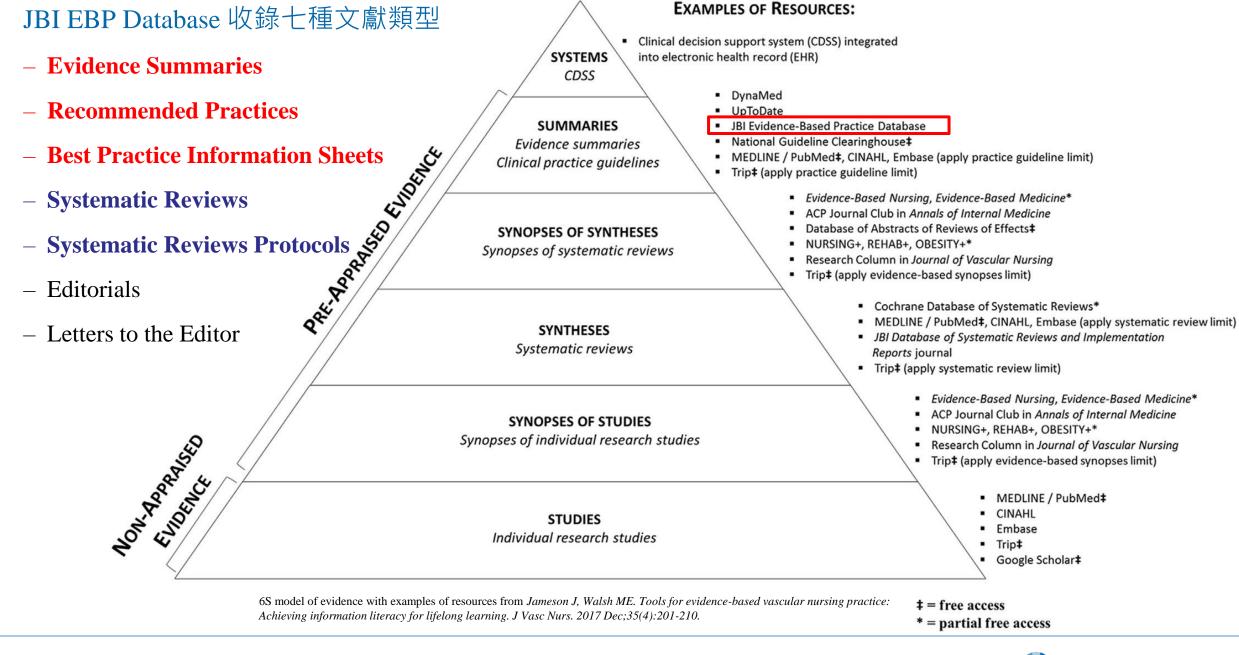
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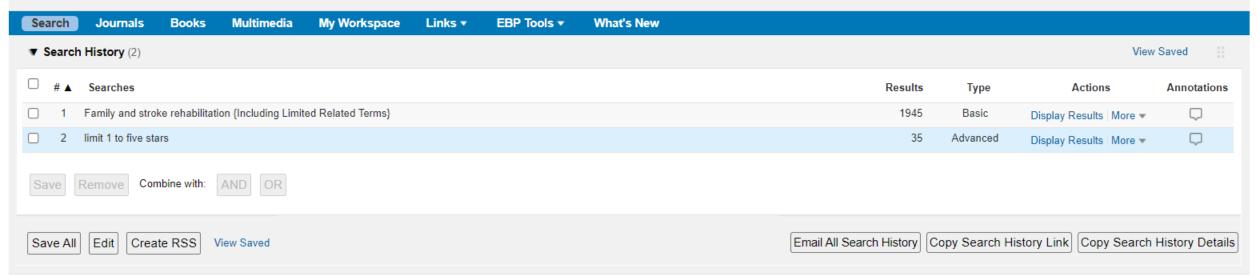
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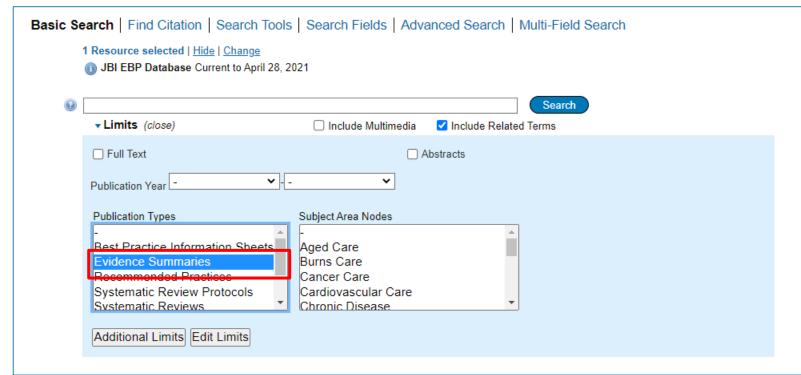


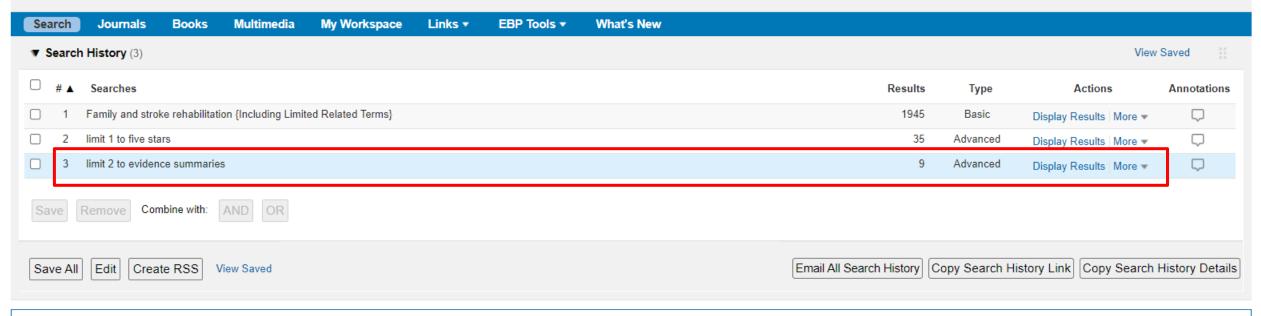


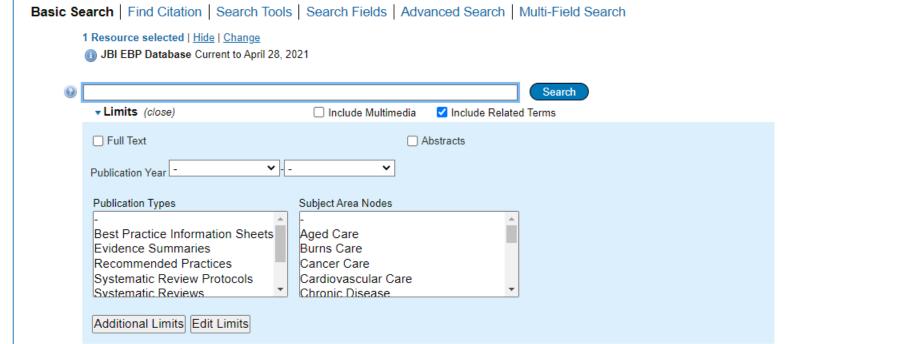
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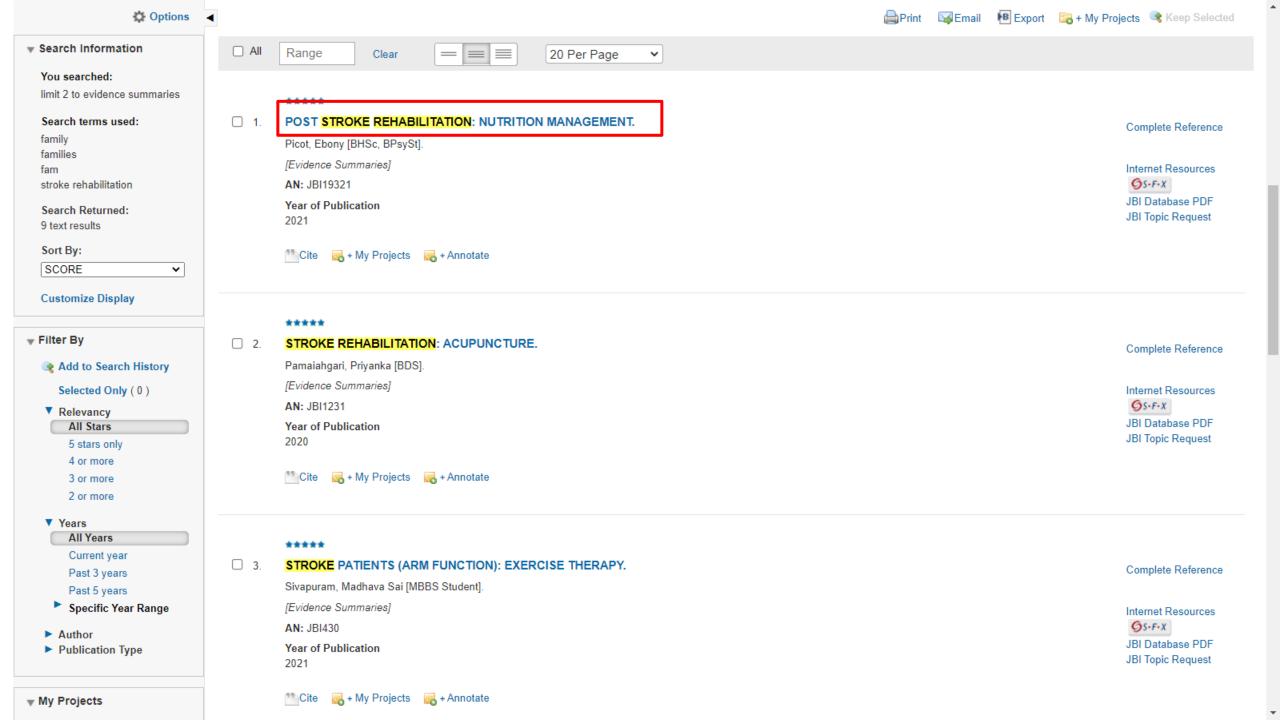












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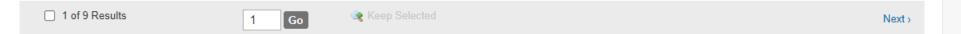
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Relevance: ****

Accession Number: JBI19321

> Author: Picot, Ebony [BHSc, BPsySt].

POST **STROKE REHABILITATION**: NUTRITION MANAGEMENT.

Publication Type: Evidence Summaries

> Keywords: CVA; Cerebrovascular accident; Inpatient; Nutrition management

Dietetics; Rehabilitation; Stroke MeSH Subject Headings:

Subject Area Node: Aged Care; Rehabilitation

References: 1. Burgos R, Breton I, Cereda E, Desport JC, Dziewas R, Genton L, et al. ESPEN guideline clinical nutrition in neurology. Clin Nutr. 2018; 37(1):354-

Stroke Foundation. Clinical Guidelines for Stroke Management 2017. Summary - dietetics [cited 2018 Mar 15]. Available from:

informme.org.au/en/Guidelines/Clinical-Guidelines-for-Stroke-Management-2017.

3. National Institute for Health and Care Excellence (NICE). Stroke and transient ischaemic attack in over 16s: diagnosis and initial management

(CG68) 2008 [cited 2018 Mar 15]. Available from: nice.org.uk/guidance/cg68.

4. Gomes F, Emery PW, Weekes CE. Risk of malnutrition is an independent predictor of mortality, length of hospital stay, and hospitalization costs in

stroke patients. J Stroke Cerebrovasc Dis. 2016; 25(4):799-806.

Rabadi MH, Coar PL, Lukin M, Lesser M, Blass JP. Intensive nutritional supplements can improve outcomes in stroke rehabilitation. Neurology.

2008: 71:1856-61.

6. Geeganage C, Beavan J, Ellender S, Bath PM. Interventions for dysphagia and nutritional support in acute and subacute stroke. Cochrane

Database Syst Rev. 2012; 10:CD000323.

7. Liu CH, Lin SC, Lin JR, Yang JT, Chang YJ, Chang CH, et al. Dehydration is an independent predictor of discharge outcome and admission cost

in acute ischaemic stroke. Eur J Neurol. 2014; 21(9):1184-91.

Year of Publication: 2021

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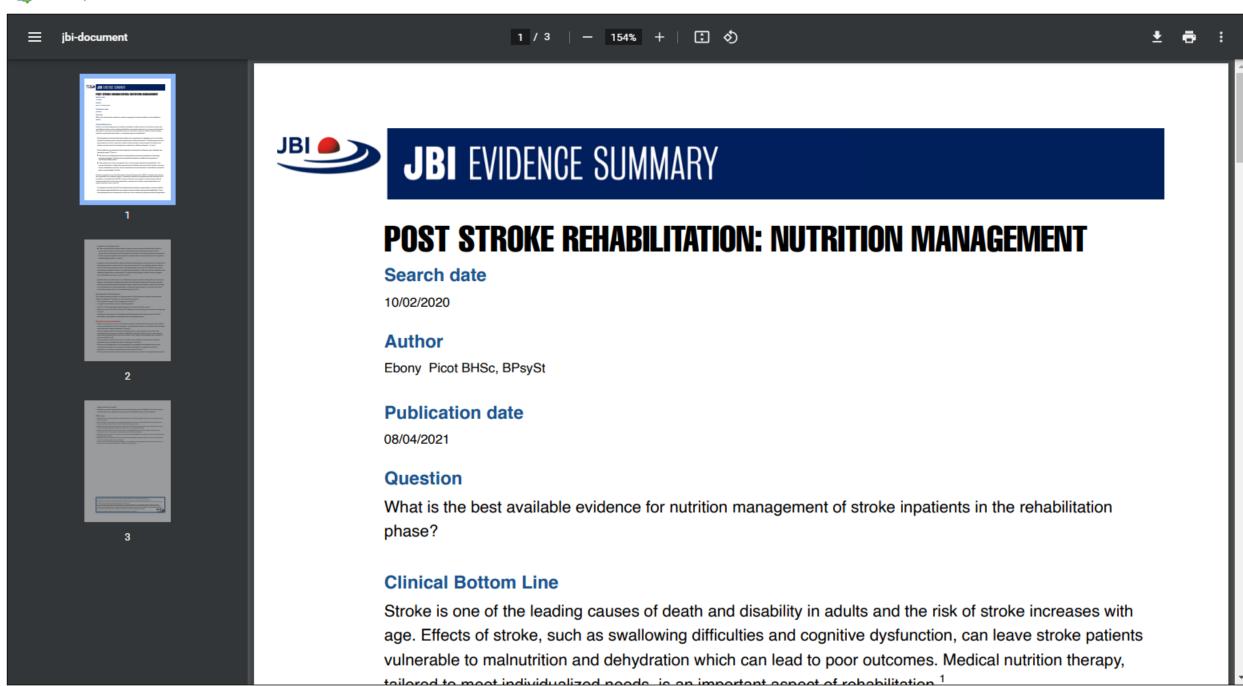
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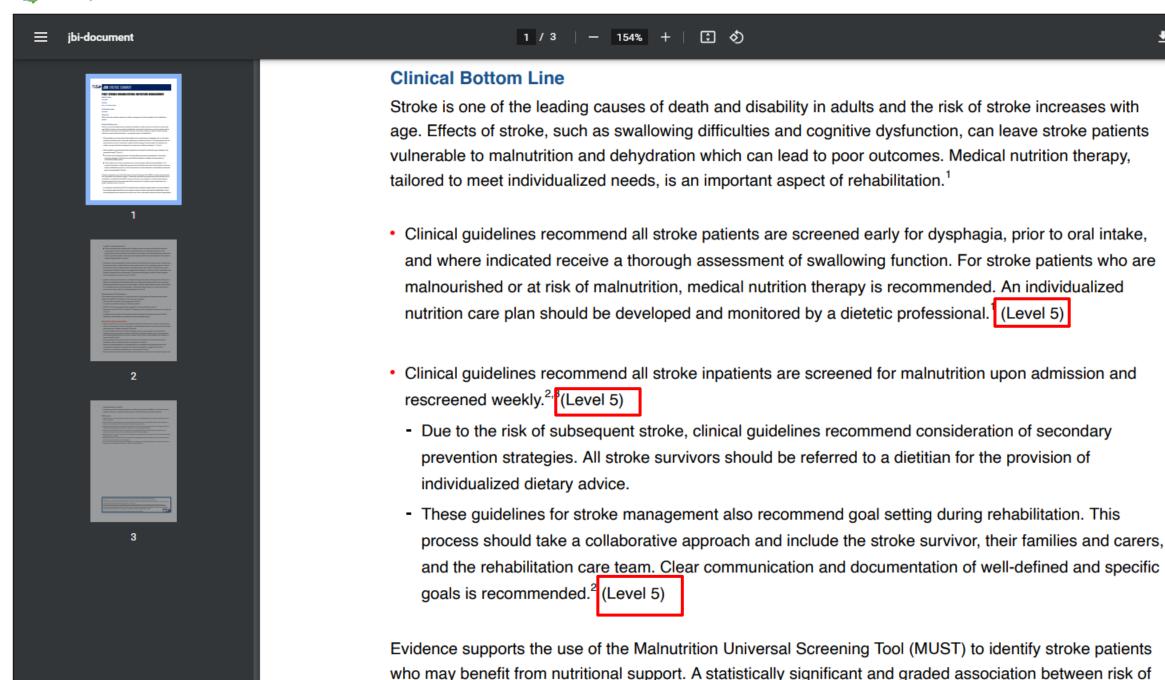
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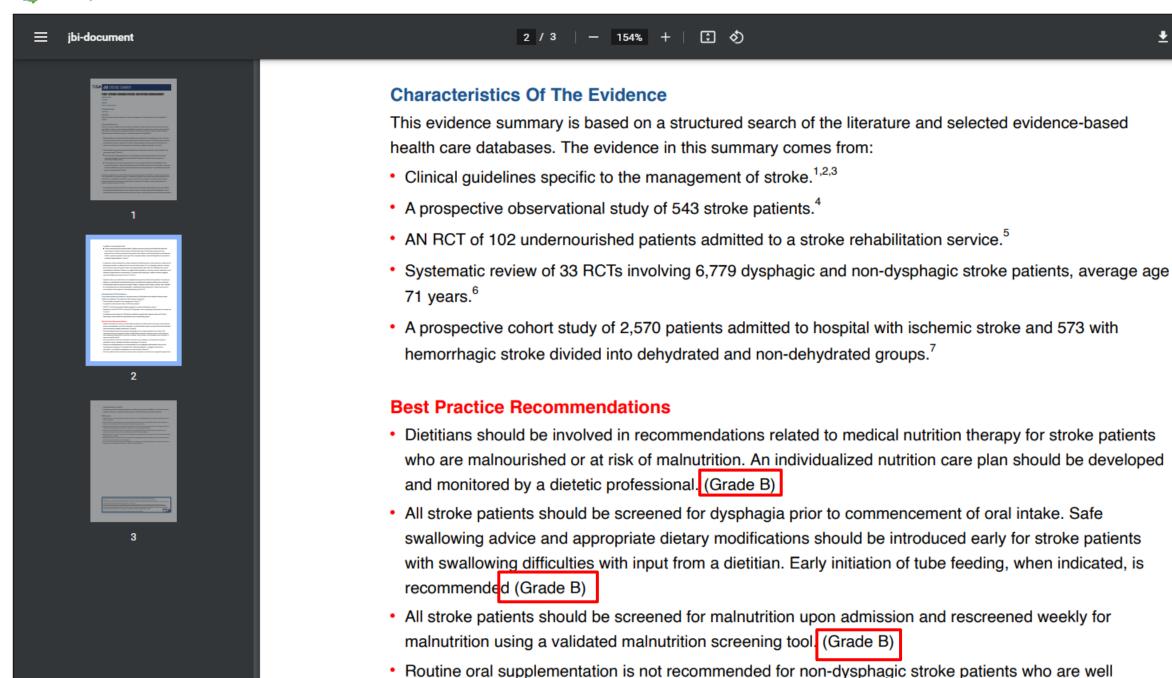
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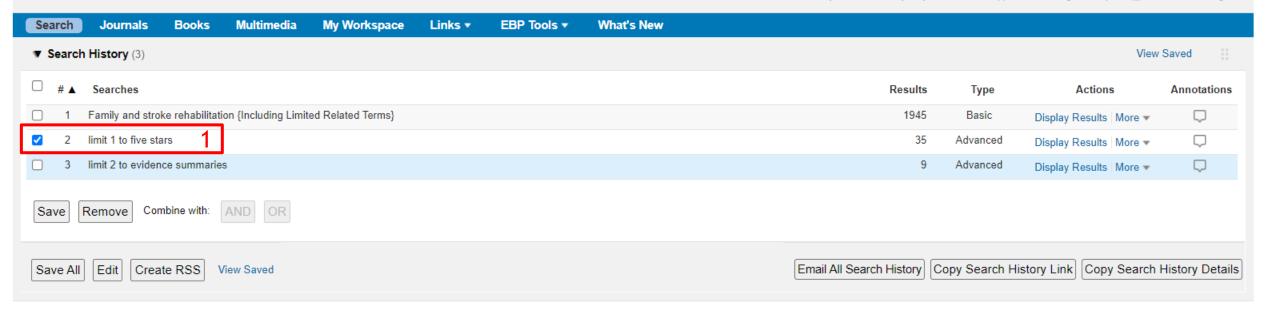


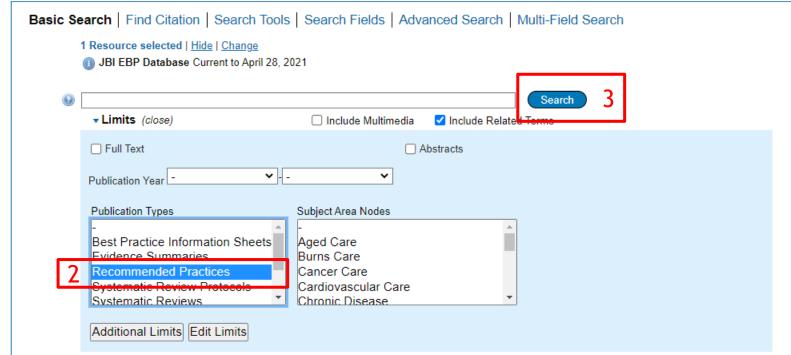






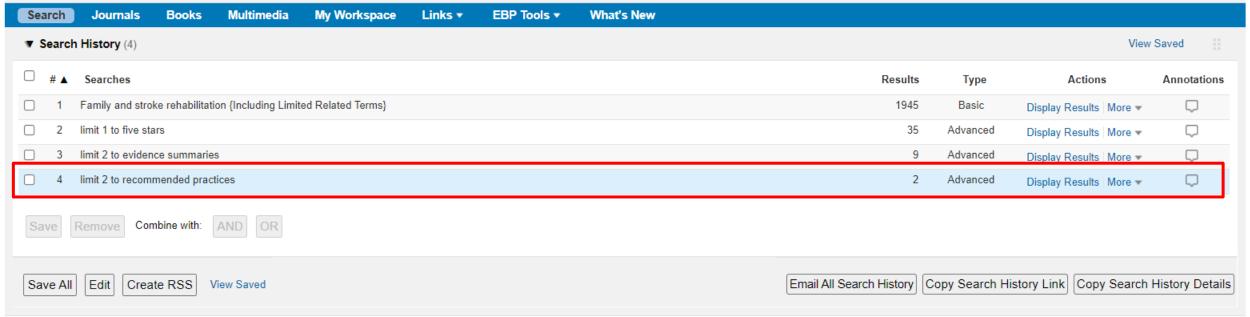
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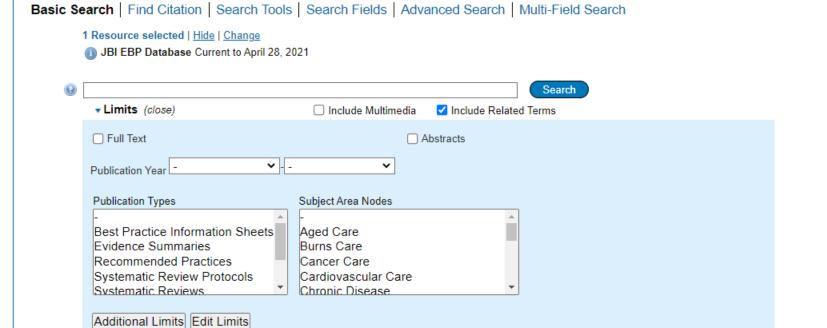


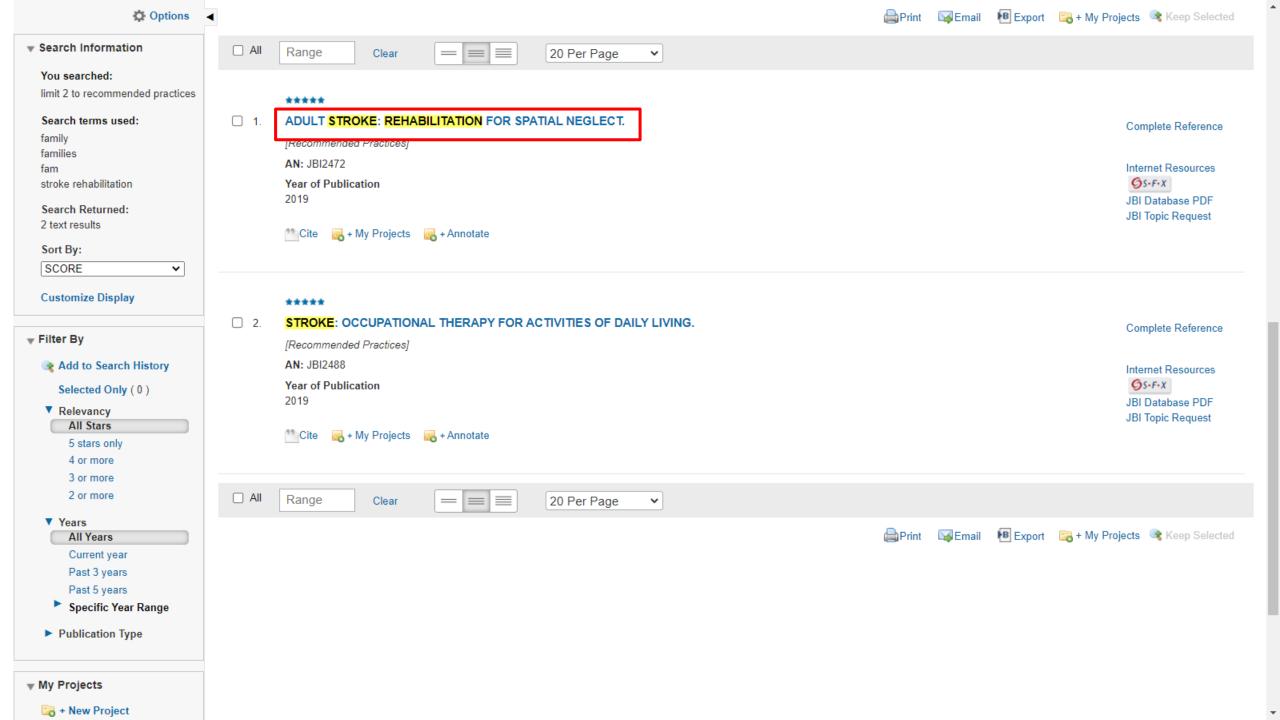












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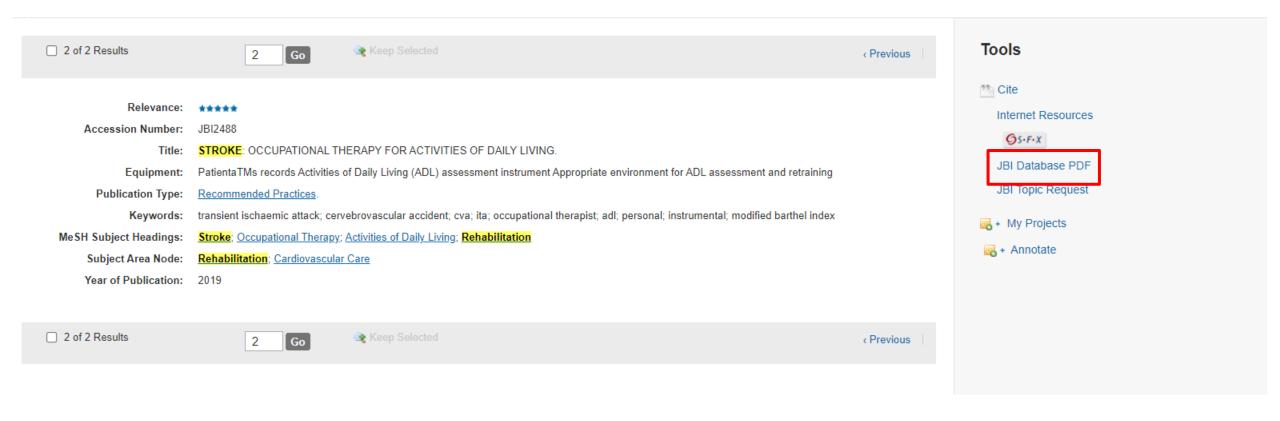


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JBI RECOMMENDED PRACTICE

STROKE: OCCUPATIONAL THERAPY FOR ACTIVITIES OF DAILY LIVING

Publication date

10/12/2019

Equipment

- Patient's records
- Activities of Daily Living (ADL) assessment instrument
- Appropriate environment for ADL assessment and retraining

Recommended Practice

Stroke can have a profound impact on a person's way of life, especially on their capacity to perform many of the activities that are necessary and relevant in daily living. Occupational therapy interventions are an integral part of stroke rehabilitation and aim to improve a person's daily living skills and optimize their independence and safety in performing personal and instrumental ADL as well as leisure and vocational activities. Personal ADL include those activities that enable us to maintain personal level of care such as feeding, bathing, dressing and grooming. Instrumental activities are those that are necessary to enable us



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Recommended Practice

Stroke can have a profound impact on a person's way of life, especially on their capacity to perform many of the activities that are necessary and relevant in daily living. Occupational therapy interventions are an integral part of stroke rehabilitation and aim to improve a person's daily living skills and optimize their independence and safety in performing personal and instrumental ADL as well as leisure and vocational activities. Personal ADL include those activities that enable us to maintain personal level of care such as feeding, bathing, dressing and grooming. Instrumental activities are those that are necessary to enable us to stay productive both at home and in the community including tasks of meal preparation, housework, shopping and finance management.

When working with persons who had stroke occupational therapy assessments and interventions should be based around the person's goals for occupational performance. Goal setting is a collaborative process between the occupational therapist, the person and significant others (e.g. family/carers) where goals are negotiated and agreed on and help establish an intervention plan. The goals should be specific, measurable, attainable, realistic and timely (SMART).

ASSESSMENT:

- Occupational therapists should gain a thorough understanding of the person's previous level of occupational performance, roles, home environment and desired goals through the completion of an initial interview.
- Occupational therapists should gain an understanding of the person's current level of occupational
 performance and occupational performance components (e.g. upper limb strength and coordination,
 vision, cognition, perception, mobility and transfer) through direct observation in relevant occupations
 including personal care, instrumental activities of daily living, vocation and leisure as appropriate for



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Occupational Health and Safety Considerations







The author declares no conflicts of interest in accordance with International Committee of Medical Journal Editors (ICMJE)standards.

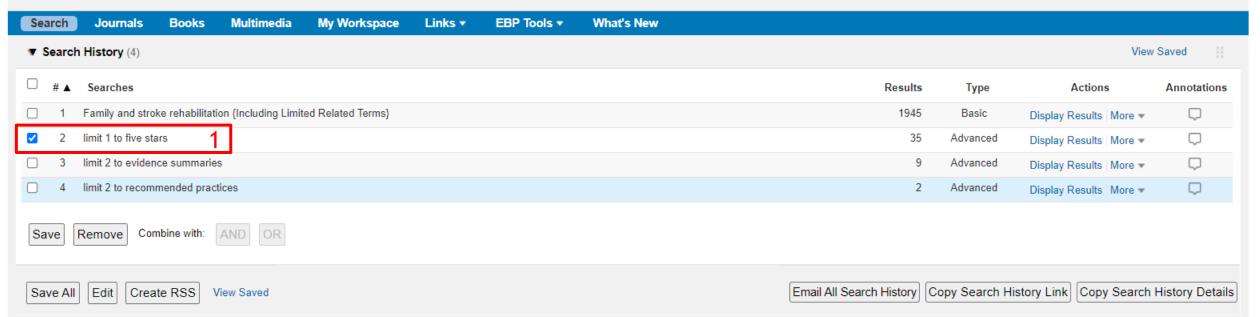
How to cite: JBI. Recommended Practice. Stroke: Occupational Therapy for Activities of Daily Living. The JBI EBP Database. 2019; JBI23755.

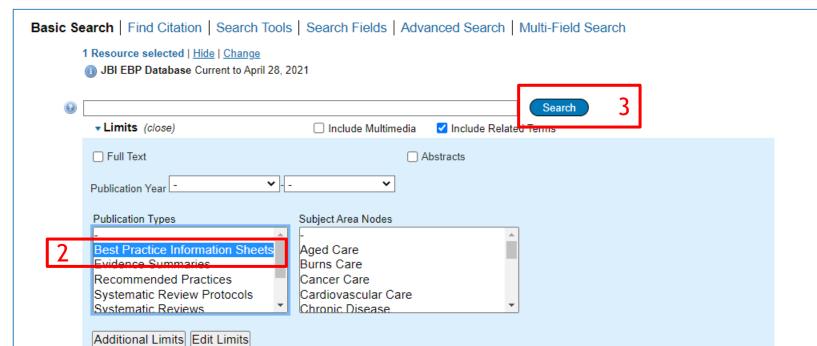
For details on the method for development see Munn Z, Lockwood C, Moola S. The development and use of evidence summaries for point of care information systems: A streamlined rapid review approach. Worldviews Evid Based Nurs. 2015;12(3):131-8.

Note: The information contained in this Recommended Practice must only be used by people who have the appropriate expertise in the field to which the information relates. The applicability of any information must be established before relying on it. While care has been taken to ensure that this Recommended Practice summarizes available research and expert consensus, any loss, damage, cost or expense or liability suffered or incurred as a result of reliance on this information (whether arising in contract, negligence, or otherwise) is, to the extent permitted by law, excluded.

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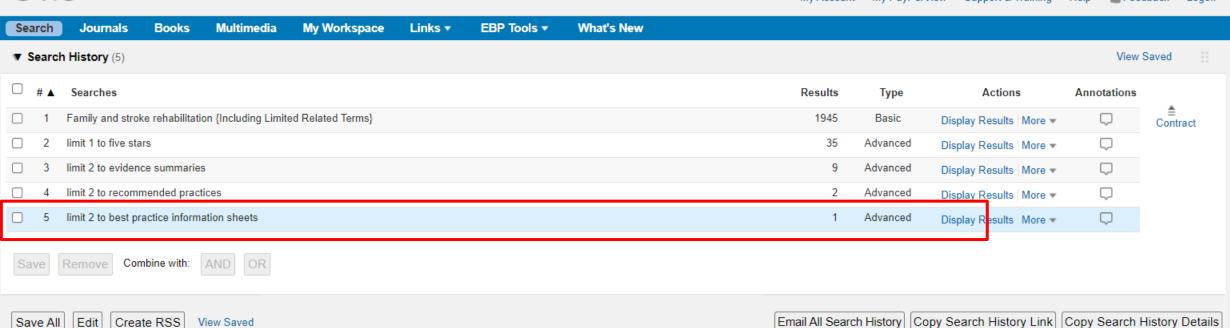


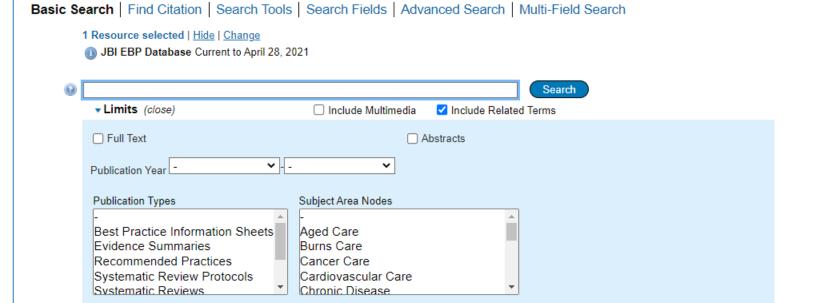


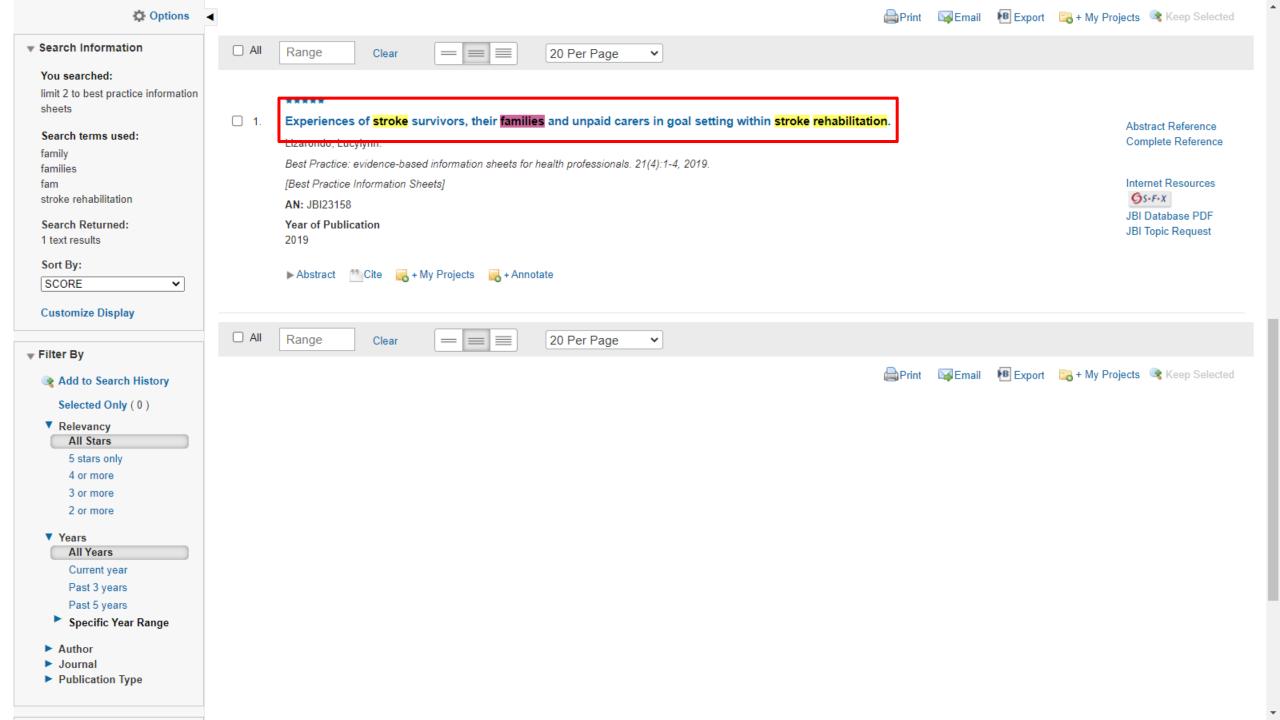


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Relevance: ****

Accession Number: JBI23158

> Author: <u>Lizarondo, Lucylynn</u>.

1. Joanna Briggs Institute, The University of Adelaide, South Australia, Australia Institution:

Title: Experiences of stroke survivors, their families and unpaid carers in goal setting within stroke rehabilitation.

Source: Best Practice: evidence-based information sheets for health professionals. 21(4):1-4, 2019.

Abstract: Recommendations*

> * Individual practitioners and providers of inpatient stroke rehabilitation services should reflect upon and evaluate the impact they have on goal setting interactions. They should endeavor to positively encourage and empower the stroke survivor. They should get to know the person, listening to them and finding out "who they are", in order to develop meaningful goals (together) that are individualized to the stroke survivor. (Grade B)

> * Practitioners should recognize that recovery after stroke is ongoing and unpredictable and be aware of the potential importance to stroke survivors of maintaining hope and a sense of forward momentum through the use of person-centered goal setting in stroke rehabilitation. (Grade B)

* Practitioners should use person-centered goal setting processes in stroke rehabilitation that acknowledge and adapt to a stroke survivor's ability and desire to be involved in goal setting. (Grade B)

*For a definition of JBI's 'Grades of Recommendation' please see the last page of this sheet

Best Practice Information Sheets. Publication Type:

> Goal setting; qualitative; experiences; stroke survivors Keywords:

MeSH Subject Headings: Stroke Rehabilitation

> Subject Area Node: Rehabilitation

Year of Publication: 2019

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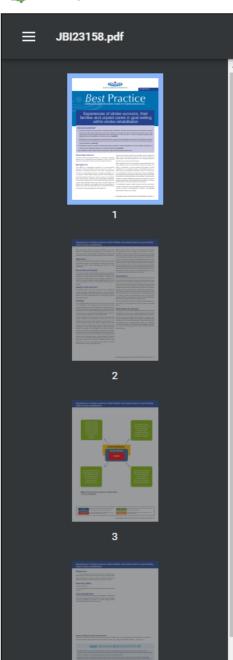


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Rehabilitation

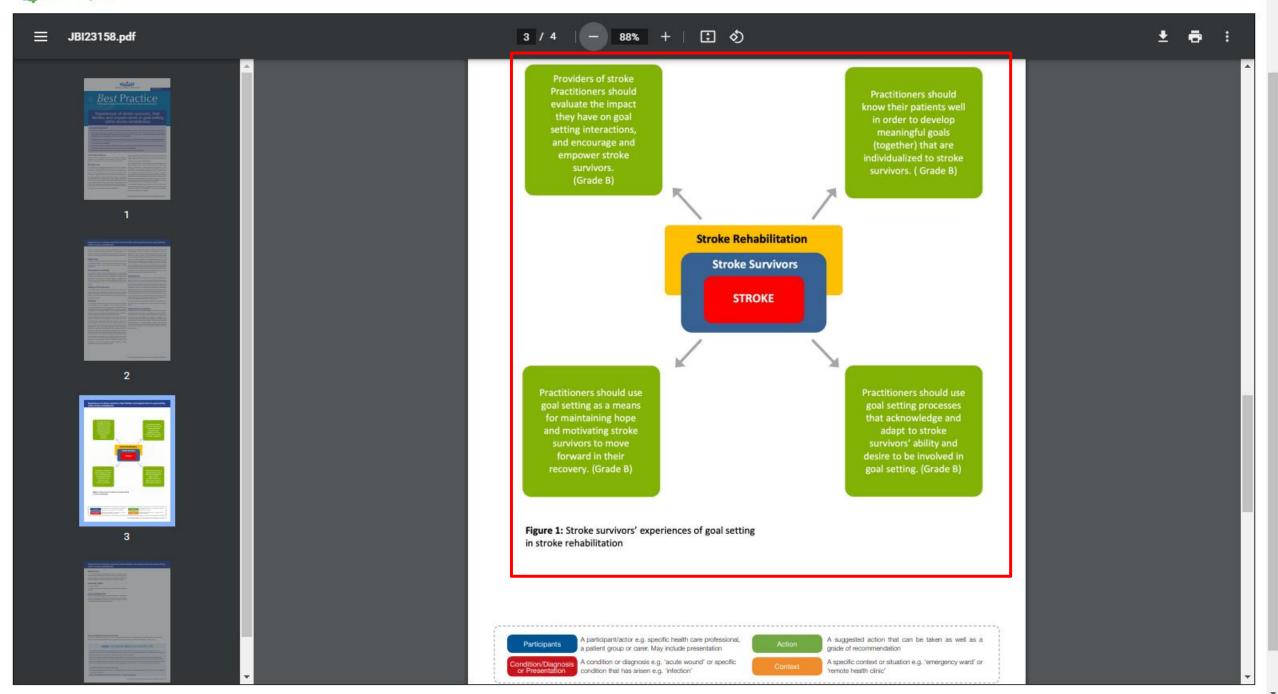
Best Practice

Evidence-based information sheets for health professionals

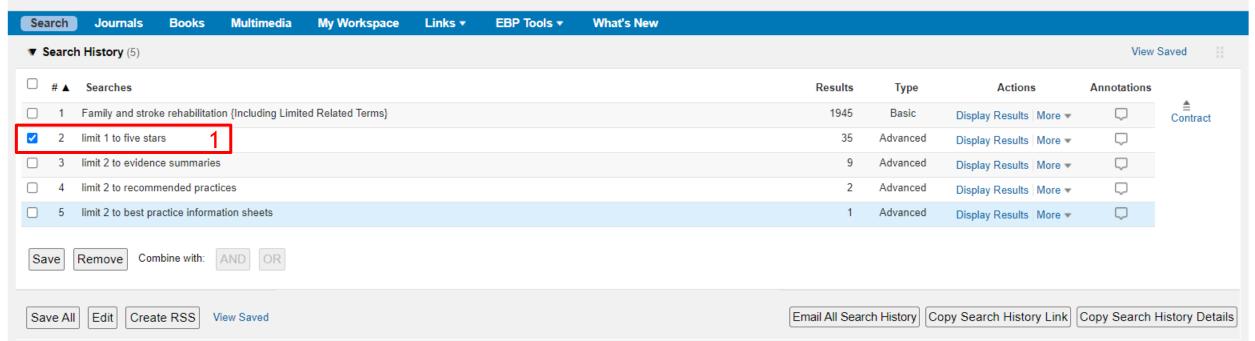
Experiences of stroke survivors, their families and unpaid carers in goal setting within stroke rehabilitation

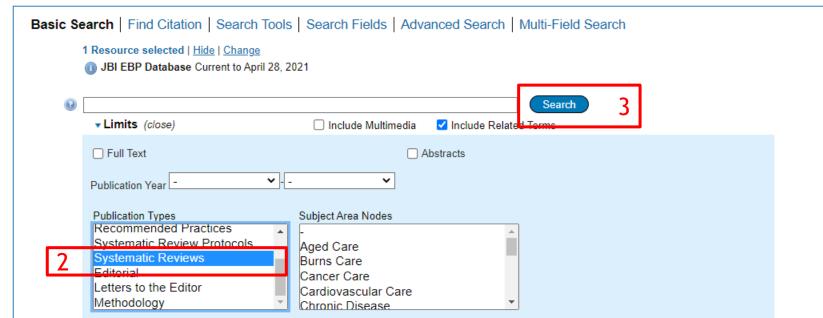
Recommendations*

- Individual practitioners and providers of inpatient stroke rehabilitation services should reflect upon and evaluate the impact they have on goal setting interactions. They should endeavor to positively encourage and empower the stroke survivor. They should get to know the person, listening to them and finding out "who they are", in order to develop meaningful goals (together) that are individualized to the stroke survivor. (Grade B)
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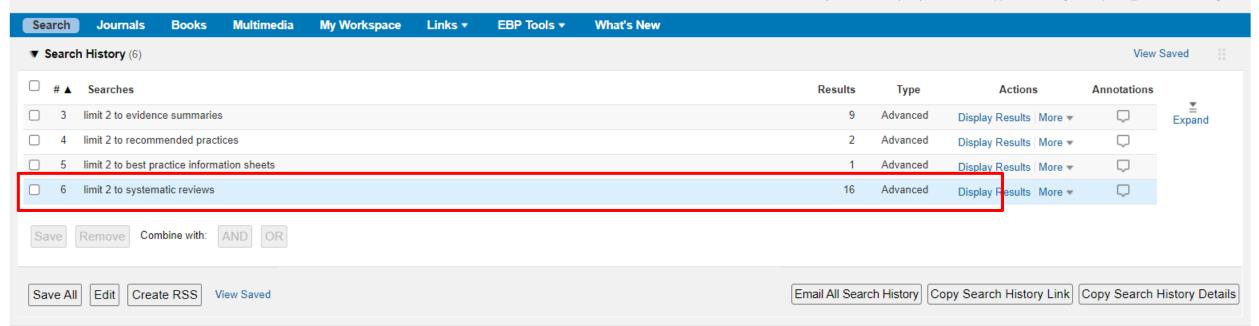


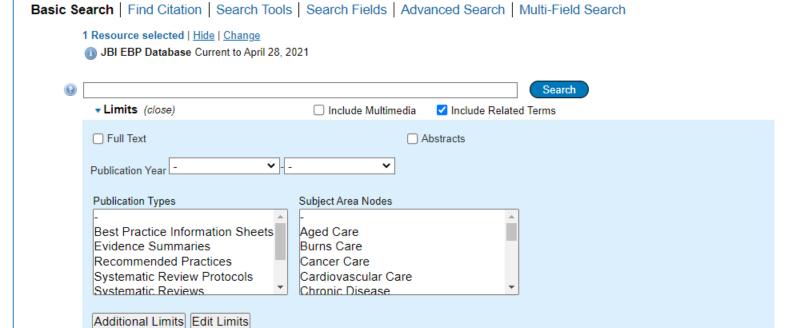


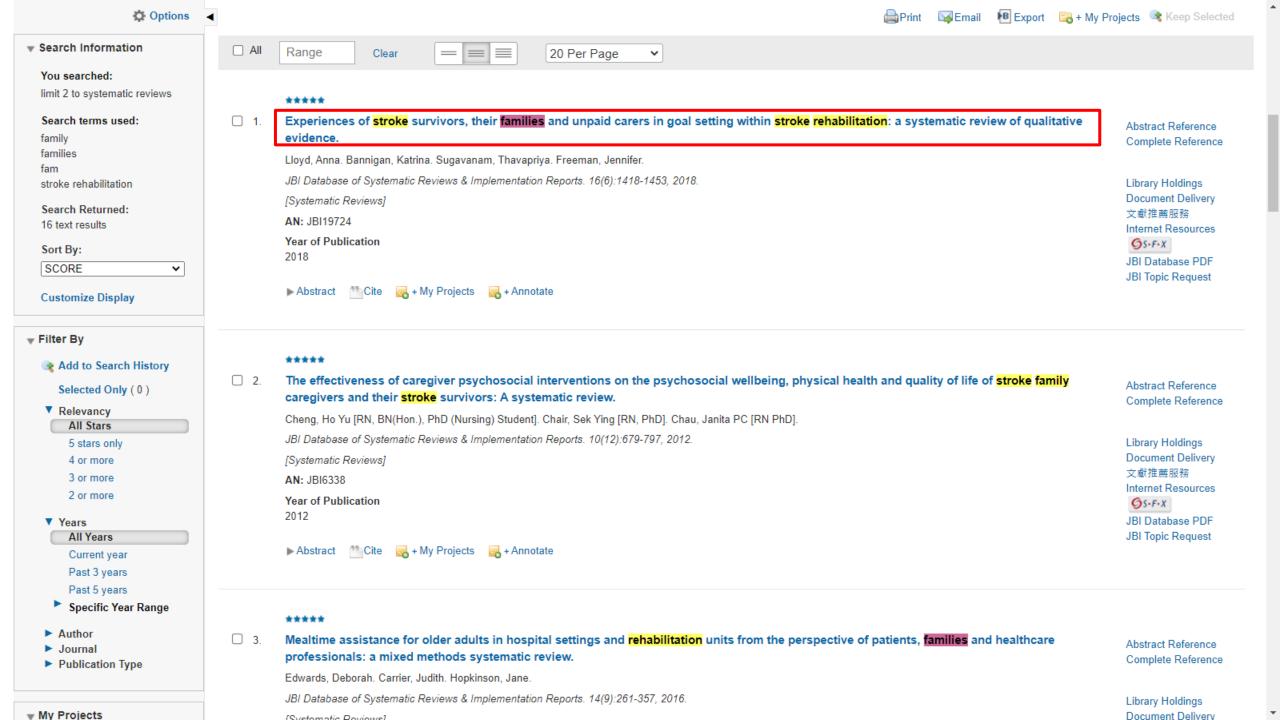












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> Relevance: ****

Accession Number: JBI19724

> Lloyd, Anna. Bannigan, Katrina. Sugavanam, Thavapriya. Freeman, Jennifer. Author:

Institution: 1. Mardon Neurological Rehabilitation Centre, Royal Devon and Exeter NHS Foundation Trust, Exeter, United Kingdom.,

- School of Health Professions, University of Plymouth, Devon, United Kingdom.
- Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, University of Oxford, Oxford, United Kingdom,
- National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care South West Peninsula (PenCLAHRC), Centre for Clinical Trials and Population Studies, Plymouth University, Plymouth, United Kingdom, and
- 5. The University of Plymouth Centre for Innovations in Health and Social Care: a Joanna Briggs Institute Centre of Excellence

Experiences of stroke survivors, their families and unpaid carers in goal setting within stroke rehabilitation: a systematic review of qualitative

evidence.

JBI Database of Systematic Reviews & Implementation Reports. 16(6):1418-1453, 2018. Source:

ABSTRACT Abstract:

> Objective: The objective of the review was to synthesize the best available qualitative evidence regarding the experiences of stroke survivors, their families and unpaid carers, about goal setting within stroke rehabilitation.

Introduction: Clinical guidelines recommend person-centered goal setting in stroke rehabilitation but many barriers exist to its implementation. Individual differences and preferences, of both the stroke survivor and practitioner, may influence involvement in goal setting. A stroke survivor's relationship with close family members and unpaid carers can be powerful and could influence rehabilitation, recovery and goal setting.

Inclusion criteria: The participants of interest were adults (over 18 years) who had experienced a stroke and undergone rehabilitation, and their families and unpaid carers. The phenomena of interest were the experiences of goal setting within stroke rehabilitation for stroke survivors, their families and unpaid carers. The context was stroke rehabilitation in acute and community hospitals, inpatient rehabilitation units and the community. Studies considered for this review were qualitative primary research studies and the qualitative portion of mixed methods research.

Methods: A three-step search strategy was used to identify English language qualitative primary research studies (both published and unpublished) through November 2017. Two reviewers independently appraised the included studies using the Joanna Briggs Institute (JBI) Critical Appraisal Checklist for Qualitative Research. Studies were included if they achieved 50% "yes" results for the methodological assessment. Data were extracted from the included papers using the standardized JBI qualitative data extraction tool. Data were synthesized using meta-aggregation.

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SYSTEMATIC REVIEW

Experiences of stroke survivors, their families and unpaid carers in goal setting within stroke rehabilitation: a systematic review of qualitative evidence

Anna Lloyd^{1,2}• Katrina Bannigan^{2,5}• Thavapriya Sugavanam^{3,4}• Jennifer Freeman^{2,5}

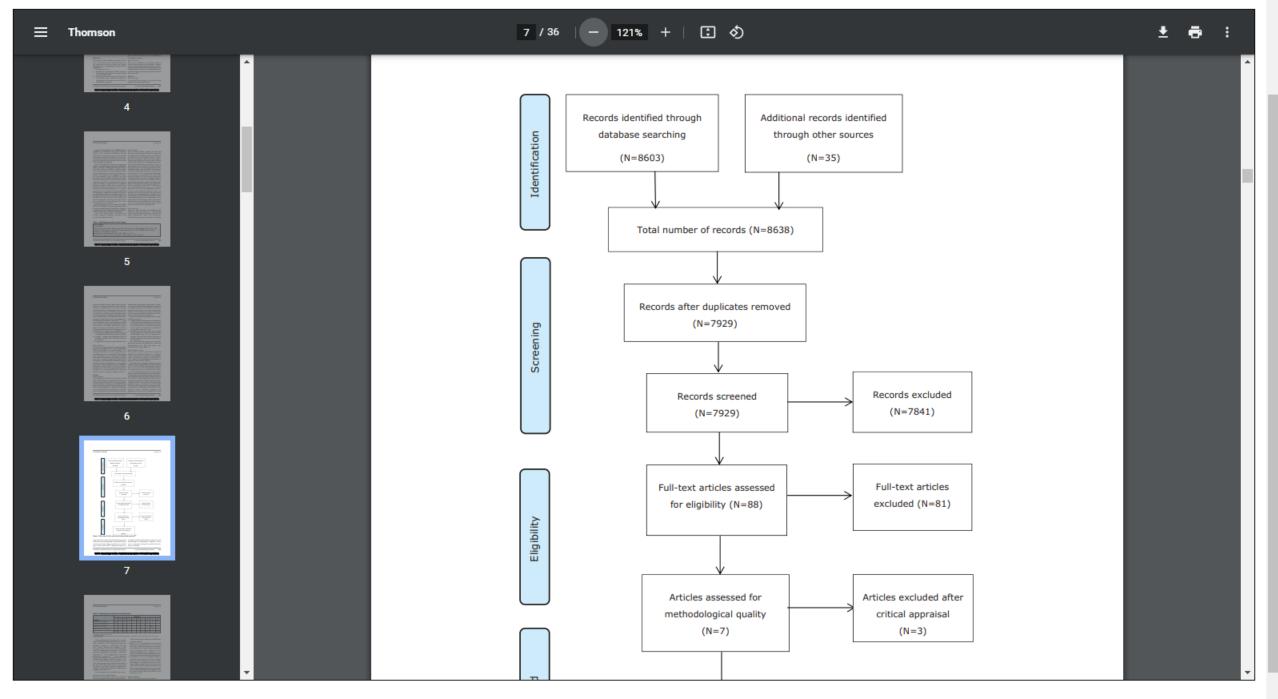
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¹Mardon Neurological Rehabilitation Centre, Royal Devon and Exeter NHS Foundation Trust, Exeter, United Kingdom., ²School of Health Professions, University of Plymouth, Devon, United Kingdom, ³Nuffield Department of Orthopaedics, Rheumatology and Musculoskeletal Sciences, University of Oxford, Oxford, United Kingdom, ⁴National Institute for Health Research Collaboration for Leadership in Applied Health Research and Care South West Peninsula (PenCLAHRC), Centre for Clinical Trials and Population Studies, Plymouth University, Plymouth, United Kingdom, and ⁵The University of Plymouth Centre for Innovations in Health and Social Care: a Joanna Briggs Institute Centre of Excellence

ABSTRACT

Objective: The objective of the review was to synthesize the best available qualitative evidence regarding the experiences of stroke survivors, their families and unpaid carers, about goal setting within stroke rehabilitation.

Introduction: Clinical guidelines recommend person-centered goal setting in stroke rehabilitation but many barriers exist to its implementation. Individual differences and preferences, of both the stroke survivor and practitioner, may influence involvement in goal setting. A stroke survivor's relationship with close family members and uppaid carers can be powerful and could influence rehabilitation, recovery and goal setting.



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Table 2: Methodological assessment of included articles

	Question									
Citation	1	2*	3*	4*	5	6*	7 *	8	9	10
Brown et al. (2014) ²²	N	U	Y	Y	Y	N	U	Y	U	Y
Levack et al. (2011) ¹⁷	Y	Y	Y	Y	Y	N	U	Y	U	Y
Martin et al. (2015) ²⁵	Y	Y	Y	Y	Y	N	U	Y	N/A**	Y
Rosewilliam et al. (2016) ⁴²	U	Y	U	U	U	U	Y	Y	Y	Y
%	50%	75%	75%	75%	75%	0%	25%	100%	25%	100%

Y, Yes; N, No; U, Unclear; N/A, Not Applicable.

Of the included studies, all achieved 2 or 3 marks out of 5 for dependability questions (Q2–4, 5, 6); no study included a clear statement locating the researcher culturally or theoretically and only one⁴² clearly addressed the influence of the researcher on the research. Two studies had clearly stated the philosophical perspective and specific qualitative methodology from which to determine congruence.^{17,25} Two studies did not state their philosophical perspective^{22,42} and congruence between methodology and research aim,²² or the methodology, methods and data analysis⁴² were not clear. In all included studies, participants' voices were well represented and conclusions grounded in

- (only the stroke survivor data was included in this systematic review).
- Martin et al.²⁵ used qualitative semi-structured interviews with people with severe Acquired Brain Injury (ABI), including three stroke survivors (only the stroke survivor data was included in this systematic review), residing in a New Zealand residential care setting (n = 5), to explore life goal planning in rehabilitation from an interpretative phenomenological perspective.
- Rosewilliam et al.⁴² used multiple qualitative methods of data collection to explore whether the current goal setting practice in acute stroke rehabilitation was patient-centered, and what

^{*}Dependability questions.

^{**}N/A rating given as the authors stated in the paper that the study had been deemed by a Regional Ethics Committee as sufficiently low risk as to not require ethics committee review.

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Appendix I: Search strategy

Database searches

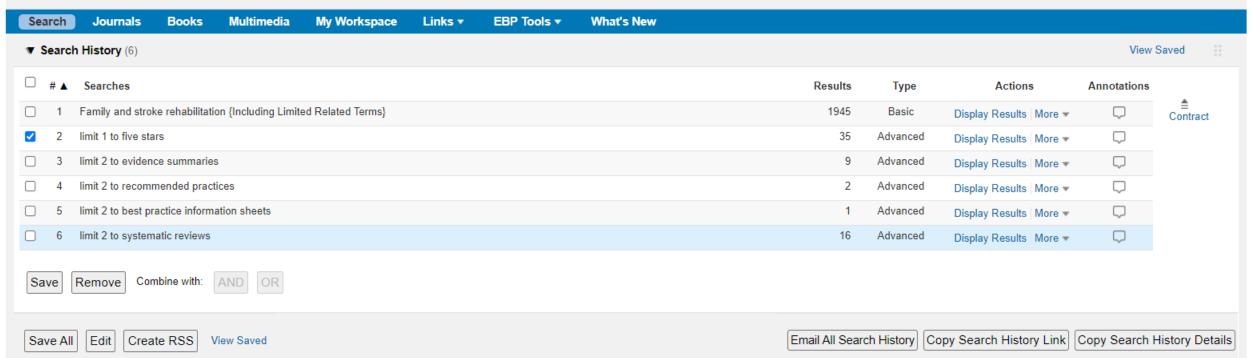
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Name	Hits	Name	Hits			
MEDLINE	1408	Open Grey	513			
Embase	8063	ProQuest Conference Papers and Proceedings	1*			
CINAHL	362	Google Scholar	1410**			
AMED	164	Social Care Online (published & unpublished studies)	See earlier			
BNI	65	HMIC (published and unpublished studies)	See earlier			
Social Care Online (published and unpublished studies)	32	Author search: Databases MEDLINE, CINAHL (Start of database until 16 th November 2017)				
HMIC (published and	11	Jones, Fiona	113			
unpublished studies)		Levack, William	58			
OT seeker	13	Rosewilliam, Sheeba	9			
PEDRO	69	Scobbie, Leslie	19			

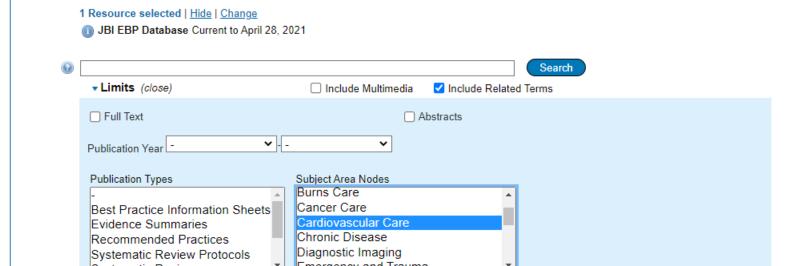
⁽Updated searches conducted in November and December 2017).

*The initial search of ProQuest Conference Papers and Proceedings only produced one paper, which was not relevant to this review, and the database was not readily available, so was excluded from the updated search.

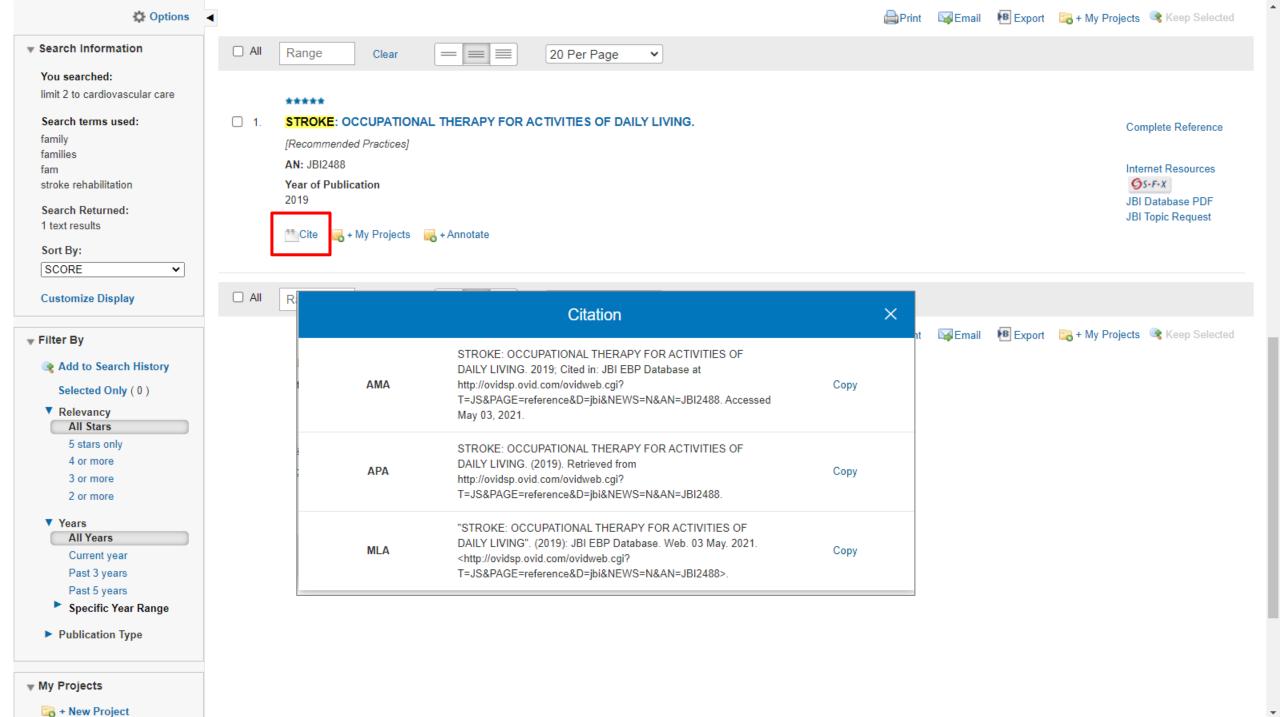
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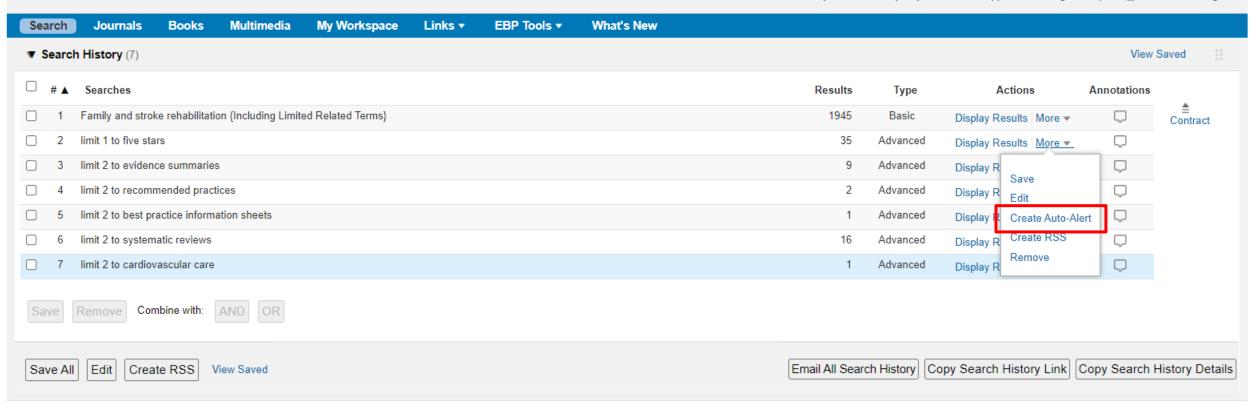


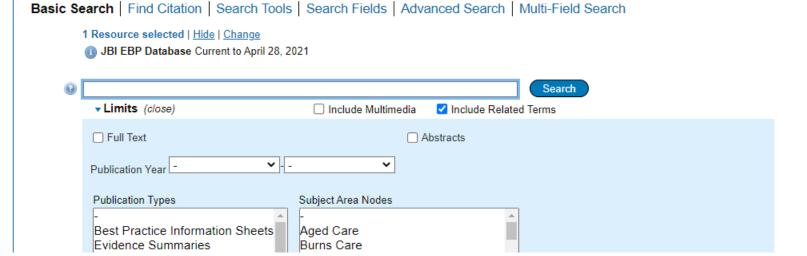


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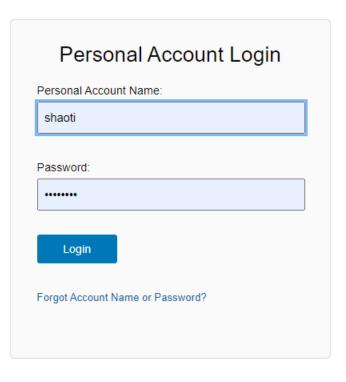
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- ●最嚴謹的搜尋方式
- ●詳細比對醫學標題詞
- ●取得最完整的文獻資料

特定欄位搜尋

- Find Citation
- Search Fields
- Multi-Field Search

Search Tools

- ●標題詞的延伸應用
- ●尋找標題詞的定義
- ●比對標題詞



關鍵字查詢技巧: 切截與萬用字元

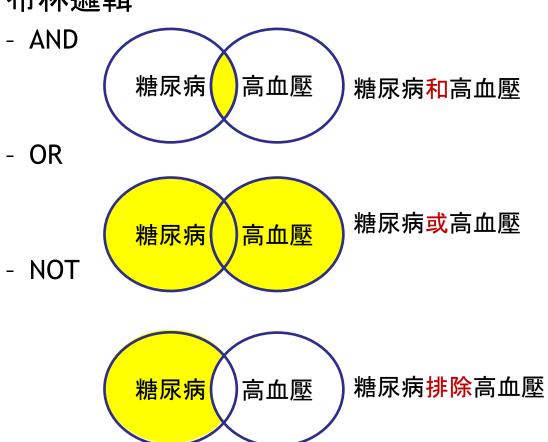
- 切截字:\$或*
 - 無限制切截查詢:
 - depress*: depress, depressive, depression, depressed, ...
 - 有限制切截查詢:
 - gene*2:gene, genes, genera,...(不會有 generation)

- 萬用字元:#和?
 - #:表示一個字母
 - organi#ation:organization, organisation
 - dog#:dogs (不會有dog)
 - wom#n:woman, women
 - ?:表示0或1個字母
 - colo?r:color, colour
 - dog?:dog和dogs



關鍵字合併技巧: 布林邏輯與鄰近檢索

布林邏輯



鄰近檢索

- ADJ# pain management → pain* adj3 manag*
 - Pain management
 - management of bladder pain
 - manage cancer pain.....
 - management of painful
 - Early Gains Versus Late Pains:
 Management Options



Ovid Medline檢索功能

Basic Search

- ●最直覺的搜尋方式
- ●快速取得關聯度最高文獻
- ●輕鬆篩選年代及全文

Advanced Search

- ●最嚴謹的搜尋方式
- ●詳細比對醫學標題詞
- ●取得最完整的文獻資料

特定欄位搜尋

- Find Citation
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- Multi-Field Search

Search Tools

- ●標題詞的延伸應用
- ●尋找標題詞的定義
- ●比對標題詞



Basic Search | Find Citation | Search Tools | Search Fields | Advanced Search | Multi-Field Search 1 Resource selected | Hide | Change JBI EBP Database Current to April 28, 2021 taiwan Search Display Indexes > My Fields All Fields Clear Selected af All Fields an: Accession Number ☐ ab: Abstract Help Text Click the plus/ □ au: Author ☐ do: DOI Number ☐ dp: Date of Publication minus (+/-) button to add/ remove the field to the "My hw: Heading Word is: ISSN ☐ eq: Equipment Fields" Area. ✓ or: Institution □ ip: Issue/Part ☐ *jn:* Journal Name Click the "i" button next to the field to sh: MeSH Subject Headings ☐ jx: Journal Word □ kw: Keywords browse the index for the selected ov: Overview pg: Pagination pr: Produced By item pt: Publication Type □ pb: Publisher □ rp: Recommended Practice Items marked with can only be searched. No index ☐ rf: References □ ry: Review Text ☐ sa: Subject Area Node is available. ☐ tx: Text ☐ ti: Title □ vo: Volume ☐ yr: Year of Publication

