Today’s Topics: Effective Research

- Using the Lister Hill Library website
- Obtaining full text articles
- Building an effective search in PubMed, Scopus, & Business Source Premier
- Finding targeted search tips and research resources on the HSA LHL guide

- Getting Help
HSA Guide [http://libguides.lhl.uab.edu/HSA](http://libguides.lhl.uab.edu/HSA)

Research resources and search tips for UAB Department of Health Services Administration

**Working Off Campus**

You can use almost every online resource off campus. Access them through the library website.

Use your Blazer ID and password to log in if off campus and use UAB article linker to find full text.

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- **Regular hours**
- 24/7 online with BlazerID at [www.uab.edu/lister](http://www.uab.edu/lister)

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**Exploring the LHL Homepage**

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**Using the Search Boxes on the LHL Homepage**

This 6-minute video demonstrates how to use the searches boxes provided in the middle of the LHL homepage. If you cannot view the video, click here.

**About this Guide**

This guide for the Department of Health Services Administration links to research resources and strategies to use them well.

Click on the tabs above to move through the guide. From this guide, you can link to and search directly the key resources in your field. Consider putting it on your desktop or in your bookmarks. Please send suggestions and comments to Susan Smith or Lee Vucovich
A word about Googling...

Start on the open web for:

- Government information
  - CDC
  - AHRQ

- Facts compiled by reputable groups
  - Kaiser Family Foundation
  - Robert Wood Johnson Foundation

- Statistics

See the HSA Guide for faculty [recommended websites](#) and a short video on evaluating websites
Find full text articles ANYWHERE

Video demonstration: http://youtu.be/KMkLGiJhwnQ
Get Full Text: Use


Day NL¹, Floyd CL, D'Alessandro TL, Hubbard WJ, Chaudry IH.

You searched for:
PMID: 23659385 DOI: 10.1089/neu.2013.2854

Good news! We have the article! Click any link to get full text. If links don't work see options below.

<table>
<thead>
<tr>
<th>Dates Available</th>
<th>Links to content</th>
<th>Resource</th>
</tr>
</thead>
<tbody>
<tr>
<td>1988 - present</td>
<td>Article</td>
<td>Mary Ann Liebert Online</td>
</tr>
</tbody>
</table>

Try doi.org for full-text
17β-Estradiol Confers Protection after Traumatic Brain Injury in the Rat and Involves Activation of G Protein-Coupled Estrogen Receptor 1

Nicole L. Day, Candace L. Floyd, Tracy L. D’Alessandro, William J. Hubbard, and Inshad H. Chaudry

Abstract
Traumatic brain injury (TBI) is a significant public health problem in the United States. Despite preclinical success of various drugs, to date all clinical trials investigating potential therapeutics have failed. Recently, sex steroid hormones have sparked interest as possible neuroprotective agents after traumatic injury. One of these is 17β-estradiol (E2), the most abundant and potent endogenous vertebrate estrogen. The goal of our study was to investigate the acute potential protective effects of E2 or the specific G protein-coupled estrogen receptor 1 (GPER) agonist G-1 when administered in an intravenous bolus dose 1 hour post-injury in the lateral fluid percussion (LFP) rodent model of TBI. The results of this study show that, when assessed at 24 hours post-injury, E2 or G-1 confers protection in adult male rats subjected to LFP brain injury. Specifically, we found that an acute bolus dose of E2 or G-1 administered intravenously 1 hour post-TBI significantly increased neuronal survival in the ipsilateral CA 2/3 region of the hippocampus and decreased neuronal degeneration and apoptotic cell death in both the ipsilateral cortex and CA 2/3 region of the hippocampus. We also report a significant reduction in astrocytes in the ipsilateral cortex, hilus, and CA 2/3 region of the hippocampus. Finally, these effects were observed to be dose-dependent for E2, with the 5 mg/kg dose generating a more robust level of protection. Our findings further elucidate estrogenic compounds as a clinically relevant pharmacotherapeutic strategy for treatment of secondary injury following TBI, and intriguingly, reveal a novel potential therapeutic target in GPER.

Keywords: apoptosis; estrogen; lateral fluid percussion; neuronal degeneration; neuroprotection

Introduction
Traumatic brain injury (TBI) is a significant public health problem in the United States. Annually, approximately 1.7 million TBIs are incurred, 53,000 people die, and 32–33 million others are living with long-term disabilities as a result. Despite preclinical success, to date all clinical trials investigating potential therapeutics have failed. In addition, the financial burden associated with TBI is estimated at roughly $50 billion annually.1,5 Despite these financial and economic burdens, there is a lack of effective therapeutic interventions for secondary injury. Thus, there is a significant unmet need for novel drug therapies that effectively target aspects of secondary injury.

Recently, sex steroid hormones have sparked interest as possible therapeutic agents following traumatic injury. One of these is 17β-estradiol (E2), the most abundant and potent endogenous vertebrate estrogen. Our research group has previously reported that E2 administration confers protection in models of spinal cord injury (SCI) and severe blood loss.6 In prior TBI research, E2 has been shown to reduce cortical contusion volumes, apoptosis, blood-brain barrier permeability, edema, levels of pro-inflammatory cytokines, and intracranial pressure, as well as up-regulate expression of anti-apoptotic genes Bcl-2, increase cerebral perfusion pressure, and improve neurological scores.7,8 Taken together, these data suggest that E2 is protective and warrants further study as a potential therapeutic for treatment of TBI. E2 acts through the classical estrogen receptors α and β (ERα, ERβ) and the newly characterized G protein-coupled estrogen receptor 1 (GPER), which binds E2 and various estrogenic compounds, including the GPER-specific agonist, G-1, and initiates rapid intracellular signaling events.9,10 However, GPER’s role in the CNS has yet to be fully characterized, and its potential contributions to protection in TBI remains uninvestigated. Because GPER binds E2 as well as other more specific ligands, it could serve as a novel therapeutic target.
TIP! Always access resources through www.uab.edu/lister
Use databases to find articles on a topic

1. Identify appropriate database(s)
2. Search effectively
3. Select relevant articles
4. Access full articles
Finding the right resource

LHL Home > Databases

Databases :: Return to A-Z list

Browse by category:

<table>
<thead>
<tr>
<th>Health Services Administration</th>
</tr>
</thead>
</table>

Category results for Health Services Administration

<table>
<thead>
<tr>
<th>Name</th>
<th>Description</th>
<th>Access Information</th>
<th>Help</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABI/INFORM Complete</td>
<td>Worldwide coverage of business periodicals.</td>
<td>Off-campus access requires Blazer ID &amp; password.</td>
<td></td>
</tr>
<tr>
<td>Academic Search Premier</td>
<td>Publications covering a wide variety of academic disciplines. Includes peer-reviewed journals.</td>
<td>Off-campus access requires Blazer ID &amp; password.</td>
<td></td>
</tr>
<tr>
<td>Billian's HealthDATA</td>
<td>Provides online access to the same market information as available in the printed Hospital Blue Book. Market segments include: Hospitals, Healthcare Systems, &amp; Group Purchasing Organizations.</td>
<td>Blazer ID &amp; password required to access the link, username, &amp; password.</td>
<td>Welcome/Overview</td>
</tr>
</tbody>
</table>
Use PubMed to find biomedical articles

Articles tagged with Medical Subject Headings (MeSH)
About PubMed

- More than 23 million citations
- Includes MEDLINE, biomedical & life sciences journals & some online books
- Provided by National Library of Medicine (tax dollars) for free but most full text only available through subscription
- Access through Lister Hill Library website get to library-licensed full text
- Mostly peer-reviewed articles
How PubMed Works

Aligning incentives in health care: physician practice and hospital system perspectives

L.S. Levin, Gustave L.
University of Pennsylvania Health System, Hospital of University of Pennsylvania, 2nd Floor, Scott Levin@uphs.upenn.edu

Abstract

BACKGROUND: The key to successfully aligning hospitals and physician practices incentives and clinical productivity. Many physician practices and health systems are attempting to implement such linkages and employment strategies.

QUESTIONS/PURPOSES: We describe a fully integrated physician and hospital system process that affords the department support for clinical services and team-based patient care. Thereby, focusing on a physician compensation model that provides incentive not only for increased productivity but also the ability to improve clinical care and revenue. We designed and implemented a new model of compensation for the academic faculty at the University of Pennsylvania Health System including the health system's clinical and the faculty, the department's compensation plan was totally redesigned.

METHODS: The content of this article was acquired through our own experiences from the University of Pennsylvania Health System including the health system's clinical and the faculty, the department's compensation plan was totally redesigned.

RESULTS: Our model is multifactorial and provides sustainable support both the local market and nationally. The health system's funds flow processes, which includes compensation for nonclinical time and assists the department's growth strategy, can improve hospital margin. The implementation of the compensation plan has resulted in improved resources. Academic productivity in that same year was argued to have increased as measured by increased publications, national presentations, and research grants awarded.

CONCLUSIONS: A model of complete integration between an academic department and a process of mission-based support, which includes the compensation for nonclinical time and assists the department's growth strategy, can improve hospital margin. The implementation of the compensation plan has resulted in improved resources. Academic productivity in that same year was argued to have increased as measured by increased publications, national presentations, and research grants awarded.

PMID: 23296749 [PubMed - Indexed for MEDLINE] PMCID: PMC3708653 [Published version available online]

MeSH Terms

Delivery of Health Care, Integrated/economics
Delivery of Health Care, Integrated/organization & administration*
Efficiency
Employee Incentive Plans*
Faculty, Medical
Hospital Administration*
Humans
Models, Organizational
Organizational Culture
Physician’s Practice Patterns/economics
Physician’s Practice Patterns/organization & administration*
Public-Private Sector Partnerships*
Reimbursement Mechanisms/economics
Reimbursement Mechanisms/organization & administration*
Schools, Medical/organization & administration
Demonstration

What is the effect of incentive reimbursements like pay for performance on hospital costs?
My NCBI

- Personal account in PubMed where you can:
  - Save searches
  - Save and share citations
  - Set up e-mail alerts
  - Choose filters to group search results
  - Highlight search terms in results
Save Searches and Set Alerts

Demonstrations
Filters: www.youtube.com/watch?v=BWbQrrYbGiY
Custom filters: www.youtube.com/watch?v=6EuR0VKCWyY
Find PubMed citations relating to health care quality or to health care cost:

Appropriateness; Process assessment; Outcomes assessment; Costs; Economics; Qualitative research; and Quality improvement.
Tips for PubMed Searches

- Check the *Search details* box
- Apply filters (date, language, publication type)
- View “Related articles” for relevant results
- Link to full text with
- Consider searching by MeSH terms to focus search
- Try Health Service Research Topic Queries
Content
- 21,000 journals indexed, includes MEDLINE
- 5.5 million conference papers & 25.2 million patents
- Interdisciplinary with international scope
- Includes article references and forward citations
- Keyword search of records
Abstract and Citation Database

Keyword search of records

- Content
  - 21,000 journals indexed
  - Over 50,000,000 records
  - 70,000 BOOKS
  - 5.5 million conference papers & 25.2 million patents

- Interdisciplinary with international scope
- Includes article references and forward citations
Use **Scopus**

- To search the interdisciplinary or international literature
- To see the **reference list** and **forward cites** to an article
- To rank result sets by relevance or times cited

Learn more:  
[http://libguides.lhl.uab.edu/scopus](http://libguides.lhl.uab.edu/scopus)
Colorado's patient-centered medical home pilot met numerous obstacles, yet saw results such as reduced hospital admissions.

Abstract

The Colorado Multipayer Patient-Centered Medical Home Pilot, which ran from May 2009 through April 2012, was one of the first voluntary multipayer medical home pilot projects in the country. Six health plans, the state's high-risk pool carrier, and sixteen family or internal medicine practices with approximately 100,000 patients participated. Although full analysis is currently under way, preliminary results show that the pilot significantly reduced emergency department visits and also reduced hospital admissions, particularly for patients with multiple chronic conditions. One payer reported a return on its investment of 250-400 percent in the pilot. However, participants also ran into numerous obstacles. Among them: Many practices were left providing extra services to a large fraction of patients whose employersponsored insurance plans declined to pay the enhanced fees necessary to cover the cost of the patient-centered medical home expansion. The experience demonstrates that creating patient-centered medical homes and enabling them to be successful will take strong commitments and collaborative efforts on multiple fronts. ©2012 Project HOPE-The People-to-People Health Foundation, Inc.

Indexed keywords

EMTREE medical terms: article; cerebrovascular accident; diabetes mellitus; emergency care; emergency ward; funding; health care cost; health care delivery; health care facility; health care utilization; health insurance; heart disease; hospital admission; human; internal medicine; leadership; medical fee; medical home; medical practice; patient care; pilot study; preventive health service; United States

MeSH: Colorado; Efficiency, Organizational; Emergency Service, Hospital; Hospitalization; Humans; Patient-Centered Care; Pilot Projects; Program Development

Medline is the source for the MeSH terms of this document.
Demonstration

Videos: http://libguides.lhl.uab.edu/scopus/search/
Set Scopus Alerts

In the Scopus search results, select the search terms (e.g., "strategic change" AND "healthcare") and then click on the "Set alert" button to set up alerts for any new documents that match your search criteria.
About Business Source Premier

- Good resource for company information
- Also includes full text and citations from regional, national and international business and trade journals
- Multiple search options offered
- Offers limiters (date, peer-reviewed, etc.) and expanders (search within full text articles, apply related words)
- Includes full text PDFs and links to UAB Article Linker
Tips: Searching Business Source Premier

- Put phrases in quotes
- Use AND and/or OR between terms
- Use * at the end of a root word to include all derivatives
- Find company or industry profiles using the right sidebar
Demonstration & Practice

- Find a company profile and SWOT analysis for Kaiser Permanente

- What kinds of strategic planning initiatives are hospitals using? (Find scholarly articles from peer-review journals.)
(More) help with Business Research

Contact Sterne Business Librarian Jeff Graveline: jgraveli@uab.edu  205.934.6364

EndNote: Why Use EndNote?

- Store references and PDFs you find from many different databases in one place
- Annotate the PDFs with notes and tags
- Organize references into groups based on project/topic
- Create, insert, & (re)format in-text citations & bibliography with the click of a button

- To save time!
How to Get EndNote Software

- UAB has a site license for EndNote software, so it is free to all UAB students/employees (except Health System employees)

- Click **UAB IT Software Library** link at top of our EndNote guide to download the software: [http://libguides.lhl.uab.edu/endnote](http://libguides.lhl.uab.edu/endnote)
How to Get EndNote Software

- Follow the installation instructions carefully so you won’t be asked for a product key!
HSA Guide [http://libguides.lhl.uab.edu/HSA](http://libguides.lhl.uab.edu/HSA)

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» Call (205-934-2230)
» E-mail
» Request a one-on-one consultation
Questions?