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1 Topic: Incidence Rates of Ventilator- Associated Pneumonia (VAP) and Catheter Associated Urinary Tract Infection in ICUs Database Selected In thislibrary search, online database utilized are ScienceDirect (www. sciencedirect. com) and JSTOR (http://www. jstor. org). Specifically, ScienceDirect is a product of Elsevier Publishing, committed to provide scientific database with more than 2, 500 full-text peer-reviewed journals and more than 11, 000 books. Elsevier collated research studies from numerous authors and scientists as far back as 1823. Thus, improvement in research methods can be easily seen in search results. This is of particular importance in the topic selected to browse relevant research studies and compare and contrast the methods and results across timeline.   
Furthermore, JSTOR (short for “ journal storage”) in a non- profit service especially dedicated to offer a trusted digital archive with scholarly content to researchers, students, and professionals. The inclusion of articles in its database collections are developed through the participation of many publishers and other organizations. There is also a free access to most of the articles, which makes it advantageous to student users.   
Conclusion of the Studies   
The incidence rate of device- associated infection (VAP and CAUTI) is recorded lower in nine Colombian hospitals than other hospital ICUs in Latin American countries, based on the records of the National Nosocomial Surveillance System (NNIS). However, this rate is still comparably higher than that in the US ICUs. Thus, this finding necessitates policy improvements on infection control in Colombia (Moreno et al., 2006).   
In one recent active DAI surveillance study in two ICUs in Cuba (Rosenthal et al., 2010), rates of VAP, CLAB, and CAUTI, were carefully analyzed against CDC- National Healthcare Safety Network (NHSN) and International Nosocomial Infection Control Consortium (INICC) rates. Related information on microorganism profile, bacterial resistance, extended length of stay, and extra mortality were also considered. Results showed that VAP, CLAB, and CAUTI rates are lower than INICC rates. Compared to NHSN rates, VAP rate scored higher, while CLAB rates lower, and CAUTI rates similar. Lastly, there was a significant direct correlation between VAP increase and the LOS and mortality rate.   
References   
Moreno, C. Á., Rosenthal, V. D.,  Olarte, N.,  Gomez, W. V. , Sussmann, O., Agudelo, J. G., … Henríquez, D. (2006). Device‐associated infection rate and mortality in Intensive Care Units of 9 Colombian hospitals: Findings of the International Nosocomial Infection Control Consortium. Infection Control and Hospital Epidemiology, 27 (4), 349-356. doi: 10. 1086/503341   
Rosenthal, V., Guanche Garcell, H., Morales Pérez, C., Delgado González, O., & Fernández González, D. (2010). Device-associated infection rates, extra length of stay, extra mortality, microorganism profile, and bacterial resistance in two ICUs from Cuba: Findings of the international nosocomial infection control consortium (INICC). International Journal of Infectious Diseases, 14 (1), e191-e335. doi: 10. 1016/j. ijid. 2010. 02. 2065   
#2   
Description of the Search   
Initially, the search keyword was “ VAP AND CAUTI” using the Boolean terminology “ AND” in ScienceDirect and JSTOR. Naturally, the search results yielded the articles that contain both words VAP and CAUTI. There are 49 and 18 search results in the first and second database, respectively. Consequently, the search result was further narrowed down to 27 and 9 using the keywords “ vap cauti infection rates mortality ICUs”. The use of a few more keywords would narrow the search since articles that do not have the entire search terms will automatically be filtered out. In Boolean rule, a single “ space” means the “ AND” command. Thus, it is not really necessary to include “ AND” after each word.   
Summary of the results from the search   
Most of the results from ScienceDirect database are studies on the infection rates of DAI in intensive care units in different countries, compared with the established authorities in infection control such as the International Nosocomial Infection Control Consortium (INICC). Essentially, it is observed that the words “ VAP” and “ CAUTI” are not part of the titles of these studies. It is because these terms are included in the umbrella of device- associated infection (DAI), thus they appear evidently in the body of the document. Interestingly, the results in JSTOR database include policy improvements and differences in infection control interventions across different ICUs.