EBP Clinical Protocol
Instructions for Clinicians
SFASU Speech–Language Pathology Program
Primary objective: To get a graduate clinician in the habit of exploring articles on a technique they are proposing to use with a client.

Secondary objective 1: To complete rough or preliminary assessments (simplified version of meta-analysis) of existing literature on a technique by learning to categorize existing evidence in terms of frequency of types of studies (how many are case histories, opinion pieces, single-subject designs, group designs, etc.; with varying degrees of control hence varying levels of credibility) in support and in opposition to use of the proposed technique.
Secondary objective 2: The review of literature should enable student to appreciate what is involved in using the technique and address issues regarding the remaining two “legs” of the EBP “stool” (client values, students’ expertise/confidence). The “third” leg is quality of evidence.
EBP put into Practice – Flow chart

1. Proposed Technique or approach
2. Review of literature for past 10 yrs to identify quality of evidence based on frequency of types of reports
3. Informing the client about the quality of evidence and getting informed consent if the student is confident that he can implement the technique systematically
4. Coming up with A PLAN of action that systematically evaluates progress and lays down markers to define success or failure
Hierarchy of Quality of Evidence

Articles will fall into one of these 5 levels of scientific “rigor”

L5: Double or single-blind study with random assignment with N of 30 or more.

L4: Group studies with random assignment with N of more than 30

L3: Single-subject studies, Group studies with small N or poor controls (no random assignment, poor definitions of terms)

L2: Case studies

L1: Opinion pieces; unsupported statements by “authoritative” figures.
Student report will include:

- Developing a frequency distribution of publications.
- Commenting on the use of the technique or any special expertise needed to implement it with reference to her own experience or qualification.
- Patients’ (or parents’) values and/or attitudes in relation to the technique.