

Figure 10-1. The 5-step approach to EBP.

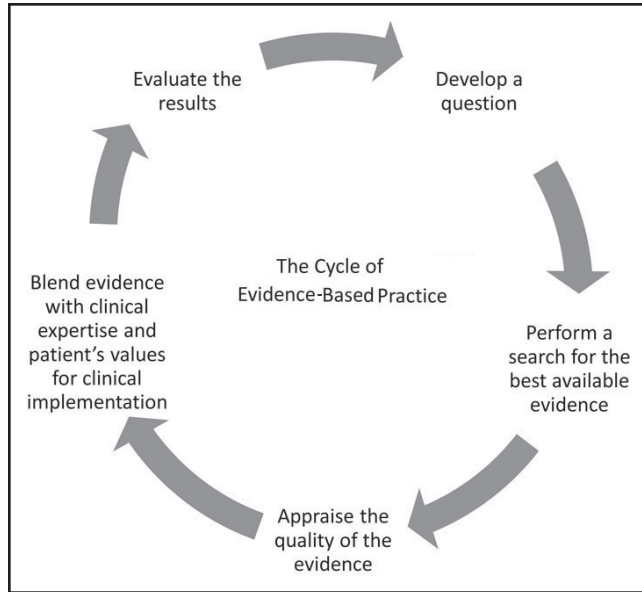
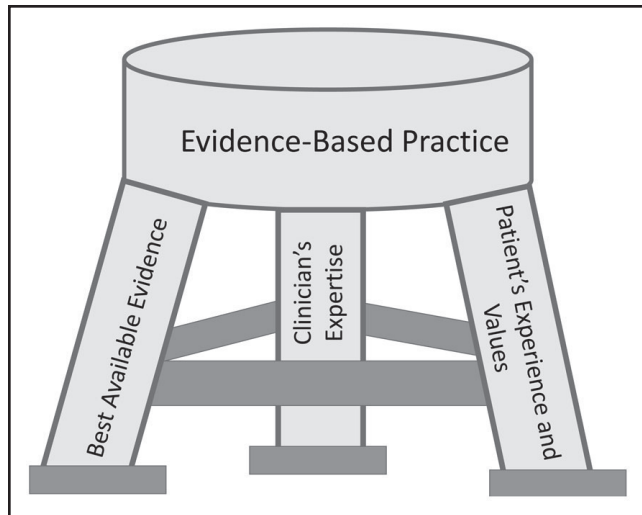


Figure 10-2. The 3-legged stool of EBP.



Role of Qualitative Research in Evidence-Based Practice

Most clinicians assume the evidence used in EBP must be knowledge generated from experimental research. It is even suggested by Sackett's Levels of Evidence and Grades of Recommendation, which rates nonexperimental evidence as level 5, or the lowest level of evidence.⁴ However, Sackett's classification of evidence was developed to guide clinicians through a clinical question related to medication therapy for a specific condition.⁵ It does not seem that Sackett even intended his rules to apply to all evidence, for he said, "Evidence-based medicine is not restricted to randomized trials and meta-analyses. It involves tracing down the best external evidence with which to answer our clinical questions."^{5(p72)} Experimental research is not free of problems. It may be poor quality, difficult to evaluate, or not directly relevant to patient care.⁶ It is important to remember that knowledge comes in all forms. Practice issues can be complex, and no single type of