



5 ways to make better clinical decisions

Dr Yaroslav Diakunchak is a busy family physician based in Kiev, Ukraine and has been practicing medicine for 11 years. One of the main challenges he faces is making sure that he adheres to international guidelines when making clinical decisions.



He recently started using the BMJ Clinical Decision Support Training Initiative and here are his thoughts on how his clinical experience has changed since.

Making the most of time with patients

"I use BMJ Best Practice to help with patient consultations. This is mainly in the areas of disease diagnosis and treatment plans. Since I spend most of my time at the clinic with patients, I have mainly been looking at the guidelines at home. However, access to BMJ Best Practice at the clinic is ideal and I hope to be able to use them more during consultations at the point of care."

Ensuring that consultations are patient-centered

"The BMJ Learning module on 'Motivational Interviewing' helped me change the way I speak to patients. I now listen more carefully to patients and ask them more open questions so that I can better reflect on their problems and encourage them to change their lifestyle."

Increasing understanding of English medical language

"BMJ Learning has been of great help to me to help improve my English medical language abilities. These skills are particularly useful when it comes to communicating with foreign doctors. Due to the improvement in my English, the Manager of Infectious Diseases in our clinic has asked for my involvement when it comes to working with a partner at Ley Hill surgery from the United Kingdom on developing primary care systems."

Accessing high quality medical resources

"I have found the guidance with BMJ Best Practice and BMJ Learning to be very useful and of a high quality. The guidance is continually updated... I have found everything that I have searched for.

I also enjoy reading articles from The BMJ, particularly the '5 things...' series which gives career advice to young GPs."

Applying evidence-based guidelines in clinical practice

"My clinical practice has changed since studying the evidence-based guidelines in BMJ Best Practice and BMJ Learning. I am now applying all the new information I've learned about internal medicine and infectious diseases.

For example, after a consultation with a patient with congestive heart failure, I took into account the new knowledge I had acquired from BMJ Learning and prescribed my patient with treatment according to the international guidelines which included an ACE inhibitor (ramipril 10 mg daily), a beta-blocker (carvedilol 6.25 mg twice daily), a diuretic (torasemide), aspirin (75 mg daily), and spironolactone (50 mg daily).

If you would like to learn more about the BMJ Clinical Decision Support Training Initiative or would like to share your feedback with BMJ, please email Michele Cheng, mcheng@bmj.com