

STEPPING FORWARD IN PRACTICE THROUGH RESEARCH

By Cindy L. Munro, RN, PhD, ANP, and Richard H. Savel, MD

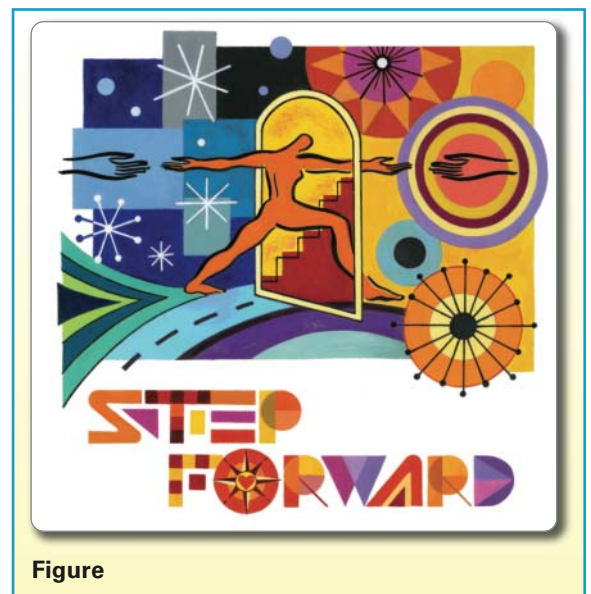


Every year, the incoming president of the American Association of Critical-Care Nurses (AACN) selects a theme, and original art is commissioned to illustrate that theme. This year, President Vicki Good challenges AACN members to “Step Forward.” In the accompanying artwork created by Canadian artist Helen D’Souza, “a confident figure with outstretched arms strides through the portal at a decisive moment to do the right thing, transforming knowledge into positive action (see Figure).¹”

Step Forward

The Step Forward theme resonates with the *American Journal of Critical Care’s* (AJCC’s) mission. As AACN’s scientific journal, our goal is to publish high quality, clinically relevant research that forms the evidence base to improve care at the bedside for critically ill patients and their families. We believe the very nature of research is grounded in a spirit of stepping forward and that research is an essential component enabling practice to step forward. We are committed to ensuring that every issue of *AJCC* provides new evidence for practice that ultimately can lead to better patient outcomes.

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Figure

Research intrinsically involves stepping forward. Clinically relevant research in critical care often steps forward from existing practice. Investigators may seek to understand if current interventions and practices are effective and, if so, why they work. These efforts are essential because many commonly employed interventions have not yet been subjected to scientific scrutiny. In the absence of good

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research, clinical practice based on tradition, opinion, theory, or empirical efficacy is the best we can do. However, there are many cautionary examples of such clinical practices being proved ineffective or even harmful when carefully examined by rigorous research.

Transform Research Into Action

Maya Angelou said, “Do the best you can until you know better. Then when you know better, do better.”² Research to understand if and why current practices work is the key to knowing better so that we can do better. The development and testing of new interventions requires stepping forward from existing practice, as does comparative effectiveness research to determine which among several interventions maximizes patient outcomes.

Our knowledge of patient and family perceptions, preferences, and experiences depends on research that steps forward into unknown territory. Exploratory and descriptive research often enables further research to stride ahead. Qualitative research provides a valuable perspective and depth of understanding about patient experiences that enriches our interactions with patients and families.

Clinical practice steps forward by transforming the knowledge gained through research into positive action. Research only informs practice to the extent that the resulting new knowledge is applied in the clinical setting. It is imperative that the findings of high quality research guide activities in real world situations. The recognition of this indispensable link between research and its application has given rise to new fields of study such as translational research, implementation science, and dissemination science.³⁻⁵

Improve Practice With Knowledge

We recognize that many different forms of research inform clinical practice, and many methodologies are represented in *AJCC*'s pages. Because of our commitment to publish only clinically relevant research of the highest quality and significance, we

will continue to uphold standards of excellence for manuscripts and employ rigorous peer-review processes to ensure the value of *AJCC*'s content.

Over the years, we have illuminated the role of research in improving practice and clinical outcomes through several recurring features. The Clinical Pearls page included in every issue of *AJCC* provides clinically relevant brief summaries of research articles to assist readers in translating new knowledge into practice, and it is consistently one of the most read features of the journal.⁶ Some articles are selected as continuing nursing education (CNE) offerings. The structure of the CNE assists in better understanding of the content, and accompanying tests can be completed for CNE credit (AACN is accredited as a provider of CNE by the American Nurses Credentialing Center's Commission on Accreditation). When offered, the *AJCC* Patient Care Page supplements content related to a research article in the same issue, succinctly reviewing a content area and associated AACN practice guidelines. For a recent example, see the September 2013 research article describing use of psychotropic drugs in older critically ill patients⁷ and the related Patient Care Page.⁸ This research study was also selected as a CNE offering. Invited commentaries by leading critical care experts offer interdisciplinary perspectives on provocative challenges in critical care research and practice. All of these features assist our readers to step forward in their practice and transform knowledge into positive action.

In this issue, we step forward with a new feature that highlights several significant research articles from the journal's past year. The year in review article,⁹ authored by Dr. Stijn Blot (a member of the *AJCC* editorial board), provides a multivolume perspective of recent high-impact research that we believe will be informative for readers. We intend for this to be an annual feature.

Clinical practice and research both build on past knowledge and look toward the future. The new year provides an important opportunity to reflect on one's current position and to step forward. At *AJCC*, we will strive to bring our readers the most important new knowledge for practice. We encourage every member of the critical care team to use this evidence to improve outcomes for each patient entrusted to our care. In this way, we will step forward together.

The statements and opinions contained in this editorial are solely those of the coeditors.

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FINANCIAL DISCLOSURES

None reported.

eLetters

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