

UpToDate Sales Training Cheat Sheet

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BMJ Study	
Date	September 2011
Market Perception	DynaMed updates faster than UTD and all other point of care resources.
Suggested Response	<p>UpToDate is much more than an evidence feed.</p> <p><i>The study was flawed!</i> The authors of the study report serious shortcomings with their study; namely in looking only at the number of new references listed in the bibliography, they did not look at the quality of the updating process, how the evidence was incorporated into the content; and how the new evidence effected recommendations.</p> <p>According to the authors of this study, they “did not judge the appropriateness of the update but simply used the updating speed as its proxy”.</p> <p><i>UpToDate is unique!</i> UpToDate is unique in our strength in analysis of the evidence, the synthesizing of that evidence to create original content; in the rigorous review of our content to ensure it is evidence-based; and then making practical recommendations that can be used by the clinician at the point of care.</p>

	<p>It would be much easier to just scan the literature and add updates without taking the time to think about whether the update is even necessary, getting complete peer review and not rushing through it.</p> <p>Clinicians are seeking peer-reviewed recommendations and answers to questions they can trust – not rapid and potentially indiscriminate links to new evidence.</p>
KLAS Report	
Date	November 29, 2011
Market Perception	DynaMed has higher scores than UpToDate in the new KLAS report on clinical decision support.
Suggested Response	<p>Customer satisfaction is very important to us and improving our relationships with our customers continues to be a major priority.</p> <p>We find that the clinicians who use UpToDate love the service and strongly believe in the value that UpToDate provides.</p> <ul style="list-style-type: none"> • In a recent survey of more than 80K UpToDate users in institutional settings, 95% reported that UpToDate makes care more efficient, 98% said UpToDate improves care, and 93% said UpToDate is important for patient safety. • UpToDate has been studied extensively by independent researchers and the results of these studies point to UpToDate’s important role in medical education, patient safety, and quality initiatives.
Hospital Outcomes Study (back to Table of Contents)	
Date	November 16, 2011
Market Perception	<p>Researchers at Harvard University Report the Adoption of UpToDate® by Hospitals is Directly Associated with:</p> <ul style="list-style-type: none"> • Shorter hospital stays • Better quality performance (as measured by the HQA, Hospital Quality Alliance) • Fewer deaths
Objection #1	<i>“It’s an Association, not a Cause.”</i>
Suggested Response	The “Use of UpToDate and Outcomes in US Hospitals” was a retrospective study. While a retrospective study demonstrates an association, there are five good reasons to believe that the positive impact of UpToDate on outcomes is causal:

	<ol style="list-style-type: none"> 1. Plausible: previous studies have shown an important impact on decision-making and patient management. 2. Consistent: This is the second study to show an effect on health outcomes. 3. Temporal association: The adoption of UTD was temporally associated with the better outcomes. (Solucient, amount of use was associated w/ better outcomes) 4. Other Explanations Unlikely: The authors exhaustively considered other possible explanations for the association in the adjustment methodology. They adjusted for 8 specific factors. 5. Established research methods: The research methodology has been used in dozens of other observational studies evaluating hospital quality and efficiency. <p><i>The outcomes were consistent and persistent!</i></p>
Objection #2	<i>"It's a retrospective study."</i>
Suggested Response	<p>Yes, it was a retrospective study. Ideally, the researchers would have done a randomized controlled trial. But they could not, as it would be logistically difficult to impossible because of UpToDate's level of penetration.</p> <p>Three reasons why the study results are credible:</p> <ol style="list-style-type: none"> 1. The authors adjusted for 8 potential biases (or "confounding factors"), using well-accepted methodology. 2. Retrospective studies are an accepted approach which researchers use to demonstrate associations between data. Retrospective studies are regularly published in reputable journals. 3. Hospitals served as their own control group, as the researchers studied patient and quality data before, during and after UpToDate was adopted at each institution.
Objection #3	<i>"UpToDate Hospitals are Different."</i>
Suggested Response	<p>While it's possible that some factor was not accounted for, study authors used heroic efforts to ensure that wasn't the case. They were comprehensive in their methodology, adjusting for 8 measures: <i>hospital financial health, sickness of patients, size of hospital, teaching status, presence of an ICU, proportion of patients with Medicaid, geographic location, ownership (private, public, for-profit).</i></p> <p>The confounding factors and adjustments made are part of standard methodology when doing retrospective studies. Major journals publish retrospective studies using</p>

	this methodology on a regular basis as standard practice.
Objection #4	<i>“UpToDate Outcomes are not causally related.”</i>
Suggested Response	<p>The authors said that four factors lead to increased confidence in a causal association:</p> <ol style="list-style-type: none"> 1. The effects were consistent across a series of measures (mortality, efficiency, and processes) that are not, themselves, highly correlated with each other. 2. The benefits persisted even after controlling for other hospital characteristics that were associated with adoption, including measures of hospital financial health (as measured by proportion of Medicaid patients and the DSH Index). 3. The effects, at least for quality performance, were prominent among smaller, non-teaching hospitals (which, one would surmise, a priori, to be most likely to benefit from UpToDate). 4. The dose-response relationship of duration of use, which was an analysis limited to only those hospitals with UpToDate, provides more evidence that the system itself may have some impact.
Objection #5	UpToDate funded the study and it is therefore bias.
Suggested Response	<p>UpToDate had no role in the study’s design or input into the analysis.</p> <p>UpToDate did not see a copy of the manuscript before it was submitted to the Journal of Hospital Medicine.</p> <div style="border: 1px solid green; padding: 5px; margin: 10px 0;"> <p>Disclosures: This study was funded by UpToDate, Inc. The funder had no role in study design, input into analyses presented, drafting or editing the manuscript, nor saw the manuscript prior to submission.</p> <p>All coauthors have seen and agree with the contents of the manuscript. Drs. Jha and Isaac jointly wrote all drafts of the manuscript with no input from any outside sources. Dr. Zheng reviewed the Methods section and provided editorial comments on all sections of the paper.</p> </div> <p><i>(statement copied from the study itself)</i></p>
Overall message	<p>UpToDate is the only clinical knowledge system associated with improved outcomes.</p> <p>The impact of UpToDate has been more clearly and consistently demonstrated compared with other HIT (Health Information Technology) interventions that are far</p>

	more complex and costly. UpToDate has proven value, is easily implemented and is not costly.
Launch of Surgery (back to Table of Contents)	
Date	November 17, 2011
Market Perception	UpToDate launched the General Surgery.
Suggested Response	<p>UpToDate contains more than 500 topics (and growing) that discuss General Surgery. These topics were developed to meet the needs of busy surgeons who Carry heavy clinical responsibilities, often do not have access to textbooks or libraries, work in busy outpatient clinics, and respond to frequent ER calls.</p> <p>UpToDate topics contain Surgical Quality and Safety information. (include more info on SCIP measures and why UTD is superior to other products surgeons use like ASC)</p> <p>Measuring quality in hospitals in the United States: Core measures Overview of control measures to prevent surgical site infection Prevention of venous thromboembolic disease in surgical patients</p> <p>Our new content coupled with UpToDate’s proven ability to improve patient care, means even more of your staff and your hospital’s patients will benefit.</p>