

DynaMed

An evidence-based clinical reference tool

What can DynaMed do?

DynaMed is a clinical point of care tool that can be used to:

1. Summarize best practice recommendations for a disease or condition
2. Provide differential diagnoses for symptoms
3. Get background information on a disease or condition
4. Obtain information on drugs and drug interactions
5. Find evidence-based information about diagnostic tests
6. Provide information to share with patients

Useful DynaMed Aspects

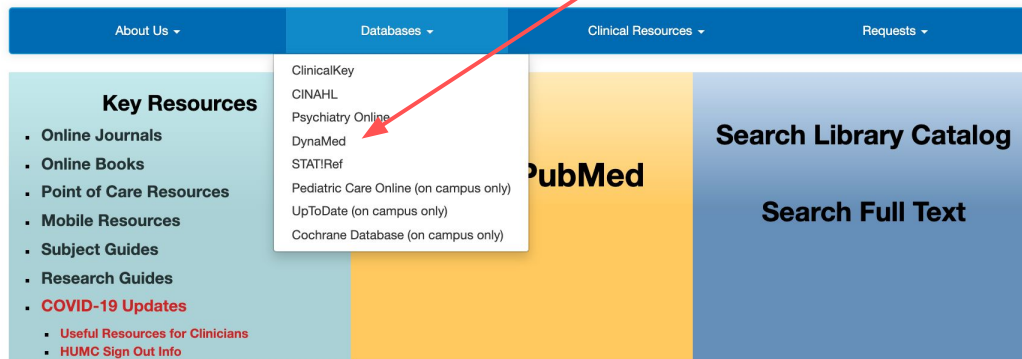
- **DynaMed Decisions** tool to assist with clinical decision making
- A collection of 37 specialties that can be browsed and/or followed
- Medical calculators spanning medical equations, clinical criteria, decision trees, statistics, unit & dose conversions, and a calculator search by specialty
- Drug information via IBM Micromedex on dosage, therapeutic use, cautions, and more
- Create an account to get personalized alerts on topics and updates that you follow, see your recently viewed content, and earn CME/CE credit

How does DynaMed compare to UpToDate?

	DynaMed	UpToDate
Update frequency and capability	Daily practice-changing updates that can be sent to you automatically New content added daily	Daily practice-changing updates New content added daily
Content	37 specialites	25 specialties
Drug Information	IBM Micromedex drug database	LexiComp Drug database and interaction checker
Evidence-based medicine	Uses <u>GRADE</u> system for certainty of evidence and strength of recommendations Level of Evidence rating system to determining quality of best available evidence https://dynamed.ebscohost.com/content/loe	Uses <u>GRADE</u> system for certainty of evidence and strength of recommendations http://www.uptodate.com/home/grading-guide
Journals monitored	500+, as well as Cochrane Database	450+
Access	Available on campus and remotely Mobile app	Available on campus only Mobile app

Accessing DynaMed through Parlow's Website

You can access DynaMed from our website by clicking the link on our home page, or by navigating to DynaMed within the Databases dropdown menu.



Databases

[CINAHL \(Nursing & Allied Health\)](#)
[ClinicalKey](#)
[Cochrane Database \(on campus only\)](#)
[DynaMed Plus](#)
[Pediatric Care Online \(on campus only\)](#)
[PsychiatryOnline](#)
[STAT!Ref](#)
[UpToDate \(on campus only\)](#)
[Visual DX](#)

[Application for Access to
Online Resources](#)

[Request PubMed Search](#)

[Tutorials](#)

Phone: 424-306-6100

Email: libref@harbor-ucla.org

Hours: M-F 8:00am-5:30pm

After logging in with your Parlow username and password, you'll be taken to the DynaMed homepage where you can access DynaMed's features, or begin with a keyword search. DynaMed Decisions can be accessed by clicking on the tab at the top of the page.

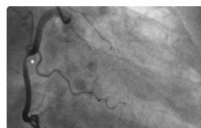


**Browse Specialties, Drug
information, and Calculators**

CONFIDENCE IN PRACTICE

English 

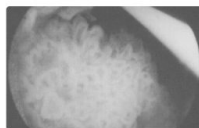
Begin a keyword search here



Cardiology

Acute Coronary Syndromes, Stable
Coronary Artery Disease, Heart
Failure

[View Specialty](#)



Oncology

Breast Cancers, Lung Cancers,
Gastrointestinal Cancers,
Lymphomas

[View Specialty](#)



Dermatology

Ecematous Dermatoses, Malignant
and Pre-malignant Lesions,
Papulosquamous Dermatoses

[View Specialty](#)

An Example Search Using DynaMed:

A patient with an early-stage breast cancer diagnosis

The screenshot shows the DynaMed website interface. At the top, there's a header with 'DynaMed' and 'DynaMed Decisions'. Below this is a navigation bar with links: 'Specialties', 'Drugs A-Z', 'Drug Interactions', 'Calculators', and 'Our Experts'. A search bar is prominently displayed with the text 'breast cancer' entered. To the left of the search bar, there's a dropdown menu for 'English'. Below the search bar, a list of suggestions is shown under the heading 'GO TO'. The suggestions include: 'Breast Cancer in Men', 'Breast Cancer in Women', 'Breast Cancer Screening', 'Management of Breast Cancer Metastatic to Bone', and 'Management of Breast Cancer Metastatic to Brain'. Below this list, there's a section titled 'SEARCH FOR' with a list of search terms: 'breast cancer' (circled in red), 'breast cancer screening', 'breast cancer treatment', 'breast cancer in women', and 'breast cancer staging'. On the left side of the page, there's a 'Cardiology' section with a sub-header 'Acute Coronary Syndromes, Stable Coronary Artery Disease, Heart Failure' and a link 'View Specialty'. At the bottom left, there's a 'Recent Alerts' section with a link 'Evidence' and a date 'Updated 8 Dec 2021'. Below this, there's a snippet of text: 'single cycle of IVM without ovarian stimulation has lower clinical preg'.

DynaMed

DynaMed Decisions

Specialties Drugs A-Z Drug Interactions Calculators Our Experts

English

breast cancer

GO TO

- Breast Cancer in Men
- Breast Cancer in Women
- Breast Cancer Screening
- Management of Breast Cancer Metastatic to Bone
- Management of Breast Cancer Metastatic to Brain

SEARCH FOR

- breast cancer
- breast cancer screening
- breast cancer treatment
- breast cancer in women
- breast cancer staging

Cardiology

Acute Coronary Syndromes, Stable Coronary Artery Disease, Heart Failure

[View Specialty](#)

Recent Alerts

Evidence • Updated 8 Dec 2021

single cycle of IVM without ovarian stimulation has lower clinical preg

In this example, we'll search for information about breast cancer using the search box. DynaMed will suggest search terms and topics as you type. Here we will select a simple search for breast cancer by clicking the search icon (magnifying glass) or selecting "breast cancer" from the search suggestions.

On the search results page we see there are 55 results in total, and we have the option to narrow these results by content type.

There are also suggestions from DynaMed Decisions including clinical calculators and shared decision-making tools that can be used at the point of care.

SEARCH RESULTS

breast cancer

ALL (55)

VIDEOS (1)

IMAGES (27)

Narrow Results

CONTENT TYPE

- ☐ Approach To Patient (2)
- ☐ Condition (20)
- ☐ Drug Monograph (2)
- ☐ Drug Review (3)
- ☐ Evaluation (4)
- ☐ Lab Monograph (2)
- ☐ Management (19)
- ☐ Prevention (4)

CONDITION

Breast Cancer in Women

This malignancy of the breast tissue is the most common malignancy diagnosed in women worldwide.

Management

Management of breast cancer in older women

CONDITION

Breast Cancer in Men

Breast cancer is a malignancy rarely seen in men and comprises less than 1% of all breast cancer cases.

Management > Cancer-specific treatment

Medications for advanced breast cancer (Stage IV)

CONDITION

Early and Locally Advanced Noninflammatory Breast Cancer

It is a potentially curable malignancy of the breast tissue that has no apparent spread beyond the regional lymph nodes.

MANAGEMENT

From DynaMed Decisions

CLINICAL CALCULATOR

[Breast Cancer Risk - BCSC Model](#)

SHARED DECISION-MAKING TOOL

[Early-Stage Breast Cancer Treatment Options](#)

CLINICAL CALCULATOR

[Breast Cancer Risk - Gail Model](#)

SHARED DECISION-MAKING TOOL

[Breast Cancer Screening](#)

[Explore more at DynaMed Decisions](#)

We're going to narrow our search to Management and select the first result, "Management of Early or Operable Breast Cancer" to get more information about this topic, including information for the patient.

Note: "Management" in DynaMed is the same as "Treatment" in UpToDate.

SEARCH RESULTS

breast cancer

ALL (19) VIDEOS (1) IMAGES (27)

Management x

Narrow Results

CONTENT TYPE

- ☐ Approach To Patient (2)
- ☐ Condition (20)
- ☐ Drug Monograph (2)
- ☐ Drug Review (3)
- ☐ Evaluation (4)
- ☐ Lab Monograph (2)
- ☒ Management (19)
- ☐ Prevention (4)

MANAGEMENT

Management of Early or Operable Breast Cancer

Treatment includes surgery with possible radiation, endocrine therapy, chemotherapy, and/or targeted therapy.

Adjuvant Systemic Therapy for Early Breast Cancer

MANAGEMENT

Management of Breast Cancer Metastatic to Brain

Brain metastases from breast cancer are becoming more common.

MANAGEMENT

Management of Breast Cancer Metastatic to Bone

Bone metastases are common in metastatic breast cancer, particularly in patients with hormone receptor (HR)-positive tumors.

From *DynaMed Decisions*

CLINICAL CALCULATOR

Breast Cancer Risk - BCSC Model

SHARED DECISION-MAKING TOOL

Early-Stage Breast Cancer Treatment Options

CLINICAL CALCULATOR

Breast Cancer Risk - Gail Model

SHARED DECISION-MAKING TOOL

Breast Cancer Screening

Updates related to this topic are found here

Specialties Drugs A–Z Drug Interactions Calculators Our Experts

Management of Early or Operable Breast Cancer

TOPIC

IMAGES (1)

UPDATES

Learn about the [GRADE system](#) used to classify recommendations as strong or weak, as well as DynaMed's other evidence-based processes.



Overview and Recommendations

Assessment for treatment planning

Neoadjuvant systemic therapy

Locoregional treatment

Adjuvant systemic therapy

Surveillance

Related Topics

General Information

Assessment for Treatment Planning

Treatment Selection

Neoadjuvant Systemic Therapy for Early Breast Cancer

Locoregional Therapy for Early Breast Cancer

Adjuvant Systemic Therapy for Early Breast Cancer

Other Management

Approach to Microinvasive Breast Cancer

Surveillance

Management of Adverse Events

Guidelines and Resources

Patient Information

References

Overview and Recommendations

Assessment for treatment planning

- Before treatment, perform [assessment for treatment planning](#) (Strong recommendation).
- [Pretreatment advanced imaging](#) to assess for metastatic disease is indicated only for patients with signs and symptoms suggesting metastatic disease or those at high risk of recurrence.
- Additional tests for patients for whom neoadjuvant therapy is planned include:
 - assuring an image detectable marker is placed to mark the tumor bed for surgery (Strong recommendation)
 - adding axillary assessment with an exam, ultrasound, or other imaging (if not previously done), and needle biopsy of any suspicious or clinically positive lymph nodes (Strong recommendation); mark any positive lymph nodes from biopsy with a tattoo or clip to assure they are removed during surgery
 - evaluation of cardiac function with cardiac ultrasound or multigated acquisition scan before treatment with anthracyclines and/or trastuzumab (Strong recommendation)

Neoadjuvant systemic therapy

- Neoadjuvant systemic therapy is not appropriate for all patients with operable breast cancer, but is indicated for:
 - patients who desire breast-conserving surgery, but mastectomy would be required due to the tumor size (Strong recommendation)
 - patients with clinically positive lymph nodes that are likely to become negative with neoadjuvant systemic therapy (Weak recommendation)
- Chemotherapy and endocrine therapy may each be used alone or in combination with human epidermal growth factor 2 (HER2) targeted therapy in the neoadjuvant setting; use of each

TOPIC EDITOR

Susan L. Troyan MD

Affiliations

Instructor in Surgery, Harvard Medical School; Massachusetts, United States

Conflicts of Interest

Dr. Troyan declares no relevant financial conflicts of interest.

RECOMMENDATIONS EDITOR

Zbys Fedorowicz MSc, DPH, BDS, LDSRCS

DEPUTY EDITOR

William Aird MD

Images

All (1)

Use of MRI as an adjunctive imaging test

See info on editors, including affiliations and potential conflicts of interest here.

Jump to different sections of this topic by clicking on a subsection heading

Management of Early or Operable Breast Cancer

Patient Information

- > Overview and Recommendations
 - Related Topics
 - General Information
- > Assessment for Treatment Planning
 - Treatment Selection
 - Neoadjuvant Systemic Therapy for Early Breast Cancer
- > Locoregional Therapy for Early Breast Cancer
- > Adjuvant Systemic Therapy for Early Breast Cancer
- > Other Management
- > Approach to Microinvasive Breast Cancer
- > Surveillance
- > Management of Adverse Events
- > Guidelines and Resources
- Patient Information**
- > References

Patient Information

- handout on breast cancer from [EBSCO Health Library](#)
- information on treating breast cancer from [MacMillan Cancer Support](#)
- information on treating breast cancer from [American Cancer Society](#) or in [Spanish](#)
- information on how breast cancer is treated from [Centers for Disease Control and Prevention](#)
- handouts from National Cancer Institute on
 - [breast cancer treatment](#) or in [Spanish](#)
 - [lymphedema and breast cancer surgery](#)

References

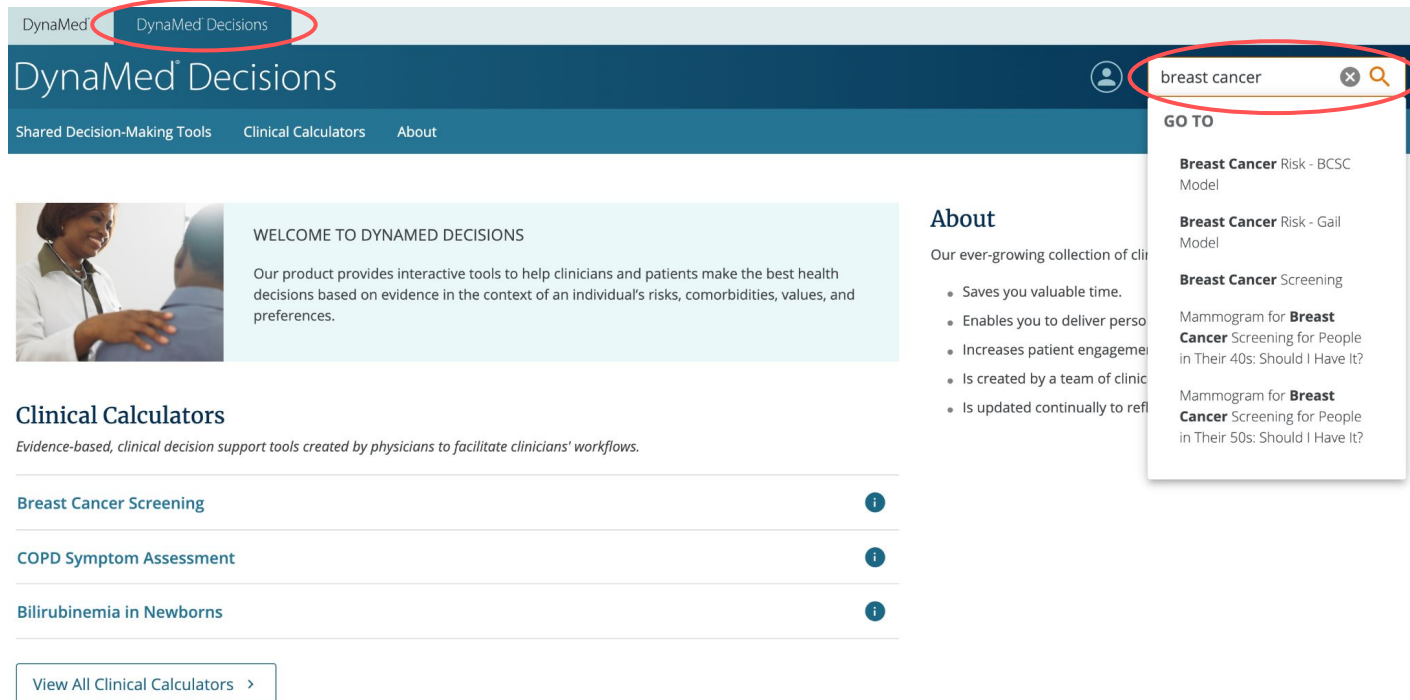
General references used

The references listed below are used in this DynaMed topic primarily to support background information and for guidance where evidence summaries are not felt to be necessary. Most references are incorporated within the text along with the evidence summaries.

1. Harbeck N, Gnant M. Breast cancer. [Lancet](#). 2017 Mar 18;389(10074):1134-50
2. Gradishar WJ, Anderson BO, Aft R, et al. Breast cancer. Version 1.2018. In: National Comprehensive cancer Network (NCCN) Clinical Practice Guidelines in Oncology (NCCN Guidelines). NCCN 2018 March from [NCCN website](#) (free registration required)
3. Senkus E, Kyriakides S, Ohno S, et al; ESMO Guidelines Committee. Primary breast cancer: ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up. [Ann Oncol](#). 2015

If we wanted information to give to our patient, clicking on the Patient Information subheading takes us to handouts and resources available from a variety of sites.

We can also use DynaMed Decisions to locate helpful shared decision-making tools related to breast cancer. By clicking on the DynaMed Decisions tab, we're taken to the main page which includes a search box. We'll enter our topic "breast cancer" here and search.



The screenshot shows the DynaMed Decisions website. A red circle highlights the "DynaMed Decisions" tab in the top navigation bar. Another red circle highlights the search bar in the top right corner, which contains the text "breast cancer" and a magnifying glass icon. Below the search bar, a dropdown menu is visible with the following items:

- Breast Cancer** Risk - BCSC Model
- Breast Cancer** Risk - Gail Model
- Breast Cancer** Screening
- Mammogram for **Breast Cancer** Screening for People in Their 40s: Should I Have It?
- Mammogram for **Breast Cancer** Screening for People in Their 50s: Should I Have It?

The main content area includes a "WELCOME TO DYNAMED DECISIONS" section with a description of the product, a "Clinical Calculators" section with a list of tools, and an "About" section with a description of the collection of clinical decision support tools.

Clinical Calculators

Evidence-based, clinical decision support tools created by physicians to facilitate clinicians' workflows.

- Breast Cancer Screening**
- COPD Symptom Assessment**
- Bilirubinemia in Newborns**

[View All Clinical Calculators >](#)

About

Our ever-growing collection of clinical decision support tools:

- Saves you valuable time.
- Enables you to deliver personalized care.
- Increases patient engagement.
- Is created by a team of clinicians.
- Is updated continually to reflect the latest evidence.

SHOWING: **breast cancer**

SHARED DECISION-MAKING TOOL

[Early-Stage Breast Cancer Treatment Options](#)



CLINICAL CALCULATOR

[Breast Cancer Risk - Gail Model](#)



CLINICAL CALCULATOR

[Breast Cancer Risk - BCSC Model](#)



SHARED DECISION-MAKING TOOL

[Breast Cancer Screening](#)



SHARED DECISION-MAKING TOOL

[Mammogram for Breast Cancer Screening for People in Their 60s: Should I Have It?](#)



SHARED DECISION-MAKING TOOL

[Mammogram for Breast Cancer Screening for People in Their 40s: Should I Have It?](#)



SHARED DECISION-MAKING TOOL

[Mammogram for Breast Cancer Screening for People in Their 50s: Should I Have It?](#)



The results page offers shared decision-making tools and clinical calculators that may be useful at the point of care. For this example, we'll select the "Early-Stage Breast Cancer Treatment Options" tool.

Early-Stage Breast Cancer Treatment Options

This decision aid is for people with early-stage breast cancer who are considering lumpectomy with radiation or mastectomy. It is not for people with inflammatory or late-stage breast cancer.

Another decision aid is available for breast reconstruction after mastectomy. [About Early-Stage Breast Cancer](#)

optiongrid



Grid View ▾

PATIENT QUESTIONS	Lumpectomy with Radiation	Mastectomy
What does the option involve?	You will have surgery to remove the cancer and some tissue around it. You may need another surgery if signs of cancer are on the edges of the removed tissue. You may go home the same day. After you heal, you will get radiation 5 days a week for 3 to 6 weeks.	You will have surgery to remove the whole breast. You may be in the hospital for at least 1 day. Tubes will be left under the skin for up to 2 weeks to help you heal.
What about these treatment options is the same?	No matter which treatment you choose: <ul style="list-style-type: none"> you may need other treatments like radiation, hormones, or chemotherapy. some lymph nodes in your armpit will be removed for testing. 	No matter which treatment you choose: <ul style="list-style-type: none"> you may need other treatments like radiation, hormones, or chemotherapy. some lymph nodes in your armpit will be removed for testing.
How long will I live?	Research is unclear whether you will live longer with either option. Out of 100 people, about: <ul style="list-style-type: none"> 75 (75%) live 10 years or more. 44 to 50 (44% to 50%) live 20 years or more. 	Research is unclear whether you will live longer with either option. Out of 100 people, about: <ul style="list-style-type: none"> 75 (75%) live 10 years or more. 50 (50%) live 20 years or more.
Will cancer come back anywhere?	About 29 to 36 of 100 people (29% to 36%) have cancer come back within 20 years.	About 30 of 100 people (30%) have cancer come back within 20 years.
What are the side effects and harms?	After surgery, pain, numbness, and swelling are common. Out of 100 people, shortly after surgery, about: <ul style="list-style-type: none"> 2 (2%) get an infection. After radiation, you may feel tired, have itching skin, or skin	After surgery, pain, numbness, and swelling are common. Out of 100 people, shortly after surgery, about: <ul style="list-style-type: none"> 5 (5%) get an infection. 4 (4%) have skin death.

This tool allows us to provide quick answers to questions the patient may have about these treatment options.

Create a QR code, a link, or a printable PDF for the patient.

Other DynaMed Resources

- [DynaMed Clinical Toolkit](#) from UCF's Harriet F. Ginsburg Health Sciences Library
- EBSCO's general [DynaMed User Guide](#)
- [DynaMed](#) and [DynaMed Decisions](#) video tutorials from EBSCO
- EBSCO instructions for [installing and authenticating the DynaMed app](#)
- EBSCO guide to [claiming CME credits and hours](#) in DynaMed

Contact Us

A.F. Parlow Library of Health Sciences

Harbor-UCLA Medical Center

Email: libref@harbor-ucla.org

Phone: (424) 306-6100

Hours: M-F 8AM-5:30PM
