Does this evidence answer the EBP question?		 ⊠ Yes → Continue appraisal □ No → STOP, do not continue evidence appraisal 		
Article Sun	mary Information			
Article Summary Information Article Title: Tailoring fall prevention videos for medical-surgical inpatients: A randomized controlled trial.				
Author(s): Twibell et al.	Number: 1			
Population, size, and setting: 124 patients in a teaching hospital in the mid-western U.S. Publication 2023		ı date:		
Complet	te after appraisal			
Evidence level and quality rating: Level 1B evidence				
Evidence level and quanty fating. Level 11 evidence				
Study findings that help answer the EBP question:				
In 2023, Twibell et al. published findings of their study aimed at reducing the incidence of in-patient falls by using tailored fall prevention videos produced at an affiliated university. These researchers compared a control group (n=64) who received standard falls prevention education to an intervention group of subjects (n=60) who were shown a three-minute video about falls prevention. The results showed that after viewing the video, the intervention group had fewer falls, although the number was not statistically significant. The video intervention group did, however, show reduced high-risk fall behaviors and improved perceptions of fall-related behaviors. The researchers stated that the findings supported using fall prevention videos tailored to age and gender. Although this was a randomized controlled trial with a sufficient sample size, the subjects were from a single hospital and were mostly white. The researchers noted that this limits the generalizability of findings. Based on the <i>Johns Hopkins Evidence-Based Practice Model for Nurses</i> (Dang et al, 2022), this very well conducted randomized controlled trial yielded Level 1B evidence that can be generalized with some caution.				
Ref.	erences			
Dang, D., Dearholt, S., Bissett, K., Ascenzi, J., & Whalen, M. (2022). Johns Hopkins evidence-based practice for nurses and healthcare professionals: Model and guidelines. 4th ed. Sigma Theta Tau International.				
Twibell, K. R., Delaney, L., Siela, D., Coers, G., Davis, C., Drown, C., Kring, K., Duncan, J., & Jones, J. (2023). Tailoring fall prevention videos for medical-surgical Inpatients: A randomized controlled trial. <i>MEDSURG Nursing</i> , 32(3), 170–178.				
Section I: QuaNtitative Appraisal				
A Is this a report of a single research study?				

Level	Was there a control group Were study participants randomly assigned to the intervention and control groups? Ves No Level III (Nonexperimental) Level III (Quasi-experimental) Level III (Quasi-experimental) Level III studindependent to control groups?	dies lack manipulation of an variable; can be descriptive, , or correlational; and often use		
Quality	Does the researcher identify what is known and not known about the problem? Does the researcher identify how the study will address any gaps in knowledge? Was the purpose of the study clearly presented? Was the literature review current (most sources within the past five years or a seminal study)? Was the sample size sufficient based on the study design and rationale? If there is a control group: • Were the characteristics and/or demographics similar in both the control and intervention groups? • If multiple settings were used, were the settings similar? • Were all groups equally treated except for the intervention group(s)? Are data collection methods described clearly? Were the instruments reliable (Cronbach's α [alpha] ≥ 0.70)? Was instrument validity discussed? If surveys or questionnaires were used, was the response rate ≥ 25%? Were the results presented clearly? If tables were presented, was the narrative consistent with the table content? Were study limitations identified and addressed? Were conclusions based on results?	 ⋉ Yes 	No	N/A N/A
	Section I: QuaNtitative Appraisal (continue of the control of the	nued)		
	Circle the appropriate quality rating below:			

ality

A High quality: Consistent, generalizable results; sufficient sample size for the study design; adequate control; definitive conclusions; consistent recommendations based on a comprehensive literature review that includes thorough reference to scientific evidence.

B Good quality: Reasonably consistent results; sufficient sample size for the study design; some control; fairly definitive conclusions; reasonably consistent recommendations based on a fairly comprehensive literature review that includes some reference to scientific evidence.

C Low quality: Little evidence with inconsistent results; insufficient sample size for the study design; conclusions cannot be drawn.

Record findings that help answer the EBP question on page ${\bf 1}$