
**Step 1:** Do the search for the article on its title  
**Step 2:** identify for each database where the “Cited by” option is.  
**Step 3:** explore the list of return results.

**Note 1:** recent articles won’t have so much “cited by”, often “older” have more 😊

**Note 2:** all the databases will have different results. They provide the list of “cited by” based on the content of their database (coverage of subject and years). So to be complete all potential relevant database should be query.

**CINAHL**

**Option 1:**

![CINAHL search results](image)
**Option 2**

**Search Results:** 1 - 3 of 3

Search references for: WB Predicting pressure ulcer risk in pediatric patients

To view citing articles, mark checkboxes and click Find Citing Articles.


**Medline**

**Search History:** (0 searches) (close)

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**Advanced Search**

Enter title word or phrase to search.

- *Keyword*
- *Author*
- *Title*
- *Journal*
- Predicting pressure ulcer risk in pediatric patients

**Limits (close)**

- Include Multimedia
- Map Term to Subject Heading
1. Predicting pressure ulcer risk in pediatric patients: the Braden Q Scale.
   Curley MA; Razmus IS; Roberts KE; Wypij D.
   Nursing Research. 52(1):22-33, 2003 Jan-Feb.
   [Comparative Study, Journal Article, Multicenter Study]
   UI: 12552172

   Authors Full Name
   Curley, Martha A Q; Razmus, Isy S; Roberts, Kathryn E; Wypij, David.
   ▶ View Abstract

   Stansby, Gerry professor of vascular surgery and honorary consultant vascular surgeon 1; Arndt, Liz associate director 2; Jones, Katie project manager 2; Marsden, Grace senior health economist 2; On behalf of the Guideline Development Group
   BMJ. 2014;348:g2972, April 29, 2014.

   Abstract Reference
   Complete Reference
PubMed Single Citation Matcher

Use this tool to find PubMed citations. You may omit any field.

- **Journal**: 
- **Date**: yyyy/mm/dd (month and day are optional)
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- **Title words**: Predicting pressure ulcer risk in pediatric patients

[Search]  [Clear form]
Predicting pressure ulcer risk in pediatric patients: the Braden Q Scale.

Objectives: While there are valid and reliable pressure ulcer risk assessment tools available for adult patients, none exist for infants and children. To remedy this, the Braden Scale was adapted for use in pediatrics, calling it the Braden Q Scale.

Methods: A multiple prospective cohort descriptive study with a convenience sample of 322 patients on bedrest for at least 24 hours without pre-existing pressure ulcers or congestive heart disease were enrolled from three pediatric intensive care units (PICU). The Braden Q score and skin assessment were independently rated and data collectors were blinded to the other measures. Patients were observed up to 3 times per week for 2 weeks and then once a week until PICU discharge for a median of 2 observations reflecting 887 skin assessments.

Results: Eighty-six patients (27%) developed 199 pressure ulcers; 139 (70%) were Stage I pressure ulcers, 54 (27%) were Stage II pressure ulcers, and 6 (3%) were Stage III pressure ulcers. Most pressure ulcers (67%) were present at the first observation. Using Stage III pressure ulcer data obtained during the first observation, a Receiver Operating Characteristic (ROC) curve for each possible score of the Braden Q Scale was constructed. The area under the curve (AUC) was 0.83. At a cutoff score of 10, the sensitivity was 0.88 and the specificity was 0.58. The Braden Q Scale was then modified to eliminate 4 subscales with an AUC < 0.7. With 3 subscales (mobility, sensory, perception, tissue perfusion/temperature), the AUC of this Modified Braden Q Scale was maintained at 0.84. At a cutoff score of 7, the sensitivity was 0.92 and the specificity was 0.59.

Conclusions: The performance of the Braden Q Scale in a pediatric population is similar to that consistently reported for the Braden Scale in adult patients. The Modified Braden Q Scale, with 3 subscales, provides a shorter yet comparable tool.
Sort the presentation of the result on “Cited by”: 

[Image of Scopus interface with highlighted search term and sort option]
"Predicting pressure ulcer risk in pediatric patients"