

Reading Notes to fill out when reading course and outside reading materials for assignment

Note Taking Sheet: Reading # 3

ENCOURSE NAM	_____	EN202-01	_____	Course
_____01				Section

With many sources to read and evaluate, you need a way to keep track of the material you may use in your research paper. You need to record where you have looked, what you have found, and how to find each piece of information again (this is for your bibliography).

Directions: Fill in the information below, and keep with all of your resources. This will help you when it is time to write both your outline, paper, and annotated bibliography.

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3. Publisher [or title of organization]: National Institutes of Health, Pain Manag.

4. Heading of Section [title of reading]: ***Ethnic differences***

in pain and pain management

5. Year Written: 2013

6. Pages: 16

7. Website URL:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3654683/>

Main Ideas/Points	Important Quotations	Supporting Details	Relevance to Your Assignment
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<p>For example, the experience of pain differentially activates stress-related physiological responses across various ethnic groups, members of different ethnic groups appear to use differing coping strategies in managing pain complaints, providers' treatment decisions vary as a function of patient ethnicity and pharmacies in predominantly minority neighborhoods are far less likely to stock potent analgesics.</p>	<p>Disparities in the effects of and responses to pain treatment have also been found (see [4] for detailed review). For example, we have found ethnic differences in response to multidisciplinary pain treatment.</p>	<p>Indeed, ethnic identity, part of a person's self-concept derived from one's social group membership, has recently been shown to partially account for ethnic differences observed in experimental pain responses [20].</p>	<p>Links perception of pain to overall idea of reporting and discussing pain with health care providers. Provides the social perspective through analysis of multiple minority groups for pain perception, conceptualization, and general reporting.</p>
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In this article, is it possible that any of the authors might have a bias about the subject matter? No___ provide examples if needed.

Is the article timely or a bit outdated ? It is slightly outdated, as it is not from the last 2 years.

Was it published in a reputable source? Yes

It is an academic source.

4. Heading of Section [title of reading]: ***Prevalence and Risk Factors for Diabetic Lower Limb Amputation: A Clinic-Based Case Control Study***

5. Year Written: 2016

6. Pages: 17

7. Website URL:

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4942664/>

Main Ideas/Points	Important Quotations	Supporting Details	Relevance to Your Assignment
<p>Diabetes and the diabetic foot ulcer (DFU) have made their mark in society, with the prevalence of diabetes being four times higher than all cancers combined [1]. Increased life expectancies have contributed significantly to this exponential rise, with diabetes now contributing to 9% of global mortality, equating to 4 million deaths per year [2,3].</p>			
			Relevance to Your

Main Ideas/Points	Important Quotations	Supporting Details	Assignment
<p>Despite previous alert to the importance of early detection and management, prevention practices remain poor, with inconsistent patient follow-up and management compliance [17, 18]. As a result, subjects with DFU maintain poorer quality of life, with higher baseline depression rate, and 5-year mortality rates of up to 74% [19]. Existing studies have identified Indigenous ethnicity and presence of microvascular complications as contributing factors to poor DFU outcomes</p>	<p>The most significant contributing factors were diabetic retinopathy, CABG surgery, Charcot's foot, and Indigenous ethnicity.</p>	<p>In this study, Indigenous Australians were found to be at greater risk of diabetic LLA, which is in keeping with others' observation [20, 26].</p> <p>Furthermore, whilst there was a marginal difference in amputation between ischaemic and nonischaemic cohorts in the overall group, amputations related to ischaemic ulcers were more than double amongst the Indigenous subgroup.</p>	<p>Provides comparative data for an indigenous population in the Australasian region that suffers high LLA prevalence</p>

		<p>Essentially, the prevalence of amputation amongst our subjects stood at comparatively higher numbers and occurred predominantly amongst Indigenous subjects with ischaemic ulcers.</p> <p>Correspondingly, we have found Indigenous ethnicity to be amongst the strongest contributing factors in our cohort, who were almost twice as likely to undergo an amputation. The higher prevalence of amputations in the group of Indigenous Australians could be attributed to a genetic predisposition or to a socioeconomic</p>	
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		<p>status that drives the patients to present late for clinical care.</p> <p>This result is supported by previous Australian data stating that Indigenous Australians are known to develop diabetes and its associated metabolic complications at a younger age [24, 34]</p>	

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subject matter? No___ provide examples if needed.

Is the article timely or a bit outdated ? No

Was it published in a reputable source? Yes

It is an academic source.

Other important information :