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## begindocument

title Exploring the Role of Clinical Decision Support Systems in Enhancing Evidence-Based Nursing Practice author Kara Walsh, Elias Daniels, Rowan Hunter date maketitle

### sectionIntroduction

The integration of Clinical Decision Support Systems (CDSS) into nursing practice represents a critical frontier in healthcare informatics, yet the full potential of these systems to enhance evidence-based nursing remains largely untapped. Traditional approaches to CDSS implementation have often prioritized technical functionality over the complex cognitive and contextual factors that characterize nursing clinical reasoning. This research addresses this gap by proposing a novel framework that reconceptualizes CDSS as collaborative partners in the nursing decision-making process rather than mere repositories of clinical guidelines. The fundamental research question guiding this investigation examines how CDSS can be designed and implemented to authentically support nursing clinical judgment while promoting adherence to evidence-based protocols. Secondary questions explore the specific system characteristics that facilitate nursing engagement with evidence-based practice and the organizational factors that mediate successful CDSS integration. The significance of this research lies in its potential to transform how healthcare institutions approach technology implementation, moving beyond technical specifications to consider the human factors that ultimately determine system effectiveness. By examining CDSS through the lens of nursing clinical reasoning, this study offers original insights that bridge the divide between technological capability and practical clinical utility.

## sectionMethodology

This research employed an innovative mixed-methods design that integrated quantitative clinical outcome measures with rich qualitative data collection to provide a comprehensive understanding of CDSS impact on evidence-based nursing practice. The study was conducted across three diverse healthcare institutions: a large academic medical center, a community hospital, and an ambu-

latory care network, allowing for comparative analysis across different practice environments. The methodological approach was distinguished by its incorporation of cognitive task analysis techniques adapted from human factors engineering, which enabled detailed mapping of nursing decision-making processes before and after CDSS implementation. Quantitative data collection included systematic documentation of nursing adherence to evidence-based protocols for four clinical conditions: pressure injury prevention, fall risk management, pain assessment, and medication administration safety. These measures were complemented by patient outcome indicators including incidence rates for adverse events and patient satisfaction scores. The qualitative component employed ethnographic observation and in-depth interviews with 45 nurses across different experience levels and specialty areas, focusing on their experiences with CDSS and its influence on their clinical reasoning. A unique aspect of the methodology was the development and implementation of a prototype adaptive CDSS that incorporated machine learning algorithms to personalize decision support based on individual nurse practice patterns and patient population characteristics. This system featured enhanced transparency mechanisms that made the underlying evidence and reasoning processes visible to nurses, addressing a critical limitation of traditional black-box CDSS implementations.

#### sectionResults

The findings from this research reveal compelling evidence for the transformative potential of well-designed CDSS in enhancing evidence-based nursing practice. Quantitative analysis demonstrated that nursing units utilizing the adaptive CDSS prototype showed a 47

## sectionConclusion

This research makes several original contributions to the understanding of CDSS in nursing practice. First, it demonstrates that CDSS designed with attention to nursing clinical reasoning processes can significantly enhance evidence-based practice beyond what is achievable through traditional implementation approaches. The 47

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