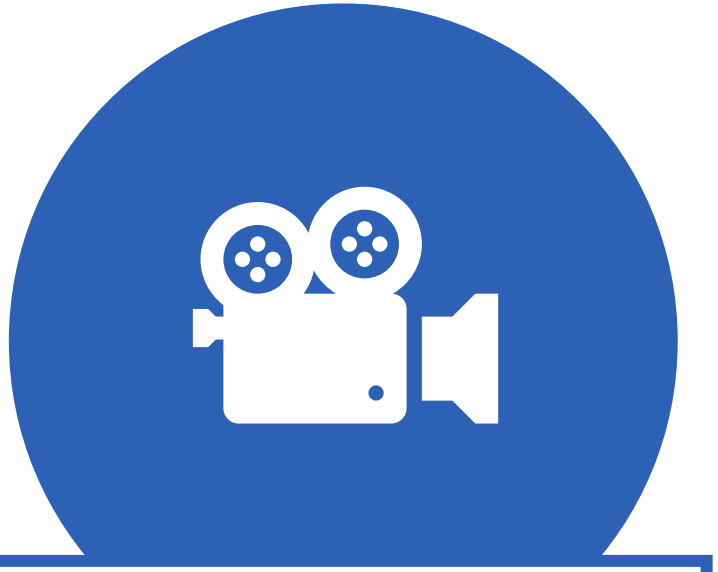
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The Knowledge Network for health and social care

NHS SCOTLAND

Advanced Searching for CINAHL on the new EBSCOhost



Wednesday, 16th September 2026

Richard Crookes, MA, MCLIP
Snr. Customer Training Specialist

EBSCO

Agenda

1. Title & Abstract searching
2. Combining searches
3. Proximity (precision) operators
4. Exporting results
5. Saving & re-running searches

Objectives

Perform Title and Abstract & Subject searches for CINAHL on EBSCOhost

Combine keyword (free text) and CINAHL Headings using the Search History

Apply precision (proximity) operators to improve search results

Export results in RIS and related formats for bibliographic software

Save, share, download results and searches

The Knowledge Network

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I would like to....

- Explore evidence summaries
- Search databases
- Find medicines information

How to use The Knowledge Network

The Knowledge Network is the national digital library for health and social care in Scotland.

Whether you are a new or experienced user, our platform offers a wealth of resources tailored to your needs.



Databases

Library resources

- Evidence summaries
- Databases
  - EBSCO databases
- Medicines information
- RefWorks and reference management
- Social care
- Optometry
- Knowledge support for GPs
- Nursing, Midwifery and Allied Health (NMAHP)
- Carbon literacy and sustainability

What are databases?

Bibliographic databases are searchable collections of journal articles and other resources like conference proceedings, book chapters, reports and standards. They can contain full-text or just abstracts.

Databases are useful for doing a thorough search of the literature on a subject as they often support more complex search queries than the Library Search. Database providers have their own search interfaces, and these vary depending on the supplier.

Browse our popular collections

- Allied and Complementary Medicine Database (AMED)
- ASSIA
- Barbour
- CINAHL
- ClinicalKey
- Cochrane Library
- EMBASE
- Emerald
- Mindtools
- Health Business Elite
- Ovid Databases (e.g. Medline)
- ProQuest Public Health
- PsycINFO



Search articles, books, journals & more

NHS SCOTLAND | Searching: CINAHL

Basic search | PICOT

All fields

AND All fields

AND All fields

Add row | Delete row | Suggest subject terms | Clear all | Suggest terms

Filters | Search options | Publications | CINAHL Headings

Limit your results

Clear all

- [ ] Linked Full Text
- [ ] References Available
- [ ] Abstract Available
- [ ] English Language
- [ ] Peer Reviewed
- [ ] Research Article
- [ ] Exclude Pre-CINAHL
- [ ] Exclude MEDLINE records
- [ ] Evidence-Based Practice
- [ ] Pregnancy
- [ ] Inpatients
- [ ] Outpatients
- [ ] Human
- [ ] First Author is Nurse

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The Knowledge Network | New search | Browse by | Research tools | MyEBSCO

Search articles, books, journals & more

NHS SCOTLAND | Searching: CINAHL

AND

AND

Add row | Delete row | Suggest sul

Filters | Search options | Publications

Limit your results

- Linked Full Text
- References Available
- Abstract Available
- English Language
- Peer Reviewed
- Research Article
- Exclude Pre-CINAHL
- Exclude MEDLINE records
- Evidence-Based Practice
- Pregnancy
- Inpatients
- Outpatients
- Human
- First Author is Nurse

The Knowledge Network

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Hello, researcher!

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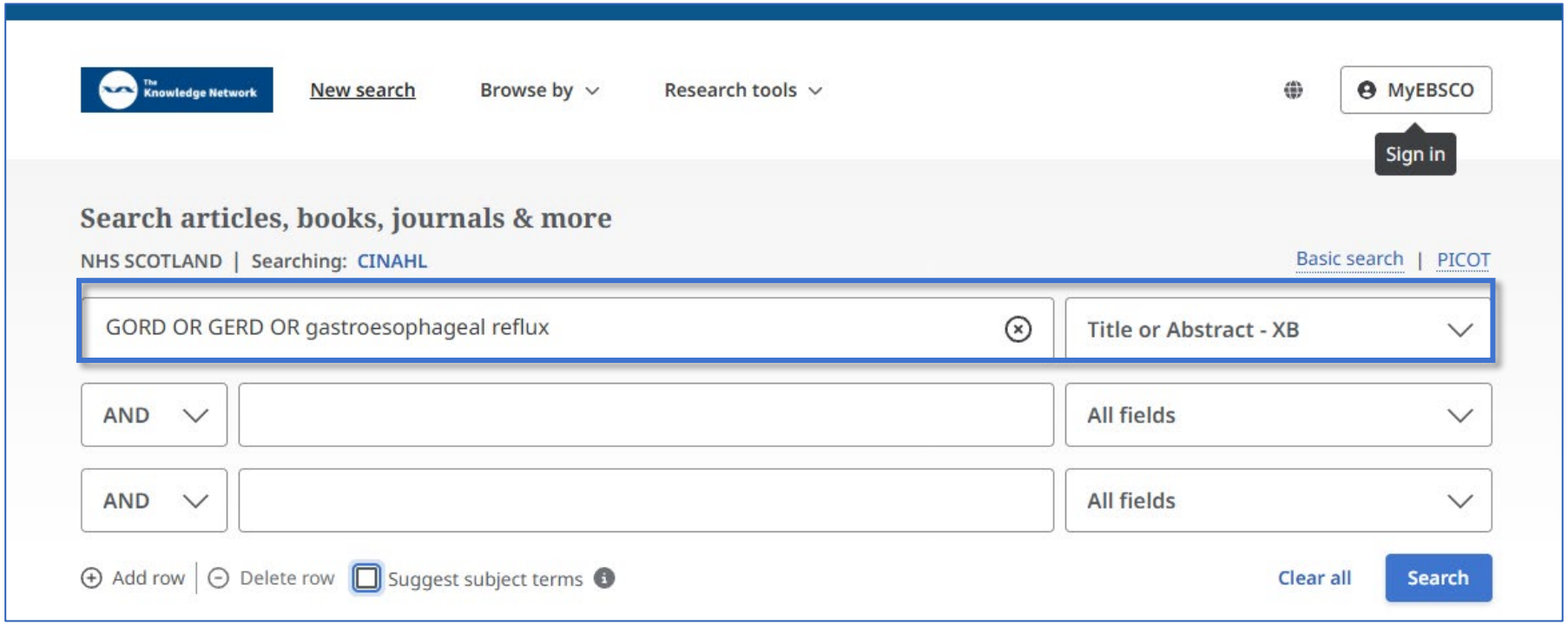
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Advanced Searching

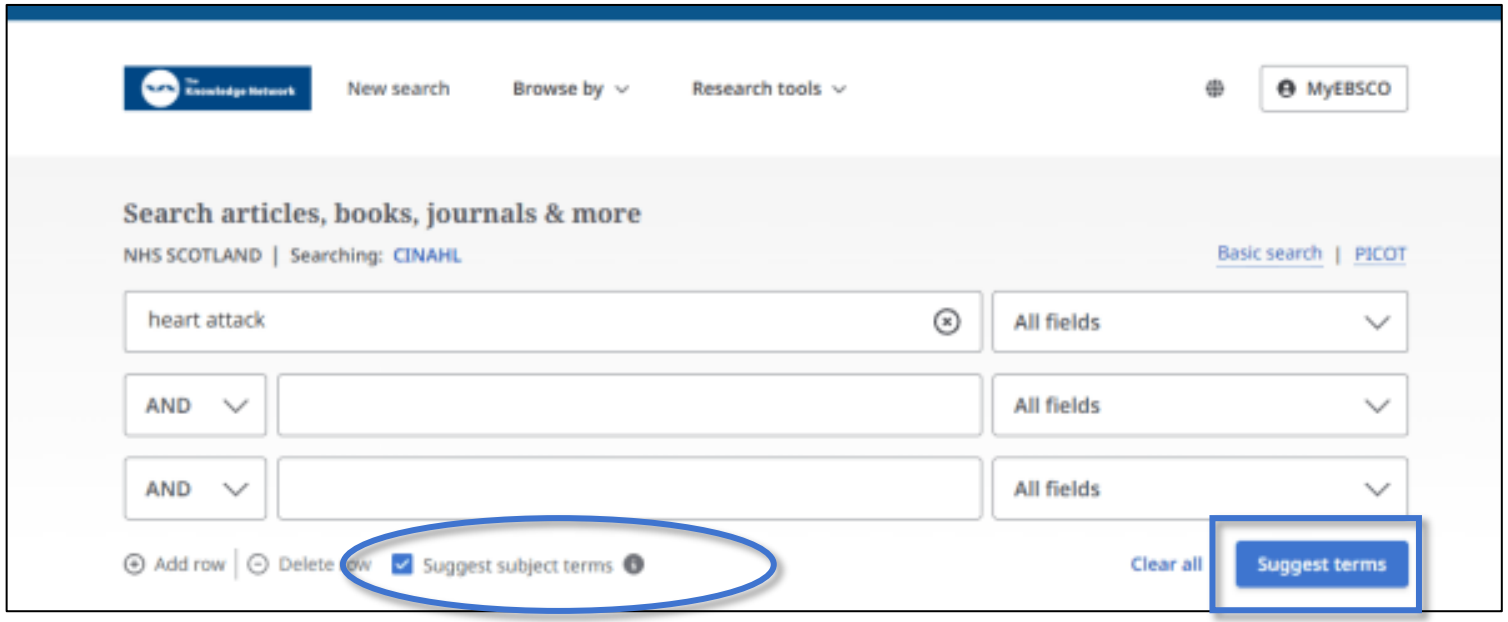
Title or Abstract (XB) Search



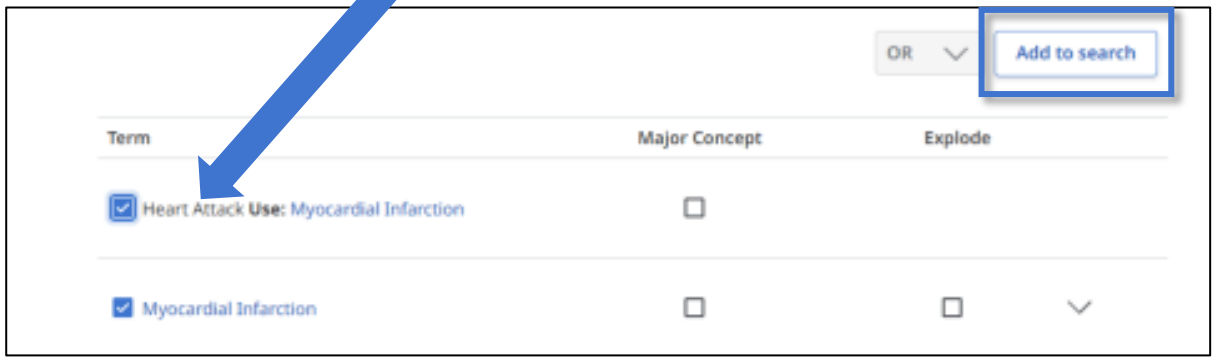
XB GORD OR GERD OR gastroesophageal reflux

For more information: **EBSCOhost XB Field Code - Simultaneous Title and Abstract Searches**

Subject Headings – Using **Suggest Subject Terms**



Enter the keyword search term and tick **Suggest Subject Terms** – click **Suggest terms** to be mapped to the **CINAHL Heading**



For more information:
[How do I use the Suggest Subject Terms feature in EBSCOhost?]

Using Truncation & Wildcards on EBSCO*host*

Syntax	Example
Truncation	*physiotherap*, ventilator * pneumonia*
Phrase Searching	*“heart failure”*
Wildcard	*Wom?n, analys?s*
Alternate spelling	*p#ediatrics, behavio#r*

For more information: **Searching with Wildcards in EDS and EBSCOhost**

Using Proximity (Precision) Operators

Near	Finds the words if they are within x words (or less) of one another regardless of the order in which they appear, e.g., *gallbladder n5 disease*
Within	Finds the words if they are within x words (or less) of one another and in the order in which you entered them, e.g., *ventilator w1 pneumonia*
With multiple Terms	Multiple terms can be used on either side of the operator, e.g. *(heart OR cardiac) w0 failure*

Clinical Scenario

A patient, who owns a bakery, recently participated in their employer's wellness programme. Their BMI is within a normal range, but they have a family history of obesity and are concerned about the impact carbs may have on maintaining a healthy weight.



Photo by Kate Remmer on Unsplash

Research Question

*Does **dietary carbohydrate** intake influence **healthy weight maintenance** (BMI <25) in patients who have **family history of obesity** (BMI >30)?*

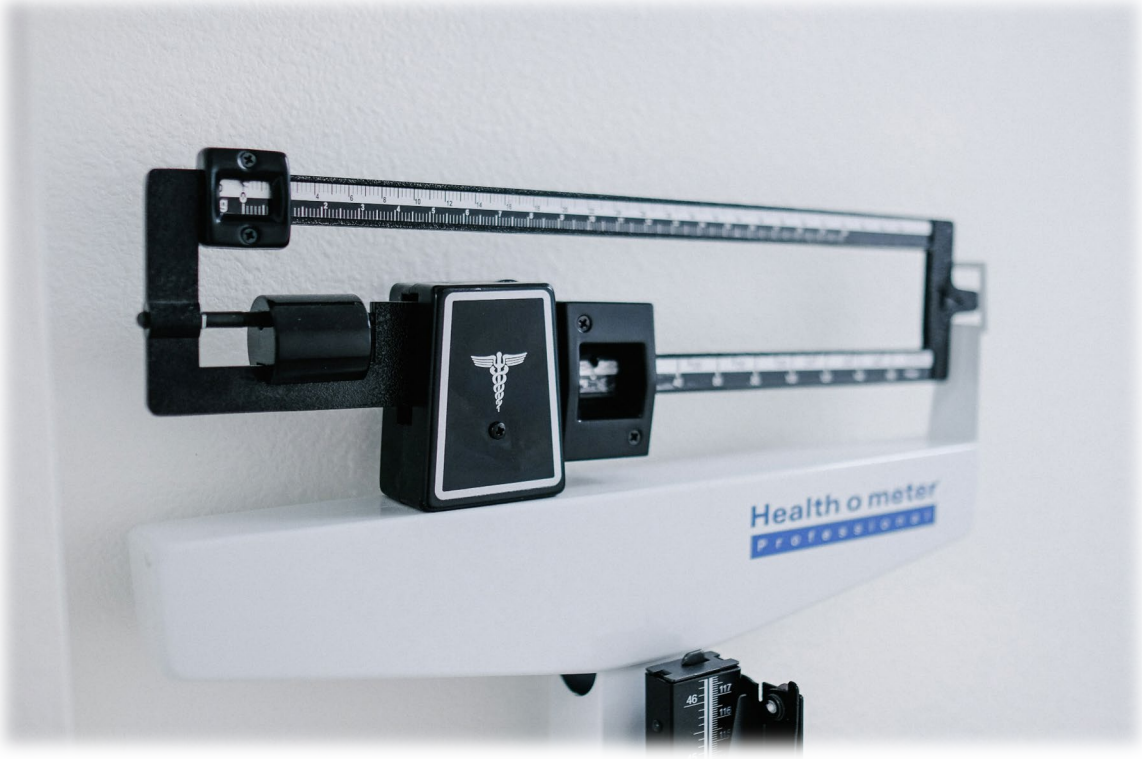
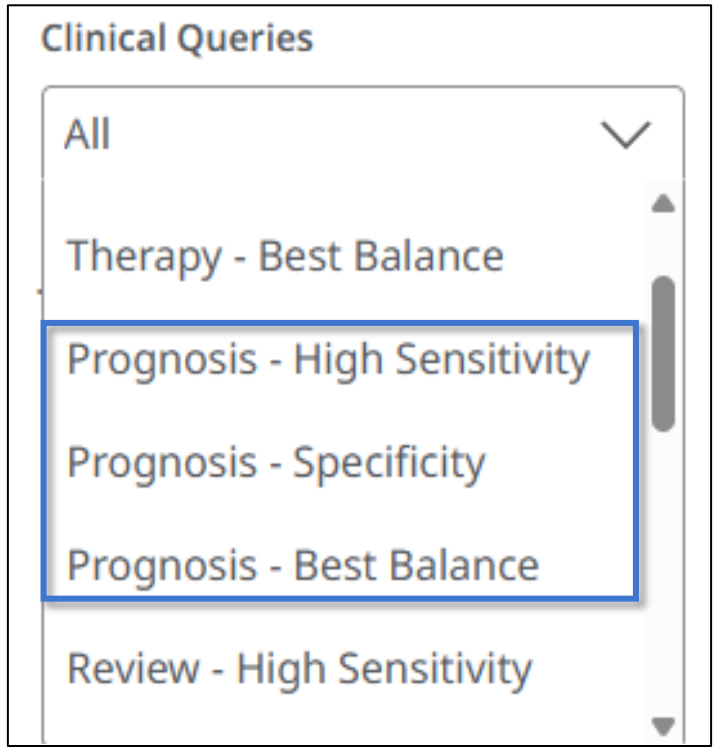


Photo by Quilia on Unsplash

Use PICO to frame & answer the question

Patient/Population/Problem	Intervention	Comparison	Outcome
Family history of obesity	**Carbs intake**	**None**	**Healthy weight**
Obesity *Obese* *Overweight* *Weight gain*	*Carbs* *Dietary* *Carbohydrates* *Carbohydrates*	*None*	*Weight loss* *Weight management* *Weight reduction* *Weight control* *Healthy weight* *Healthy BMI*
OBESITY	CARBOHYDRATES	NONE	WEIGHT GAIN WEIGHT CONTROL

CINAHL Clinical Queries Filter



Therapy

Prognosis

Review

Qualitative

Causation (Etiology)

For more information, please see CINAHL Clinical Queries

CINAHL Clinical Queries Filter –*"Prognosis"*

Clinical Queries are designed for clinician use. For reference, the search strategies behind the limiter values are below:

Prognosis - High Sensitivity:
((MH "study design+" not MM "study design+") or (TI diagnos* or AB diagnos* or MW diagnos*) or (TI outcome or AB outcome or MW outcome))

Prognosis - High Specificity:
((TI prognos* or AB prognos*) or (MH "prospective studies" not MM "prospective studies"))

Prognosis - Best Balance:
((TI diagnos* or AB diagnos* or MH "outcomes (health care)+") or (MH "prospective studies" not MM "prospective studies"))

For more examples, please see What are the search strategies used by CINAHL Clinical Queries?

1-50 of 51 total results

Show: 50 | Relevance

50 selected

All on this page: 50 (Up to 50)
Select 1-50
Select 500
Deselect all
Export results (Up to 25,000)

50 items. Use the dropdown menu to select up to 500.

reviewed | Academic Journal

ction of *heart failure* in a general population not aware of having the disease.

By: Tuv Pettersen, Michelle; Schirmer, Henrik; Aviles Solis, Juan Carlos; +2 more • **In:** Scandinavian Journal of Primary Health Care, Dec2025, volume 43, issue 4, pages 759-769 (11p) • CINAHL

Background: ***Heart failure*** (HF) is one of the most common causes of hospitalization and death worldwide. We aimed at identifying variables that can be helpful for early diagnosis of HF in primary care. Methods: In 2015–16, we included 2007 participants aged ≥ 40 years in the 7th Tromsø study. They underwent ***echocardiography*** and other examinations needed for establishing a diagnosis of HF according to European guidelines from 2016. We analyzed associations with HF among the 1863 participants who reported not to have HF. Variables significantly associated with HF were included in multivariable logistic regression analyses. Diagnostic models were further analyzed by ROC curves and areas under curve (AUC) were calculated, optimism corrected by bootstrapping. Results: The HF prevalence in the age groups 40–64 years, 65–74 years, and ≥ 75 years were 3.5%, 11.7% and 29.4%, respectively. A predictive model based on self-reported hypertension, myocardial infarction, atrial fibrillation, body-mass index and moderate to severe dyspnea had an AUC of 0.813 (95% CI 0.785–0.843). In a significantly stronger model, in which NT-proBNP was included and self-reported atrial fibrillation was replaced by atrial fibrillation on ECG, an AUC of 0.849 (95% CI 0.821–0.880) was reached. Conclusion: Easily available clinical information may be used both to rule out HF an to identify patients needing further examinations. A direct referral to ***echocardiography*** should be considered for elderly patients in primary care with a known cardiovascular disease and severe ***shortness*** of ***breath***. With less abundant history and symptoms, ECG and NT-proBNP can guide further investigations.

Show less

Subjects: ***Heart Failure*** Diagnosis; Early Diagnosis; Primary Health Care; ***Heart Failure*** Prevention and Control; +44 more

NHSScotland Full Text | More like this

2

Peer reviewed | Academic Journal

Developing core indicators for identifying people at risk of delayed *heart failure* diagnosis.

By: Barber, K.; Bernhardt, L.; McCann, GP; +5 more • **In:** BMC Primary Care, 10/16/2025, volume 26, issue 1, pages 1-11 (11p) • CINAHL

Background: ***Heart failure*** (HF) is frequently diagnosed during hospital admission, often after symptoms have been present for some time. Those diagnosed in hospital

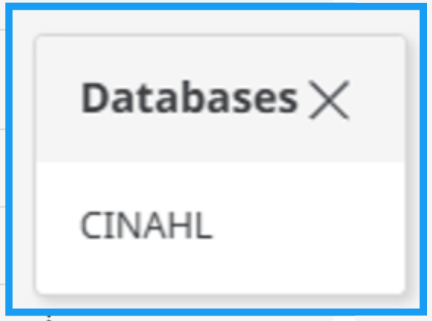


Combine individual searches using Boolean operators: Combine with AND | Combine with OR | Save search set

ID	Search	Search options	Results
	espiratory system*" OR respirat* OR cough OR "shortness of breath" OR wheezing OR "nasal ngestion"	Proximity; Apply equivalent subjects	216,386
	H "Respiratory System+"	Proximity; Appl	
	2) OR (S1)	Proximity; Apply equivalent subjects	262,675
	NP OR "brain type natriuretic peptide"	Proximity; Apply equivalent subjects	2,716
	H "Natriuretic Peptide, Brain"	Proximity; Apply equivalent subjects	5,908
S6	(S4) OR (S5)	Proximity; Apply equivalent subjects	7,014
S7	ECHO OR echocardiography	Proximity; Apply equivalent subjects	70,464
S8	MH "Echocardiography+"	Proximity; Apply equivalent subjects	50,182
S9	(S7) OR (S8)	Proximity; Apply equivalent subjects	70,464
S10	(heart OR cardiac OR congestive	Proximity; Apply equivalent subjects	90,320
S11	MH "Heart Failure+"	Proximity; Apply equivalent subjects	53,675
S12	(S10) OR (S11)	Proximity; Apply equivalent subjects	90,447
S13	(S3) AND (S6) AND (S9) AND (S12)		
S14	(S3) AND (S6) AND (S9) AND (S12)		

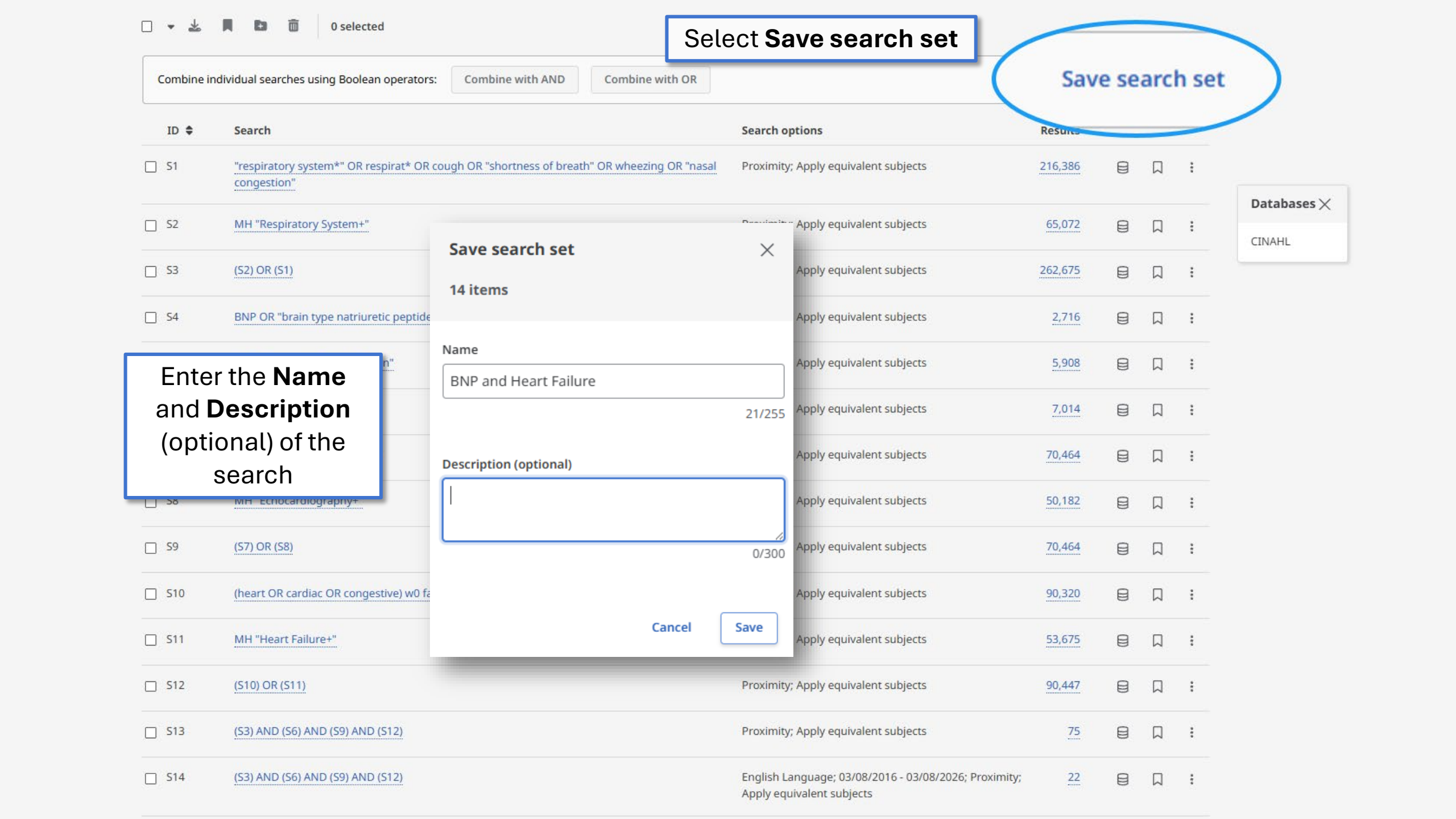
Bulk actions for downloading, saving, adding to a Project and deleting Search History

Database(s) shown

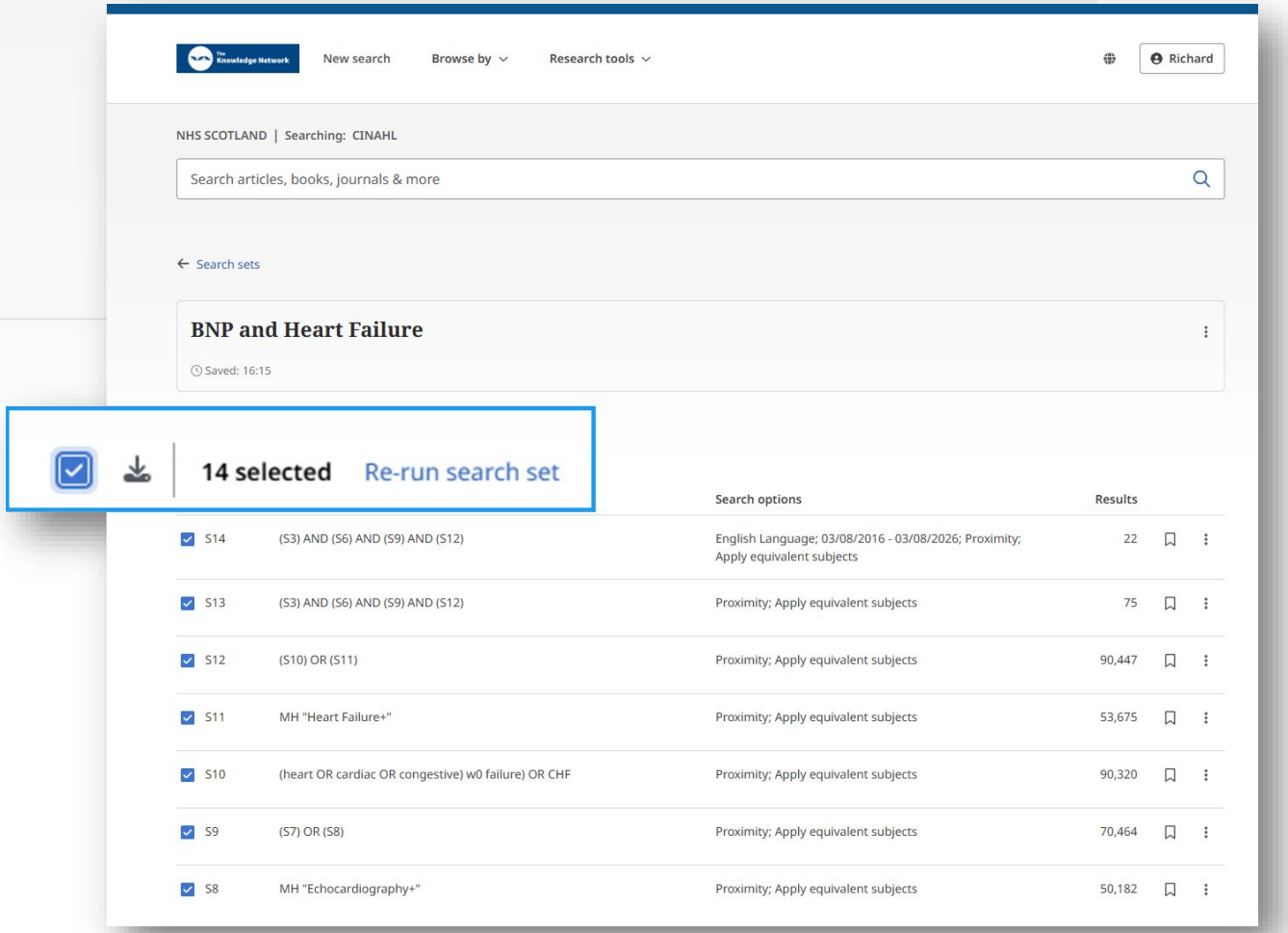


Filters are detailed and results sets hyperlinked to review results

English Language; 03/08/2016 - 03/08/2026; Proximity; Apply equivalent subjects 22


0 selected
Select Save search set
Save search set
Combine individual searches using Boolean operators:
Combine with AND
Combine with OR
ID
Search
Search options
Results
S1
"respiratory system*" OR respirat* OR cough OR "shortness of breath" OR wheezing OR "nasal congestion"
Proximity; Apply equivalent subjects
216,386
S2
MH "Respiratory System+"
Apply equivalent subjects
65,072
S3
(S2) OR (S1)
Apply equivalent subjects
262,675
S4
BNP OR "brain type natriuretic peptide
Apply equivalent subjects
2,716
Apply equivalent subjects
5,908
Apply equivalent subjects
7,014
Apply equivalent subjects
70,464
Apply equivalent subjects
50,182
S9
(S7) OR (S8)
Apply equivalent subjects
70,464
S10
(heart OR cardiac OR congestive) w0 fa
Apply equivalent subjects
90,320
S11
MH "Heart Failure+"
Apply equivalent subjects
53,675
S12
(S10) OR (S11)
Proximity; Apply equivalent subjects
90,447
S13
(S3) AND (S6) AND (S9) AND (S12)
Proximity; Apply equivalent subjects
75
S14
(S3) AND (S6) AND (S9) AND (S12)
English Language; 03/08/2016 - 03/08/2026; Proximity; Apply equivalent subjects
22
Databases
CINAHL
Save search set
14 items
Name
BNP and Heart Failure
21/255
Description (optional)
0/300
Cancel
Save
Enter the Name and Description (optional) of the search


The Knowledge Network
New search
Browse by
Research tools
Richard
NHS SCOTLAND | Searching: CINAHL
Search articles, books, journals & more
Saved
Records
Searches
Search sets
Search sets: 6
1 BNP and Heart Failure
Saved: 16:15


The Knowledge Network
New search
Browse by
Research tools
Richard
NHS SCOTLAND | Searching: CINAHL
Search articles, books, journals & more
Search sets
BNP and Heart Failure
Saved: 16:15
14 selected
Re-run search set
Search options
Results
S14 (S3) AND (S6) AND (S9) AND (S12) English Language; 03/08/2016 - 03/08/2026; Proximity; Apply equivalent subjects 22
S13 (S3) AND (S6) AND (S9) AND (S12) Proximity; Apply equivalent subjects 75
S12 (S10) OR (S11) Proximity; Apply equivalent subjects 90,447
S11 MH "Heart Failure+" Proximity; Apply equivalent subjects 53,675
S10 (heart OR cardiac OR congestive) w0 failure) OR CHF Proximity; Apply equivalent subjects 90,320
S9 (S7) OR (S8) Proximity; Apply equivalent subjects 70,464
S8 MH "Echocardiography+" Proximity; Apply equivalent subjects 50,182

Live Demo

ID	Search	Search options	Results
S1	MH "Obesity+" OR MH "Weight Gain+"	Proximity	135,435
S2	XB (obes* OR overweight OR weight n1 gain OR "over weight")	Proximity	160,145
S3	(S2) OR (S1)	Proximity	199,389
S4	MH "Carbohydrates+"	Proximity	153,807
S5	XB (carbohydrates OR carbs)	Proximity	19,001
S6	(S4) OR (S5)	Proximity	163,170
S7	MH "Weight Control" OR MH "Weight Reduction Programs"	Proximity	13,442
S8	XB ((weight AND (control OR manage* OR loss)) OR "healthy weight")	Proximity	87,961
S9	(S7) OR (S8)	Proximity	94,475
S10	(S3) AND (S6) AND (S9)	Proximity	4,735
S11	(S3) AND (S6) AND (S9)	Prognosis - Best Balance; Proximity	1,554
S12	(S3) AND (S6) AND (S9)	Prognosis - Best Balance; English Language; Past 10 years; Proximity	794

22



Peer reviewed | Academic Journal

Feasibility, safety, and efficacy of dietary or lifestyle interventions for hypothalamic *obesity*: A *systematic review*.

By: Van Roessel, I.M.A.A.; Van Den Brink, M.; Dekker, J.; +3 more • **In:** Clinical Nutrition, Aug2024, volume 43, issue 8, pages 1798-1811 (14p) • CINAHL

A dysfunctional hypothalamus may result in decreased feelings of satiety (hyperphagia), decreased energy expenditure, and increased fat storage as a consequence of hyperinsulinemia. Hypothalamic dysfunction may thus lead to morbid ***obesity*** and can be encountered in childhood as a consequence of congenital, genetic, or acquired disorders. There is currently no effective treatment for hypothalamic ***obesity*** (HO). However, comparable to alimentary ***obesity***, dietary and lifestyle interventions may be considered the cornerstones of ***obesity*** treatment. We questioned the effect of dietary or lifestyle interventions for HO and systematically searched the literature for evidence on feasibility, safety, or efficacy of dietary or lifestyle interventions for childhood hypothalamic ***overweight*** or ***obesity***. A systematic search was conducted in MEDLINE (including Cochrane Library), EMBASE, and CINAHL (May 2023). Studies assessing feasibility, safety, or efficacy of any dietary or lifestyle intervention in children with hypothalamic ***overweight*** or ***obesity***, were included. Animal studies, studies on non-diet interventions, and studies with no full text available were excluded. Because the number of studies to be included was low, the search was repeated for adults with hypothalamic ***overweight*** or ***obesity***. Risk of bias was assessed with an adapted Cochrane Risk of Bias Tool. Level of evidence was assessed using the GRADE system. Descriptive data were described, as pooled-data analysis was not possible due to heterogeneity of included studies. In total, twelve studies were included, with a total number of 118 patients (age 1–19 years) of whom one with craniopharyngioma, one with ROHHAD-NET syndrome, 50 with monogenic ***obesity***, and 66 with Prader–Willi syndrome (PWS). Four studies reported a dietary intervention as feasible. However, parents did experience difficulties with children still stealing food, and especially lowering ***carbohydrates*** was considered to be challenging. Seven studies reported on efficacy of a dietary intervention: a well-balanced restrictive caloric diet (30% fat, 45% ***carbohydrates***, and 25% protein) and various hypocaloric diets (8–10 kcal/cm/day) were considered effective in terms of ***weight*** stabilization or decrease. No negative effect on linear growth was reported. Four studies reported on specific lifestyle interventions, of which three also included a dietary intervention. Combined dietary and lifestyle intervention resulted in decreased BMI, although BMI returned to baseline values on long-term. One additional study was identified in adults after brain trauma and showed a significant reduction in BMI in one out of eight patients after a combined dietary and lifestyle intervention. Hypocaloric diet or restrictive macronutrient diet with lower percentage of ***carbohydrates*** seems feasible and effective for childhood HO, although most of the studies had a high risk of bias, small cohorts without ***control*** groups, and were conducted in children with PWS only, compromising the generalizability. Lifestyle interventions only resulted in BMI decrease in short-term, indicating that additional guidance is needed to sustain its effect in the long-term. Literature on feasibility and efficacy of a dietary or lifestyle intervention for hypothalamic ***overweight*** or ***obesity*** is scarce, especially in children with acquired HO (following treatment for a suprasellar tumor). There is need for prospective (controlled) studies to determine which dietary and lifestyle intervention are most helpful for this specific patient group.

Show less

Subjects: Pediatric ***Obesity*** Therapy; Hypothalamic Diseases Therapy; Hypothalamic Diseases Therapy; Diet Therapy; +13 more

NHSScotland Full Text | Cited by 12 | More like this

Check Title, Abstract for keywords / Search terms and CINAHL Headings

Take Home Points

Use PICO (or alternative) frameworks to construct search strategies.

Search using Title or Abstract (XB) & CINAHL (Subject) Headings (thesaurus terms).

Use the EBSCOhost syntax for databases.

Select up to 500 records to download, save, add to a Project, share or export results

Use Save Search Sets to save & re-run searches

Create Projects to store, retrieve results & searches

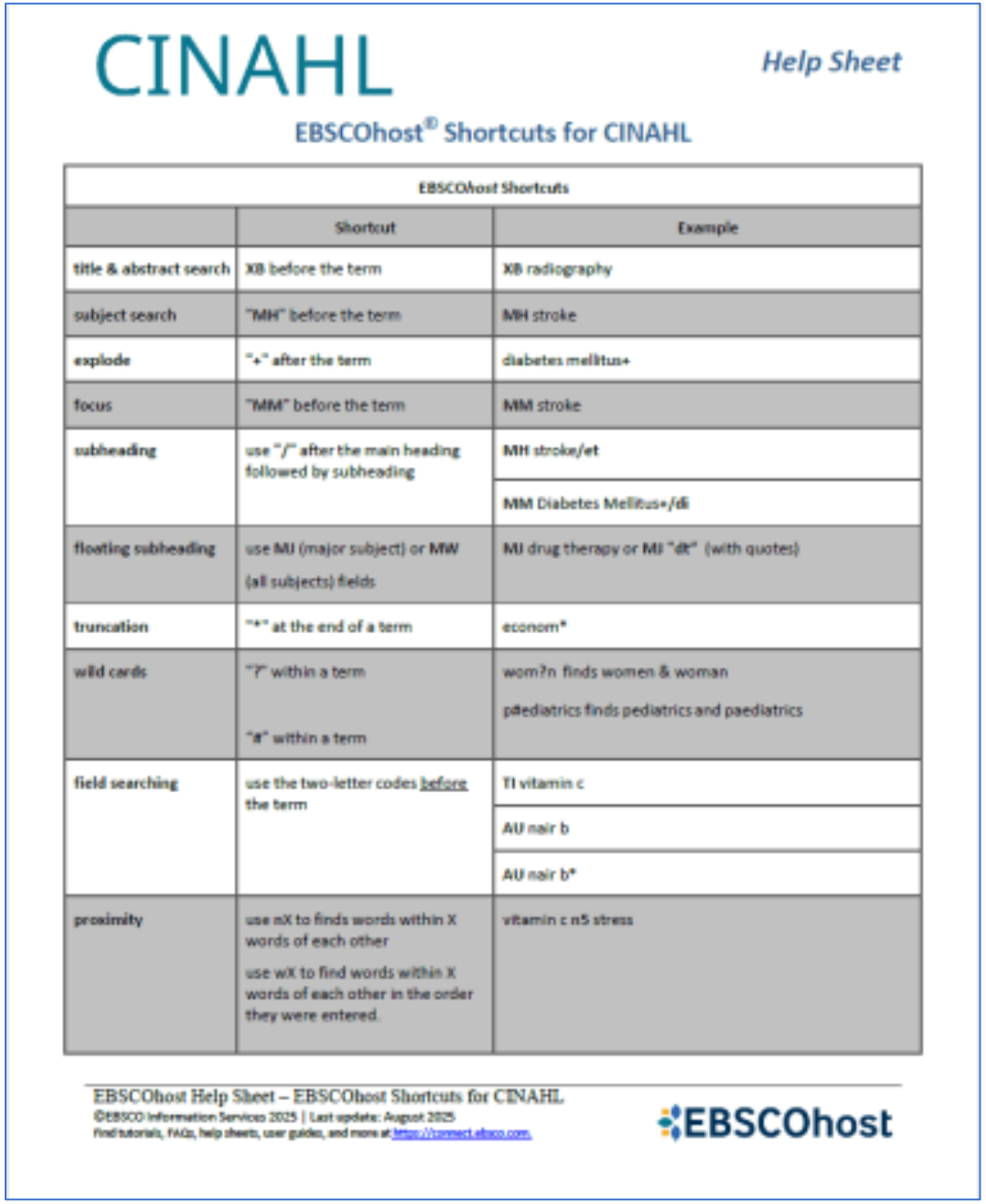
Training Support

CINAHL Shortcuts

For further information, the syntax used for searching on the EBSCOhost interface for CINAHL is detailed on this help sheet:

https://connect.ebsco.com/s/article/Transitioning-to-EBSCOhost-Help-Sheets?language=en_US

Also, available for *MEDLINE*.



CINAHL

Help Sheet

EBSCOhost® Shortcuts for CINAHL

EBSCOhost Shortcuts		
	Shortcut	Example
title & abstract search	XB before the term	XB radiography
subject search	"MH" before the term	MH stroke
explode	"+" after the term	diabetes mellitus+
focus	"MM" before the term	MM stroke
subheading	use "/" after the main heading followed by subheading	MH stroke/et
		MM Diabetes Mellitus+/di
floating subheading	use MJ (major subject) or MW (all subjects) fields	MJ drug therapy or MJ "dt" (with quotes)
truncation	"*" at the end of a term	econom*
wild cards	"?" within a term	wom?n finds women & woman
	"#" within a term	p#ediatrics finds pediatrics and paediatrics
field searching	use the two-letter codes before the term	TI vitamin c
		AU nair b
		AU nair b*
proximity	use nX to finds words within X words of each other	vitamin c n5 stress
	use wX to find words within X words of each other in the order they were entered	

EBSCOhost Help Sheet – EBSCOhost Shortcuts for CINAHL

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Find tutorials, FAQs, help sheets, user guides, and more at https://connect.ebsco.com

EBSCOhost

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EBSCOhost Filters for the New User Interface

EBSCOhost - Advanced Search

How to Use Search Sets in EBSCO Interfaces

A+ A- English

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Help on the Hub | EBSCO Academy
EBSCO Connect | Promotional Materials



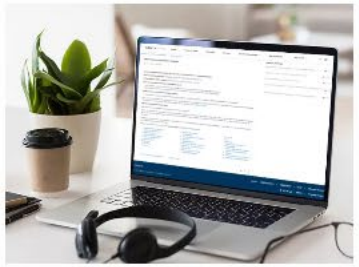
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Training Sessions

To book online, instructor-led sessions on MS Teams via Calendly.



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For FAQs, tutorials, user guides and more.

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Introducing Dyna AI for DynaMed, a generative artificial intelligence capability that surfaces the information clinicians need at the point of care faster than ever.



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https://nhsresources.stacksdiscovery.com/

EBSCO Health Notes

Beyond Keywords: Using Subject Headings to Find Better Nursing Evidence
EBM Focus | 2026-09-10 15:00:00

Flight 2482 and the Value of DynaMed
EBM Focus | 2026-08-27 19:00:00

Annual Legionella Outbreaks in Hot Urban Settings: What Physicians Should Know
EBM Focus | 2026-08-25 19:00:00

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- Product Help Updates for August 2026
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