APPENDIX D: Study settings and characteristics

Author, Year	Title	Study Nation, Setting	Study Design	Total study participants (intervention, Control Patients)	No of Study Subjects, if not patients; Total, Intervention, Control	Quality score
Gonzalo et al., 2014	Bedside interprofessional rounds: Perceptions of benefits and barriers by internal medicine nursing staff, attending physicians, and housestaff physicians.	USA, university	Observational, cross- sectional study	NA	149/171 (RR 87%). 53/58 Nursing staff (RR 91%), 21/28 attending physicians (RR 75%), and 75/85 housestaff physicians (RR 88%).	16
Gonzalo et al., 2016	Interprofessional collaborative care characteristics and the occurrence of bedside interprofessional rounds: a cross-sectional analysis.	USA, university	Observational, cross- sectional study	29173	NA	11
Lehmann et al., 1997	The effect of bedside case presentations on patients' perceptions of their medical care.	USA, university	RCT	182 (95, 87)	NA	19
Curley et al., 1998	A firm trial of interdisciplinary rounds on the inpatient medical wards: an intervention designed using continuous quality improvement.	USA, university	RCT	1102 (567,535)	NA	19
Luthy et al.,2017	Bedside or not bedside: Evaluation of patient satisfaction in intensive medical rehabilitation wards.	Switzerland, university	Prospective quasi- experimental controlled study	180 (90,90)	NA	17
Uhlig, 2002	System innovation: Concord Hospital.	USA, university	Descriptive study	NA	NA	7
O'leary et al., 2015	Effect of patient-centred bedside rounds on hospitalised patients' decision control, activation and satisfaction with care.	USA, university	Cluster RCT	236/650 (114,122)	NA	20
Chow, 2018	Structured Interdisciplinary Bedside Rounds in an Australian tertiary hospital emergency department: Patient satisfaction and staff perspectives	Australia, university	Observational cross- sectional study	320(101,219)	65 doctors, 68 nurses	16

Malec, 2018	The Care Team Visit Approaching Interdisciplinary Rounds With Renewed Focus	USA, university	Before- after study	NA	35 nurses, 20 other care providers	12
Burdick et al.,2017	Bedside interprofessional rounding: the view of the patient's side of the bed.	USA, university	Descriptive study	35	NA	13
Cardarelli et al., 2009	Dissecting Multidisciplinary Cardiac Surgery Rounds.	USA, university	Descriptive study	20	NA	14
Begue et al., 2012	Retrospective Study of Multidisciplinary Rounding on a Thoracic Surgical Oncology Unit.	USA, university	Retrospective study	3077	NA	15
Dutton et al., 2003	Daily Multidisciplinary Rounds Shorten Length of Stay for Trauma Patients.	USA, university	Retrospective study	13362	NA	15
Bhamidipati et al., 2016	Structure and Outcomes of Interdisciplinary Rounds in Hospitalized Medicine Patients: A Systematic Review and Suggested Taxonomy.	USA, university	Systematic review	NA	NA	5
Cornell et al., 2014	Improving situation awareness and patient outcomes through interdisciplinary rounding and structured communication.	USA, university	Observational study	NA	960 patient reviews	17
Dunn et al., 2017	The impact of bedside interdisciplinary rounds on length of stay and complications.	USA, university	Controlled trial	2005(1089,916)	NA	18
Huynh et al., 2017	Structured interdisciplinary bedside rounds do not reduce length of stay and 28-day readmission rate among older people hospitalised with acute illness: an Australian study.	Australia, university	Prospective- retrospective study	3644 (1962,1682)	NA	15
Cao et al., 2017	Patient-Centered Structured Interdisciplinary Bedside Rounds in the Medical ICU.	USA, university	Prospective study	NA	665 IBR encounters	15
Basic et al.,2018	Structured interdisciplinary bedside rounds, in-hospital deaths, and new nursing home placements among older inpatients	Australia, university	Before-after study	3673 (1703,1970)	NA	17

Shaugnessey et al., 2015	Introduction of a new ward round approach in a cardiothoracic critical care unit.	UK, university	Observational study	69	69 nurses,23 MDT members	9
Pronovost et al., 2003	Improving communication in the ICU using daily goals.	USA, university	Prospective cohort study	NA	6 residents, 3 NP's	10
Montague et al., 2004	Staff attitudes to a daily otolaryngology ward round.	Scotland,medical school	Observational study		26/35 members of staff	12
Urisman et al.,2017	Impact of surgical intensive care unit interdisciplinary rounds on interprofessional collaboration and quality of care: Mixed qualitative–quantitative study	USA, university	Mixed qualitative- quantitative study	87 patients pre- intervention, 82 patients post-intervention	79/130 RN's completed the pre-intervention survey, 65/130 the post- intervention survey 17/25 surgeons	10
Gausvik et al., 2015	Structured nursing communication on interdisciplinary acute care teams improves perceptions of safety, efficiency, understanding of care plan and teamwork as well as job satisfaction.	USA, university	Mixed methods study	NA	62(24,38) staff members	9
Jain et al., 2006	Decline in ICU adverse events, nosocomial infections and cost through a quality improvement initiative focusing on teamwork and culture change.	USA, hospital	Observational study	NA	NA	15
Mackintosh et al.,2009	Supporting structures for team situation awareness and decision making: insights from four delivery suites.	UK, university	Observational study	NA	NA	8
Henneman et al., 2013	Development of a Checklist for Documenting Team and Collaborative Behaviors During Multidisciplinary Bedside Rounds.	USA, university	Descriptive study	NA	NA	6
Rimmerman, 2013	Establishing Patient-Centered Physician and Nurse Bedside Rounding.	USA, hospital	Pilot study	NA	NA	5
Prystajecky et al., 2016	A case study of healthcare providers' goals during interprofessional rounds.	Canada, university	Case study	NA	26 staff members	13
Beaird et al., 2017	Perceptions of Teamwork in the Interprofessional Bedside Rounding Process.	USA, university	Cross-sectional descriptive study	63	NA	17

Gonzalo et al., 2014	Patient-Centered Interprofessional Collaborative Care: Factors Associated with Bedside Interprofessional Rounds.	USA, university	Observational descriptive study	NA	25 physicians	16
Young et al., 2017	Administration Time on Interdisciplinary Bedside Rounds on Academic Medical Ward.	USA, university	Descriptive study	NA	7 staff members	13
Kucukarslan et al., 2003	Pharmacists on rounding teams reduce preventable adverse drug events in hospital general medicine units.	USA, hospital	Single-blind, standard care-controlled study	165(86,79)	2pharmacists	17

RR: response rate; NA: not applicable; RCT: randomized controlled trial; MDT: multidisciplinary team, RN; registered nurse; NP; nurse practitioners