## Search Results Screen

Once you click on Go or press the Enter key, PubMed will automatically:

C Run the search C Retrieve and display citations

The following is the Results screen returned by PubMed for the search example of :

### Citations to articles about experiencing pain due to gallstones.

Live <b>query box</b> displaying current	gallstones pain	Go Clear		
search.				
	Display Summary -	Show: 20 💌	Selec	t page: 1 2 3 4 5 6 7 8 9 10 >>
Display options	Details Add to Clipboard Save		1-20 items of 1249	1 page of 63
Show pull-down				
<b>Details</b> button <b>Add to Clipboard</b> button	I: Borden M. et al. Index of suspicion. Case #3. Discussion: he Pediatr Rev. 1999 Aug;20(8):273; discussion 27. PMID: 10465722; UI: 99392630	reditary spherocytosis. 56. No abstract available.		Related Articles
Save Button	□ 2 : Joo YE. et al.			Related Articles
Citations are displayed in the	A case of xanthogranulomatous cholecystit Korean J Intem Med. 1999 Jul;14(2):90-3. [MEDLINE record in process] PMID: 10461432; UI: 99390533	is.		
Summary format.	□ 3 : Corazziari E, et al. Functional disorders of the biliary tract and Gut. 1999 Jul;45 Suppl 2:II48-II54. [Record as supplied by publisher] PMID: 10457045	pancreas.		Related Articles
	4 : <u>Tokumine F, et al.</u> Drug-associated cholelithiasis: a case of sul Am J Gastroenterol. 1999 Aug;94(8):2285-8. PMID: 10445564; UI: 99372736	lindac stone formation and t	the incorporation of sulindac me	Related Articles tabolites into the gallstones.

See next page for further explanation.

# **Results Screen**

### **Query Box containing Current Search**

gallstones pain	Go	Clear

CThe query box displays **your** search.

CThis box is active; you can modify the current search by adding or eliminating terms and clicking on the **Go** button.

CClick on the **Clear** button to clear out the search in the query box and start a new search.

### **Action Bar Selections**

- These options are available both at the top and the bottom of the Results screens.
- The following workbook pages will explain each function.

Display	Summary 💌		Show: 20 💌	Select page: 1 2 3 4 5 6 7 8 9 10 >>
Details	Add to Clipboard	Save	1-20 items of 1248	1 page of 63

# **Display Options**

## **Summary Format**

PubMed citations are initially displayed in the Summary format.

I : Tokumine F, et al. Drug-associated cholelithiasis: a case of sulindac stone formation and the incorporation of sulindac metabolites into the gallstones. Am J Gastroenterol. 1999 Aug.94(8):2285-8. PMID: 10445564; UI: 99372736

A summary citation consists of the following:

- **CAuthor name:** If more than one author wrote the article, only the first author is displayed.
- CLinks: Available links such as Related Articles, Protein, Nucleotide, etc. (LinkOut not displayed in the Summary format.)
- **CTitle of the article:** Foreign language titles will be translated into English and placed within brackets.
- **C**Source: Provides journal title abbreviation, date of publication, volume, issue, and pagination. Will also include language (for non-English articles) and Publication Type if the article is a review or retracted publication. Articles without abstracts will display the notation: "No abstract available".
- C[Record as supplied by publisher] or [MEDLINE record in process] tags may appear.
- **CIdentification numbers**. Provides the PubMed identifier (PMID) and the MEDLINE Unique Identifier (UI).

# **Additional Display Options**

You can access other display formats from the Results screen in the following manner:

- **CIndividual Citations**: Clicking on the Author name hyperlink will display the citation in the default Abstract Report format.
- **CAll Citations**: Clicking on the **Display** button without selecting any of the citations will display all of the citations listed on the page in the selected display format. Summary is the default format.
- **C**Selected Citations: Clicking on the boxes found to the left of the of the citation number allows you to select multiple records for retrieval. Clicking on the **Display** button will display the citations in the selected display format. Summary is the default format.

# **Other Display Formats**

The pull-down menu next to the **Display** button allows the user to select available display formats:

Display	Summary 🔹
	Summary
	Brief
	Abstract
	Citation
	MEDLINE
	ASN.1
	Providers Links
	Related Articles
	Protein Links
	Nucleotide Links
	Popset Links
	Structure Links
	Genome Links



Summary, Brief, Abstract, Citation, MEDLINE, Related Articles, and Providers Links are the most appropriate selections for bibliographic information.

Take Note:

# **Brief Format**

□ 1 : <u>Tokumine F, et al.</u> Drug-assoc...[PMID:10445564]

A citation displayed in the brief format includes:

- Author name
- first 10 characters of the title
- PubMed Unique Identifier (PMID)

## Abstract

Provides the following information:

- C Journal Source (journal title abbreviation, date of publication, volume, issue and pagination)
- C If necessary, [Record supplied by publisher] or [MEDLINE record in process] tags

C Title

- C On non-English language articles, [Article in *language*] tag
- C Authors (up to 25)

- C Author affiliation (address) of first author at time of publication
- C Abstract (if present) from published article
- C Publication Types (except for Journal Article Publication Types)
- C Erratum strings from Title rubrics

C Comments

CPubMed & MEDLINE Unique Identifiers

### Legend:

1.	1 : Am J Gastroenterol 1999 Aug;94(8):2285-8 Related Articles
2.	Drug-associated cholelithiasis: a case of sulindac stone formation and the incorporation of sulindac metabolites into the gallstones.
3.	Tokumine F, Sunagawa T, Shiohira Y, Nakamoto T, Miyazato F, Muto Y
4.	Department of Surgery, Prefectural Naha Hospital, Naha-city, Okinawa, Japan.
5.	A case of drug-associated cholelithiasis (sulindac chlecystohepatolithiasis) in a 63-yr-old woman is reported. The patient was admitted to our hospital to undergo treatment for rheumatoid arthritis of 20 yr duration. She was treated with nonsteroidal anti-inflammatory drugs (NSAID: sulindac). Two months later, she presented with right upper quadrant pain. Diagnostic studies including ultrasonography (US), computed tomography (CT) and endoscopic retrograde cholangiography (ERC), led to the diagnosis of cholecystohepatolithiasis. She underwent cholecystectomy and choledochotomy with an extraction of intrahepatic stones. The intrahepatic stones were light yellow in color with a claylike appearance. Unexpectedly, an infrared spectroscopic analysis of the stone showed it to consist of sulindac metabolites. In addition, the dilated segment of the intrahepatic bile duct naturally returned to its normal size after the discontinuation of the drug administration. This is the first reported case of sulindac stone formation in the bile duct. No similar problems with other NSAIDs have been reported previously.
6.	PMID: 10445564, UI: 99372736

- 1. Journal Source
- 2. Title
- 3. Authors
- 4. Author Affiliation (Address)
- 5. Abstract
- 6. PubMed and MEDLINE Unique Identifiers

## Citation

Provides the following information:

- Journal Source
- C If necessary, [Record supplied by publisher] or [MEDLINE record in process] tags
- Title
- C On non-English language articles, [Article in *language*] tag
- Authors
- Address or affiliation of first author
- Abstract (if present)

#### • Publication Types (except for the Journal Article pub. type)

- C Erratum strings from Title rubrics
- Comments
- MeSH Terms
- C Personal Name as Subject
- Chemical substances (if present)
- Grant numbers (if present)
- PubMed and MEDLINE Unique Identifiers

#### 🗖 1 : Am J Gastroenterol 1999 Aug;94(8):2285-8

#### Related Articles

Drug-associated cholelithiasis: a case of sulindac stone formation and the incorporation of sulindac metabolites into the gallstones.

#### Tokumine F, Sunagawa T, Shiohira Y, Nakamoto T, Miyazato F, Muto Y

Department of Surgery, Prefectural Naha Hospital, Naha-city, Okinawa, Japan.

A case of drug-associated cholelithiasis (sulindac chlecystohepatolithiasis) in a 63-yr-old woman is reported. The patient was admitted to our hospital to undergo treatment for rheumatoid arthritis of 20 yr duration. She was treated with nonsteroidal anti-inflammatory drugs (NSAID: sulindac). Two months later, she presented with right upper quadrant pain. Diagnostic studies including ultrasonography (US), computed tomography (CT) and endoscopic retrograde cholangiography (ERC), led to the diagnosis of cholecystohepatolithiasis. She underwent cholecystectomy and choledochotomy with an extraction of intrahepatic stones. The intrahepatic stones were light yellow in color with a claylike appearance. Unexpectedly, an infrared spectroscopic analysis of the stone showed it to consist of sulindac metabolites. In addition, the dilated segment of the intrahepatic bile duct naturally returned to its normal size after the discontinuation of the drug administration. This is the first reported case of sulindac stone formation in the bile duct. No similar problems with other NSAIDs have been reported previously.

#### MeSH Terms:

- Anti-Inflammatory Agents, Non-Steroidal/analysis
- Anti-Inflammatory Agents, Non-Steroidal/adverse effects\*
- Anti-Inflammatory Agents, Non-Steroidal/administration & dosage
- Arthritis, Rheumatoid/drug therapy\*
- Case Report
- Cholelithiasis/chemically induced\*
- Cholelithiasis/chemistry
- ∘ Female
- Human
- Middle Age
- Spectrophotometry, Infrared
- Sulindac/analysis
- Sulindac/adverse effects\*
- Sulindac/administration & dosage

#### Substances:

- Sulindac
- Anti-Inflammatory Agents, Non-Steroidal

PMID: 10445564, UI: 99372736

### MEDLINE

CTwo-character tagged field format displaying all fields of the MEDLINE record.

```
1 : <u>Tolomine F, et al.</u> Drug-assoc...[PMID:10445564]
            UΙ
                  - 99372736
            DA.
                  - Iakumine P
            DA
                  - Sunagawa I
            DA.
                  - Shioĥica Y
                  - Wakamoto I
            AU
                  - Miyazato P
            M
            AU
                   - Χωΐο Υ
                  - Drug-associated cholelithiasis: a case of sulindar stone formation and the
            ĪI
                       incorporation of sulindar metabolites into the gallstones.
            LA - Eng
                  - Anti-Inflammatory Agents, Won-Steroidal/administration & dosage/*adverse
            ЖH
                      effects/analysis
            ЖH
                  - Acthcitis, Rheumatoid/*drug therapy
                 - Case Report
- Cholelithiaaia/chemistry/*chemically induced
            ЖΗ
            ЖH
            ЖΗ
                  - Pemale
                  - Нитал
            ЖH
                 - Nodel
- Middle Age
- Spectrophotometry, Infrared
- Sulindac/administration & dosage/^adverse effects/analysis
- Sulindac/administration & Mon-Steroidal)
            ЖH
            ЖH
            ЖH
            ЪЙ
            ЪЙ
                  - 38194-50-2 (Sulindae)
            PT.
                  - JOURNAL ARTICLE
                   - 19990823
            Aŭ
                  - 1999 Aug
- 0002-9270
            DP
            IS
            1A
                  - Am J Gastcoentecol
            PG - 2285-8
SB - M
            SB - X
                  - UNITED STATES
            CY.
                  - 8
            IP
            ΔI
                   - 94
            JC
                  - 3HE
            AA
                  - Author
                  - 199910
            EX

    A case of drug-associated cholelithiasis (sulindae
chlecystohepatolithiasis) in a 63-yr-old woman is reported. The patient
was admitted to our hospital to undergo treatment for cheumatoid arthritis

            AR.
                       of 20 yr dwration. She was treated with nonsteroidal anti-inflammatory
drugs (XSAID: sulindar). Two months later, she presented with right upper
                      drugs (ASAID: sulindsc). Two months faces, she presented with right upper
quadeant pain. Bisgnostic studies including ultrasonography (US), computed
tamography (CI) and endoscopic retrograde cholangingraphy (BRC), led to
the diagnosis of cholecystohepatolithiasis. She underwent cholecystectomy
and choledochotomy with an extraction of intrahepatic stones. The
intrahepatic stones were light yellow in color with a claylike appearance.
Unexpectedly, an infrared spectroscopic analysis of the stone showed it to
consist of sulindar metabolites. In addition, the dilated segment of the
intrahepatic stores the structure of the interaction of the stone showed it to
                       intrahepatic bile duct naturally returned to its normal size after the
                       discontinuation of the drug administration. This is the first reported
            case of sulindae stone formation in the bile duct. We similar problems
with other MSAIDs have been reported previously.
AD - Department of Surgery, Prefectural Waha Hospital, Waha-city, Okinawa,
                       Japan.
            PMID- 0010445564
            SO - Am J Gastroenterol 1999 Aug;94(8):2285-8
```



Use this format for downloading records into bibliographic management software programs.

Take Note:

## Show pull-down menu

• PubMed displays search results in batches of 20 citations per page.

Display Summary 💽 Show:	20 💽 Select page: 1 2 3 4 5	678910>>
Details Add to Clipboard Save	5 10 20 20 1-20 items of 1249	1 page of 63
□ 1 : <u>Borden M, et al.</u> Index of suspicion. Case #3. Discussion: hereditary sphero	50 100 200 500	Related Articles

- Click on the Show pull-down menu to select a high/lower number and then click Display.
- PubMed redisplays the citations based on your selection

### **Select Page**

Display	Summary 💌		Show: 20 💽		$\Rightarrow$	Select page: 1 2 3 4 5 6 7 8 9 10 >>
Details	Add to Clipboard	Save		1-20 items of 1248		1 page of 63

- The Results screen will have links to the other pages containing the rest of the search results. Click on the next page of results you wish to display.
- The page number you are currently displaying is in a different color than the other page numbers.
- Click on the >> symbol to see page numbers greater than the ones displayed.
- Click on the << symbol to see page numbers less than the ones displayed.
- Directly below this function box, you can see what page is being display and the total number of pages:

Display	Summary 💌		Show: 20 💌	Select p	bage: 1 2 3 4 5 6 7 8 9 10 >>
Details	Add to Clipboard	Save	1-20 items of 1248		1 page of 63

## Details

Display	Summary 💌		Show: 20 💌	Select page: 1 2 3 4 5 6 7 8 9 10 >>
Details	Add to Clipboard	Save	1-20 items of 1248	1 page of 63

CClicking on the Details button displays your search strategy as it was translated by PubMed including MeSH vocabulary term mappings as well as mappings from the PubMed phrase index.

CError messages (e.g., stopwords, truncation warnings, misspellings) are also displayed.

CThe PubMed Query box in Details allows you to edit a search strategy and resubmit it.

CDetails also allows you to save a search strategy.

### Here's a closer look at Details :

	PubMed Query:					
You can modify the search strategy if you wish and then click on the <b>Search</b> button.	((("cholelithiasis"[MeSH Terms] OR gallstones[Text Word]) AND ("pain"[MeSH Terms] OR pain[Text Word])) AND notpubref[sb]) h					
Click on the <b>URL</b> button to create a URL that allows you to save your search strategy.	Search URL	¥				
Click on the <b>Result</b>	Result:					
number hyperlink to	1248					
return to the current	Translations:					
seurch resuits.	gallstones[All Fields]	("cholelithiasis"[MeSH Terms] OR gallstones[Text Word])				
PubMed's Translations	pain[All Fields]	("pain"[MeSH Terms] OR pain[Text Word])				
	Database:					
	PubMed					
	User Query:					
	gallstones pain					



PubMed is actually a subset of the larger database, PubRef. PubMed searches always exclude PubRef citations unless you delete the "AND notpubref [sb]" from the PubMed Query bar and click Search.

Take Note:

# Saving a search strategy from Details:

- Click on the **URL** button. PubMed will return to the search results screen. The translated search strategy will be displayed in the query box and this search strategy will also be embedded as part of the URL.
- Next, use your Web browser's bookmark function to save the URL as a bookmark. After saving the bookmark, you may want to use your Web browser's edit functions to rename the bookmark.
- See Caution in PubMed-Features Bar (Section G) about the History feature and saving strategies.

### **Current Awareness Searching**

If you wish to run a search periodically to retrieve recent information since you last ran the search, you can:

CSave the strategy using the URL button in Details and then bookmark the results.

CConsider using the Entrez date pull-down menu in Limits to restrict the retrieval to a particular Entrez date range (e.g., 30 days, 60 days, etc.)

CRe-run the strategy by selecting the saved URL from your browser.



Take Note:

*Caution:* Be aware that the Entrez Date will remain unchanged and is not updated to reflect the date a Publisher Supplied [Record as supplied by publisher] record is elevated to PREMEDLINE or when a PREMEDLINE [MEDLINE record in process] record is elevated to MEDLINE. Therefore, use caution when your strategy includes only MeSH terms because the addition of MeSH terms to a record will not change the Entrez Date [edat].

## Add to Clipboard

Display Summary 💌	Show: 20 💌	Select page: 1 2 3 4 5 6 7 8 9 10 >>
Add to Clipboard S	ave 1-20 items of 1248	1 page of 63

- The clipboard allows you save or view selected citations from one search or several searches that you may want to print, save, or order.
- The maximum number of items that can be placed in the Clipboard is 500.
- The Clipboard will be **lost after one hour of inactivity** on PubMed or any of the other Entrez databases.
- To place an item in the Clipboard, click on the check-box to the left of the citation and then click on the **Add to Clipboard** button.
- Once you have added a citation to the Clipboard, the record number color will change.

### Save

Display Summary	×	Show: 20 💌	Select page: 1 2 3 4 5 6 7 8 9 10 >>
Details Add to 0	Clipboard Save <	1-20 items of 1248	1 page of 63

- To save your entire set of search results, use the Display pull-down menu to select the desired format, click Display, then click Save. Although just the first batch of citations are displayed, this save option will save the entire set of search results.
- To mark **selected citations to save**, click on the check-box to the left of each citation as you go through each page of your retrieval. Once you have marked all of your selected citations, click the **Save** button.



The maximum number of items that can be saved is **5000**. If you try to save a file with more than 5000 citations, PubMed will display an error message that instructs you to refine your search.

Take Note:

# **Retrieval Summary**

Display	Summary 🔹		Show: 20 💌		Select page: 1	2345	6 7 8 9 10 >>
Details	Add to Clipboard	Save	t	l-20 items of 1248 <	1		1 page of 63

• The retrieval summary line displays the total number of citations that have been retrieved by the current search, and how many pages of citations there are given the selected number of citations per page (default = 20 citations/page).

# Printing

- CUse the Print function of your Web browser which will print all the information and citations displayed on your Web page.
- C Consider using the Show pull-down menu to display all of your citations on one Web page. You can only print the citations from the displayed page.