Using PsycINFO to locate articles for Nursing Research.
Start by following the link to the Edison State Databases.
If you are not on the Piqua or Darke County Campuses, you must use the link For Use Off Campus. This will require you to input your name and Library barcode number (the 14 digit number on the back of your student ID). If you don’t have access to the barcode number, contact the Library by phone or email.

PsychINFO is on the main database page.
Start your research with a basic keyword or text search. Keywords are the most important words in a topic. For example, if my topic is “What is the effect of music therapy on patients in nursing homes?” music therapy and nursing would be the keywords and I’d be most effective starting my search for both in the complete text.
Interlibrary Loan requests can take several weeks and cost $25 or more. To eliminate that possibility, limit the search to full text articles.
1. **Music therapy**: A nonpharmacological approach to the care of agitation and depressive symptoms for nursing home residents with dementia.


   **Subjects**: Agitation; Dementia; Major Depression; Music Therapy; Adulthood (18 yrs & older); Middle Age (40-64 yrs); Aged (65 yrs & older); Very Old (85 yrs & older); Male; Female

2. **Individualized music program is associated with improved outcomes for U.S. Nursing home residents with dementia.**

   Thomas, Kali S.; Baker, Rosa; Kosar, Cyrus; Ogar, Jessica; Trepuran, Alissa; Moore, Vincent; The American Journal of Geriatric Psychiatry, Vol 25/9, Sep, 2017 pp. 931-938. Publisher: Elsevier Science; (Journal Article)

   **Subjects**: Alzheimer's Disease; Dementia; Music Therapy; Nursing Homes; Adulthood (18 yrs & older); Aged (65 yrs & older); Male; Female

3. **Music therapy clinical practice in hospice: Differences between home and nursing home delivery.**
One easy way to improve your search is to find Subject Headings that match your research. Here we have “music therapy” and “nursing homes.”
Copy the subject headings into the search boxes, and change the search fields to *SU Subjects*. 


Subjects: Alzheimer's Disease; Dementia; Music Therapy; Nursing Homes

2. Individualized music program is associated with improved outcomes for U.S. Nursing home residents with dementia.

Thomas, Kati S.; Baier, Rosa; Kosar, Cyrus; Ogarek, Jessica; Trepman, Alissa; Mo, Vincent; The American Journal of Geriatric Psychiatry, Vol 25(9), Sep. 2017, pp. 931-938. Publisher: Elsevier Science. [Journal Article]

Subjects: Alzheimer's Disease; Dementia; Music Therapy; Nursing Homes; Adulthood (18 yrs & older); Aged (65 yrs & older); Male; Female


Individualized Music Program is Associated with Improved Outcomes for U.S. Nursing Home Residents with Dementia


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Individualized Music Program is Associated with Improved Outcomes for U.S. Nursing Home Residents with Dementia

Authors: Kali S. Thomas; Rosa Baez; Cyrus Kosar; Jessica Ogurek; et al. (author info)
Source: The American Journal of Geriatric Psychiatry
Vol. 25, Iss. 9, September 2017, pp. 931-938
Permalink: http://rave.ohiolink.edu/ajournals/article/348875400

Abstract

Objectives
The objective of this study was to compare resident outcomes before and after implementation of an individualized music program, MUSIC & MEMORY (M&M), designed to address the behavioral and psychological symptoms associated with dementia (BPSD).

Setting
98 nursing homes trained in the M&M program during 2013 and 98 matched-pair comparisons.

Participants
Long-stay residents with Alzheimer's disease and related dementias (ADRD) residing in M&M participating facilities (N = 12,905) and comparison facilities (N = 12,811) during 2012-2013.

Intervention
M&M is a facility-level quality improvement program that provides residents with music specific to their personal histories and preferences.

Measurements
Discontinuation of anxiolytic and antipsychotic medications, and reductions in behavioral problems and depressed mood in 2012 (pre-intervention) and 2013 (intervention), calculated using Minimum Data Set (MDS) assessments.

Results
The proportion of residents who discontinued antipsychotic medication use over a 6-month period increased from 17.6% to 20.1% among M&M facilities, while remaining stable among comparison facilities (15.9% to 15.2%). The same trend was observed for anxiolytic medications: Discontinuation of anxiolytics increased in M&M facilities (23.5% to 24.4%), while decreasing among comparison facilities (24.8% to 20.9%). M&M facilities also demonstrated increased rates of reduction in behavioral problems (50.9% to 56.3%) versus comparison facilities (35.6% to 55.9%). No differences were observed for depressed mood.

Conclusions
This study is the first to demonstrate the utility of the M&M program in improving BPSD in nursing homes.
Individualized Music Program is Associated with Improved Outcomes for U.S. Nursing Home Residents with Dementia

Kali S. Thomas, Ph.D., M.A., Rosa Balcer, M.P.H., Cyrus Kosar, M.A., Jessica Ogarek, M.S., Alissa Trepman, M.A., M.P.H., Vincent Mor, Ph.D.

Objectives: The objective of this study was to compare resident outcomes before and after implementation of an individualized music program, MUSIC & MEMORY (M&M), designed to address the behavioral and psychological symptoms associated with dementia (BPSD). Setting: 98 nursing homes trained in the M&M program during 2013 and 98 matched-pair comparisons. Participants: Long-stay residents with Alzheimer's disease and related dementias (ADRD) residing in M&M participating facilities (N = 12,506) and comparison facilities (N = 12,811) during 2012-2013. Intervention: M&M is a facility-level quality improvement program that provides residents with music specific to their personal histories and preferences. Measurements: Discontinuation of antipsychotic and antipsychotic medications, and reductions in behavioral problems and depression mixed in 2012 (pre-intervention) and 2013 (intervention), calculated using Minimum Data Set (MDS) assessments. Results: The proportion of residents who discontinued antipsychotic medication use over a 6-month period increased from 17.6% to 20.1% among M&M facilities, while remaining stable among comparison facilities (15.5% to 15.2%). The same trend was observed for antipsychotic medications. Discontinuation of antipsychotics increased in M&M facilities (23.5% to 24.4%), while decreasing among comparison facilities (24.8% to 26.0%). M&M facilities also demonstrated increased rates of reduction in behavioral problems (50.9% to 56.2%) versus comparison facilities (55.8% to 55.9%). No differences were observed for depressed mood. Conclusions: These results offer the first evidence that the M&M individualized music program is associated with reductions in antipsychotic medication use, antipsychotic medication use, and BPSD symptoms among long-stay nursing home residents with ADRD. (Am J Geriatr Psychiatry. 2017; 25:931-938)

Key Words: Music therapy, nursing homes, Alzheimer's disease, nonpharmacological intervention
Individualized Music Program is Associated with Improved Outcomes for U.S. Nursing Home Residents with Dementia

Authors: Kell S. Thomas, Rosa Baier, Cyrus Koser, Jessica Opresek, et al.

Source: The American Journal of Geriatric Psychiatry
Vol. 25, Iss. 9, September 2017, pp. 931-938

Abstract

Objectives: The objective of this study was to evaluate the impact of an individualized music program on residents with behavioral disturbances associated with dementia (BPSD).

Setting: The study was conducted in 98 M&M participating facilities (N = 12,905) and 73 facilities where the M&M participating facilities and comparison facilities.

Participants: Long-stay residents of comparison facilities and M&M participating facilities.

Intervention: M&M is a facility-level intervention program aimed at reducing BPSD.

Measurements: Discontinuation of anxiolytic and antipsychotic medications, and reductions in behavioral problems and depressed mood in 2012 (pre-intervention) and 2013 (intervention), calculated using Minimum Data Set (MDS) assessments.

Results: The proportion of residents who discontinued antipsychotic medication use over a 6-month period increased from 17.6% to 20.1% among M&M facilities, while remaining stable among comparison facilities (15.9% to 15.2%). The same trend was observed for anxiolytic medications: Discontinuation of anxiolytics increased in M&M facilities (23.5% to 24.4%), while decreasing among comparison facilities (24.8% to 20.9%). M&M facilities also demonstrated increased rates of reduction in behavioral problems (50.9% to 56.3%) versus comparison facilities (35.6% to 55.3%). No differences were observed for depressed mood.

Conclusions: The results support the hypothesis that individualized music programs may decrease the use of antipsychotic and anxiolytic medications, and may improve behavioral problems and depression.
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