DynaMed Plus® is updated multiple times each day and provides current, evidence-based information to support decision making at the point of care.

**Why DynaMed Plus?**

- **Evidence-Based Content:** *DynaMed Plus* includes easy-to-interpret levels of evidence labels so users can quickly determine the quality of the evidence.
- **Access Everywhere:** *DynaMed Plus* can be accessed anywhere including online, in the EHR, through the HL7 Infobutton and from a mobile device.
- **Recent Updates:** Newly added evidence can be viewed right from the home page and updates can be filtered by specialty.
- **Easy-to-Find Information:** *DynaMed Plus* is designed so users can quickly find answers to their clinical questions. Topics include an Overview and Recommendation section for high-level review, and the table of contents helps users take a deeper dive into the evidence.

**What will I find in DynaMed Plus?**

- Updated 24x7x365
- Micromedex® Drug Content
- Evidence-Based Recommendations
- Alerts When Topics Change
- Graphics and Images
- Easy Access From EHRs
- One-Click Access to Full-Text Articles
- Mobile App
- Remote Access
Content, Features and Functionality at a Glance...

1. **Currency**
   The date of the most recent update and the source of evidence is always displayed at the top of the topic.

2. **Follow Feature**
   Quickly and easily set up alerts to be notified when topics are updated.

3. **Authors and Editors**
   Click on authors and editors to learn more about their credentials.

4. **Recommendations**
   Concise, evidence-based recommendations include supporting references and GRADE classifications.

5. **Easy Navigation**
   Search within a topic or navigate using the linked table of contents.

6. **PubMed Links**
   Easily access the PubMed citation for the original article and full text when available.

7. **Visual Content**
   Images, algorithms and other visual content are included in topics where relevant.

8. **Provide Feedback**
   Click the feedback button to send comments about a topic right to the editorial team.