

# Admin

Administrative functions are split into Nest-level Admin functions and Organization-level Admin functions; this page covers Nest-level Admin functions.

- For Organization-level Admin functions, see [Manage Organizations](#).
- **Note:** if you are adding Organizational Access to a specific nest, that is a Nest-level Admin function under the Groups tab under the [Contributor Settings page](#), not the Manage Organizations page.

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## Navigate to Nest-level Admin Functions:

The Admin page is only available to Owners and Admins of nests. To access it, select the “Admin” link under the “Settings” section of the menu.

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### 1. Add and Manage Users

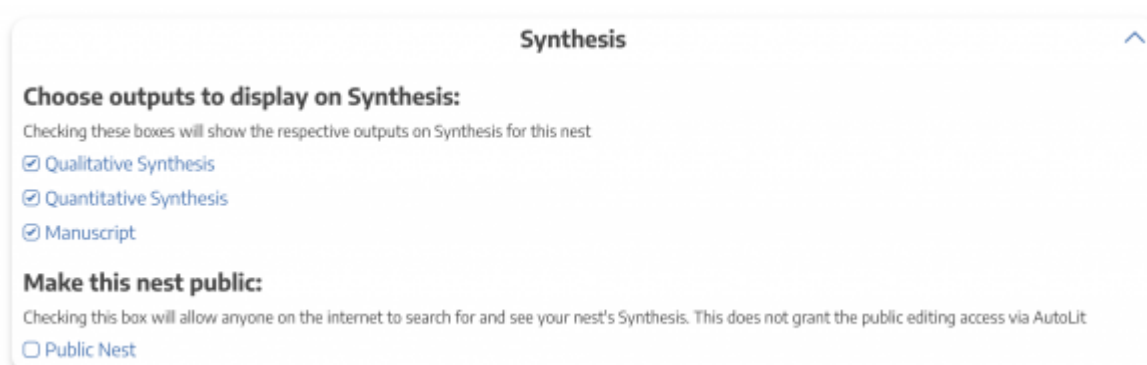
Add or remove User and/or Admin privileges for your specific nest. To learn how to do so for individuals or organizations, see the [Manage Users and Admins page](#).

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### 2. Synthesis

From the Synthesis section, you can:

- Toggle on or off Quantitative Synthesis, Qualitative Synthesis, or Manuscript. If toggled off, that specific subsection will be greyed out in the Synthesis homepage.
- Make a nest public. Toggle this on to make the link to your [Synthesis](#) page (and all sub-pages) publicly viewable.



The screenshot shows a settings panel titled "Synthesis" with a close button in the top right corner. It contains two sections: "Choose outputs to display on Synthesis:" and "Make this nest public:". The first section has a subtext "Checking these boxes will show the respective outputs on Synthesis for this nest" and three checked checkboxes: "Qualitative Synthesis", "Quantitative Synthesis", and "Manuscript". The second section has a subtext "Checking this box will allow anyone on the internet to search for and see your nest's Synthesis. This does not grant the public editing access via AutoLit" and one unchecked checkbox: "Public Nest".

## 3. Screening

### Standard vs. Dual Screening

As an Admin, you can configure Screening to be either Standard (default) or [Dual Screening](#). Standard Screening means that each record will be screened by one user. Dual Screening means that each record is screened by two different users and later adjudicated by a third. Toggling between Standard and Dual Screening (see image) **can lead to loss of data**, as only the final adjudications will be saved if you revert from Dual to Standard!

**Administrator Settings: Basilar Artery - thrombectomy vs. thrombolysis**

**Screening**

**Dual vs. Standard Screening**

In Standard Screening, one user screens each article, and that decision sends the study forward for further gathering, such as tagging, extraction, or Risk of Bias assessment. Another user can change the decision, overwriting the previous determination, and no screening decision is subject to independent confirmation.

In Dual Screening, two users independently screen each article, and then all screening decisions are reviewed by an administrator. The administrator adjudicates any disagreement between the original screeners and sets the final determination for each study.

☒ Standard ☐ Dual

**Inclusion Modeling**

Inclusion models predict the probability of individual records being included during screening, using your past screening decisions. These probabilities help Autolit determine which studies to show first during the screening process to get you screening faster.

The model can be trained manually or automatically (recommended). If the inclusion model is set to automatic, the model will be retrained after every 10 newly screened records. Otherwise, the model can be trained and retrained manually during screening. Your nest must contain at least 1 inclusion and 10 records in order to train a model.

☐ Automatic Training ☒ View Inclusion Model

**Hiding the Model**

Probabilities predicted by the model may be displayed during screening to speed up work or hidden if you wish to minimize bias. Studies will still be ordered by inclusion probability, even when hidden. To completely remove probabilities and ordering, delete the existing inclusion model and turn off automatic training.

☒ Show Probabilities ☐ Hide Probabilities

### Inclusion Prediction Model

**Manual vs. Automatic:** By default, the Inclusion Prediction Model for Screening will be on Manual, meaning that it will only run when a user selects Train Inclusion Model. Toggling the Inclusion Prediction Model to on (see image above) will alter this so that the Model runs as soon as a sufficient number of studies are screened, and this Model will be re-run automatically as more screening occurs.

**Displayed vs. Hidden:** By default, the Inclusion Prediction Model will be displayed, meaning that any user will be able to see the predictions on the Screening panel:

**Screening: Basilar Artery - thrombectomy vs. thrombolysis**

de Havenon, 2022

**Thrombectomy in basilar artery occlusions: impact of number of passes and futile reperfusion.**

**BACKGROUND** The number of mechanical thrombectomy (MT) passes is strongly associated with angiographic reperfusion as well as clinical outcomes in patients with anterior circulation ischemic stroke. However, these associations have not been analyzed in patients with basilar artery occlusion (BAO). We investigated the influence of the number of MT passes on the degree of reperfusion and clinical outcomes, and compared outcome after  $\leq 3$  passes versus  $> 3$  passes. **METHODS** We used data from the prospective multicentric Endovascular Treatment in Ischemic Stroke (ETIS) Registry at 18 sites in France. Patients with BAO treated with MT were included. The primary outcome was a favorable outcome, defined as a modified Rankin Scale score of 0-3 at 90 days. We fit mixed multiple regression models, with center as a random effect. **RESULTS** We included 275 patients. Successful recanalization (modified Thrombolysis in Cerebral Infarction (mTICI) 2b-3) was achieved in 88.4%, and 41.8% had a favorable outcome. The odds ratio for favorable outcome with each pass above 1 was 0.41 (95% CI 0.23 to 0.73) and for recanalization (mTICI 2b-3) it was 0.70 (95% CI 0.57 to 0.87). In patients with  $\leq 3$  passes, the rate of favorable outcome in recanalized versus non-recanalized patients was 50.5% versus 10.0% ( $p=0.001$ ), while in those with  $> 3$  passes it was 16.7% versus 15.2% ( $p=0.901$ ). **CONCLUSIONS** We found that BAO patients had a significant relationship between the number of MT passes and both recanalization and favorable functional outcome. We further found that the benefit of recanalization in BAO patients was significant only when recanalization was achieved within three passes, encouraging at least three passes before stopping the procedure.

☒ Population/Problem ☐ Intervention ☐ Outcome ☐ User Keywords

Keywords Bibliographic fields Edit

**Navigation**

Back Skip

**Screening**

Full Text Review

Upload Full Text

Exclusion Reason

P(Inclusion): 0.06 Exclude Include

**Tagging**

Tag Text

Select Tag

Enter Text

If you want this prediction to be hidden from all users, Admins, and Owners on each individual study, toggle "Hide Probabilities." If hidden, you can still run the model from the Admin page and have the option to turn on Automatic updating.

## 4. Risk of Bias

Choose a Risk of Bias system. Learn more about [Configuring Risk of Bias](#)

### Risk of Bias

Choose a system:

System: SIGN 50, Version: 2011

Choose a scope:

Some systems allow you evaluate the risk of bias of entire studies or individual outcomes.

☒ Entire Study

☐ Individual Outcomes

## 5. Copying a Nest

Copying a nest will copy the data and configurations, such as the search terms, references, exclusion reasons, the tagging hierarchy, applied tags, data elements, full-text PDFs, Risk of Bias Assessments, the protocol and manuscript, and other configurations. The copied nest is entirely independent of the original nest.

### Dangerous Settings

These options have wide-reaching and often irreversible effects: proceed with caution.

Rename this nest:

Pressing this button will allow you to change the name of this nest.

Rename

Delete this nest:

Pressing this button will delete this nest (including searches, references, gathered data, and manuscript) forever.

Delete Forever

Copy this nest:

Pressing this button will create a copy of most of the data in this nest, excluding user & organizational access.

Copy

Access privileges will not be copied from the old nest and must be configured.

## 6. Renaming and Deleting a Nest

As an Admin, you have the option of deleting a nest. *Please* consult with the rest of your team before deciding to delete any nest.

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DELETING A NEST HAS WIDE-REACHING AND OFTEN  
IRREVERSIBLE EFFECTS. PROCEED WITH CAUTION.

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