Screen Records

Now that the Exclusions Reasons have been configured, you can proceed with screening underlying studies to identify those that should be Included for your nest, or Excluded (for one of your configured Exclusion Reasons).

Note: If you are using Two-Pass Screening or Dual Screening, this process will differ slightly from the Standard workflow outlined below. See the Two-Pass Screening, Dual Screening, Dual Two-Pass Screening pages for more details!

Steps for Standard Screening:

1. Navigate to Screening

You can either Screen Sequentially (by selecting "Screening" in the menu, outlined in red below), where records will be shown to you in order of expected Inclusion Probability, or screen from Inspector (outlined in black).

Nest Home		(Show Table of Contents) Protocol	Edit 🖉 🔋	Notes Your Mentions All Mentions	
Activity Settings		COVID-19: Antivirals (Demo)		Kathryn Cowie 20/07/21, 18 Karl Holub Thanks Karl!	50
Literature Search Other Sources Duplicate Review Search Exploration		About This Nest is a copy of a previously-completed review presenting the evidence regarding the safety and efficacy of anti-virals that had randomized controlled trial (RCT) evidence reported regarding the treatment of COVID-19 as of January 2021.		Karl Holub 20/07/21, 18 @Nicole Hardy @Kathryn Cowie I have admin on this nest,	04
Screening	*	In this nest, you can examine the search, screening, tagging, and extraction completed in this review, as well as editing the protocol (below) and practicing adding and running searches, including and excluding records, editing the tagging hierarchy, and collecting tags and data based on		so I copied in the old protocol!	
Tagging	٠	underlying included studies. To follow a guided walk-through of this deemo, please visit <u>our documentation</u> . If you have any questions, view our Documentation using the "?" in the upper right, or <u>contact support</u> . Happy nest building!			
Study Inspector		In you have any questions, view our occurrentiation using the + in the upper right, or <u>context support</u> , heppy rest building:			
Synthesis Manuscript Editor Abstract Editor Export		Efficacy of antiviral therapies for COVID-19: A systematic review of randomized controlled trials Study Coordinator/Corresponding Author Erin Sheffels 28 <u>erinsheffels@aupedit.com</u> 29 (763) 488-9684 30 PO Box 6000545 31 1425 Minnehaha Ave E			
		32 St Paul, MN 55106			3 ⁰
		Team Members and Their Organizational Affiliations Charan Thej Reddy Vegivinti ⁸ , Kirk Evanson ⁹ , Hannah Lyons ^{6,4} , Izzet Akosman ⁶ , Averi Barrett ⁶ 4, Nicole Hardy ⁶ , Bernadette Kane ⁹ , Praneeth Rer Keesan ⁶ , Vashwitha Sai Pulakurthi ⁹ 5, Erin Sheffels ⁶ , Prasanth Balasubramanian ⁹ , Richa Chibba ⁴ , Spandana Chittajallu ⁹ , Kathryn Cowle ⁶ 6, J Karon ⁶ , Lauren Siegel ⁶ , Ranita Tarchand ⁶ , Caleb Zinn ⁶ , Nitin Gupta ^{h,1} , Kevin M. Kallmes ⁶ 7, Kavitha Saravu ^{h,1} , and Jillienne Touchette ⁹ Author Affilications:	idy	Commer	

2. Read study abstract

Last update: 2024/01/17 wiki:autolit:screening:exclude https://wiki.nested-knowledge.com/doku.php?id=wiki:autolit:screening:exclude&rev=1705513607 17:46

Nest Home	145 Suemori, 2021	Abstract Full Text Supplements Related Reports	\square	PMC 💛 🔶		Navigation	^
Activity Settings	A multicenter non-randomi	zed, uncontrolled single arm trial for evaluation of t	ne efficacy and the safety	of the			Skip
Activity	A multicenter non-randomi treatment with favipiravir for Severe fever with thrombocytope preventing and treating SFTS vin conducted to collect data on the si- orally (first-day loading dose of 11 biochemistry tests were performe adverse events (AEs). Twenty-sis within one week (28-day mortality and insomnia) occurred in about day 10. SFTSV RNA levels in the detectable in the surviving patient those of the previous studies in J	the distribution of the service of t	syndrome. ty. Favipiravir has shown effective mized, uncontrolled single arm to tatients. All participants received tinical improvement, viral load er- se 23 patients died of multi-orga patients. AEs (abnormal hepati who survived from a median of of vivors (p = 0.0029). No viral ger y mortality rate in this study was observed. However, it was uncle attents. The results of this trial s	of the veness in rial was i favipiravir volution, and an failure c function day 2 to nomes were lower than ear whether support the lined	Text Review locad Full Text lude: aarch Reasons an RCT of a drug or cool or Methods art tematic Review or M orial, comment, or c related to COVID-11 late or guidelines ar ilitative review of ex ude:	Screening Select Reason If interest idde Heta-analysis pointion article 9 titcle isting research Include Tagging comments (0)	(Skip) P(Inclusion): 0.77 ① ① ② ③ · · · · · · · · · · · · ·
				+		History	

Your task in screening should be to identify, based on the Abstract content, whether the record falls under any Exclusion Reason, or whether it is on-topic for your review and satisfies your criteria for inclusion.

The Screening page displays an abstract highlighted withRoboPICO, which is an open source fork of the models offered in RobotReviewer that identifies the Population, Interventions, and Outcomes in an abstract. Then, see on the right a panel to select Exclusion Reasons or Include the article in question.

Using the scite banner

Above your abstract, you can see the scite banner, which displays the number of times the publication in question was cited, supported, mentioned, and contrasted. If you click the banner, you can see more citation-related information provided by scite.ai, including retractions!

3/9

Nest Home	145 Suemori, 2021 Abstract Full Text Supple	ements Related Reports	PMC 🗸	ф	Navigation	^
Activity Settings	A multicenter non-randomized, uncontrolled single arm tria		the safety of the	Back		Skip
Literature Search Other Sources Duplicate Review Search Exploration	treatment with favipiravir for patients with severe fever with Severe fever with thrombocytopenia syndrome (SFTS) is a bunyavirus in preventing and treating SFTS virus (SFTSV) infection in animal models. conducted to collect data on the safety and the effectiveness of favipiray orally (frist-day loading dose of 1800 mg twice a day followed by 800 mg	nfection with high mortality. Favipiravir has A multicenter non-randomized, uncontrolle ir in treatment of SFTS patients. All partici	ed single arm trial was pants received favipiravir	Full Text Review () (Upload Full Text Exclude:	Screening	P(Inclusion): 0.77
Screening	biochemistry tests were performed at designated time points. Outcome	j twice a day for 7-14 days in total). SF151	, viral load evolution, and	Search Reasons		٩
Tagging 📢	adverse events (AEs). Twenty-six patients were enrolled, of whom 23 within one week (28-day mortality rate: 17.3%). Oral favipiravir was we	scite_ Smart Citations	of multi-organ failure ormal hepatic function	Not an RCT of a de	•	
Study Inspector	and insomnia) occurred in about 20% of the patients. Clinical symptom day10. SFTSV RNA levels in the patients who died were significantly h	35 Citing Publications	a median of day 2 to No <mark>viral genomes</mark> were	Protocol or Method Systematic Review Editorial, comment	or Meta-analysis	
Synthesis Manuscript Editor Abstract Editor Export	detectable in the surviving patients a median of 8 days after favipiravir those of the previous studies in Japan. The high frequency of hepatic of this was merely a side effect of favipiravir, because liver disorders are effectiveness of favipiravir for patients with SFTS.	 O Supporting 23 Mentioning 1 Contrasting 	is study was lower than it was unclear whether of this trial support the			
	Population/Problem Intervention Outcome Vour F	View Citations		Include:	Include	
		See how this article has been cited at		+	Tagging	~
		scite.ai		(+)	Comments (0)	\sim
		scite shows how a scientific paper has been cited by providing the context of the citation, a classification describing whether it supports, mentions, or contrasts the cited claim, and a label indicating in which section the citation was made.		(History	~
	(Keywords ^) (Bib	liographic fields	^ (Edit)			

3. Decide if study should be Included or Excluded

If the abstract does not provide enough information for you to decide if it should be Included or Excluded, click on the study source button (in this case PubMed, see red arrow below) and source the full text of the study.

	you read the Fox.	ULL TEXT and decide it should	l be included, d	check	the "Ful	l Text Rev	′iew"
Nest Home	145 Suemori, 2021	Abstract Full Text Supplements Related Reports	PI	мс 🖂	↔	Navigation	^
Activity Settings							Skip
Gettinga		pmized, uncontrolled single arm trial for evaluation of the ir for patients with severe fever with thrombocytopenia		the	+	Screening	~
Literature Search				ness in	Full Text Review	Screening	P(Inclusion): 0.77
Other Sources Duplicate Review					Upload Full Text		P(inclusion): 0.77
Search Exploration	Severe fever with thrombocytopenia syndrome (SFTS) is a bunyavirus infection with high mortality. Favipiravir has shown effectiveness in preventing and treating SFTS virus (SFTSV) infection in animal models. A multicenter non-randomized, uncontrolled single arm trial was conducted to collect data on the safety and the effectiveness of favipiravir in treatment of SFTS patients. All participants received favipiravir conflucted in the safety and the effectiveness of favipiravir in treatment of SFTS patients. All participants received favipiravir conflucted to collect data on the safety and the effectiveness of favipiravir in treatment of SFTS patients. All participants received favipiravir conflucted in the safety and the effectiveness of favipiravir in the advectory of the safety of the safety of the safety and the effectiveness of the safety and the effectiveness of the safety and the effectiveness of the safety of the saf						
		onducted to collect data on the safety and the effectiveness of favipiravit in treatment of SFTS patients. All participants received favipiravit exclude: rally (first-day loading dose of 1800 mg twice a day followed by 800 mg twice a day for 7-14 days in total). SFTSV RT-PCR and	Search Reasons				
Screening	biochemistry tests were perfo	· · · · · · · · · · · · · · · · · · ·			Contraction	Select Reason	
Tagging 🐇		orally (first-day loading dose of 1800 mg twice a day followed by 800 mg twice a day for 7-14 days in total). SFTSV RT-PCR and biochemistry tests were performed at designated time points. Outcomes were 28-day mortality, clinical improvement, viral load evolution, and adverse events (AEs). Twenty-six patients were enrolled, of whom 23 were analyzed. Four of these 23 patients died of multi-organ failure Not an PC		Not an RCT of a dr			
	. ,	ality rate: 17.3%). Oral favipiravir was well tolerated in the surviving out 20% of the patients. Clinical symptoms improved in all patients v			Protocol or Method	Is article	
Study Inspector		the patients who died were significantly higher than those in the sur			Systematic Review		
Synthesis	,	tients a median of 8 days after favipiravir administration. The 28-day			Editorial, comment,		
Manuscript Editor	•.	in Japan. The high frequency of hepatic dysfunction as an AE was of			Not related to COV Update or guideline		
Abstract Editor	this was merely a side effect of	of favipiravir, because liver disorders are commonly seen in SFTS p	atients. The results of this trial sup	port the	Qualitative review of		
Export	effectiveness of favipiravir for	patients with SFTS.		23 (9 1)	Include:	Include	
					()	Tagging	~
					()	Comments (0)	~

Bibliographic fields

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History

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Keywords

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Exclude Records

If you read the abstract and find that one or more of your Exclusion Reasons (red box above) are applicable, click on the reason that applies to that specific study. This will apply your reason and automatically bring up the next study to be screened.

Include Records

If you read the abstract and find that none of your Exclusion Reasons apply, and that (based on information available to you) the publication in question is relevant to your review, select "Include" (see red box above).

Skipping a study

Having a hard time deciding whether to include or exclude a study? You can hit skip and leave it unscreened until you're ready to make a decision.

Nest Home	145 Suemori, 2021 Abstract Full Text Supplements Related Reports PMC V	+	Navigation	^
Activity Settings	A multicenter non-randomized, uncontrolled single arm trial for evaluation of the efficacy and the safety of the			Skip
Literature Search	treatment with favipiravir for patients with severe fever with thrombocytopenia syndrome.	+	Screening	^
Other Sources	Severe fever with thrombocytopenia syndrome (SFTS) is a bunyavirus infection with high mortality. Favipiravir has shown effectiveness in	Full Text Review)	P(Inclusion): 0.77
Duplicate Review	preventing and treating SFTS virus (SFTSV) infection in animal models. A multicenter non-randomized, uncontrolled single arm trial was	Upload Full Tex	t	<u>1</u>
Search Exploration	conducted to collect data on the safety and the effectiveness of favipiravir in treatment of SFTS patients. All participants received favipiravir	Exclude:		
Screening 🌣	orally (first-day loading dose of 1800 mg twice a day followed by 800 mg twice a day for 7-14 days in total). SFTSV RT-PCR and biochemistry tests were performed at designated time points. Outcomes were 28-day mortality, clinical improvement, viral load evolution, and	Search Reason	S	٩)
	adverse events (AEs). Twenty-six patients were enrolled, of whom 23 were analyzed. Four of these 23 patients died of multi-organ failure		Select Reason	
Tagging 🌣	within one week (28-day mortality rate: 17.3%). Oral favioravir was well tolerated in the surviving patients. AEs (abnormal hepatic function	Not an RCT of a d	drug of interest	
	and insomnia) occurred in about 20% of the patients. Clinical symptoms improved in all patients who survived from a median of day 2 to	Protocol or Metho	ods article	
Study Inspector	dav10. SFTSV RNA levels in the patients who died were significantly higher than those in the survivors (p = 0.0029). No viral genomes were		w or Meta-analysis	
			nt, or opinion article	
Synthesis	detectable in the surviving patients a median of 8 days after favipiravir administration. The 28-day mortality rate in this study was lower than	Not related to CO		
Manuscript Editor Abstract Editor	those of the previous studies in Japan. The high frequency of hepatic dysfunction as an AE was observed. However, it was unclear whether	Update or guideling		
Export	this was merely a side effect of favipiravir, because liver disorders are commonly seen in SFTS patients. The results of this trial support the	Qualitative review	of existing research	
	effectiveness of favipiravir for patients with SFTS.	Include:		
	Population/Problem Intervention Outcome Outcome Intervention Intervention		Include	
		+	Tagging	\sim
		+	Comments (0)	~
		+	History	~
	(Keywords ^) (Edit)			

Add Exclusion Reasons on the Fly

You can add Exclusions Reasons as you screen without leaving the Screening page. To do so, in the Screening module, open the Exclusion Reason drop-down and begin typing in an Exclusion Reason.

If the reason of interest has not yet been configured, you will be presented with the ability to "Add Option." Select this option, and write out your full Exclusion Reason. Once you have added it, it will be added to the Exclusion Reason drop-down and the Configure Exclusion Reasons page, and will be automatically applied to the study you are currently screening. To confirm that the new reason should

Unscreening a study

If you have included or excluded a study that you want to revert to 'unscreened' status so that it can be reviewed again, you can unscreen it by finding the study of interest in Study Inspector, and then selecting the icon next to the Include button on the study you want to unscreen. A pop-up will appear and you can then click "Unscreen" to unscreen that single study.

Note: if you want to unscreen multiple studies, you can also do so using Bulk Actions!

Nest Home		145 Suemori, 2021	Abstract Full Text Supplements Related Reports		РМС 🖂	+	Navigation	^
Activity Settings		A multicenter non-randon	nized, uncontrolled single arm trial for evaluation of th	e efficacy and the safety o	of the			Skip
Literature Search	\leq		for patients with severe fever with thrombocytopenia		, and	()	Screening	^
Other Sources		, ,	enia syndrome (SFTS) is a bunyavirus infection with high mortalit			Full Text Review		P(Inclusion): 0.77
Duplicate Review Search Exploration			irus (SFTSV) infection in animal models. A multicenter non-randor			Upload Full Text		<u> </u>
Search Exploration			a safety and the effectiveness of favipiravir in treatment of SFTS p 1800 mg twice a day followed by 800 mg twice a day for 7-14 day		ravipiravir	Exclude:		
Screening	•		ned at designated time points. Outcomes were 28-day mortality, cl	,	olution, and	Search Reasons		٩)
		, ,	six patients were enrolled, of whom 23 were analyzed. Four of the	,			Select Reason	
Tagging	*	within one week (28-day mortal	ity rate: 17.3%). Oral favipiravir was well tolerated in the surviving	patients. AEs (abnormal hepatic	function	Not an RCT of a dr Protocol or Method	-	
Study Inspector		and insomnia) occurred in abou	t 20% of the patients. Clinical symptoms improved in all patients v	/ho survived from a median of d	ay 2 to	Systematic Review		
otady mapeetor		day10. SFTSV RNA levels in th	e patients who died were significantly higher than those in the sur	/ivors (p = 0.0029). No viral gen	omes were	Editorial, comment		
Synthesis		detectable in the surviving patie	nts a median of 8 days after favipiravir administration. The 28-day	mortality rate in this study was	lower than	Not related to COV		
Manuscript Editor		those of the previous studies in	Japan. The high frequency of hepatic dysfunction as an AE was of	bserved. However, it was unclea	ar whether	Update or guideline	es article	
Abstract Editor Export		this was merely a side effect of	favipiravir, because liver disorders are commonly seen in SFTS pa	atients. The results of this trial su	upport the	Qualitative review	of existing research	
		effectiveness of favipiravir for p	atients with SFTS.			Include:	Included	
		Population/Problem In	ervention Outcome Your Keywords		Ø 23 ⑦ 1		Included	Ø
						(+)	Tagging	~
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						()	History	~
		Keywords	Bibliographic fields		A) (Edit)			

Note: Anytime there is a module box with the adjustable icon, you can drag to adjust the width of the box depending on your preference.

5/9

Nest Home	145 Suemori, 2021 Abstract Full Text Supplements Related Reports PMC V	↔	Navigation	^
Activity Settings	A multicenter non-randomized, uncontrolled single arm trial for evaluation of	Bask		Skip
Literature Search	the efficacy and the safety of the treatment with favipiravir for patients with severe fever with thrombocytopenia syndrome.	←→ Full]ext Review ()	Screening	P(Inclusion): 0.77
Duplicate Review Search Exploration	Severe fever with thrombocytopenia syndrome (SFTS) is a bunyavirus infection with high mortality. Favipiravir has shown effectiveness in preventing and treating SFTS virus (SFTSV)	Up oad Full Text Exclude:		<u>^</u>
Screening	conducted to conect data on the salety and the enectiveness of avphavil in treatment of 5115	Search Reasons	Select Reason	٩)
Tagging H	day followed by 800 mg twice a day for 7-14 days in total). SF ISV RT-PCR and biochemistry	Not an RCT of a drug of interest Protocol or Methods article	Select Reason	
Study Inspector	tests were performed at designated time points. Outcomes were 28-day mortality, clinical improvement, viral load evolution, and adverse events (AEs). Twenty-six patients were	Systematic Review or Meta-analysis Editorial, comment, or opinion article		
Synthesis Manuscript Editor Abstract Editor Export	enrolled, of whom 23 were analyzed. Four of these 23 patients died of multi-organ failure within one week (28-day mortality rate: 17.3%). Oral favipiravir was well tolerated in the surviving patients. AEs (abnormal hepatic function and insomnia) occurred in about 20% of the patients. Clinical symptoms improved in all batients who survived from a median of day 2 to day10.	Not lelated to COVID-19 Update or guidelines article Qualitative review of existing research		
	SFTSV RNA levels in the patients who died were significantly higher than those in the survivors (p = 0.0029). No viral genomes were detectable in the surviving patients a median of 8 days	Include:	Included	Ð
	after favipiravir administration. The 28-day mortality rate in this study was lower than those of the previous studies in Japan. The high frequency of hepatic dysfunction as an AE was	+	Tagging	~
	observed. However, it was unclear whether this was merely a side effect of favipiravir, because	(+)	Comments (0)	~
	liver disorders are commonly seen in SFTS patients. The results of this trial support the effectiveness of favipiravir for patients with SFTS.	(+)	History	~
	Population/Problem Intervention Outcome Your Keywords 35 0 0 23 0 1			
	(Keywords ^) (Bibliographic fields ^) (Edit)			

4. Upload the Full Text

In general, uploading a Full Text should be completed only for Included records, and doing so assists in preparing the Tagging step.

For instructions on how to upload a Full Text PDF, click here.

No Full Text

If you cannot source a full text for the study in question, you can assign a specific exclusion reason as signifying "No Full Text" within the PRISMA. For those records, first configure an Exclusion Reason as "No Full Text" (or equivalent) in the Configure Exclusion Reasons page.

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Add	Exclusion Reasons Your Keywords	PRISMA settings 🖫 Imp	port Se	et 💎
	Reason	Excluded Records	Ø	団
\vdots $\langle \rangle$ Not an RCT of a drug of interest		29	Ø	団
\vdots $\langle \rangle$ Protocol or Methods article		16	Ø	団
Systematic Review or Meta-analysis		7	Ø	団
\vdots \bigcirc Editorial, comment, or opinion article		6	Ø	団
		5	Ø	団
\vdots (>) Update or guidelines article		5	Ø	団
\vdots $\langle \rangle$ Qualitative review of existing research		4	Ø	団
E Published Before 2019-11-01		1	Ø	団
\vdots (>) In vitro, in silico, or in vivo study		1	Ø	団
🗄 < > Prophylaxis Not Treatment		1	Ø	団
Biased Subpopulation		1	Ø	団
\vdots \bigcirc Not Published in English		0	Ø	団
:: (>) Technical note		0	Ø	団
🗄 🤇 > Case Study		0	Ø	団
E Pediatric study		1	Ø	団

Then select PRISMA Settings and select an exclusion reason to signify as No Full Text.

	Evaluaian Dagaana Vaur Vaur Vaur
í	PRISMA settings
n	Select an exclusion reason to represent "No full text" in the PRISMA diagram.
С	No Exclusion Reason Selected
r	Close
ria	I, comment, or opinion article

Implications: Marking "No Full Text" is a special PRISMA category, so the specific reason you configure for this purpose will be given its own listing in your PRISMA chart.

5. Upload Supplementary Materials

If you want to upload supplementary files to a specific record, you can do so in the Supplements tab. To upload supplements, follow these instructions.

Last update: 2024/01/17 wiki:autolit:screening:exclude https://wiki.nested-knowledge.com/doku.php?id=wiki:autolit:screening:exclude&rev=1705513607 17:46

6. Mark Related Reports

If you come across several studies as related to one another, you can mark it as a related report in the Related Reports tab. Then, the software will automatically adjust the PRISMA diagram to reflect this. To mark a paper as a related report, follow these instructions.

7. Applying Tags during Screening

If you wish to apply preliminary tags in the Screening stage, you may do so. Form-based Tagging mode is the default Tagging mode– this type of data extraction presents questions in a form to be answered. Learn how to configure form-based questions, which can be applied at the preliminary stage.

If you prefer to apply tags from a dropdown selection, you may want to switch to Standard Tagging mode instead. This can easily be switched back to Form-based later on if you prefer. Learn how to configure standard tags to apply at the preliminary stage.

Once configured, apply these tags during Screening using the Questions or Tagging right-hand menu item:

Nest Home	1240 Hu, 2023 Abstract Full Text Supplements Related Reports CT.gov V	↔ Navigation	^
Settings	Intra-arterial TNK Following Endovascular Thrombectomy in Patients With Large Vessel Occlusion of Posterior		Skip
Literature Search	Circulation	↔ Abstract Screening	^
Other Sources	Brief Summary: Rationale: Recently, one prospective multicenter RCT reported a potential beneficial effect of intra-arterial alteplase	Full Text Review	
Duplicate Review Search Exploration	following successful endovascular thrombectomy (EVT) in patients with an acute intracranial large vessel occlusion. In 2018, another	Exclude:	
	prospective multicenter RCT supported the superiority of tenecteplase over alteplase in ischemic stroke patients with large vessel	(Search Reasons	<u> </u>
Abstract Screening *	occlusion. Objective: To assess the effect of EVT in addition to intra-arterial tenecteplase compared to EVT alone, in patients with large vessel occlusion of posterior circulation, on functional and safety outcomes. Study design: This is a parallel group, randomized clinical	Select Reason	
Adjudicate Screening	trial of EVT with IA-TNK versus EVT. The trial has observer blind assessment of the primary outcome and of neuro-imaging at baseline	Study Design	
	and follow-up. Study population: Patients with acute intracranial large vessel occlusion of posterior circulation and an eTICI 2b-3 after	Excluded: Not an RCT	
Full Text Screening	EVT. Main study parameters/outcomes: The primary effect parameter will be excellent functional status at day 90 defined as a modified	Excluded: Editorial Excluded: Retrospective Study	
Adjudicate Screening	Rankin Score (mRS) of 0-1. The estimate will be adjusted for the known prognostic variables age, pre-stroke mRS, time from onset to	Excluded: Retrospective Study Excluded: Secondary analysis	
Tagging 🌼	randomization, stroke severity (NIHSS) and collaterals and adjusted and unadjusted estimates with corresponding 95% confidence	Excluded: Guidelines article	
	intervals will be reported. Detailed Description: Study Type: Interventional Actual Enrollment: 208 participants Status (as of import):	Excluded: In vitro study	
MA Extraction	Recruiting	Advance:	
	reconning	Advance	(1)
Critical Appraisal	C Population/Problem Intervention Outcome C Your Keywords		
Study Inspector		↔ Questions (0/17)	^
Study Inspector		< Interventions	\sim
Synthesis		Interventions: What interventions/comparators were	reported?
Dashboard Editor			
Abstract Editor Export		Select Tag	\sim
Export			
		Annotate or Enter Text	
		Amotate of Enter lext	
	(Keywords) (Bibliographic fields) (Edit)		4

8. Continue Screening

Once you have clicked "Include" or "Exclude" (or "skip") for any study, you should be automatically shown the next study.

If you are screening from Inspector, you can use the arrows in the far left and right of the screen to

navigate up or down, respectively, or click out to view the Inspector study list.

Duplicates

If you find a study that was not automatically de-duplicated, click Related Reports, select Mark Duplicate, and then select the original study. Completing this action will remove the study from your screening queue and put it in the duplicate queue.

Learn more about Related Reports here.

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Permanent link: https://wiki.nested-knowledge.com/doku.php?id=wiki:autolit:screening:exclude&rev=1705513607

Last update: 2024/01/17 17:46