

Study Inspector

The Study Inspector is a search, filter, and edit page for all studies in your nest. From Study Inspector, you can [perform any action](#) (Screen, Tag, Extract, or Critical Appraisal analysis) on individual references, and also edit any study's [bibliographic information](#). You can also use [Bulk Actions](#), [download/export content](#) from your nest, and [use our Exploration tools](#) on studies in the nest.

Finding and Filtering in Study Inspector:

Inspector filters are a way to sort and search all studies within a nest by a given attribute, action performed or position within the workflow. They can be used in tandem with bulk actions to assign an action to a specific group of studies such as bulk exclusion of studies or reviewing metadata of a certain subset of studies.

1. Navigate to the Study Inspector

From the Nest menu, click on “Study Inspector.”



Study Inspector

2. Filter the Study Inspector

Click on “Add Filter” or begin typing what you would like to filter by. You can filter by TIAB (Title and Abstract text), author, date, status (such as Screening Status, which filters to included, excluded, or unscreened), or tag. The “Add Filter” drop-down ([red circle](#)) enables you to construct your own filter; if you simply start typing in the text box to the right ([red box](#)), the page will predict the filter you would like to construct, and you can select based on the options presented.

You can use multiple filters, which are layered on top of each other (e.g. filtering to “Screening Status: Included” and “Title/Abstract: Randomized” will filter to all included articles with the word “randomized” in the title or abstract). Filtering the Study Inspector also enables you to use [Bulk Actions](#) on the studies to which you have filtered. For a detailed list of the types of filters available, check out the [Study Inspector Filters page](#).

Study Inspector

Bulk Actions

Download

Clear Filters

Add Filter

Inc

Filter to Included

Author search inc

Title/Abstract search inc

Full Text search inc

Title	Author	Publication Year	Final Screening Status	...
Dairy Product Consumption and Incide	urnk, Isabel AI	2023		
Effect of Cheese Intake on Cardiovascul	Hu, Meng-Jin	2022	Included	
Avocado Consumption and Risk of Cardiovascular ...	Pacheco, Lorena S	2022	Included	
Associations Between Dietary Patterns and Inciden...	Gao, Min	2022		
Dietary patterns, dietary nutrients and cardiovascul...	Nestel, Paul J	2022		
Dairy Foods: Is Its Cardiovascular Risk Profile Cha...	Nestel, Paul J	2022		
Dietary Fatty Acids, Macronutrient Substitutions, F...	Steur, Marinka	2021		
Cow's Milk and Dairy Consumption: Is There Now ...	Popplitt, Sally D	2020		
Identifying environmental risk factors and gene-env...	Addissie, Yonit A	2021		
Total Fermented Dairy Food Intake Is Inversely Ass...	Buziau, Amée M	2019		
Full-Fat Dairy Food Intake is Associated with a Low...	Kummer, Kim	2019		
Fatty acid biomarkers of dairy fat consumption and ...	Imamura, Fumiaki	2018		
Association of dairy intake with cardiovascular dise...	Dehghan, Mahshid	2018		
Associations of Dairy Intake with Incident Prediabe...	Hruby, Adela	2017		
Dietary patterns reflecting healthy food choices are...	Ahola, Aila J	2017		
Whole dairy matrix or single nutrients in assessme...	Thorning, Tanja Kongerslev	2017		
Short-Term Hypoxia Reverses Ox-LDL-Induced CD...	Chen, Yeh-Peng	2017		
Dietary patterns are associated with various vascul...	Ahola, Aila J	2016		
Association of the consumption of common food gr...	Illic, Milena	2016		
[Effect of fats on cardiovascular disease prevention...	Astrup, Arne	2014		
Acute effects of pistachio consumption on glucose ...	Kendall, C W C	2014		

Details

Explore

Displaying 38 matching records

Load All

Adjusting the Columns in Inspector

You can select the columns that you want to view in Inspector by clicking on the three dots to the far right of the Inspector header row.

Click on any of the following to add them as columns in Inspector:

- Title
- Author
- Abstract
- Publication Year
- Journal
- Volume
- Issue
- Pages
- Time of Retrieval
- Final Screening Status
- *If a Dual Mode is turned on, Your Screening Status*
- Tagging - module status
- Extraction - module status
- Critical Appraisal - module status
- Inclusion Probability
- Tags - list of tags applied
- DOI
- PubMed ID

- Embase ID
- External ID
- NCT ID
- Ref ID
- Full Text Status
- Author List
- Full Citation ([JAMA format](#))

Click on any column that has a check mark next to it (indicating it is a current column) to remove it. Make sure to avoid adding too many columns to limit crowding!

Quick Guide: Download and Bulk Actions

Inspector is the location for two very important activities: Downloading/exporting and completing Bulk Actions.

Download from Inspector

Download enables you to download content from your nest—either for all studies, or for a specific set of studies you filter to. For full instructions, see [here](#).

Quick Guide:

- First, apply all filters to determine which records will be exported.
- Then, make sure that you have the Columns in Inspector you want exported. The Inspector columns will all be exported into any CSV output!
- Only once filters and columns are ready, **Click Download** in the upper right.
- Select the content that you want exported (e.g. to get metadata, click Studies. to get tags, click Tags).
- If relevant, provide any other details (e.g. if you want a RIS file for Studies instead of a CSV, or whether you want Tables to export for Tags).
- Click “Download” within the modal. Your file should appear in your local Downloads!

Bulk Actions

Bulk Actions allow you to complete certain steps (changing screening status, uploading full texts, editing module status, etc.) on studies; for full instructions, see [here](#).

The screenshot shows the 'Study Inspector' interface. On the left is a sidebar with navigation options: Nest Home, Literature Search, Dual Screening, Tagging, Extraction, Risk of Bias, Study Inspector, and Synthesis. The main area is titled 'Study Inspector' and contains a table of studies. Above the table are filters for 'Add Filter', 'Final Screening', and 'Included'. A 'Bulk Actions' button is highlighted with a red box. The table has columns for Title, Author, Publication Year, and Final Screening Status. Below the table are buttons for 'Details' and 'Explore', and a status message 'Displaying 22 matching records' with a 'Load All' button.

Title	Author	Publication Year	Final Screening Status
Thrombectomy within 8 hours after sym...	Jovin, Tudor G	2015	Included
Stent-retriever thrombectomy after intra...	Saver, Jeffrey L	2015	Included
Randomized assessment of rapid endova...	Goyal, Mayank	2015	Included
Endovascular Thrombectomy with or wit...	Yang, Pengfei	2020	Included
Safety and Efficacy of a 3-Dimensional St...	Nogueira, Raul G	2018	Included
Effect of Endovascular Contact Aspiration...	Lapergue, Bertrand	2017	Included
Effect of Endovascular Treatment Alone v...	Zi, Wenjie	2021	Included
Effect of Mechanical Thrombectomy Wit...	Suzuki, Kentaro	2021	Included
Endovascular therapy for ischemic stroke ...	Campbell, Bruce C V	2015	Included
Thrombectomy for Stroke at 6 to 16 Hour...	Albers, Gregory W	2018	Included
Thrombectomy 6 to 24 Hours after Strok...	Nogueira, Raul G	2018	Included
Aspiration Thrombectomy After Intraven...	Mocco, J	2016	Included
Aspiration thrombectomy versus stent re...	Tuck, Aquilla S	2019	Included

Quick Guide:

- First, **apply all filters that narrow in on the studies you want to complete an action on!** If you 'bulk act' before filtering, you will execute the action on a wider range of studies than intended.
- Then, click Bulk Actions in the upper right.
- Select your Bulk Action of interest – e.g., if you want to bulk-alter Screening Decisions, select “Update Screening”.
- If Updating Screening, Tags, Module Status, or importing Full Texts, follow the instructions in the modal. For example, if altering a Screening Decision, you may need to select “Full Text Screening” and “Final Decisions” if you are in Dual, Two-pass mode.
- Complete the bulk action and wait for the job to complete. Optionally, you can click out of the progress modal; the job will continue in the background.

Completing Actions on Individual Studies in Inspector

1. Opening the Study Modal

Once you have filtered to the list of studies of interest, you can screen, tag, or extract by clicking on the study in question; this opens the Study Modal. The modal opens to the module that was selected as the preset; so, if you opened the Screening Study Inspector, for instance, you will be able to screen the study in question.

2. Completing Actions

The modal enables you to **Screen**, **Tag**, and **MA Extract** the study that you have opened. In the modal, the actions are completed in the same way they are completed in the sequential screen/tag/extract modes. Here, you can see a study that is opened to the Screening module; the screening actions (**red**

square) indicates that this study has been included. Once you complete an action, you can click the arrow keys to the left and right of the modal (red circles) to move up and down the list of studies available in Study Inspector.

The screenshot displays the Study Inspector interface. The main article is titled "Endovascular thrombectomy and medical therapy versus medical therapy alone in acute stroke: A randomized care trial." The article authors are Naim N. Khoury, Tim E. Darsaut, Jimmy Ghostine, Yan Deschaintre, Nicole Daneault, André Durocher, Sylvain Lanthier, Alexandre Y. Pope, Céline Odier, Louise-Hélène Lebrun, François Guilbert, Jean-Christophe Gentric, André Batista, Alain Weill, Daniel Roy, Serge Bracard, and Jean Raymond. The article is from the *Journal of the American Medical Association* (JAMA), published online February 24, 2017. The abstract states: "Background. – Until recently, the benefits of endovascular treatment in stroke were not proven. Care trials have been designed to simultaneously offer yet-to-be validated interventions and verify treatment outcomes. Our aim was to implement a care trial for patients with acute ischemic stroke. Methods. – The study was offered to all patients considered for endovascular management of acute ischemic stroke in one Canadian hospital. Inclusion criteria were broad: onset of symptoms ≤ 5 h or at any time in the presence of clinical-imaging mismatch and suspected or demonstrated proximal large vessel occlusion. Exclusion criteria were few: established infarction or hemorrhagic transformation." The right sidebar shows the "Dual Screening" modal with options for "Full Text Review", "Exclusion Reason", and "Tagging". The "Tagging" section lists various tags such as "Male Sex", "Eligible for IVT", "Distal emboli", "IVT alone", "Number of Patients with IVT", "Up to 5 Hours", "Age (Median)", "NIHSS (median) Baseline", and "Select Tag".

You can unscreen a single study by going to Study Inspector and then opening the screening tab in the Study Modal. If you click on the "i" icon next to the screening decision, you can "unscreen" that study to put it back in the screening queue to review later.



The screenshot displays the Study Inspector interface. The main article is titled "Dual mobility for total hip arthroplasty revision surgery: A systematic review and metaanalysis" by Placella Giacomo, Bettinelli Giulia, Pace Valerio, Salini Vincenzo, and Antinolfi Pierluigi. The article is from the *Journal of the American Medical Association* (JAMA), published online February 24, 2017. The abstract states: "Background. – Until recently, the benefits of endovascular treatment in stroke were not proven. Care trials have been designed to simultaneously offer yet-to-be validated interventions and verify treatment outcomes. Our aim was to implement a care trial for patients with acute ischemic stroke. Methods. – The study was offered to all patients considered for endovascular management of acute ischemic stroke in one Canadian hospital. Inclusion criteria were broad: onset of symptoms ≤ 5 h or at any time in the presence of clinical-imaging mismatch and suspected or demonstrated proximal large vessel occlusion. Exclusion criteria were few: established infarction or hemorrhagic transformation." The right sidebar shows the "Screening" modal with options for "Full Text Review", "Exclusion Reason", and "Tagging". The "Tagging" section lists various tags such as "Male Sex", "Eligible for IVT", "Distal emboli", "IVT alone", "Number of Patients with IVT", "Up to 5 Hours", "Age (Median)", "NIHSS (median) Baseline", and "Select Tag".

3. Toggling Modules

To switch between modules, toggle the buttons in the upper right of the modal (red outline). Regardless of how you opened Study Inspector, you can Screen, Tag, and/or Extract within the modal. Note: If the Nest is in Dual Screening mode, you will have a fourth option of Adjudication shown as a toggling option (black outline) if you have Admin privileges; this page is not available to users.

The screenshot displays the Nested Knowledge interface. The main content area shows a study article titled "Thrombectomy within 8 Hours after Symptom Onset in Ischemic Stroke" from The New England Journal of Medicine. The article includes the authors' names, a background section, and a methods section. The sidebar on the right contains several modules: "Screen", "Tag", "Extract", and "RoB". The "Screen" module is currently active, showing a "Full Text Review" section with a "Full Text Uploaded!" status. Below this, there is an "Exclude" section with a search bar and a list of reasons for exclusion, such as "Secondary analysis", "Not an RCT", and "Published Before 2014-01-01". There is also an "Include" button. At the bottom of the sidebar, there are sections for "Tagging", "Comments (12)", and "History".

Warning: If the Nest is in Dual Screening mode, changes made in the Screening module **will not alter the final/adjudicated Screening Status of the study**. Instead, the change will queue another user screening decision to be adjudicated. To alter final/adjudicated Screening Status from the Study Modal, an Admin must use the Adjudication module to select a finalized option.

5. Marking Modules Complete/Incomplete for Individual Records

Marking a module "Complete" removes it from the queue in the corresponding module and marking a module "Incomplete" puts the record back into the queue in the corresponding module. Regardless of module status, records are always editable in Study Inspector. This is specific to the Tagging, Extraction and Critical Appraisal modules.

To do this, you can filter to a group of studies and use Bulk Actions (above) and you can also do this within individual studies. Under each menu, open the "History" tab, select Module Status Dropdown and select Complete or Incomplete.

The screenshot displays the Nested Knowledge interface. The main content area shows a study article titled "Efficacy and Safety of Favipiravir in Moderate COVID-19 Pneumonia Patients without Oxygen Therapy: A Randomized, Phase III Clinical Trial" from Infect Dis Ther. The article includes the authors' names and a methods section. The sidebar on the right contains several modules: "Screen", "Tag", "Extract", and "RoB". The "Tag" module is currently active, showing a "Tagging Status" dropdown menu. The dropdown menu is open, showing options for "Complete" and "Incomplete". The "Complete" option is currently selected. Below the dropdown menu, there is a "Search Terms" section with a search bar and a list of search terms, such as "Lopinavir OR Ritonavir O...", "Search Engine: Embase", and "Included". At the bottom of the sidebar, there are sections for "Tagging", "Tag Recommendations", "Comments (0)", and "History".

6. Edit Bibliographic Information

To edit the bibliographic information associated with a study, find it in Inspector. In the Abstract view,

select the “Edit” button next to the Bibliographic Fields. In the modal that pops up, edit any of the Bibliographic Fields.

7. Using Nested Knowledge's Reference ID (Ref ID)

Nested Knowledge automatically generates a Ref ID for every record that can be used for filtering, bulk actions, and allocation. See details [here](#).

Explore from Inspector

If you have questions about the contents across your included records, you can use [Explore from Inspector](#), where the RoboPICO, Topic Modeling, and Keyword frequency can be applied to any subset of studies from your nest.

INESTED!

KNOWLEDGE

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Configure Extraction

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Bulk Actions

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Final Screening

Included

Start Typing

Clear Filters

Title	Author	Publication Year	Final Screening Status	
Haematological malignancy and nosocomi...	Bhogal, Talvinder	2021	Included	
Characteristics and outcomes of coronavir...	Nakamura, S.	2021	Included	
Cancer increases risk of in-hospital death f...	Li, Qiubai	2020	Included	
Clinical characteristics and risk factors for ...	Liang, Junnan	2021	Included	
Clinical Characteristics of COVID-19-Infect...	Asghar, Kashif	2021	Included	
Factors associated with SARS-CoV-2 infec...	Goudsmit, Anouk	2021	Included	
Case Fatality Rate of Cancer Patients with ...	Mehta, Vikas	2020	Included	
Cancer history is an independent risk fact...	Meng, Yifan	2020	Included	
COVID-19 outcomes in hospitalized patien...	Fu, Chen	2021	Included	
More Severe COVID-19 in Patients With A...	Monari, Caterina	2021	Included	
Clinical Characteristics, Management, and ...	Dang, Michael K M	2021	Included	
Clinical Profile and Outcome of Critically Ill...	Kumar, Rakesh	2021	Included	
One-year mortality and consequences of	Chai, Chen	2021	Included	

Details

Explore

Displaying 24 matching records

Load All

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.

Nested Knowledge - <https://wiki.nested-knowledge.com/>

AbstractFull TextSupplementsRelated Reports

911120PMC

ScreenTagExtractRoB

J Antimicrob Chemother 2020; 75: 3379–3385
doi:10.1093/jac/dkaa334 Advance Access publication 19 August 2020

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Sofosbuvir and daclatasvir compared with standard of care for treatment of patients admitted to hospital with moderate to severe coronavirus infection (COVID-19): a randomized controlled trial

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Received 29 May 2020; accepted 3 July 2020

Background: Currently no effective antiviral therapy has been found to treat COVID-19. The aim of this study was to assess if the addition of sofosbuvir and daclatasvir improved clinical outcomes in patients with moderate to severe COVID-19.

Methods: This was an open-label, multicentre, randomized controlled clinical trial in adults with moderate to severe COVID-19 admitted to four university hospitals in Iran. Patients were randomized into two groups: one receiving sofosbuvir and daclatasvir plus standard care, or a control arm receiving standard care alone. The primary endpoint was clinical recovery within 14 days of treatment. The study is registered with IRCT20200529045121N1.

Tagging

Tag	Contents
Sofosbuvir	control group, national treatment guidelines (200 mg daily, 400 ...)
Daclatasvir	Malignancy1 (3)2 (6)1.000
Open label	This was an open-label, multicentre, randomized controlled trial...
Sofosbuvir	experimental group, patients received single daily, 400 ...
Diabetes Mellitus	diabetes 17(52)11(33)
Hypertension	hypertension 12(36)11(33)
Control/Standard of Care	control arm receiving standard care alone
Asthma	asthma 1(3)1(3)1
Hydroxychloroquine	control group, national treatment guidelines (200 mg daily, 400 ...)
Daclatasvir	Sofosbuvir and daclatasvir compared

Select Tag

Enter Text

Apply Tag

Tag Recommendations

Comments (0)

History

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Last update: 2023/09/26 03:43