REGISTRATION / SETTING UP A NEW GUIDELINE

Point your browser to http://gem.med.yale.edu/eglia. Register to use the system by entering your email address and leaving the password field blank.

When the registration screen opens, enter a password and complete the brief registration form:

After clicking register, you must logout and log back in. Each appraisal team should designate one person to serve as leader. This person will set up the guideline, track progress of the appraisal process, lead the team discussion, and create the final report. Leaders login to the Admin interface, to be taken to the Administrator Welcome Screen. Appraisers, skip to section titled: APPRAISE GUIDELINE RECOMMENDATIONS.
From the Administrator Welcome Screen, select “Add new guideline” and follow the directions to name the guideline. Click the “info” links for additional information.

Please enter information about the new guideline. All fields are mandatory.

The estimated time to enter a guideline is 30 minutes. Please note that until all information about the guideline is entered, and approved by you at the end of the process, appraisal of the guideline can not begin.

You can get more information about each field by moving the pointer over the word "info" to the right of the field.

This is page 1 of 4 pages.

Guideline Name: Adult Sinusitis
Version Name (or number): Version 3
Developer: AAO-HNS
Date (leave blank for today, yyyy-mm-dd): select
Number of recommendations in this guideline: 14
File to upload: /Users/shiffmrm/Desktop/AAO-Sinusitis/RS Guideline 3.0.doc
Can all users view and evaluate this guideline? Yes
Guideline administrator: Prof. Richard Shiffman

submit
Number the recommendations and copy and paste the recommendation text.

Enter the recommendations for the guideline

Instructions: Each recommendation should have a name, which may be either a serial number (e.g. 1, 2, 3) or a serial number followed by a letter (e.g. 1a, 1b, and 1c). The recommendation text must be identical to the recommendation in the print guideline. Please only enter the actual recommendation, without supporting text. The Number of recommendations available on this screen is the number you entered on the first screen for “Number of recommendations”. If you need to add recommendations, click the “add recommendation” button at the bottom of this screen after filling all fields in this screen. If you need to remove recommendations, just leave them blank. Note: If you do not enter a name and text for a recommendation it will be ignored. Do not enter one without the other. This is page 2 of 4 pages.

Recommendation text

<table>
<thead>
<tr>
<th>Item</th>
<th>Rec. number</th>
<th>Recommendation text</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>la</td>
<td>DIAGNOSIS OF ACUTE RHINOSINUSITIS: Clinicians should distinguish presumed acute bacterial rhinosinusitis (ABRS) from acute rhinosinusitis caused by viral upper respiratory infections and non-infectious conditions. Strong recommendation based on diagnostic studies with minor limitations and a preponderance of benefit over harm.</td>
</tr>
<tr>
<td>2</td>
<td>lb</td>
<td>RADIOGRAPHIC IMAGING AND ACUTE RHINOSINUSITIS: Clinicians should not obtain radiographic imaging for patients who meet diagnostic criteria for acute rhinosinusitis, unless a complication or alternative diagnosis is suspected. Recommendation against based on diagnostic studies with minor limitations and a preponderance of benefit over harm.</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>SYMPTOMATIC RELIEF OF VRS: Clinicians may prescribe symptomatic relief in managing VRS. Option based on randomized trials with limitations and cohort studies with an unclear balance of benefit and harm that varies by patient.</td>
</tr>
</tbody>
</table>

Add users to the guideline by entering their email addresses separated by commas.

Edit user access to your guideline

The screen allows you to edit all details of access to your guideline. You may change the global access, revoke individual access to the guideline, and add new users to your guideline.

Global access: Your guideline is currently open only to assigned appraisers.

Set global access to: Open □ Closed □

Current users assigned to your guideline

Prof. Richard Grifffin	 Revoke access □

heather.buchanan@hotmail.com (unregistered)	 Revoke access □

Add users to your guideline

Please enter your appraisers' email addresses, separated by commas:

Submit
When you log back in as an appraiser, you will see a list of the guidelines for which you have privileges. Your privilege settings allow you to “Appraise” the guideline.

Clicking “Appraise” will take you to a screen that displays:

- A toolbar from which you can (1) access instructions, (2) download the guideline file, (3) select another guideline to work on, (4) view a summary of your appraisals for the selected guideline, or (5) logout.
- An opportunity to appraise the 7 items in the Global dimension of the selected guideline
- A matrix of appraisal options for the guideline recommendations. Listed vertically on the left are the individual recommendations by number. Horizontally are displayed the GLIA dimensions. At the outset, each intersection has a white background, indicating the items in the dimension have not been appraised and the word “None” appears. (As you appraise items in that dimension, the background color turns first to red and then to green as the words “partial” and “complete” appear to indicate your completion of the appraisal task for the dimension.)
Clicking at the intersection of a recommendation and a GLIA dimension opens a work area. At the top of the work area, the text of the recommendation is displayed.

<table>
<thead>
<tr>
<th>GLIA item</th>
<th>Appraisal</th>
<th>Comments (and flag item for discussion)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 Would the guideline’s intended audience consistently determine whether each condition in the recommendation has been satisfied?</td>
<td>Yes</td>
<td>Neglects situations where patients have positive finding and negative test</td>
</tr>
<tr>
<td>9 Are all reasonable combinations of conditions accounted for, i.e., is the recommendation comprehensive?</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>10 If there are more than one condition in the recommendation, is the logical relationship among all conditions (ANDs and ORs) clear?</td>
<td>NA</td>
<td></td>
</tr>
</tbody>
</table>

Below the text recommendation is the Rating Area which displays the GLIA items for the selected dimension and an Appraisal Panel for each item. The appraiser selects:

- **Yes**, if the recommendation meets this criterion fully.
- **No**, if the recommendation does not meet this criterion
- **NA**, if the criterion is not applicable to this recommendation (e.g., decidability is not applicable to an imperative recommendation)
- **?**, the rater is unable to address this question because of insufficient knowledge or experience

**Reset**, to remove a rating.

In addition, a text box allows entry of comments or a flag to indicate your desire to discuss the item. Users should enter the reason why a No or ? appraisal is selected.

Below the rating area is a navigation panel. From here, it is possible to:

- Return to the main menu (appraisal matrix) and assure that your ratings are recorded
- Move to the next recommendation to assess the same GLIA dimension, or
- Move on to the next GLIA dimension for the same recommendation.

Note: Selected scores are only recorded in the database when the user navigates using this navigation panel (i.e., using the browser’s Back and Forward arrows does not record the selection.)
MONITORING THE APPRAISAL PROCESS

From the appraiser logon, the team leader can monitor the progress of the appraisal process by team members by selecting the Prepare GLIA report option.

The Prepare Report Matrix shows the Recommendations vertically and the GLIA dimensions horizontally. The content of each cell at outset is a red pin (indicating no one has appraised the recommendation, the number 0 indicating the number of appraisers, and a gray background indicating that a final report has not been prepared.

The pin color changes to blue if any appraiser scores an item as “No” or “?” or adds comments to indicate that the dimension requires discussion. The pin color becomes green if all appraisers rate the items as “Yes” or “N/A”, indicating no further discussion is necessary.

Clicking the “edit” button brings up a screen that details the tally of scores for each item and displays the written comments of each of the raters.
The team meets and discusses areas of disagreement that are easily identified by the presence of blue pins. Additionally, expert advice may be obtained to resolve items that have “?” votes. The number of appraisers who have completed the dimension is shown to the left of the pin.

The leader, who is preparing the report, reviews the Tally of votes and makes a final Decision about whether the criterion has been met. Especially in cases where the criterion is failed, the report preparer should indicate why the criterion was failed in the text box. Individual appraisers’ comments are visible and can be retained verbatim or edited.

As the leader makes a final decision about whether the recommendation has met each criterion, the background color changes from gray to red (dimension partly decided) to green (all items in the dimension have been decided).
PREPARING THE FINAL GLIA REPORT

The administrator reviews the votes and comments for each item and after discussion with the team makes a “Decision” as to whether the recommendation meets or fails to meet each criterion. Items decided as “No” are reported as obstacles to implementation in the final report. In addition, the administrator can add select already submitted text or add edited text to “Report to Authors” as part of the final report to illustrate why the recommendation failed the criterion.

It is critical that the Global dimension be rated before the final report is prepared. Once Globals are reviewed, the user can select “Print the final summary of findings.”

The final eGLIA report presents a display of the failed Global criteria followed by a statement of each recommendation, the identified criteria that were not met, and a brief elaboration of specific reasons the appraisers judged the criterion to have been failed.

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<table>
<thead>
<tr>
<th>Individual recommendations</th>
</tr>
</thead>
</table>

**Recommendation 1a: DIFFERENTIAL DIAGNOSIS:** Clinicians should distinguish diffuse AOE from other causes of otalgia, otorrhea, and inflammation of the external ear canal. Recommendation based on observational studies with a preponderance of benefit over risk.

<table>
<thead>
<tr>
<th>Criterion failed / Barrier</th>
<th>Specifics</th>
<th>Suggested Remedy</th>
</tr>
</thead>
<tbody>
<tr>
<td>17)</td>
<td>“distinguishing” is not a measurable process</td>
<td></td>
</tr>
<tr>
<td>21)</td>
<td>Some practitioners may need education about less common causes of otalgia/otorrhea</td>
<td></td>
</tr>
</tbody>
</table>

**Recommendation 1b: MODIFYING FACTORS:** Clinicians should assess the patient with diffuse AOE for factors that modify management (non-intact tympanic membrane, tympanostomy tube, diabetes, immunocompromise). Recommendation based on observational studies with a preponderance of benefit over risk.

<table>
<thead>
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<th>Specifics</th>
<th>Suggested Remedy</th>
</tr>
</thead>
<tbody>
<tr>
<td>9)</td>
<td>The text also adds additional diagnoses (radiotherapy, viral infections, etc) so this statement should reflect these.</td>
<td></td>
</tr>
<tr>
<td>10)</td>
<td>add “and” or “e.g.” in parenthetic phrase</td>
<td></td>
</tr>
</tbody>
</table>

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