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**Welcome to the HelpDesk Answers (HDA) writing project at FPIN! We are excited you have chosen to write an HDA.**

**PLEASE NOTE: It is a requirement for ALL first-time authors to complete the HDA Modules on the** [**FPIN Institute.**](http://www.fpin.org/institute/hda/) **The process of writing an HDA will be much harder if you have not completed these self-guided teaching videos. Please watch the videos and return to this instruction packet when you are ready to begin writing.**

**FPIN HDA GETTING STARTED PACKET**

This packet is meant to help you get started on your HDA project. Please note that **all residents must work with a faculty co-author**. Please review the different sections of this document and select the one that is applicable for where you are in the writing process:

1. Researching the HDA question
2. Critical appraisal
3. Writing an HDA
4. HDA Style and Formatting

**I. Researching the HDA Question**

**1. Best sources of EBM information for HDAs**

1. The **TRIP database** ([www.tripdatabase.com](http://www.tripdatabase.com)). A collection of publications that includes systematic reviews, meta-analyses, key primary research, and guidelines.
2. **FPIN Search (**[www.fpin.org/page/search](http://www.fpin.org/page/search)). A collection of evidence summaries from high-quality sources for primary care:
* PURLs
* Clinical Inquiries
* HelpDesk Answers
1. The **Cochrane Library** ([www.cochranelibrary.org](http://www.cochranelibrary.org))
2. **Clinical Evidence (**[www.clinicalevidence.com](http://www.clinicalevidence.com))
3. If you are not finding enough evidence using the resources above, search Medline (www.pubmed.gov). Before doing so, read HDA document [#107 EBM Search Tips](http://www.fpin.org/wp/wp-content/uploads/2014/08/107-ebm-search-strategies.pdf), prepared by the FPIN Librarians. This document has many ideas on how to use this search engine efficiently.
4. **Break your question into PICO format**:

**P** = population,

**I** = intervention,

**C** = comparison and

**O** = outcome of interest

1. **Search suggestions**
2. Focus on the last 3-5 years of data, although you may go back further if absolutely necessary.
3. Your search should not take more than 2 to 4 hours. If you find yourself putting in more time, you may need help with setting up the search and defining terms accurately.
4. Discuss your search results with your co-author earlier rather than later. Identifying the strongest evidence is your goal. Discussing the evidence helps to formulate a clear answer to your question.
5. HDAs must have 2 to 5 references. If you are finding only one reference, you will need to expand your search or broaden your question. Including a practice guideline to compare and contrast the recommendations with the research study is helpful. If you have more than 5 references, you will need to narrow your question or be more selective in the evidence you report. To request a question change, email abigail@fpin.org.
6. **Here are some tips on refining your literature search:**
	* 1. First start with the most recent systematic review if one is available. Find the last search date of the systematic review in the methods section. Then search Medline from that search date forward for any evidence published after the systematic review.
		2. If you find an older systematic review, include it in your HDA if it contains unique information not included in the more recent systematic review (such as different study inclusion criteria, different populations, different comparisons, different outcome measures, different subgroup analyses, etc.). If the older systematic review does not contain any unique information not included in the more recent systematic review, it may not make sense to include it.
		3. If you find a more recent systematic review published since the last search date of your first systematic review, follow the same process to determine which to include.
		4. Include any RCTs or other studies published since the last search date of the systematic review.
7. **Once you have found the 2 to 5 references for your HDA, identify the type of study for each.**
8. **Complete the** [**HDA Evidence Table**](http://www.fpin.org/wp/wp-content/uploads/2014/08/118.2-hda-evidence-table-for-therapy-studies.pdf)
9. **Assign a Level of Evidence using the 2011** [**Oxford Centre for Evidence-Based Medicine Levels of Evidence table**](http://www.fpin.org/wp/wp-content/uploads/2014/08/108-determining-loes-and-sors.pdf)**.**

**II. Critical appraisal**

1. **Gain a complete understanding of your references. Points to consider for some common study types are listed below.**
2. RCT
	1. Gain understanding of…
		* 1. Patients or Population
			2. Intervention
			3. Comparison
			4. Outcomes
			5. Statistical analysis
		1. Evaluate for potential of bias…
			1. Randomization
			2. Concealed allocation
			3. Blinding
			4. Baseline group differences
			5. Intention-to-treat or per-protocol analysis
3. Systematic Review or Meta-Analysis
	* 1. Gain understanding of…
			1. Type of studies included – study inclusion criteria
			2. Patients, interventions, comparisons, and outcomes of the included studies
			3. Statistical analysis
		2. Evaluate for potential of bias
			1. Literature search
			2. Quality of included studies
			3. Heterogeneity
			4. Publication bias
4. Diagnostic Cohort Study
	* 1. Gain understanding of…
			1. Condition being evaluated
			2. Patients - including prevalence of disease
			3. New testing protocol
			4. Reference standard
			5. Statistical analysis
		2. Evaluate of potential of bias
			1. How were patients chosen?
			2. Is the reference standard appropriate?
			3. Did all patient receive both tests?
			4. Were both tests performed independently?

**III. Writing**

1. HDAs are VERY structured, concise articles that deliver the bottom line and supporting evidence only – no editorializing or personal biases – JUST THE FACTS! In order to become familiar with HDA style, review the following resources:
	* 1. Review several examples of a published [**HDAs**](http://www.fpin.org/wp/wp-content/uploads/2016/05/EBP-May-2016.pdf)
		2. Review the “[**Anatomy of a HelpDesk Answer**](http://www.fpin.org/wp/wp-content/uploads/2016/06/101-Anatomy-of-an-HDA-2.pdf)” resource
2. Once you have reviewed these style resources it is time to begin writing. Begin by following these steps:
3. You will want to start by writing the Evidence Summary. Refer to the **Tacoma Evidence Summary Outline**.
4. Order your Evidence Summary from highest level of evidence to lowest level of evidence. Summarize each reference separately, there should be one paragraph for each reference.
5. Using the information in your Evidence Table, begin by describing the study. Pertinent information to help readers understand the study includes: study type, size of the study, research question of the study, type of patients included, the intervention (including doses for medications), the comparison, and the outcome measures.
6. Give the results of the study including the actual numerical results with statistical analysis so readers can judge the magnitude of effect and know if the results are statistically significant.
7. Discuss any important limitations of the study.
8. Use your Evidence Summary to draft your Evidence-Based Answer. Give the bottom-line conclusions of each reference. Always remember to include a Strength of Recommendation (SOR) with your EBA. Refer to the [Strength of Recommendation Taxonomy (SORT](http://www.fpin.org/wp/wp-content/uploads/2014/08/108-determining-loes-and-sors.pdf)) to help formulate your SOR.
9. List references using [AMA style](http://www.fpin.org/wp/wp-content/uploads/2014/08/109-ama-style-guide-for-citing-references.pdf). References should be ordered by appearance in the Evidence Summary. Include the STEP level of evidence.

**IV. Formatting for HDA Style**

1. Use the HDA Style Sheet resource (below) to go through your draft and make sure that all appropriate style requirements are fulfilled.
2. Refer to the HDA Text Standards document to ensure proper use uniform reporting of numbers and abbreviations.

**HDA Style Sheet**

**The Evidence-Based Answer**

[ ] a. Clinical recommendations in the Evidence-Based Answer section have an SOR A, B or C assigned

[ ] b. The SOR is followed by a brief description of the evidence supporting the SOR. EXAMPLE: (SOR: **B**, single RCT)

[ ] c. The Evidence-Based Answer section does **not** use footnotes

[ ] d. The Evidence-Based Answer section contains only information explicitly discussed in the

Evidence Summary

[ ] e. The sequence of ideas in the Evidence-Based Answer section mirrors the sequence of ideas in the Evidence Summary

**The Evidence Summary**

[ ] f. The Evidence Summary has citations listed as superscript

[ ] g. Descriptions of **ORIGINAL RESEARCH** include:

[ ] i. structure (ex: double-blind RCT, prospective cohort, etc.)

[ ] ii. number of patients

[ ] iii. inclusion criteria (ex: adults with diabetes)

[ ] iv. Intervention/comparison (ex: 40 mg oral simvastatin once daily or placebo)]

[ ] v. outcome (ex: significantly reduced mortality [OR 0.2; 95% CI, 0.1–0.3])

[ ] vi. any major weaknesses not evident from the above information

[ ] i. Descriptions of **SYSTEMATIC REVIEWS AND META-ANALYSES** include:

[ ] i. number of included studies

[ ] ii. total number of patients

[ ] iii. selection criteria for the studies and comment on their quality

[ ] iv. outcomes in consumer friendly statistics (OR, RR, ES, or HR with 95% CI)

[ ] v. analysis of publication bias if available

[ ] vi. any major weaknesses not evident from the above information

[ ] j. All **CLINICAL RATING SCALES** are described in some detail:

[ ] i. Highest and lowest possible values

[ ] ii. The end of the scale that represents normal

[ ] iii. Cut off value used (if applicable)

[ ] k. When discussing **GUIDELINES,** mention how they were developed

[ ] i. Expert panel vs. evidence driven vs. other

[ ] ii. Outline any guideline grading system that may have been used

**Table**

[ ] l. Consider moving complex results and statistical data to a table to shorten and focus the text

[ ] m. The table (and/or all data within the table) are referenced

**References**

[ ] n. Every reference has been assigned a CEBM STEP