Rapid review protocol: Utility of POCTs in ambulatory care

1. Search – Medline only
   1. P – Patients in ambulatory care/primary care
   2. I –POCT for influenza
   3. C—Usual care/not tested
   4. O – any clinical
   5. (((((((near patient) OR point of care)) OR (((test) OR investigation) OR diagnostic\*)))) AND ((((((emergency department) OR primary care) OR general practice) OR ambulatory care) OR walk in centre) OR walk in center)) AND (((influenza) OR flu) OR influenza-like-illness)
2. Inclusion – clinical outcomes of any sort, RCTs, Observational studies.
   1. Duration of illness
   2. Healthcare utilization
      1. Number of visits
      2. Hospitalisation (not A+E attendance)
   3. Antimicrobial prescribing
      1. Antivirals
      2. Antibiotics
      3. Others
   4. Complications
      1. Death
      2. Hospitalisation
      3. AOM
      4. Pneumonia
      5. Sinusitis
      6. Others
3. Exclusions
   1. Diagnostic accuracy only
   2. Non ‘flu test
   3. Non POCT
   4. Non ILI (cough and fever)
   5. Before 2011
   6. <50 participants
   7. Non English
4. Paper identification – single user aided by Eppi-reviewer machine learning
5. Study risk of bias – computer aided – Systematic review assistant
6. Publication bias – funnel plot
7. Analyses
   1. Meta-analyses where heterogeneity permits, RE
   2. Children to be split into <1, 1-4, 5-16
   3. Adults>16
   4. Mixed to be described
   5. By setting analysis if permitted
   6. All complications and specific if data found
   7. By evidence type