Citable papers for sensitive vs. specific definition of

Filled at least one diabetes method – Diagnosis for diab and meds for diab (specific)

Low false positive – Specific – one we are using

Low false negative – Sensitive (OR case)

70 is the number used clinically -- more power also

Starting point was based on definitions

Need to do sensitivity based on control definition (specify the 3 tests)

5 x 10 e-8 threshold (or 5x10e-7) – to make sure we don’t miss SNPs

GWAS – test sensitivity of findings to control definition (or just take those from the first step)

Forest plot – point estimate and CI

Inconsistent VA users – was this proposed approach one in the table

Use Case Control flag from data dictionary – Need a new control definition flag – need to define this in the plan, New definition for sensitivity

Stratified by race: Self report, white and black – HARE – imputed race using PCs and other genotyped—has this been done – can we use this? Age, Sex, PCs

Make sure that the reporting shows what the effect allele is

Has Yan already done PC trimming?

With drugs, with other lookup traits, or comorbidities, A1c – 3 levels, age at diagnosis